



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:

West Central Regional Juvenile Center

Address: 919 Eighth Avenue N, PO BOX 280, Moorhead, MN 56560

MN Governing Rule: 2960 Children's Residential Facility

Inspection Type: Biennial **Inspected By:** Marcia Sparrow – Detention Facility Inspector **Inspected on:** 03/04/2024 to 03/07/2024

Inspection Method: This inspection consisted of a tour of the facility, interviews with administration, staff, and residents, review of employee and resident files, and a review of other compliance related documentation.

Officials Present During Inspection: Administrative Director James Odonnell; Assistant Administrator Josh Swanson

Officials Present for Exit Interview: Administrative Director James Odonnell; Assistant Administrator Josh Swanson

Issued Inspection Report to: Administrative Director James Odonnell; Assistant Administrator Josh Swanson; 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:** 05/01/2024 **Ends On:** 04/30/2026 **Facility Type:** Secure/Non-Secure Juvenile Residential/Detention Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 04/30/2025

Delinquent Juvenile Hold Approval: **Certificate Holder:** West Central Regional Juvenile Center
919 Eighth Avenue N
Moorhead, MN 56560

Special Conditions:

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
Interchangeable non-secure residential/detention	Coed	25	100	25.00	0	0	None.	
Interchangeable secure residential/detention	Coed	55	100	55.00	6	14	None.	

RULE COMPLIANCE DETAILS

Chapter 2960 - Mandatory Rules Not In Compliance**Total: 4****1. 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:

One of six youth files reviewed showed that the youth did not sign for his/her inventory and a second staff did not sign in place of the youth's signature.

Corrective Actions:

Ensure that youth are signing for his/her inventory or a second staff is signing for the youth.

Response Needed By:**2. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 18.A.4.. Resident and family grievance procedures.**

A. The written grievance procedure must require, at a minimum, that: (4) a person filing a grievance must receive a response within five days.

Inspection Findings:

Grievances reviewed showed three grievances did not have the follow up meeting with the youth dated. It was unknown how many days lapsed from the youth filing to staff conducting a follow up discussion.

Corrective Actions:

Ensure that follow up dates are documented on all grievances filed.

Response Needed By:**3. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 18.B.. Resident and family grievance procedures.**

B. If a grievance is filed, the license holder must document the grievance along with the investigation findings and resulting action taken by the license holder. Information regarding the grievance must be kept on file at the facility for two licensing periods.

Inspection Findings:

Grievances reviewed showed one grievance without documentation of a follow up conducted with the youth.

Corrective Actions:

Ensure that grievances filed are followed up with a meeting with the youth and the follow up documented.

Response Needed By:**4. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 19. Family involvement.**

If family involvement is a goal in a resident's case plan, the license holder must list procedures and program plans which are in accordance with a resident's case plan, that facilitate the involvement of the resident's family or other concerned adult, in the resident's treatment or program activities.

Inspection Findings:

One of six youth files reviewed showed that documentation of parent/guardian involvement was not documented.

Corrective Actions:

Ensure that the parent/guardian wishes for level of involvement is documented in the youth's file.

Response Needed By:

INSPECTION COMMENTS

The West Central Regional Juvenile Center facility biennial inspection was completed on March 4-7, 2024, using Minnesota Rules, Chapter 2960, governing juvenile residential facilities.

This scheduled visit consisted of a physical plant safety and security inspection. The physical plant inspection included intake, resident living areas, resident bedrooms, bathrooms, visiting/meeting/group rooms, recreation areas, kitchen, and classroom areas of the facility.

The inspection also included discussions with direct care staff, nursing staff, administration, residents, and observation of staff interactions with residents. Documentation review included staff personnel and training files, resident files, daily logs, treatment plans, menus, recreation schedules, grievance documentation, well-being checks, policy and procedure manual, and employee and resident handbooks.

If you have any questions regarding this report, please email ie-support.doc@state.mn.us.

JJDPA Compliance

The West Central Regional Juvenile Center was found in compliance with JJDPA requirements.

Secure detention data was reviewed from October 1, 2023 to March 7, 2024. No violations were found in the reviewed documentation of intakes, discharges and resident files.

The nonsecure units have free egress and are nonsecure.

Report completed By: Marcia Sparrow – Detention Facility Inspector

Signature:

