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**Policy Number:** 103.007  
**Title:** Juvenile Facility Staffing Plans  
**Effective Date:** 8/6/19

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**PURPOSE:** To provide staffing plans appropriate to the unique needs of youth housed at juvenile facilities that also meet the requirements of Prison Rape Elimination Act (PREA) and Children Residential Facilities (CRF) licensing standards.

**APPLICABILITY:** All juvenile facilities

**DEFINITIONS:** None

**PROCEDURES:**

- A. Juvenile facility staffing patterns provide for the safety, security, and welfare of staff and residents. Staffing plans are appropriate for the facility's program services, physical plant features, and resident characteristics including:
1. Age;
  2. Physical and mental health;
  3. Vulnerability;
  4. Capacity for self-preservation in the event of an emergency;
  5. Degree of threat to self or others;
  6. Risk of absconding;
  7. Gender;
  8. Disability; and
  9. Education needs.
- B. Organizational charts are maintained at the facility and reviewed by inspection and enforcement auditors during CRF licensing inspections, and outline adequate staffing positions in the following areas:
1. Administration and support services;
  2. Program and security supervisors;
  3. Case management, counseling, treatment, transition, and security staff;
  4. Medical, dental, and mental health support services;
  5. Religious services;
  6. Education programs;
  7. Recreation;
  8. Volunteer program;
  9. Maintenance;
  10. Property and supplies;
  11. Food service;
  12. Resident work program;
  13. Health and safety officer;
  14. Finance;
  15. Records;
  16. Human resources; and
  17. Information technology.

- C. Staffing plans must provide for adequate staffing and video monitoring to protect against sexual abuse. Staffing plans are maintained at the facility and reviewed by inspection and enforcement auditors during CRF licensing inspections. The plans must at a minimum take into consideration:
1. Generally accepted juvenile detention and correctional/secure residential practices;
  2. Findings of inadequacy from any judicial branch, federal investigative agencies, and internal or external oversight bodies;
  3. All physical plant components (blind spots, isolated areas, etc.);
  4. Composition of resident population;
  5. Number and placement of supervisors;
  6. Programs occurring on a particular shift;
  7. State or local laws, regulations, or standards; and
  8. Prevalence of substantiated and unsubstantiated sexual abuse incidents.
- D. Deviations of the staffing plan due to limited and discrete exigent circumstances must be documented and retained at the facility.
- E. Reviews are conducted annually, or more frequently as circumstances dictate, to ensure all efforts to protect against sexual abuse are taken. The PREA coordinator may be involved in assessing, determining, and documenting whether adjustments are needed to:
1. Staffing plan;
  2. Prevailing staffing patterns;
  3. Deployment of video monitoring systems and other monitoring technologies; and
  4. Available resources to ensure adherence to the staffing plan.
- F. Efforts to recruit, hire, and retain a culturally balanced staffing complement must be documented in the state's resumix applicant database (see Policy 103.009 "Affirmative Action/Monitoring the Hiring Process").
- G. Direct contact staff must be at least 21 years old.  
Persons older than 18, but younger than 21 years old, may be employed if they are enrolled in, or have completed, course work in a post-secondary education program to pursue a degree in a behavioral science.
- H. Staff, volunteers, and contractors must pass department of human services (DHS) and criminal background checks (see Policy 103.014 "Background Checks for Applicants and Current Employees," Policy 300.040 "Volunteer Services Program," and Policy 300.045 "Contractor Relationship to Department").
- I. DOC human resources policies ensure services are provided by qualified, responsible, healthy individuals through:
1. Pre-employment physical exams and drug testing (Policy 103.016, "Pre-Placement Medical Exam and Evaluation");
  2. Licensure requirements (Policy 103.040 "Employee Credentials Requirements");
  3. Position descriptions, probation periods, and performance management (Policy 103.018 "Performance Management System");
  4. Essential job functions (Policy 103.226 "Fitness for Duty");
  5. Training (Policy 103.410 "In-Service Training," Policy 103.420 "Pre-Service and Orientation Training," and Policy 300.040 "Volunteer Services Program");
  6. Mentoring (Policy 103.425 "Mentor Program");

7. Internal and external investigations (Policy 103.0141 “Employees Who Are the Subject of Criminal Investigation(s), Arrest(s) and/or Conviction(s)” and Policy 103.225 “Employee Investigation and Discipline Administration”);
  8. Employee conduct (Policy 103.228 “Respectful Workplace,” Policy 103.300 “Discrimination-Free Workplace,” Policy 103.220, “Personal Code of Conduct of Employees,” and Policy 103.215 “Alcohol and Other Drug Use”).
- J. A warden is designated for each facility. The warden must have at least a bachelor’s degree in the behavioral sciences, public administration, or a related field.
- K. The warden designates another staff person to be in charge of the facility during the warden’s temporary absence.
- L. Facilities designate staff to act on behalf of the warden on a 24-hour-a-day basis (see Policy 300.200 “Officer of the Day”).
- M. Facilities with more than 24 residents must have a full-time program director. The program director must have:
1. A bachelor’s degree in the behavioral sciences or a related field with at least two years of work experience providing correctional services to residents; and
  2. One year of experience or training in program administration and supervision of staff.
- N. Direct contact staff ratios during waking hours must not exceed eight residents to one staff person.
- O. Direct contact staff ratios during regular sleeping hours must not exceed 16 residents to one staff person.
- P. Employees must not be scheduled for duty for two consecutive work periods except in documented emergencies, or when unusual circumstances require reasonable and prudent exception.
- Q. Employees must not work more than 16 hours in each 24-hour period.
- R. Direct contact staff must not be assigned in a manner that invades the privacy of residents or embarrasses or diminishes the dignity of residents by requiring staff of the opposite gender to perform the following duties:
1. Unclothed body searches;
  2. Witnessing or assisting at internal body searches;
  3. Direct visual supervision of residents during showers or lavatory use; and
  4. Assisting a resident with a personal hygiene activity if it requires staff to view the resident unclothed or to touch the resident’s genitals, buttocks, or breasts.
- S. Facilities must have a contingency plan to immediately provide staff of the same gender:
1. In the situations noted in Procedure R;
  2. When gender-specific needs screening identifies the resident as having needs regarding the gender of staff; and
  3. When necessary to appropriately care for a resident who was a victim of sexual abuse.
- T. Inability or failure to follow the contingency plan must be documented by all staff involved through incident reports filed with the warden/designee.

1. The documentation is kept on file at the facility for two years or until the next licensing inspection, whichever is longer.
  2. Documentation must include:
    - (a) The circumstances and reasons the requirements were not met; and
    - (b) How recurrence will be prevented in the future.
- U. Case manager ratios must not exceed 25 residents to one staff.
- V. A staff person is designated to coordinate volunteer services if volunteers are used by the facility.
- W. Facilities with 25 or more residents must designate at least one qualified staff person to develop, implement, and coordinate the recreation program.
- X. There is a 12-month comprehensive and continuous education program that meets the requirements of Minnesota Laws of 1995, Regular Session, Chapter 226, article 3, section 60, subdivision 2, clause (2)(ix), and Rules of the Minnesota Department of Education.
- Y. A person working at, but not employed by, the facility must be under the general supervision of facility staff, unless that person has been trained in the facility's policies and procedures. Such persons must not have contact with residents.
- Z. All staff hours worked are documented by staff and approved by the supervisor in the employee self-service database. Employee time paid is retained in SEMA4.

#### **INTERNAL CONTROLS:**

- A. Staff hours worked are documented and retained in the State of Minnesota employee self-service and SEMA4 databases.
- B. Organizational charts and staffing plans are retained at the facility.
- C. Documentation relating to the staffing and contingency plan deviations is retained at the facility.

**ACA STANDARDS:** None

**REFERENCES:** [Minn. Laws of 1995, Regular Session, Chapter 226, article 3, § 60, subd. 2, clause \(2\)\(ix\)](#)  
[Minn. Rules Chapters 3500 through 3560](#), and Chapter [2960](#), particularly Rules [2960.0070](#), [2960.0080](#), [2960.0100](#), [2960.0150](#), [2960.0240](#), [2960.0270](#), and [2960.0560](#)  
 Prison Rape Elimination Act (PREA), [28 C.F.R. §115](#)  
 Minnesota Management and Budget (MMB) [Administrative Procedures](#)  
 MMB Applicable [Labor Agreements](#)  
[Policy 103.009, "Affirmative Action/Monitoring the Hiring Process"](#)  
[Policy 103.014, "Background Checks for Applicants and Current Employees"](#)  
[Policy 103.016, "Pre-Placement Medical Exam and Evaluation"](#)  
[Policy 103.0141, "Employees Who are the Subject of Criminal Investigation\(s\), Arrest\(s\) and/or Conviction\(s\)"](#)  
[Policy 103.018, "Performance Management System"](#)  
[Policy 103.215, "Alcohol and Other Drug Use"](#)  
[Policy 103.220, "Personal Code of Conduct of Employees"](#)

[Policy 103.225, "Employee Investigation and Discipline Administration"](#)  
[Policy 103.226, "Fitness for Duty"](#)  
[Policy 103.228, "Respectful Workplace"](#)  
[Policy 103.300, "Discrimination-Free Workplace"](#)  
[Policy 103.040, "Employee Credentials Requirements"](#)  
[Policy 103.410, "In-Service Training"](#)  
[Policy 103.420, "Pre-Service and Orientation Training"](#)  
[Policy 103.425, "Mentor Program"](#)  
[Policy 300.040, "Volunteer Services Program"](#)  
[Policy 300.045, "Contractor Relationship to Department"](#)  
[Policy 300.200, "Officer of the Day"](#)  
[Policy 301.010, "Searches"](#)

**REPLACES:** Policy 103.007, "Juvenile Facility Staffing Plans," 1/19/16.  
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

**ATTACHMENTS:** None

**APPROVALS:**  
Deputy Commissioner, Community Services  
Deputy Commissioner, Facility Services  
Assistant Commissioner, Operations Support  
Assistant Commissioner, Facility Services