

September 17, 2025

Heather Kelm, Port Boys Group Homes
1406 Laurel St
Brainerd, MN 56401

Re: February 2025 Bi-ennial Inspection follow-up visit

The Minnesota Department of Corrections (DOC) completed an unannounced inspection at Port Boys Home August 18-20, 2025. The inspection was completed as a means of follow-up from the February 2025 inspection. Additional concerns have arisen due to the number of calls to Brainerd Police Department (Brainerd Police Department has 31 incidents from this facility 05/02/2025-07/25/2025). Additionally there have been 16 Critical Incidents and 5 Complaints reported into the MN DOC Portal from 05/02/2025-08/07/2025. Port Boys Group Home is being placed on annual inspection for the next inspection cycle.

The following determinations were made based on the visit:

1	<p><u>Standard:</u> 2960.0570 Subpart 3 F. <i>When residents are not under direct supervision, conducting well-being checks at least once every 30 minutes, as direct supervision and well-being checks are defined under part 2960.0720, subpart 3;</i></p>
	<p><u>Violation:</u> Camera reviews of well-being checks revealed the following:</p> <ul style="list-style-type: none"> • 08/06/2025 the 6:15pm well-being check was completed late • 08/11/2025 the 12:41am, 1:07am, and 1:38 well-being checks were noncompliant; two well-being checks were completed late and all three well-being checks were completed at too fast of pace to adequately check the well-being of the resident. • 08/12/2025 the 11:22am and the 12:23pm well-being checks were completed late.
	<p><u>Corrective Action:</u> This is a repeat violation. The facility was cited in February 2025. At that time, the facility was ordered to retrain all staff on the requirements of well-being checks and submit the training documentation to MN DOC.</p> <p>Within 30 days of receipt of this letter, the license holder must submit a written plan that identifies how the facility is addressing the lack of non-compliance with staff and failure to complete adequate well-being checks. The plan must include how the facility is self-auditing for well-being check compliance, including the person(s) responsible for self-audits, as well as the frequency and documentation of the findings of the audits. The self-monitoring plan must detail the sample size and frequency of the oversight. The results</p>

	must be submitted to the DOC a minimum of monthly for the next six months. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.
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	<p>Standard: <i>MN Rule 2960.0560 Subpart 4 A. Initial staff orientation training. A staff person who provides correctional program services must complete orientation training related to the specific job functions for which the staff person was hired and the needs of the residents the person is serving. During the first 45 calendar days of employment, and before assuming sole responsibility for care of residents, staff who provide correctional program services must complete training in the topics in subitems (1) to (7): (1) the license holder's policies and procedures related to correctional program services; (2) resident rights; (3) emergency procedures; (4) policies and procedures on approved restrictive procedures, strip searches, and resident-assisted searches; (5) rules of conduct and policies and procedures related to resident behavior; (6) emergency and crisis services; and (7) problems and needs of residents and their families.</i></p>
2	<p>Violation: Four of four personnel files reviewed did not contain documentation of the required orientation. All of the files reviewed were individuals that were hired following the February 2025 inspection.</p>
	<p>Corrective Action: Within 30 days of receipt of this letter the license holder must submit a training plan that outlines how the facility will ensure new employees receive orientation and training that demonstrates compliance. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>

3	<p>Standard: <i>MN Rule 2960.0070 Subpart 5. A, B, C. 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. A. The license holder must ensure that the screenings in subitems (1) to (6) are completed if not completed prior to admission. The form used for screening in subitems (1) to (6) must be reviewed by a licensed professional in a related field. (1) The health screening must note the resident's history of abuse and vulnerability to abuse, potential for self-injury, current medications, and most recent physician's and clinic's name, address, and telephone number. (2) The mental health screening must be administered. (3) The education screening must be administered according to Minnesota Statutes, section 125A.52. (4) The substance use disorder screening must be administered. The license holder will provide or contact the resident's case manager, if applicable, to arrange a screening to determine if the resident is a chemical abuser. (5) The screening for sexually abusive behavior must determine if a resident is likely to have sexually abusive behavior. If the screening indicates that the resident is likely to have sexually abusive behavior, the license holder must have written risk management plans to protect the resident, other residents, staff, and the community. (6) The vulnerability assessment must determine whether the resident may be vulnerable to abuse. B. The license holder must make an effort to determine the resident's culture and gender-based needs. (1) Cultural screening must include relevant information about the resident's cultural background that will help the license holder respond to the</i></p>
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resident's cultural needs. (2) Gender-specific needs screening must identify the psychosocial needs of the resident and identify the resident's needs regarding the gender of the staff. C. The license holder must screen or arrange to have a resident screened according to the timelines in subitems (1) to (3). (1) The health screening in item A, subitem (1), must occur within 24 hours of admission. (2) The other screenings in item A, subitems (2) to (6), must begin within three working days of admission, and be completed within six working days of admission. (3) The resident need not be screened if a screening or assessment completed within the last six months is already on file. If there is reason to believe that the resident's condition has changed since the last screening or assessment, a new screening must be completed. If the resident is transferred from another facility, the sending facility's records about the resident must be immediately requested by the receiving facility. The requirements in this item do not apply to residents on detention status for less than six working days in a detention facility. C. The license holder must screen or arrange to have a resident screened according to the timelines in subitems (1) to (3). (1) The health screening in item A, subitem (1), must occur within 24 hours of admission. (2) The other screenings in item A, subitems(2) to (6), must begin within three working days of admission, and be completed within six working days of admission. (3) The resident need not be screened if a screening or assessment completed within the last six months is already on file. If there is reason to believe that the resident's condition has changed since the last screening or assessment, a new screening must be completed. If the resident is transferred from another facility, the sending facility's records about the resident must be immediately requested by the receiving facility. The requirements in this item do not apply to residents on detention status for less than six working days in a detention facility.

Violation:

Resident 1's file identified the following:

- The health screen was not completed;
- The screening for sexually abusive behavior was not completed;
- The vulnerability assessment was not completed;
- The cultural screen was not completed;
- The POSIT was not completed within the required timeframe; and
- The education screen was contained in the file however it was not completed.

Resident 2's file identified the following:

- The health screen was contained in the file however it did not contain all the required information and it was completed late.

Resident 3's file identified the following:

- The health screen was contained in the file however it did not contain all the required information and it was completed late.
- The mental health screen was completed late.
- The education screen was not completed.
- The substance use disorder screening was completed late.
- The screening for sexually abusive behavior was completed late.
- The vulnerability assessment was completed late.

	<ul style="list-style-type: none"> • The cultural screening was completed late. • The gender-specific needs screening was completed late. <p><u>Corrective Action:</u> This is a repeat violation. The facility was cited in February 2025. At that time, the facility was ordered to comply with all 2960 standards regarding resident screening requirements.</p> <p>Within 30 days of receipt of this letter, the license holder must submit a plan to DOC that demonstrates how the facility will ensure compliance with requirements governing resident screenings. It is recommended that the license holder's plan encompasses a self-audit component to ensure resident admission screenings are in compliance. This will be monitored on an ongoing basis, with both announced and unannounced visits.</p>
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4	<p><u>Standard:</u> MN Rule 2960.0080 Subpart 3 B. <i>Identify and share information about the resident's treatment and major treatment outcomes the resident will achieve while in the facility, including attaining developmentally appropriate life skills that the resident needs to have in order to be functional in a family and in the community, with persons who are directly involved in the resident's treatment plan in accordance with the resident's case plan.</i></p> <p><u>Violation:</u> Two of two resident files reviewed did not contain documentation meeting the requirements of 2960.0080 Subpart 3 B.</p> <p><u>Corrective Action:</u> Immediately and on an ongoing basis the license holder must meet the Rule part regarding transition plans and case plans. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>
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5	<p><u>Standard:</u></p> <ul style="list-style-type: none"> • MN Rule 2960.0050 Subpart 3 A, B. <i>A. The license holder must give the resident a written copy of the resident's basic rights information and explain to the resident in a language that the resident can understand, if the resident is incapable of understanding the written basic rights documents, information about the resident's rights related to the resident's care in the licensed facility within 24 hours of admission. B. The license holder must tell the resident's parent, guardian, or custodian within a reasonable time after admission to the facility that the information in item A is available.</i> • MN Rule 2960.0080 Subpart 4 FACILITY RULES AND DUE PROCESS SYSTEM FOR RESIDENTS. <i>The license holder must communicate verbally and in writing to a resident who is capable of understanding the facility's rules and the details of the due process system used in the facility. The rules must address the following topics: A. which behaviors are considered acceptable and unacceptable and the reasons why; B. the consequences that will be applied in recognizing and rewarding acceptable behavior and modifying unacceptable behavior; C. the circumstances, if any, that will result in time-out or the use of a restrictive procedure; D. the due process system that governs the facility's use of disciplinary consequences; and E.</i>
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	<p><i>the relationship of the resident's individualized education program discipline recommendations, if any, to the facility's discipline plan.</i></p> <ul style="list-style-type: none"> MN Rule 2960.0160 Subpart 4 INFORMATION TO RESIDENTS. <i>The license holder must give residents the information in items A to C. A. Copies of facility rules must be made available to all residents who can read at the time of admission. The facility rules must include: (1) rules governing conduct, disciplinary consequences, and appeal procedures; (2) procedures for obtaining hygiene and other personal items; and (3) policies and procedures governing visiting, correspondence, bathing, laundry, grievances, clothing, bedding exchange, and other operational procedures. B. Each resident, within 24 hours of admission, must be provided with a copy of a description of the applicable programs and activities available to residents in the facility. C. Rules and program information must be read to those residents incapable of understanding written documents or who are unable to read. The license holder must consider the languages the resident understands and the resident's age and ability when presenting information to the resident.</i>
	<p>Violation:</p> <ul style="list-style-type: none"> Two of three resident files reviewed did not contain documentation that the license holder notified the residents of the resident's rights related to the resident's care in the licensed facility within 24 hours of admission. Additionally, three of three resident files reviewed did not contain documentation that the license holder notified the resident's parent, guardian, or custodian within a reasonable time after admission to the facility that the information in item A is available. Three of three resident files reviewed did not contain documentation that the license holder communicated with the resident verbally and in writing to a resident who is capable of understanding the facility's rules and the details of the due process system used in the facility. Two of three resident files reviewed did not contain documentation that the license holder met any of the requirements of this Rule part and one of three resident files did not contain documentation that the license holder did not meet subpart C requirements of this Rule part.
	<p>Corrective Action: MN Rule 2960.0050 Subpart 3 B is a repeat violation. The facility was cited in February 2025. At that time, the facility was ordered to comply with all 2960 standards related to resident rights and notifications.</p> <p>Within 30 days of receipt of this letter the license hold must submit to a plan to ensure compliance with the forementioned Rule parts. This will be monitored on an ongoing basis, with both announced and unannounced visits.</p>
6	<p>Standard: MN Rule 2960.0550 Subpart 4 B. <i>The certification applicants must offer at least the services in subitems (1) to (4) in their correctional services program: (1) social and interpersonal skills development to achieve the outcomes in units (a) to (d): (a) the</i></p>

	<p><i>resident resolves conflict in an appropriate manner; (b) the resident develops and maintains supportive relationships; (c) the resident communicates and interacts appropriately with peers and adults; and (d) the resident is aware of race and gender bias issues; (2) chemical use and abuse awareness; (3) correctional programming to achieve the outcomes in units (a) and (b): (a) the resident makes reparations for past behavior; and (b) the resident addresses relationships with the resident's family, community, and school; and (4) transition and life skills development to achieve the outcomes in units (a) and (b): (a) the resident practices age appropriate self-care and self-reliance; and (b) the resident is released with a place to live, a plan for constructive daily activity, a means of financial support, and a system to support continued progress in the community.</i></p> <p><u>Violation:</u> The license holder does not offer programming on chemical use and abuse awareness.</p> <p><u>Corrective Action:</u> Immediately and on an ongoing basis the license holder must provide programming that is required by Rule 2960. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>
7	<p><u>Standard:</u> MN Rule 2960.0550 Subpart 4 D (2). <i>The license holder must implement a plan that provides opportunities for physical exercise and recreational activities for residents. The plan must include at least the following requirements: (2) at least two hours daily of organized and supervised physical exercise and recreational activities and leisure time activities for residents, excluding time spent watching television. Organized and supervised physical exercise and recreational activities include preplanned exercise or activities that are supervised and directed by qualified or trained staff;</i></p> <p><u>Violation:</u> The license holder's daily schedule has two, 50-minute recreations times identified, therefore the license holder is 20 minutes short of the required recreation time daily.</p> <p><u>Corrective Action:</u> Immediately and on an ongoing basis the license holder must provide at least two hours daily of organized and supervised physical exercise and recreational activities and leisure time activities for residents, excluding time spent watching television. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>
8	<p><u>Standard:</u> MN Rule 2960.0070 Subpart 3 B. <i>in collaboration with the placing agency, gather information about the resident in subitems (1) to (12), and place that information in the resident's file: (1) date and time of admission; (2) name and nicknames; (3) last known address and permanent address; (4) name, address, and telephone number of parents, guardian, and advocate; (5) gender; (6) date and place of birth; (7) race or cultural heritage, languages the resident speaks and writes, and tribal affiliation, if any; (8) description of presenting problems, including medical problems, circumstances leading to admission, mental health concerns, safety concerns including assaultive behavior, and victimization concerns; (9) description of assets and strengths of the resident and, if available, related information from the resident, resident's family, and concerned persons in the resident's life; (10) name, address, and telephone number of the contact person for</i></p>

	<i>the last educational program the resident attended, if applicable; (11) spiritual or religious affiliation of the resident and the resident's family; and (12) the placing agency's case plan goals for the resident, if available.</i>
	<u>Violation:</u> Resident 1's file did not contain documentation requirements of subparts 3, 7, 8, 9, 10, and 11.
	<u>Corrective Action:</u> Immediately and on an ongoing basis the license holder must document what is required by Rule 2960. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.

	<u>Standard:</u> <i>MN Rule 2960.0070 Subpart 4 INVENTORY AND HANDLING OF RESIDENT PROPERTY.</i> <i>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.</i>
9	<u>Violation:</u> Two of three resident files reviewed did not contain an inventory of the resident's personal property.
	<u>Corrective Action:</u> This is a repeat violation. The facility was cited in February 2025. At that time, the facility was ordered to ensure compliance with all 2960 standards regarding the inventory of resident's personal property.
	Within 30 days of receipt of this letter the license holder must submit a plan that will ensure compliance with this Rule part. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.

	<u>Standard:</u> <i>MN Rule 2960.0070 Subpart 5 D.</i> <i>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</i>
	<u>Violation:</u> Three of three resident files reviewed identified the license holder was not inquiring the degree to which the family desires to be involved during the resident's stay at the facility.
10	<u>Corrective Action:</u> Immediately and on an ongoing basis the license holder must complete documented inquiries (including the family's response) 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. This will be monitored on an ongoing basis, with both announced and unannounced visits.

11	<u>Standard:</u> <i>MN Rule 2960.0160 Subpart 2 C.</i> <i>Ability to meet resident needs. Before admission of a resident, the license holder must examine the placement agency's information about the resident and must determine and document whether the program can meet the resident's needs. The license holder must document whether: C. the</i>
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	<p><i>program is able to meet the resident's cultural, emotional, educational, mental health, and physical needs.</i></p> <p><u>Violation:</u> Resident 1's file revealed cultural and physical information was missing.</p> <p><u>Corrective Action:</u> Immediately and on an ongoing basis the license holder must meet the Rule part to ensure the license holder has the ability to meet the residents needs. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>
12	<p><u>Standard:</u> <i>MN Rule 2960.0560 Subpart 3 D.</i> <i>document on a biweekly basis a review of all the program services provided for the resident in the preceding week.</i></p> <p><u>Violation:</u> Two of two resident files reviewed did not contain documentation of biweekly reviews of program services provided.</p> <p><u>Corrective Action:</u> Immediately and on an ongoing basis the license holder must complete a biweekly review of all the program services provided for each resident in the preceding weeks. The license holder is to submit the next two biweekly reviews of each resident to the license holder within 45 days of receipt of this letter. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>
13	<p><u>Standard:</u> <i>MN Rule 2960.0080 Subpart 5 A (8).</i> <i>The license holder must not subject residents to: restrictions on a resident's communications beyond the restrictions specified in the resident's treatment plan or case plan.</i></p> <p><u>Violation:</u> The license holder's level system is restricting residents from having communication with their legal guardian/parent.</p> <p><u>Corrective Action:</u> Immediately and on an ongoing basis the license holder must revise the level system to ensure communication is not restricted to parents or guardians beyond what is identified in the case plan. This is an individualized need and should not be part of a facility wide level/privilege system. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>
14	<p><u>Standard:</u> <i>MN Rule 2960.0050 Subpart 3 E.</i> <i>The license holder must inform residents how to contact the appropriate state-appointed ombudsman and give residents the name, address, and telephone number of the state-appointed ombudsman.</i></p> <p><u>Violation:</u> Three of three resident files reviewed did not contain documentation that residents are receiving the required information.</p> <p><u>Corrective Action:</u> Immediately and on an ongoing basis the licence holder must provide the residents with the name, address, and telephone number of the state-appointed ombudsman. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>
15	<p><u>Standard:</u> <i>MN Rule 2960.0080 Subpart 11 D (2).</i> <i>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</i></p>

	<i>deny permission, then the medication will be discontinued under the supervision of a physician unless a court order to administer the medication is obtained.</i>
	<u>Violation:</u> Two of four resident files reviewed did not contain documentation of attempts made by the license holder to contact the child's parent or guardian to seek permission for the facility to administer the resident's medication.
	<u>Corrective Action:</u> Immediately and on an ongoing basis the license holder is to contact the child's parent or guardian to seek permission for the facility to administer the medication. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits

Thank you,

Stephanie Kantola
Inspector
Inspection and Enforcement
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Minnesota Department of Corrections

Cc: I&E File
Minnesota Department of Corrections Website