

September 17, 2025

Heather Kelm, Port Girls Group Home  
115 N 1st 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 Girls Home August 18-20, 2025. The inspection was completed as a means of follow-up from the February 2025 inspection. Additional concerns have arose due to the number of calls to Brainerd Police Department (Brainerd Police Department has 25 incidents from this facility 05/04/2025-06/30/2025). Additionally there have been 24 Critical Incidents reported into the MN DOC Portal from 05/14/2025-08/15/2025.

The following determinations were made based on the visit:

	<p><b>Standard:</b> <i><b>MN Rule 2960.0570 Subpart 3 F.</b> 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><b>Violation:</b> Camera reviews of well-being checks revealed the following:</p> <ul style="list-style-type: none"> <li>On 08/28/2025 staff completed a well-being check on resident at 7:46am and then at 8:19am.</li> <li>On 08/11/2025 staff completed a well-being check at 2:11am which was 27 minutes late.</li> </ul>
1	<p><b>Corrective Action:</b> <b>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.</b></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 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.</p>
2	<p><b>Standard:</b> <i><b>MN Rule 2960.0560 Subpart 4 A.</b> Initial staff orientation training. A staff person who provides correctional program services must complete orientation training</i></p>

	<p><i>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>
	<p><u>Violation:</u> 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><u>Corrective Action:</u> <b>This is a repeat violation. The facility was cited in February 2025. At that time, the facility was ordered to ensure all required trainings were in compliance with MN Rule 2960 and have a plan utilized to help ensure compliance.</b></p> <p>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><u>Standard:</u> <b>MN Rule 2960.0070 Subpart 5 C.</b> <i>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.</i></p> <p><u>Violation:</u> The following screens were not documented as being completed or incomplete:</p> <p>Resident 1's file:</p> <ul style="list-style-type: none"> <li>• The health screen;</li> <li>• The education screen was completed by the referring agency on 04/16/2025, however the resident was admitted on 05/06/2025, and not verified by staff at the facility;</li> <li>• The screening for sexually abusive behavior; and</li> <li>• The vulnerability assessment.</li> </ul> <p>Resident 2's file:</p> <ul style="list-style-type: none"> <li>• The health screen; and</li> <li>• The education screen was not dated, therefore it could not be determined when it was completed; and was completed by the referring agency and not verified by staff at the facility.</li> </ul> <p>Resident 3's file:</p> <ul style="list-style-type: none"> <li>• The health screen was not dated and did not contain required information;</li> <li>• The education screen was not dated;</li> </ul>

	<ul style="list-style-type: none"> <li>• The screening for sexually abusive behavior was completed late, and did not contain all required information;</li> <li>• The vulnerability screen did not contain all required information; and</li> <li>• The cultural screen was completed late.</li> </ul>
	<p><b><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.</b></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>

4	<ul style="list-style-type: none"> <li>• <b><u>Standard:</u> MN Rule 2960.0050 Subpart 3 A, B.</b> A. <i>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.</i> B. <i>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></li> <li>• <b>MN Rule 2960.0080 Subpart 4 FACILITY RULES AND DUE PROCESS SYSTEM FOR RESIDENTS.</b> <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. the relationship of the resident's individualized education program discipline recommendations, if any, to the facility's discipline plan.</i></li> <li>• <b>MN Rule 2960.0160 Subpart 4 INFORMATION TO RESIDENTS.</b> <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</i></li> </ul>
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	<p><i>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>
	<p><b><u>Violation:</u></b></p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• Three of three resident files reviewed did not contain documentation the license holder communicated 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 at the facility.</li> <li>• Three of three resident files reviewed did not contain documentation that the facility provided the information required (copy of facility rules, copy of a description of applicable programs and activities available to residents, and rules must be read to those residents to the residents that this is applicable to) and in the timeline required (within 24 hours of admission a copy of a description of applicable programs and activities must be given to residents).</li> </ul>
	<p><b><u>Corrective Action:</u> 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.</b></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>
5	<p><b><u>Standard:</u> MN Rule 2960.0070 Subpart 5 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</b></p> <p><b><u>Violation:</u></b> 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.</p> <p><b><u>Corrective Action:</u></b> 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.</p>

6	<u>Standard:</u> <b>MN Rule 2960.0080 Subpart 5 A (8).</b> <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>
	<u>Violation:</u> The license holder's level system is restricting residents from having communication with their legal guardian/parent.
	<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.

7	<u>Standard:</u> <b>MN Rule 2960.0550 Subpart 4 B.</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 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>
	<u>Violation:</u> The license holder's does not offer programming on chemical use and abuse awareness.
	<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.

8	<u>Standard:</u> <b>MN Rule 2960.0550 Subpart 4 D (2).</b> <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>
	<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.
	<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.
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	<u>Standard:</u> <b>MN Rule 2960.0560 Subpart 3 D.</b> <i>Document on a biweekly basis a review of all the program services provided for the resident in the preceding week.</i>
	<u>Violation:</u> Two of two resident files reviewed did not contain documentation of biweekly reviews of program services provided.
9	<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.

	<u>Standard:</u> <b>MN Rule 2960.0050 Subpart 3 E.</b> <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>
10	<u>Violation:</u> Three of three resident files reviewed did not contain documentation that residents are receiving the required information.
	<u>Corrective Action:</u> Immediately and on an ongoing basis the license 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.

	<u>Standard:</u> <b>MN Rule 2960.0080 Subpart 11 D (2).</b> <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 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>
11	<u>Violation:</u> Resident 1's file did not identify 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.

12	<u>Standard:</u> <b>MN Rule 2960.0160 Subpart 2.</b> <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: A. the resident is a danger to the resident's self or others; B. the relevant screening and assessment of the resident was completed; C. the program is able to meet the resident's cultural, emotional, educational, mental health, and physical needs; D. the resident is a</i>
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	<p><i>sex offender. The license holder must take special precautions when a resident is considered likely to engage in sexually abusive behavior. The license holder must assess the resident to determine which precautions may be appropriate, such as to give the resident an individual sleeping room, and direct staff to pay special attention to the resident's interactions with others. The license holder's care for a resident likely to engage in sexually abusive behavior must protect the resident, other residents, staff, and the community. The license holder must consider the vulnerability of other residents in the facility when caring for a sex offender; and E. the resident has a substance use disorder. If the resident requires a chemical use assessment, the chemical use assessment must be conducted by an alcohol and drug counselor licensed according to Minnesota Statutes, chapter 148C, or an assessor, as defined in part 9530.6605, subpart 4. Information obtained in the chemical use assessment must be recorded in the resident's record and must include the information required in part 9530.6620, subpart 1. The chemical use assessment must address the resident's: (1) acute intoxication/withdrawal potential; (2) biomedical conditions and complications; (3) emotional, behavioral, and cognitive conditions and complications; (4) readiness for change; (5) relapse, continued use, and continued problem potential; (6) recovery environment; and (7) need for additional support services, such as transportation or resident care, in order to participate in the program. A summary of the assessment results must be written by a chemical dependency counselor or assessor, indicating whether the needs identified in the assessment can be addressed by the license holder while the resident participates in the license holder's program, or whether the resident must be referred to an appropriate treatment setting. The summary must be written according to subitems (1) to (7)</i></p>
	<p><b><u>Violation:</u></b> Four of four resident files reviewed did not contain the license holder's documentation of the required information.</p>
	<p><b><u>Corrective Action:</u></b> 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>

13	<p><b><u>Standard:</u></b> <b><i>MN Rule 2960.0180 Subpart 2 B.</i></b> <i>Each resident must have a treatment plan. (1) The license holder must begin to develop a treatment plan within ten days of admission. If the resident's case plan or screening or assessment results indicates that the needs of the resident cannot be met by the license holder, the license holder must document contact with the placement agency and notify the placement agency of the results of the screening or assessment and tell the placement agency that the program is not able to meet the resident's needs. (2) The license holder must review the resident's case and treatment plans on a monthly basis or, if necessary, more often and recommend changes, if appropriate. (3) The license holder must document the involvement of community treatment, education, and care resources related to the case plan or treatment plan. (4) The license holder must assign every resident to a designated staff person to ensure regular face-to-face contact and to monitor and assist the resident to implement the treatment plan. (5) The license holder must make individualized written progress reports available to the resident's parent or legal guardian upon request. (6)</i></p>
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	<p><i>The license holder must forward written educational progress reports to the resident's school district of residence, if it is likely that the resident will return to the resident's district of residence, unless prohibited by law.</i></p>
	<p><u>Violation:</u></p> <ul style="list-style-type: none"> <li>• All residents treatment plans are the same, which does not allow for individualized goals and objectives based on individualized assessments of need.</li> <li>• Written progress reports are based on behavior and not goals, which makes it hard to discern individual progress as all the goals are the same for residents.</li> </ul>
	<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>
14	<p><u>Standard:</u> <b><i>MN Rule 2960.0140 Subpart 2. Treatment plan compliance.</i></b> <i>Following the resident's discharge, the license holder must document the extent to which the resident's stay in the facility met the goals and objectives identified in the resident's treatment plan. Documentation must include at least: A. the services identified in the resident's treatment plan that were provided to the resident directly by the license holder and the services that were provided by a provider other than the license holder; and B. the extent to which the services provided to the resident contributed to achieving the goals and objectives identified in the resident's treatment plan.</i></p>
	<p><u>Violation:</u> Resident 2's file did not contain discharge information meeting the Rule requirements of subparts A and B of this Rule part.</p>
	<p><u>Corrective Action:</u> Immediately and on an ongoing basis the license holder is to meet the requirements of the Rule with resident discharge documentation. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>
15	<p><u>Standard:</u> <b><i>MN Rule 2960.0180 Subpart 3. Records and reports.</i></b> <i>The license holder must have a record retention schedule. The license holder must: A. comply with reporting requirements of Minnesota Statutes, section 253C.01; B. maintain the records in subitems (1) to (13) according to state law: (1) admission and release records; (7) records about which services were provided to each resident, outcomes of treatment for each resident, and outcomes for program services and program evaluation reports;</i></p>
	<p><u>Violation:</u> A number of documents required to be contained in resident files were located during the inspection in a staff office. Staff stated the documents were awaiting to be filed by staff. However, many of the documents did not contain a name or date, so it could not be determined which resident the documents pertained to. Additionally, blank release of information was signed in a client's file.</p>
	<p><u>Corrective Action:</u> Immediately and on an ongoing basis the license holder is to meet the requirements of the Rule with records and reports. This will be monitored on an ongoing basis by DOC, with both announced and unannounced visits.</p>



Thank you,

Stephanie Kantola  
Inspector  
Inspection and Enforcement  
Office of Inspector General  
Minnesota Department of Corrections

Cc: I&E File  
Minnesota Department of Corrections website