



Facility Inspection Report Issued By The Minnesota Department of Corrections Pursuant to MN Statute 241.021, Subdivision 1

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INSPECTION DETAILS FOR:

Washington County Temporary Holdover Facility

Address: 15015 62nd Street N, PO BOX 3801, Stillwater, MN 55082

MN Governing Rule: 2960 Children's Residential Facility

Inspection Type: Annual **Inspected By:** Stephanie Kantola – Detention Facility Inspector

Inspected on: 09/03/2025 to 09/04/2025

Inspection Method: This was a scheduled biennial onsite inspection of this facility.

Officials Present During Inspection: Administration Roger Heinen; Juvenile Unit Supervisor Rebecca Broome

Officials Present for Exit Interview: Administration Roger Heinen; Juvenile Unit Supervisor Rebecca Broome

Issued Inspection Report to: Administration Roger Heinen; Juvenile Unit Supervisor Rebecca Broome

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	350	335	15

TERMS OF OPERATION

Authority to Operate: **Begins On:** 10/01/2025 **Ends On:** 09/30/2026 **Facility Type:** 8 Day Temporary Holdover Facility

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

Delinquent Juvenile Hold Approval:

Certificate Holder: Washington County
15015 62nd Street N
Stillwater, MN 55082

Special Conditions:

Approved Capacity Details *Operational Capacity is calculated as a percent of Approved Capacity beds.

Bed Type	Gender	Approved Capacity	Effective Date	%Operating Capacity	Operational Capacity	Pre 96 LTSR	Post 96 LTSR	Bed Details	Conditions
Secure 8 day holdover	Coed	5	11/6/2001	100	5.00	0	0	None.	

RULE COMPLIANCE DETAILS

Chapter 2960 - Mandatory Rules Not In Compliance

Total: 15

- 2960.0060 PROGRAM OUTCOMES MEASUREMENT, EVALUATION, AND COMMUNITY INVOLVEMENT. Subpart 3. Program evaluation.

A. The license holder must annually evaluate strengths and weaknesses of the program using at least the performance indicators in subitems (1) to (7): (1) accidents; (2) the use of restrictive procedures; (3) grievances; (4) adverse findings, allegations of maltreatment under Minnesota Statutes, section 626.556, citations, and legal actions against the license holder; (5) results of a resident and family satisfaction survey required in part 2960.0140, subpart 1; (6) information from subparts 1 and 2; and (7) critical incidents. B. The program evaluation in item A must be kept for two licensing periods.

Inspection Findings:

The license holder's annual evaluation did not contain subitem (5), results of a resident and family satisfaction survey required in part 2960.0140, subpart 1.

Corrective Actions:

Within 30 days of receipt of the inspection report license holder is to develop an evaluation that ensures that the requirements of this Rule are met annually and submit the documentation to MN DOC.

Response Needed By: 10/31/2025

2. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 3.B.. 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: in collaboration with the placing agency, gather information about the resident in subitems (1) to (12), and place that information in the resident's file: (1) date and time of admission; (2) name and nicknames; (3) last known address and permanent address; (4) name, address, and telephone number of parents, guardian, and advocate; (5) gender; (6) date and place of birth; (7) race or cultural heritage, languages the resident speaks and writes, and tribal affiliation, if any; (8) description of presenting problems, including medical problems, circumstances leading to admission, mental health concerns, safety concerns including assaultive behavior, and victimization concerns; (9) description of assets and strengths of the resident and, if available, related information from the resident, resident's family, and concerned persons in the resident's life; (10) name, address, and telephone number of the contact person for the last educational program the resident attended, if applicable; (11) spiritual or religious affiliation of the resident and the resident's family; and (12) the placing agency's case plan goals for the resident, if available.

Inspection Findings:

Three of three resident files reviewed did not contain the required information, examples of missing subitems 4, 8, 9, 10, and 11.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet 2960 requirements with all resident admission documentation.

Response Needed By:

3. 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:

Three of three resident files reviewed did not have the required signatures for the property inventory.

Corrective Actions:

Immediately and on an on-going basis, the license holder must comply with all 2960 standards regarding resident inventory of personal property.

Response Needed By:

4. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 5.A.. Resident screening.

A resident admitted to a facility must be appropriately screened by a trained person, using screening instruments approved by the commissioner of human services and corrections. The license holder must ensure that the screenings in subitems (1) to (6) are completed if not completed prior to admission. The form used for screening in subitems (1) to (6) must be reviewed by a licensed professional in a related field.

Inspection Findings:

Three of three resident files reviewed did not meet the requirements of subitems 2960.0070 5 A (1) and (3).

Three of three resident files reviewed contained education screenings and gender-specific screens that did not document the dates of completion. Resident 1's sexually abusive behavior screening and vulnerability assessment did not document the correct dates of completion. Therefore, the resident screenings did not meet requirements of 2960.0070 Subpart 5 C (2), "The license holder must screen or arrange to have a resident screened according to the timelines in subitems (1) to (3). (2) The other screenings in item, subitems (2) to (6), must begin within three working days of admission, and be completed within six working days of admission".

Three of three resident files reviewed did not contain gender-specific needs screenings that met the requirements of 2960 0070 5 B (2) "Gender-specific needs screening must identify the psychosocial needs of the resident and identify the resident's needs regarding the gender of the staff".

Corrective Actions:

Immediately and on an on-going basis, the license holder must comply with all 2960 standards regarding resident screening. This will be monitored on an ongoing basis by MN DOC, with both announced and unannounced reviews.

Response Needed By:

5. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 5.D.. Resident screening.

A resident admitted to a facility must be appropriately screened by a trained person, using screening instruments approved by the commissioner of human services and corrections. D. The screenings must include documented inquiries and the results of the inquiries regarding the degree to which the resident's family desires to be involved during the resident's stay at the facility. The resident and resident's family response must be documented.

Inspection Findings:

Three of three resident files reviewed did not identify the family's or the resident's responses to the degree of the resident's family involvement.

Corrective Actions:

Immediately and on an ongoing basis, the license holder must comply with all 2960 standards regarding documenting the resident's and the resident's family responses to the degree of family involvement during the resident's stay at the facility.

Response Needed By:

6. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 11.D.1.. Health and hygiene services.

The license holder must meet the conditions in items A to F. D. The license holder, in consultation with a medically licensed person, must have a plan for the safe storage and delivery of medicine. The license holder must meet the requirements in subitems (1) to (5). (1) The license holder must contact a newly admitted resident's prescribing medically licensed person to verify the following information regarding prescribed medication: (a) instructions about how the medication must be administered; (b) the symptoms that the medication will alleviate; and (c) the symptoms that would warrant consultation with the physician.

Inspection Findings:

Resident 1's file as well as a discussion with the administrative team revealed that the facility is not meeting rule requirements in subitem (1).

Corrective Actions:

Immediately and on an ongoing basis, the license holder must comply with 2960 standards regarding health and hygiene services.

Response Needed By:

7. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 14.d.. Emergency plan.

The plan must specify responsibilities assumed by the license holder for assisting a resident who requires emergency care or special assistance to a resident in emergencies. The license holder must review the plan with staff and residents at least once every six months.

Inspection Findings:

The license holder was not able to provide documentation that the emergency plan was reviewed with residents at least once every six months.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet 2960 requirements regarding the emergency plan. This will be monitored on an ongoing basis by MN DOC, with both announced and unannounced reviews.

Response Needed By:

8. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 9.D.. Educational services.

The license holder must ensure that educational services are provided to residents according to items A to D, except where not applicable, due to the age of the resident or the resident's short stay in the facility. D. The license holder must provide education about chemical health to the resident who has had a problem related to inappropriate chemical use, but who does not have a sufficient chemical use history to refer to treatment. The education must provide the resident with opportunities to examine the problems associated with inappropriate chemical use.

Inspection Findings:

One of three resident files reviewed contained documentation of substance use with no education provided to the resident with opportunities to examine the problems associated with inappropriate chemical use.

Corrective Actions:

Immediately and on an ongoing basis the license holder must provide education about chemical health to the resident who has had a problem related to inappropriate chemical use, but who does not have a sufficient chemical use history to refer to treatment.

Response Needed By:

9. 2960.0100 PERSONNEL POLICIES. Subpart 3. Orientation and in-service training.

The license holder must provide training for staff that is modified annually to meet the current needs of individual staff persons. The training must be directly related to serving the program's target population and to achieving the program's outcomes.

Inspection Findings:

Three of three personnel files reviewed revealed the files did not meet the orientation and/or in-service trainings requirements of MN Rule 2960.

Corrective Actions:

Within 30 days of receipt of the inspection report, the license holder is to verify that all staff are up to date on all required trainings and the license holder is to send the documented verification to MN DOC. This will be monitored on an ongoing basis by MN DOC, with both announced and unannounced reviews.

Response Needed By: 10/31/2025

10. 2960.0240 PERSONNEL POLICIES. Subpart 4.A.. Personnel training.

The license holder must provide staff training. A. The license holder must develop and implement a training plan for orientation and continuing in service training programs for all employees and volunteers. The plan must enable personnel to improve their knowledge, skills, and abilities and promote awareness and appreciation of, and sensitivity to, the cultural background and needs of the residents served by the facility. The training and development plan must: (1) be documented and be descriptive of the course curriculum, methods of instruction, and objectives of instruction; (2) be reviewed annually and revised according to the facility's assessment of its training needs; and (3) include specific expectations regarding the amount of training time required for personnel in various positions.

Inspection Findings:

Three of three personnel files reviewed revealed the license holder did not have a documented training plan that focused on training requirements for MN Rule 2960.

Corrective Actions:

Within 30 days of receipt of the inspection report the license holder must submit to MN DOC an orientation and in-service training plan that meets MN Rule 2960 requirements for trainings. This will be monitored on an ongoing basis by MN DOC, with both announced and unannounced reviews.

Response Needed By: 10/31/2025

11. 2960.0250 ADMISSION AND RELEASE POLICY AND PROCESS. Subpart 3. Information to residents.

The license holder must make information available to a resident in a language the resident can understand. A. A copy of facility rules must be made available to a resident throughout confinement concerning rules governing conduct, the facility's due process system, and disciplinary consequences; procedures for obtaining personal hygiene and canteen items; and policies governing visiting, correspondence, bathing, laundry, and clothing and bedding exchange. B. The license holder, within 24 hours of admission, must either give a copy to or advise the resident of the facility's rules and activities, the outside resources available, and the addresses and telephone numbers of the state appointed ombudsman. A juvenile admitted into a 24 hour temporary holdover facility must be provided the information at the time of admission. C. Items A and B must be explained to a resident who is unable to read or who has questions about facility rules. D. The license holder must advise the resident upon admission of the resident's legal rights regarding detention or confinement. The resident must be advised of the official charge or legal basis for detention. E. The license holder must notify the parent or legal custodian or guardian of the resident's admission into detention and the address of the facility, unless notice was given by the referring agency.

Inspection Findings:

Three of three resident files reviewed did not contain documentation that the license holder was meeting the requirements of all components of this Rule part with information being communicated to the residents.

Additionally, three of three resident files reviewed did not contain documentation that the license holder was meeting the requirements of MN Rule 2960.0080 Subpart 4: "The license holder must communicate verbally and in writing to a resident who is capable of understanding the facility's rules and the details of the due process system used in the facility. The rules must address the following topics. A. which behaviors are considered acceptable and unacceptable and the reasons why; B. the consequences that will be applied in recognizing and rewarding acceptable behavior and modifying unacceptable behavior; C. the circumstances, if any, that will result in time-out or the use of a restrictive procedure; D. the due process system that governs the facility's use of disciplinary consequences; and E. the relationship of the resident's individualized education program discipline recommendations, if any, to the facility's discipline plan."

Furthermore, three of three resident files reviewed did not contain documentation that the license holder was meeting the requirements of MN Rule 2960.0050 Subparts 3 A and B; "Basic rights information. The license holder must meet the requirements of this subpart. A. The license holder must give the resident a written copy of the resident's basic rights information and explain to the resident in a language that the resident can understand, if the resident is incapable of understanding the written basic rights documents, information about the resident's rights related to the resident's care in the licensed facility within 24 hours of admission. B. The license holder must tell the resident's parent, guardian, or custodian within a reasonable time after admission to the facility that the information in item A is available".

Corrective Actions:

Immediately and on an ongoing basis the license holder must ensure that all the requirements of the Rule regarding communication information to residents and their family are met. This will be monitored on an ongoing basis by MN DOC, with both announced and unannounced reviews.

Response Needed By:

12. 2960.0270 FACILITY OPERATIONAL POLICIES AND PROCEDURE REQUIREMENTS, SERVICES, AND PROGRAMS. Subpart 2. Policies and procedures manual.

License holders must have a policy and procedures manual reviewed by the commissioner of corrections that is readily available to staff. The policy manual must contain policies and procedures for all aspects of the facility's operation. The license holder must ensure that the policies and procedures in the manual safeguard residents' rights and require the provision of basic services to residents.

Inspection Findings:

The license holder's policy and procedure manual was missing many of the required policies and procedures. The specifics about the missing policies were provided to the license holder by MN DOC.

Corrective Actions:

Within 30 days of receipt of this inspection report, the license holder must submit an updated policy and procedure manual for review to the MN DOC that demonstrates compliance.

Response Needed By: 10/31/2025

13. 2960.0270 FACILITY OPERATIONAL POLICIES AND PROCEDURE REQUIREMENTS, SERVICES, AND PROGRAMS. Subpart 8.B.. Exercise and recreation.

Provisions for a minimum of two hours of daily preplanned exercise or activities supervised and directed by trained staff and recreational activities and leisure time activities, excluding time spent watching television;

Inspection Findings:

The license holder did not provide documentation that exercise and recreation consisted of preplanned exercise or activities.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet the requirements of this Rule part.

Response Needed By:

14. 2960.0360 SECURITY POLICIES AND PROCEDURES. Subpart 1. Content of policies and procedures.

A license holder that offers correctional program services must develop security policies and procedures on the following: A. control and recovery of contraband; B. delivery and service procedures; C. prohibition of firearms and other weapons in resident areas and measures to ensure that weapons are inaccessible to residents; D. search procedures, including strip searches and resident-assisted searches; E. escort of residents outside the secured area; and F. , when residents are not under direct supervision, conducting well-being checks at least once every 30 minutes, as direct supervision and well-being checks are defined under part 2960.0720, subpart 3.

Inspection Findings:

A review of the license holder's well-being checks revealed that four of eleven viewed checks were conducted in a manner that did not allow staff to observe for signs of life and to ensure the safety and wellbeing of residents.

Corrective Actions:

Within 30 days of receipt of this inspection report, the license holder must retrain all staff on the requirements of well-being checks and submit the training documentation to MN DOC. This will be monitored on an ongoing basis by MN DOC, with both announced and unannounced reviews.

Response Needed By: 10/31/2025

15. 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:

The license holder did not provide documentation administrative reviews were being completed on restrictive procedures.

Additionally the license holder did not provide documentation of quarterly reviews of restrictive procedures as required in 2960.0710 Subpart 11; "At least quarterly, the license holder must review the patterns of the use of restrictive procedures. The review must be done by the license holder or the facility's advisory committee. The review must consider: A. any patterns or problems indicated by similarities in the time of day, day of the week, duration of the use of a procedure, individuals involved, or other factors associated with the use of restrictive procedures; B. any injuries resulting from the use of restrictive procedures; C. actions needed to correct deficiencies in the program's implementation of restrictive procedures; D. an assessment of opportunities missed to avoid the use of restrictive procedures; and E. proposed actions to be taken to minimize the use of physical holding and seclusion".

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet the Rule requirements for review of restrictive procedures. The license holder must submit to MN DOC the restrictive procedure reviews for the next two quarterly reviews, along with the administrative reviews for all restrictive procedures utilized in the next two quarters. This will be monitored on an ongoing basis by MN DOC, with both announced and unannounced reviews.

Response Needed By: 01/09/2026

INSPECTION COMMENTS

The Washington County Temporary Holdover Facility inspection occurred from September 03-04, 2025, using Minnesota Rule, Chapter 2960, governing juvenile facilities.

This license holder will be placed on an annual inspection for the next inspection cycle.

Due to Washington County Temporary Holdover Facility utilizing chemical irritants, they will be required to add the correctional certification to the license.

JJDPA Compliance

No violations of JJDPA were observed.

Report completed By: Stephanie Kantola – Detention Facility Inspector

Signature: _____