



# 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:

### Goodhue County Jail

**Address:** 430 W Sixth Street, Red Wing, MN 55066

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

**Inspection Type:** Biennial **Inspected By:** Jen Pfeifer – Detention Facility Inspector **Inspected on:** 10/04/2016 to 10/05/2016

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

**Officials Present During Inspection:** Lieutenant Mark Agre

**Officials Present for Exit Interview:** Jail Administrator Brian Coleman; Lieutenant Mark Agre

**Issued Inspection Report to:** Jail Administrator Brian Coleman; Lieutenant Mark Agre; Sheriff Scott McNurlin; 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	123	3	3	97.62%	Compliance rating of 100%
2911	Essential	101	96	5	2	95.05%	Compliance rating of 90%

## TERMS OF OPERATION

**Authority to Operate:** approval **Begins On:** 07/01/2016 **Ends On:** 06/30/2018 **Facility Type:** Jail  
**Placed on Biennial Status:** Yes **Biennial Status Annual Compliance Form Due On:** 06/30/2017  
**Delinquent Juvenile Hold Approval:** no approval **Certificate Holder:** Goodhue 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	156	90	140.40	None.	None.

### Variances

NONE

## RULE COMPLIANCE DETAILS

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

## 1. 2911.1000 TRAINING PLAN.

A facility administrator or designee shall develop and implement a training plan for the orientation of new employees and volunteers and provide for continuing in-service training programs for all employees and volunteers. Training plans shall be documented and describe curriculum, methods of instruction, and objectives. In-service training plans shall be prepared annually and shall provide documentation indicating that training for individual employees has taken into consideration their length of service, position within the organization, and previous training completed.

**Inspection Findings:**

The training plan was completed for the year 2016 however it did not include description of curriculum, methods of instruction, and objectives.

**Corrective Actions:**

**Develop a training plan to include all elements of the rule.**

**Response Needed By: 12/30/2016**

## 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:**

A review of training documentation showed that not all staff members completed at least quarterly reviews of emergency procedures. Many of the trainings were documented in May or June of 2016.

**Corrective Actions:**

**It is recommended that quarterly reviews of policies be done electronically with periodic drills to supplement this training. It is also recommended to have the Red Wing Fire Department come through and tour the facility.**

**Response Needed By: 12/30/2016**

## 3. 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:**

At the time of the inspection, several of the cleaning agents used by inmates were listed as flammable, toxic, or caustic. The tool inventory in the kitchen was not accurate as there were tools in the cabinet that were not listed on the inventory form. The inventory log for the medical sharps on the medical cart was not accurate.

**Corrective Actions:**

**The facility shall find non-toxic alternatives to the chemicals presently being supplied or change the practice in which they are used. Inmates should not have access to dangerous chemicals. The culinary sharps should be locked in an area with no other supplies. Tools were added to the container that were not on the inventory sheet. Having an organized place for tool inventory will make it easier to locate proper tools and detect when something is missing. The medical sharps on the medication cart shall be inventoried daily. Develop a process to ensure accurate inventory of all sharps on the medication cart and train your correctional staff in the new procedure.**

**Response Needed By: 10/21/2016**

**Chapter 2911 - Essential Rules Not In Compliance****Total: 5****1. 2911.1200 CLERICAL AND SUPPORT EMPLOYEES WITH REGULAR OR DAILY INMATE CONTACT: TRAINING. Subpart 2. Regular or daily inmate contact.**

A facility shall have a written policy and procedure that provides that all new clerical and support employees who have regular or daily inmate contact receive 40 hours of orientation and training during their first year of employment. These hours are to be completed before being independently assigned to a particular job. The employees are given an additional 16 hours of training each subsequent year of employment. At a minimum, this training covers the following areas: A. security procedures and regulations; B. rights and responsibilities of inmates; C. all applicable emergency procedures; D. interpersonal relations and communication skills; and E. first aid.

**Inspection Findings:**

Training records for health services and kitchen staff did not show the required amount of training hours or subjects.

**Corrective Actions:**

**Ensure that all support employees receive at least the minimum amount of training hours and subjects listed in this rule part. Forward training records to facility inspector when training is completed. It is recommended that a security training for non-custody staff be developed.**

**Response Needed By:****2. 2911.1400 ADMINISTRATIVE AND MANAGERIAL STAFF TRAINING.**

A facility shall have a written policy and procedure that provides that the facility's administrative and managerial staff receive at least 16 hours of orientation. Orientation training shall include, at a minimum, general management and related subjects, data practices, decision-making processes, labor law, employee-management relations, the interaction of elements of the criminal justice system, and relationships with other service agencies. After orientation, a facility's administrative and managerial staff shall receive at least 16 hours of training annually.

**Inspection Findings:**

No training records for administration were available for review.  
It is clear that training was attended but there was little in the way of documentation.

**Corrective Actions:**

**Ensure that administration training records are documented.**

**Response Needed By:****3. 2911.2800 ADMINISTRATIVE SEGREGATION. Subpart 4. Policy.**

Written policy and procedure shall provide that the status of inmates in administrative segregation is reviewed every seven days. These policies shall provide: A. that the review is documented and placed in the inmate's file; B. that the inmate in administrative segregation receive visits from the facility administrator or designee a minimum of once every seven days as a part of the administrative review process; and C. that the review process that is used to release an inmate from administrative segregation is specified.

**Inspection Findings:**

Administrative segregation reviews are not being completed.

**Corrective Actions:**

**Review the status of inmates on administrative segregation status every seven days and document that review in the inmate's file. As part of that review, the administrator or designee should be visiting a minimum of once every seven days.**

**Response Needed By: 10/21/2016****4. 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:**

Monthly security inspections are not being completed.

**Corrective Actions:**

**Develop and implement a formalized security inspection for all security elements in the facility and perimeter.**

**Response Needed By: 12/30/2016**

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:**

No documentation to show that weekly fire safety inspections are being completed.

**Corrective Actions:**

**Develop and document weekly fire safety inspections and assign staff members to complete this duty.**

**Response Needed By:**

**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 3**

1. 2911.2600 CLASSIFICATION OF INMATES. Subpart 1. Policy and procedure.

A facility shall have a written policy and procedure that provides for inmate classification in terms of level of custody required, housing assignment, participation in facility programs, and use of any overrides. The facility's policy and procedure on classification shall include consideration of the following: A. inmate gender; B. juvenile or adult status; C. category of offense; D. severity of current charges, convictions, or both; E. degree of escape risk; F. potential risk of safety to others and self; G. institutional disciplinary history; H. serious offense history; I. special needs assessment, inclusive of vulnerable adults, which includes a determination of how medical needs, mental health needs, developmental disability, or other behavioral or physical limitations or disabilities may impact on the classification of an inmate and appropriate housing of same; and J. special management inmate status.

**Inspection Findings:**

Some of the classification forms filled out simply stated "medium" with a line drawn through the classification form.

**Corrective Actions:**

**Ensure that staff are completing the classification forms correctly. Classification procedures should be followed for all D.O.C. inmates transferring to Goodhue County.**

**Response Needed By:**

2. 2911.5300 SEARCHES, SHAKEDOWNS, AND CONTRABAND CONTROL. Subpart 1. Contraband control.

A facility shall have a written policy and procedure that provides for searches of facilities, inmates, and inmate property to control contraband and provide for its disposition.

**Inspection Findings:**

There is a policy in place for searches to control contraband but the policy does not match the practice of what the facility actually allows the inmates to have.

**Corrective Actions:**

**It is essential that your policy match your current practice in the jail for items allowed. With the excess of allowable items in the cell it makes for a cumbersome search. Following your policy will allow for less confusion for staff and inmates.**

**Response Needed By:**

## 3. 2911.7200 HOUSEKEEPING, SANITATION, AND PLANT MAINTENANCE. Subpart 2. Maintenance plan.

A written housekeeping plan for all areas of the physical plant shall provide for daily housekeeping and regular maintenance by assigning specific duties and responsibilities. Facility floors are kept clean, dry, and free of hazardous substances. A written policy and procedure shall establish the following requirements: A. weekly sanitation inspections of all institution areas by a designed staff member; and B. there is documentation that deficiencies, if any, have been corrected.

**Inspection Findings:**

Inspections are being completed but the practice appears to be informal. There is nothing indicated on the form as what is being inspected to use for documentation purposes.

**Corrective Actions:**

**Establish a plan for the daily inspection of housekeeping, sanitation and plant maintenance and provide documentation weekly of these inspection.**

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

## 1. 2911.1200 CLERICAL AND SUPPORT EMPLOYEES WITH REGULAR OR DAILY INMATE CONTACT: TRAINING. Subpart 1. Minimal inmate contact.

A facility shall have a written policy and procedure that provides that all new clerical and support employees that have minimal inmate contact receive 24 hours of orientation and training during their first year of employment. Sixteen of these hours are completed before being independently assigned to a particular job. Persons in this category are given an additional 16 hours of training each subsequent year of employment.

**Inspection Findings:**

Verbal verification was done to assure clerical staff had participated in the required number of training, however there was no documentation.

**Corrective Actions:**

**Include clerical in emergency policy review training and document the training as being completed.**

**Response Needed By:**

## 2. 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:**

Reclassification or Overrides were not always documented for inmates whose status changed after prolonged observation.

**Corrective Actions:**

**When changing the classification of an inmate, document the status change and include the reason for such change.**

**Response Needed By:**

**INSPECTION COMMENTS****Physical Plant:**

1) Master control room is in need of updating. Many areas are showing signs of significant wear and tear most notably the counter tops and case work. A plan to renovate this area has already been submitted. (This is a repeat from the 2011,2013 and 2015 on-site inspections.) There is also a need for increased camera coverage most notably in the housing units and gym. An overall plan to address cameras, security electronics and the remodel of the master control room has been developed. It is recommended that these projects continue to move forward in a timely manner.

**Operational Observation/Recommendations:**

1) There was a significant amount of clutter or nuisance contraband found in plain sight in several cells. A plan was discussed at the time of the inspection to address this issue.

**JJDPA Compliance**

On October 5, 2016 a Juvenile Justice and Delinquency Prevention Act audit was conducted. 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. There was no data to review at the time of the inspection.

DSO: I did not find any violations of the facility holding status offenders in the jail.

Jail Removal: There was no data at the time of the inspection.

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 that I reviewed, I did not find any violations of the JJDP act during the Goodhue County inspection.

Report completed By: Jen Pfeifer – Detention Facility Inspector

Signature: \_\_\_\_\_

*Jennifer Pfeifer*