



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:

Winona County Jail

Address: 201 W Third Street, Winona, MN 55987

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Six Months **Inspected By:** Jen Pfeifer – Senior Detention Facility Inspector **Inspected on:** 06/06/2024

Inspection Method: Facility walk-through, staff and inmate interviews, staff and inmate file reviews, facility documentation reviews and video footage review.

Officials Present During Inspection: Jail Administrator Steve Buswell; Sheriff Ron Ganrude

Officials Present for Exit Interview: Jail Administrator Steve Buswell

Issued Inspection Report to: Jail Administrator Steve Buswell; Sheriff Ron Ganrude; County Administrator Maureen Holte; Records Manager Danya 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	128	119	9	0	92.97%	Compliance rating of 100%
2911	Essential	111	106	5	0	95.50%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 07/01/2024 **Ends On:** 12/31/2024 **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:** Winona County Sheriff's Office

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	Bed Details	Conditions
Secure	Coed	74	95	70.30	Designed Capacity 86 Approved Capacity 74 Operational Capacity 95% (70.3 Beds)	

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance**Total: 9**

1. 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:

Orientation is not being completed. There is no process in place or documentation signed and dated by the inmate in a manner in which they understand.

Corrective Actions:

The facility must ensure that all inmates are receiving orientation at intake in a manner that all inmates can understand. The inspector will monitor through on-site visits.

Response Needed By: 07/31/2024

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:

The facility was unable to provide documentation that quarterly emergency procedure reviews were completed.

Corrective Actions:

The facility shall submit verification of completed quarterly emergency procedures reviews to the Department of Corrections until December 31, 2024.

Response Needed By: 12/31/2024

3. 2911.3800 FOOD HANDLING PRACTICES.

Food service shall be provided according to Minnesota Department of Health rules.

Inspection Findings:

The facility was unable to provide documentation that a health inspection was completed within the last 12 months.

Corrective Actions:

The facility shall complete a health inspection and submit it to the Department of Corrections by July 31, 2024.

Response Needed By: 07/31/2024

4. 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:

Multiple dates and times of well-being checks were reviewed via facility video. On May 25, 2024, well-being checks were viewed as too fast a pace to determine the well-being of the inmate. Additionally, on May 25, 2024, well-being checks reviewed at 10:56pm, 11:18, and 11:43pm the officer did not look in the cell to personally observe the inmate.

Corrective Actions:

The facility shall provide well-being check training to all staff. This training shall include the requirements in the rule and the expectation to ensure the well-being of each inmate the officers are responsible for supervising. Submit documentation of training to the Department of Corrections by July 31, 2024.

Response Needed By: 07/31/2024

5. 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:

Daily inspections are not being completed and documented as required.

Corrective Actions:

The facility shall ensure that daily inspections are being completed and recorded. The inspector will monitor for compliance through on-site visits.

Response Needed By: 07/31/2024

6. 2911.5550 LOCKS AND KEYS. Subpart 3. Regular testing.

Locks to security doors or gates shall be tested for proper function at least weekly to ensure proper operation.

Inspection Findings:

Weekly lock inspections are not being completed.

Corrective Actions:

The facility shall submit verification of completed lock inspections to the Department of Corrections on the 30th day of every month beginning July 30th for review.

Response Needed By: 12/31/2024

7. 2911.5800 AVAILABILITY OF MEDICAL AND DENTAL RESOURCES. Subpart 6. Medical screening.

A facility shall have a written policy and procedure that requires medical screening is performed and recorded by trained staff on all inmates on admission to the facility. The findings are to be recorded in a manner approved by the health authority. The screening process shall include procedures relating to: A. Inquiry into: (1) current illness and health problems, including dental emergencies, and other infectious diseases; (2) medication taken and special health requirements; (3) use of alcohol and other drugs that include types of drugs used, mode of use, amounts used, frequency used, date or time of last use, and history of problems that may have occurred after ceasing use, for example, convulsions; (4) past and present treatment or hospitalization for mental illness or attempted suicide; (5) other health problems designated by the health authority; and (6) signs and symptoms of active tuberculosis to include weight loss, night sweats, persistent cough lasting three weeks or longer, coughing up blood, low grade fever, fatigue, chest pain, prior history of active tuberculosis disease, and results of previous tuberculin skin or blood testing. B. Observations of: (1) behavior that includes state of consciousness, mental status, appearance, conduct, tremor, and sweating; and (2) body deformities, trauma markings, body piercings, bruises, lesions, and jaundice. C. Disposition to: (1) general population; (2) general population and referral to appropriate health care service; (3) referral to appropriate health care service on an emergency basis; and (4) other.

Inspection Findings:

The facility medical screen is missing the following elements:

- 1) Medications: follow-up questions need to be added, name, dose, frequency, etc.
- 2) Use of alcohol: type, mode, amount, frequency, date/time of last use, withdrawal history.
- 3) Signs of active TB signs: weight loss, night sweats, persistent cough lasting three weeks or longer, coughing up blood, low grade fever, fatigue, chest pain, prior history of active tuberculosis disease, and results of previous tuberculin skin or blood testing.
- 4) Skin conditions: body deformities, trauma markings, body piercings, bruises, lesions, and jaundice.

Corrective Actions:

The facility shall add the missing elements to the medical screen and submit to the Department of Corrections.

Response Needed By: 07/31/2024

8. 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:

Medication refrigerator logs are not being completed consistently on a daily basis.

Corrective Actions:

The facility must create and implement a plan to document medication refrigeration temperature checks daily. The inspector will monitor through on-site visits to the facility.

Response Needed By: 07/31/2024

9. 2911.7200 HOUSEKEEPING, SANITATION, AND PLANT MAINTENANCE. Subpart 1. General.

A facility shall have a policy and procedure that provides that the facility shall: A. be kept in good repair to protect the health, comfort, safety, and well-being of inmates and staff; B. document weekly sanitation inspections; and C. document deficiencies from the weekly sanitation inspection, if any, have been ordered.

Inspection Findings:

The facility is not completing the required weekly sanitation inspections.

Corrective Actions:

The facility shall submit documentation of completed weekly sanitation inspections on the 30th day of each month beginning July 30, 2024 for review.

Response Needed By: 12/31/2024

Chapter 2911 - Essential Rules Not In Compliance

Total: 5

1. 2911.1300 CUSTODY STAFF TRAINING.

A facility shall have a written policy and procedure that provides that all custody staff receive 120 hours of orientation and training during the first year of employment. Forty of these hours are completed prior to being independently assigned to a particular post. All persons in this category are given an additional 16 hours of training each subsequent year. At a minimum, training completed before independent assignment to a particular post shall include: A. security procedures; B. supervision of inmates; C. signs of suicide risk and suicide precautions; D. vulnerable inmates; E. response to resistance regulations and tactics; F. report writing; G. inmate rules and regulations; H. rights and responsibilities of inmates; I. fire and emergency procedures; J. key control; K. interpersonal relations and communication skills; L. diversity training; M. distribution of medications; N. right to know; and O. blood-borne pathogens and communicable diseases.

Inspection Findings:

The facility has not provided CPR training to all staff.

Corrective Actions:

All staff shall be trained in CPR prior to being independently assigned and those staff whose certification has expired shall work only with those whose certification is current. Submit verification of training to the Department of Corrections by December 31, 2024.

Response Needed By: 12/31/2024

2. 2911.4900 SECURITY INSPECTION.

The facility shall have a written policy and procedure to require the facility administrator or designee to inspect all areas within the security perimeter, and equipment at least monthly and initiate corrective action if needed.

Inspection Findings:

The facility is not completing the required month security inspection.

Corrective Actions:

The facility shall submit completed required monthly security inspections to the Department of Corrections for review on the 30th day of every month beginning July 30, 2024.

Response Needed By: 12/31/2024

3. 2911.4950 RESPONSE TO RESISTANCE. Subpart 4. Equipment.

The issue, storage, inspection, and use of chemical agents, impact devices, electronic control devices, and other security devices shall be governed by written policy and procedure. All unissued security devices and equipment shall be stored in a secure, readily accessible depository located outside inmate housing and activity areas, and inventoried at least monthly to determine condition and expiration dates of the devices and equipment.

Inspection Findings:

Unissued security devices and equipment are not being inventoried monthly. is not being completed.

Corrective Actions:

The facility shall submit completed monthly security equipment inventory to the Department of Corrections for review on the 30th day of each month beginning July 30, 2024.

Response Needed By: 12/31/2024

4. 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:

Post Orders have not been signed by all staff.

Corrective Actions:

Ensure that all staff are reviewing and signing off on post orders annually. Submit verification of signed post orders to the Department of Corrections by July 31, 2024.

Response Needed By: 07/31/2024

5. 2911.7300 FIRE INSPECTION. Subpart 4. Weekly inspection.

There shall be an applicable fire code and safety inspection of the facility at least weekly by a designated staff member.

Inspection Findings:

Weekly fire inspections are not being completed by the facility.

Corrective Actions:

The facility shall submit completed weekly fire inspection on the 30th day of each month beginning July 30th for review.

Response Needed By: 12/31/2024

INSPECTION COMMENTS

The Winona County Jail began operation of the new jail facility on December 12, 2023. A six-month inspection was completed on June 6, 2024.

Medical: The health authority was not present on the day of the inspection. The inspector will complete a follow-up visit to the facility to determine compliance with the required medical standards.

Physical Plant: Significant standing water was found in inmate living areas. This will need to be addressed and a plan to resolve this issue shall be submitted to the Department of Corrections by August 30, 2024.

Training: The facility has not completed CPR training for all staff. It is also recommended that training in the areas of withdrawal, administration of NARCAN, and well-being checks be completed.

The inspector will continue to do on-site visits to ensure compliance with the rule.

JJDPA Compliance

On June 6, 2024, a Juvenile Justice and Delinquency Prevention (JJDP) Act audit was conducted. The Winona County Jail has received a "Rural Exception" to the JJDP Act. This allows the facility to hold a delinquent juvenile up to 24 hours, excluding weekends and holiday. The three core requirements reviewed in the audit 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 Winona County Jail processed one (1) juvenile from the fiscal time allowed for review. 100 percent of the available data was reviewed. The findings are as follows:

DSO: There are no violations.

Jail Removal: Files and DOC Portal data indicate that any juveniles brought into the jail are removed well within the 24- hour time frame allowed per the "Rural Exception."

Sight and Sound Separation: The facility design and policies does not always allow for proper sight and sound separation. During peak times when all holding cells are full, the interview room is the only other option. This room is used frequently so its availability is sometimes in question. The route taken to Court holding is time phased so as not to mix adults and juveniles. 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 reviewed, no violations of the OJJDP Act were determined during the Winona County jail inspection.

Report completed By: Jen Pfeifer – Senior Detention Facility Inspector

Signature: _____

Jennifer Pfeifer