Facility Inspection Report Issued By The Minnesota Department of Corrections Pursuant to MN Statute 241.021, Subdivision 1

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INSPECTION DETAILS FOR: **Koochiching County Jail**

Address: 715 Fourth Street, International Falls, MN 56649

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Six Months **Inspected By:** Lori Schopf – Senior Detention Facility Inspector **Inspected on:** 08/25/2026

Inspection Method: Facility walk-through, staff and inmate interviews, staff and inmate file reviews, facility documentation reviews, and video footage review.

Officials Present During Inspection: Jail Administrator Carrie Geiss

Officials Present for Exit Interview: Jail Administrator Carrie Geiss

Issued Inspection Report to: Jail Administrator Carrie Geiss; Sheriff Perryn Hedlund

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance	Total Compliance With Recommendations	Compliance Rating	Substantial Compliance Result/Criteria
2911	Mandatory	128	125	3	0	97.66%	Compliance rating of 100%
2911	Essential	111	108	3	0	97.30%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 10/01/2026 **Ends On:** 03/31/2027 **Facility Type:** Jail

Placed on Biennial Status: No **Biennial Status Annual Compliance Form Due On:**

Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** Koochiching County Sheriff's Office

Special Conditions:

APPROVED CAPACITY DETAILS *[*Operational Capacity is calculated as a percent of Approved Capacity beds.]*

Bed Type	Gender	Approved Capacity	Effective Date	%Operating Capacity	Operational Capacity	Bed Details	Conditions
Secure	Coed	40	3/11/2026	85	34.00	The new facility has a designed capacity of 43 beds, with an approved capacity of 40 beds. The facility's operational capacity is 34 beds, which is 85% of the approved capacity. The operational capacity was set based on the facility's design and degrees of separation.	

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance **Total: 3**

1. 2911.4500 SUPERVISION OF MEAL SERVING.

Meals shall be served under the direct supervision of staff.

Inspection Findings:

A review of video footage identified that staff did not directly supervise meal delivery.

Corrective Actions:

The facility must develop and implement a plan to ensure staff directly supervise meal delivery in the housing units as required. Staff responsible for meal delivery must be retrained on the requirement. Submit the plan and documentation of completed staff retraining to the inspector.

Response Needed By: 09/30/2026

2. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 4. Counting.

A facility shall have a written policy describing the system of counting inmates. Formal counts shall be completed with an official entry made in the daily log at least once each eight hours. The facility shall maintain a system that identifies the whereabouts of all inmates in custody and includes a system of accountability for inmates approved for temporary absences from their assigned housing units. A written policy and procedure shall provide that staff regulate inmate movement.

Inspection Findings:

A review of records from August 18 through August 21 identified that staff did not document 8 formal inmate counts, which are required every eight hours. Documentation was missing for the following dates and times: 8/18/26 10pm; 8/19/26 2pm, 6pm, 10pm; 8/20/26 2pm, 10pm; 8/21/26 2pm, 10pm.

Corrective Actions:

The facility plans to conduct audits of formal counts to ensure counts are conducted every eight hours and properly documented. Submit monthly audits for a period of three months to the Inspector to demonstrate ongoing compliance.

Response Needed By: 09/04/2026

3. 2911.5550 LOCKS AND KEYS. Subpart 3. Regular testing.

Locks to security doors or gates shall be tested for proper function at least weekly to ensure proper operation.

Inspection Findings:

A review of records from April through August identified seven weeks in which lock testing of security doors was not documented.

Corrective Actions:

The facility must ensure that weekly lock testing is conducted and properly documented. Copies of completed weekly inspection records must be submitted to the inspector at the end of each month for a period of three months. The inspector will continue to monitor for compliance.

Response Needed By: 09/30/2026

Chapter 2911 - Essential Rules Not In Compliance **Total: 3**

1. 2911.2800 ADMINISTRATIVE SEGREGATION. Subpart 1. Administrative segregation.

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

Inspection Findings:

A review of four inmate records identified that the required seven-day administrative reviews were not documented for an inmate who was placed in special management.

Corrective Actions:

The facility must develop and implement a plan to ensure seven-day administrative reviews are completed and documented for inmates placed in special management. Submit the plan to the inspector.

Response Needed By: 09/30/2026

2. 2911.4900 SECURITY INSPECTION.

The facility shall have a written policy and procedure to require the facility administrator or designee to inspect all areas within the security perimeter, and equipment at least monthly and initiate corrective action if needed.

Inspection Findings:

A review of records from April through August identified that monthly security inspections were not documented for April, May, and July.

Corrective Actions:

The facility must ensure that monthly security inspections are conducted and properly documented. Copies of completed monthly inspection records must be submitted to the inspector at the end of each month for a period of three months. The inspector will continue to monitor for compliance.

Response Needed By: 09/30/2026

3. 2911.7300 FIRE INSPECTION. Subpart 4. Weekly inspection.

There shall be an applicable fire code and safety inspection of the facility at least weekly by a designated staff member.

Inspection Findings:

A review of records from April through August identified seven weeks in which fire code and safety inspections were not documented.

Corrective Actions:

The facility must ensure that weekly fire and safety inspections are conducted and properly documented. Copies of completed weekly inspection records must be submitted to the inspector at the end of each month for a period of three months. The inspector will continue to monitor for compliance.

Response Needed By: 09/30/2026

INSPECTION COMMENTS

In six months, your annual inspection will be completed.

JJDPA Compliance

On August 25, 2026, a Juvenile Justice and Delinquency Prevention Act (JJDPA) audit was conducted.

A review of DOC Portal data indicated that 1 juvenile(s) was/were processed in the Koochiching County Jail from October 1, 2025, to August 25, 2026. A review of the data identified zero violations.

The three core requirements that were reviewed are the Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jails and Lockups (Jail Removal), and Site and Sound separation.

DSO: No violations were identified for the facility holding status offenders in the facility.

Jail Removal: No violations were identified for the jail removal requirements.

Sight and Sound Separation: The facility design and policies allow for sight and sound separation that meet JJDPA requirements.

The facility does not participate in any “Scared Straight” programs for any juveniles that are under public authority.

Based on the documentation reviewed, no violations of the JJDPA were identified during the inspection of Koochiching County Jail.

Report completed By: Lori Schopf – Senior Detention Facility Inspector **Signature:**