



# 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:

### Wadena County Jail

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

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

**Inspection Type:** Biennial **Inspected By:** Justin Roberts – Detention Facility Inspector **Inspected on:** 09/28/2022

**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 Jake McLellan

## 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	121	3	2	97.62%	Compliance rating of 100%
2911	Essential	100	98	1	1	99.00%	Compliance rating of 90%

## TERMS OF OPERATION

**Authority to Operate:** approval **Begins On:** 11/01/2022 **Ends On:** 10/31/2024 **Facility Type:** Jail  
**Placed on Biennial Status:** Yes **Biennial Status Annual Compliance Form Due On:** 10/31/2023  
**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	None.	None.

## RULE COMPLIANCE DETAILS

**Chapter 2911 - Mandatory Rules Not In Compliance****Total: 3****1. 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:**

A review of video was conducted while on-site for the inspection. Three different dates and times were selected, as well as three separate locations within the jail.

In the first location majority of the checks were of good quality and on time, however a check was not completed on time and another check was too fast of a pace to determine signs of life and/or distress.

In the second location all checks were completed on time. However the main issue with the majority of the checks was that they were being completed from the corridor or hallway while the inmate was in their cell. This was discussed with the Jail Administrator and was agreed that staff would no longer conduct well-being checks from the corridor or hallway if inmates are in their cells.

In the final location the majority of the checks were again on time and of good quality. However there were two checks that the officer did, that did not check on all inmates in the unit.

**Corrective Actions:**

**Although relatively small, there was a wide range of issues identified in the review of well-being checks. Because of this the facility must conduct retraining of it's staff as it relates to all aspects of well-being checks. Once this training is completed, documentation that it was completed must be submitted to the DOC for review.**

**Response Needed By: 11/30/2022****2. 2911.5300 SEARCHES, SHAKEDOWNS, AND CONTRABAND CONTROL. Subpart 4. Daily inspections.**

A facility shall be inspected at least daily for contraband, evidence of breaches in security, and inoperable security equipment, and shall document the inspection.

**Inspection Findings:**

The facility is not documenting daily inspections for contraband, evidence of a security breach, and inoperable security equipment.

**Corrective Actions:**

**The facility needs to create a procedure for completing these inspections daily and documenting them. Once that procedure has been created, it must be sent to DOC for review. Additionally, staff must be trained on the new procedure.**

**Response Needed By: 01/31/2023****3. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 8. Health complaints.**

A facility shall develop a written policy and procedure that requires that inmates' health complaints are acted upon daily by health-trained staff, followed by triage and treatment by health care personnel if indicated.

**Inspection Findings:**

During policy review, a policy addressing this rule could not be located.

**Corrective Actions:**

**The facility must review policies and add this rule as required by the rule. Once this is completed, it must be submitted to the DOC for review.**

**Response Needed By: 11/30/2022**

**Chapter 2911 - Essential Rules Not In Compliance****Total: 1**

1. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 1. Post orders and accountability.

There shall be written orders for every security post that are reviewed annually and updated if necessary. A written policy and procedure shall require that personnel read, sign, and date applicable post orders at least annually, or as needed for new posts or revisions. Medium and large facilities with multiple posts may need to conduct these reviews more often.

**Inspection Findings:**

The facility does have post orders, however there is no documentation that they have been reviewed this year as required by the rule. Additionally, there is no documentation that staff have read the post orders for this year as required by the rule.

**Corrective Actions:**

**The facility must review it's post orders and should have documentation acknowledging that they have reviewed the post orders for the year. Additionally, the facility must have all staff read the post orders annually, this also should be documented.**

**Documentation that both issues have been corrected must be submitted to DOC.**

**Response Needed By: 01/31/2023****Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 2**

1. 2911.2525 ADMISSIONS. Subpart 1. Policies and procedures.

A facility shall have written policies and procedures for processing new inmates to the facility to include, at a minimum, the following: A. obtaining and documenting available emergency medical information within two hours of admission; B. verification of court commitment papers or other legal documentation of detention. Verification shall include checking the date of admission, duration of confinement, and specific charges; C. a search of the inmate and the inmate's possessions; D. inventory and storage of the inmate's personal property; E. initial medical screening to include an assessment of the inmate's health status, including any medical or mental health needs; F. telephone calls made by the inmate during the booking and admission process and prior to assignment to other housing areas; G. shower and hair cleansing; H. issue of bedding, clothing, and personal hygiene items according to the rule requirements applicable to the anticipated length of stay of the inmate; I. photographing and fingerprinting including notation of identifying marks or unusual characteristics such as birthmarks or tattoos; J. interviewing to obtain the following identifying data: (1) name and aliases of person; (2) current address, or last known address; (3) health insurance information; (4) gender; (5) age; (6) date of birth; (7) place of birth; (8) race; (9) present or last place of employment; (10) emergency contact including name, relation, address, and telephone number; and (11) additional information concerning special custody requirements or special needs; K. initial classification of the inmate and assignment to a housing unit; L. an assigned booking number; and M. Social Security number, driver's license number, or state identification number, if available.

**Inspection Findings:**

The facility is completing medical and mental health screening, however the approved mental health screening form has been combined with the medical questions. Under Minnesota statute 641.15 Subd. 3a, facilities must use a screening tool approved by the Commissioner of Corrections, the format that the facility is using is not the approved format.

Additionally, while reviewing completed mental health screenings, it was discovered that on one of the screenings staff had checked no to needing a mental health referral. However based on the answers to the questions, the answer should had been yes that the individual needed a mental health referral.

**Corrective Actions:**

**The facility must use one of the two mental health screenings approved by the Commissioner of Corrections. These screenings cannot be altered in any way, can not be combined with other questions, and must include the instructions as part of the screening. The facility must implement one of the approved screenings as outlined by the rule and statute. As of 09/30/2022 the facility has begun using the Brief Mental Health Screening.**

**Response Needed By:**

2. 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:**

The facility currently does inmate orientation on the kiosks located in the housing units. However inmates aren't required to use the kiosks so there may be times where inmates are unaware of the inmate orientation. The rule requires that all newly admitted inmates be provided orientation.

**Corrective Actions:**

**The facility must create an orientation process that includes important information for the inmate to be aware of, the process must also include a signature from the inmate acknowledging that they have read and understood the orientation. It is recommended that this occur at the time of booking, this would assure all inmates are receiving orientation as required by the rule. Once a process has been created, it must be submitted to the DOC for review.**

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

1. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 1. Written plan.

A facility administrator or designee shall have and implement a written plan for the constructive scheduling of inmate time. The plan shall: A. identify programs offered in the facility and when the programs are offered; B. identify persons conducting the program and whether or not the persons are facility staff, external community resources under contract, or volunteers; C. be consistent with established legal rights of inmates, type and status of inmates detained in the facility, and rule requirements associated with the facility's classification; D. provide inmates with the option to refuse to participate in facility programs, except work assignments and programs required by statute or court order; E. when males and females are housed in the same facility, provide comparable opportunities for participation in programs and services; and F. require documentation of programs offered and inmates participating in programs.

**Inspection Findings:**

The facility does have a policy addressing this rule, it is policy 1000. However the policy does not address the elements of the rule as required by the rule. Specifically the policy is missing elements A-F listed in the rule.

**Corrective Actions:**

**The facility must review policy and add the missing elements as required by the rule. Once completed, it must be submitted to the DOC for review.**

**Response Needed By:**

## INSPECTION COMMENTS

### Physical Plant:

The facility is clean and very well maintained, it is clear the facility takes pride in this.

The kitchen is in need of updating and the County is addressing this, new equipment has been ordered and is on-site waiting to be installed. The County is waiting on new flooring to be installed before the new commercial grade equipment can be installed.

The facility's program space is limited but it does appear large enough to meet the needs for programs and for recreation. It is recommended that the facility come up with more activities for the inmates to do for recreation, create a workout program, provide yoga mats and a DVD, calculate the number of laps to equal a mile. Things of that nature to provide more options besides the workout DVDs that are offered.

The National Institute of Corrections has established the life cycle of a jail to be 25 to 30 years. The Wadena County jail is approximately 40 years old and has exceeded this time parameter. It is recommended the elected officials of the County give serious consideration to addressing its future incarceration needs.

### Well-Being Checks:

Wadena County is proactive in their approach to make sure the facility is completing well-being checks on time and they are of good quality. The facility conducts annual well-being check training that all staff are required to attend and monthly audits are conducted by the Jail Administrator. The facility also utilizes Guardian to conduct well-being checks, this allows staff to log information in real time and allows administration to pull reports to determine compliance.

As pointed out in the rule compliance section, there were some issues identified with the well-being reviews conducted on-site. These issues were discussed with the Jail Administrator and corrections are being made, those include retraining staff, relocating Guardian scanning points, and procedures for staff to enter the dayroom to conduct well-being checks if an inmate is in their cell.

### Hardel Sherrell Act:

The facility has implemented the majority of the items that have already gone into law, however they still need to address the following items:

- Use of Force-Prone Restraint and Chock Hold 243.52 Subd. 2
- Duty to Report 243.52 Subd. 3

### Other:

The facility should be commended for their proactive approach to resolving issues. There were a number of issues pointed out during the on-site inspection, those issues were resolved and resolution was provided to the DOC prior to this report being completed. Those issues were relatively small in nature and mainly were areas that the facility either didn't have a policy or where policy fell short of what was required.

Because of the facility's high level of compliance, the facility is being placed on a biennial inspection plan.

**JJDPA Compliance**

On September 28, 2022, a Juvenile Justice and Delinquency Prevention (JJDP) Act Audit was conducted. A review of DOC Portal indicated that seven (7) juveniles were processed in the Wadena County Jail from October 1, 2021, to September 28, 2022. A review of data identified no violations.

DSO: No violations determined of the facility holding status offenders in the jail.

Jail Removal: No violations of the jail removal standard.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation.

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

Based on the documentation reviewed, zero (0) violations of the JJDP Act were identified during the Wadena County Jail inspection.

**Report completed By:** Justin Roberts – Detention Facility Inspector

**Signature:**

