



## 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:

#### Red River Valley Juvenile Center

**Address:** 600 Bruce Street, PO BOX 624, Crookston, MN 56716

**MN Governing Rule:** 2960 Children's Residential Facility

**Inspection Type:** Biennial **Inspected By:** Monaie Hebert – Detention Facility Inspector **Inspected on:** 04/26/2021 to 04/28/2021

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

**Officials Present During Inspection:** Program Director Kyle Allen

**Officials Present for Exit Interview:** Community Corrections Director Andrew Larson; Program Director Kyle Allen

**Issued Inspection Report to:** Community Corrections Director Andrew Larson; Program Director Kyle Allen; Regional Manager Jacob McLellan

### RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	316	314	1

### TERMS OF OPERATION

**Authority to Operate:** approval **Begins On:** 05/01/2021 **Ends On:** 04/30/2023 **Facility Type:** Secure Juvenile Detention/Residential Facility

**Placed on Biennial Status:** Yes **Biennial Status Annual Compliance Form Due On:** 04/30/2022

**Delinquent Juvenile Hold Approval:** **Certificate Holder:** Tri-County Community Corrections  
600 Bruce Street, Box 624  
Crookston, MN 56716

**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
Interchangeable non-secure residential/detention	Coed	8	100	8.00	0	0	None.	None.
Interchangeable secure residential/detention	Coed	8	100	8.00	0	0	None.	None.

### RULE COMPLIANCE DETAILS

**Chapter 2960 - Mandatory Rules Not In Compliance****Total: 1****1. 2960.0710 RESTRICTIVE PROCEDURES CERTIFICATION. Subpart 10. Administrative review.**

The license holder must complete an administrative review of the use of a restrictive procedure within three working days after the use of the restrictive procedure. The administrative review must be conducted by someone other than the person who decided to impose the restrictive procedure, or that person's immediate supervisor. The resident or the resident's representative must have an opportunity to present evidence and argument to the reviewer about why the procedure was unwarranted. The record of the administrative review of the use of a restrictive procedure must state whether: A. the required documentation was recorded; B. the restrictive procedure was used in accordance with the treatment plan; C. the rule standards governing the use of restrictive procedures were met; and D. the staff who implemented the restrictive procedure were properly trained.

**Inspection Findings:**

A review of restrictive procedures revealed that for three incidents of disciplinary room time occurring in the first quarter of 2021, there were no documented required administrative reviews. These are the only incidents of DRT usage thus far in 2021. Each was for a major violation and DRT was issued of five hours or less. Of the reviewed items for 2020, there were no missing administrative reviews.

**Corrective Actions:**

**Ensure the administrative reviews are completed per this rule part.**

**Response Needed By: 06/28/2021****Chapter 2960 - Mandatory Rules In Compliance With Concerns****Total: 1****1. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 16. Resident records.**

A license holder must: A. maintain and make available to the commissioner of human services and corrections sufficient documentation to verify that all requirements of the rules governing the care of the resident have been met; B. maintain and make available upon request the resident's records according to the requirements of rule and statute; C. comply with the requirements of the case manager for the release of information about the resident, unless prohibited by law; and D. use forms approved by the commissioner of human services or corrections and collect demographic information about residents and their families and outcome measures about the success of services that meet the requirements of Laws 1995, chapter 226, article 3, section 60, subdivision 2, clause (1)(iii).

**Inspection Findings:**

A review of resident files revealed that one of the non-secure files did not contain appropriate placement documents. There was a court order indicating the county had custody and foster care placement was indicated in that document. There was a referral document signed by the placing agency however, there were no documents indicating non-secure detention was ordered. This document was requested and obtained at the time of the inspection.

**Corrective Actions:**

**Ensure that staff is receiving appropriate placement documentation for a continued stay. There must be a court order or voluntary placement agreement for a resident to remain in custody.**

**Response Needed By:**

**INSPECTION COMMENTS**

The biennial inspection visit was completed on April 26, and data follow up and discussions completed on April 27 & 28, 2021, using Minnesota Rules, Chapter 2960, governing Juvenile Residential Facilities.

This on-site visit consisted of an inspection of the two specific units, main building, school area, staff areas, control room (located at the Tri County Jail), gymnasium, intake area and all living areas of each unit, including resident bathrooms, showers and 16 bedrooms.

The inspection also included discussions with administration and staff members, review of staff and resident files, a review of logs and other pertinent documentation, review of cameras and well-being checks, and a review of the policy and procedure manual.

**Comments:**

1. The facility response to COVID-19 follows CDC guidelines and included hand sanitizer, masks for residents and staff. There have been no outbreaks at this facility and pandemic management has been excellent.
2. The facility has implemented all suggestions from the last inspection to the best of their ability. Improvements include bedroom door sensors, an enhanced egress system placed in non-secure and additional cameras.
3. The facility has minimal use of disciplinary room time, and when used the hours are minimal and residents continue to participate in required activities.
4. Residents interviewed indicated they feel safe and staff treats them respectfully.

**Concerns not noted in formal inspection:**

1. Consider retrofitting handicapped railings with caps in bathrooms and showers in the non-secure unit. Consider removing the partition in the non-secure female bathroom.
2. Consider making grievance forms more readily available to residents by placing near the grievance drop box.
3. Ensure that staff is always performing non-secure resident intakes in a private setting located in area where other residents cannot overhear. Consider a private office or a setting away from the living unit.

This was the first visit and inspection for this inspector. Overall, this inspection went well. Administration appears to prioritize rule compliance, as evidenced by the positive changes and implementation of suggestions made in their last inspection.

Thank you for your transparency and cooperation throughout the inspection process.

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

**JJDPa Compliance****FEDERAL COMPLIANCE MONITORING INFORMATION**

Red River Valley Juvenile Center has 8 secure detention/residential beds (coed) and 8 non-secure detention/residential beds (coed).

Data was reviewed from Oct 1, 2020 to April 07, 2021.

There were no violations identified.

Secure detention is secure. The Non-secure section of the facility allows for free egress and is not secure.

Report completed By: Monaie Hebert – Detention Facility Inspector

Signature: *Monaie Hebert*