



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:

Portland House

Address: 514 Eleventh Avenue, Minneapolis, MN 55414

MN Governing Rule: 2920 Adult Community-Based Residential Correctional Facility

Inspection Type: Biennial **Inspected By:** Jen Pfeifer – Detention Facility Inspector

Inspected on: 11/20/2019

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

Officials Present During Inspection: Case Manager Laurie Woodard; Senior Administrator Karen Kingsley

Officials Present for Exit Interview: Case Manager Laurie Woodard; Senior Administrator Karen Kingsley

Issued Inspection Report to: Senior Administrator Karen Kingsley

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance	Total Compliance With Concerns	Compliance Rating	Substantial Compliance Result/Criteria
2920	Mandatory	23	23	0	0	100.00%	Compliance rating of 100%
2920	Essential	77	75	2	0	97.40%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 12/01/2019 **Ends On:** 11/30/2021 **Facility Type:** Adult Community-Based Residential Correctional Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 11/30/2020

Delinquent Juvenile Hold Approval: no approval **Certificate Holder:** Lutheran Social Services of Minnesota
2485 Como Avenue
St. Paul, MN 55108

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
Adult Community-Based Residential Correctional Facility	Male	25	100	25.00	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2920 - Essential Rules Not In Compliance**Total: 2****1. 2920.5900 SECURITY PROCEDURES.**

Written policies regarding security measures are required and must include: A. that the staff shall maintain a system of accounting for the residents at all times; B. that the facility shall have written procedures for the reporting of absconders; C. that the facility shall notify appropriate probation officers, parole officers, victims, if legally required, and other relevant officials as soon as it has been determined that a resident is missing; D. that the written policy shall prohibit weapons of any kind from being brought into the facility except by peace officers during the course of duties. The facility may have policy regarding the use of chemical agents by trained staff members; and E. a key inventory system for facility and resident keys.

Inspection Findings:

There are policies in place addressing accountability of residence, but the policy is not always being followed. After reviewing resident check sheets it was noted that checks are not being done according to policy. Checks are to be 4 times per shift according to policy and this is not always being completed.

Corrective Actions:

It is recommended that the program manager or designee review checks to ensure compliance. There are three staff on during the day with 17-25 residents in the facility total.

Response Needed By: 01/01/2020**2. 2920.6500 DISASTERS AND EMERGENCIES; PLANS AND PROCEDURES. Subpart 2. Reporting of unusual occurrences.**

Incidents of an unusual or serious nature must be reported within ten days of the incident to the Department of Corrections in a manner required by the department. Incidents of an unusual or serious nature include such incidents as: A. attempted suicide; B. suicide; C. homicide; D. death, by means other than suicide or homicide; E. serious injury or illness incurred subsequent to placement including incidents resulting in hospitalization for medical care or hospitalization associated with mental health needs; F. incidents of fire requiring medical treatment of staff or residents or a response by a local fire authority; G. riot; H. assaults of one resident by another; I. assaults of staff by resident; J. occurrences of infectious diseases and action taken relative to same when a medical authority has determined that the inmate must be isolated from other inmates; and K. sexual misconduct between residents or between staff and a resident.

Inspection Findings:

There have been no unusual occurrences reported to the Department of Corrections since 2013 and it was noted that there have been incidents that require reporting to the Department of Corrections.

Corrective Actions:

Enter all incidents listed in the rule A-K in DOC Portal (S3) for review by the Department of Corrections.

This was noted in the last inspection.

Response Needed By: 03/01/2020

INSPECTION COMMENTS

Laurie Woodard is the new Program Manager at Portland House. It was apparent by the improvements in the overall building and operations that they worked very hard to improve conditions at the facility.

Maintenance:

The overall condition of the facility has improved greatly since the last inspection. The Program Manager will continue to work with LSS and Maintenance to develop ongoing maintenance plans and schedules to ensure that the building continues to be maintained.

Resident checks are not consistent with policy and should be reviewed by administration on a regular basis. A review of the bed check forms showed that checks are at times not being completed and/or not being recorded. It was discussed at the time of the inspection the need to audit checks on a regular basis to ensure compliance. This was noted in the last inspection.

The training plan and training documents were completely revamped since the last inspection. It is recommended that mental health training be added to the training plan for 2020-2021.

Portland House will be placed on biennial inspections.

JJDP A Compliance

N/A

Report completed By: Jen Pfeifer – Detention Facility Inspector

Signature: _____

