



# 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:

### Hubbard County Jail

**Address:** 301 Court Street, Park Rapids, MN 56470

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

**Inspection Type:** Biennial **Inspected By:** Sarah Johnson – Senior Detention Facility Inspector **Inspected on:** 06/02/2016

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

**Officials Present During Inspection:** Jail Administrator Joe Henry

**Officials Present for Exit Interview:** Jail Administrator Joe Henry

**Issued Inspection Report to:** Jail Administrator Joe Henry; Sheriff Corey Aukes; District Supervisor Sherry Hill

## 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	124	118	6	1	95.16%	Compliance rating of 100%
2911	Essential	100	98	2	2	98.00%	Compliance rating of 90%

## TERMS OF OPERATION

**Authority to Operate:** conditional approval **Begins On:** 06/01/2016 **Ends On:** 05/31/2018 **Facility Type:** Jail  
**Placed on Biennial Status:** Yes **Biennial Status Annual Compliance Form Due On:** 05/31/2017  
**Delinquent Juvenile Hold Approval:** 24 hrs exclusive of weekends and holidays **Certificate Holder:** Hubbard 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	116	90	104.40	Past bed capacity was at 60 beds. Facility is increasing staff to meet increased bed capacity of 116 beds.	None.

### Variances

NONE

**RULE COMPLIANCE DETAILS****Chapter 2911 - Mandatory Rules Not In Compliance****Total: 6****1. 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 inmate medical screening staff complete at intake does not include the signs and symptoms of active tuberculosis.

**Corrective Actions:**

**Update the medical screening to include all necessary questions regarding tuberculosis to reflect the rule requirement. Inform staff of the change in medical screening questions. Submit to the Department of Corrections updated medical screening.**

**Response Needed By: 08/15/2016****2. 2911.6200 MEDICAL AND DENTAL RECORDS. Subpart 2. Data practices.**

The medical record file shall be maintained separately and according to the Minnesota Government Data Practices Act, Minnesota Statutes, chapter 13.

**Inspection Findings:**

Inmate medical records are kept in the nurse's office but the records are not kept in a locked cabinet.

**Corrective Actions:**

**All medical data that is considered private must be kept secured to prevent data privacy breaches. The medical records must be kept in locked cabinets and unavailable to anyone that enters the nurse's office.**

**Response Needed By: 08/15/2016****3. 2911.6500 STORAGE. Subpart 5. Controlled substances.**

There shall be a procedure for maximum security storage of and accountability for controlled substances.

**Inspection Findings:**

There are not procedures in place for maximum security storage or accountability for controlled substances.

**Corrective Actions:**

**The facility needs to immediately address the accountability of controlled substances that are kept. There also needs to be an additional level of security for controlled substances. Staff will need to be trained on the new medication procedures. Submit corrective action plan to the Department of Corrections for review.**

**Response Needed By: 08/15/2016**

## 4. 2911.6500 STORAGE. Subpart 6. Needles and other medical sharps.

There shall be a written policy and procedure for the control and disposal of medical sharps and supplies. Medical sharps and supplies when used or stored in inmate housing areas shall be accounted for and secured in a locked area.

**Inspection Findings:**

The medical sharps kept on the medication cart are not accounted for.

**Corrective Actions:**

**Create a system of accountability for medical sharps kept on the medication cart. Inform staff in the change in procedures. Submit to the Department of Corrections corrective action for medical sharp accountability.**

**Response Needed By: 08/15/2016**

## 5. 2911.6800 CONTROL. Subpart 1. Records.

Records of receipt, the quantity of the drugs, and the disposition of all prescription medications shall be maintained in detail to enable an accurate accounting.

**Inspection Findings:**

With the current medication system Hubbard County uses, there is not a procedure in place for accurate accounting of all prescription medications.

**Corrective Actions:**

**Create a system of accountability for all prescription medications for inmates. It is recommended to have the nurse complete a weekly medication verification count on all prescription medication. Notify staff in the change in procedures for medication accountability. Submit documentation of new medication procedures to the Department of Corrections for review.**

**Response Needed By: 08/15/2016**

## 6. 2911.7300 FIRE INSPECTION. Subpart 1. Annual inspection.

Each facility shall be policy require that a fire inspection of the facility must be conducted in accordance with the applicable fire code on an annual basis by a state fire marshal or local fire official.

**Inspection Findings:**

The last fire inspection was in 2014.

**Corrective Actions:**

**Contact the state fire marshal and schedule an annual fire inspection. Submit to the Department of Corrections when completed for review.**

**Response Needed By: 08/15/2016****Chapter 2911 - Essential Rules Not In Compliance****Total: 2**

## 1. 2911.1600 DESIGNATED TRAINING OFFICER.

A facility shall have a designated training officer responsible for: A. maintenance of training plans as required in part 2911.1000; B. maintenance of training records in sufficient detail to allow inspector assessment of compliance with parts 2911.1100 to 2911.1700; and C. documentation of waivers of training requirements based on equivalent training received before employment or demonstrated competency through proficiency testing.

**Inspection Findings:**

The jail training records are too disarrayed for any clarity. They need to be reorganized for better clarification as to what training was given and better consistency on how training records are documented.

**Corrective Actions:**

**It is recommended to reorganize staff training files which would include keeping all records of individual staff training in their designated training file.**

**Response Needed By:**

2. 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:**

The facility does not conduct a monthly security equipment check.

**Corrective Actions:**

**It is recommended to create a monthly security equipment check to include all security equipment the facility uses, such as restraints, restraint chair, and first aid bag. The security equipment must be inventoried and check for condition. Documentation should be kept for verification purposes.**

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

1. 2911.1350 MEDICAL TRAINING FOR CUSTODY STAFF.

By policy and procedure a training program shall be established by the facility administrator in cooperation with the health authority, that provides instruction in the following areas: A. first aid training for custody personnel responsible for the supervision, safety, and well-being of prisoners; B. recognition of signs and symptoms of illness and knowledge of action required in potential emergency situations; C. administration of first aid and cardiopulmonary resuscitation (CPR). Recertification training shall occur as required with respect to first aid and CPR. The training shall be documented; D. methods of obtaining assistance; E. recognition of signs and symptoms of mental illness, retardation, emotional disturbance, and chemical dependency; and F. procedures for inmate transfers to appropriate medical facilities or other health care providers.

**Inspection Findings:**

New employees have not received first aid and CPR training.

**Corrective Actions:**

**Provide new employees with the required CPR and first aid training. This training should be given prior to staff supervising inmates independently.**

**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 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:**

Nurses and food services staff are not involved in the emergency reviews of the facility.

**Corrective Actions:**

**It is recommended to include the nurse and food service staff in the emergency reviews for the facility.**

**Response Needed By:**

**2. 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:**

All staff meet the training requirements but a large portion of the training consists of video training. Although this is a good tool to utilize it does not provide the diversity or hands on training that an instructor would provide. Staff also need more in depth training. It is recommended that more drills; such as medical, man down, attempted suicide, severe weather, restraint chair, cut down knife, and emergency drills are also trained on.

**Corrective Actions:**

**It is recommended to continue to try to provide classroom or instructor training to staff to meet the minimum training requirements for staff. It is also recommended to seek out additional training that would benefit staff such as drills or conferences.**

**Response Needed By:**

**INSPECTION COMMENTS**

Hubbard County has made substantial improvements with inmate well-being checks. Well-being checks by all staff are now reviewed by the Assistant Jail Administrator on a regular basis.

Hubbard County also plans to address the physical plant issues in booking with a remodel of the booking area.

**Concerns:**

**Medical:** There are multiple compliance issues concerning the 2911 medical standards that need to be addressed. It is clear the 9 to 12 nursing hours provided a week are not enough for this facility. Overall, there needs to be better review and management of this area. It is strongly recommended to increase nursing hours to address the medical needs of this facility.

**JJDPA Compliance**

On June 2,2016, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Hubbard County Jail has received a "Rural Exception" to the Juvenile Justice and Delinquency Prevention Act (JJDP). This allows the facility to hold a delinquent juvenile up to 24 hours, excluding weekends and holiday. 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.

The Hubbard County Jail held or processed 18 juveniles during the federal fiscal year 2015 to the date of inspection. I reviewed 100% percent of the year 2015 juvenile data. The findings are as follows:

DSO: I found no violations of the facility holding a status offender in the jail.

Jail Removal: I found no violations of the jail removal.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation. This includes the route taken to Court. 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.

Court Holding: There is not a secure court holding for Hubbard County.

Based on the documentation that I reviewed, I found no violations of the JJDP act during the Hubbard County inspection.

\*It is recommended to separate out all juvenile policies from the adult policies for easy reference for staff when needed.

**Report completed By:** Sarah Johnson – Senior Detention Facility Inspector

**Signature:**

