



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
Telephone: 651-361-7146 Fax: 651-642-0314 Email: ie-support.doc@state.mn.us

INSPECTION DETAILS FOR:

Ramsey County ACF

Address: 297 S Century Avenue, Maplewood, MN 55119

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Greg Croucher – Senior Detention Facility Inspector **Inspected on:** 05/18/2016 to 05/19/2016

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

Officials Present During Inspection: Captain Chris Belfield; Captain Trevor St. Germain; Captain Marshall Tschida; Lieutenant Olay Philaphandeth; Superintendent Allen Carlson; Nursing Supervisor Diane Haugen

Officials Present for Exit Interview: Captain Chris Belfield; Captain Trevor St. Germain; Captain Marshall Tschida; Lieutenant Olay Philaphandeth; Superintendent Allen Carlson

Issued Inspection Report to: Captain Chris Belfield; Captain Jeff Good; Captain Trevor St. Germain; Captain Marshall Tschida; Community Corrections Director John Klavins; Superintendent Allen Carlson; Records 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	126	0	3	100.00%	Compliance rating of 100%
2911	Essential	102	102	0	3	100.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 05/01/2016 **Ends On:** 04/30/2018 **Facility Type:** Adult Correctional Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 04/30/2017

Delinquent Juvenile Hold Approval: no approval **Certificate Holder:** Ramsey County Community Corrections

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	556	95	528.20	None.	None.

Variances

NONE

RULE COMPLIANCE DETAILS**Chapter 2911 - Mandatory Rules In Compliance With Concerns****Total: 3****1. 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:

A review of video showed that well-being checks were being completed per facility policy. However, the pace on some of the checks reviewed was too fast.

There is an excellent system in place to review well-being check logs and video.

Corrective Actions:

Remind staff to slow down the pace of well-being checks so that they are more deliberate in looking for signs of life, like rise and fall of chest and movement.

Response Needed By:**2. 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:

There are 50 gallon barrels of anti-freeze in the physical plant area. No labels were found on them.

A can of cooking spray was found in kitchen labeled as "flammable."

Tool control was questionable in a couple of areas as extra items that were not on the inventory sheet were found in tool boxes and drawers.

Corrective Actions:

Cooking spray was immediately secured in a locked closet. Staff were informed that this product needs to be secured when not in use.

The 50 gallon barrels of anti-freeze need proper labeling on them.

Ensure that all toolboxes and drawers that contain any tools or sharps have a correct inventory and don't have any extra tools that are not accounted for on those sheets.

A more formal inventory sheet was recommended in the medical unit.

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 designated staff member; and B. there is documentation that deficiencies, if any, have been corrected.

Inspection Findings:

Weekly sanitation inspections are done on an informal basis and not always specifically documented.

Corrective Actions:

Develop and document a weekly sanitation inspection.

Response Needed By:

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

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:

Security training for non-custody staff only occurs during initial orientation and is not refreshed. They do complete quarterly reviews of emergency procedures.

Corrective Actions:

Arrange for more security based training for this classification of staff members.

Response Needed By:

2. 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:

This is just one duty for one of the Captains on top of other duties assigned.

Corrective Actions:

It is recommended that the designated training officer be a full time position. The size of the facility number of staff members combined with the issues that were identified with the training records during the inspection warrants this full time position.

Response Needed By:

3. 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:

There is a formal monthly security inspection. Some of the elements of these inspections are completed weekly.

Corrective Actions:

Continue to develop and implement a more refined monthly security inspection to be completed and documented.

Response Needed By:

INSPECTION COMMENTS

#1 Physical Plant: Minor physical plant and tool control issues were identified during the inspection. They were either taken care of right away, a work order was placed, or they were already identified as a part of a long-term maintenance plan. Overall the physical plant of the facility has been well maintained. Several projects have been completed most notably the showers, floors, lights and counter tops in the inmate restrooms. Replacement of the coolers and freezers is scheduled for later this Summer.

A check of perimeter lighting showed one small gap that is being addressed. Additionally the exterior analog cameras are being replaced on an as-needed basis which has improved viewing and resolution.

Many of the offices in the caseworker and mental health suites should be looked at to determine a more security minded set-up and lay out. The offices in question were not originally set-up to have inmates in them. This was discussed with facility administration.

There is a nuisance gate that is not secured at night. It is recommended that the last staff member leaving the area secure this gate.

There is signage in the male and female admissions holding cells that needs to be adhered better to the wall.

The security ceiling in the "security" unit just outside the shower is in need of some repair as it appears an inmate pushed it up and slightly out of place.

Extension cords and a power strip was being utilized as a permanent source of power for the laundry chemicals. This was rectified within a week of this on-site inspection.

#2 Training: There has been significant improvement in regard to training and training records. There is however a need for a refresher training to be developed that covers safety and security training for non-custody staff.

A couple of drills were conducted and a scenario was discussed with the overnight Watch Commander. All were handled well by responding staff members.

JJDPA Compliance

On May 19, 2016 a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Ramsey County A.C.F. has no approval to hold delinquent juveniles.

According to statewide supervision system and facility records the Ramsey County A.C.F. held or processed 0 (zero) juveniles between October, 2015 to the date of inspection.

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

Jail Removal: Any juveniles held at the facility would have been certified as adults.

Sight and Sound Separation: The facility houses no delinquent juveniles.
The facility does not participate in any "Scared Straight" programs for any youth under public authority.

Based on these facts and documentation that I reviewed, I did not find any violations of the JJDP act during the Ramsey County A.C.F. inspection.

Report completed By: Greg Croucher – Senior Detention Facility Inspector

Signature:

