



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:

Redwood County Jail

Address: 303 E Third Street, PO BOX 47, Redwood Falls, MN 56283

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Annual **Inspected By:** Lori Schopf – Detention Facility Inspector **Inspected on:** 01/12/2022

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

Officials Present During Inspection: Jail Administrator Matthew Luitjens

Officials Present for Exit Interview: Jail Administrator Matthew Luitjens

Issued Inspection Report to: Jail Administrator Matthew Luitjens; Sheriff Randy Hanson; County Administrator Vicki Knobloch; Regional Manager Dayna Burmeister

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance	Total Compliance With Concerns	Compliance Rating	Substantial Compliance Result/Criteria
2911	Mandatory	126	119	4	3	96.83%	Compliance rating of 100%
2911	Essential	102	98	3	1	97.06%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: conditional approval **Begins On:** 02/01/2022 **Ends On:** 01/31/2023 **Facility Type:** Jail

Placed on Biennial Status: No **Biennial Status Annual Compliance Form Due On:**

Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** Redwood County Sheriff's Office

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
Secure	Coed	21	80	16.80	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance

Total: 4

- 2911.2525 ADMISSIONS. Subpart 3. Orientation to rules and services.

A facility shall develop a written policy and procedure that provides: A. a method for all newly admitted inmates to receive orientation information in a manner the inmates can understand; and B. documentation by a statement that is signed and dated by the inmate that the inmate completed orientation.

Inspection Findings:

There was no documentation that is signed and dated by the inmate that the inmate completed orientation.

Corrective Actions:

This was discussed with the Jail Administrator to create a form for inmates to sign and date saying they have received and completed orientation. Submit the form to the Department by April 30, 2022.

Response Needed By: 04/30/2022

2. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 1. Emergency plan.

A facility shall have a written disaster plan. The plan shall include policies and procedures designed to protect the public by securely detaining inmates who represent a danger to the community or to themselves when the facility must be evacuated in total. The plan shall also include: A. location of alarms and fire fighting equipment; B. an emergency drill policy as follows: (1) at least annual drills at all facility locations; and (2) drills shall be conducted even when evacuation of extremely dangerous inmates may not be included; C. specific assignments and tasks for personnel; D. persons and emergency departments to be notified; E. procedure for evacuation of inmates; and F. arrangements for temporary confinement of inmates.

Inspection Findings:

Facility completed a man down drill in November of 2021, but no documentation of other emergency drills were provided to the inspector. There has been no evacuation drill conducted since 2018.

Corrective Actions:

Conduct an annual emergency evacuation drill to include all staff. During this drill it is recommended to complete a fire drill, and a cut down drill. All drills must include all staff and should be documented for verification purposes. Submit to the Department of Corrections documentation of completed drills by May 31, 2022.

Response Needed By: 05/31/2022

3. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 4. Counting.

A facility shall have a written policy describing the system of counting inmates. Formal counts shall be completed with an official entry made in the daily log at least once each eight hours. The facility shall maintain a system that identifies the whereabouts of all inmates in custody and includes a system of accountability for inmates approved for temporary absences from their assigned housing units. A written policy and procedure shall provide that staff regulate inmate movement.

Inspection Findings:

Formal counts were documented, but while reviewing camera footage there was no formal count completed.

Corrective Actions:

This was not being completed prior to the Jail Administrator taking this roll in June of 2022. Matt Luitjens has recently implemented this for his staff. It is recommended the Jail Administrator audit these along with the well-being check audits to ensure staff are completing these properly.

Response Needed By: 04/30/2022

4. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 5. Well-being.

A facility shall have a system providing for well-being checks of inmates. A written policy and procedure shall provide that all inmates are personally observed by a custody staff person at least once every 30 minutes. Thirty-minute checks should be staggered. If a well-being check does not occur due to an emergency, it must be documented in the jail log and have supervisory review and approval. More frequent observation is required for those inmates of a special need classification who may be harmful to themselves. Examples of inmates of a special need classification include those classified as potentially suicidal, or as mentally ill, or those experiencing withdrawal from drugs or alcohol.

Inspection Findings:

Well-being checks could not be audited properly during this inspection. Staff complete well-being checks through the catwalks, and without the light on you could not view staff looking through the windows.

Corrective Actions:

The Jail Administrator has implemented a system of auditing well-being checks since taking on this role. It is recommended that the facility continue to conduct regular documented audits of well-being checks, but audit the checks with video review to ensure compliance with the rule.

The Department will follow up with the facility to ensure compliance with the rule by July 31, 2022.

Response Needed By: 07/31/2022

Chapter 2911 - Essential Rules Not In Compliance**Total: 3****1. 2911.1200 CLERICAL AND SUPPORT EMPLOYEES WITH REGULAR OR DAILY INMATE CONTACT: TRAINING. Subpart 1. Minimal inmate contact.**

A facility shall have a written policy and procedure that provides that all new clerical and support employees that have minimal inmate contact receive 24 hours of orientation and training during their first year of employment. Sixteen of these hours are completed before being independently assigned to a particular job. Persons in this category are given an additional 16 hours of training each subsequent year of employment.

Inspection Findings:

There was documentation of training hours, however it did not meet the 16 hour requirement.

Corrective Actions:

It is recommended that clerical staff receive training that pertains to the safety and security of the jail. The training should focus on knowing the security procedures and regulations and all emergency procedures for the facility.

Response Needed By:

2. 2911.2850 INMATE DISCIPLINE PLAN. Subpart 3. Due process.

Disciplinary segregation shall be used only in accordance with due process to include at a minimum: A. published rules of conduct and penalties for violation of rules; B. written notice of alleged violation of a rule; C. the right to be heard by an impartial hearing officer and to present evidence in defense: (1) the inmate may waive the hearing in writing; and (2) a written record is made of the disciplinary hearing and sanctions or other actions taken as a result of the hearing; D. the right to appeal; E. the status of an inmate placed on disciplinary segregation for more than 30 continuous days subsequent to a disciplinary hearing shall be reviewed, approved, and documented by the facility administrator or designee at least once every 30 days, and the facility shall develop written policy, procedure, and practice that provides that inmates in disciplinary segregation receive visits from the facility administrator or designee at least once every seven days as a part of the disciplinary segregation review process; F. an inmate placed in segregation for an alleged rule violation shall have a disciplinary hearing within 72 hours of segregation, exclusive of holidays and weekends, unless documented cause can be shown for delays. Examples of causes for delay are inmate requests for delay, or logistical impossibility, as in the case of mass disturbances; and G. the facility administrator or designee can order immediate segregation when it is necessary to protect the inmate or others. This action is reviewed and documented within three working days.

Inspection Findings:

The facility does not have form created for a written record of the hearing findings.

Corrective Actions:

Create a form that allows written record of the disciplinary hearing and sanctions or other actions taken as a result of the hearing. Once created submit to the Department of Corrections by April 30, 2022.

Response Needed By: 04/30/2022

3. 2911.3600 CLOTHING AND BEDDING PROPERTY. Subpart 7. Personal property.

An inmate possessing personal property shall sign and receive a copy of the inventory record.

Inspection Findings:

Inmates are electronically signing off on their property inventory, but not receiving a copy.

Corrective Actions:

Create a process to allow inmates to receive a copy of their property inventory, and submit to the Department of Corrections by April 30, 2022.

Response Needed By: 04/30/2022

Chapter 2911 - Mandatory Rules In Compliance With Concerns

Total: 3

1. 2911.1000 TRAINING PLAN.

A facility administrator or designee shall develop and implement a training plan for the orientation of new employees and volunteers and provide for continuing in-service training programs for all employees and volunteers. Training plans shall be documented and describe curriculum, methods of instruction, and objectives. In-service training plans shall be prepared annually and shall provide documentation indicating that training for individual employees has taken into consideration their length of service, position within the organization, and previous training completed.

Inspection Findings:

The facility has a training plan that incorporates all of the required training, but it does include all elements from the rule.

Corrective Actions:

This was discussed with the Jail Administrator to update the training plan to provide more detail. The plan is to include all training that will be given on a yearly basis, hours for each course, description of curriculum, method of instruction, and objectives. Submit updated training plan to the Department of Corrections by April 30, 2022.

Response Needed By: 04/30/2022

2. 2911.1900 POLICY AND PROCEDURE MANUALS.

A facility shall have a written policy and procedure manual that is electronically available to staff and relevant regulatory authorities and defines the philosophy and method for operating and maintaining the facility. This manual shall be made available to all employees, reviewed annually, updated as needed, and staff trained accordingly. The manual shall include, at a minimum, the following chapters: A. correctional standards required under this chapter; B. administration and organization; C. fiscal management; D. personnel; E. training; F. inmate records; G. safety and emergency; H. security and control; I. sanitation and hygiene; J. food service; K. medical and health care services; L. inmate rules and discipline; M. communication, mail, and visiting; N. admissions, orientation, classification, property control, and release; O. inmate activities, programs, and services; and P. a written suicide prevention and intervention plan. The facility administrator or designee shall review policy and procedure manuals at least once each year. The review shall be documented in written form sufficient to indicate that policies and procedures have been reviewed and amended as appropriate to facility changes.

Inspection Findings:

The facility uses Lexipol for their policy and procedure manual, and progress has been made on the revision of the manual. With the addition of new statutory language added after the close of the legislative session on June 30, 2021, the policy manual will need to be updated to reflect those changes and requirements.

Corrective Actions:

Continue to update manual with changes made to facility procedures. Have staff review the changes to the policy manual, and submit those changes to the Department by July 31, 2022.

Response Needed By:

3. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 2. Quarterly review of emergency procedures.

There shall be a review of emergency procedures once every three months. The review shall include: A. assignment of persons to specific tasks in case of emergency situations; B. instructions in the use of alarm systems and signals; C. systems for notification of appropriate persons outside the facility; D. information on the location and use of emergency equipment in the facility; E. specification of evacuation routes and procedures; and F. that the review be documented and require signature or initialing by all staff.

Inspection Findings:

Quarterly reviews were not documented prior to the last quarter.

Corrective Actions:

The facility has recently implemented this procedure. Submit documentation to the Department by July 31, 2022.

Response Needed By:**Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 1****1. 2911.7400 POLICIES AND PROCEDURES TO DETECT DETERIORATION OF BUILDING AND EQUIPMENT.**

The facility administrator or designee shall have policies and procedures designed to detect building and equipment deterioration, safety hazards, and unsanitary conditions. Policies and procedures shall include requirements that facility staff report unsanitary and unsafe conditions as well as physical plant and equipment repairs and replacement needs; and documentation that appropriate work orders or requests for budget resources to effect needed repair, replacement, or corrections have been made.

Inspection Findings:

During the walk through of the facility it was found that an exterior wall needed repair.

Corrective Actions:

This was discussed at the time of the inspection, and facility will work with maintenance to get this repaired. It was also discussed how to utilize the monthly security inspection as a tool to document physical plant conditions.

Response Needed By:**INSPECTION COMMENTS**

On January 12, 2022, a full inspection was completed at the Redwood County Jail. Matt Luitjens has been the Jail Administrator since June of 2021. Substantial changes have been made since that time towards compliance of Chapter 2911 Rules.

Well-being check compliance could not be confirmed due to staff completing the required checks through the catwalk area of the jail. There is no lighting in this area to enable checks to be reviewed via the camera system. It is strongly recommended that the lights remain on in the catwalk area at night to ensure compliance with these checks or that well-being checks be completed from the day-room area. This was discussed at length at the time of the inspection.

The facility has implemented an audit system for reviewing well-being checks, but it is the recommendation of the inspector that the auditing system include a review of video footage of these checks as well.

There will be a follow up visit with the facility in 6 months to ensure compliance with the deficiencies outlined in this report.

The Redwood County Jail will remain on annual inspections.

JJDPA Compliance

Compliance Report for the monitoring Facilities Pursuant to the Juvenile Justice Delinquency Prevention Act of 2002.

On January 12th, 2022, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Redwood County Jail has received a "Rural Exception" to the Juvenile Justice and Delinquency Prevention Act (JJDP). This allows the facility to hold a delinquent juvenile up to 24 hours, excluding weekends and holiday.

There are three core requirements that are looked at during our facility review. Those core requirements are Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups, and Sight and Sound separation.

According to the DOC Portal System, the Redwood County Jail held or processed 2 juveniles during the federal fiscal year from October 1, 2021 to January 12, 2022. These records have been reviewed in their entirety.

The findings are as follows:

DSO: NO violations.

Jail Removal: NO violations

Sight and Sound Separation: NO violations.

Court Holding: Redwood County does not have a court holding area. Juveniles are brought straight into the courtroom. Juvenile court times are separate from adults.

Based on the documentation reviewed, there were NO violations of the JJDP act identified during the 2022 Redwood County jail inspection.

Report completed By: Lori Schopf – Detention Facility Inspector

Signature:

