



# 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:

### Wadena County Jail

**Address:** 415 S Jefferson, Wadena, MN 56482

**MN Governing Rule:** 2911 Local Adult Detention Facilities

**Inspection Type:** Annual **Inspected By:** Chris Thoma – Detention Facility Inspector **Inspected on:** 10/21/2020

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

**Officials Present During Inspection:** Jail Administrator Bryan Savaloja

**Officials Present for Exit Interview:** Jail Administrator Bryan Savaloja; Sheriff Mike D. Carr

**Issued Inspection Report to:** Jail Administrator Bryan Savaloja; Sheriff Mike D. Carr; County Administrator Ryan Odden; 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	5	2	96.03%	Compliance rating of 100%
2911	Essential	99	96	2	1	97.98%	Compliance rating of 90%

## TERMS OF OPERATION

**Authority to Operate:** conditional approval **Begins On:** 11/01/2020 **Ends On:** 10/31/2021 **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:** Wadena 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	27	85	22.95	Wadena County operates a linear style jail.	None.

## RULE COMPLIANCE DETAILS

### Chapter 2911 - Mandatory Rules Not In Compliance

**Total: 5**

1. 2911.0300 INTENDED USE AND NONCONFORMANCE WITH RULES Subpart 4. Correction of deficiencies.

Sanctions for violation of mandatory rules are as follows. A. For a level one sanction, the facility inspector shall issue a written compliance order to the facility administrator and governing body for correction of deficiencies within a specified time up to 180 days. B. For a level two sanction, the facility inspector shall issue a written compliance order to the facility administrator and governing body that requires submission of a written plan of action inclusive of time lines for correction of any deficiency allowed more than 180 days for correction. The DOC shall grant or deny approval of the action plan in writing within 30 days of receiving the action plan. C. For a level three sanction, when compliance is not achieved within time lines ordered or action plans are not implemented as approved by the DOC, the facility inspector shall submit to the facility administrator and governing body a limited use agreement for review, signature, and return within a specified time. D. For a level four sanction, when compliance with the rules under subpart 5a, item B, cannot be achieved because of serious life-safety and physical plant deficiencies, the commissioner shall specify a duration of time, known as the sunset authorization period, after which the facility will no longer have the authority to operate. E. For a level five sanction, when level one to level four sanctions have not resulted in correction of deficiencies, the commissioner shall exercise restricted use or condemnation authority under subpart 2.

**Inspection Findings:**

Well-being checks were found to be out of compliance on the last 3 inspections.

**Corrective Actions:**

**Facility Administration is hereby notified of non conformance with rule 2911.5000.5. This inspection report shall serve as a written compliance order. In accordance with Rule 2911.0300.4, the DOC Inspection and Enforcement Unit shall review facility well-being checks on or before April 1, 2021 to ensure compliance.**

**Response Needed By: 04/01/2021**

2. 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:**

Staff training files lacked documentation of quarterly reviews of emergency procedures.

**Corrective Actions:**

**Ensure that all quarterly reviews of emergency procedures are documented and include the kitchen and medical staff.**

**Response Needed By: 04/01/2021**

3. 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 were found to be out of compliance. In a brief video review checks were found at 47 minutes and an hour and 16 minutes.

**Corrective Actions:**

**This was discussed in detail at the exit interview. It is recommended that a comprehensive audit process be developed and the use of technology to assist with the timing of well-being checks be looked into. A sample copy of a well-being check audit was given to Administration.**

**Response Needed By: 04/01/2021**

## 4. 2911.5450 DANGEROUS MATERIALS.

A facility shall have a written policy and procedure that specifies that materials dangerous to either security or safety shall be properly secured. Storage and use of flammable, toxic, and caustic materials must be in accordance with all applicable laws and regulations of governing jurisdictions. The policy must cover control and use of tools and culinary and medical equipment.

**Inspection Findings:**

The kitchen has a log to account for knives and other culinary equipment but is not used with consistency. Several gaps were noted during the inspection. An inventory of the lock box, during the inspection, noted a missing pair of pliers.

**Corrective Actions:**

**Ensure that all dangerous culinary equipment is controlled, accounted for, and stored in a lockable location.**

**Response Needed By: 04/01/2021**

## 5. 2911.5550 LOCKS AND KEYS. Subpart 2. Lock policy.

A facility shall have a written policy and procedure that requires that all security perimeter entrances, control center doors, and housing unit doors are kept locked, except when used for admission or exit of employees, inmates, or visitors, and in an emergency. A facility equipped with a sally port shall ensure that only one of the doors of a sally port is opened at any point in time for entry or exit purposes.

**Inspection Findings:**

The kitchen is situated such that it serves as the sallyport of the secure perimeter. The interior door to the kitchen can be opened electronically by staff and the exterior door is unsecured for the kitchen worker to move to and from the pantry area.

**Corrective Actions:**

**The possibility of renovating the kitchen area was discussed during the exit interview. Closing off a hallway and blocking up a door would eliminate the security issue. This is a critical physical plant issue that effects the security of the facility. Serious consideration should be given to remodeling this part of the jail.**

**Response Needed By: 04/01/2021**

**Chapter 2911 - Essential Rules Not In Compliance**

**Total: 2**

## 1. 2911.2600 CLASSIFICATION OF INMATES. Subpart 2. Status change.

The inmate classification plan shall specify criteria and procedures for determining and changing the status of an inmate, including custody, transfers, override functions, and major changes in programs. The plan shall include an appeal process for classification decisions. The use of any override shall be documented.

**Inspection Findings:**

The classification procedure lacks an override provision.

**Corrective Actions:**

**Jail Administration has an informal process for the override of inmate classification. A formal process should be written into the classification procedure to account for overrides.**

**Response Needed By: 04/01/2021**

## 2. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 7. Recreation plan.

The facility administrator or designee shall have a plan providing opportunities for physical exercise and recreational activities for all inmates consistent with the facility's classification and design. Class I facilities are exempt from this requirement. The plan shall include policies and procedures necessary to protect the facility's security and the welfare of inmates. Policy and procedure shall provide: A. inmates with access to recreational opportunities and equipment, including seven hours of physical exercise or recreation outside the cell and adjacent dayroom areas per week; B. recreational opportunities a minimum of five days per week; C. indoor space and equipment for active recreational activities in all Class II to Class VI facilities; D. outdoor recreational space and equipment for outdoor recreational programming in all Class VI facilities. The space and equipment shall be provided in a manner consistent with the facility's security classification; E. passive and active recreation needs and equipment for a variety of inmates consistent with the facility's classification and offenders served. As an example, activity needs of geriatric, disabled, or geriatric and disabled offenders shall be addressed; F. inmates in segregation with a minimum of one hour a day, seven days a week, of exercise outside the inmates' cells, unless security or safety considerations dictate otherwise; and G. discretionary access by inmates on segregation status to the same recreational facilities as other inmates unless security or safety considerations dictate otherwise. When inmates on segregation status are excluded from use of regular recreation facilities, the alternative area for exercise used shall be documented.

**Inspection Findings:**

Programming space is insufficient. There is one small multi-purpose room used for program opportunities, but the space is not adequate for the needs of the facility or the inmate population. There is no area for active recreation. This space is also used for professional visits, medical exams, DOC hearings, and other non-program related activities.

**Corrective Actions:**

**Corrective action is not required at this time, as this is a physical plant limitation. Future construction, expansion, or renovation must include planning to address the lack of recreation space. See physical plant notes in the summary.**

**Response Needed By:****Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 2**

## 1. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 11. Examinations.

Examinations, treatments, and procedures affected by informed consent standards governed by state or federal law shall be observed for inmate care. The informed consent of the parent, guardian, or legal custodian must be obtained when required by law. Where health care treatment must be provided against an inmate's will, it must be provided according to law.

**Inspection Findings:**

Medical examinations are completed in the program area. No appropriate space is available for inmate medical examinations.

**Corrective Actions:**

**No corrective action at this time as this is a physical plant constraint which cannot be addressed without significant remodel or renovation. Future construction or remodel must include a provision for inmate examinations.**

**Response Needed By:**

## 2. 2911.6500 STORAGE. Subpart 2. Refrigeration.

Medication requiring refrigeration shall be refrigerated and secured and the temperature checked daily. There must be separate refrigeration for medications only.

**Inspection Findings:**

The facility is equipped with a dedicated medical refrigerator and the nursing staff logs the temperature when they are in the facility. No checks are logged on weekends when nursing is not in the facility.

**Corrective Actions:**

**Assign a staff member to check and log the medical refrigerator temperature on days when nursing is not available.**

**Response Needed By:**

**Chapter 2911 - Essential Rules In Compliance With Concerns****Total: 1**

1. 2911.0330 APPROVED CAPACITY. Subpart 2. Approved bed capacity.

Approved bed capacity, excluding holding areas and beds designed for disciplinary or administrative segregation purposes, shall be based on the following criteria: A. single occupancy cells shall provide a minimum of 70 square feet of floor space per inmate; B. single occupancy cells or detention rooms in facilities used for detention or confinement of inmates prior to May 15, 1978, shall provide a minimum of 50 square feet of floor space per inmate; C. dormitories shall provide a minimum of 60 square feet of floor space per inmate; and D. double occupancy cells shall provide a minimum of 70 square feet of floor space.

**Inspection Findings:**

The square footage in the minimum-security dorm area is not sufficient for 8 inmates.

**Corrective Actions:**

**The approved capacity of this area shall remain the same as it is used for work release and community release inmates.**

**Response Needed By:**

**INSPECTION COMMENTS****Operations:**

1. It is apparent, Administration takes pride in a clean jail. The facility was found to be very clean and well organized.
2. Well-being checks were discussed in detail during the exit interview. It is recommended that the facility develop a three phase approach to ensuring well-being checks are brought into compliance. 1) establish a training program to ensure staff are aware of expectations; 2) develop an audit process in which each Officer's well-being checks are reviewed; and 3) utilize a progressive disciplinary model when well-being checks are found to not meet the standard. The use of some type of technology to assist staff was also discussed with administration.

**Physical plant:**

1. The deteriorating walls noted in the 2019 inspection are being addressed as was evident by the construction on the exterior of the building base.
2. The current sallyport is undersized. It will not fit an ambulance. The stairs in this area require inmates in need of a wheelchair to be brought into the jail from a different entrance.
2. The property room and program space are undersized and don't meet the needs of the facility.
3. There is no recreation space.
4. The kitchen area is undersized and poorly situated, as it serves as a sallyport for the secure perimeter. Based on the Public Health report dated 9/24/20, there are significant renovations needed to bring the kitchen into compliance.

The National Institute of Corrections has established the life cycle of a jail to be 25 to 30 years. The Wadena County jail has exceeded this time parameter. It is recommended the elected officials of the County give serious consideration to addressing its future incarceration needs.

At this time the Wadena County Jail will remain on annual inspections.

**JJDPA Compliance**

On October 22, 2020 a Juvenile Justice and Delinquency Prevention Act audit of the Wadena County Jail was conducted.

The Wadena 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 (Jail Removal), and Sight and Sound separation.

According to facility records, the Wadena County Jail held or processed 2 juveniles between October 1, 2020 and the day of the inspection.

DSO: I did not find any violations of the facility holding status offenders in the jail. Upon review of the files, indication was that juveniles that were brought into the facility were indeed there for delinquent offenses.

Jail Removal: There were no violation for this core requirement.

Sight and Sound separation: The facility design and policies allow for proper sight and sound separation. This includes the route taken to Court holding. Policies and the court schedule also indicate proper sight and sound separation are maintained.

The facility does not participate in any "Scared straight" programs for any youth that are under public authority.

Based on the documentation provided, no violations of JJDP were found during the inspection.

Report completed By: Chris Thoma – Detention Facility Inspector

Signature:

