



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:

Valley-Lake Boy's Home, Inc.

Address: 3850 200th Avenue, Breckenridge, MN 56520

MN Governing Rule: 2960 Children's Residential Facility

Inspection Type: Biennial **Inspected By:** Marcia Sparrow – Detention Facility Inspector **Inspected on:** 11/15/2023

Inspection Method: This inspection visit consisted of a tour of the home, including the kitchen and dining area, all living units, resident bedrooms and outside areas. The inspection also included discussions with administration and staff members, review of staff and resident files, a review of camera footage, a review of logs and other pertinent documentation, and a review of the policy and procedure manual.

Officials Present During Inspection: Executive Director Joanna Etzler

Officials Present for Exit Interview: Executive Director Joanna Etzler

Issued Inspection Report to: Executive Director Joanna Etzler; Regional Manager Jacob McLellan

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	316	312	4

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 01/01/2024 **Ends On:** 12/31/2025 **Facility Type:** Non-Secure Juvenile Residential Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 12/31/2024

Delinquent Juvenile Hold Approval: **Certificate Holder:** Valley-Lake Boy's Home , Inc.
PO Box 411
Breckenridge, MN 56520

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
Non-secure residential	Male	14	100	14.00	0	0	None.	None.

RULE COMPLIANCE DETAILS

Chapter 2960 - Mandatory Rules Not In Compliance**Total: 4**

1. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 3.A.. Resident admission documentation.

Upon or within five working days after admission, the license holder must obtain and document the information in items A and B to the extent permitted by law: legal authority for resident placement;

Inspection Findings:

Four resident files reviewed showed three of the files did not have proper authority for placement documentation. Although they had letters from the court for court hearings addressed to the provider, the files did not have authority for placement from the court or a placement agreement from the county.

Corrective Actions:

Immediately obtain authority for placement documents or a placement agreement for all current residents which are without documentation and ensure that all incoming residents have authority for placement from the courts or placement agreement documents at the time of admission.

Response Needed By:

2. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 4.A.. Inventory and handling of resident property.

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. The license holder must ensure separation of resident funds from funds of the license holder, the residential program, or program staff.

Inspection Findings:

In review of four resident files, it showed that two of the files had inventory sheets without the resident or staff signatures, and one file did not have the resident signature and only one staff signature.

Corrective Actions:

Immediately ensure that all inventory sheets of residents have both the resident and staff signature, or two staff signatures if the resident did not sign.

Response Needed By:

3. 2960.0180 FACILITY OPERATIONAL SERVICE POLICIES AND PRACTICES. Subpart 2.B.1.. Facility programs.

The license holder must prepare written program descriptions and policies and procedures that implement the program described. Measurable program outcomes must also be identified. B. Each resident must have a treatment plan. (1) The license holder must begin to develop a treatment plan within ten days of admission.

Inspection Findings:

Four resident files were reviewed with one showing the development of treatment plans beginning after the tenth day of admission; two files showed plans of developing a treatment plan without a start date, so unknown when the treatment plan development began; and one file, being a recent admission, showed no treatment plans in the process of development and the timeline was past the ten days required.

Corrective Actions:

Immediately ensure that all new admissions have a treatment plan being developed within ten days of admission.

Response Needed By:

4. 2960.0190 DISCHARGE AND AFTERCARE. Subpart 1.C.. Discharge.

The license holder must meet requirements of items A and B. C. The license holder must give written notice of the resident's projected discharge date to: (1) the resident; (2) the resident's case manager and parent, if permitted, or legal guardian; (3) the providing school district; and (4) the school district the resident will go to, if known.

Inspection Findings:

One of the four resident files reviewed was of a resident discharged from the facility prior to the inspection. In review of this one file, there was no documentation of a written notice with a projected discharge date sent to the resident and/or the resident's team.

Corrective Actions:

Immediately ensure that all planned resident discharges have written documentation of a projected discharge date sent to the resident and the team as outlined in the rule.

Response Needed By:**INSPECTION COMMENTS**

The Valley-Lake Boy's Home, biennial inspection was completed on November 15, 2023, using Minnesota Rules, Chapter 2960, governing juvenile residential facilities. Sections of the 2960 standards that are applicable to the programs at this facility include: Administrative, Group Residential, Corrections and Restrictive Procedures.

If you have any questions, please contact your inspector at 612-468-2027.

JJDP A Compliance

Valley Lake Boys Home is a nonsecure facility.

Report completed By: Marcia Sparrow – Detention Facility Inspector

Signature:

Marcia Sparrow