

MINNESOTA CODE OF AGENCY RULES

RULES OF THE DEPARTMENT OF CORRECTIONS

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DEPARTMENT OF CORRECTIONS

GOVERNING THE IMPLEMENTATION AND OPERATION OF THE COMMUNITY CORRECTIONS ACT

§ 2.001 Introduction.

A. The Community Corrections Act of 1973 (Minn. Stat. §§ 401.01 to 401.16) provides that the Commissioner of Corrections promulgate rules and standards relative to the implementation and operation of the Act. The rules which follow are intended to fulfill that requirement.

B. The purpose of these rules is to facilitate the implementation of the Act and to provide a framework within which services will be delivered and coordinated in the various areas of the state where the Act becomes operational.

C. The Community Corrections Act places a great deal of responsibility for correctional planning and implementation at the local level. These rules are not intended to interfere with that process but rather to insure that the various planning efforts are compatible with one another and with the basic requirements of all segments of the state's correctional system.

§ 2.002 Definitions.

A. For the purposes of these rules:

1. The "Commissioner" shall mean the Commissioner of Corrections or his designee.

2. The "comprehensive plan" shall mean the working document developed by the local corrections advisory board for the implementation and operation of community based correctional programs pursuant to Minn. Stat. § 401.01, subd. 1 and providing for the central administration of the services and programs outlined in the document.

3. The "Community Corrections System" shall mean the organizational structure or network which exists or is proposed to exist within the county which will enable the local criminal justice system and other elements of the community to utilize the correctional programs and services outlined in the comprehensive plan.

4. "Planning county" shall mean one or more contiguous counties subject to the provisions of Minn. Stat. §§ 401.02, subd. 1 and 401.02, subd. 2, which has established a local corrections advisory board for the purpose of developing a comprehensive plan.

5. A "participating county" shall mean one or more contiguous counties subject to the provisions of Minn. Stat. § 401.01, subd. 1 which has been designated by the Commissioner to receive funds under Minn. Stat. §§ 401.01 to 401.16 through the approval of the comprehensive plan.

6. A "unit of service" shall mean each project, program or activity outlined in the comprehensive plan including, but not limited to, probation/parole services, court service activities, jail programs, evaluation services, training and residential programs.

§ 2.003 Application for participation.

A. Application for participation by a county or group of counties pursuant to Minn. Stat. § 401.02, subd. 1 shall consist of a resolution expressing intent to participate under the provisions of the Community Corrections Act, (hereafter called the Act) provided subsidy funds are available.

B. Approval of the application by the Commissioner shall designate the county as a planning county pursuant to Minn. Stat. § 401.02, subd. 2 and shall establish that calendar year as the basis for determining the current level of spending referred to in Minn. Stat. § 401.12.

§ 2.004 Development of a comprehensive plan.

A. The Commissioner shall ensure that the local corrections advisory board and administrative (correctional) staff of the county are provided with all necessary and available technical assistance and resources of the State Department of Corrections in the development of a comprehensive plan.

§ 2.005 Changes in the comprehensive plan and budget.

A. When a county wishes to change the comprehensive plan during the calendar year, it may do so by either amendment or transfer.

1. Amendments. Amendments shall be required when:

a. Units of service are being added or deleted from a Comprehensive Plan.

b. Subsidy funds which exceed \$5,000 or 5% of the total annual subsidy, whichever is less, are being reallocated within or between units of service identified in the comprehensive plan.

c. Amendments to the comprehensive plan shall be processed and submitted in the same manner as the comprehensive plan, and shall be submitted at the end of any calendar quarter on forms provided by the Commissioner.

2. Transfers. Any reallocation of subsidy funds within or between units of service identified in the comprehensive plan, which will not exceed \$5,000 or 5% of the total annual subsidy, whichever is less, shall be accomplished by transfer on forms provided by the Commissioner. The transfer process requires only the approval of the administrator or director of the local community corrections system. All transfers of subsidy funds must be attached to the quarterly financial report for the period in which the transfer was made.

§ 2.006 Information systems and evaluation.

A. Each Community Corrections System shall develop and implement an Information System which shall be in compliance with applicable security and privacy regulations; shall be an offender based tracking system, including minimum data elements required for State and National reporting; and shall, on a quarterly basis, provide such data as may reasonably be requested by the Department of Corrections.

B. Each Community Corrections System shall develop and implement evaluation/research designs and processes. All Research and Information Systems designs must be approved by the Commissioner prior to implementation.

C. A sum of no less than the equivalent of 5% of the total subsidy amount made available according to the provision of the Act shall be used to develop and implement the Information System and Evaluation/Research.

§ 2.007 Training/Education.

A. Each county or group of counties participating in the Act shall implement training/education programs necessary to meet the appropriate needs of line staff, administrative staff, the local corrections advisory board or major components of the local criminal justice system and the community at large.

B. A sum no less than the equivalent of 5% of the total subsidy amount made available through the provisions of the Act shall be used to develop and implement this component of the comprehensive plan.

§ 2.008 Fiscal management. A county shall designate one (1) person responsible for the supervision of all fiscal matters related to the subsidy received under the provisions of Minn. Stat. §§ 401.01 to 401.16. Said person shall comply with State and county rules governing the management of county funds and shall provide information to the Corrections advisory board and the Commissioner at least quarterly on forms provided by the Commissioner.

§ 2.009 County assumption of state probation and parole cases.

A. Each county participating under the Act shall provide service to all interstate and intrastate probation and parole clients.

B. The Commissioner will provide necessary orientation training for counties to assume probation and parole services previously provided by the State.

§ 2.010 Use of existing community resources.

A. Each Community Corrections System shall utilize whenever possible agencies and organizations established in the community to deliver medical and mental health care, education, counseling and rehabilitative services, employment services and other similar social services. The local Community Cor-

rections System shall, in planning its total range of correctional programs and projects, establish a presumption in favor of resources already existing in the community.

B. If the Community Corrections System intends to initiate services or programs which duplicate those already existing in the community, clear evidence must be presented in the comprehensive plan to demonstrate that such existing services are either inappropriate or unavailable to meet identified correctional needs.

C. Each Community Corrections System shall take steps to ensure that all clients of programs or projects under its jurisdiction have access to the same services, activities and opportunities available to citizens generally, provided that this access is consistent with the demonstrated needs of the program or project and the necessity to protect the public safety.

§ 2.011 Program relevance to correctional objectives.

A. Each program specified in the comprehensive plan or designated to receive Community Corrections Act funds shall have a clear relationship to correctional objectives. Programs for which no direct relationship can be demonstrated between its activities and the protection of public safety or the prevention or reduction of criminal or delinquent behavior shall not be eligible for funds under the Community Corrections Act.

§ 2.012 Local programs and services.

A. Each Community Corrections System shall develop and make available to the directors of all programs utilized by the system, written rules, policies and procedures which will provide for at least the following:

1. Intake criteria. That all programs (other than conventional probation and parole supervision) shall develop and make available to appropriate referral sources a written policy establishing client eligibility criteria. The Community Corrections System shall regularly advise courts and sentencing judges of the extent and availability of services and programs within its system to permit proper sentencing decisions and realistic evaluation of alternatives.

2. Client case reporting. That a single case record for each individual admitted to a program or served by an agency be maintained by the agency or program director so as to contain clear, concise and accurate case information. Individual case records shall be maintained on a current basis and updated at least quarterly. Each client shall have access to all material in his/her file, with the exception of that information determined to be confidential by law.

3. Rights of offenders. That the rights of offenders placed in, or receiving service from, any program included in the comprehensive plan shall be adequately protected.

4. Compliance with rules. That all programs included in the comprehensive plan are in compliance with the applicable provisions of these rules as well as relevant local, State and Federal laws.

B. The above mentioned rules, policies and procedures shall be included in the first comprehensive plan submitted to the Commissioner following the formal promulgation of these present rules. Modifications shall be noted in subsequent comprehensive plans.

§ 2.112 New construction.

A. Construction principles.

1. All rules contained herein, except to the extent exceptions are stated, shall apply to each holding facility, lockup, jail and adult corrections center.

2. All construction shall comply with regulations required by the State Building Code, adopted by the State of Minnesota and standards stated herein applicable to the facility's classification and security classification of prisoners confined.

3. Wherever specific mention of a construction condition or specification is not made, the requirements of the State Building Code, the Fire Marshal, the Minnesota Health Department, the Minnesota Department of Labor and Industry and any other federal or state regulating agency with lawful authority to define construction requirements shall apply.

4. Where mention is not made of measurements, gauges, quality, volume, intensity, or some other such characteristic with respect to security areas or products, such specifications shall be equal to or exceed those required by established security product manufacturers in the field of jail and prison hardware and equipment.

5. Where mention is made of measurements, gauges, quality, volume, intensity or some other such characteristic, gauges, quality, volume, intensity or whatever other characteristic equal to or exceeding the specifications presented herein shall be acceptable.

a. Where such equivalent products are to be used, a letter certifying that such products are equal to or exceed the specifications noted herein, shall be filed with the architect, owner and Department of Corrections by the manufacturer of such product prior to Department approval of any new construction.

b. Whenever an article or material is defined by describing a proprietary product or by using the name of the manufacturer, the term, 'or architect/engineer approved equivalent' if not inserted, shall be implied.

6. Lockups, jails and adult corrections centers shall be designed to accommodate maximum, medium and minimum security prisoners and shall provide maximum, medium and minimum security living accommodations.

a. Holding facilities shall minimally provide medium security living accommodations for prisoners. They are not required to provide maximum or minimum security accommodations.

b. Adult corrections facilities designed and approved by the Department to accept only one classification of prisoner (maximum, medium or minimum) may have the capability of providing security of that classification only.

B. General conditions.

1. The design shall not cause conflicts in the necessary functions of activities.

a. No activity shall be terminated or delayed by cause created because of another necessary activity.

2. Staff work stations and control rooms shall be situated to provide the greatest degree of observation of traffic flow and supervised internal activities as possible.

a. A staff work station or control room shall be located on the same floor of the building as prisoner living areas for usage by custodial staff whose primary duties are the day-to-day supervision of prisoners of a local facility.

b. Where staff are employed as combination jailer/dispatchers, such staff work station or control room shall be located on the same floor of the building as prisoner living areas.

c. Dispatcher work stations or control rooms need not be located on the same floor as prisoner living areas when such staff are not responsible for the supervision of prisoners.

3. Staff work stations and control rooms which supervise security activities shall be separated from the public and the prisoners by security barriers, and shall be protected from direct observation from the outside of the facility.

4. The design shall provide for separation of prisoners and the public; the prisoners and the staff; prisoners of one classification and another; prisoners and unauthorized areas of the facility.

5. There shall be provisions to conduct all maximum security prisoner functions within the security perimeter of the facility.

6. There shall be a minimum of two physical barriers between maximum security prisoners and freedom during unsupervised activities.

7. Storage areas shall be sufficient to provide adequate space for separation and security of keys, weapons, drugs and medications, tools, evidence, recovered stolen property, mattresses, linens and bedding, housekeeping equipment and supplies, clothing, prisoners' property, canteen and hygiene items and records.

a. Secure weapon depositories separate and distinct from armories shall be provided outside the security areas for the temporary safekeeping of officers' weapons.

8. The design shall provide for service deliveries to be accomplished without interfering or interacting with the security of the facility.

9. Electrical auditory two-way communications shall be provided between control stations and prisoner areas of the facility.

10. Padlocks shall not be used in place of a security lock on any door, window or cabinet within the security perimeter of the facility.

11. No prisoner traffic corridor shall be less than five feet in width in security areas.

12. Illumination levels shall meet current recommendations of the Illumination Engineers Society.

13. The design of the facility shall provide for communication to be accomplished with the required levels of confidentiality.

14. Visiting provisions shall be designed to provide flexibility in the degree of security required to accommodate both non-contact visiting as well as privileged visiting in the situations that require and justify this level of interaction.

a. Visiting space shall be provided so that at least 1/10 of the facility's capacity can be accommodated at any time.

b. At least 25 square feet per prisoner visiting station shall be provided.

15. Each entrance of a facility shall be constructed to permit the control room or secure reception area observation and identification of the person(s) seeking admission prior to their gaining access to a security area.

16. Provision shall be made for the maintenance of a noise level averaging no higher than 65-70 decibels in the daytime and 40-45 decibels at night for the prisoner living areas.

a. Attention shall be given to restrict noise levels in one area of the facility from interfering with activities in another area.

17. All exposed surfaces of the facility's physical plant, equipment or furnishings utilized therein shall be of materials and construction which provide for cleanability of surfaces without unreasonable effort.

18. Each prisoner living area shall be provided with a minimum of six cubic feet of storage space per prisoner.

19. All hot water to prisoner showers and washbasins shall be tempered to 105 degrees Fahrenheit to 120 degrees Fahrenheit.

20. All facilities shall be designed and provided with necessary equipment to maintain temperatures in prisoner living areas between 65 and 71 degrees Fahrenheit during winter months and between 66 and 85 degrees Fahrenheit during summer months.

21. Non-skid, non-slip flooring shall be provided on all stairways, ramps, and shower floors.

22. Smoke and heat detection equipment shall be provided in all facilities.

23. The use of closed-circuit television equipment shall be approved by the Department on an individual case basis upon review of the facility design concept and staffing plan.

a. Closed-circuit television equipment shall not be approved for usage in situations where the Department has determined that the usage of same is inconsistent with proper security practices, the legal rights of prisoners, or is being used in lieu of adequate staff resources.

24. All cells or detention rooms shall have a minimum ceiling height of eight feet.

25. All dormitories designed for a capacity of ten or more prisoners shall have a minimum ceiling height of nine feet.

26. All eating areas outside of cells or detention rooms shall be visually apart from toilet and shower facilities.

27. Minimum security areas of the facility shall be adequately separated from other areas of the facility with more stringent security classifications.

28. Isolation areas shall be located so that all prisoners, regardless of classification or sex, may have access without violating privacy and security requirements.

29. Jails and adult corrections facilities shall provide space designed to conduct constructive programmed activities that can include outsiders in areas other than the living areas of the facility without compromising the security and control of the facility's operation.

30. Lockups shall provide at least one multipurpose room that may be used for such purposes as religious services, small group counseling, etc.

31. Maximum security cells are designed with the intended use being only for adult males classified as dangerous. However, justifiable exceptions will be accepted for all prisoners whose use of such a facility is necessary.

32. Each facility shall have an auxiliary source of power which is capable of providing light, heat and communication during a power failure.

C. Administrative and public areas.

1. Administrative, clerical, maintenance and service personnel shall be provided with office and storage space to meet established and projected needs which shall be separate and apart from the inner security areas and prisoner-occupied areas of the facility.

2. Public areas of the facility shall provide a controlled access to the building and to all security areas of the building.

3. Public areas shall be situated so as not to interfere with all necessary functions of the facility and shall provide for the comfort and convenience of the public including sufficient seating, toilets, lavatories, drinking fountains and telephones.

D. Receiving area.

1. Intake and receiving areas shall be located in an area protected from the public, but separate from the areas occupied by the other prisoners of the facility.

2. Each receiving area of a facility shall provide for privacy of searching, showering and processing of an admission as well as a secure holding area properly equipped for the convenience of the detainee for up to six hours of detention. There shall be provisions for storage for clothing issued and property received.

E. Living area.

1. The design of the facility shall provide for proper segregation of prisoners.

2. Male and female areas shall be so situated as to preclude the need for staff and/or prisoners of the opposite sex from routinely trafficking in each others' areas.

3. Prisoners' rights to privacy from degrading, unauthorized observation shall be protected without compromising the security and control of the facility.

4. No living area shall have a floor line more than 3 feet below the adjacent ground level.

5. All ventilation and heating vents shall be located so as not to create an air flow directly on a bed or eating area.

6. Basic provisions for each cell or detention room shall include a toilet, sink, abuse-resistant mirror, drinking faucet, desk or table, seating bench or chair, wall closet or shelf, bed or bunk and light with abuse-resistant lens covering.

7. Each residential area shall provide a shower facility of a minimum of 36" X 36" for each 15 prisoners, adjacent to the living area. Shower facilities are prohibited in cells and detention rooms.

8. Each room or cell in lockups, jails and adult corrections centers shall be adjacent to an enclosed exercise area or connected by corridor having

direct access which provides a minimum of 40 square feet per prisoner for numbers under four, an overall average of 36 square feet per prisoner for numbers over four, but in no event, an area less than 75 square feet.

a. Holding facilities are not required to provide such exercise areas.

9. Each exercise area shall be equipped with a fixed table and benches providing a minimum of three square feet per prisoner for at least 50% of the prisoner capacity of the area served by such exercise area, a telephone jack, an audio sound monitor, at least one controlled electrical outlet, and if separate from direct access to rooms having toilets, a toilet, sink, drinking faucet and modesty panel.

10. Each lockup, jail and adult corrections center shall provide an area for the examination, treatment and convalescent care of prisoners, situated separate and apart from other living areas, but within the security perimeter of the facility.

a. Holding facilities are not required to provide such an area.

11. All living areas other than dormitories (three or more beds) shall be single occupancy. Dormitory capacity shall be limited to no more than 25% of the total capacity of the facility.

12. Adult corrections centers shall provide outdoor recreational space for prisoners compatible with the security classification of prisoners confined.

F. Construction standards (Security Areas).

1. Cell, room, dormitory sizes.

a. Each maximum security cell, medium security cell or detention room shall provide for at least 70 square feet of floor space within the cell or detention room.

b. Minimum security rooms shall provide a minimum of 50 square feet of floor space per prisoner when unrestricted access to exercise, dayroom or program areas is permitted. Seventy square feet of floor space is required when such access is not permitted.

c. Dormitories shall provide three or more beds and a minimum of 60 square feet of floor space per prisoner within the dormitory exclusive of toilet and shower areas.

(1) Dormitories shall not be used in maximum security areas.

2. Inspection corridors.

a. Each maximum security cell shall be located at least 44" away from an outside wall, separated from the wall with an inspection corridor.

b. A 44" inspection corridor providing visibility of medium security living areas shall be provided.

(1) Such corridor need not be between the exterior wall and prisoners.

3. Access to outside windows or doors.

a. No area occupied by a maximum security prisoner which is unsupervised directly by staff shall have direct access to an outside window or door.

b. No area occupied by medium or minimum security prisoners which is unsupervised directly by staff shall have direct access to an outside door.

4. Exterior and natural light orientation.

a. Maximum security cells or dayrooms and exercise areas shall have access to natural light through the 44" inspection corridor required under F. 2. a. of Construction Standards.

b. Medium security cells or detention rooms and minimum security rooms shall be located either on an outside wall which provides a window for natural lighting or on a dayroom area which provides this condition.

c. Medium and minimum security dormitories shall be located on an outside wall which provides windows for natural lighting.

5. Sally ports.

a. Each entrance to a maximum or medium security prisoner living area shall be provided with a sally port large enough to accommodate a stretcher with both gates or doors closed.

6. Maintenance access to plumbing, heating and light fixtures.

a. Maximum security cells shall be constructed to permit maintenance of plumbing, heating and light fixtures from outside the prisoner area.

7. Prisoner access to plumbing and heating fixtures.

a. Heat registers, thermostats, electrical outlets and plumbing pipes shall be located out of the reach of maximum security prisoners.

b. Heat registers may be located in medium and minimum security areas but shall be protected by security screen. Electrical outlets may be located in medium and minimum security areas but shall have a shutoff switch outside the prisoner area. Thermostats shall be located outside of medium and minimum security areas with heat sensors provided in prisoner areas as necessary. Plumbing pipes shall not be exposed to medium security prisoners.

8. Sewer lines.

a. Each sewer line shall be equipped with at least a 2" cleanout plug located within 18" of each toilet and a shutoff valve on each water line located outside the prisoner area.

9. Plumbing fixtures.

a. Plumbing fixtures used in maximum or medium security areas shall be either aluminum or stainless steel security fixtures.

10. Abuse resistance.

a. All materials accessible to prisoners used in the construction of maximum security shall be capable of withstanding serious damage for a period of two hours, using that which is normally available within that area.

b. All materials accessible to prisoners used in the construction of medium security shall be capable of withstanding serious damage for a period of one hour, using that which is normally available within that area.

c. The design and furnishings of minimum security areas shall be developed with normalcy in mind, but in keeping with the design, purpose, classification and use of the remainder of the facility.

11. Locking devices.

a. Maximum security cell doors shall be equipped with locking devices that provide the capability to lock all doors either collectively or separately from outside the prisoner area.

b. Medium and minimum security cell, detention room or dormitory doors may be equipped with locking devices that provide the capability to lock all doors either collectively or separately from outside the prisoner area.

12. Vent openings.

a. Vent openings shall be no larger than 7" of the diameter of a circle or 5½" of a side of a rectangular opening.

13. Grillage.

a. Grillage bars shall consist of tool resistant steel, a minimum of 7/8" in diameter, spaced no more than 6" on center vertically with lateral bar supports 3/16" thick at least every 18".

b. Grillage shall not be used in minimum security areas.

14. Glass.

a. All glass shall consist of polycarbonate and tempered glass combination materials, or bullet and heat resistant glass, which in either case shall be no less than 1/2" thick and greater as proportionately correlated in thickness with the overall size of the opening and the use.

b. Architects shall verify State Building Code glass requirements in fire resistive construction.

15. All concrete walls, floors, ceilings shall be prepared in accordance with the "Manual of Standard Practice" Concrete Reinforcing Steel Institute.

a. All concrete shall be reinforced with intermediate grade steel meeting requirements of "Deformed Billet-Steel Bars 3/8" in Diameter for Reinforced Concrete" ASTM A 615, Grade 60.

b. Mesh reinforcing shall be welded wire fabric reinforcing ASTM A 185 steel wire of size indicated and spot welded at intersections.

c. Placement of concrete shall be in accordance with ACI 304.

d. Portland cement ASTM C 150 Type I shall be used for general concrete work.

e. Fine aggregate ASTM C 33 100% passing of no. 4 sieve coarse aggregate ASTM C 33 3/4".

f. Concrete mix design, 3500 psi for general use, 3" maximum slump.

16. Wall construction.

a. Maximum security walls shall consist of one of the following:

(1) Steel plate, 3/16" thick; riveted or welded.

(2) Poured concrete 6" thick with vertical and horizontal steel rod reinforcement (vertical rods 6" on center, horizontal rods as per 15. a. and b. above).

(3) Concrete block 8" thick with cells filled full height with mortar or concrete; vertical steel rod reinforcement in each block cell; horizontal steel reinforcement between each course; with hardening compound used to treat joint mortar.

(4) Security walls consisting of a hollow metal, 14 gauge, steel core, interlocking, wall system equal to or surpassing the following panel performance data:

Under a static load of 10,000 pounds, placed at quarter points, maximum deflection at center of panel shall not exceed .50" with a rebound to .065"

after load removal. The wall panel shall be subjected to a racking or twist test placing a 5,000 pound load on one unsupported corner of the panel, with the other end of the panel held in a fixed position and with the third corner having a vertical support. The maximum permitted deflection of the unsupported corner shall not exceed 1.65" with a rebound to .180" after load removal. Wall panels shall be adequately insulated so as to deaden metallic ring if wall panels are struck by prisoners.

b. Medium security walls shall consist of one of the following:

(1) Poured concrete 6" thick with vertical and horizontal steel rod reinforcement (vertical rods 6" on center, horizontal rods as per 15. a. and b. above).

(2) Concrete block 8" thick with cells filled full height with mortar or concrete; vertical steel rod reinforcement in each block cell; horizontal steel reinforcement between each course; with hardening compound used to treat joint mortar.

(3) Poured concrete 4" thick with vertical and horizontal steel rod reinforcement (vertical rods 6" on center, horizontal rods as per 15. a. and b. above). Concrete shall be faced with 2" of structural glazed tile.

(4) Security walls consisting of a hollow metal, 14 gauge, steel core, interlocking wall system equal to or surpassing the following panel performance data:

Under a static load of 10,000 pounds, placed at quarter points, maximum deflection at center of panel shall not exceed .50" with a rebound to .065" after load removal. The wall panel shall be subjected to a racking or twist test placing a 5,000 pound load on one unsupported corner of the panel, with the other end of the panel held in a fixed position and with the third corner having a vertical support. The maximum permitted deflection of the unsupported corner shall not exceed 1.65" with a rebound to .180" after load removal. Wall panels shall be adequately insulated so as to deaden metallic ring if wall panels are struck by prisoners.

17. Ceiling construction.

a. Maximum security ceiling construction shall consist of one of the following:

(1) Steel plate, 3/16" thick; riveted or welded.

(2) Prestressed concrete planks laid side by side, minimum of 4" thick.

(3) Cast in place reinforced concrete minimum of 4" thick.

(4) An 18 gauge, steel core, ceiling panel system which will withstand a rack or twist test of 1800 pounds on one unsupported corner of the

ceiling panel, without weld failures or buckling of any portion of the panel. The opposite end of the panel shall be held in a fixed position and the third corner shall have a vertical support during the test. Insulate in the same manner as wall panels.

b. Medium security ceiling construction shall consist of one of the following:

(1) Prestressed concrete planks laid side by side, minimum of 4" thick.

(2) Same as above with secondary ceiling suspended to consist of no less than 9 gauge expanded metal covered with 1" of concrete and plaster treated with hardening compound.

(3) Cast in place reinforced concrete minimum of 4" thick.

(4) An 18 gauge, steel core, ceiling panel system which will withstand a rack or twist test of 1800 pounds on one unsupported corner of the ceiling panel, without weld failures or buckling of any portion of the panel. The opposite end of the panel shall be held in a fixed position and the third corner shall have a vertical support during the test. Insulate in the same manner as wall panels.

18. Floor construction.

a. Maximum and medium security floors shall consist of one of the following:

(1) Poured, reinforced concrete, 6" thick, using minimum of 9 gauge expanded metal, or 3/8" steel rod 6" on center.

(2) Prestressed concrete sections laid side by side with minimum of 2½" concrete or terazzo slab using 9 gauge expanded metal.

(3) Medium security floors may consist of quarry tile with a full setting bed method of installation.

(4) A slab on grade shall be a minimum of 4" reinforced concrete with 6 X 6-10/10 welded wire mesh (10 gauge wire 6" o.c. each way). Quarry tile, resinous terazzo or an equivalent floor finish shall be applied.

19. Door construction.

a. Maximum and medium security doors shall consist of one of the following:

(1) Grillage type, consisting of tool resistant steel bars, 7/8" diameter, spaced no more than 6" on center vertically with lateral bar sup-

ports at least every 18"; equipped with security hinges, food pass (5" X 12" minimum), a dead bolt security lock.

(2) Hollow metal door, 14 gauge steel minimum, equipped with security hinges, a lockable food pass (5" X 12" minimum), view panel and speakthrough, a manual or electrical security dead lock. Face sheets of hollow metal doors shall be of 14 gauge steel minimum and an all steel core shall be used which will provide the following performance data:

A static load of 14,000 pounds should be applied at quarter points on the door panel, with less than 3/4" deflection and without any failure of the door panel or welds after the load has been removed. The door panels should be subjected to a rack or twist test by placing 7500 pounds on one unsupported corner of the 14 gauge hollow metal door panel, with the other end of the door clamped in a lock position, and the third corner of the door supported with a vertical member. No permissible failure can occur in the door panel nor any of the welds during or after the 7500 pounds is removed.

(3) All hollow metal doors shall be 6'8" minimum height; 30" minimum width.

(4) Grillage doors less than 6'8" minimum height; 30" width shall be approved by the Department prior to construction. No grillage door shall be approved less than 6' high by 2'1" wide (set 3" above finish floor) 6'3" minimum opening height. All openings shall comply with State Building Code height and width requirements.

20. Window construction.

a. Maximum and medium security window construction shall consist of one of the following:

(1) Solid metal frame windows no wider than 5½" (no movable parts) to be used only in conjunction with a mechanical air exchange and temperature control system.

(2) Louvered or awning type windows, encased in security frames, containing rolled steel bars between panes not wider than 6" on center and covered on the inside by security screen (no less than 18 gauge or greater than ¼" mesh openings) and mosquito screen on the outside.

21. Hardware.

a. All hardware used in maximum security areas shall be designed for maximum security use.

b. All hardware in maximum and medium security areas shall be attached, using security type or tamper-proof fasteners that face away from the prisoner area.

c. All electrically operated hardware shall provide for manually operated key override in an emergency. Electric hinges shall be equipped with concealed wires so that electric parts are not exposed after hinge is installed.

d. All vent guards shall be constructed of tool resistant steel, or the opening guarded by observable tool resistant steel bars, meeting grillage specifications.

e. Pipe chase doors or access panels shall consist of not less than 1/8" steel plate, locked with a security dead lock or be of construction materials comparable to maximum security hollow metal steel doors.

f. All hardware used in medium security areas shall be designed for medium security use.

22. Medium security dormitories.

a. Medium security dormitories shall be equipped with one fixed bed per prisoner; one ceiling or wall light per two beds, covered with an abuse resistant lens; one toilet and modesty panel for each eight prisoners; one sink and abuse resistant mirror for each eight prisoners; one shower (minimum 36" X 36") for each 15 prisoners; one abuse resistant eating table with seating benches that provide a minimum of three square feet of space per prisoner with capacity for each prisoner up to six, but no less than six in dormitories larger than capacity for six and no less than 60% of the total capacity level, whichever is greater; one fixed dresser or wall locker per prisoner.

23. Minimum security rooms.

a. Minimum security rooms shall be equipped with a bed, desk or table, clothes closet, mirror, ceiling or wall light and chair.

b. Minimum security rooms shall be located separate and apart from other areas of the facility requiring higher degrees of security, but within the overall security perimeter of the facility.

c. Dayroom areas of at least 40 square feet per one-half of the total minimum security capacity, but no less than 120 square feet shall be provided adjacent to the sleeping area and shall be equipped for a T.V., and with telephone jack, table, seating facilities, electrical outlets. All power supplies shall be controlled by staff from outside the prisoner area.

d. One toilet and modesty panel, sink and mirror shall be provided for each eight prisoners and one shower (minimum 36" X 36") shall be provided for each 15 prisoners, when not provided in the individual rooms.

e. Doors are not required to be equipped with dead lock or dead-latching mechanisms.

24. Minimum security dormitories.

a. Minimum security dormitories shall be equipped with the following items per prisoner: bed or bunk, wall locker or wall shelf and clothes hooks, mirror, dresser, chair, eating tables and chairs shall be provided to accommodate one-half the total capacity of the dormitory. Additional furnishings may be permitted such as divider panels, T.V. set, radio, lounge chair, and any other article which is normally used in residential living, but would not constitute a disproportionate security threat to the remainder of the facility.

b. Minimum security dormitories shall be located separate and apart from other areas of the facility requiring higher degrees of security, but within the overall security perimeter of the facility.

c. One toilet and modesty panel, sink and mirror shall be provided for each eight prisoners and one shower (minimum 36" X 36") shall be provided for each 15 prisoners. Such facilities may be adjacent to or apart from the dormitory proper, but must be within the immediate vicinity. Facilities may be gang type or individual when more than one is required. All privacy requirements found elsewhere in these standards apply.

d. Visiting shall be provided outside and apart from the dormitory area. When dayrooms are not provided, a room shall be provided for the visiting of minimum security prisoners. Such room may be the same as that provided other prisoners for privileged visiting, i.e., with attorneys, clergy, etc., providing it does not cause serious conflict in the maintenance of security for the remainder of the facility.

e. Doors are not required to be equipped with dead lock or dead-latching mechanisms.

DEPARTMENT OF CORRECTIONS
RULES GOVERNING ADULT DETENTION FACILITIES

11 MCAR § 2.171 Introduction. Minn. Stat. § 241.021, subd. 1 provides that the Commissioner of Corrections promulgate rules establishing minimum standards for all correctional facilities throughout the state, whether public or private, established and operated for the detention and confinement of persons detained or confined therein according to law except to the extent that they are inspected or licensed by other state regulating agencies. The rules which follow are minimum standards for holding facilities, lockups, jails and adult corrections facilities in the State of Minnesota. Facilities which house males and females shall provide comparable care for each group. Facilities housing juveniles must meet the special criteria established for that group. All inspections made by the department shall be according to the standard in this rule and shall compare the care level for male and female groups.

11 MCAR § 2.172 Definitions. For the purpose of these rules:

A. "Administrative segregation" shall mean the physical separation of prisoners prone to escape, prone to assault staff or other prisoners, or likely to need protection from other prisoners or themselves, or prisoners determined to be mentally deficient who are in need of special care.

B. "Adult corrections facility" shall mean a secure detention facility used to confine prisoners for periods of time not to exceed one (1) full year per conviction.

C. "Approved capacity" shall mean the maximum number of prisoners which any cell, room, unit, building, facility or combination thereof is approved for in compliance with the standards.

D. "Average daily population" shall mean the average number of prisoners residing daily during the last calendar year. Prisoners on furlough or hospitalized are excluded.

E. "Commissioner" shall mean Commissioner of the Minnesota Department of Corrections.

F. "Controlled substance" shall mean a drug, substance or immediate precursor in Schedules I through V of Minn. Stat. § 152.02. The term shall not include distilled spirits, wine, malt beverages, intoxicating liquor or tobacco.

G. "Custody personnel" shall mean those staff whose primary duties are the day-to-day or ongoing supervision of prisoners.

H. "Department of Corrections" or "department" shall mean Minnesota Department of Corrections.

I. "Disciplinary segregation" shall mean that status assigned a prisoner following a hearing in which the prisoner was found guilty of violating a facility rule or state or federal law or the status assigned a prisoner prior to a hearing when segregating the prisoner is determined to be necessary in order to reasonably assure the security of the facility. The status results in separating the prisoner from the general population.

J. "Emergency" shall mean any significant incident or disruption of normal facility procedures, policies, routines or activities arising from fire, riot, natural disaster, suicide, assault or medical emergency.

K. "Existing facility" shall mean any facility used for detention and confinement of prisoners prior to May 15, 1978.

L. "Facility administrator" shall mean the individual who has been delegated the responsibility and authority for the administration and operation of a local facility.

M. "Holding cell" shall mean a cell or room used to hold one (1) or more persons temporarily while awaiting release, booking, court appearance, transportation, or interrogation.

N. "Holding facility" shall mean a secure adult detention facility used to confine prisoners, prior to their appearance in court, for a time not to exceed seventy-two (72) hours excluding holidays or weekends.

O. "Inspection" shall mean an on-site assessment of existing conditions made to determine the facility's compliance with 11 MCAR § § 2.171-2.182.

P. "Jail" shall mean a secure adult detention facility used to confine sentenced prisoners for a time not to exceed one (1) full year per conviction, adult pretrial and presentenced detainees indefinitely and juveniles up to limits prescribed by Minnesota Statute and commissioner approval.

Q. "Legend drug" shall mean a drug which is required by federal law to bear the following statement: "Caution: Federal law prohibits dispensing without prescription."

R. "Local facility" shall mean any city, county, city and county, or multiple county corrections facility.

S. "Lockup facility" shall mean a secure adult detention facility used to confine prisoners prior to their appearance in court and sentenced prisoners for a time not to exceed ninety (90) days. In addition to the cell, a lockup facility shall include:

1. Space for moderate exercise and activity, such as weight lifting, ping pong, table games, reading, television, and cards.

2. Policy and procedures which assure each prisoner a minimum of four

(4) hours per day of leisure time activity out of his cell. If a prisoner does not participate in out-of-cell leisure time activity due to illness, discipline or choice, this shall be recorded in the log.

3. Policy and procedures which permit access to and encourage helping agencies such as educational services, chemical dependency counselors, employment services, clergy, legal services and educational services shall be provided to prisoners.

T. "Mandatory" shall mean the rule shall either be met by the facility or waived by the commissioner in order for the facility to be licensed.

U. "Maximum security areas" shall mean areas that provide the greatest degree of physical security for the control and separation of prisoners.

V. "Medicine" shall mean any remedial agent that has the property of curing, preventing, treating or mitigating diseases, or that is used for that purpose. For the purpose of these rules, medicine shall include legend and non-legend drugs.

W. "Minimum security areas" shall mean areas that provide functional living accommodations with a nominal reliance on physical security for the control and management of prisoners.

X. "Policy" shall mean a statement declaring mission, purpose, and ideological position.

Y. "Prisoner" shall mean any individual, adult or juvenile, detained or confined in a local facility.

Z. "Procedure" shall mean a written statement establishing the action plan to implement policy.

AA. "Rule" shall mean that which is defined by Minn. Stat. § 15.0411, subd. 3.

BB. "Substantially conform" shall mean a compliance rating of 100% on items labeled mandatory and a rating of 70% compliance on all other items in these rules.

CC. "Undue hardship" means the financial costs are not warranted when weighed against the benefits derived.

DD. "Variance" shall mean the waiver of a specific rule for a specified period of time.

11 MCAR § 2.173 Intended use and non-conformance with rules.

A. Intended use. A facility shall be used only for classifications for which it is in compliance.

B. Nonconformance, unsafe, unsanitary or illegal conditions. When conditions do not substantially conform to the rules stated herein or where specific conditions endanger the health, welfare or safety of prisoners and/or staff, the facility's use shall be restricted pursuant to Minn. Stat. § 241.021, subd. 1 or legal proceedings to condemn the facility will be initiated pursuant to Minn. Stat. § 641.26 or § 642.10.

11 MCAR § 2.174 Variances.

A. Variances. The granting of a variance under this section shall not constitute a precedent for any other adult detention facility. The granting and denial of all variances shall be in writing and made within 30 days of the request for a variance. Such variance will be granted by the commissioner if, in the licensing procedure or enforcement of the standards in these rules:

1. To require a particular adult detention facility to strictly comply with one or more of the provisions will result in undue hardship or jeopardize the health, safety, security, detention, or well-being of the residents or facility staff;

2. The adult detention facility is otherwise in substantial conformity with the standards contained in these rules or making satisfactory progress toward substantial conformity;

3. Granting of the variance will not preclude the facility from making satisfactory progress toward substantial conformity with the rules;

4. The granting of the variance will not leave the interests and well-being of the residents unprotected; and

5. The facility will take such surrogate action as is necessary or available to comply with the general purpose of the standards to the fullest extent possible.

B. Emergencies. During an emergency, as defined in these rules and as declared by a facility administrator, those rules directly affected by the emergency and which, if not suspended, would adversely affect the health, security, safety, detention, or well-being of the persons detained or confined in adult detention facilities or the facility staff, shall be inoperative when an emergency is declared by the administrator.

1. The facility administrator shall notify the Department of Corrections in writing within 72 hours of any emergency which resulted in the suspension of any rule.

2. No suspension of rules because of an emergency declared by a facility administrator may exceed seven (7) days unless the administrator obtains the approval of the Commissioner of Corrections for a variance to the rules and the variance is necessary for the protection of the health, security, safety, detention or well-being of the staff or the persons detained or confined in the institution where the emergency exists.

11 MCAR § 2.175 Personnel standards.

A. Staff health. All personnel shall be screened for tuberculosis prior to employment. The test shall be either the tuberculin skin test or the chest roentgenogram (X-ray). If a skin test is positive, a chest roentgenogram (X-ray) shall be required. Additional testing shall be required upon known exposure to tuberculosis.

B. Recruitment.

1. The selection, appointment and promotion of facility personnel shall be based on assessed ability.

2. There shall be no discrimination on the grounds of race, color, religion, sex or national origin. (Mandatory)

3. Custody personnel shall be a minimum of eighteen (18) years of age.

4. Recruitment standards shall set forth the basic requirements as to age, ability, preparatory experience, physical condition and character. They shall also set forth those qualities which may disqualify.

C. Employee evaluation. Each employee shall complete a probationary period and be evaluated during the probationary period before being permanently appointed. The evaluation shall be in writing, discussed with the employee and made a part of the employee's personnel record.

D. Extra duty. No employee shall be scheduled for duty for two (2) consecutive work periods except where unusual circumstances require reasonable and prudent exception.

E. Staffing requirements.

1. The facility administrator shall prepare and retain a staffing plan indicating the personnel assigned to the facility and their duties.

2. There shall be a single administrator or chief executive of each facility. Where the average daily population of prisoners exceeds fifty (50), administrative assistance shall be required.

3. In the absence of the facility administrator, a staff person shall be designated in charge. (Mandatory)

4. No person shall be detained without a staff person on duty, present in the facility, awake and alert at all times, and capable of responding to the reasonable needs of the prisoner. (Mandatory)

5. Staff members shall not be placed in positions of responsibility for the supervision and welfare of prisoners of the opposite sex in circumstances that can be described as invasion of privacy, degrading or humiliating to the

prisoners. When staff of one sex are used as program resource personnel with prisoners of the opposite sex, staff of the prisoners' sex must be on duty and in the facility. (Mandatory)

6. Maintenance personnel shall be employed to perform preventive, routine and emergency maintenance functions. Custody staff shall not be given physical plant maintenance duties which detract from their primary responsibilities for ongoing supervision of prisoners.

7. In facilities which use the dispatcher/custody position as sole supervision, the dispatcher/custody staff person must be assisted on duty by another custody staff person when the jail population exceeds fifteen (15). This requirement applies only during shifts when prisoners are not in lockup status. (Mandatory)

8. The ratio of custody staff to prisoners shall not be less than one (1) staff person to twenty-five (25) prisoners any time prisoners are not secured in cells, detention rooms or dormitories. A combination of staff resources and physical plant resources shall provide the capability of reporting incidents and responding to emergencies. (Mandatory)

9. Program staff requirements are as follows:

a. Holding facility. No on-site program staff required.

b. Lockups. A staff person shall be designated to coordinate community services and volunteer programming.

c. Jails. A staff person shall be designated to coordinate educational/vocational programs, social services programs, work release and volunteer services programs. The following minimum prisoner to staff ratio shall apply for average daily population:

(1) Under 25: part-time assignment of one (1) staff person;

(2) 25-50: one (1) staff person full-time or staff equivalent including volunteers;

(3) 51-100: two (2) staff persons full-time or staff equivalent including volunteers;

(4) Over 100: three (3) or more full-time staff persons or equivalent.

d. Facilities approved for eight (8) day detention of juveniles shall designate a staff person to coordinate community services and volunteers utilized by the facility. The staff person need not be full time in this position. (Mandatory for eight (8) day detention of juveniles.)

e. Jails with average daily populations of fifty (50) or more shall have the equivalent of one (1) full-time recreation coordinator.

f. Adult corrections facilities.

(1) Adult corrections facilities shall have a minimum of one (1) full-time program coordinator.

(2) A written program shall be developed to include educational/vocational services, recreation programs, social services and volunteer programs.

(3) There shall be the equivalent of one (1) full-time program staff person for every thirty (30) prisoners incarcerated.

10. Ancillary functions. Personnel shall be provided to perform ancillary functions such as transportation or court escort to the extent necessary to ensure that security, supervision of prisoners, the administration of program activities and the efficient operation of the facility are not reduced or jeopardized by such activities.

11 MCAR § 2.176 Staff training.

A. Training plan. Each facility administrator 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.

1. The training plans shall be documented and describe curriculum, methods of instruction and objectives.

2. In-service training plans shall be prepared annually and orientation training plans reviewed and revised to changing conditions.

B. Orientation training. All custody personnel shall complete a minimum of twenty-four (24) hours of orientation training to their duties and responsibilities.

1. Such training shall be satisfactorily completed no more than ninety (90) days from the time of employment.

2. Orientation training shall include instruction in the state laws and state rules pertaining to staff duties. (Mandatory)

C. Probationary period training. All custody personnel shall satisfactorily complete a Department of Corrections approved facility operations programmed instruction course or equivalent training prior to completion of a probationary period.

D. In-service training. All custody personnel, middle and non-management professional personnel shall complete a minimum of 16 hours of in-service training per year. This requirement is not applicable to holding facility staff.

E. Management training. Management personnel and facility administrators who have not completed comparable training or who have not had two (2) or more years administrative experience shall complete the facility orientation training.

F. Part-time and relief staff. Part-time and relief staff shall complete orientation training appropriate to the facility's classification.

11 MCAR § 2.177 Staff deployment, job descriptions, work assignments, post orders, policies and procedures.

A. Job descriptions. Each facility administrator shall develop written job descriptions for all position classifications and post assignments which define responsibilities, duties and qualifications.

B. Work assignments. Work assignments shall be consistent with qualifications as stated in job descriptions and the approved staffing plan of the facility.

C. Policy and procedure manuals. All policies and procedures concerning the facility's operation shall be made available to all employees at the time of employment and as revised thereafter.

D. Personnel policies. Written personnel policies shall be developed by the facility administrator and governing body which specify hours of work, vacations, illness, sick leave, holidays, retirement, employee health services, group insurance, evaluation procedures, promotions, personal hygiene practices, attire, conduct, disciplinary actions and other items which will enable employees to perform their duties properly.

E. Merit system and collective bargaining. Nothing in this rule shall be construed to prevent the establishment of job descriptions, work assignments, channels of communications, or personnel policies with merit systems or collective bargaining agreements.

11 MCAR § 2.178 Records and reports.

A. Maintenance of records and reports.

1. The following records, reports and statistics shall be maintained:

- a. Admission and release records; (Mandatory)
- b. Prisoner personal property records;
- c. Clothing, linen and laundry records;
- d. Records of budget requests and work orders;
- e. Special occurrence records; (Mandatory)

- f. Records of policies and procedures;
- g. Employee personnel records;
- h. Records of staff training;
- i. Accounting records;
- j. Registers; (Mandatory)
- k. Food service records;
- l. Daily logs;
- m. Medical and dental records;
- n. Programming records (holding facilities exempted);
- o. Disciplinary records; and
- p. Good time records (holding facilities exempted).

2. The Department of Corrections shall make available sample approved forms upon request on items A. 1. a.-p.

B. Storage and preservation of records. Space shall be provided for the safe storage of records. (Mandatory)

C. Filing and disposition of prisoner records. Prisoner records shall be incorporated into individual folders and filed.

D. Confidentiality of and access to prisoner records. Confidentiality of prisoner records and prisoner access to factual (non-confidential) data in their personal files shall be provided in conformity with state law. (Mandatory)

11 MCAR § 2.179 Prisoner welfare.

A. Separation. A combination of separate living spaces, sanitation facilities, activity spaces, cell units and detention rooms shall be provided to properly segregate prisoners pursuant to Minn. Stat. § 641.14. (Mandatory)

1. The following prisoners shall be housed separately: female prisoners from male prisoners, juvenile prisoners from adult prisoners and insane prisoners from all other prisoners. (Mandatory)

2. Supervision of coeducational activities shall be provided at all times.

B. Classification.

1. Holding facilities shall comply with separation standards.

2. Lockups, jails and adult corrections facilities shall screen all admissions at the time of booking for the purpose of determining prisoner classification by sex, age, category of offense, degree of escape risk, assaultiveness, and other criteria designed to provide for the safety of prisoners, staff and community, and shall develop and implement a written classification plan or system which includes specific criteria by which prisoners are assigned to housing units.

C. Information to prisoners.

1. Copies of policies and rules shall be made available to all prisoners concerning:

a. Policies and rules governing conduct and disciplinary consequences;

b. Procedures for obtaining personal hygiene and canteen items; and

c. Policies governing visiting, correspondence, bathing, laundry and clothing and bedding exchange.

2. Each prisoner shall be provided information on program options and activities within twenty-four (24) hours (excluding weekends and holidays) of admission. Staff shall review this orally with prisoners who are unable to read. Holding facilities are exempt from this rule.

3. Every prisoner admitted to any facility shall be advised of the official charge or legal basis for detention and confinement, information gathered and to whom disseminated. (Mandatory)

D. Administrative segregation and prisoner discipline.

1. Administrative segregation.

a. Each facility administrator shall develop and implement policies and procedures for administrative segregation.

b. Administrative segregation shall consist of separate and secure housing, but shall not involve any more deprivation of privileges than is necessary to obtain the objective of protecting the prisoner, staff or public.

c. The status of any prisoner placed on administrative segregation shall be reviewed by the facility administrator or his designee minimally every thirty (30) days and the review shall be documented and placed in the prisoner's file.

2. All facilities shall have a prisoner discipline plan, which explains the administrative sanctions for specific behaviors, omissions, the administrative process for handling major and minor violations, the right to internal review and the review process. (Mandatory)

3. Disciplinary segregation.

a. Disciplinary segregation shall be used only in accordance with due process to include at a minimum:

(1) Published rules of conduct and the penalties for violation of rules;

(2) Written notice of alleged violation of a rule;

(3) The right to be heard by an impartial hearing officer and to present evidence in defense; and

(4) The right to appeal.

b. The status of any prisoner placed on disciplinary segregation subsequent to a due process hearing shall be reviewed by the facility administrator or his designee at least once every thirty (30) days.

c. Any prisoner placed in disciplinary segregation prior to a due process hearing shall have a due process hearing within seventy-two (72) hours of such segregation (exclusive of holidays and weekends) unless documented cause can be shown for delays. Examples of causes for delay are:

(1) Prisoner requests for delay; or

(2) Logistical impossibility, as in the case of mass disturbances.

4. Other limitations on disciplinary actions.

a. The disciplinary cells shall have minimum furnishing and space specified in these rules.

b. The decision to deprive a prisoner of articles of clothing and bedding as a result of the prisoner's destruction of such items shall be reviewed by the officer in charge during each eight (8) hour period and the review shall be documented.

c. The delegation of authority to any prisoner or group of prisoners to exercise the right of punishment over any other prisoner or group of prisoners is prohibited.

d. No prisoner shall be deprived of the use of materials necessary to maintain an acceptable level of personal hygiene.

5. Instruments of restraint, such as handcuffs, chains, irons and straight-jackets shall not be used as punishment.

a. Instruments of restraint shall not be used except in the following circumstances:

- (1) As a precaution against escape during a transfer;
 - (2) On medical grounds by direction of a consulting or attending physician or psychologist; or
 - (3) By order of the facility administrator or person in charge in order to prevent a prisoner from injuring himself or others or from damaging property.
- b. The facility administrator shall develop written policies and procedures to govern the use of restraints.
 - c. Such instruments shall not be applied for any longer time than is strictly necessary.
 - d. Each incident involving the use of restraints consistent with D. 5. a. (2) or D. 5. a. (3) shall be documented and on file.
6. Disciplinary records shall be maintained on all documented disciplinary infractions and punishment administered.

E. Activities.

1. Each facility administrator shall develop and implement a written plan for the constructive scheduling of prisoner time which shall be consistent with the established legal rights of prisoners, the type and status of prisoners detained and the facility's classification.
2. Prisoners shall have an opportunity to participate in religious services and counseling.
 - a. The facility administrator shall arrange with the clergy to conduct religious services and provide counseling if requested.
 - b. Prisoners requesting private interviews or counseling (not capable of being audio monitored), regarding religious, personal or family problems with accredited clergy, nuns, seminarians and laypersons active in community church affairs, shall be afforded this opportunity within such policies as are reasonable and necessary to protect the facility's security.
 - c. No prisoner shall be required to attend religious services and religious services shall be held in such a location that the prisoners who do not wish to participate are not exposed to the service.
 - d. Any prisoner desiring to read the Bible or sacred book of another religion shall be provided a copy at the expense of the appointing authority. (Mandatory)
 - e. Attendance or lack of attendance at religious services shall not be considered a criteria for any rights or privileges within the facility.

3. The facility administrator shall develop a library service including:

a. Access to current leisure reading material such as books, magazines and newspapers;

b. Textbooks necessary to complete a course of study to the extent resources permit; and

c. Legal books and references requested by prisoners to the extent resources permit. The facility's governing body shall not be responsible for purchasing such materials.

4. Work assignments and education.

a. A plan shall be developed in conjunction with the local school district to meet educational needs of juveniles detained. (Mandatory for eight (8) day detention of juveniles.)

b. The facility shall develop a policy and procedure on work by juveniles. It shall include:

(1) Work activities such as maintaining own room and maintaining activity areas;

(2) Exemption from performance of personal duties for staff or maintenance of areas away from the facility;

(3) Eligibility criteria for work activities; and

(4) Statement that care shall be taken not to require juveniles to perform work they cannot physically perform.

c. Lockups, jails and adult corrections facilities shall develop a policy and procedure on work by adults. It shall include:

(1) Adults awaiting court appearance shall not be compelled to participate in work or rehabilitation programs beyond maintaining the immediate living area;

(2) Work programs for both sentenced and voluntary unsentenced prisoners;

(3) Unsentenced prisoners shall work on a voluntary basis only;

(4) Eligibility criteria for work activities;

(5) A statement that sentenced prisoners shall not be compelled to work more than ten (10) hours per day (Mandatory); and

(6) A statement that work shall not be required which cannot be done due to physical limitations.

5. The facility administrator shall develop a plan providing opportunities for physical exercise and recreational activities for all prisoners consistent with the facility's classification. The plan shall include:

a. Rules necessary to protect the facility's security and the prisoners' welfare;

b. A minimum of one (1) hour of activity each day in lockups and jails;

c. A minimum of two (2) hours daily of scheduled supervised physical exercise and recreational activities in adult corrections facilities;

d. Indoor space and equipment for active recreation for jails and adult corrections facilities; and

e. Outdoor recreational space, equipment and supportive staff for outdoor recreational programming in adult corrections facilities consistent with weather conditions.

f. Juveniles shall be allowed the opportunity to be involved in a minimum of two (2) hours of active recreation per day and two (2) hours of leisure time activities per day. A minimum of two (2) hours of such activity per day shall be allowed in a program area separate and distinct from the juveniles' living area and shall be pre-planned and structured. (Mandatory for eight (8) day detention of juveniles.)

g. The facility administration shall develop and implement in-cell or in-detention room programs for those juveniles considered to be too dangerous to release from the cell or detention room. (Mandatory for detention of juveniles.)

h. Facilities approved for eight (8) day detention of juveniles shall provide leisure time activities and equipment such as television, radio, table games and hobby craft items. (Mandatory for eight (8) day detention of juveniles.)

i. Adult and juvenile prisoners on segregation status shall have a minimum of one hour of out-of-cell physical exercise per day.

F. Visiting.

1. Each facility administrator shall develop and implement a prisoner visiting policy. The policy shall be in writing and shall include:

a. Space for non-monitored visits between the prisoner and his attorney;

b. Schedule of visits which include days and times;

c. Establishment of a uniform number of permissible visits and the number of visitors permitted per visit;

d. Policies for parents, guardians and attorneys visiting juvenile prisoners shall be as unrestrictive as is administratively possible. The initial visit for parents, guardians and attorneys shall be permitted at any time; (Mandatory)

e. Adult prisoners shall be permitted an initial visit with a member or members of their immediate family at the next regularly scheduled visiting period;

f. Lockups, jails and adult corrections facilities shall provide a minimum of eight (8) visiting hours per week;

g. Visits shall be allowed for identified members of a prisoner's immediate family, his counsel and clergy;

h. When a visit to a prisoner is denied for reasonable grounds on the belief that the visit might endanger the security of the facility the action and reasons for denial shall be documented;

i. Visitors shall register, giving names, addresses, relationship to prisoner and nature of business; and

j. Any area used for prisoner visiting shall not be capable of audio monitoring.

G. Correspondence.

1. Each facility administrator shall develop a plan for prisoner mail consistent with established legal rights of prisoners and reasonable and necessary facility rules to protect the facility's security.

2. The volume of written mail to or from a prisoner shall not be restricted.

3. Mail shall not be read or censored if it is between a prisoner and an elected official, officials of the Department of Corrections, the Ombudsman for Corrections, attorneys or other officers of the court. Inspection of incoming mail is permitted in the presence of the prisoner. (Mandatory)

4. Cash, checks or money orders shall be removed from incoming mail and credited to the prisoners' accounts.

5. If contraband is discovered in either incoming or outgoing mail, it shall be removed.

6. Indigent prisoners shall receive a postage allowance sufficient to maintain communications with the persons listed in 3.

H. Clothing, bedding and laundry services.

1. Clothing.

a. All prisoners admitted to the facility and assigned to a living unit shall be issued a set of facility clothing if kept seventy-two (72) hours. Personal clothing may be returned after laundering at the discretion of the facility administrator. The clothing issued shall consist of clean socks, and suitable outer and undergarments. (Mandatory)

b. Clothing shall be exchanged twice each week, at a minimum.

c. The facility shall have available sufficient clothing to insure each prisoner neat, clean clothing appropriate to the season.

d. Prisoners' excess personal clothing shall be either mailed to, picked up by, or transported to designated family members or stored in ventilated lockers or boxes designed for this purpose and properly identified, inventoried and secured.

e. Prisoners possessing excess personal property shall sign and receive a copy of the inventory record.

2. Linens and bedding.

a. Each prisoner admitted to the facility shall be issued:

(1) One (1) bath towel, one (1) hand towel, one (1) washcloth;

(2) One (1) clean, firm, fire-retardant mattress; (Mandatory)

(3) Two (2) sheets or one (1) sheet and a clean mattress cover; (Mandatory)

(4) Blankets sufficient to provide comfort under existing temperature conditions; (Mandatory) and

(5) One (1) pillow and one (1) pillow case.

b. Clean linens shall be furnished once each week, at a minimum.

c. The facility administrator shall develop a policy and procedure for removing clothing and bedding from a prisoner. The following shall be included:

(1) Clothing and bedding shall be removed from a prisoner only when the prisoner's behavior threatens the health, safety and/or security of self, other persons and/or property;

(2) Clothing and bedding shall be returned to the prisoner as

soon as it is reasonable to believe that the behavior which caused the action will not continue.

3. Laundry services.

a. Laundry services shall be managed so that daily clothing, linen and bedding needs are met.

b. Care shall be taken to maintain separation of clean and soiled linens and clothing in the collection, storage and transportation process in accordance with standards required by the Minnesota Department of Health.

c. Where laundry service is obtained from an outside establishment, the service shall be provided under a written agreement which shall specify that the service meets standards required by the Minnesota Department of Health.

d. Prisoners' personal clothing shall be laundered in accordance with appropriate washing procedures for fabrics.

1. Emergencies and special occurrences.

1. Emergency plan. The facility administrator shall develop a written disaster plan. The plan shall include: (Mandatory)

- a. Location of alarms and fire fighting equipment;
- b. Emergency drill policy;
- c. Specific assignments and tasks for personnel;
- d. Persons and emergency departments to be notified;
- e. Procedure for evacuation of prisoners; and
- f. Arrangements for temporary confinement of prisoners.

2. Planning shall include policies and procedures designed to protect the public by securely detaining prisoners who present a danger to the community or to themselves.

3. There shall be a review of emergency procedures once every three (3) months. This 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; and

e. Specification of evacuation routes and procedures.

4. All incidents of a special or serious nature which endanger the lives of staff or prisoners and/or physical plant, shall be reported in writing to the department within ten (10) days.

a. Such reports shall include the name(s) of person(s) involved (staff and prisoners), nature of the special occurrence, actions taken, and the date and time of the occurrence.

b. Special occurrences shall include:

(1) Suicide;

(2) Homicide;

(3) Death (other than suicide or homicide);

(4) Serious injury or illness incurred subsequent to detention;

(5) Escape or runaway;

(6) Fire causing serious damage;

(7) Riot;

(8) Assaults requiring medical care;

(9) Other serious disturbances; or

(10) Occurrences of infectious diseases and disposition of the occurrences.

c. Special occurrences shall be reported on forms provided by the Department of Corrections or comparable forms used by the facility.

d. In the event of an emergency such as serious illness, accident, imminent death or death, the prisoner's family or others who maintain a close relationship with him shall be notified.

5. Prisoner death. When a prisoner's death occurs:

a. The date, time and circumstances of the prisoner's death shall be recorded in the prisoner's record;

b. If the prisoner dies in the facility, the coroner's office shall be notified;

c. Personal belongings shall be handled in a responsible and legal manner;

d. Records of a deceased prisoner shall be retained for a period of time in accordance with law; and

e. The facility administrator shall observe all pertinent laws and allow appropriate investigating authorities full access to all facts surrounding the death.

11 MCAR § 2.180 Food service.

A. General requirements. The goals of food service in each facility shall be to provide prisoners with food and beverages that are nutritionally adequate, palatable, produced in a manner to prevent foodborne illness, of adequate quantity and variety, served at appropriate temperatures and prepared by methods which conserve nutritional value.

B. Food handling practices. Food service shall be provided in accordance with the Minnesota Department of Health (7 MCAR §§ 1.161-1.170). (Mandatory)

C. Dietary allowances. Nutritional needs of prisoners shall be met in accordance with their needs, physician's orders and meet the dietary allowances contained in C. All lockups, jails, adult corrections facilities and holding facilities shall have menu planning sufficient to provide each prisoner the following specified food servings per day.

1. Two (2) or more servings per day of meat or protein. A serving of meat or protein is defined as:

a. 2-3 ounces cooked (equivalent to 3-4 ounces raw) of any meat without bone, such as beef, pork, lamb, poultry, variety meats such as liver, heart and kidney.

b. 2 slices prepared luncheon meat.

c. 2 eggs.

d. 2 ounces of fresh or frozen cooked fish or shellfish, or 1/2 cup canned fish.

e. 1/2 cup cooked navy beans plus one ounce of animal protein.

2. Two (2) or more servings per day of milk. A serving is defined as eight (8) ounces (one cup) of milk. A portion of this amount may be served in cooked form, such as cream soups or desserts. The following substitutes may be used:

a. 1 ounce of American cheese for 3/4 cup milk.

b. 1/2 cup creamed cottage cheese for 1/3 cup milk.

c. 1/2 cup ice cream for 1/4 cup milk.

3. Two (2) or more servings per day of vegetables, one of which is deep green or yellow for vitamin A. A serving is defined as 1/2 cup. Potatoes may be included once daily as a vegetable.

4. Two (2) or more servings per day of fruit, one of which is citrus (i.e., orange, grapefruit) or tomato or other good source of vitamin C. A serving of citrus fruit or tomato is defined as:

a. 1 medium orange or 4 ounces of orange juice.

b. 1/2 grapefruit or 4 ounces of grapefruit juice.

c. 1 large tomato or 8 ounces of tomato juice.

5. Four (4) or more servings per day of whole grain or enriched cereal and bread products. A serving is defined as:

a. 1 slice bread.

b. 1/2 cup cooked cereal.

c. 3/4 cup dry cereal.

d. 1/2 cup macaroni, rice, noodles and spaghetti.

6. Use butter, fortified margarine, cream or salad oil in moderate amounts to make food palatable.

7. Additional servings of the above foods may be used or the following foods added to meet caloric needs: soups, sweets such as desserts, sugar, jellies, or other fats such as bacon, cream and salad dressings.

D. Frequency of meals. There shall not be more than fourteen (14) hours between a substantial evening meal and breakfast. Where prisoners are not routinely absent from the facility for work or other purposes, at least three (3) meals shall be made available at regular times during each twenty-four (24) hour period.

E. Therapeutic diets. Any facility housing prisoners in need of medically prescribed therapeutic diets shall have documentary evidence that such diets are provided as ordered by the attending physician. (Mandatory)

F. Use of food in discipline. Food shall not be withheld as punishment. (Mandatory)

G. Supervision of meal serving. All meals shall be served under the direct supervision of staff.

H. Menu records. Records of menus and of foods purchased shall be filed for one year.

I. Hot meal minimum. A minimum of one (1) hot meal shall be provided for each twenty-four (24) hours of confinement.

J. Canteen.

1. All lockups, jails and adult corrections facilities with approved capacities of fifty (50) or less shall provide prisoners with a printed list of approved canteen items to be purchased by a facility staff member at local stores if the facility does not operate a canteen in the facility.

2. All such facilities with approved capacities over fifty (50) shall establish, maintain and operate a canteen in the facility.

3. Holding facilities are not required to provide canteen services.

4. All vending machines shall meet Minnesota Department of Health and Minnesota Department of Agriculture requirements.

K. Budgeting, purchasing and accounting. The facility administrator of lockups, jails, and adult corrections facilities shall establish policies and procedures for food service budgeting, purchasing and accounting.

L. Containers and food storage.

1. All food or food products, prepared or in bulk shall be stored in approved seamless containers after opening of the original container. Dry milk and milk products after opening shall be stored in seamless, air-tight containers.

2. Non-perishable food and single service articles shall be stored off the floor on washable shelving in a ventilated room. They shall be protected from dust, flies, rodents, vermin, overhead leakage and other sources of contamination, and shall be placed away from areas with excessive heat.

3. All perishable food (fresh fruit and vegetables) and potentially hazardous food (meat and dairy products) shall be stored off the floor on washable, corrosion-resistant shelving under sanitary conditions, and at temperatures which will protect against spoilage. Meat and dairy products shall be stored at forty (40) degrees Fahrenheit or below, and fruit and vegetables at fifty (50) degrees Fahrenheit or below. When stored together, the lower temperature shall apply. Temperatures shall be monitored by an accurate thermometer.

4. The storage of detergents, cleaners, pesticides and other non-food items, including employees' personal items, is prohibited in food storage areas.

5. Returned portions of food and beverages from individual servings shall not be reused unless such food or beverage is served in a sealed wrapper or container which has not been unwrapped or opened.

6. Ice shall be stored and handled in a sanitary manner. Stored ice shall be kept in an enclosed container. If an ice scoop is used, the scoop shall be stored in a separate compartment to prevent the handle from having contact with the ice.

M. Transport of food. Food shall be covered during transport through non-dietary areas, but need not be covered when served in a contiguous dining area. The food service system shall be capable of maintaining hot foods at one-hundred-fifty (150) degrees Fahrenheit or higher; cold foods at forty (40) degrees Fahrenheit or lower. A dumbwaiter or conveyor, which cab or carrier is used for the transport of soiled linen or soiled dishes, shall not be used for the transport of food.

11 MCAR § 2.181 Security.

A. Policies and procedures. Security policies and procedures shall be written, operational and include the following:

1. Control and recovery of contraband; (Mandatory)
2. Visitor and visit control;
3. Delivery and service procedure;
4. Equipment maintenance and efficiency;
5. Prohibition on firearms in prisoner areas; (Mandatory)
6. Search and shakedown schedules and procedures;
7. Escort of prisoners outside security areas;
8. One-half hour interval security inspection routines (one-hour intervals are acceptable if proper auditory supplements are provided); (Mandatory)
9. Escape prevention and action plans;
10. Tool, medication, key and weapon control procedures;
11. Count procedure;
12. Classification of prisoners;
13. Lockup and disciplinary procedures; and
14. Riot prevention and control procedures.

B. Admissions.

1. Admission policies and procedures shall include the following:

- a. All admissions and prisoners on release status returning to the facility shall be thoroughly searched;
- b. Showering and delousing if indicated;
- c. An assessment of health status;
- d. Security classification;
- e. Inventory of prisoner's property;
- f. Fingerprinting and photographing, if appropriate; and
- g. Completion of admission form.

2. No prisoner shall be received or released by the staff of a facility until the arresting or escorting officer has produced proper credentials and/or until the proper documents have been completed, identifying the purpose for detention or release. (Mandatory)

3. All intake procedures shall be conducted in a manner and location that assures the personal privacy of the prisoner and the confidentiality of the transaction from unauthorized personnel.

C. Releases.

1. Upon release of a prisoner, the property of that prisoner, unless held for authorized investigation or litigation, shall be returned with a receipt for the prisoner to sign.

2. Prisoners shall be permitted to make arrangements for transportation prior to release.

3. No prisoner shall be released in intemperate weather without proper clothing to ensure his health and comfort.

D. Search and shakedowns.

1. Visitors who seek to enter the security area of the facility shall not be permitted admission if they refuse to submit to a requested search conducted by a staff member of the same sex.

2. The facility shall be regularly inspected for contraband, evidence of breaches in security, and inoperable security equipment.

3. All materials delivered to or transported from the facility shall be inspected for contraband prior to distribution.

E. Locks and keys.

1. All keys to security locks shall be properly tagged and stored in a secure cabinet within a secure area, and out of reach of the prisoners or the public. (Mandatory)

a. At least one new complete set of facility keys shall be kept on hand for replacement purposes.

b. Keys that serve a critical security purpose shall be easily identifiable and never issued except upon order of the facility administrator or person in charge, and in accordance with established procedure.

c. No security keys shall be made available to prisoners regardless of status.

2. All locks to security doors or gates shall be inspected regularly to insure efficient operation.

a. No lock to a security door or gate shall be permitted to be inoperable or left in an unsuitable condition.

b. No prisoner shall be placed in a cell or area which has inoperable locks. (Mandatory)

F. Dangerous materials. Materials dangerous to either security or safety shall be properly secured. (Mandatory)

G. Court procedure.

1. Each facility shall have a written policy describing the system of counting prisoners.

2. Formal counts shall be completed with an official entry made in the daily log after each mass movement and at least once each eight (8) hours.

11 MCAR § 2.182 Environmental-personal health and sanitation.

A. Availability of medical and dental resources. (Mandatory)

1. Each facility shall have a licensed physician(s) or medical resource(s) such as a hospital or clinic designated for the medical supervision and treatment of prisoners. Resources shall insure twenty-four (24) hour a day service.

2. Each facility shall have emergency dental care available to prisoners.

3. Ambulance services shall be available on a twenty-four (24) hour a day basis.

4. A prisoner shall be examined by trained medical personnel if the

prisoner is visibly ill, chronically ill, or when it is suspected that medical attention is necessary.

B. Posting of available resources. A listing of telephone numbers of the medical, dental and ambulance services available shall be posted at each staff station along with the schedule of availability.

C. Hospitalization of a prisoner.

1. Each facility shall have an agreement with a hospital in the same or nearby community permitting admission of a prisoner on the recommendation of the attending physician.

2. When a prisoner requires hospitalization, he shall be guarded on a twenty-four (24) hour per day basis unless one of the following conditions has been satisfied:

a. The prisoner is not in need of custody supervision; or

b. The prisoner is medically incapacitated in the opinion of the attending physician.

D. First aid.

1. All custody personnel responsible for the supervision, safety and well-being of prisoners shall be trained in emergency first aid.

2. All facilities shall have a minimum of one (1) first aid kit located at the facility's control center or primary staff station.

E. Medical and dental records.

1. Each facility shall record all complaints of illness or injury and actions taken.

2. Medical or dental records shall be maintained on prisoners under medical or dental care. (Mandatory) Included in the records shall be:

a. The limitations and disabilities of the prisoner;

b. Instructions for prisoner care;

c. Orders for medication including stop date;

d. Any special treatment and/or diet;

e. Activity restriction; and

f. Times and dates when the prisoner was seen by medical personnel.

3. Medical and dental records shall be available to staff for consultation in case of illness and for recording administration of medications.

F. Preventive health services.

1. The facility administrator shall develop and implement a written plan for personal hygiene practices of all prisoners with special assistance for those prisoners who are unable to care for themselves.

2. Delousing materials and procedures shall be approved through consultation with trained medical personnel.

3. Each prisoner shall be permitted daily bathing or showering.

4. Indigent prisoners shall receive personal hygiene items at facility expense. (Mandatory)

G. Delivery, supervision and control of medicine.

1. Delivery of medicine shall be conducted by licensed medical, or nursing personnel or by facility staff who have successfully completed an approved training program on the delivery of medicine for unlicensed personnel.

2. The delivery of legend drugs by unlicensed staff shall be under the direction of a consulting physician.

3. Every facility administrator, in consultation with a licensed physician, shall develop a plan and procedure for the secure storage, delivery and control of medicine. Such plans shall include:

a. Storage.

(1) Medicine shall be stored in a locked area;

(2) The storage area shall be kept locked at all times;

(3) Medicine requiring refrigeration shall be refrigerated and secured;

(4) Prisoners shall not be permitted in medicine storage area;

(5) Only staff authorized to deliver medicine shall have access to keys for medicine storage area;

(6) Stock supplies of legend (prescription-type) drugs shall not be maintained; (Mandatory)

(7) All prescribed medicine shall be kept in its original container, bearing the original label; and

(8) All poisons and medicine intended for external use shall be clearly marked and stored separate from medicine intended for internal use.

b. Policy shall dictate the delivery of medicine and shall include:

(1) Medication administered by injection shall be given by a physician, registered nurse or licensed practical nurse. Diabetics under physician order and direct staff supervision shall be permitted to self-administer insulin; (Mandatory)

(2) Medicine delivered to prisoners shall be self-administered under staff supervision;

(3) There shall be a means for the positive identification of the recipient of medicine;

(4) Procedures and records to assure that medicines shall be delivered in accordance with physician instructions, and by whom;

(5) No prisoner while receiving legend drugs shall receive any non-legend drug without the approval of the attending physician; (Mandatory)

(6) Procedures for confirming that medicine delivered for oral ingestion has been ingested;

(7) Procedures for reporting to the physician any adverse reactions to drugs. Any such reports shall be included in the prisoner's file; (Mandatory)

(8) Procedures for reporting a prisoner's refusal of prescribed medicine to the attending physician, and an explanation made in the prisoner's record; (Mandatory)

(9) Procedures for insuring that no prisoner is deprived of medicine as prescribed because of penalty or staff retaliation; (Mandatory)

(10) Procedures which prohibit the delivery of medicine by prisoners; (Mandatory) and

(11) Procedures requiring that a physician be contacted for instructions prior to the next prescribed medicine dosage time for all newly admitted prisoners who are either in possession of prescribed medicine or indicate a need for prescribed medicine. (Mandatory)

c. Records of receipt, the quantity of such drugs, and the disposition of all legend drugs shall be maintained in sufficient detail to enable an accurate accounting.

4. Prescribed medication belonging to a prisoner shall be given to him

or to the appropriate authority upon transfer or release. This shall be recorded in the prisoner's file.

5. Unused prescribed medicine shall be destroyed by incineration or by flushing into the sewer system. A notation of the destruction shall be made in the prisoner's record and shall include a statement of what was destroyed, who destroyed it and how it was destroyed.

6. Unused portions of controlled substances shall be handled by contacting the Minnesota Board of Pharmacy. (Mandatory)

7. Methadone programs shall not be made available unless in compliance with all existing laws governing such programs. (Mandatory)

H. Reporting suspected contagious disease. It shall be the responsibility of the facility administrator or person in charge to report to the Minnesota Department of Health any known or suspected contagious disease. (Mandatory)

I. Separation. Prisoners suspected of having a contagious disease shall be separated from other prisoners.

J. Mentally ill prisoners. Policy shall be developed for the management of mentally ill prisoners and shall include:

1. A procedure for determining that a prisoner is mentally ill. A physician or licensed psychologist shall be consulted for this determination;

2. A procedure for managing prisoners who are suspected of being mentally ill and considered to be a danger to self or others;

3. A statement that if a prisoner is mentally ill and procedures are implemented to separate and/or restrain the prisoner, a licensed physician shall be contacted within eight (8) hours and shall approve a written plan which outlines the procedures to be followed in managing the behavior; and

4. A criteria and procedure for transferring the mentally ill prisoner to a licensed medical facility. The criteria shall include approval of a licensed physician and shall be done in accordance with Minn. Stat. § 253A.04. (Mandatory)

K. Housekeeping, sanitation and plant maintenance.

1. The facility shall be kept in good repair to protect the health, comfort, safety and well-being of prisoners and staff.

2. Each person responsible for plant maintenance, housekeeping and sanitation shall develop a written maintenance plan.

3. Housekeeping, sanitation, water supplies, plumbing, sewage disposal,

solid waste disposal, and plant maintenance conditions must comply with rules required by the Minnesota Building Code, the Minnesota Fire Marshal's Office, the Minnesota Department of Health, the Minnesota Department of Labor and Industry (O.S.H.A.) and other departmental rules having the force of law. (Mandatory)

4. The facility administrator shall establish a plan for the daily inspection of housekeeping, sanitation and plant maintenance.

5. The facility administrator shall submit to the governing body a cost list of repairs and supplies needed in order to maintain the facility. This shall be done on a monthly basis or as part of the annual budget.

6. The facility administrator shall develop policies and procedures designed to detect building and equipment deterioration, safety hazards and unsanitary conditions. Policies and procedures shall include:

a. Requirement that facility staff report unsanitary and unsafe conditions as well as physical plant and equipment repairs and replacement needs; (Mandatory)

b. A process for prioritizing work requests and reporting to the governing body in an expedient manner; and

c. A records system for review of budget and work requests, expenditures, dates and actions pursuant to detection of need, submission of work orders and completion of requests.

7. Any condition in the facility conducive to harborage or breeding of insects, rodents, or other vermin shall be eliminated immediately. (Mandatory)

Repealer. Rules 11 MCAR §§ 2.100-2.111 are repealed.

Department of Corrections

Rules Governing Programs and Services for Battered Women

11 MCAR § 2.201 Introduction. Minn. Stat. § 241.63, clause (g), requires that the Commissioner of Corrections promulgate all rules necessary to implement the provisions of Minn. Stat. §§ 241.61-241.66 and 256D.05, subd. 3, including emergency rules.

11 MCAR § 2.202 Definitions. For the purpose of 11 MCAR §§ 2.201-2.207, the terms defined in this rule have the meanings given them.

A. "Service provider" means any public agency or private nonprofit corporation which plans, designs, and implements any of the following:

1. Emergency shelter services and support services for battered women;
2. Support services for battered women;
3. Public education programs designed to promote public and professional awareness of the problems of battered women; or
4. Programs for violent partners.

B. "Purchase of service agreement" means a contract or grant agreement between the department and service provider which specifies the programs or services to be provided, the method of delivering the programs or services, the responsibilities of the staff, the budget, and a commitment to assist in the necessary data collection and evaluation research to be completed on the program or service.

C. "Department" means the Department of Corrections.

D. "Emergency shelter services" means housing facilities which regularly provide food, secure lodging, and a crisis phone line with 24-hour accessibility for women and children seeking safety from assault primarily by a spouse, male relative, or male with whom they are residing or have resided in the past.

E. "Support services" means any of the following: advocacy, emotional support, counseling, legal information, medical referral, transportation, child care, information and referral services, and other services needed by battered women and their families.

F. "Public education programs" means programs designed to promote public and professional awareness of the problems of battered persons.

G. "Commissioner" means the Commissioner of the Department of Corrections.

H. "Data" means summary data as defined in Minn. Stat. § 15.162, subd. 9.

I. "Law enforcement agencies" means police and sheriff's departments operating in Minnesota.

J. "Request for proposals" means solicitation of applications in a uniform format for distribution of funds allocated by the Legislature for programs and services for battered women.

11 MCAR § 2.203 Establishment of an advisory task force.

A. The commissioner shall appoint a nine member advisory task force to advise him on implementation of Minn. Stat. §§ 241.61-241.66. The provisions of Minn. Stat. § 15.059, subd. 6 shall govern the terms, compensation and removal of members of the advisory task force.

B. Prior to the appointment of any new task force member, the existing task force shall choose no more than five organizations, one of which shall be the Department of Corrections, to send representatives to a review committee which shall recommend a slate of applicants based on the following:

1. Criteria mandated in Minn. Stat. § 241.64, subd. 2;
2. Applicant's understanding of problems facing battered women;
3. Representatives from both metro and non-metro areas of the state;
4. Representation from at least three minority groups.

C. If other qualifications are equal, priority in appointments shall be given to persons who have personally experienced partner abuse.

11 MCAR § 2.204 Project coordinator.

A. The advisory task force shall screen applicants for the position of project coordinator and shall recommend to the commissioner the names of five applicants. In appointing the project coordinator, the commissioner shall give due consideration to the list of applicants submitted to him by the advisory task force.

B. If the commissioner takes action contrary to the recommendation of the advisory task force, the commissioner or his designee shall meet with the task force or with representatives of the task force, appointed by its chair, to discuss the rationale for his decision.

C. The project coordinator shall be available to attend all meetings of the advisory task force and its subcommittees.

11 MCAR § 2.205 Awarding grants and contracts.

A. The department shall issue a request for proposals from service providers. The advisory task force shall use uniform procedures and criteria in considering all proposals which comply with the request for proposal outline.

B. The department shall solicit proposals from interested public and private nonprofit organizations, women's organizations, and diverse cultural groups in the state.

C. The department shall establish award criteria and procedures with the participation of the advisory task force prior to any request for proposals. The criteria and procedures shall be available to the public upon request.

D. The advisory task force shall review grant applications and recommend to the commissioner names of applicants recommended to receive funds and the amount of funds recommended for each applicant.

E. The department shall disburse funds appropriated for the battered women's projects.

F. A portion of the funds appropriated by the Legislature shall be retained by the department for the purpose of implementing public education programs if the commissioner determines that the department can use the funds for their designated purpose more effectively than by purchase of service agreements. The advisory task force shall advise the department on the use of retained funds.

G. All planning, development, data collection, funding and evaluation of programs and services for battered women which are funded under 11 MCAR §§ 2.201-2.207 shall be conducted with the advice of the advisory task force.

11 MCAR § 2.206 Responsibilities of service providers.

A. To be eligible for initial funding consideration from the department for the establishment and operation of programs and services for battered women, service providers shall submit a proposal which includes, at a minimum, the following information:

1. The full name and address of the service provider;
2. The proposed location of the program or service;
3. A budget on forms provided by the department which itemizes such major categories as:
 - a. Personnel;
 - b. Travel;

- c. Equipment and supplies;
 - d. Contracted services;
 - e. Printing;
 - f. Communications;
 - g. Other program or service costs;
 - h. Costs for assistance to individuals, including emergency loan funds for residents, rent deposits, legal fees, and moving costs;
 - i. Costs related to the rent, maintenance, or purchase of the facility operated by or occupied by the applicant; and
 - j. Evaluation;
- 4. A narrative for each line item on the budget request;
 - 5. A description of other funding sources, fund-raising efforts, in kind contributions and services and other items relevant to financial status during the period funds are requested;
 - 6. A description of the duties of each staff position;
 - 7. A statement of the extent to which battered women in the community have been involved and participated in the proposal;
 - 8. A statement of the ways in which potential service providers have solicited support and cooperation from potentially interested or relevant community agencies or groups such as law enforcement agencies, courts, social service agencies, and local boards or departments of health;
 - 9. A timetable for operation;
 - 10. A description of the types of programs or services to be available;
 - 11. A description of the role to be played by volunteers, if any, in the operation of the emergency shelter service or public education program;
 - 12. A statement of compliance with program or service evaluation requirements as established by the commissioner with the consultation of the advisory task force; and
 - 13. Definition of the target group expected to be served.
- B. To be eligible for renewed funding consideration from the department for continued operation of services and programs for battered women, service providers shall submit a report which includes, at a minimum, the following information:

1. The full name of the service provider;

2. A budget for the year funding is requested, on forms provided by the department, which itemizes such major categories as:

- a. Personnel;
- b. Travel;
- c. Equipment and supplies;
- d. Contracted services;
- e. Printing;
- f. Communications;
- g. Other program or service costs;

h. Costs for assistance to individuals, including emergency loan funds for shelter residents, rent deposits, legal fees, and moving costs;

i. Costs related to the rent, maintenance, or purchase of the facility operated by or occupied by the applicant; and

j. Evaluation;

3. A narrative for each line item on the budget for funds requested;

4. A description of other funding sources, fund-raising efforts, in kind contributions and services and other items relevant to financial status during the period when funds are requested; and

5. A statement of compliance with program or service evaluation requirements.

C. Purchase of service agreements shall provide for the following:

1. The collection, recording and reporting of descriptive data on persons served and the services provided as requested by the commissioner;

2. Complete reports requested by the commissioner; and

3. Implementation of a fiscal policy.

D. Any emergency shelter program operated on the basis of this appropriation shall show evidence that it is licensed by the Department of Health or the Joint Commission on Hospital Accreditation and has passed local fire inspection.

11 MCAR § 2.207 Submission of data—mandatory.

A. Reports on battered women shall be submitted to the department in accordance with Minn. Stat. § 241.66.

B. Reports shall, at a minimum, include summary data which discloses the date of occurrence, location, and characteristics of battering.

Chapter 1 Adult Halfway Houses

11 MCAR §§ 2.401-2.440
(December 1980)

11 MCAR § 2.401 Introduction.

A. Minn. Stat. § 241.021 (1976), as amended by Laws of 1978, ch. 778, to be effective September 1, 1979, provides that the Commissioner of Corrections promulgate rules establishing minimum standards for all correctional facilities throughout the state whether public or private, established and operated for the detention and confinement of persons detained or confined therein according to law except to the extent that they are inspected or licensed by other State regulating agencies. The rules which follow are intended to fulfill that requirement for all adult halfway houses.

B. The Commissioner of Corrections, has, pursuant to Laws of 1978, ch. 778, § 6, appointed a citizens' advisory task force to assist in the development of rules contained herein.

C. The purpose of these standards is to facilitate the implementation of rules in accordance with Minn. Stat. § 241.021, and to provide a framework for inspection and licensing of adult halfway houses.

11 MCAR § 2.402 Definitions. Definitions, for the purpose of these rules are as follows:

A. "Youth" are persons under eighteen (18) years of age.

B. "Adults" are persons eighteen (18) years of age or over.

C. "Department of Corrections", "Department" or "DOC" shall mean Minnesota State Department of Corrections.

D. "Commissioner" shall mean the Commissioner of the Minnesota State Department of Corrections or his designee.

E. "Applicant" is any person(s), agency or organization applying for a license or renewal of license under this rule.

F. "License" is a certificate issued by the commissioner authorizing the operator to provide specified services for a period of a year in accordance with the terms of the license, Minn. Stat. § 241.021, and the rules of the commissioner.

1. "Provisional license" is: 1) a certificate that will be issued for a maximum six (6) month period prior to granting a license; and 2) shall be issued for another six (6) month period if the applicant is temporarily unable to substantially comply with the requirements of these rules.

2. "Renewal license" is a license issued for a period subsequent to the

period for which the license was issued and where there has been no intervening period during which a license has been revoked.

3. "Revocation of license" means that the operator of a facility shall no longer be authorized to provide services.

4. "Suspension of license" means that the operator is not authorized to provide services for a specified period of time, or until the facility is found to be in substantial compliance with licensing requirements.

G. "Community Correctional Facility" or "CCF" is any community based facility, public or private, including group foster homes, juvenile halfway houses, adult halfway houses and shelter facilities having a residential component, the primary purpose of which is to serve persons placed therein by a court, court services department, parole authority, or other correctional agency having dispositional power over persons convicted of a crime or adjudicated to be delinquent.

H. "Adult Halfway House" means any community based residential facility, the primary function of which is to provide, through its own program or community resources, services to adults accused of, charged with, or convicted of a criminal offense.

I. "Waiver" is written permission from the commissioner to disregard a particular section of a licensing rule.

J. "Residential facility" means any community correctional facility which regularly provides twenty-four (24) hour a day care including food and lodging.

K. "Governing Board/Sponsoring Agency" is the body which formulates the policies and procedures governing a community correctional facility, this body being composed, at a minimum, of the offices of president, secretary and treasurer. In non-profit corporations the administrator of the program shall not be a member of the board of directors. In addition, there may be an advisory board, where appropriate, including membership from the specific target group and the immediate neighborhood population, and additional membership according to the size and function of the individual program.

L. "Facility administrator" refers to the administrator of the program, employed or appointed by the board or sponsoring agency, to implement its policies, programs and treatment plans.

M. "Supervising agent" is the parole/probation agent working with an individual resident or set of residents living in a single CCF.

N. "Program" is a plan, procedure or activity for dealing with residents in a community correctional facility.

O. "Treatment plan" is a design for helping the resident reach the goal of rehabilitation.

P. "Contraband" are those items designated by the CCF as prohibited on the physical premises of the facility.

Q. "Significant others" are persons who are important in the life of the resident.

R. "Private corporation" includes any company, association, or body endowed by law with any corporate power or function, except such as are formed solely for public and governmental purposes, which shall be deemed public corporation.

S. "Non-profit corporation" means a corporation formed for a purpose not involving pecuniary remuneration, directly or indirectly, to its shareholders or members as such.

T. "Community Corrections Advisory Board" is the governing body that is responsible for a comprehensive plan under the Community Corrections Act in a county or group of counties.

U. "Target group" means a class of residents with a need for similar services arising primarily out of a particular type of disability, including but not limited to social disabilities resulting in contact with the correctional system.

V. "Substantially conform" or substantial compliance as used in this rule shall mean compliance with 70% or more of all rules applicable to a facility's classification as stated herein, and, additionally, shall mean compliance with 70% or more of all rules applicable to a facility's classification in each section of these rules. "Section" as used in this definition means the entire area or subject matter under a given rule, e.g., 11 MCAR §§ 2.401, 2.402 etc.

W. Corporal punishment. Physical punishment, any kind of punishment inflicted on the body, such as whipping or slapping.

11 MCAR § 2.403 Procedures for licensing.

A. Legal basis. Licensing authority. The Minnesota Department of Corrections (the Commissioner) is authorized to establish procedures for licensing CCF adult halfway houses through the authority of Minn. Stat. § 241.021, subd. 1 (1978).

B. All adult halfway houses will be inspected pursuant to Minn. Stat. § 241.021, subd. 1 and all such inspections shall be according to the standards set forth herein.

C. Procedures. Original application for license.

1. New applicants shall file application to the Commissioner of Correc-

tions at least thirty (30) days prior to the date the facility expects to operate. The commissioner shall determine the suitability of such applicants by the following rules in this and subsequent sections.

2. Materials to be filed with adult halfway house license applications:

a. A statement regarding the philosophy, purpose and function of the program.

b. A statement regarding the administration and organization of the CCF (i.e., information on the governing body and administrator who are responsible for policy making, and administering and operating the facility). See Organization and Administration, 11 MCAR § 2.408.

c. A copy of the Articles of Incorporation and bylaws, if incorporation is required.

d. A copy of the constitution and bylaws if not incorporated.

e. A list of the board members and committees, including names, addresses and telephone numbers.

f. An outline of the CCF's program.

g. A list of other facilities which the operator or governing board has operated or is currently operating (either in or out of state).

h. The financial arrangements for the residents.

i. The arrangements for the provision of social services.

j. The arrangements for the provision of medical and dental services.

k. At least three letters of reference for the facility administrator.

l. A record of the satisfactory medical examination of each staff member (refer to Personnel, 11 MCAR § 2.416).

m. A copy of personnel policies.

n. A copy of intake policies and procedures.

o. A floor plan of the facility with designated room dimensions.

p. Evidence of approval by the fire, safety and health departments.

q. Evidence of compliance with local zoning ordinances.

D. Renewal license.

1. Application for relicensure shall be submitted to the Commissioner

at least thirty (30) days prior to the expiration date. Replacements of any of the materials required in the previous license application shall be submitted when the materials document changes in the operation of the Community Correctional Facility, qualifications of the staff, or in the physical facility. Any materials submitted in a previous license application which are not replaced by new submissions will be presumed to be currently correct at the time of renewal license application.

2. Material to be filed with adult halfway house license renewal application:

- a. A current list of board members and committees.
- b. A record of satisfactory medical examinations for each staff member. (A staff information sheet will be provided by the commissioner.)
- c. A report of major changes in the program or facility during the year or contemplated for the coming year.
- d. Building plans for any contemplated construction giving room dimensions, specifications and use.
- e. Evidence of approval by the fire, safety, and health departments.

E. Provisional license.

1. A provisional license will be: 1) issued for a maximum six (6) month period prior to issuance of a license; and 2) shall be issued for another maximum six (6) month period if the facility is not yet in substantial compliance with these rules, and if evidence of progress is demonstrated. Applications for renewed provisional licenses shall be filed thirty (30) days prior to expiration date. The provisional license shall not be renewed so as to exceed one (1) year.

2. Replacements of any of the materials required in the previous license application shall be submitted when the materials document changes in the operation of the community corrections facility, qualifications of the staff, or in the physical facility. Any materials submitted in a previous license application which are not replaced by new submissions will be presumed to be currently correct at the time of the renewal or change of license application. The following materials are to be submitted with renewal or change of provisional license application:

- a. A statement showing which initial requirements listed as conditions of the provisional license have been met; and/or
- b. A statement of the plan for meeting the initial requirements listed as conditions of the provisional license which have not been met; and
- c. A record of satisfactory medical examinations for each staff member. (A staff information sheet will be provided by the commissioner.)

3. If, at the end of the six (6) month provisional period, the facility is in substantial compliance with these rules, a full license will be issued.

F. Conditions of license.

1. A license shall not be transferable. It shall apply only to the organization or person(s) to whom it is issued and to the building approved. The license shall expire automatically if there is a change in location, organization, procedure or policies, etc., which would affect either the terms of the license or the continuing eligibility for a license. In such cases, an original application for a license must again be filed. To avoid delay, the commissioner shall be advised at once of any change so that he/she may determine if the change may be approved and the license modified accordingly.

2. Every license shall be restricted to a specified maximum capacity.

3. An adult halfway house must be licensed by the commissioner in order to operate.

4. No persons shall be placed in an adult halfway house prior to its being licensed.

5. There is no fee for a state license.

G. Revocation, suspension, provision and denial of license. A license may be revoked, suspended, denied or made provisional by the commissioner if the facility does not maintain substantial compliance with minimum standards, or the facility may be denied a license on the basis of a poor operating history in this or any state. The operator shall be given written notice of the action and shall be given thirty (30) days to substantially comply with minimum standards before action is taken. Failure, inability or refusal to substantially comply with licensing procedures shall be cause for denial, non-renewal, revocation or suspension of the license.

H. Restriction of the use of a CCF. The commissioner may by written order restrict the use of any adult halfway house, which does not substantially conform to the minimum standards, or, where specific conditions exist which endanger the health, welfare or safety of residents or staff, prohibit the detention of persons therein for more than seventy-two (72) hours.

I. Waiver of specific rule. The granting of a waiver under this section shall not constitute a precedent for any other CCF. The commissioner shall grant a waiver of a specific rule, if, in the licensing procedure or enforcement of the standards the commissioner finds that:

1. To require a particular community correctional facility to comply strictly with one or more of the provisions will result in undue hardship;

2. The community correctional facility is otherwise in substantial compliance with said standards and their general purpose and intent;

3. The community correctional facility substantially complies with such specific condition(s) as the commissioner may deem necessary for the protection of health, safety, and welfare of the residents.

J. Study of application. Following the receipt of the application and materials requested, the commissioner shall cause a study of the proposed services and facilities of the applicants to be made. This study shall include, but not be limited to, an on-site inspection of the facilities and investigation of references. Following the study, the representative who conducted the study shall make a recommendation to the commissioner.

K. Notice to the applicant of commissioner's action. After the application for license is approved by the commissioner, the applicant shall receive by mail a license which, as provided by Minn. Stat. § 241.021, shall set forth the conditions under which the CCF may operate. The terms of the license shall include the operating name of the CCF, the maximum number, age range and sex of the residents to be served, and the period of time for which the license is effective, and may include other limitations which the commissioner may prescribe. An accompanying letter shall contain, in addition to the limitations on the license, any recommendation regarding activities, services, and facilities to be employed. A letter shall accompany a provisional license and state the reason(s) for its being provisional.

L. Appeal procedure. Any applicant who feels aggrieved by the commissioner's action may appeal the commissioner's decision in the following manner: The facility administrator shall be given written notice of the action and shall be informed of the right to appeal the decision of the commissioner in writing within ten (10) days from his or her receipt of notice of the action. Upon receiving a timely written appeal, the commissioner shall give the facility administrator reasonable notice and an opportunity for a prompt hearing before an impartial hearing examiner.

M. When a CCF license has been revoked or not renewed because of non-substantial compliance with applicable laws or rules, it shall not be granted a new license for a period of one (1) year following the revocation, denial or non-renewal.

N. Failure of the commissioner to approve or deny an application within thirty (30) days of receipt of a completed application shall be deemed to be an approval of provisional license.

11 MCAR § 2.404 Severability. If any article, section, subsection, sentence, clause or phrase of these standards is for any reason held to be unconstitutional, contrary to statute, exceeding the authority of the Department of Corrections, or otherwise inoperative, such decision shall not affect the validity of the remaining portion of these standards.

11 MCAR § 2.408 Organization and administration of Adult Halfway Houses.

A. The public or private agency operating an established Adult Halfway House shall be a legal entity or part of a legal entity.

1. If an adult halfway house is to operate as a non-profit corporation, it shall be constituted in accordance with the laws of the State of Minnesota as outlined and prescribed in Minn. Stat. § 317, particularly as it relates to governing boards and annual audits.

2. If an adult halfway house is to operate as a private profit making corporation it shall be constituted in accordance with the laws of the State of Minnesota as outlined and prescribed in Minn. Stat. ch. 300.

B. Policy making. The governing board shall have a written policy clearly stating its purposes, the program and services offered. This will be done in a form suitable for distribution to staff, clients, referral sources, funding agencies and the general public.

C. The governing board of the community correctional facility shall hold meetings at least quarterly with the administrator in order to facilitate communications, establish policy, explore problems, ensure conformity to legal and fiscal requirements, and implement the program.

D. The CCF shall maintain records of its activities, including the minutes of board meetings, financial data and statistical information. All records are subject to review by the commissioner.

E. The policy manual shall be reviewed annually by the governing board, and updated when necessary.

F. The CCF shall identify, document and publicize its tax status with the Internal Revenue Service.

G. The CCF shall have a constitution or articles of incorporation which meet all of the legal requirements of the governmental jurisdiction in which the agency is located.

H. The program shall be managed by a single administrative officer who shall implement the policies of the board.

I. The CCF shall have a system to monitor the program through inspections and reviews by the administrator or designated staff.

J. The CCF shall have an operations manual which summarizes in one document approved methods of implementing agency policies and provides details for daily operations of the program.

K. Bylaws shall meet all the legal requirements of the governmental jurisdiction in which the CCF is located, and shall include provisions for regular and special meetings, and for recording of minutes.

L. Each facility must substantially comply with all applicable licensing requirements of the jurisdiction in which it is located, including requirements of the department of health and all relevant fire and safety codes.

11 MCAR § 2.412 Fiscal management of adult halfway houses.

A. The facility administrator or designated employee shall prepare an annual written budget of anticipated revenues and expenditures which is approved by the funding authority.

B. The CCF shall have written policies which govern revisions in the budget.

C. The CCF fiscal process shall include a financial audit (preferably certified) of the CCF, at least annually, or at time periods stipulated by applicable statutes.

D. The CCF shall prepare and distribute to its governing board, and affected agencies and individuals, at a minimum the following: income and expenditure statements, funding source, financial reports, and independent audit reports.

E. The CCF shall have a written fiscal system which accounts for all income and expenditures on an ongoing basis and which shall include: internal controls, petty cash, bonding, signature control on checks, resident funds and employee expense reimbursement.

F. The CCF shall use a method which documents and authorizes wage payment to employees and consultants.

G. Insurance coverage. The CCF shall have a procedure to provide insurance coverage for itself, which shall include coverage for the physical plant, equipment, personnel and injury to employees, residents and third parties.

11 MCAR § 2.416 Personnel.**A. Personnel policies.**

1. There shall be written personnel policies for personnel employed by the CCF, which specify salaries, increments, hours of work, work schedule, vacations, holidays, sick leave, periodic performance evaluation (at least annually), and other conditions of employment.

2. Personnel policies shall be available to each employee upon employment. The program shall inform each employee of the duties assigned to him/her, a position and organizational chart indicating the person to whom he/she is directly responsible, and general conditions which constitute grounds for dismissal and suspension, and a grievance procedure. The grievance procedures shall allow the aggrieved party to bring the grievance to at least one level above his/her supervisor.

3. The personnel policies shall be available to the commissioner.

B. The policies shall include provisions for time off, vacation, sick leave, disability, and other employee benefits.

C. During the absence of regular staff for time off, vacation, and sick leave, arrangements shall be provided to ensure consistent care of the residents.

D. The CCF shall have staff available or on call twenty-four (24) hours a day, and seven (7) days a week.

E. The ratio of staff to licensed capacity shall be: not less than one (1) direct service staff person for every eight (8) residents.

F. The CCF shall make provisions for, and allow time for a confidential personnel record to be kept for each staff member which should include date of beginning and end of employment, hours, salary or wages, qualifications, evaluations, resume, references, and training sessions.

G. Training program.

1. The CCF shall provide an orientation session for new employees and new volunteers.

2. The CCF shall provide a minimum of eighteen (18) hours per year of ongoing in-service training programs to help staff and volunteers meet the individual and group needs of residents.

3. The CCF shall provide ongoing cultural awareness training sessions for staff and volunteers working with minority residents.

4. It is mandatory that at least one employee on each shift, who is providing direct service to residents has first aid training. Training shall be provided by a Red Cross instructor or a licensed health professional.

5. First aid training shall be current. Certificates or statements of training shall document that first aid training is updated at least every three (3) years.

6. Time shall be available for staff and volunteers to participate in job related training.

7. When residents need special services, staff shall be able to refer them to other resources in the community.

H. Each staff member shall have a mantoux test or chest x-ray annually.

I. Qualifications of staff.

1. For all education requirements, experience in the human services fields may be substituted for education. The CCF shall have a written policy which outlines experience and educational substitutes if the program permits such substitutes.

2. The facility administrator shall have at least a Bachelor of Arts Degree in any of the human services fields (or a substitute as provided in 1 above); and two (2) years of work experience in corrections, social service and/or administration.

3. The direct service staff shall have work, education, or volunteer experience in corrections or related fields and shall be selected on the basis of ability to perform assigned tasks.

4. Persons providing professional services shall have achieved recognition to practice in their respective professions, including but not limited to license, certification, or registration required under state laws (psychiatrists, psychologists, social workers, probation and parole officers, etc.).

J. Volunteers with training and supervision may be used to assist staff of the CCF. If volunteers are used:

1. The community correctional facility shall establish requirements for the selection of volunteers.

2. The community correctional facility and the individual volunteer shall agree on the latter's job assignment. The volunteer's responsibility shall be clearly differentiated from other staff members.

3. If a volunteer is to be used in a capacity normally filled by a paid staff member he/she must meet the same qualifications as a paid staff member.

4. Responsibility for the volunteer program shall be assigned to a specific staff member.

K. All employees, including volunteers, providing direct service to residents shall be at least eighteen (18) years of age.

11 MCAR § 2.418 Admissions and placement policies.

A. Admissions policies. The CCF shall establish clearly defined and written admissions policies and procedures, which will state the age range, sex and characteristics of acceptable clients. Admission policies shall be available to be disseminated to all referral sources and the commissioner.

B. Admission form. The CCF and/or agent making the referral shall complete an initial admission information form on each client to be admitted into residency which, unless prohibited by local ordinance, includes at a minimum:

1. Name;

2. Address;

3. Date and place of birth;
4. Sex;
5. Reason for referral;
6. Whom to notify in case of emergency;
7. Date information gathered;
8. Signature of both interviewee and interviewer gathering information;
9. Name of referring agency of committing authority;
10. Special medical problems or needs;
11. Legal status, including jurisdiction, length and conditions of placement;
12. Financial arrangements for medical care;
13. Financial arrangements for care.

C. Medical examination. A CCF shall not keep residents in care unless they have had a medical examination ninety (90) days prior to or thirty (30) days after admission to ascertain the existence of any physical disability or communicable disease.

D. Orientation. At the time of intake, the staff shall discuss program goals, services available, rules governing conduct, program rules, and possible disciplinary actions with the participants; this shall be documented.

E. Progress reports. Each resident's progress shall be continuously reviewed in relation to his/her service plan and a written record of review shall be maintained.

F. Completion of or termination from program. The prospective resident shall be informed at the time of intake what expectations there are for completion of and/or successful termination from the program of the CCF.

11 MCAR § 2.420 Program.

A. Project staff and resident shall develop and agree upon a written treatment plan that specifies:

1. The identified needs of the resident;
2. The expected goals and objectives of the individualized plan to be used;

3. The participation of the resident, staff, support services and community resources in the attainment of these goals and objectives;

4. Counseling shall be offered to help the resident with problems that affect his/her ability to have satisfying personal relationships, to realize the capacity for growth, to help the person cope with the crisis of living in a restrictive environment, and to help persons to return to normal living in the community.

B. The agency shall have written policy and procedures which provide increasing opportunities and privileges for resident involvement with family and in community affairs prior to final release.

C. Involvement in the community.

1. To ensure that resident accessibility to community resources is maximized and existing services are not duplicated the facility administrator shall develop, and if appropriate, maintain participation or support services consistent with project's mission statement and service delivery plan.

2. The CCF shall use community resources where appropriate to provide residents with the following services, including, but not limited to:

- a. Assisting residents in learning to use leisure time constructively;
- b. Assisting residents in finding suitable employment;
- c. Assisting residents in locating financial assistance through community resources;
- d. Assisting residents in education and vocational training programs;
- e. Assisting residents with services to become self-sufficient, including, but not limited to, assistance in obtaining housing, transportation, medical, dental services or money management.

D. Work assignments and work program.

1. Required work assignments should be appropriate to residents' ages and ability and residents shall not be required to perform work which is inappropriate for them for physical reasons. Reasonable criteria for safety measures shall be established when work could be deemed hazardous.

2. Residents shall not be required to perform duties such as: personal duties for staff or replacing employed staff without pay.

3. Staff members shall check and inform residents of applicable minimum wage law, health and safety laws, social security, labor union fees and requirements, etc.

4. Program shall have a written policy with respect to periodic checks of residents at their place of employment.

5. Staff shall not enter into business arrangements or financial transactions with residents.

E. House rules.

1. There shall be clearly defined policies and procedures allowing the resident input into:

- a. The development of house rules;
- b. The decision making process.

2. The program shall establish a method whereby residents and staff:

- a. Review group, resident or community problems;
- b. Review old rules, new rules, or changes in rules, plans and procedures in the CCF.

3. There shall be a written grievance procedure made available to each resident which outlines rules of the facility, residents' rights, and order of the grievance procedure.

F. Religion. Each resident has the right to freedom of religious affiliation and voluntary religious worship, providing that the exercise of these rights does not directly interfere with the reasonable security and discipline of the facility.

11 MCAR § 2.424 Nutrition and food.

A. When the CCF provides or contracts for food service, the service shall comply with and meet all sanitation and health codes as promulgated by state or local authorities.

B. Dietary service. The food and nutritional needs of residents shall be met in accordance with their needs and shall meet the dietary allowances as stated in the Recommended Dietary Allowances, Food and Nutrition Board, National Academy of Sciences, 8th Edition, 1974. Providing each resident the specific serving per day from each of the following four food groups will satisfy this requirement.

(1) Meat or Protein Group.

Two or more servings per day.

A serving within this group is defined as:

- 2-3 ounces cooked, lean, edible meat
- 2 medium eggs

4 tablespoons peanut butter
1 cup dry beans

(2) Milk Group.

Two servings per day.
A serving is defined as:

1 cup of milk
1 ounce of cheese
 $\frac{1}{2}$ cup cottage cheese

(3) Cereal and Bread Group.

Four or more servings per day.
A serving is defined as:

$\frac{1}{2}$ to 1 slice of bread
 $\frac{1}{2}$ to $\frac{3}{4}$ cup cereal
 $\frac{1}{2}$ to $\frac{3}{4}$ cup of rice
 $\frac{1}{2}$ to $\frac{3}{4}$ cup of pasta

(4) Fruit and Vegetable Group.

Four or more servings per day.
A serving is defined as:

$\frac{1}{2}$ cup potatoes
 $\frac{1}{2}$ cup cooked vegetables
4 pieces raw vegetables
 $\frac{1}{2}$ cup fruit
1 cup juice (citrus, etc.)

C. A minimum of three (3) meals a day shall be available for residents unless an agreement states otherwise.

11 MCAR § 2.428 Special procedures.

A. Discipline and disciplinary action. Discipline should be considered as training to assist residents in the development of self-control, character, and orderly conduct. Informal resolution of conflicts should be considered prior to taking formal disciplinary action. Should disciplinary action be necessary the following rules shall be observed:

1. The CCF shall have written policies which shall be available to the residents, and to staff regarding methods used for control and discipline.

2. All disciplinary action shall be the responsibility of staff members and shall not be delegated to other residents or persons outside of the program unless special skills are needed to handle the situation.

3. Residents shall not be denied food, mail, or sleep as punishment.

4. Corporal punishment shall not be used.

5. Physical force shall be used only in instances of justifiable self-protection, protection of others, and prevention of property damage, and only to the degree necessary and in accordance with appropriate statutory authority; such action shall be documented and placed on file.

B. Room restriction, facility restriction and privilege suspension.

1. Written policy and procedures shall ensure that room restriction does not exceed eight (8) hours and is used only under the following conditions: the resident is dangerous to himself/herself or others; and/or there is strong evidence to indicate he/she is about to abscond.

2. Written policy and procedures shall ensure that prior to room restriction the resident has the reasons for the restriction explained to him/her, and has an opportunity to explain the behavior leading to the restriction.

3. During room restriction staff contact shall be made with the resident at least hourly to ensure the well being of the resident; the resident shall assist in the determination of the end of the restriction period.

4. Written policy and procedures shall ensure that prior to privilege suspension the resident has the reasons for the suspension explained to him/her, and has an opportunity to explain the behavior leading to the suspension.

5. Written policy and procedures shall ensure that prior to facility restriction (grounding) for up to forty-eight (48) hours, the resident has the reasons for the restriction explained to him/her, and has an opportunity to explain the behavior leading to the restriction.

6. Written policy and procedures shall ensure that prior to facility restriction for more than forty-eight (48) hours there is an administrative hearing by a person or panel of staff who are not directly involved in the incident leading to the restriction.

7. All instances of room restriction, privilege suspension and facility restriction shall be logged, dated and signed by staff implementing the discipline procedure; the log shall be reviewed by supervisory staff at least daily.

8. Where extended confinement is necessary, a detention facility (with which previous arrangements have been made) shall be used.

C. Security procedures. Written policies regarding security measures are necessary and shall include:

1. A written plan shall allow staff to monitor movement into and out of the facility, under circumstances specified in the plan.

2. The staff shall maintain a system of accounting for the whereabouts of its residents at all times.

3. The CCF shall have written procedures for the detection and reporting of absconders.

4. The CCF shall notify appropriate probation officers, parole officers and/or other relevant officials as soon as it has been determined that a resident has run away or is missing.

5. Any general security restrictions must allow for individual protection, as well as protection for others, and must be part of the written program policy.

6. Written policy and procedures prohibit weapons of any kind from being brought into or kept on the program grounds.

7. A key inventory system shall be enforced that helps provide staff and resident safety and privacy needs, and assists in protecting and preserving personal property.

D. Personal possessions.

1. Each resident shall be allowed to bring appropriate personal possessions to the CCF and shall be allowed to acquire possessions of his/her own to the extent the facility is able to accommodate secure storage of them.

2. The CCF shall have written definitions of what will be considered contraband.

3. Information shall be made available to the residents, family members and friends concerning what personal possessions and kinds of gifts are prohibited.

E. Relative to public reports, statements, or appearances.

1. Residents shall not be required to make public statements acknowledging their gratitude to the program and shall not be required to perform or appear at public gatherings.

2. The CCF shall not use reports or pictures from which residents can be identified without written consent from the resident.

a. The signed consent form shall be on file at the CCF before any reports or pictures from which residents can be identified are used.

b. The signed consent form shall indicate on how many occasions the information shall be used.

F. Searches. In compliance with applicable laws, the CCF shall maintain

and make public, written policies and procedures for conducting searches of residents, their belongings, and all areas of the facility to control contraband and locate missing or stolen property.

11 MCAR § 2.432 Physical facility.

A. The facility shall comply with all applicable codes, ordinances and licensing regulations of the state and/or local jurisdiction in which the facility is located. These shall include, but not be limited to: zoning codes; building codes; housing codes; health and fire codes.

1. It is the responsibility of the facility administrator to request necessary inspections and to substantially comply with any resulting recommendations noted in the inspection reports.

2. Written documentation that all building and zoning codes, fire, health and safety rules are met shall be on file at the CCF and/or conspicuously posted in the facility.

B. Written policy and procedures shall specify the facility's fire prevention regulations and practices to ensure the safety of staff, residents and visitors. These shall include, but not be limited to:

1. Provision for an adequate fire protection service;

2. A system of fire inspection and testing of equipment determined by the local fire official;

3. Smoke detectors;

4. Fire drills and extinguishers.

C. There shall be written plans and procedures for meeting potential disasters and emergencies, such as fire, severe weather or other emergencies. All staff shall be familiar with the procedures for meeting potential disaster.

D. Building. Building and grounds shall be maintained, repaired and cleaned so that they are not hazardous to the health and safety of residents and staff.

1. New or renovated buildings. Building plans and specifications for new construction, conversion of existing buildings, and any structural modifications or additions to existing licensed buildings shall be suitably aligned with the purpose of the Adult Halfway House and shall be submitted to the following authorities for approval:

a. Office of the State Fire Marshal;

b. Local zoning and/or building departments;

- c. Local health department;
- d. The commissioner.

2. Heating equipment shall be in good condition, vented, and shall be capable of maintaining consistent uniform temperatures as well as eliminating drafts. A comfortable temperature range shall be maintained in all rooms occupied by residents.

3. Bedrooms.

a. Single bedrooms shall provide at least seventy (70) square feet of useable floor space with a side dimension of not less than seven (7) feet for ambulatory residents. For non-ambulatory residents, the requirements are one hundred (100) square feet of useable floor area with a side dimension of not less than nine (9) feet.

b. Multi-bed bedrooms shall provide at least sixty (60) square feet per person of useable floor space with at least three (3) feet between beds placed side by side, and at least one (1) foot between beds placed end to end for ambulatory residents. For non-ambulatory/non-mobile residents, the multi-bed bedrooms shall provide at least eighty (80) square feet of useable floor area. Multi-bed bedrooms for active, non-ambulatory, mobile residents shall be at least one hundred (100) square feet per resident. Mobility space at the end and one side of each bed shall be not less than four (4) feet per resident.

c. Bedrooms for non-ambulatory mobile residents shall have adequate accessible space for storage of wheel chairs and other prosthetic or adaptive equipment for daily out of bed activity or acceptable similar storage space shall be provided outside the bedroom readily and handily accessible to the resident.

d. In new or remodeled buildings, bedrooms shall accommodate no more than four (4) residents.

4. Each resident shall be provided, at a minimum: bed; mattress; supply of bed linen and towels; chair; adequate lighting; and closet/locker space.

5. Separate bedrooms.

a. Male and female residents shall not occupy the same bedrooms.

b. Youths and adults shall not share bedrooms except in approved circumstances by the facility administrator.

6. Counseling space and visiting room.

a. Private counseling space shall be provided in the facility.

b. Space shall be provided to accommodate group meetings.

c. A visiting area shall be provided where residents may receive and talk with visitors privately.

7. Every facility shall be equipped with adequate and conveniently located toilet rooms for its employees and residents. Washbasins and toilets shall be provided in the ratio of at least one (1) toilet to every ten (10) residents and at least one (1) washbasin for every six (6) residents. At least one (1) bath or shower shall be available for every eight (8) residents.

8. Laundry facility. The facility shall have one (1) washer and one (1) dryer for every twenty (20) residents, or equivalent laundry capacity available in the immediate vicinity of the facility.

E. Transportation.

1. Written policy and procedures shall govern the use and maintenance of facility and resident motor vehicles.

2. Transportation shall be available for use in emergencies.

F. Environment. The governing body shall designate who is permitted to live in the facility.

1. A CCF shall not have roomers or boarders in the facility without special permission from the facility administrator.

2. The CCF shall keep the commissioner notified as to the presence of all persons living in a CCF other than staff and residents.

3. Staff may live in the CCF as appropriate and with approval of the facility administrator.

4. A CCF shall not concurrently hold a license for family day care, or group day care without prior approval by the commissioner.

11 MCAR § 2.436 Health care and medical services.

A. The facility administrator shall ensure written policies and procedures for use by staff in all medical, dental, and psychological difficulties.

B. Medical coverage shall be determined for each resident upon admission to the program.

C. Written policies and procedures shall clarify for the staff what medical care may be given by them without specific orders from a licensed medical doctor. The staff shall be instructed as to how to obtain further medical care and how to handle emergency cases.

D. The program health care plan shall adhere to State and Federal laws and

rules regarding distribution of medications. The plan shall stipulate that medications be administered only as instructed by a licensed physician.

E. The facility administrator shall establish policies and procedures for reviewing the use, as well as the storage and disbursement of prescription drugs.

F. Written policy shall prohibit participation in medical or pharmaceutical testing for experimental or research purposes.

G. One staff member on each shift of the residential program shall be trained in emergency first aid procedures.

H. The CCF shall maintain working relations with community health care agencies in order to assist residents in meeting their health needs.

I. The CCF shall have first aid equipment, which meets American Red Cross standards available at all times for medical emergencies.

11 MCAR § 2.440 Records and evaluation.

A. Residents.

1. The CCF shall maintain accurate and complete case records, reports and statistics necessary for the conduct of its program. Appropriate safeguards shall be established to protect the confidentiality of the records, and minimize the possibility of theft, loss or destruction.

2. Form and content of case records.

a. In addition to the data required in the intake study, the resident's record shall include consent for necessary dental, medical and surgical treatment, and hospitalization.

b. The CCF shall keep records or have access to ongoing medical information, when available, which shall include:

- (1) Dental examinations;
- (2) Reports of any illness or injury and treatment given;
- (3) Psychological examinations and treatment given, if any;
- (4) Use of drugs;
- (5) Routine physical examinations and other medical contacts.

c. The record shall include a summary of the resident's progress. These reports shall be recorded regularly and shall include the following:

- (1) Reports of significant incidents, both positive and negative, and changes in family situation;

- (2) Future planning;
- (3) Summary of resident's development;
- (4) Grievance and disciplinary actions, if any.

d. All correspondence relevant to the resident shall be kept in the record.

e. Each record shall have a face sheet bearing factual data and identifying information. The face sheet shall include the following:

- (1) Name;
- (2) Date and place of birth;
- (3) Sex;
- (4) Religion;
- (5) Race;
- (6) Names and addresses of person(s) to be contacted in event of emergency;
- (7) Date of admission;
- (8) Insurance policy numbers, medical number (if any);
- (9) Name of probation officer, parole officer, or welfare worker;
- (10) Date of termination;
- (11) Special medical problems or needs;
- (12) Financial arrangements for medical care;
- (13) Legal status, including jurisdiction, length and conditions of placement;
- (14) Financial arrangements for care.

3. All dissemination on data on residents will be in accord with the Minnesota Government Data Practices Act. All information is public, unless otherwise classified by state statute, federal law, or emergency or temporary classification.

4. The content of the resident's record and data collected by the CCF shall be shared with individuals or agencies directly involved in the resident's treatment plan. When such information is provided, residents shall be in-

formed. All dissemination of residents' records and information shall be governed by Minn. Stat. § 15.162, subds. 3., 5., and 5. a., and any other applicable state or federal law.

5. Except in situations covered by aforementioned part 3, the CCF shall provide that a release of information consent form shall be signed by the resident immediately before each release of information concerning the resident is completed, and a copy of the consent form shall be maintained in the resident's record.

6. The CCF shall have a written policy which conforms at a minimum to applicable federal law, that relates to the release of information consent form, which includes:

- a. Name of person, agency or organization requesting information;
- b. Name of person, agency or organization releasing information;
- c. The specific information to be disclosed;
- d. The purpose or need for the information;
- e. Date consent form is signed;
- f. Signature of the resident;
- g. Signature of an individual witnessing resident signature.

7. The CCF shall have a written policy which specifies the length of time a case record must be maintained.

8. Residents shall have access to their files as permitted by law.

B. Personnel records.

1. The CCF shall maintain an accurate personnel record on each employee which shall include, at minimum:

- a. Initial application;
- b. Reference letters;
- c. Appropriate results of employment investigation;
- d. Training and experience verification;
- e. Wage and salary information;
- f. Job performance evaluation completed at least annually;

g. Training programs which the employee participated in after employment began;

h. Documentation of sick leave, leave of absence and vacation;

i. Grievance and disciplinary actions, if any;

j. Health and medical reports;

k. Dates of employment and termination with reason for termination.

2. Employees shall have access to their personnel files.

C. Facility records. The board shall maintain records of its activities, including the minutes of board meetings, financial data and statistical information.

D. Evaluation.

1. The CCF shall have an organized system of information collection, retrieval and review to document their program.

2. Written policy and procedures shall govern voluntary participation in non-medical and non-pharmaceutical research programs.

Chapter 2: Group Foster Homes

11 MCAR § § 2.444-2.490

11 MCAR § 2.444 Introduction.

A. Minn. Stat. § 241.021 (1976), as amended by Laws of 1978, ch. 778, to be effective September 1, 1979, provides that the Commissioner of Corrections promulgate rules establishing minimum standards for all correctional facilities throughout the state whether public or private, established and operated for the detention and confinement of persons detained or confined therein according to the law except to the extent that they are inspected or licensed by other state regulating agencies. The rules which follow are intended to fulfill that requirement for all correctional group foster homes.

B. The Commissioner of Corrections, has, pursuant to Laws of 1978, ch. 778, § 6, appointed a citizens' advisory task force to assist in the development of rules contained herein.

C. The purpose of these standards is to facilitate the implementation of rules in accordance with Minn. Stat. § 241.021, and to provide a framework for inspection and licensing of group foster homes.

D. Compliance with the requirements stated herein is the responsibility of the group foster parents.

11 MCAR § 2.445 Definitions. Definitions for the purpose of these rules are as follows:

A. "Youth" are persons who are under eighteen (18) years of age.

B. "Department of Corrections", "Department", or "DOC" shall mean Minnesota State Department of Corrections.

C. "Commissioner" shall mean Commissioner of the Minnesota State Department of Corrections or his designee.

D. "Applicant" shall mean any person(s), agency or organization applying for a license or renewal of license under this rule.

E. "License" shall mean a certificate issued by the commissioner authorizing the operator to provide specified services for a period of a year in accordance with the terms of the license, Minn. Stat. § 241.021, and the rules of the commissioner.

1. "Provisional license" is: 1) a certificate that will be issued for a maximum six (6) month period prior to granting a license; and 2) shall be issued for another six (6) month period if the applicant is temporarily unable to substantially conform with the requirements of these rules.

2. "Renewal license" is a license issued for a period subsequent to the period for which the license was issued and where there has been no intervening period during which a license has been revoked.

3. "Revocation of license" means that the operator of a facility shall no longer be authorized to provide services.

4. "Suspension of license" means that the operator is not authorized to provide services for a specified period of time, or until the facility is found to be in substantial conformance with licensing requirements.

F. "Waiver" means a written permission from the commissioner to disregard a particular section of a licensing rule.

G. "Group Homes", "Group Foster Homes" or "GFH" shall mean a residential facility where not more than eight (8) delinquent youths are cared for by group foster parents on a twenty-four (24) hour a day basis.

H. "Sponsoring agency" is the body which formulates the policies and procedures governing a group foster home. The bodies include but are not limited to: Community Corrections Board, County Court Services, State of Minnesota Department of Corrections, Community Corrections Departments, and non-profit corporations.

I. "Governing Board" (only applies in the case of privately operated group foster home programs) is the body which formulates the policies and procedures governing a group foster home, this body being composed of, at a minimum, the offices of president, secretary, treasurer and the administrator of the program, a local representative from the community, and additional membership according to the size and function of the individual program.

J. "Coordinator" is an individual who coordinates the operations of all of the group foster homes within a single county.

K. "Group Foster Parents" means the person(s) who carry(ies) out the continuing daily living program in a group foster home and provide(s) care to the youths. The group foster parents may be a married couple or a single adult who is twenty-one (21) years of age or older.

L. "Resident" is a youth participating in a group foster home program.

M. "Program" is a plan, procedure or activity for dealing with youth in a group foster home.

N. "Service plan" is a design for helping the youth reach the goal of placement.

O. "Supervising agent" is the probation officer or parole agent working with an individual youth or with a set of youths living in a single group foster home, or the equivalent of a supervising agent in privately operated homes.

P. "Significant others" are persons who are important in the life of the resident.

Q. "Leave of absence" is a period of up to twelve (12) months during which a set of group foster parents do not provide foster care for any youths.

R. "Contraband" are those items designated by the GFH as unauthorized or unapproved on the physical premises of the facility.

S. "Substantially conform" or "substantial compliance" as used in this rule shall mean compliance with 70% or more of all rules applicable to a facility's classification as stated herein, and, additionally, shall mean compliance with 70% or more of all rules applicable to a facility's classification in each section of these rules. "Section" as used in this definition means the entire area or subject matter under a given rule, e.g., 11 MCAR §§ 2.445, 2.446, etc.

11 MCAR § 2.446 Procedures for licensing.

A. Legal basis. The Minnesota State Department of Corrections (the commissioner) is authorized to establish procedures for licensing group foster homes which are maintained and operated in conformity with the rules and standards authorized by Minn. Stat. § 241.021, (1978).

B. All group foster homes will be inspected pursuant to Minn. Stat. § 241.021, and all such inspections shall be according to the standards set forth herein.

C. Original application for license.

1. New applicants shall file application with the Commissioner of Corrections thirty (30) days prior to the date the facility expects to operate. The commissioner shall determine the suitability of such applicants by the following rules in this and subsequent sections.

2. Materials to be filed with group foster home license application:

a. A completed application for license on the form issued by the commissioner;

b. At least three (3) letters of reference for the group foster parent(s) and for any employee involved in child care. References must not be from department employees nor relatives of the persons referred.

c. An outline of the group foster home's program (ex: philosophy, purpose and function of the program). If a single governing body or sponsoring agency operates more than one (1) group foster home, the manual of the governing body or sponsoring agency will suffice;

d. The intake policy and procedures (including sex, age and interview policies);

e. Evidence that sometime during the twelve months prior to initial licensure, and annually thereafter, each person living in or working in the home has had a mantoux test or chest x-ray;

f. A floor plan of the group foster home with designated room dimensions;

g. A list of other facilities which the operator has operated or is currently operating (either in or out-of-state).

h. Written documentation that all fire and safety, and health rules, and zoning ordinances are met.

3. As part of the application, the group foster parents shall assist the sponsoring agency in making a preliminary home study. This study shall include an inspection of the facility and an investigation into the family's background and references. The sponsoring agency shall then make a recommendation to the commissioner as to whether a license shall be granted or denied.

D. Renewal license.

1. Application for relicensure shall be submitted to the commissioner at least thirty (30) days prior to the expiration date (or date of recontinuance of a GFH after a leave of absence). Replacements of any of the materials required in the previous license application shall be submitted when the materials document changes in the operation of the group foster home, qualifications of the group foster parents, or in the physical facility. Any materials submitted in a previous license application which are not replaced by new submissions will be presumed to be currently correct at the time of renewal license application.

2. Materials to be filed with group foster home license renewal application:

a. Evidence that sometime during the twelve (12) months prior, each group foster parent and each member of their family and additional staff living in or working in the home has had a mantoux test or chest x-ray;

b. A record of major changes in the program or facility during the year or contemplated for the coming year;

c. Building plans for any contemplated construction giving room dimensions and specifications and use.

d. Written documentation that all fire and safety, and health rules, and zoning ordinances are met.

E. Provisional license.

1. A provisional license will be 1) issued for a maximum six (6) month

period prior to issuance of a license; and 2) shall be issued for another maximum six (6) month period if the facility is not yet in substantial conformance with these rules, and if evidence of progress is demonstrated. Applications for renewed provisional licenses shall be filed thirty (30) days prior to expiration date. The provisional licenses shall not be renewed so as to exceed one (1) year.

2. Replacements of any of the materials required in the previous license application shall be submitted when the materials document changes in the operation of the group foster home, qualifications of the group foster parents, or in the physical facility. Any materials submitted in a previous license application which are not replaced by new submissions will be presumed to be currently correct at the time of the renewal or change of license application. The following materials are to be submitted with renewal or change of provisional license application:

a. A statement showing which initial requirements listed as conditions of the provisional license have been met; and/or

b. A statement of the plan for meeting the initial requirements listed as conditions of the provisional license which have not been met; and

c. Evidence that sometime during the twelve (12) months prior each group foster parent and each member of their family and additional staff living in or working in the home has had a mantoux test or chest x-ray.

3. If, at the end of the six (6) month provisional period, the facility is in substantial conformance with these rules, a full license will be issued.

F. Conditions of license.

1. A license shall apply only to the organization or person(s) to whom it is issued and to the buildings approved. The license shall expire automatically if there is a change in location, organization, procedure and policies, or a structural modification or addition to the physical facility, which would affect either the terms of the license or the continuing eligibility for a license. In such cases, an application for a transfer of license must be filed. To avoid delay, the commissioner shall be advised at once of any change so that he/she may determine if the change may be approved and the license modified accordingly. An application for a transfer of license shall include:

a. An outline of any proposed changes in the group foster home's program (ex: philosophy, purpose and function of the program);

b. Any changes in the intake policy;

c. A new floor plan of the group foster home with designated room dimensions.

2. Before any structural modifications or additions to the physical facility are made, the plans shall be approved by the commissioner.

3. Every license shall be restricted to a specified maximum capacity. No regular GFH shall be licensed with a maximum capacity so high as to allow more than ten (10) youths (including both foster youths and the youths in the group foster parents' natural family) to live in the GFH.

4. There is no fee for a state license.

5. No persons shall be placed in a group foster home prior to its being licensed.

6. GFH licenses will be issued by the Department of Corrections for a specific number of residents, not exceeding eight (8) youth.

G. Jurisdictional licensing requirements. Each GFH must substantially comply with all applicable licensing requirements of the jurisdiction in which it is located, including requirements of the local board of health and all relevant fire and safety codes.

1. It is the responsibility of the group foster parents to request the necessary inspections and to comply with any resulting recommendations noted in the inspection reports.

2. Written documentation that all fire, health and safety rules are met shall be on file with the commissioner. In those jurisdictions where a fire marshal report is not required, the applicants shall complete and submit a fire safety checklist supplied by the commissioner.

3. All group foster parents shall be familiar with the plans and procedures such as fire, severe weather or other emergencies.

H. Waiver of specific rule. The granting of a waiver under this section shall not constitute a precedent for any other GFH. The commissioner shall grant a waiver of a specific rule, if in the licensing procedure of enforcement of the standards, the commissioner finds that:

1. To require a particular group foster home to comply strictly with one or more of the provisions will result in undue hardship;

2. The group foster home is otherwise in substantial conformance with said standards and their general purpose and intent;

3. The group foster home complies with such specific condition(s) as the commissioner may deem necessary for the protection of the health, safety, and welfare of the residents.

I. Study of the application. Following the receipt of the application and materials requested, the commissioner shall cause a study of the proposed services and facilities of the applicants to be made. This study shall include an on-site inspection of the facilities and an investigation of references. Following the study, the representative of the commissioner who conducted the study shall make a recommendation to the commissioner.

J. Notice to the applicant of commissioner's action. After the application for license is approved by the commissioner, the applicant shall receive by mail a license which, as provided by Minn. Stat. § 241.021, shall set forth the conditions under which the GFH may operate. The terms of the license shall include the operating name of the GFH, the maximum number, sex and age range of the residents to be served, and the period of time for which the license is effective, and may include other limitations which the commissioner may prescribe. An accompanying letter shall contain in addition to the license, any recommendation regarding activities, services, and facilities to be employed. A letter shall accompany a provisional license and shall state the reason(s) for its being provisional.

K. Provision, revocation, suspension and denial of license. A provisional license may be granted if the facility does not substantially conform with licensing requirements. The facility will be given a specified period of time in which to do so, pending revocation or suspension of license if the requirements are not met. A license may be revoked and suspended by the commissioner if the facility does not maintain compliance with the minimum standards; or if an applicant has violated any federal or state law; or if the applicant has a poor operating history in this state or any other state.

L. Restriction of the use of a GFH. The commissioner may by written order restrict the use of any group foster home, which does not substantially conform to the minimum standards, or where specific conditions exist which endanger the health, welfare or safety of residents or staff, prohibit the detention of persons therein for more than seventy-two (72) hours.

M. Appeal procedure for denial, suspension and revocation of license. Any applicant who feels aggrieved by the commissioner's action may appeal the commissioner's decision in the following manner: The operator shall be given written notice of action and shall be informed of the right to appeal the decision of the commissioner. The operator must appeal the decision in writing to the commissioner within ten (10) days from the operator's receipt of the notice of action. Upon receiving a timely written appeal, the commissioner shall give the operator reasonable notice and an opportunity for a prompt hearing before an impartial hearing examiner.

N. When a GFH license has been revoked or not renewed because of non-compliance with applicable laws, it shall not be granted a new license for a period of one (1) year following the revocation, denial or non-renewal.

O. Failure of the commissioner to approve or deny an application within thirty (30) days of receipt of a completed application shall be deemed to be an approval of provisional license.

11 MCAR § 2.450 Severability. If any article, section, subsection, sentence, clause or phrase of these standards is for any reason held to be unconstitutional, contrary to statute, exceeding the authority of the Department of Corrections, or otherwise inoperative, such decision shall not affect the validity of the remaining portion of these standards.

11 MCAR § 2.456 Group foster parent qualifications.

A. Group foster parents shall be mature and responsible, and have the ability to deal openly with the emotions and problems of youth. The group foster parents must also command the respect of youths and be able to firmly discipline them in a constructive way. The group foster parents must also be willing to cooperate with the commissioner, the supervising agent, the court and all other agencies that are involved in the youths' welfare.

1. A GFH license shall not be issued or renewed where any person (except foster youth) living in the household has any of the following characteristics:

a. A conviction for, or admission of, or substantial evidence of an act of child battering, or child abuse, or child molesting, or child neglect, or incest within the previous five (5) years. Reasonable methods of discipline shall not constitute child battering, child abuse, child molesting, child neglect or incest.

b. Chemical dependency, unless the individual is identified as chemically free for at least twenty-four (24) consecutive months.

c. Residence of the family's own children in foster care, correctional facility, or residential treatment for emotional disturbance within the previous twelve (12) months if, in the judgment of the sponsoring agency, the functioning of the family has been impaired.

d. Felony conviction within the previous three (3) years, or release from incarceration for a felony conviction within the previous three (3) years.

e. Misdemeanor conviction within the previous twelve (12) months, or release from incarceration for a misdemeanor conviction within the previous twelve (12) months.

B. All group foster parents shall be at least twenty-one (21) years of age at the time of licensure.

C. Physical handicap of group foster parents shall be a consideration only as it affects their ability to provide adequate care to foster youths or may affect an individual youth's adjustment to the family.

D. When all adults in the GFH are employed or otherwise occupied for substantial amounts of time away from home, the plans for care and supervision of the foster youths shall be approved in advance by the commissioner. At least one group foster parent shall be available at all times in case of emergency.

11 MCAR § 2.460 Health of persons living in the group foster homes.

A. Evidence that sometime during the twelve (12) months prior to initial

licensure, and annually thereafter, each person living in the home has had a mantoux test or chest x-ray.

B. When in the judgment of the licensing authority, any person in the home who exhibits a health problem, an evaluation may be requested of the person as a requirement for licensing.

11 MCAR § 2.464 Training for group foster parents.

A. Every set of group foster parents shall participate in a minimum of eighteen (18) hours annually of training related to foster care. The eighteen (18) hours may be shared between the group foster parents in the home. When the group foster parents have not completed the required annual training at the time of relicensure, no further placements may be made in that GFH until the group foster parents have complied with the training requirements.

1. The following areas of training are recommended, but are not limited to:

- a. Child and adolescent development;
- b. Communication skills;
- c. Roles and relationships in foster care;
- d. Methods of discipline;
- e. Constructive problem solving;
- f. The meaning of a foster youth's natural parents;
- g. Home safety;
- h. Human sexuality.

2. First aid training.

a. First aid training is mandatory for all group foster parents. Training shall be provided by a Red Cross instructor or a licensed health professional.

b. First aid training shall be current. Certificates or statements of training shall document that first aid training is updated at least every three (3) years.

B. Group foster parents who wish to take a leave of absence from foster care for up to twelve (12) months, may have all or part of the requirements waived in proportion to the length of the leave of absence. If the leave of absence exceeds twelve (12) months, the parents shall reapply for a new license.

C. The group foster parents shall make suitable arrangements for the care of foster youths for any periods of vacation or emergency; and the supervising agent or coordinator shall approve the arrangements. Substitute group foster parents shall have the same qualifications as the regular group foster parents (see group foster parent qualifications, 11 MCAR § 2.456), and shall have access to group foster parents' training opportunities (see Training for group foster parents, 11 MCAR § 2.464).

11 MCAR § 2.470 Program.

A. Orientation. At the time of intake, group foster parents shall discuss program goals, service(s) available, rules governing conduct, program rules, and possible disciplinary actions with the residents; this shall be documented.

B. Service plan. A service plan shall be developed and shall be implemented based on the special needs of each resident.

C. The group foster parents shall continuously review each resident's progress in relation to his/her service plan, and a record of the review shall be maintained.

D. The GFH's plan shall make some provisions for the following considerations:

1. Contact with resident's family and significant others;
2. Visitation policies;
3. Involvement in the community.

11 MCAR § 2.474 Special procedures.

A. House rules.

1. There may be regular group meetings to help:

a. Review common problems of the group, or the group's problem with a resident, or a community problem;

b. Develop positive approaches to community participation;

c. Consider formulation of rules, plans and procedures in the GFH.

2. The group foster parents shall be responsible for ensuring a copy of the written grievance procedure written by the governing body or the sponsoring agency shall be available to each resident. The procedure shall outline rules of the facility, residents' rights and the actual grievance procedure.

B. Written emergency (fire, medical, accident, etc.) plans shall be conspicuously posted in the facility.

C. Discipline should be considered as training to assist residents in the development of self-control, character and orderly conduct. Informal resolution of conflicts should be considered prior to taking formal disciplinary action.

1. Residents shall not be subjected to denial of food, medication, mail or sleep as punishment.

2. Physical force shall be used only in instances of justifiable self-protection, prevention of property damage and protection of others, and only to the degree necessary and in accordance with appropriate statutory authority; such action shall be documented and placed on file in the group foster home.

3. Violation of statutory authority with respect to physical abuse shall be grounds for restriction of the GFH's license.

D. Room restriction, facility restriction and privilege suspension.

1. Room restriction shall not exceed eight (8) hours. The resident shall be observed by a group foster parent or staff person at least hourly.

2. Prior to room restriction, facility restriction or privilege suspension the resident shall have the reasons for the restriction or suspension explained to him/her, and have an opportunity to explain the behavior leading to the restriction or suspension.

3. All instances of room restriction, privilege suspension and facility restriction shall be logged, dated and signed by the group foster parent(s) implementing the disciplinary procedure; the log shall be reviewed by the supervising agent or coordinator.

E. Security procedures. Group foster parents shall be accountable for the whereabouts and conduct of residents who have been referred by a court or the Department of Corrections.

1. Group foster parents shall monitor movement into and out of the GFH and account for the whereabouts of its residents outside of the GFH.

2. The group foster parents shall notify appropriate probation officers, parole officers and/or relevant officials as soon as it has been determined that a resident is missing or has run away.

3. Any weapons in the GFH shall be securely stored and shall be the responsibility of the group foster parents.

F. Personal communication. To encourage residents to maintain or develop close relationships with members of their family, friends, relatives, communication channels shall be as open as is possible.

1. Mail policy. Residents' mail, both incoming and outgoing shall not

be intercepted except where there is reasonable ground to justify such action. If mail is to be read, such action shall be documented.

2. Use of telephone. Written policy shall provide that residents have access to a telephone to make and receive private calls, and shall state any rules that prohibit access.

G. Personal possessions.

1. Each resident shall be allowed to bring appropriate personal possessions to the GFH and shall be allowed to acquire possessions of his/her own to the extent the GFH is able to accommodate secure storage of them.

2. Group foster parents may inspect residents' possessions for contraband if there are reasonable grounds to believe that contraband is present.

H. Relative to public reports, statements or appearances.

1. Residents shall not be required to make public statements acknowledging their gratitude to the program and shall not be required to perform or appear at public gatherings.

2. The group foster parents, supervising agent or coordinator shall not use reports or pictures from which a resident can be identified without written consent from the resident and his/her parents or legal guardians.

a. The signed consent forms shall be on file before any reports or pictures from which residents can be identified are used.

b. The resident shall be informed that he/she has the right to withdraw his/her consent at any time.

11 MCAR § 2.478 Physical facility.

A. Building.

1. Location. In metro areas, the GFH shall be located so that it is accessible to schools, transportation, hospitals, clinics, mental health resources, churches, libraries, and recreational-cultural facilities. In rural areas, a transportation plan to provide accessibility is sufficient.

2. Bedrooms.

a. Single bedrooms shall provide at least seventy (70) square feet of useable floor space with a side dimension of not less than seven (7) feet for ambulatory residents. For non-ambulatory residents, the requirements are one hundred (100) square feet of useable floor area with a side dimension of not less than nine (9) feet.

b. Multi-bedrooms shall provide at least sixty (60) square feet per

person of useable floor space with at least three (3) feet between beds placed side by side, and at least one foot between beds placed end to end for ambulatory residents. For non-ambulatory/non-mobile residents, the multi-bedrooms shall provide at least eighty (80) square feet of useable floor area. Multi-bedrooms for active, non-ambulatory, mobile residents shall be at least one hundred (100) square feet per resident. Mobility space at the end and one side of each bed shall be not less than four (4) feet, per resident.

c. Bedrooms for non-ambulatory mobile residents shall have adequate accessible space for storage of wheel chairs and other prosthetic or adaptive equipment for daily out of bed activity or acceptable similar storage spaces shall be provided outside the bedroom readily and handily accessible to the resident.

d. In new or remodeled buildings, bedrooms shall accommodate no more than four (4) residents.

3. Each resident shall be provided, at a minimum, with bed; mattress; supply of bed linen and towels; chair; adequate lighting; and closet/locker space.

4. Separate bedrooms.

a. Male and female residents shall not occupy the same bedrooms.

b. Youth and adults shall not share bedrooms except in circumstances approved by the supervising agent.

5. Counseling space and visiting room.

a. Space shall be provided to accommodate group meetings.

b. A visiting area shall be provided where resident may receive and talk with visitors privately.

6. Bathroom facilities.

a. Every facility shall be equipped with adequate and conveniently located toilet rooms for its residents. Washbasins and toilets shall be provided in the ratio of at least one (1) toilet and at least one (1) washbasin for every eight (8) residents.

b. At least one bath or shower shall be available for every eight (8) residents.

7. Laundry facility. The facility shall have one (1) washer and one (1) dryer for every sixteen (16) residents, or equivalent laundry capacity available in the immediate vicinity of the facility.

8. Dining room. The dining area shall comfortably accommodate, at one time, all of the foster youths plus the natural family living in the GFH.

B. Environment.

1. A GFH may not concurrently hold a license for family day care, or group day care without prior approval by the commissioner.

2. All persons living in the GFH shall first be approved by the coordinator or the sponsoring agency.

3. The group foster parents shall not admit nor dismiss any youth without the authority of the commissioner, the juvenile court, or the youth's supervising agent.

4. The commissioner and any supervising agent shall have access to the GFH for evaluation at any time during normal working hours and at other times by mutual agreement. For the purpose of investigating complaints concerning the health and safety of the youths, the commissioner and any supervising agent shall have access to the GFH at any time during the twenty-four (24) hour day.

11 MCAR § 2.482 Health care and medical services.

A. Group foster parents shall be responsible for assisting in arranging for medical and dental care for each resident.

B. If a resident is suspected of having a communicable disease, the group foster parents shall see that he/she is given a physical examination by a qualified physician and any necessary treatment.

C. Medications shall be administered only as instructed by a licensed physician.

D. All medical records shall be maintained including office visits, medications given, dosage, time period and the signature of the person administering the medication. (See Records, 11 MCAR § 2.490.)

E. The GFH shall have first aid equipment, which meets American Red Cross standards available at all times for medical emergencies.

11 MCAR § 2.486 Nutrition and food.

A. When the GFH provides or contracts for food service, the service shall comply with and meet all sanitation and health codes as promulgated by state or local authorities.

B. Dietary service. The food and nutritional needs of residents shall be met in accordance with their needs and shall meet the dietary allowances as stated in the Recommended Dietary Allowances, Food and Nutrition Board, National Research Council, National Academy of Sciences, 8th Edition, 1974. Providing each resident the specific serving per day from each of the following four food groups will satisfy this requirement.

(1) Meat or Protein Group.

Two or more servings per day.

A serving within this group is defined as:

2-3 ounces cooked, lean, edible meat
2 medium eggs
4 tablespoons peanut butter
1 cup dry beans

(2) Milk Group.

Four servings per day.

A serving is defined as:

1 cup of milk
1 ounce of cheese
½ cup cottage cheese

(3) Cereal and Bread Group.

Four or more servings per day.

A serving is defined as:

½ to 1 slice of bread
½ to ¾ cup cereal
½ to ¾ cup of rice
½ to ¾ cup of pasta

(4) Fruit and Vegetable Group.

Four or more servings per day.

A serving is defined as:

½ cup potatoes
½ cup cooked vegetables
4 pieces raw vegetables
½ cup fruit
½ cup juice (citrus, etc.)

C. A minimum of three (3) meals a day shall be available for residents unless an agreement states otherwise. The group foster parents shall ensure that the youths receive adequate meals during the day while they are in community activities. This shall include participation in a school lunch program.

11 MCAR § 2.490 Records.

A. Residents' records maintained by supervising agent, or coordinator, or sponsoring agency.

1. A record shall be kept of ongoing medical information (when available), including:

- a. Immunization;
- b. Dental examination;
- c. Reports of any illness or injury and treatment given;
- d. Psychological examinations and treatment;
- e. Use of drugs;
- f. Routine physical examinations and other medical contacts;
- g. Consent for necessary dental, medical and surgical treatment, and hospitalization.

2. The record shall include a summary of the resident's progress. These reports shall be recorded regularly and shall include the following:

- a. Reports of significant incidents, both positive and negative, and changes in the family situation;
- b. Plans which involve the resident;
- c. Grievance and disciplinary actions.

3. Each record shall have a face sheet bearing factual data and identifying information. The group foster parents are required to keep a copy of the face sheet which shall include the following:

- a. Name;
- b. Date and place of birth;
- c. Sex;
- d. Religion;
- e. Race;
- f. Name of person(s) to contact in emergencies;
- g. Guardianship and custody;
- h. Date of admission;
- i. Insurance policy numbers, medical number, if any;

- j. Name of probation officer, parole officer, or welfare worker;
- k. Date of termination;
- l. Special medical problems or needs;
- m. Financial arrangements for medical care;
- n. Legal status, including jurisdiction, length and conditions of placement;
- o. Financial arrangements for care.

4. Group foster parents shall refer any individuals or agencies requesting resident data to the supervising agent of the youth.

B. Personnel. Group foster parents shall have access to their personnel files which are maintained by the supervising agent or coordinator.

11 MCAR § 2.501 Introduction.

A. Section 1, Minn. Stat. § 241.021, subd. 1, as amended by Laws of 1978, ch. 778, provides that the Commissioner of Corrections shall promulgate rules establishing minimum standards for all correctional facilities throughout the state whether public or private, established and operated for the detention and confinement of persons detained or confined therein according to law except to the extent that they are inspected or licensed by other state regulating agencies. The rules which follow are intended to fulfill that requirement for secure juvenile detention facilities.

B. The purpose of these standards is to facilitate the implementation of rules in accordance with Minn. Stat. § 241.021, subd. 1, and to provide a framework for inspection and licensing of secure juvenile detention facilities.

11 MCAR § 2.505 Definitions. For the purpose of these rules:

A. "Absconder" shall mean any person who departs from the custody of a secure detention facility or the grounds thereof, without lawful authority and includes the failure to return to custody following temporary leave granted for a specific purpose or limited period.

B. "Administrative Segregation" shall mean the physical separation of those juveniles who are determined to be prone to escape, prone to assault staff or other juveniles or likely to need protection from other juveniles.

C. "Approved Capacity" shall mean the number of residents or occupants for which any room, unit, building, facility or combination thereof was planned, designed and approved for in compliance with the rules herein contained.

D. "Average Daily Population" shall mean the average number of residents (juveniles) residing daily during the last calendar year. Unless expressly stated otherwise, the term "Average Daily Population" as used in these rules shall not include juveniles who are not housed in the facility for at least a portion of the day for which such "Average Daily Population" is computed. As examples, juveniles on temporary release status or hospitalized need not be considered in such computation.

E. "Child Care Worker" shall mean those staff with titles such as correctional officer, counselor, child care supervisor, or equivalent, whose primary duties are the day-to-day or ongoing supervision of juvenile residents of a local facility.

F. "Commissioner" shall mean Commissioner of the Minnesota Department of Corrections or his designee.

G. "Controlled Substance" shall mean a drug, substance or immediate precursor in Schedules I through V of Minn. Stat., ch. 152. The term shall not include distilled spirits, wine, malt beverages, intoxicating liquor or tobacco.

H. "Department of Corrections" or "Department" shall mean Minnesota State Department of Corrections.

I. "Disciplinary Segregation" shall mean that status assigned a juvenile as a consequence of or means of control resulting from a violation of facility rules or statute which consists of confinement in a room, or housing unit separate from the general population of the facility.

J. "Emergency" shall mean any significant incident or disruption of normal facility procedures, routines or activities such as fire, riot, natural disaster, suicide, escape, assault on staff, medical emergency, or other similar occurrences.

K. "Existing Facility" shall mean any facility in existence and being used for the secure detention of juveniles prior to the effective date of these rules.

L. "Facility Administrator" unless expressly stated otherwise, shall mean administrator, superintendent, director or other individual who has been assigned, designated or delegated responsibility and authority for the administration and operation of a local facility.

M. "Holding Area" shall mean a cell or room in the facility used to hold one or more persons temporarily while they are awaiting such things as release, booking, court appearance, transportation, interrogation, or other similar temporary holds.

N. "Inspection" shall mean an on-site viewing and assessment of existing conditions and their relationship to minimum standards.

O. "Legend Drug" shall mean a drug which is required by federal law to bear the following statement: "Caution, Federal law prohibits dispensing without prescription."

P. "Local Facility" shall mean any public or privately operated secure juvenile detention facility.

Q. "Medicine" shall mean any remedial agent that has the property of curing, preventing, treating or mitigating diseases, or that is used for that purpose. For the purpose of these rules, medicine shall include legend and non-legend drugs.

R. "Policy" shall mean a statement declaring mission, purpose, and ideological position.

S. "Procedure" shall mean a statement establishing the action plan to accomplish policy.

T. "Resident" shall mean any juvenile detained and residing in any local detention facility governed by these rules.

U. "Secure Juvenile Detention Facility" shall mean a physically restricting facility, including a detention home.

V. "Substantially Conform" as used in 11 MCAR § 2.509 D., shall mean compliance with 70 percent or more of all rules applicable to a facility's classification as stated herein and, additionally, shall mean compliance with 70 percent or more of all rules applicable to a facility's classification in each section of these rules. 'Section' as used in this definition means the entire area or subject matter under a given rule, e.g., 11 MCAR § 2.501, or 2.505.

W. "Variance" shall mean the waiver of one or more of the standards prescribed by the Commissioner of Corrections for a specified period of time.

11 MCAR § 2.509 Inspections, intended use and non-conformance with rules.

A. Annual inspections. Each juvenile correctional facility required to be licensed by Minn. Stat. § 241.021 will be inspected at least once annually. Each facility and its books and records pertaining to its operation and the care, custody and protection of its residents, shall be accessible at all times for inspection by the Commissioner or his designee. All reports relating to the condition of the facility and its conformity with the standards established by the Commissioner will be made in accordance with these rules.

B. Intended use. No secure juvenile detention facility organized and established for the detention, care and treatment of children and youth adjudicated to be delinquent shall be used for the temporary detention of children and youth alleged to be delinquent and awaiting the judicial process until licensed to do so by the Commissioner.

C. Revocation of license for non-conformance. Revocation of license proceedings shall be commenced when conditions in the facility are likely to endanger the health, welfare or safety of the residents or staff. After revocation of its license, the facility shall not be used for the detention, care and training of children and youth, unless otherwise provided by order of the District Court, or unless relicensed.

D. Issuance of license. A license shall be granted to a county, municipality or agency thereof operating a facility, if the facility is in substantial conformance with rules stated herein or is making satisfactory progress towards substantial conformance and if the interests and well-being of children and youth received therein are protected. The license shall remain in force one year unless sooner revoked.

E. Separate license. If a facility offers both secure detention and rehabilitation programs, it will need to meet the licensing standards for both secure detention and residential facilities.

F. Posted license. The license(s) of each secure juvenile detention facility

shall be conspicuously posted in an area where residents are admitted to the facility.

G. Severability. If any article, section, subsection, sentence, clause or phrase of these rules is for any reason held to be unconstitutional, contrary to statute, exceeding the authority of the Department of Corrections, or otherwise inoperative, such decision shall not affect the validity of the remaining portion of these rules.

11 MCAR § 2.512 Variances.

A. Variances. The granting of a variance under this section shall not constitute a precedent for any other juvenile detention facility. The Commissioner shall grant a variance if, in the licensing procedure or enforcement of the standards the Commissioner finds that:

1. To require a particular juvenile detention facility to comply strictly with one or more of the provisions will result in undue hardship;
2. The juvenile detention facility is otherwise in compliance with said standards and their general purpose and intent.

B. Emergency suspensions of rules. Nothing contained herein shall be construed to deny the power of any facility administrator to temporarily suspend any rule herein prescribed in the event of any emergency.

1. Only rules directly affected by the emergency may be suspended.
2. The facility administrator shall notify the Department of Corrections in writing within seventy-two (72) hours of a suspension of any rule.
3. No suspension shall exceed seven days without the approval of the Commissioner of Corrections.

11 MCAR § 2.515 Personnel standards.

A. Staff health.

1. All employees shall, prior to employment and annually thereafter, show freedom from tuberculosis by a report of either a standard Mantoux tuberculin test or chest x-ray.
2. If the Mantoux test is positive or contra-indicated, a chest x-ray shall be taken. The results of these tests shall be reported in writing and made a part of the staff member's personnel record.
3. Any staff member with a contagious disease shall not be permitted to work in the facility until such time that a physician certifies that the staff member's condition will permit his return to work without endangering the health of other staff and residents.

4. The facility administrator shall require that a staff member have a medical examination when there is reason to believe a contagious disease exists.

B. Recruitment.

1. The selection, appointment and promotion of facility personnel shall be made on the basis of assessed ability.

2. All employees who have direct client contact and responsibility, and are employed after the effective date of these rules shall be at least eighteen (18) years of age.

3. Other employees or volunteers under eighteen (18) years of age shall be under direct supervision.

4. Any service personnel other than facility staff, including offenders from adult correctional institutions, occasionally performing work in the facility shall perform services only intermittently and under direct and continuous supervision of facility staff when such personnel are in areas permitting contact with juveniles.

5. Recruitment standards shall be reasonable and geared to reach the widest possible work force.

6. Recruitment standards shall set forth the basic requirements as to age, ability, preparatory experience and physical condition.

7. A criminal record check shall be conducted on all new employees to ascertain whether there are criminal acts which have a specific relationship to job performance.

C. Employee evaluation.

1. Every employee shall satisfactorily complete a probationary period on the job before appointment is made permanent.

2. Each employee shall be evaluated at least once during their probationary period and annually thereafter.

3. Evaluations shall be in writing, discussed with the employee, and made a part of the employee's personnel record.

D. Extra duty. No employee shall be scheduled for duty for two (2) consecutive work periods except in a documented emergency, or where unusual circumstances require reasonable and prudent exception.

E. Staffing requirements.

1. Staffing plan. The facility administrator shall prepare and retain a staffing plan indicating the personnel assigned to the facility and their duties.

2. Minimum staff requirements. The following are minimal staff requirements for each facility:

a. Facility administrator. There shall be a single administrator or chief executive of each facility. Where the average daily population of residents exceeds fifty (50), the administrator shall have an assistant. In the absence of the facility administrator, a staff person shall be designated as person in charge. The facility shall not be left without such on-site supervision.

b. Staff presence. No person shall be housed in the facility without a staff person on duty, present in the facility, awake and alert at all times, capable of responding to reasonable needs of the residents.

c. Sex of staff. Staff members shall not be placed in positions of responsibility for the supervision and welfare of residents of the opposite sex in circumstances that can be described as invasion of privacy, degrading or humiliating to the resident. Where staff of one sex are used as program resource personnel with residents of the opposite sex, backup staff of the residents' sex must be on duty, awake and alert in the facility to provide assistance as needed without delay.

d. Relief staff. Personnel shall be provided to perform ancillary functions such as transportation or court escort to the extent necessary to insure that security, supervision of residents, the administration of program activities, and the efficient operation of the facility are not reduced or jeopardized by such activities. Part-time and relief staff shall complete orientation training appropriate to their assigned responsibilities.

e. Maintenance personnel. Maintenance personnel shall be employed to perform preventive, routine and emergency maintenance functions.

f. There is a staffing plan which provides increased staff during program periods; there are a minimum of two staff on duty at all times in the facility, one of whom is female when females are housed in the facility.

g. Educational/vocational staff shall be provided consistent with 5 MCAR § 1.0122.

h. Volunteer coordinator. Where the facility utilizes the service of volunteers:

(1) The facility administrator shall designate a staff person to coordinate and be responsible for volunteer services utilized by the facility.

(2) There shall be a system for official registration and identification of volunteers.

(3) Volunteers shall agree in writing to abide by all facility policies, particularly those relating to confidentiality.

(4) Written policies shall specify that volunteers perform professional services only when certified or licensed to do so.

(5) Written policies and procedures shall provide that the administrator curtails, postpones or discontinues the services of a volunteer or volunteer organization when there are substantial reasons for doing so.

i. There is a written plan that provides for continuing operations in the event of a work stoppage or other job action. Copies of this plan shall be available to all supervisory personnel, who are required to familiarize themselves with it.

11 MCAR § 2.518 Staff training.

A. Training plan. Each facility administrator shall develop and implement a training plan for the orientation of new employees and volunteers and provisions for continuing in-service training programs for all employees and volunteers.

1. The training shall be documented and be descriptive of course curriculum, methods of instruction and objectives of instruction.

2. In-service training plans shall be prepared annually and orientation training plans reviewed and revised as necessary to adjust to changing conditions.

B. Orientation training. Written policy and procedures shall provide that full-time staff or volunteers who work in direct and continuing contact with residents receive forty (40) hours of training. Such training shall be satisfactorily completed prior to regular shift assignment and shall include, at a minimum:

1. Human relations and communication skills;
2. Crisis intervention;
3. Special needs of youth;
4. Problem-solving and guidance;
5. Facility's philosophy for handling troubled youth;
6. Residents' rules and regulations;
7. Rights and responsibilities of residents;
8. Grievance and disciplinary procedures;
9. Security procedures;

10. Physical restraint procedures;
11. Supervision of residents;
12. Report writing;
13. Significant legal issues;
14. Interaction of elements of the juvenile justice system;
15. Relationships with other agencies;
16. Fire emergency procedures; and
17. First aid and life-sustaining functions.

C. In-service training. All child care workers, management and professional personnel shall complete a minimum of forty (40) hours of in-service training per year.

D. Management training. All management personnel and facility administrators who have not completed comparable training or who have not had two (2) or more years administrative experience shall complete at least the orientation training appropriate to the facility's classification and an additional forty (40) hours of facility management training within the first year in their position.

E. Space and equipment required for the training and staff development program shall be provided.

11 MCAR § 2.521 Staff deployment, job descriptions, work assignments, post orders, policies and procedures.

A. Job descriptions. Each facility administrator shall develop written job descriptions for all position classifications and post assignments which define responsibilities, duties and qualifications.

1. These shall be readily available to all employees with copies on file in the administrator's office.

2. Each employee shall be thoroughly familiar with his duties and responsibilities.

B. Work assignments. Work assignments shall be consistent with qualifications as stated in job descriptions and the approved staffing plan of the facility.

C. Channels of communication. The facility administrator shall develop and maintain channels of communication with employees which include:

1. Availability of written personnel policies to employees;
2. Regularly scheduled meetings of supervisory personnel;
3. Regularly scheduled meetings between supervisors and subordinates;
4. Probationary and annual employee evaluations.

D. Staff policies and procedures. The facility administrator shall develop written policies and procedures to cover emergency situations, such as escape, fire, medical emergencies, procedural statements concerning admission and release of residents, schedules for laundry, feeding, canteen, visiting, security checks and other events of significant bearing on the consistency of operations.

E. Policy and procedure manuals. All policies and procedures concerning the facility's operation shall be made available to all employees at the time of employment and as revised thereafter in policy and procedure manuals. Such manuals shall be available at a secure location to all staff within the facility.

F. Personnel policies. Written personnel policies shall be developed by the facility administrator and governing body which specify hours of work, vacations, illness, sick leave, holidays, retirement, employee health service, group insurance, evaluation procedures, promotions, personal hygiene practices, attire, conduct, disciplinary actions and other items which will enable employees to perform their duties properly.

G. Availability of rules. Copies of all rules relating to the facility and its operation shall be made available to all personnel of the facility.

1. All personnel shall be instructed in the requirements of the law and rules pertaining to their respective duties.
2. Such instruction shall be documented and on file.
3. Assistance with respect to developing conditions necessary to comply with rules shall be provided by the Commissioner of Corrections when requested.

H. Public information plan. Each facility administrator shall develop a written plan for dissemination of information to the public, to other government agencies, and to the news media.

I. Merit system and collective bargaining. Nothing in this rule shall be construed so as to prevent the establishment of job descriptions, work assignments, channels of communications, or personnel policies by, through or in cooperation with the appropriate merit system or collective bargaining agreement.

11 MCAR § 2.524 Records and reports.

A. Maintenance of records and reports. Each facility shall maintain accur-

ate and complete records, reports and statistics necessary for the conduct of its operation. The following records, reports and statistics shall be maintained:

1. Admission and release records;
2. Resident personal property records;
3. Records of reports submitted to the Department;
4. Clothing, linen and laundry records;
5. Records of budget requests and work orders;
6. Unusual occurrence records;
7. Records of policies and procedures;
8. Records of correspondence with the Department;
9. Employee personnel records;
10. Records of staff training;
11. Accounting records;
12. Food service records;
13. Daily log;
14. Medical and dental records;
15. Programming records; and
16. Disciplinary records.

B. Storage and preservation of records. Space shall be provided for the safe storage of records at the facility's record keeping or control center and in general storage.

1. Records shall be filed so as to be organized and readily retrievable.
2. All resident records shall be preserved as required by law.

C. Filing and disposition of records. Resident records shall be readily retrievable. The records of released residents shall be promptly completed and filed in the facility.

D. Confidentiality of and access to resident records. Confidentiality of resident records and resident access to factual (non-confidential) data in their personal files shall be kept and provided in conformity with state law.

11 MCAR § 2.527 Resident welfare.

A. Separation. A combination of separate living spaces, sanitation facilities, activity spaces and detention rooms shall be provided to properly segregate juvenile males from juvenile females.

1. Separation of male and female juveniles shall provide complete separation of their living and sanitation facilities to the extent necessary to insure their privacy from residents of the opposite sex.

2. Facility administrators of juvenile detention facilities that house both male and female juveniles shall develop and schedule coeducational activities and programs and provide selected coeducational services that are in the best interest of the children. Such coeducational activities, programs, and/or services shall be supervised by trained staff at all times, consistent with personnel rules stated herein.

B. Classification. Such criteria as sex, age, delinquent sophistication, assaultiveness, degree of security or escape risk, and other criteria designed to provide for the protection and safety of the residents, staff, and the community will be used at the discretion of the facility administrator. The established criteria used will be in writing and available for review at the time of annual inspection.

C. Information to residents.

1. Copies of rules and regulations shall be made available to all residents throughout their confinement concerning the following:

a. Rules and regulations governing conduct and disciplinary consequences;

b. Procedures for obtaining personal hygiene and canteen items;

c. Policies governing visiting, correspondence, bathing, laundry, and clothing and bedding exchange.

2. Each resident, within twenty-four (24) hours of admission, shall either be provided with a copy of the program options and activities provided in the facility as well as the outside resources available, or interviewed and advised of same by program staff.

3. Each of the above shall be explained to those residents who are unable to read or have any questions regarding same.

4. Legal rights. Residents shall be advised of their legal rights with respect to detention or confinement by facility personnel. Every resident admitted to any facility shall be advised of the official charge or legal basis for detention.

D. Administrative segregation. Each facility administrator shall develop and implement policies and procedures for the use of administrative segregation.

1. Administrative segregation shall consist of separate and secure housing, but shall not involve any deprivation of amenities or privileges normally afforded other residents, except to the extent that the protection of the resident, staff or public justify the necessity of such deprivation.

2. Any resident placed on administrative segregation shall be reviewed by the facility administrator or his designee within eight (8) hours or whenever the original circumstances that placed him/her in such a status have been altered. Continuation of such status shall require documented approval of the facility administrator or his designee.

3. Discipline plan.

a. All facilities shall have a resident discipline plan, which explains clearly the consequences or administrative sanctions for specific behaviors, omissions, the administrative process for handling major and minor violations, the right to internal review and the review process.

b. The facility administrator shall include in the disciplinary plan a system of due process which has been reviewed and approved by the appropriate legal advisor for the detention center's governing body.

4. Disciplinary segregation (room restriction).

a. Disciplinary segregation shall be used only after and in accordance with due process procedures.

b. The status of any resident placed in disciplinary segregation subsequent to a due process hearing shall be reviewed by the facility administrator or his designee at least once every twenty-four (24) hours. If continued disciplinary segregation is deemed necessary, this decision shall be documented, as shall each subsequent review every twenty-four (24) hours.

c. Any resident placed in disciplinary segregation prior to a due process hearing shall have a due process hearing within twenty-four (24) hours of such segregation (exclusive of holidays and weekends) unless cause can be shown for delays, which shall be documented. As examples:

(1) Resident requests for delay;

(2) Logistically impossible as in the case of mass disturbances.

5. Other limitations on disciplinary actions.

a. The disciplinary rooms shall have minimum furnishings and space specified in these standards.

b. Residents shall be issued clothing and bedding as specified in these standards excepting that those residents who persist in the destruction of bedding, clothing or self with same, may be deprived of such articles. The decision to deprive residents of such articles of clothing and bedding shall be reviewed by the shift supervisor during each eight (8) hour period, unless specified orders to the contrary have been issued by the facility administrator or his designee or on the advice of a licensed physician or psychologist.

c. The delegation of authority to any resident or group of residents to exercise the right of punishment over any other resident or group of residents is expressly prohibited.

d. No resident shall be deprived of the use of materials necessary to maintain an acceptable level of personal hygiene.

6. Instruments of restraint. Instruments of restraint, such as handcuffs, chains, irons and straitjacket shall never be applied as punishment.

a. Instruments of restraint shall not be used except in the following circumstances:

(1) As a precaution against escape during a transfer;

(2) On medical grounds by direction of a consulting or attending physician or psychologist;

(3) By order of the facility administrator or person in charge, if other methods of control fail, in order to prevent a resident from injuring himself or others or from damaging property.

b. The facility administrator shall develop written policies and procedures to govern the use of restraints.

c. Such instruments shall not be applied for any longer time than is strictly necessary.

d. Each incident involving the use of restraints consistent with D. 6. a. (2) or D. 6. a. (3) shall be documented and retained on file.

e. Any detention personnel authorized to utilize restraints shall receive appropriate training in the usage of such restraints. Such training shall be documented and on file.

7. Disciplinary records. The keeping of a record of all disciplinary infractions and punishment administered therefore is mandatory. This requirement shall be satisfied by retaining copies of rule violation reports and reports of the disposition of each.

E. Activities.

1. Activities plan. Each facility administrator shall develop and implement a written plan for the constructive scheduling of resident time.

a. The plan shall be consistent with established legal rights of residents.

b. Such a plan shall include consideration of the following:

(1) The facility's rated capacity;

(2) The security needs of residents confined. Activities and amenities shall be consistent with the needs and behavior of residents and may be in accordance with established reasonable and necessary facility regulations to protect the facility's security and the welfare of residents.

2. Provisions for religious services and counseling. Residents shall be afforded an opportunity to participate in religious services and counseling on a voluntary basis.

a. The facility administrator shall arrange with the clergy within the area to conduct religious services and provide counseling if requested.

b. Residents requesting private interviews or counseling (not capable of being audio monitored), regarding religious, personal or family problems with accredited clergy, nuns, seminarians and laypersons active in community church affairs, shall be afforded this opportunity within such regulations as are reasonable and necessary to protect the facility's security.

c. No resident shall be required to attend religious services and religious services shall be held in such a location that the residents who do not wish to participate are not exposed to the service.

d. Any resident desiring to read the Bible will be provided with a copy of the same.

e. Attendance or lack of attendance at religious services shall not be considered as a basis for any right or privilege within the facility.

3. Library service. The facility administrator of each facility shall develop and implement a plan for library service including provisions for:

a. Access to current leisure reading material such as books, magazines and newspapers;

b. Textbooks necessary to complete a course of study and legal books and references requested by residents shall be provided upon request to the extent resources permit. The facility's governing body shall not be responsible for purchasing legal books and references.

4. Education program. Education programs shall be consistent with State Department of Education rules and statutory requirements governing juvenile education.

5. Work assignments—juveniles.

a. It is appropriate for juveniles to be required to perform such duties as making beds, cleaning own rooms, cleaning group living areas and cleaning activity areas.

b. They shall not be required to perform such duties as personal services to staff, cleaning or maintaining areas away from the facility, replacing employed staff.

c. Care shall be taken not to require any juvenile to do work they cannot perform for physical reasons.

6. Canteen. See the Food Service section of these standards.

7. Exercise and recreation. Each facility administrator shall develop and implement a plan providing for opportunities for physical exercise and recreational activities for all residents. At a minimum, such a plan shall include the following:

a. Such regulations as are reasonable and necessary to protect the facility's security and the residents' welfare;

b. Provisions for a minimum of two (2) hours daily of organized and supervised physical exercise and recreational activities and leisure time activities, excluding time spent watching television, for all residents. Organized and supervised means pre-planned exercise or activities supervised by staff qualified to direct same;

c. Provisions for indoor space and equipment for active recreation; and

d. Provisions for outdoor recreational space, equipment and supportive staff for outdoor recreational programming.

8. Leisure services. Each facility administrator shall develop and implement a plan and provisions for leisure time activities, equipment and materials.

F. Visiting plan. Each facility administrator shall develop and implement a resident visiting plan. Such plan shall be in writing and shall include the following:

1. Security provisions consistent with security rules stated herein;

2. Provisions for resident consultation with their attorneys at the place of confinement at reasonable times and for such periods as are reasonable. Attorney visits shall not be monitored;

3. The administrator shall uniformly set the numbers of permissible visits for each resident and the number of visitors permitted for each visit;

a. Although visits must be governed by administrative constraints and space availability, parents' or guardians' visiting policies shall be as unrestrictive as practical. The child's parent, guardian or child care worker and attorney shall be permitted to make an initial visit to the facility at any time.

b. Juvenile detention facilities shall provide at least three opportunities each week for parental visits, in addition to the initial visit.

c. Visiting hours shall be regularly scheduled and offer both evening and daytime hours on weekdays and at least one (1) time on weekends.

d. Provisions in the plan shall allow for exceptions to the regularly scheduled hours to accommodate for parents' work schedules or business, illnesses or emergencies within the family, or special family functions.

e. Child-parent visits arranged with attorneys in preparation of a legal case, or by the court, probation officer, caseworker, or other bonafide professional, in the development of a plan for treatment or placement of the child, shall be in addition to the number of required visiting opportunities.

4. Visits shall be allowed for identified members of a resident's immediate family, his counsel, clergyman, and others who would be helpful in planning for the child;

5. The administrator may deny a visit to a resident when he has reasonable grounds to believe that the visit might endanger the security of the facility. Reasons for denial of a visit shall be in writing with a copy being issued to the resident, the person attempting to visit and the file within the facility;

6. Visitors shall register, giving names, addresses and relationship to resident;

7. Any area used for resident visiting with audio monitoring capabilities shall be posted with a written notice of same; and

8. Visits conducted in resident's living areas shall not conflict with the normal activities of residents not receiving visitors.

G. Correspondence and telephone. Each facility administrator shall develop and implement a plan for the handling of resident mail and resident telephone useage consistent with established legal rights of juveniles and reasonable and necessary facility regulations to protect the facility's security.

H. Juvenile clothing, bedding and laundry services.

1. Clothing.

a. Each resident shall have neat, clean clothing appropriate for the season. Such clothing shall be provided by the agency if the youth does not have it.

b. Clothing used to supplement resident's personal clothing shall be of a non-jail/non-uniform type. Facility clothing should not be used on an ongoing basis. Residents shall be allowed to wear personal clothing to the extent reasonable and necessary regulations of the facility permit.

c. Clothing shall be exchanged at least twice each week or more often as necessary.

d. The facility shall have available a sufficient quantity and variety of clothing to insure each resident has neat, clean clothing appropriate to the season.

e. Residents' excess personal clothing shall be returned to designated family members or stored in a manner which prevents mildew and other damage and properly identified, inventoried and secured. Residents possessing excess personal property shall sign and receive a copy of the inventory record for such property and indicate their agreement or disagreement with such records.

2. Linens and bedding.

a. Each resident admitted to the facility shall have made available the following:

(1) One (1) bath towel, one (1) hand towel, one (1) washcloth;

(2) One (1) clean, firm, fire-retardant mattress;

(3) Polyurethane foam mattresses shall not be used in the facility;

(4) Two (2) sheets or one (1) sheet and a clean mattress cover;

(5) Sufficient clean blankets to provide comfort under existing temperature conditions; and

(6) One (1) pillow and one (1) pillow case, anti-allergenic if required or requested.

b. Clean linens shall be furnished at least once each week, or more frequently to maintain cleanliness.

c. Bedding and linens which are worn out or unfit for further use shall not be used.

d. Residents not admitted to living units who are detained in holding rooms utilized solely for the purpose of intake and release processing need not be issued linens and bedding.

3. Removal of clothing and bedding.

a. It may be deemed necessary by the facility administrator or person in charge to remove clothing and/or bedding from a resident if the behavior of the resident threatens the safety and/or security of the individual, others, or the facility.

b. As such action implies that all reasonable steps have been taken without success to insure the safety and well being of the resident as well as the security of the facility, an unusual occurrence report shall be completed and filed.

4. Laundry services.

a. Laundry services shall be managed so that clothing, linen and bedding needs are met.

b. The collection, storage and transfer of clean and soiled clothing, bedding and linen shall be accomplished in a manner which will minimize the danger of disease transmission. Care shall be taken to maintain separation of clean and soiled linens and clothing.

c. Where laundry service is obtained from an outside agency or establishment, such service shall be provided under a written agreement which shall specify that the service meets standards required by the State Department of Health.

d. Residents' personal clothing and other non-linen items shall be laundered in accordance with appropriate washing procedures for the various fabrics.

I. Emergencies and unusual occurrences.

1. Emergency plan. The facility administrator shall develop a written disaster plan with procedures for the protection and evacuation of all persons in the case of fire, explosion, flood, tornado, or other emergencies.

a. The plan shall be developed for each facility and its type of occupancy with the assistance and advice of at least the local fire and/or rescue authority (Civil Defense).

b. The plan shall include information and procedures relative to: locations of alarm signals and fire fighting equipment, testing of equipment by a local fire official at least quarterly, frequency of drills, assignment of specific tasks and responsibilities of the personnel on each shift, persons and local emergency department to be notified, precautions and safety measures during tornado alerts, procedures for evacuation of residents during emergencies when necessary, and arrangements for temporary emergency confinement and care in the community in the event of a total evacuation.

c. Copies of the disaster plan containing basic emergency procedures shall be available at a secure central security station to all staff within the facility.

d. Copies of a detailed disaster plan shall be available to all supervisory personnel.

2. There shall be an automatic fire alarm and heat and smoke detection system approved by the state fire marshal or recognized state authority and tested on a regular basis.

3. Security policies and procedures. Emergency planning shall be sufficient to provide immediate and effective action in the event of any emergency. All such planning shall be inclusive of policies and procedures designed to protect the public by securely detaining residents who present a danger to the community or to themselves.

4. Other emergency planning. In addition to development of a disaster plan as outlined in I. 1., emergency planning shall be sufficient to provide immediate and effective action in the event of hostage incidents, escape and escape attempts, suicide and attempted suicide, any illness or accident deemed an emergency, power failure, major resident disturbances, assaults and outbreaks of contagious disease or epidemic.

5. If medical services are delivered in the facility or through contract services, adequate space, equipment, supplies and materials, as determined by the responsible physician, shall be provided for the performance of primary health care delivery.

6. Plans shall be developed and maintained sufficient to maintain the health, safety and security of residents and facility during brief or extended losses of light, heat or communications.

7. Emergency procedures meeting. There shall be a meeting of all employees on each shift at least once every three (3) months to discuss and review emergency procedures used in the facility. The agenda of the meeting shall cover:

a. Assignment of persons to specific tasks and responsibilities in case of emergency situations;

b. Instructions relating to 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; and

e. Specification of evacuation routes and procedures. Such routes shall be distinctly marked, continuously illuminated and kept clear and in useable condition.

8. Unusual occurrences. All incidents or attempted incidents of an

unusual or serious nature which involve, or endanger the lives or physical welfare of facility staff or residents shall be reported to the Department within ten (10) days in writing.

a. Such report shall include the name(s) of person(s) involved (staff and residents), nature of unusual occurrence, actions taken, and the time of occurrence.

b. Unusual occurrences shall include:

- (1) Suicide;
- (2) Homicide;
- (3) Death (other than suicide or homicide);
- (4) Serious injury or illness (accidental, self or other inflicted, incurred subsequent to detention);
- (5) Escape;
- (6) Fire;
- (7) Riot;
- (8) Assaults on staff or residents;
- (9) Other serious disturbances;
- (10) Occurrences of infectious diseases and disposition.

c. Unusual occurrences shall be reported to the Minnesota Department of Corrections. The form for reporting shall be obtained from the Department of Corrections.

d. Written plans governing space arrangements and procedures to follow in the event of a group arrest that exceeds the maximum capacity of the juvenile detention facility shall be developed; these plans are to be reviewed at least annually and updated if necessary.

e. In the event of an emergency such as serious illness, accident, imminent death or death, the resident's parents, guardians or other significant others who maintain a close relationship with him shall be notified.

9. Resident death. When a resident's death occurs:

a. The date, time and circumstances of the resident's death shall be recorded in the resident's record.

b. If the resident dies in the facility, the coroner's office shall be notified.

c. Personal belongings shall be handled in a responsible and legal manner.

d. Records of a deceased resident shall be retained for a period of time in accordance with law.

e. The facility administrator shall observe all pertinent laws and allow appropriate investigating authorities full access to all facts surrounding the death.

11 MCAR § 2.530 Food service.

A. General requirements. The goals of food service in each facility shall be to provide food and beverages to residents that are nutritionally adequate, that are palatable, that are produced in a manner to prevent foodborn illness, are of adequate quantity and variety, are served at appropriate temperatures and are prepared by methods which conserve nutritional value.

B. Food handling practices.

1. Any food service provided in a correctional facility shall be in accordance with the provisions of the Minnesota Department of Health rules (7 MCAR § § 1.161-1.165) governing food service and beverage service establishments.

2. Wherever the food service in a facility is limited to serving ten residents or less, variances from the requirements include substitution of certain domestic type equipment for commercial type.

3. When food is catered into the facility, it shall be obtained from a source acceptable to the Minnesota Department of Health pursuant to 7 MCAR § § 1.161-1.165.

C. Dietary service. The food and nutritional needs of residents shall be met. Providing each resident the specific serving per day from each of the following four food groups will satisfy this requirement.

1. The food service plan is reviewed and approved by a physician or certified dietician.

2. All facilities shall have menu planning sufficient to provide each resident the following specified food servings per day:

a. Meat or protein group. Two (2) or more servings per day. A serving of meat or protein is defined as:

- (1) 2-3 ounces cooked, lean, edible meat
- (2) 2 medium eggs
- (3) 4 tablespoons peanut butter

(4) 1 cup dry beans

b. Milk group. Two (2) or more servings per day. A serving is defined as:

(1) 1 cup of milk

(2) 1 ounce of cheese

(3) 1/2 cup cottage cheese

c. Cereal and bread group. Four or more servings per day. A serving is defined as:

(1) 1/2 to 1 slice of bread

(2) 1/2 to 3/4 cup cereal

(3) 1/2 to 3/4 cup rice

(4) 1/2 to 3/4 cup of pasta

d. Fruit and vegetable group. Four or more servings per day. A serving is defined as:

(1) 1/2 cup potatoes

(2) 1/2 cup cooked vegetables

(3) 4 pieces raw vegetables

(4) 1/2 cup fruit

(5) 1 cup juice (citrus)

D. Frequency of meals. There shall not be more than fourteen (14) hours between a substantial evening meal and breakfast. At least three (3) meals shall be made available at regular times during each twenty-four (24) hour period.

E. Therapeutic diets. Any facility housing residents in need of medically prescribed therapeutic diets shall have documentary evidence that such diets are provided for as ordered by the attending physician.

F. Where juveniles' religious beliefs require their adherence to dietary laws, efforts shall be made to provide such special diets.

G. Use of food in discipline. Food shall not be withheld as a punishment for unacceptable behavior.

H. Supervision of meal serving. All meals shall be served under the direct supervision of staff.

I. The designated food service supervisor shall receive training in food service operations prior to assuming this responsibility.

J. Menu records. Menus shall be posted a week in advance. Records of food purchased and menus shall be filed for one (1) year.

K. Hot meal minimum. A minimum of one (1) hot meal shall be provided for each twenty-four (24) hours of confinement.

L. Canteen services shall be available to residents on a twice per week basis. Facilities which do not operate a canteen shall implement a system whereby residents have the opportunity to purchase or obtain sundry items on a twice per week basis.

M. Budgeting, purchasing and accounting.

1. Each facility administrator shall, in cooperation with the local unit of government or governing body and food service supervisor, establish policies and procedures for budgeting, purchasing and accounting.

2. Such policies and procedures shall include:

a. A food expenditure cost accounting system designed to isolate cost per meal per resident.

b. Policies and procedures for estimating food service requirements in advance of their need.

c. Consideration of resident eating habits and food waste.

d. Consideration of facilities for storage and refrigeration as well as accepted storage periods for dry, canned and perishable foods.

e. Such other items as the administrator deems appropriate.

N. Containers and food storage.

1. Food containers. All food or food products, prepared or in bulk shall be stored in seamless containers after opening of the original container. Dry milk and milk products after opening shall be stored in seamless, air-tight containers.

2. Storage of non-perishable food. Non-perishable food, and single-service articles shall be stored off the floor on washable shelving in a ventilated room. It shall be protected from dust, flies, rodents, vermin, overhead leakage and other sources of contamination, and shall be placed away from areas with excessive heat.

3. Storage of perishable and potentially hazardous food. All perishable food (fresh fruit and vegetables) and potentially hazardous food (meat and dairy products) shall be stored off the floor on washable, corrosion-resistant shelving under sanitary conditions, and at temperatures which will protect against spoilage. Meat and dairy products shall be stored at forty (40) degrees Fahrenheit or below, and fruit and vegetables at fifty (50) degrees Fahrenheit or below. When stored together, the lower temperature shall apply. Temperatures shall be monitored by an accurate thermometer.

4. Prohibited storage. The storage of detergents, cleaners, pesticides and other non-food items, including employees' personal items, is prohibited in food storage areas.

5. Returned food. Returned portions of food and beverages from individual servings shall not be reused unless such food or beverage is served in a sealed wrapper or container which has not been unwrapped or opened.

6. Ice. Ice shall be stored and handled in a sanitary manner. Stored ice shall be kept in an enclosed container. If an ice scoop is used, the scoop shall be stored in a separate compartment to prevent the handle from contact with ice.

O. Transport of food. Food shall be covered during transport through non-dietary areas, but need not be covered when served in a contiguous dining area. The food service system shall be capable of maintaining hot foods at one-hundred-fifty (150) degrees Fahrenheit or higher; cold food at forty (40) degrees or lower. A dumbwaiter or conveyor, which cab or carrier is used for the transport of soiled linen or soiled dishes, shall not be used for the transport of food.

11 MCAR § 2.533 Security.

A. Policies and procedures. Security policies and procedures shall be developed by the administrator to cover the following:

1. Control and recovery of contraband;
2. Delivery and service procedure;
3. Prohibition on firearms and other weapons in resident areas;
4. Search procedures;
5. Escort of residents outside security area; and

6. One-half (1/2) hour interval security inspection routines when residents are not under direct supervision.

B. Admissions.

1. The intake procedure conducted by the admitting officer for all admissions shall provide for a thorough search of the resident and belongings. In the event of all new admissions, a shower (delousing if indicated), an assessment of health status and physical needs, an inventory of resident's property, properly recorded and signed by the owner as correct, and completion of an admission form shall be completed.

2. No juvenile shall be received by the staff of a facility until the arresting or escorting officer has produced proper credentials and/or until the proper documents have been completed identifying the purpose for detention. The arresting or escorting officer shall be required to sign his name and title on a form which is part of the intake and record.

3. All intake procedures shall be conducted in a manner and location that assures the personal privacy of the resident and the confidentiality of the transaction from unauthorized personnel.

C. Releases.

1. Upon release of a resident, the property of the resident, unless held for authorized investigation or litigation, shall be returned with a signed receipt acknowledging same.

2. No resident shall be released in inclement weather without proper clothing to insure health and safekeeping.

3. Residents shall be permitted to make arrangements for transportation prior to their release.

D. Contraband control searches.

1. Visitors who seek to enter the security area of the facility shall not be permitted admission whenever they refuse to submit to a requested search conducted by a staff member of the same sex.

2. The facility shall be regularly inspected for contraband; evidence of breaches in security; inoperable security equipment.

3. All materials delivered to or transported from the facility shall be inspected for contraband prior to distribution.

E. Locks and keys.

1. When not in use, all keys to security locks shall be properly tagged and stored in a secure cabinet within a secure area, out of reach from the residents or the public. At least one new complete set of facility keys shall be kept on hand for replacement purposes.

a. Keys that serve a critical security purpose shall be easily identifiable and never issued except upon order of the facility administrator or person in charge, and in accordance with established procedure.

b. No security keys shall be made available to residents.

2. All locks to security doors or gates shall be inspected regularly to insure their efficient operation.

a. No lock to a security door or gate shall be permitted to be broken, inoperable, or left in an unsuitable condition for any unnecessary period of time.

b. No resident shall be placed in a room or area which has inoperable locks.

F. Weapons, tools, equipment, medications, hazardous substance.

1. Firearms or other dangerous weapons, regardless of condition, shall not be located within the resident areas of the facility.

2. Materials which can be deleterious to security, safety and health shall be properly secured, inventoried and dispensed.

3. When not in use, all tools shall be kept in locked storage areas. Security precautions shall be developed and implemented on any tools entering and/or leaving the facility.

4. Hazardous substances shall be stored outside the resident's living areas. Cleaning substances which can be so described shall be handled only by staff or residents under direct staff supervision.

G. Count procedure. Each facility shall have a written statement specifying the system to be used for regularly counting the number of residents under its jurisdiction.

1. Systems for counting shall include a master count board indicating the total number at all times and immediately report changes as they occur.

2. A separate log book shall be kept to serve as a check and validation to the count board.

3. Formal counts shall be completed with an official entry made in the daily log after each mass movement or change in areas and/or at least once each eight (8) hours.

11 MCAR § 2.536 Environmental-personal health and sanitation.

A. Availability of medical and dental resources.

1. Each facility shall have a licensed physician(s) or medical resources such as a hospital or clinic designated for the medical supervision, care and treatment of residents. The facility shall insure twenty-four (24) hour a day availability of consultation, advice and emergency service response. Such resource(s) shall be located in the same or a nearby community.

2. The local health department or a designated physician shall, not less than annually, inspect the facility with respect to sanitation and health conditions.

3. Each facility shall have emergency dental care available to residents. Such dental care shall be available in the same or nearby community.

4. Ambulance services shall be available on a twenty-four hour a day basis.

B. Receiving. Health screening shall be performed on all residents upon admission to the facility and before placed in the general population, and recorded on a printed screening form approved by the responsible physician which includes inquiry into:

1. Possibility of pregnancy;

2. Possibility of venereal disease;

3. Current illnesses and health problems including those specific to females;

4. Medications taken and special health requirement;

5. Status of immunizations;

6. Screening of other health problems designated by the responsible physician;

7. Behavioral observation, including state of consciousness and mental status;

8. Notation of body deformities, trauma markings, bruises, lesions, ease of movement, or jaundice;

9. Condition of skin and body orifices, including rashes and infestations; and

10. Disposition/referral of residents to qualified medical personnel on an emergency basis.

C. Sick call.

1. Each facility shall provide space, staff, and a procedure for daily sick call for the purpose of insuring residents the opportunity to report and receive appropriate medical services for illness or injury.

2. A resident shall be examined by trained medical personnel within a reasonable period of time if the resident is visibly ill, chronically ill, or whenever it is suspected that medical attention is necessary.

3. If medical services are delivered in the facility or through contract services, adequate space, equipment, supplies and materials, as determined by the responsible physician, shall be provided for the performance of primary health care delivery.

D. Posting of available resources. A listing of the medical, dental and ambulance resources designated for use by the facility and the telephone numbers of same shall be posted at each staff station in the facility. Such list shall clearly indicate what resource(s) is (are) available at any time of the day or night.

E. Hospitalization of a resident.

1. Each facility administrator shall insure the availability of hospital services in the same or nearby community permitting admission of a resident without delay on the recommendation of the attending physician.

2. When a resident requires hospitalization, he shall be guarded on a twenty-four (24) hour per day basis unless the following conditions have been satisfied:

a. The resident has been deemed not in need of custody supervision;
or

b. The resident has been medically incapacitated in the opinion of the attending physician; or

c. The facility administrator has retained legal responsibility for the custody of the resident; or

d. The hospital administrator and facility administrator mutually agree that a guard is unnecessary to the reasonable assurance of the resident's custody.

F. Written standard operating procedures approved by the responsible physician shall exist for the following:

1. Obtaining medical consent;
2. Receiving screening;
3. Health appraisal data collection;
4. Non-emergency medical services;
5. Obtaining dental services;
6. Emergency medical and dental services;
7. Deciding the emergency nature of illness or injury;

8. Dental screening, prevention, examination and treatment;
9. Provision of medical and dental prosthetics;
10. Rendering first aid;
11. Notification of next of kin or legal guardian in case of serious illness, injury or death;
12. *Providing chronic care;*
13. *Providing convalescent care;*
14. *Providing medical preventive maintenance;*
15. Screening, referral and care of mentally ill and retarded residents;
16. Making staff aware of special medical problems;
17. Implementing the special medical program;
18. Immunization, where necessary;
19. Delousing procedures;
20. Detoxification procedures; and
21. Pharmaceuticals.

G. First aid.

1. All child care workers responsible for the supervision, safety and well-being of residents shall be trained in emergency first aid procedures.
2. At least one person per shift shall have training in receiving, screening, basic life support, cardiopulmonary resuscitation (CPR), and recognition of symptoms of the illnesses most common to the facility.
3. All facilities shall have a minimum of one (1) first aid kit located at the facility's control center or primary staff station.
4. The first aid kit shall be inspected by a designated staff person at least once every three (3) months to assess the need for replenishment of supplies.

H. Medical and dental records.

1. Each facility shall record all complaints of illness or injury with actions taken pursuant to same.

2. Medical or dental records shall be maintained on any resident under medical or dental supervision, care or treatment while confined. Minimally, such records shall include appropriate information with respect to resident limitations or disabilities, instructions relative to resident care, written orders for all medications with stop dates, treatment, therapeutic diets, extent or restriction of activity, and the time, date, and medical or dental person involved in any examination, treatment or consultation with respect to the resident.

3. Medical and dental directives related to resident care shall be available to staff on duty for consultation in case of illness and for recording administration of medication.

4. A statement concerning the resident's medical or dental condition shall be obtained from the attending physician or dentist on any resident under medical or dental care.

I. Preventive health services.

1. The facility administrator shall develop and implement a written plan for attainment of personal hygiene practices of all residents with special assistance for those residents who are unable to care for themselves.

2. All staff and volunteers shall adhere to established policies and procedures relating to personal hygiene practices including clean attire.

3. Delousing materials and procedures shall be approved through consultation with trained medical personnel.

4. Each resident shall be permitted daily bathing or showering.

5. Residents shall be provided personal hygiene items at facility expense.

J. Delivery, supervision and control of medicines.

1. Delivery of medicine shall be conducted only by licensed medical or nursing personnel or by facility staff members who have been trained in the delivery of medications.

2. The delivery of legend drugs by unlicensed staff shall be under the ultimate supervision of a consulting physician.

F. 3. The facility administrator, in consultation with the licensed physician shall develop plans, establish procedures and accessories for the secure storage, delivery, supervision and control of medicine. Such plans, procedures, space and accessories shall include the following:

a. Storage.

(1) All medicines shall be kept in a locked medicine cabinet or locked medicine room. The storage facility shall be kept locked at all times when not in use.

(2) Medicine requiring refrigeration shall be stored in a secure manner in a refrigerator.

(3) Residents shall not be allowed in any room used for the storage of medicine without direct staff supervision.

(4) Only staff authorized to deliver medicine shall have access to keys for medicine storage areas.

(5) Stock supplies of legend (prescription-type) drugs shall not be maintained.

(6) All prescribed medicine shall be stored in its original container, bearing the original label.

(7) All poisons and medicine intended for external use shall be clearly so marked and shall be stored separate from medicine intended for internal use.

b. Delivery control. The following shall be established in written policy form:

(1) Diabetics with permission of the attending physician may self-administer insulin injections under staff supervision.

(2) All other medicine administered by injection may be given only by a physician, registered nurse, or licensed practical nurse.

(3) Unless ordered otherwise by the attending physician, all other medicine delivered to residents shall be self-administered under staff supervision.

(4) Means for the positive identification of the recipient of all medicine.

(5) Procedures for assuring that prescribed medicine will be delivered in accordance with physician instructions at the correct time and in the prescribed dose.

(6) No resident while receiving legend drugs shall receive any non-legend drugs without the approval of the attending physician.

(7) Procedures for confirming that medicine delivered for oral ingestion has been ingested.

(8) Procedures for recording the fact that the prescribed dose has been delivered and by whom.

(9) Procedures whereby adverse reactions to drugs are reported at once to the attending physician and an explanation made in the resident's record.

(10) Procedures whereby resident refusal of prescribed medicine is reported to the attending physician and an explanation made in the resident's record.

(11) Procedures for insuring that no resident is deprived of medicine as prescribed because of penalty or staff retaliation.

(12) Procedures which prohibit the delivery of medicine by residents.

(13) Procedures whereby a physician is contacted prior to the next prescribed medicine dosage time for instructions on all newly admitted residents who are either in possession of prescribed medicine or indicate a need for such.

c. Recording of legend drugs entering the facility. Records of receipt, the quantity of such drugs, and of the disposition of all legend drugs shall be maintained in sufficient detail to enable an accurate accounting at any time.

4. If authorized by the attending physician, prescribed medicine belonging to residents shall be given to them when released or to appropriate authorities when transferred. This shall be recorded in the resident's record.

5. Unused portions of prescribed medicine shall be destroyed by incineration or by flushing into the sewer system.

a. Such destruction shall be performed by the facility administrator or his designee and witnessed by a staff member.

F.1 b. A notation of the destruction shall be made in the resident's record and shall include the name and quantity of the drug destroyed and shall be signed by the facility administrator or his designee and staff witness.

6. Unused portions of controlled substances shall be handled by contacting the Minnesota Board of Pharmacy.

7. Methadone programs shall not be made available unless in compliance with all existing laws governing such programs.

8. Written policy prohibits the facility from conducting medical or pharmaceutical testing for experimental or research purposes.

K. Reporting suspected contagious disease. When no physician is in attendance, it shall be the duty of the facility administrator, or other person in

in charge of any institution or any other person having knowledge of any individual believed to have or suspected of having any disease, presumably contagious, to report immediately the name and address of any such person to the local health officer. Until official action on such has been taken, strict isolation shall be maintained.

L. Isolation for contagious disease.

1. Residents who are suspected of having a contagious disease shall be detained in isolation for only that period of time necessary to obtain advice and consultation from a physician concerning the resident's status and recommendations for care. Continuation of such isolation shall be determined by the attending physician.

2. A resident placed in isolation for medical reasons shall not be deprived of any more privileges, rights or amenities than is consistent with his classification prior to such assignment except to the extent that such privileges, rights or amenities would endanger the health of staff, other residents, or the public.

M. Mentally ill residents.

1. Screening and referral for care shall be provided to mentally ill or retarded juveniles. The responsible physician shall provide a written list of symptoms or behavior indicative of mental illness and retardation for staff training and shall designate, in advance, specific referral sources.

2. If the facility administrator or his designee determines a resident to be mentally ill, a licensed physician's opinion (preferably a psychiatrist) shall be secured as soon as possible, but not more than eight (8) hours after such determination.

3. If a licensed physician's opinion is supportive of the facility administrator or his designee, and if practical and feasible, such resident shall be transferred to a medical facility designated by the county and approved by the State Department of Health for diagnosis, treatment, and evaluation of such suspected mental illness pursuant to Minnesota Statutes, section 253A.04, Emergency Hospitalization of Mentally Ill and Mentally Deficient Persons.

N. Housekeeping, sanitation and plant maintenance.

1. General requirement. The entire facility inclusive of every building, structure or enclosure utilized by the facility—walls, floors, ceiling, registers, fixtures, equipment and furnishings shall be kept in good repair and so maintained as to protect the health, comfort, safety and well-being of residents and staff.

2. Established plan. The person (facility administrator, building superintendent, or county maintenance engineer) responsible for plant maintenance, housekeeping and sanitation shall develop and implement a written plan with identified policies and procedures for same.

3. Inspections. The facility administrator shall develop and implement a written plan for the daily inspection of the facility with respect to housekeeping, sanitation, and plant maintenance. Such inspections shall be recorded.

4. Budget. The facility administrator shall submit a list of probable repairs and expenditures for routine housekeeping supplies, repairs, and special requests related to physical plant maintenance, housekeeping and sanitation at the beginning of each month, or as part of an annual budget request to the facility's governing body.

5. Work requests.

a. The facility administrator in cooperation with the facility's governing body shall develop policies and procedures designed to detect building and equipment deterioration, safety hazards and unsanitary conditions in the early stages of their development and provide for their repair, correction or modification so that such conditions are eliminated to the extent required by rules contained herein.

b. Such policies and procedures shall include:

(1) Requiring facility staff to report unsanitary and unsafe conditions as well as physical plant and equipment repairs and replacement needs as they are observed.

(2) A process whereby work requests are prioritized and filed with the governing body by the facility administrator in an expedient manner.

(3) A records system allowing review of budget and work requests, expenditures, dates and actions, pursuant to detection of need, submission of work orders and completion of requests.

6. Insect and rodent control. Any condition on the site or in the facility conducive to harborage or breeding of insects, rodents, or other vermin shall be eliminated immediately. Cleaning, renovation, or fumigation by licensed pest control operators for the elimination of such pests shall be used when necessary.

11 MCAR § 2.539 Juvenile detention programs.

A. Statement of program objectives. Each facility administrator shall prepare in written form a statement of program objectives and goals. Such objectives and goals shall be developed with the input of local juvenile justice personnel including judges, probation officers and others as deemed appropriate by the facility's governing body and administrator. A copy of the statement of program objectives shall be retained on file in the facility.

B. Program plan. Each facility administrator shall develop and implement a plan for programming and service consistent with its stated program objectives.

C. Program space, equipment and materials. Provisions for program space, equipment and materials shall be consistent with the facility's statement of program objectives, program plan and applicable rules stated herein.

D. Intake policies and procedures.

1. Each juvenile is assigned a counselor or probation officer at intake.

2. Each facility administrator shall develop in written form intake policies and procedures that clearly indicate the facility's goals and objectives, programs and services offered and resident eligibility requirements for admission to the facility. This will be done in a form suitable for distribution to staff, residents, referral sources, funding agencies and the general public. Such policies and procedures shall include the following:

a. Clearly defined age limits for admittance to the facility.

b. Regular meetings and case conferences between the staff of probation agencies, shelter facilities, the court, the local law enforcement agency, and the detention facility staff to develop and maintain sound interagency policies and procedures.

c. Statutory provisions for admission to the secure juvenile detention facilities must be adhered to.

d. Referral sources must be informed of reasons for ineligibility and where possible, should be referred to other agencies for services.

e. The administrator, in consultation with the referral agency, shall be responsible for exercising discretion within his legal authority, in the type of resident admitted to the facility in accordance with the admission policies of the facility.

E. An admittance form is completed for every juvenile admitted to the facility and contains the following information:

1. Court case number (if any) and detention facility admission number;

2. Date and time of admission and release;

3. Name and nicknames;

4. Last known address;

5. Legal status (authority for detention);

6. Name of attorney, if any;

7. Name, title and signature of delivering officer;

8. Specific charge(s);
9. Sex;
10. Date of Birth;
11. Place of birth;
12. Race or nationality;
13. Education and school attended;
14. Employment, if any;
15. Religion;
16. Health status;
17. Medical consent forms;
18. Name, relationship, address and phone number of parent(s)/guardian(s)/person(s) juvenile resides with at time of admission;
19. Drivers license number, social security number and medicaid number;
20. Date of petition;
21. Court and disposition if any;
22. Space for remarks (to include notation of any open wounds or sores requiring treatment, evidence of disease or body vermin, or tattoos); and
23. Person recording data.

F. Case Records.

1. Case records shall be safeguarded from unauthorized and improper disclosure.
2. The contents of case records shall be identified and separated according to an established format. The case record includes the following information:
 - a. Initial intake information form;
 - b. Documented legal authority to accept juvenile;
 - c. Information on referral source;
 - d. Record of court appearances;

- e. Medical record;
- f. Signed release of information forms;
- g. A record of cash and valuables held;
- h. Notations of temporary absences from the facility;
- i. Visitors' names and dates of visits;
- j. A record of telephone calls;
- k. Probation officer or caseworker assigned;
- l. Progress reports on program involvement;
- m. Program rules and disciplinary policy signed by juvenile;
- n. Grievance and disciplinary record;
- o. Referrals to other agencies; and
- p. Final discharge or transfer report.

G. Program resource identification. Each facility administrator shall develop an inventory of on-site and community resources that are essential to the successful accomplishment of the facility's program objectives. Such inventory shall be descriptive of community resource agency services, eligibility requirements and other information considered appropriate to potential users of same. The inventory shall be reviewed at least once annually and revised as appropriate.

H. Crisis intervention. Each facility administrator shall develop and implement a plan for crisis intervention and utilization of professionally qualified facility staff or community resource personnel appropriate to resident needs.

I. Citizens advisory committee. Written policy and procedure shall provide for a citizens advisory committee representing appropriate elements of the community such as civic leaders, businessmen, professionals and at least one member from the local governing body.

J. Program evaluation. Written policy and procedure shall provide for periodic evaluations of facility programs and services to determine their contribution to the objectives and goals of the facility.

K. Biennial report. The facility shall furnish an information statement to the parent agency at least biennially which is used to report on the system's objectives, programs, resident population, budget, major developments, problems, and future plans.

11 MCAR § 2.542 Administration.

A. The administration shall have available to it the services of a qualified fire and safety officer to review all policies and procedures related to safety and fire prevention.

B. Written policy and procedure shall govern inventory control of property, equipment and other assets.

C. There shall be a procedure to provide insurance coverage for the physical plant and equipment, as well as personal and property injury to employees, volunteers, residents, and third parties.

DEPARTMENT OF CORRECTIONS
JUVENILE RESIDENTIAL FACILITIES
(Effective July 27, 1981)

11 MCAR § 2.551 Introduction.

A. Minn. Stat. § 241.021, subd. 1 (1), as amended by Laws of 1978, ch. 778, provides that the Commissioner of Corrections promulgate rules establishing minimum standards for all correctional facilities throughout the State, whether public or private, established and operated for the detention and confinement of a person detained or confined therein according to law except to the extent that they are inspected or licensed by other State regulating agencies. The rules which follow are minimum requirements for juvenile residential facilities.

B. Annual inspections. Juvenile residential facilities required to be licensed by Minn. Stat. § 241.021, subd. 1 (1), will be inspected annually.

C. Revocation of license for non-conformance. Revocation of license proceedings shall be done in accordance with Minn. Stat. § 241.021, subd. 1 (4).

D. Issuance of license. A license shall be granted if the facility is in substantial conformance with rules stated herein, or is making satisfactory progress towards substantial conformance, and if the interests and well-being of children and youth received therein are protected. The license shall remain in force one (1) year unless sooner revoked.

E. Intended use. A facility shall be used only for the classification for which it is licensed.

F. Posted license. The license(s) of each juvenile residential facility shall be conspicuously posted in an area where residents are admitted to the facility.

G. Severability. The provisions of these rules are severable.

11 MCAR § 2.554 Variance.

A. Variance of specific rule. The granting of a variance under this section shall not constitute a precedent for any other juvenile residential facility. The granting and denial of all variances shall be in writing and made within 30 days of the request for a variance. Such variance will be granted by the Commissioner if, in the licensing procedure or enforcement of the standards in these rules:

1. To require a particular juvenile residential facility to strictly comply with one or more of the provisions will result in undue hardship, or jeopardize the health, safety, security, detention, or well-being of the residents or facility staff;

2. The juvenile residential facility is otherwise in substantial conformity with the standards contained in these rules or making satisfactory progress toward substantial conformity;

3. Granting of the variance will not preclude the facility from making satisfactory progress toward substantial conformity with the rules;

4. The granting of the variance will not leave the interests and well-being of the residents unprotected; and

5. The facility will take such surrogate action as is necessary or available to comply with the general purpose of the standards to the fullest extent possible.

B. Emergencies. During an emergency, as defined in these rules and as declared by a facility administrator, those rules directly affected by the emergency and which, if not suspended, would adversely affect the health, security, safety, detention, or well-being of the persons detained or confined in juvenile residential facilities or the facility staff, shall be inoperative when an emergency is declared by the administrator.

1. The facility administrator shall notify the Department of Corrections in writing within 72 hours of any emergency which resulted in the suspension of any rule.

2. No suspension of rules because of an emergency declared by a facility administrator may exceed seven (7) days unless the administrator obtains the approval of the Commissioner of Corrections for a variance of the rules and such a variance is necessary for the protection of the health, security, safety, detention or well-being of the staff or the persons detained or confined in the institution where the emergency exists.

11 MCAR § 2.559 Juvenile residential facility definitions.

A. "Administrative Segregation" shall mean the status of physical separation of those juveniles who are determined to be prone to escape, prone to be assaultive or need protection from other juveniles.

B. "Approved Capacity" shall mean the number of residents or occupants for which any room, unit, building, facility or combination thereof, was planned, designed and approved in compliance with these standards.

C. "Average Daily Population" shall mean the average number of residents (juveniles) residing daily during the last calendar year.

D. "Child Care Worker" shall mean those staff whose primary duties are the day-to-day ongoing supervision of residents.

E. "Commissioner" shall mean the Commissioner of Minnesota Department of Corrections.

F. "Controlled substance" shall mean a drug, substance or immediate precursor in Schedules I through V of Minnesota Statutes, section 152.02 (1980). The term shall not include distilled spirits, wine, malt beverages, intoxicating liquor or tobacco.

G. "Department of Corrections" or "Department" as used in these standards shall mean the Minnesota Department of Corrections.

H. "Disciplinary Segregation" or "Room Restriction" shall mean that status assigned a juvenile as a consequence or means of control resulting from a violation of facility rules or statutes. Such status shall consist of confinement in a room or housing unit separate from others who are not on disciplinary segregation status.

I. "Emergency" shall mean any significant incident or disruption of normal facility procedures, policies, routines or activities such as fire, riot, natural disaster, suicide, assault or medical emergency.

J. "Facility Administrator" shall mean the chief executive officer, superintendent, director or other individual who has been assigned, designated or delegated full time responsibility and authority for the administration and operation of a juvenile residential facility.

K. "Governing Authority" shall mean the political body, political subdivision or the board of directors of a corporation.

L. "Inspection" shall mean an on-site assessment of existing conditions made to determine the facility's compliance with those rules.

M. "Juvenile Residential Facility" shall mean any private, city, county, city and county, or multiple county juvenile residential facility which constitutes a dispositional alternative available to the juvenile court under the provisions of Minn. Stat. § 260.185 having a residential component with the exception of group foster homes as defined in Department of Corrections 11 MCAR § 2.445 G.

N. "Legend Drug" shall mean a drug which is required by federal law to bear the following statement: "Caution: Federal law prohibits dispensing without prescription."

O. "Medicine" shall mean any remedial agent that has the property of curing, preventing, treating or mitigating diseases, or that is used for that purpose. For the purpose of these rules, medicine shall include legend and non-legend drugs.

P. "Policy" shall mean a written statement declaring mission, purpose, and ideological position.

Q. "Procedure" shall mean a statement establishing the action plan to accomplish policy.

R. "Resident" shall mean any individual confined and residing in the juvenile residential facility.

S. "Substantially Conform" shall mean a compliance rating of 100% on items labeled mandatory and a rating of 70% compliance on all other items in this rule.

T. "Undue Hardship" shall mean the financial costs are not warranted when weighed against the benefits derived.

U. "Variance" shall mean the waiver of a specific rule for a specific period of time.

11 MCAR § 2.567 Personnel.

A. Staff health. All personnel shall be screened for tuberculosis prior to employment. Such tests shall be of either the tuberculin skin test or the chest roentgenogram (x-ray). If a skin test is positive, a chest roentgenogram (x-ray) shall be required. Additional testing shall be required upon known exposure to tuberculosis. (Mandatory)

B. Recruitment.

1. The selection, appointment and promotion of facility personnel shall be based on assessed ability.

2. All child care workers shall be 18 (eighteen) years of age or older.

3. Recruitment standards shall be reasonable and geared to reach the widest possible work force. They shall set forth the basic requirements of age, ability, preparatory experience, and physical condition.

4. A criminal record check shall be conducted on all new employees prior to employment. (Mandatory)

C. Employee evaluation. Each employee shall complete a probationary period and be evaluated during the probationary period before being permanently appointed. The evaluation shall be in writing, discussed with the employee and made a part of the employee's personnel record.

D. Staffing requirements.

1. Staffing plan. The facility administrator shall prepare and retain a staffing plan indicating the personnel assignments and duties.

2. Minimum staff requirements.

a. Facility administrator. There shall be a single administrator or chief executive of each facility.

b. Person in charge. In the absence of the facility administrator, a staff person shall be designated as person in charge.

c. Staff presence. No person shall be housed in the facility without a staff person on duty, awake and alert at all times, and capable of responding to reasonable needs of residents. (Mandatory)

d. Sex of staff. Staff members shall not be placed in positions of responsibility for the supervision and welfare of residents of the opposite sex in circumstances that can be described as invasion of privacy, degrading or humiliating to the resident.

e. Back-up staff. Where staff of one sex are used as program resource with residents of the opposite sex, staff of the residents' same sex must be on duty, awake and alert in the facility.

f. Relief staff. Personnel shall perform ancillary functions such as transportation or court escort to the extent that security, supervision, program, and facility administration are not jeopardized by such activities.

g. Training for relief staff. Part-time and relief staff shall complete orientation training appropriate to assigned responsibilities. Such orientation shall be documented.

h. Child care workers, educational/vocational, social service and recreation staff ratio to residents shall be as follows:

(1) During waking hours, the ratio of staff to residents shall be one (1) staff to twelve (12) residents. Staff who are not involved with the youths in direct service shall not be considered in this ratio. (Mandatory)

(2) During non-waking hours of youths, a combination of staff resources and physical plant resources shall provide a procedure for reporting incidents. This shall include a staff person present, awake and alert during these times. (Mandatory)

i. There shall be a comprehensive and continuous education program for residents which shall be certified by the Minnesota Department of Education and includes at a minimum: (Mandatory)

(1) Developmental education

(2) Remedial education

(3) Special education

(4) Multi-cultural education

(5) Bilingual education where population profiles indicate this need.

(6) Tutorial services.

j. Recreation staff. Each facility shall have a minimum of one (1) staff person designated to develop, implement and coordinate recreational programs for the residents and act as a liaison between the facility and the community. Such person shall have training and/or experience appropriate to required responsibilities.

k. Volunteer coordinator.

(1) The facility administrator shall designate a person to coordinate volunteer services if volunteers are utilized by the facility.

(2) There shall be a system for registration and identification of volunteers.

(3) Volunteers shall agree in writing to abide by facility policies.

(4) Written policies shall specify that volunteers perform professional services only when certified or licensed to do so by appropriate professional organizations.

(5) Written policies and procedures shall provide that the administrator curtail, postpone or discontinue the services of a volunteer or volunteer organization when there are substantial reasons for doing so.

l. Social service staff (case management personnel). A minimum of one (1) staff person for every twenty-five (25) residents shall be designated responsible for the coordination of resident program plans.

11 MCAR § 2.571 Staff training (pre-service and in-service).

A. Training plan.

1. The facility administrator shall develop an orientation training plan for new employees and volunteers and make provisions for on-going in-service training of employees and volunteers.

2. Written in-service training plans shall be developed annually.

B. Pre-service orientation training.

1. Child care workers shall complete a minimum of forty (40) hours of pre-service orientation training prior to assuming full responsibility for supervising residents.

2. Written policies and procedures shall provide that full-time staff or volunteers who work in direct contact with residents shall receive a total of forty (40) additional hours of training during their first year of employment in the following areas:

- a. Human relations and communication skills;
- b. Crisis intervention;
- c. Special needs of youth;
- d. Problem-solving and guidance;
- e. Facility's philosophy for handling troubled youth;
- f. Resident rules and regulations;
- g. Rights and responsibilities of residents;
- h. Grievance and disciplinary procedures;
- i. Security procedures;
- j. Physical restraint procedures;
- k. Supervision of residents;
- l. Report writing;
- m. Significant legal issues;
- n. Interaction of elements of the juvenile justice system;
- o. Relationships with other agencies;
- p. Fire emergency procedures; and
- q. First aid and life-sustaining functions.

C. In-service training. Child care workers, middle management and non-management professional personnel shall complete forty (40) hours of in-service training per year.

1. Management personnel and facility administrators shall complete forty (40) hours of training per year.

2. Personnel who work with residents, who are confined separately from the total population, shall receive specialized training in the problems people encounter who live in confinement.

3. Space and equipment required for training and staff development shall be provided.

11 MCAR § 2.575 Staff deployment, job description, work assignments, post orders, policies and procedures.

A. Job descriptions.

1. Each facility administrator shall develop written job descriptions for all position classifications and post assignments which define responsibilities, duties and qualifications.

2. The job descriptions shall be readily available to all employees with copies on file in the administrator's office.

B. Work assignments. Work assignments shall be consistent with qualifications as stated in job descriptions and the approved staffing plan of the facility.

C. Staff policies and procedures. The facility administrator shall develop written policies and procedures such as escape, fire, medical emergencies, admission, release, laundry, feeding, canteen, visiting, and security checks.

D. Policy and procedure manuals.

1. Policy manuals shall be available to all staff within the facility.

2. The policy and procedures manual shall be reviewed and updated annually.

E. Personnel policies. Written personnel policies shall be developed by the facility administrator and governing body which specify hours of work, vacations, illness, sick leave, holidays, retirement, employee health services, group insurance, evaluation procedures, promotions, personal hygiene practices, attire, conduct, and disciplinary actions, and shall be available to employees.

F. The facility shall have a grievance procedure for employees.

G. The facility administrator shall develop a written plan for dissemination of information to the public, to government agencies, and to the media.

11 MCAR § 2.579 Records and reports.

A. Maintenance of records and reports. The following records, reports and statistics shall be maintained for a period of one (1) year following the last state inspection or longer if necessary to meet applicable statutory or local unit of government requirements:

1. Admission and release records; (Mandatory)
2. Resident personal property records;
3. Clothing, linen and laundry records;
4. Records of budget requests and work orders;
5. Special occurrence records;

6. Records of policies and procedures;
7. Employee personnel records;
8. Records of staff training;
9. Accounting records;
10. Food service records;
11. Daily log;
12. Programming records;
13. Medical and dental records; and
14. Disciplinary records.

B. Storage of records.

1. Space shall be provided for the safe storage of records.
2. Records shall be filed in an organized and retrievable manner.

C. Filing of records.

1. Records of released residents shall be filed in the facility for one (1) year following discharge.

2. Confidentiality of resident records and resident access to personal files shall be kept in conformity with state law. (Mandatory)

3. The contents of case records shall be organized according to an established format.

4. Case records shall be safeguarded from unauthorized and improper disclosure.

11 MCAR § 2.583 Resident welfare.

A. Facility program.

1. Program objectives. The facility administration shall prepare a written program description and a statement of objectives and goals.

2. Special staff assignment. Every client shall be assigned to a staff person to assure regular face to face contact. (Mandatory)

3. Social services. The facility administrator shall maintain a social services program, such as individual and group counseling, community services and family services. (Mandatory)

4. Counseling clients. Policies and procedures shall assure that a staff person is available to counsel clients upon request and during times of crisis.

5. Intake policies and procedures.

a. The facility shall have a written program description that describes the facility's goals and objectives, programs and services offered and the admission requirements.

b. Intake policies shall be organized in a form suitable for distribution to staff, residents, referral resources, funding agencies and the general public.

c. Intake form. The facility shall complete an intake form on each resident which shall include:

- (1) Name;
- (2) Address;
- (3) Date of birth;
- (4) Sex;
- (5) Race or ethnic origin;
- (6) Reason for referral;
- (7) Whom to notify in case of emergency;
- (8) Date information gathered;
- (9) Name of referring agency or committing authority;
- (10) Social history, where available;
- (11) Special medical problems or needs;
- (12) Personal physician, if applicable; and
- (13) Legal status, including jurisdiction, length and conditions of placement.

B. Separation.

1. Separation of male and female juveniles shall provide complete separation of living and sanitation facilities. (Mandatory)

2. Facility administrators who schedule coeducational activities shall staff the activities consistent with personnel rules stated herein.

C. Information to residents.

1. Copies of rules shall be made available to all residents and include:

- a. Rules governing conduct, disciplinary consequences and disciplinary procedures;
- b. Procedures for obtaining personal hygiene and canteen items; and
- c. Policies and procedures governing visiting, correspondence, bathing, laundry, clothing, bedding exchange and other operational procedures.

2. Each resident, within twenty-four (24) hours of admission (exclusive of weekends and holidays), shall be provided with a copy of the program information and activities available.

3. Rules as well as program information shall be read to those residents who are unable to read.

D. Individual program plan. A written program plan individualized for each resident shall be developed.

E. The resident's program plan shall be reviewed and revised as appropriate on a monthly basis or more often if appropriate.

F. Pre-release planning and follow-up programs shall be developed for each resident.

G. The facility program shall encourage and foster the development and use of community resources.

H. Individualized progress reports shall be made available to the parent or legal guardian upon request.

I. Written policies and procedures shall exist for resident grievances and appeal procedures.

J. Private facilities shall have written criteria defining the procedures for removal of a resident from the program.

K. Resident discipline.

1. Administrative segregation.

a. The facility administrator shall develop and implement policies and procedures for administrative segregation.

b. Administrative segregation shall consist of separate and secure housing, but shall not involve any deprivation of amenities or privileges

normally afforded other residents, except to the extent that the protection of the resident, staff or public justify the necessity of such deprivation.

c. Any resident placed on administrative segregation shall be reviewed by the facility administrator or a designee within eight (8) hours or whenever the original circumstances that placed him/her in such a status have been altered. Continuation or change of such status shall require documented approval of the facility plan.

2. Discipline plan. (Mandatory)

a. All facilities shall have a resident discipline plan, which explains the consequences or administrative sanctions for specific behaviors, omissions, the administrative process for handling major and minor violations and the right to internal review.

b. The facility plan shall include a system of due process to include at a minimum:

(1) Published rules of conduct and the penalties for violation of rules;

(2) Written notice of alleged violation of rule;

(3) The right to be heard by an impartial hearing officer and present evidence in defense;

(4) The right to appeal.

3. Disciplinary segregation (room restriction).

a. Disciplinary segregation shall be used only with due process procedures as outlined in § 2.583 K. 2. b.

b. A resident placed in disciplinary segregation prior to a due process hearing shall have a due process hearing within twenty-four (24) hours of such segregation (exclusive of holidays and weekends) unless documented cause can be shown for delays. As examples:

(1) Resident request for delay; and

(2) Logistically impossible as in the case of mass disturbances.

4. Other limitations on disciplinary actions.

a. Residents shall be issued clothing and bedding. Residents who persist in the destruction of bedding or clothing may be deprived of such articles. The decision to deprive residents of clothing and bedding shall be reviewed by the shift supervisor during each eight (8) hour period.

b. The delegation of authority to any resident or group of residents

to exercise the right of punishment over any other resident or group of residents is prohibited.

c. No resident shall be deprived of the use of materials necessary to maintain an acceptable level of personal hygiene.

5. Policies and procedures shall govern the use of restraints.

a. Instruments of restraint shall not be used except:

(1) As a precaution against escape during a transfer;

(2) On medical grounds by direction of a consulting or attending physician or psychologist; or

(3) By order of the facility administrator or person in charge to prevent a resident from injuring self, others or damaging property.

b. Such instruments shall not be applied for any longer time than is necessary.

c. Each incident involving the use of restraints consistent with 11 MCAR § 2.583 K. 5. a. (2) or 2.583 K. 5. a. (3) shall be documented and placed on file.

d. Facility personnel authorized to use restraints shall receive training in the use of restraints. Evidence of such training shall be documented and on file.

L. Activities.

1. Each facility administrator shall develop and implement a written plan for the constructive scheduling of resident time. (Mandatory)

a. The facility administrator shall arrange with the clergy to conduct religious services and provide counseling if requested. (Mandatory)

b. No resident shall be required to attend religious services. (Mandatory)

c. Religious services shall be held in such a location that the residents who do not wish to participate do not have to. (Mandatory)

d. Any resident desiring to read the Bible or sacred book of another religion shall be provided a copy at the expense of the governing authority. (Mandatory)

e. Attendance or lack of attendance at religious services shall not be considered a basis for any right or privilege within the facility. (Mandatory)

2. The facility administrator shall develop and implement a plan for library service to include:

- a. Access to current leisure reading material;
- b. Textbooks necessary to complete a course of study;
- c. Legal books and references requested by residents shall be provided upon request to the extent resources permit. The facility's governing body shall not be responsible for purchasing legal books and references.

3. Work assignments. The facility shall develop a policy and procedure on work to include:

- a. Work activities such as maintaining own room and maintaining activity areas;
- b. Not being required to perform personal duties for staff or maintain areas away from the facility;
- c. Eligibility criteria for work activities;
- d. Statement that care shall be taken not to require juveniles to perform work they cannot physically perform..

4. Exercise and recreation. Each facility administrator shall develop and implement a planned physical exercise and recreational activities schedule for all residents. Such a program shall include:

- a. Regulations to protect the facility's security and the residents' welfare;
- b. Provisions for a minimum of two (2) hours daily of organized and supervised physical exercise and recreational activities and leisure time activities, excluding time spent watching television, for all residents. Organized and supervised means pre-planned exercise or activities supervised by staff qualified to direct same;
- c. Indoor space and equipment for active recreation; and
- d. Space, equipment and supportive staff for outdoor recreational programming.

5. The administrator shall develop leisure time activities such as television, radio, table games, hobby craft items and library materials.

6. Visiting plan. The facility administrator shall develop resident visiting policies and procedures to include: (Mandatory)

- a. Security rules;

b. Provisions for residents to meet with attorneys. Attorney visits shall not be monitored;

c. The numbers of visits for each resident and the number of visitors permitted for each visit;

d. Visiting schedule offering both evening and daytime hours on weekdays and weekends;

e. Visiting for members of the resident's immediate family, counsel, and clergyman and others who would be helpful in planning for the child;

f. A written statement of the administrators right and responsibility to deny a visit to a resident when he has reasonable grounds to believe the visit might endanger the security of the facility;

g. The denial of a visit shall be in writing with a copy being issued to the resident, the person attempting to visit and the resident file;

h. Visitors shall register names, addresses and relationships to resident;

i. No area used for resident visiting shall use audio monitoring equipment during visits;

j. Visits conducted in residents' living areas shall not conflict with the normal activities of residents not receiving visitors.

7. Correspondence. The facility administrator shall develop a policy for resident mail consistent with the legal rights of juveniles and the facility's security.

8. Juvenile clothing, bedding and laundry services.

a. Each resident shall have neat and clean clothing appropriate to the season.

b. Clothing used to supplement residents' personal clothing shall be of a non-jail/non-uniform type.

c. Clothing exchanges shall occur minimally twice a week or more often as necessary.

d. Residents excess personal clothing shall be returned to designated family members or stored in a manner which prevents mildew and other damage.

e. Policies and procedures shall govern possession of personal property by each resident, inventory control and storage of excess property.

9. Linens and bedding.

a. Each resident admitted to the facility shall have the following articles made available:

- (1) One bath towel;
- (2) One clean, firm, fire-retardant mattress (polyurethane mattresses are prohibited);
- (3) Two sheets or one sheet and a clean mattress cover;
- (4) Sufficient clean blankets to provide comfort under existing temperature conditions;
- (5) One pillow and one pillow case.

b. Clean linens shall be furnished once each week.

c. Bedding and linens which are worn out or unfit for further use shall not be used.

10. Removal of clothing and bedding. Policies and procedures should provide the guidelines for removing clothing and/or bedding from a resident if the behavior of the resident threatens the safety and/or security of the individual, others or the facility. A special occurrence report shall be completed and filed within the facility.

11. Laundry services.

a. Laundry services shall meet daily clothing, linen and bedding needs.

b. Care shall be taken to maintain separation of clean and soiled linens and clothing.

c. Residents' personal clothing and other non-linen items shall be laundered in accordance with appropriate washing procedures for the various fabrics.

12. Emergencies and special occurrences.

a. Emergency plan. The facility administrator shall develop a written disaster plan. The plan shall include: (Mandatory)

- (1) Location of alarms and fire fighting equipment;
- (2) Emergency drill policy;
- (3) Specific assignments and tasks for personnel;
- (4) Persons and emergency departments to be notified;

(5) Procedure for evacuation of all persons;

(6) Arrangements for temporary confinement of residents.

b. The plan shall be developed for the facility and with the assistance and advice of the local fire and/or rescue authority (Civil Defense).

c. Copies of the disaster plan containing basic emergency procedures shall be available at a central staff station.

d. All employees shall review emergency procedures every six (6) months. Evidence of such review shall be documented.

e. All incidents of a serious nature which endanger the lives or physical welfare of staff or residents shall be formally reported to the Department of Corrections within ten (10) days.

(1) Incidents of a serious nature shall include:

(a) Death;

(b) Serious injury or illness (accidental, self or other inflicted, incurred subsequent to placement);

(c) Fire causing serious damage;

(d) Riot;

(e) Assaults requiring medical care;

(f) Other serious disturbances;

(g) Occurrences of infectious diseases and disposition; and

(h) Escape (applicable to secure facilities).

(2) Special occurrences shall be reported on forms provided by the Minnesota Department of Corrections.

(3) In the event of serious illness, accident or imminent death, the resident's family or others who maintain a close relationship with him/her shall be notified.

f. When a resident's death occurs:

(1) The date, time and circumstances of the resident's death shall be recorded;

(2) The coroner's office shall be notified;

(3) The parents or guardian of the deceased shall be notified immediately; and

(4) Personal belongings of the deceased resident shall be preserved for the resident's parents or guardian.

11 MCAR § 2.587 Food service.

A. General requirements.

1. The goals of food service in each facility shall be to provide food and beverages to residents that are nutritionally adequate; palatable; produced in a manner to prevent foodborne illness; of adequate quantity and variety; served at appropriate temperatures; and, prepared by methods which conserve nutritional value.

2. The designated food service supervisor shall be trained in food service operations prior to assuming this responsibility.

B. Food handling practices.

1. Food service shall be in accordance with the Minnesota Department of Health Rules 7 MCAR §§ 1.161-1.170. (Mandatory)

2. Food catered to a facility shall be obtained from a source licensed by the Minnesota Department of Health or other authorized agency and transported, handled and served in a manner consistent with 7 MCAR §§ 1.161-1.170. (Mandatory)

C. Dietary service. Nutritional needs of residents shall be met in accordance with the following dietary allowances: (Mandatory)

1. Meat or protein group. Two (2) or more servings per day. A serving within this group is defined as:

- a. 2-3 ounces cooked, lean, edible meat
- b. 2 medium eggs
- c. 4 tablespoons peanut butter
- d. 1 cup dry beans

2. Milk group. Two (2) servings per day. A serving is defined as

- a. 1 cup of milk
- b. 1 ounce of cheese
- c. 1/2 cup cottage cheese

3. Cereal and bread group. Four (4) or more servings per day. A serving is defined as:

- a. 1/2 to 1 slice of bread
- b. 1/2 to 3/4 cup cereal
- c. 1/2 to 3/4 cup rice
- d. 1/2 to 3/4 cup of pasta

4. Fruit and vegetable group. Four (4) or more servings per day. A serving is defined as:

- a. 1/2 cup potatoes
- b. 1/2 cup cooked vegetables
- c. 4 pieces raw vegetables
- d. 1/2 cup fruit
- e. 1 cup citrus juice

D. There shall not be more than fourteen (14) hours between a substantial evening meal and breakfast. At least three (3) meals shall be made available at regular times during each twenty-four (24) hour period.

E. Any facility housing residents in need of medically prescribed therapeutic diets shall have documentary evidence that such diets are provided for as ordered by the attending physician.

F. The food service plan of the facility shall provide special diets required to meet the medical and religious needs of the residents.

G. Food shall not be withheld as punishment for unacceptable behavior. (Mandatory)

H. Meals shall be served under supervision of staff.

I. Records of menus and of foods purchased shall be retained for one (1) year.

J. Menus shall be planned and posted one (1) week in advance and reviewed regularly by a nutritionist or dietician.

K. A minimum of two (2) hot meals shall be provided each day.

L. Food management policies and procedures shall include a food expenditure cost accounting system designed to isolate cost per meal per resident.

M. Canteen services shall be available to residents on a twice per week basis. Facilities which do not operate a canteen shall implement a system whereby residents have the opportunity to purchase or obtain sundry items on a twice per week basis.

N. Food storage.

1. All food prepared in bulk shall be stored in seamless containers after opening the original container.

2. Dry milk and milk products after opening shall be stored in seamless, air-tight containers.

3. Storage of non-perishable food shall be stored off the floor on washable shelving in a ventilated room.

4. Food shall be protected from dust, flies, rodents, vermin, overhead leakage and other sources of contamination, and shall be placed away from areas with excessive heat.

5. All perishable food (fresh fruit and vegetables) and potentially hazardous food (meat and dairy products) shall be stored off the floor on washable, corrosion-resistant shelving under sanitary conditions, and at temperatures which will protect against spoilage.

6. Meat and dairy products shall be stored at forty (40) degrees Fahrenheit or below, and fruit and vegetables at fifty (50) degrees Fahrenheit or below. When stored together, the lower temperatures shall apply. Temperatures shall be monitored by an accurate thermometer.

7. The storage of detergents, cleaners, pesticides and other non-food items, including employees' personal items, shall be prohibited in food storage areas.

8. Returned portions of food and beverages from individual servings shall not be reused unless such food or beverage is served in a sealed wrapper or container which has not been unwrapped or opened.

9. Ice.

a. Ice shall be stored and handled in a sanitary manner.

b. Stored ice shall be kept in an enclosed container.

c. An ice scoop shall be stored separate from the ice to prevent contact of the handle with the ice.

O. Transport of food.

1. Food shall be covered during transport through non-dietary areas, but need not be covered when served in a contiguous dining area.

2. The food service system shall be capable of maintaining hot foods at one-hundred-fifty (150) degrees Fahrenheit or higher; cold food at forty (40) degrees Fahrenheit or lower.

3. A dumbwaiter or conveyor, used for the transport of soiled linen or soiled dishes, shall not be used for the transport of food.

11 MCAR § 2.591 Security.

A. Policies and procedures. Security policies and procedures shall be developed to cover the following:

1. Control and recovery of contraband;
2. Delivery and service procedure;
3. Prohibition on firearms and other weapons in resident areas;
4. Search and shake down procedures;
5. A system of accounting for the location of residents;
6. Riot prevention and control; and
7. Supervision of all residents outside the facility perimeter.

B. Admissions.

1. The intake procedure conducted by the admitting officer for all admissions shall provide for a thorough search of the resident and belongings. In the event of all new admissions, a shower (delousing if indicated), an assessment of health status and physical needs, an inventory of resident's property, properly recorded and signed by the owner as correct, and completion of an admission form shall be completed.

2. No juvenile shall be received by the staff of a facility until the arresting or escorting officer has produced proper credentials and/or until the proper documents have been completed identifying the purpose for placement. The arresting or escorting officer shall be required to sign his name and title on a form which is part of the intake and record.

3. All intake procedures shall be conducted in a manner and location that assures the personal privacy of the resident and the confidentiality of the transaction from unauthorized personnel.

C. Releases.

1. Upon release of a resident, the property of the resident, unless held for authorized investigation or litigation, shall be returned with a signed receipt acknowledging same.

2. Residents shall be permitted to make arrangements for transportation prior to release.

D. Contraband control searches.

1. Visitors who seek to enter a security area of the facility and refuse to submit to a search by a staff member of the same sex, shall be denied the privilege to visit if such procedures are established for the facility.

2. The facility shall be regularly inspected for contraband, evidence of breaches in security, and inoperable security equipment.

E. Locks and keys.

1. When not in use, all keys to locks shall be properly tagged and securely stored.

2. One (1) complete set of facility keys and locks shall be kept on hand for replacement purposes.

3. Keys and locks that serve a critical security purpose shall be easily identifiable and never issued except upon order of the facility administrator or person in charge, and in accordance with established procedure. (Mandatory)

4. No security keys and locks shall be made available to residents.

F. Dangerous material. Material dangerous to either security or safety shall be properly secured. (Mandatory)

G. Count procedure.

1. Each facility shall have a written policy and procedure governing counts.

2. Formal counts shall occur minimally every eight (8) hours and shall be logged.

11 MCAR § 2.595 Environmental/personal health and sanitation.

A. Availability of medical and dental resources.

1. The facility shall have a licensed physician(s) or medical resources designated for the medical supervision, care and treatment of residents. (Mandatory)

2. The facility shall insure twenty-four (24) hour a day availability of consultation, advice and emergency medical service.

3. The local health authority shall be requested to inspect annually the facility with respect to sanitation and health conditions.

4. Each facility shall have emergency dental care available to residents.

5. Ambulance services shall be available on a twenty-four (24) hour a day basis. (Mandatory)

B. Physical examination.

1. Residents shall have a general medical history and physical examination or health assessment within thirty (30) days preceding admission or within seven (7) days after admission.

a. The medical report shall be filed in the resident's health file and shall include appropriate instructions for meeting special needs, such as diet or medications.

b. Registered nurses or licensed practical nurses performing health assessments shall have access to a consulting licensed physician.

c. Stimulants, tranquilizers, psychotropic drugs, and drugs requiring intramuscular administration shall be prescribed only by a physician. (Mandatory)

2. Policies and procedures for medical care shall exist for the following:

a. Obtaining medical consent;

b. Receiving screening;

c. Collecting health appraisal data;

d. Medical services;

e. Dental services;

f. Emergency medical and dental services;

g. First aid;

h. Notifying next of kin or legal guardian in case of serious illness, injury or death;

i. Providing chronic care;

j. Convalescent care;

k. Medical preventive maintenance;

l. Screening, referral and care of mentally ill and retarded residents;

m. Making staff aware of special medical problems;

- n. Implementing the special medical program;
- o. Immunizing, where possible;
- p. Delousing procedures;
- q. Providing detoxification procedures;
- r. Providing pharmaceuticals;
- s. Special medical programs; and
- t. Follow-up medical referral after discharge.

3. Receiving screening shall be part of the intake process. Areas to be assessed include:

- a. Possibility of pregnancy;
- b. Possibility of venereal disease;
- c. Current illnesses and health problems;
- d. Medications taken and special health requirements;
- e. Status of immunizations;
- f. Screening of other health problems designated by the responsible physician;
- g. Behavioral observation, including state of consciousness and mental status;
- h. Notation of body deformities, trauma markings, bruises, lesions, ease of movement, and/or jaundice;
- i. Condition of skin and body orifices, including rashes and infestations; and
- j. Disposition/referral of residents to qualified medical personnel on an emergency basis.

C. Sick call. The facility shall provide space, staff, and a procedure for daily sick call.

D. Posting of available resources. A listing and telephone numbers of the medical, dental and ambulance resources and telephone numbers shall be posted at the facility's primary staff station.

E. Hospitalization of a resident.

1. Each facility administrator shall insure the availability of hospital services for residents.

2. When a resident requires hospitalization, he/she shall be supervised on a twenty-four (24) hour per day basis unless the following conditions have been satisfied:

a. The resident has been deemed not in need of custody supervision;
or

b. The resident is medically incapacitated in the opinion of the attending physician.

F. First aid.

1. Child care workers responsible for the supervision, safety and well-being of residents shall be trained in basic first aid procedures and have a current first aid certificate (renewed every three years).

2. Facilities shall have a minimum of one (1) first aid kit which is approved by the physician located at the facility's control center or primary staff station.

3. The first aid kit shall be inspected regularly by a designated staff person to assess the need for replenishment of supplies. Such inspection shall be documented.

4. One person on duty per shift shall have training in a receiving screening, basic life support, cardiopulmonary resuscitation (CPR), and recognition of symptoms of the illness most common to the facility.

G. Medical and dental records.

1. The facility shall record complaints of illness or injury by residents. The facility response shall be documented.

2. Medical and dental records shall be maintained on each resident.

H. Personal hygiene.

1. Each resident shall be permitted daily bathing or showering.

2. Residents shall receive provisions for obtaining personal hygiene items at facility expense i.e., soap, sanitary pads, toothbrush and toothpaste.

3. There shall be hair care services available to the residents.

4. Each living unit shall provide, at a minimum:

a. One (1) toilet for every five (5) residents;

- b. One (1) washbasin for every five (5) residents;
- c. One (1) shower for every five (5) residents;
- d. A bathtub in the facility available to all residents.

I. Delivery, supervision and control of medicines.

1. Delivery of medicine shall be conducted only by licensed medical or nursing personnel or by facility staff members who have been trained in the delivery of medications.

2. The delivery of legend drugs by unlicensed staff shall be under the direction of a consulting physician.

3. The facility administrator, shall develop plans and procedures for the secure storage, delivery, supervision and control of medicine. Such plans and procedures shall include:

a. Storage.

(1) All medicines shall be kept in a secure storage place.

(2) Medicine requiring refrigeration shall be stored in a secure refrigerator.

(3) Residents shall not be allowed in any room used for the storage of medicine without direct staff supervision.

(4) Only staff authorized to deliver medicine shall have access to keys for medicine storage areas.

(5) Stock supplies of legend (prescription-type) drugs shall not be maintained. (Mandatory)

(6) Prescribed medicine shall be kept in its original container, bearing the original label.

(7) Poisons and medicine intended for external use shall be clearly marked and shall be stored separate from medicine intended for internal use.

b. Delivery, control and recording of legend drugs.

(1) Diabetics with permission of the attending physician shall be permitted to self-administer insulin injections.

(2) Other medicine administered by injection shall be given only by a physician, registered nurse, or licensed practical nurse. (Mandatory)

(3) Unless ordered otherwise by the attending physician, medicine delivered to residents shall be self-administered under staff supervision.

(4) Procedures shall be developed for the positive identification of the recipient of all medicine.

(5) Prescribed medicine shall be delivered in accordance with the physician's instructions at the correct time and in the prescribed dose.

(6) No resident, while receiving legend drugs, shall receive any non-legend drug without the approval of the attending physician. (Mandatory)

(7) Adverse reactions to drugs shall be reported at once to the attending physician and an explanation shall be made in the resident's record. (Mandatory)

(8) Resident refusal of prescribed medicine shall be reported to the attending physician and an explanation shall be made in the resident's record.

(9) No resident shall be deprived of medicine as prescribed due to penalty or staff retaliation. (Mandatory)

(10) A physician shall be contacted prior to the next prescribed medicine dosage time for instructions on all newly admitted residents who are either in possession of prescribed medicine or indicate a need for such. (Mandatory)

c. Recording of legend drugs entering the facility. Records of receipt, the quantity of such drugs, and of the disposition of all legend drugs shall be maintained in sufficient detail to enable an accurate accounting at any time.

4. If authorized by the attending physician, prescribed medicine belonging to a resident shall be given to them when released or to appropriate authorities when transferred. This shall be recorded in the resident's record.

5. Unused portions of prescribed medicine shall be destroyed by incineration or by flushing into the sewer system. (Mandatory)

a. Such destruction shall be performed by the facility administrator or a designee and witnessed by a staff member.

b. A notation of the destruction shall be made in the resident's record and shall include the name and quantity of the drug destroyed and shall be signed by the facility administrator or a designee and staff witness.

6. Unused portions of controlled substances shall be handled by contacting the Minnesota Board of Pharmacy. (Mandatory)

7. Methadone programs shall not be made available unless in compliance with all existing laws and regulations governing such programs. (Mandatory)

8. Written policy shall prohibit the facility administrator from conducting medical or pharmaceutical testing for experimental or research purposes.

9. If medical services are delivered in the facility or through contract services, space, equipment, supplies and materials shall be provided.

J. Isolation for contagious disease.

1. Residents who are suspected of having a contagious disease shall be detained in isolation for only that period of time necessary to obtain advice and consultation from a physician.

2. Continuation of such isolation shall be determined by the attending physician.

3. A resident placed in isolation for medical reasons shall not be deprived of any more privileges, rights or amenities than shall be consistent with his/her classification prior to such assignment except to the extent that such privileges, rights or amenities would endanger the health of staff, other residents, or the public.

K. Mentally ill residents. Screening and referral for care shall be provided to mentally ill or retarded juveniles. The physician shall provide a written list of symptoms or behavior indicative of mental illness and retardation for staff training and shall designate specific referral sources.

1. If the facility administrator or designee determines a resident to be mentally ill, a licensed physician's opinion (preferably a psychiatrist) shall be secured as soon as possible, but not more than eight (8) hours after such determination.

2. A licensed physician's opinion is supportive of the facility administrator or designee, and if practical and feasible, such resident shall be transferred to a medical facility designated by the county and approved by the State Department of Health for diagnosis, treatment and evaluation of such suspected mental illness pursuant to Minn. Stat. § 253A.04, Emergency Hospitalization of Mentally Ill and Mentally Deficient Persons. (Mandatory)

L. Housekeeping, sanitation, plant maintenance.

1. The physical plant shall meet all standards required by the State Building Code, State Fire Marshal and the State Health Department. (Mandatory)

2. General requirement. The entire facility inclusive of every building, structure or enclosure utilized by the facility—walls, floors, ceiling, registers, fixtures, equipment and furnishings shall be kept in good repair.

3. Established plan. The person responsible for plant maintenance, housekeeping and sanitation shall develop and implement a written plan with identified policies and procedures for same.

4. Inspections. The facility administrator shall develop and implement a written plan for the daily inspection of the facility with respect to housekeeping, sanitation, and plant maintenance. Such inspections shall be recorded.

5. The facility administration shall have available to it the services of a qualified fire and safety officer who reviews all fire and safety policies and procedures at least annually.

6. Written policies and procedures shall specify the facility's fire prevention regulations and practices to ensure the safety of staff, residents and visitors. These include provision for an adequate fire protection service, a system of quarterly fire inspection and testing of equipment, an annual inspection by local or state fire officials, and availability of fire hoses or extinguishers at appropriate locations throughout the facility. (Mandatory)

7. There shall be an automatic fire alarm and heat and smoke detection system approved by the state fire marshal or recognized state authority, and tested on a regular basis. (Mandatory)

8. Work requests.

a. The facility administrator shall develop policies and procedures designed to detect and correct building and equipment deterioration, safety hazards and unsanitary conditions.

b. Such policies and procedures shall include:

(1) A requirement that the facility staff report unsanitary and unsafe conditions as well as physical plant and equipment repairs and replacement needs;

(2) A process whereby work requests are prioritized and filed with the governing body by the facility administrator in an expedient manner; and

(3) A records system allowing for review of budget and work requests, expenditures, dates and actions pursuant to detection of need, submission of work orders and completion of requests.

9. Insect and rodent control. Any condition in the facility conducive to harborage or breeding of insects, rodents, or other vermin shall be eliminated immediately. (Mandatory)

M. Sleeping rooms.

1. Single occupancy sleeping rooms shall have a minimum of seventy (70) square feet of floor space per person.

2. Multi occupancy sleeping rooms shall have a minimum of sixty (60) square feet of floor space per person.