

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## COMMUNITY CONFINEMENT FACILITIES



<b>Name of facility: Portland House</b>			
<b>Physical address: 514 11<sup>th</sup> Ave SE Minneapolis, MN 55414</b>			
<b>Date report submitted:</b>			
<b>Auditor Information Timothy Pippo</b>			
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<b>Date of facility visit: 09/14/2015</b>			
<b>Facility Information</b>			
<b>Facility mailing address:</b> (if different from above)			
<b>Telephone number: 612-331-1087</b>			
<b>The facility is:</b>	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> XXX Private not for profit		
<b>Facility Type:</b>	<input type="checkbox"/> Community treatment center	<input type="checkbox"/> Community based confinement facility	<input type="checkbox"/> Other:
	<input type="checkbox"/> XXX Halfway house		
	<input type="checkbox"/> Alcohol or drug rehabilitation center	<input type="checkbox"/> Mental health facility	
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<b>Agency Information</b>			
<b>Name of agency: Lutheran Social Service of Minnesota</b>			
<b>Governing authority or parent agency:</b> (if applicable)			
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<b>Agency Chief Executive Officer</b>			
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## AUDIT FINDINGS

### NARRATIVE:

Lutheran Social Service of Minnesota is a religious based organization dedicated to assist persons in need of assistance to better their lives. The organization has been operating for 150 years. Since 1973 they have operated **Portland House**. Portland House is a Halfway House dedicated to providing an alternative to incarceration for Adult Male offenders. Portland house is a 25 bed facility that houses only adult males. The maximum stay for a resident is 11 months with an average stay of 5-6 months and a minimum stay of 2 months. Portland House is conditionally licensed by the Minnesota Department of Corrections and operates under the guidelines of Minnesota 2920 Rules Governing Residential Adult Community-Based Residential Correctional Facilities. Portland House offers offenders a structured living environment assisting them in their transition into the Community. The majority of residents are post release from a Minnesota Correctional Facility finishing the remainder of their sentence in the facility on a work-release program. The facility also houses probation violation offenders from the Hennepin County Jail along with Extended Juvenile Jurisdiction clients that are 18 years of age or older. The facility's proximity to local Schools prohibits them from housing anyone with a Criminal Sexual Conduct conviction.

On September 14, 2015 an audit of the facility was conducted by Timothy Pippo a Certified PREA Auditor. I arrived at the facility at 7:00 AM and immediately interviewed a staff member that was just going off duty from the night shift. I was then given a thorough tour of the facility by the Program Manager. I was given access to a private office and proceeded to interview both staff and residents throughout the day. There were 22 residents housed in the facility on the day of the audit. I interviewed 9 residents and 7 staff members. There were no residents with limited English skills or residents that met any LGBTI status housed at the facility on the day of the tour. I conducted subsequent phone interviews with the Agency CEO and a member of the Sexual Violence Center (Minneapolis). Portland House has had zero incidents or allegations of Sexual Harassment or Sexual Abuse by staff or residents within the last year.

### DESCRIPTION OF FACILITY CHARACTERISTICS:

Portland House is a three story renovated home located in a residential neighborhood in Minneapolis near the University of Minnesota Campus. The facility has a capacity of 25 Adult Males. The house has 8 bedrooms on the second floor, three of the bedrooms have a capacity of 3 clients and 5 bedrooms have a 2 person capacity. There are 2 bathrooms on the second floor, one has a lock on the door and has 1 shower the other has 2 showers that have latches on the shower doors. The basement of the house has 2 bedrooms with a capacity of 3 persons in each bedroom. There is one bathroom in the basement that has 1 shower with a lock on the bathroom door. The basement also has a lounge area for residential use. The locked laundry room is located in the basement, residents must check out a key from staff to utilize the laundry room. Residents have their own key to their rooms and must keep the bedroom doors locked at all times. Residents do not have access to the third floor of the building which is used mainly for storage. The first floor of the house has an office that is staffed 24/7 along with three more offices. The main floor has a smaller lounge area for residents and has a full kitchen. The facility has a cook that prepares lunch and dinner for the residents Monday to Friday. Residents must prepare their own meals on weekends and for breakfast. Staff members perform regular room checks and monitor visitation along with release and re-entry of residents.

**Mission Statement:**

Lutheran Social Service of Minnesota expresses the love of Christ for all people through service that inspires hope, changes lives and builds community.

**Vision:**

All people have the opportunity to live and work in the community with dignity, safety and hope.

**SUMMARY OF AUDIT FINDINGS:**

Number of standards exceeded: 0

Number of standards met: 35

Number of standards not met: 0

Number of standards not applicable: 4



**Standard****number** 115.211 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
  - a) Agency policy 115.11 along with the Employee Handbook outlines the agencies policy for employees. Numerous posting throughout the facility along with the Residential Handbook inform the residents of the policy.
  - b) Interviews with the Senior Director, the Program Director and the PREA Coordinator, confirm that the agency has dedicated a competent employee as their coordinator and given that employee ample time to ensure the facility is in compliance with this standard.

**Standard****number** 155.212 Contracting with other entities for confinement of residents

- Not Applicable

The facility does not contract with other entities for supervision of their residents.

**Standard****number** 115.213 Supervision and monitoring

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
  - a) The facility has a documented established staffing plan that has emergency procedures. Mandatory staffing is outlined in the Employee Handbook page 35. MN Rule 2920.400 defines qualifications for staff.
  - b) The staffing plan is always adhered to with no exceptions. Staff members are mandated to stay on duty until relieved and the facility has a mandatory on call procedure for staff. The facility complies with MN Rule 2920.3700 for staffing ratios.

**Standard number**

115.215 Limits to cross-gender viewing and searches

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
  - a) The facility does not perform any strip searches on any residents for any reason.
  - b) The facility does not perform any pat searches on any residents. Policy and the Employee Handbook specify no hands on searches of any kind.
  - c) There is no cross-gender or same gender pat or strip searches performed.
  - d) The facility has a knock and announce policy for its female employees, interviews with residents and staff confirmed that female staff announce their presence. All the shower areas in the house are in single private bathroom settings.
  - e) Portland House staff does not perform searches on any residents. Only Transgender persons identifying themselves as male would be accepted into the residence.
  - f) No staff member would ever pat or strip search any resident in any situation.

**Standard number**

115.216 Residents with disabilities and residents who are limited English proficient

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
  - a) Agency policy 115.16 addresses this standard. The physical layout of the facility limits the ability of Portland House to accept persons with major disabilities. Residents are pre-screened before they are admitted to the facility.
  - b) The facility has both English and Spanish version of their zero tolerance policy posted throughout the house. Interview with staff confirmed that they would make every effort available to obtain interpreters to assist resident reporting of sexual abuse or harassment.
  - c) Staff has access to an interpretive service "Language Line" to aid them in communication with residents. Interviews with upper management confirmed that the agency would do everything possible to obtain professional interpreters if needed. There were no residents with disabilities or limited English skills housed at the facility on the day of the audit.

**Standard number**

115.217 Hiring and promotion decisions

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) Agency policy 115.17 and the Agency Employee Handbook page 14 pertain to this standard.

b) - f) Agency policy 115.17, Agency Employee Handbook page 14 and the facility Employee Handbook page 27 cover this portion of the standard. Interviews with Human Resource staff confirm that criminal background checks are completed on all employees initially and every 5 years once employed. The Agency utilizes the Minnesota Bureau of Criminal Apprehension and the Minnesota Department of Human Services to perform Criminal Background checks. The facility has signed documentation that background checks include inquiries to previous employers. The facility is required to do background checks per MN Rule 2940.4000. The facility screens staff during their yearly performance reviews.

g) The Agency and the Facility both have consequences of termination for their "At Will" employees for false information. This is confirmed in the Agency Employee Handbook page 25.

h) Interviews with Human Resource staff and the Agency Senior Director confirm that they would provide information to other agencies as requested.

**Standard number**

115.218 Upgrades to facilities and technologies

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Interviews with the Program manager the PREA Coordinator and the Senior Director confirmed that they would consider protecting residents from sexual abuse in planning any facility modifications.

**Standard number**

115.221 Evidence protocol and forensic medical examinations

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) b) Portland House will utilize the Minneapolis Police Department for any and all sexual abuse incidents or allegations. Minneapolis Police Department has it's protocols outlined on their web-site

[http://www.ci.minneapolis.mn.us/police/policy/mpdpolicy\\_10-100\\_10-100](http://www.ci.minneapolis.mn.us/police/policy/mpdpolicy_10-100_10-100)

c) The facility would ensure safe transport of the victim to Hennepin County Medical Center per their policy 115.21. Hennepin County Medical Center has 24/7 emergency SAFE and or SANE services as outlined in their web-site

<http://www.hcmc.org/services/sars/index.htm> If the victim requested to go to another Hospital, the facility would verify that the Hospital has SAFE and or SAFE services.

d) e) The agency has a documented MOU with the Sexual Violence Center Minneapolis that includes the services required by the standard. A phone interview with the Executive Director of the center confirmed that they would assist and provide services for any resident of Portland House. The center has its services listed on their web-site <http://www.sexualviolencecenter.org/about-us/>

f) g) h) The victim would be transported by and the incident would be investigated by the Minneapolis Police Department. There have never been any incidents of sexual abuse in the facility.

**Standard number**

115.222 Policies to ensure referrals of allegations for investigations

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) Agency policy 115.22 and 115.61 refer to this standard

b) The agency will use Minneapolis Police Department for all investigations of sexual abuse allegations and inform the public of such on their web-site

<http://www.lssmn.org/portlandhouse/>

c) d) e) The Minneapolis Police Department would be the only entity investigating incidents that occurred at Portland House which is in their jurisdiction. There have been no allegations of sexual abuse at the facility within the last year.



**Standard number**

115.231 Employee Training

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
  - a) Policy 155.31 covers this standard. The facility has trained all staff on the items outlined in this standard. The Sexual Violence Center Minneapolis also provides training to staff members. New employees are trained as part of their initial orientation.
  - b) The facility only houses male residents and trains their female employees on the specifics of cross-gender supervision. Interviews with staff members confirm they have received PREA training.
  - c) Employees receive annual refresher training and PREA considerations are discussed at weekly staff meetings.
  - d) The facility requires staff to acknowledge receipt of training with a signature.

**Standard number**

115.232 Volunteer and contractor training

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

The facility currently does not have any volunteers that enter the facility, nor do they contract with any outside entities for supervision. They do however have training for volunteers included in their policy and have documents for volunteers to sign to acknowledge receipt of training.

**Standard number**

115.233 Resident education

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
  - a) Policy 115.41 addresses this standard. Interviews with staff and residents confirm that the residents receive the education the first day of arrival to the facility.
  - b) The facility holds weekly meetings with all the residents and PREA considerations are discussed during these meetings.
  - c) Staff will contact an interpreter if needed to educate residents with disabilities.

d) The facility has signed documentation that residents received and understood the information given them.

e) The facility has numerous posting throughout the house with information for residents and the information is included in the Resident Rule Book page 11-12.

**Standard number** 115.234 Specialized training: Investigations

■ Not Applicable

The Agency would rely on the Minneapolis Police Department to conduct any and all criminal sexual abuse incidents or allegations. There have been no criminal investigations for sexual abuse in the facility within the last year.

**Standard number** 115.235 Specialized training: Medical and mental health care

■ Not Applicable

The Agency does not employ Medical or Mental Health practitioners. They would rely on community based entities such as Hennepin County Medical Center and Sexual Violence Center Minneapolis to comply with this standard.

**Standard number** 115.241 Screening for risk of victimization and abusiveness

■ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) Policy 115.41 and 115.42 cover this standard along with the Facility Employee Handbook and the Resident Rule Book.

b) Interviews with staff and residents indicate that the screening takes place on the same that residents are admitted into the facility.

c) The facility utilizes a comprehensive objective screening tool.

d) The screening tool considers all portions of this subsection of the standard.

e) The screening takes into consideration any previous history of sexual abuse. The facility cannot accept residents with prior criminal sexual conduct convictions.

f) The facility has an on-going approach to screening and classifying residents. Each resident has a case manager that they meet with weekly and vulnerability is assessed at these meetings.

g) The Program Manager of Portland House provided a documented incident where an individual's assessment was changed and the resident was assigned new housing arrangements.

h) Policy 115.41, the Facility Employee Handbook and the Resident Rule Book all spell out that a resident will not be punished for not answering questions during the screening process.

i) Only the Case Managers and Program Director have access to screening information.

<b>Standard number</b> 115.242 Use of screening information
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■ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) b) The agency policy adheres to this standard. Interviews with Intake Staff confirm that they use screening information for housing assignments.

c) d) Portland House is a male only facility. Only transgender persons identifying themselves as male would be allowed into the program. Staff interviews indicated that they would consider all views of a residents own safety when determining housing.

e) The facility has private showers for all residents.

f) Portland House does not have any dedicated housing for any individuals. There were no residents meeting any LGBTI considerations on the day of the audit.

<b>Standard number</b> 115.251 Resident reporting
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■ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) Residents are provided several methods to report privately to staff, the agency, the Sexual Violence Center and Minneapolis Police. Interviews with staff and residents

confirm that they know they can report any incidents or allegations to these sources privately.

b) The facility has phone numbers listed on postings and in the Resident Rule Book for resident reporting.

c) Interviews with staff confirm they would accept any third party reports of incidents or allegations and that they would document such reports immediately.

d) Staff has several ways of reporting to the agency and supervisors of any incidents.

**Standard number**

115.252 Exhaustion of administrative remedies

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Portland House has a grievance policy and procedure for residents to use. The procedure is outlined on page 8 of the Resident Rule Book and page 11-12 of the facility Employee Handbook. Any grievance submitted concerning sexual abuse, sexual harassment or retaliation would be dealt with as an Emergency Grievance and staff would respond to it immediately.

**Standard number**

115.253 Resident access to outside confidential support services

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) The facility has phone numbers posted throughout the house and in the Resident Rule Book page 11-12. The residents are also issued a card at the time of intake with these phone numbers to numerous sources including the Sexual Violence Center Minneapolis.

b) Phone calls will be confidential, interviews with residents indicated that they are aware of the opportunity for contacting outside agencies for support.

c) Portland House has a signed agreement with Sexual Violence Center Minneapolis to provide services for residents they house.

**Standard number**

## Third-party reporting

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

The agency has methods of third-party reporting listed on their web-site and available for residents. Interviews with residents confirmed that they knew they could have someone report on their behalf and interviews with staff confirmed that they would accept and document such reports.

**Standard number**

## 115.261 Staff and agency reporting duties

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) Staff members are trained to report any and all information relating to sexual abuse, sexual harassment or retaliations to supervisors immediately. Training curriculum and the facility Employee Handbook page 12-13 refer to reporting of importance of immediate reporting. Staff interviews confirm adherence to this standard.

b) The facility Employee Handbooks spells out data privacy concerning residents.

c) The facility would utilize community resources for medical and mental health practitioners and they would operate under Federal and State privacy guidelines.

d) The facility only houses Adult Males.

e) Interviews with staff members confirmed that would report and document per Resident Employee Handbook page 33, any and all incidents or allegations to supervisors immediately.

**Standard number**

## 115.262 Agency protection duties

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

The facility Employee Handbook page 33 and interviews with all staff justify compliance with this standard. Safety of the victim or potential victim is paramount to the agency.

**Standard  
number**

115.263 Reporting to other confinement facilities

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Portland House is obligated by contract to notify the Minnesota Department of Corrections of any sexual abuse reported to them that occurred in one of their facilities. Interviews confirmed that residents were asked during screening if they had ever committed or were a victim of sexual abuse in another facility. All of residents interviewed came from a Jail or Prison in Minnesota directly to Portland House. Interviews with staff indicate that they would document and notify another agency of any sexual abuse reported to them.

**Standard  
number**

115.264 Staff first responder duties

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) The facility employee handbook page 28-29 outlines procedures for staff to follow as first responders to a sexual abuse incident. Staff also has at their disposal a PREA Folder that specifies actions to take along with a first responder checklist with protocols for actions defined. Interviews with staff confirmed that they were knowledgeable on how to respond to an incident.

b) The only non-security staff member the facility has, confirmed knowledge of how to handle responder duties as well.

**Standard  
Number**

115.265 Coordinated response

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Portland House has created a PREA Folder to assist staff in following specific procedures in the event of a sexual abuse incident. The facility has a Critical Response Team that can be formed in emergency incidents such as sexual abuse. Critical Incident protocols are outlined on page 13 of the facility Resident Handbook.

**Standard number**

115.266 Preservation of ability to protect residents from contact with abusers

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

All employees of Portland House are "At Will" employees and are not covered by any Collective Bargaining Agreement. The agency Employee Handbook page 25 and the facility Employee Handbook page 5 detail reasons for termination including sexual abuse and or sexual harassment or retaliation. Interviews with the Agency Senior Director and the facility Program Director confirm that they would keep alleged perpetrator out of the facility entirely until the investigation is completed. No employees have ever been disciplined for violations of the Agencies' PREA policy.

**Standard number**

115.267 Agency protection against retaliation

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) The agency has a "Whistleblower Policy" outlined on page 27 of its agency Employee Handbook and page 12 of its facility Employee Handbook forbidding retaliation from its employees. Portland House has designated its Program Manager and Program Director to monitor retaliation.

b) The facility is limited in its ability to separate victims from abusers, they would remove resident and staff offenders from the facility.

c) d) Through interviews, staff indicated that they would monitor for retaliation for the entire time the resident is housed in Portland House.

e) f) The Agency Retaliation Policy provides protection for persons reporting retaliation.

**Standard number**

115.271 Criminal and administrative investigations

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

a) Agency policy prompts the facility to investigate or initiate an investigation as soon as possible and immediately in the case of sexual abuse.

b) c) d) e) The Minneapolis Police Department will utilize their "Sexual Assault Unit" with trained forensic investigations per information on their web-site

[http://www.ci.minneapolis.mn.us/police/policy/mpdpolicy\\_10-100\\_10-100](http://www.ci.minneapolis.mn.us/police/policy/mpdpolicy_10-100_10-100)

f) The facility has two employees that have documented completion of training from the National Institute of Corrections "Investigating Sexual Abuse in a Confinement Setting Course" that give them direction for Administrative Investigations.

The remainder of this standard is covered by the Minneapolis Police Departments mandatory adherence to investigative protocols.

There have been no Criminal or Administrative investigations in the facility within the last year.

**Standard number**

115.272 Evidentiary standard for administrative investigations

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Administrative investigative staff confirmed adherence to this standard. There have been no investigations initiated within the last year.

**Standard Number**

115.273 Reporting to residents

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Agency policy 115.73 and the resident Employee Handbook page 33 pertain to all sections of this standard. Interviews with staff confirm that they would keep residents informed of all aspects of an investigation of staff and resident abusers. Both staff and residents indicated that they have an open line of communication with each other.



**Standard Number**

115.276 Disciplinary sanctions for staff

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Agency policy and the agency Employee Handbook page 25 spell out termination for employees involved in sexual abuse, sexual harassment or retaliation. The employees are "At Will" and subject to termination with due cause. Criminal actions of employees will be reported to the Minneapolis Police Department immediately. There have been no employees disciplined for sexual assault or sexual harassment that occurred in Portland House.

**Standard Number**

115.277 Corrective action for contractors and volunteers

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

The facility does not contract with outside entities for supervision and does not utilize any volunteers. The agency has sanctions in place and would remove any abusive volunteer from the facility and report any criminal actions to the Police.

**Standard Number**

115.278 Disciplinary sanctions for residents

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Resident Rule Book page 5 and the Agency policy 115.78 spell out discipline for residents up to and including termination from the program. Portland House does not have any restrictive housing; residents would be terminated from the program and would be remanded to their Probation Officer if under probation. Abusive residents would be criminally charged and transported to Hennepin County Jail. MN Rule 2920.5700 gives guidelines for resident discipline. There have been no residents disciplined for sexual abuse or sexual harassment within the last year.

**Standard Number**

115.282 Access to emergency medical and mental health services

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Policy 115.21 and interviews with staff confirmed that residents would receive prompt medical care. Victims would be immediately transported to a local hospital to receive treatment. Interviews with staff members indicated that they are trained on how to start emergency care and consider the victim's safety first and foremost.

**Standard Number**

115.283 Ongoing medical and mental health care for sexual abuse victims and abusers

■ Not Applicable

The facility does not have medical or mental health staff. Victims would be transported to a local hospital; abusers would be transported to a local jail or returned to prison. The agency will however work closely with the resident's probation officer to ensure adequate treatment is rendered. Policy 115.21 ensures no financial cost to victims.

**Standard Number**

115.286 Sexual abuse incident reviews

■ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- a) Agency policy 115.61 concerns this standard. The agency has a procedure for incidents to be reviewed and has a "Log of PREA Incident" form to utilize for documentation.
- b) Interviews with the Incident Review Team indicated that reviews would be initiated immediately after an investigation was completed.
- c) The Incident Review Team is made up of the Program Director and the Program Manager.
- d) Policy 115.21, the facility form and interviews assure that the review will take into consideration all aspects of this standard.
- e) The facility "Log of PREA Incident" form has areas to document recommendations.

There have been no Incident Reviews at Portland House in the last year.

**Standard Number** 115.287 Data Collection

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Agency policy 115.87 refers to this standard. The agency has instruments to document, collect and publish sexual abuse data from the facility. The agency will provide a report to the U.S. Department of Justice if requested.

**Standard Number** 115.288 Data review for corrective action

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

The agency will follow its policy 115.87 in accordance with this standard. The agency posts its annual report on their web-site <http://www.lssmn.org/portlandhouse/>

**Standard Number** 115.289 Data storage, publication, and destruction

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Policy 115.87 covers this standard. The facility is also governed by MN Rule 2920.4800 concerning data retention and follows Minnesota State Statutes pertaining to data publication. Procedures are in place to redact information if necessary.



**AUDITOR CERTIFICATION:**

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

\_\_Timothy Pippo\_\_\_\_\_10/12/2015\_\_\_\_\_

Auditor Signature

Date