



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

Inspection and Enforcement Unit, 1450 Energy Park Drive, Suite 200, St.Paul MN 55108  
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**INSPECTION DETAILS FOR:**

**Le Sueur County Jail**

**Address:** 435 E Derrynane Street, SUITE 1100, Le Center, MN 56057

**MN Governing Rule:** 2911 Local Adult Detention Facilities

**Inspection Type:** Biennial **Inspected By:** Rachel Dotseth – Detention Facility Inspector **Inspected on:** 03/31/2025 to 03/31/2025

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

**Officials Present During Inspection:** Jail Administrator Jeremy Swenson

**Officials Present for Exit Interview:** Jail Administrator Jeremy Swenson

**Issued Inspection Report to:** Jail Administrator Jeremy Swenson; Sheriff Brett Mason; County Administrator Joe Martin; Regional Manager Dayna Burmeister

**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	127	123	4	0	96.85%	Compliance rating of 100%
2911	Essential	102	102	0	0	100.00%	Compliance rating of 90%

**TERMS OF OPERATION**

**Authority to Operate:** approval **Begins On:** 05/01/2025 **Ends On:** 04/30/2027 **Facility Type:** Jail  
**Placed on Biennial Status:** Yes **Biennial Status Annual Compliance Form Due On:** 04/30/2026  
**Delinquent Juvenile Hold Approval:** 24 hrs exclusive of weekends and holidays **Certificate Holder:** Le Sueur County Sheriff's Office  
**Special Conditions:** Mailed on 4/9/25  
 Amended 5/13/25

**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	80	8/16/2019	90	72.00	None.	

**RULE COMPLIANCE DETAILS**

**Chapter 2911 - Mandatory Rules Not In Compliance** **Total: 4**

- 2911.2525 ADMISSIONS. Subpart 3. Orientation to rules and services.

A facility shall develop a written policy and procedure that provides: A. a method for all newly admitted inmates to receive orientation information in a manner the inmates can understand; and B. documentation by a statement that is signed and dated by the inmate that the inmate completed orientation.

**Inspection Findings:**

The facility completes orientation on the kiosks, which does not allow the inmate to sign and date that they have received orientation and understand it.

**Corrective Actions:**

**The facility changed their process to comply with the rule allowing inmates to sign and date that they received orientation at booking and in a method they can understand. The facility submitted the new process and forms to the inspector, no further action is needed.**

**Response Needed By: 06/30/2025**

2. 2911.3700 EMERGENCIES AND UNUSUAL OCCURRENCES. Subpart 2. Quarterly review of emergency procedures.

There shall be a review of emergency procedures once every three months. The review 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; E. specification of evacuation routes and procedures; and F. that the review be documented and require signature or initialing by all staff.

**Inspection Findings:**

Documentation reviewed for 2024 showed that 4 staff did not complete the first quarter, 4 staff did not complete the second quarter, 4 staff did not complete the third quarter, and 2 staff did not complete the fourth quarter of emergency reviews. Documentation reviewed for 2025 showed that 2 staff did not complete the first quarter of emergency reviews.

**Corrective Actions:**

**Ensure that all staff are reviewing the emergency procedures quarterly, signing, and initialing. This shall be documented to include all support staff, ie. kitchen and medical. The inspector will continue to monitor for compliance.**

**Response Needed By: 06/30/2025**

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:**

There was no documentation showing that locks to security doors and gates were tested weekly to ensure proper operation.

**Corrective Actions:**

**The facility developed a system after the inspection to ensure and document that all locks on security doors and gates are being tested weekly. The Inspector will continue to monitor for compliance.**

**Response Needed By: 06/30/2025**

4. 2911.7000 TUBERCULOSIS SCREENING, SEPARATION OF INMATES WITH INFECTIOUS DISEASE. Subpart 2. Screening.

Employees and inmates shall be screened for tuberculosis according to Minnesota Statutes, section 144.445. The Department of Corrections adopts by reference Minnesota Department of Health requirements for tuberculosis screening of employees and inmates in facilities governed by this chapter.

**Inspection Findings:**

The facility stated they do not test staff for tuberculosis.

**Corrective Actions:**

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**The facility shall ensure that all staff are screened for tuberculosis annually. The Inspector received the plan and will continue to monitor for compliance.**

**Response Needed By: 06/30/2025**

### INSPECTION COMMENTS

During the inspection of the Le Sueur County Jail the inspector made three recommendations to the Jail Administrator. The first recommendation was to add the methods of instruction to the facility training plan to meet all requirements of the rule, the Jail Administrator added this during the inspection. The second recommendation was to update the initial medical screen form to include questions specific to: dental emergencies, other infectious diseases; Use of drugs; mode of use, frequency used, and history of problems that may have occurred after ceasing use, and other health problems designated by the health authority. The Jail Administrator updated the medical screen form to reflect these recommendations, after the inspection. The third recommendation was to clearly label the training courses that meet the requirements for the for the forty hours of new staff training prior to being independently assigned.

The facility will remain on biennial inspection.

### JJDPA Compliance

On March 31, 2025, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The Le Sueur County Jail has a 24-hold approval. The three core requirements included in the audit are the Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups (Jail Removal), and Sight and Sound Separation.

The Le Sueur County Jail held or processed zero (0) juveniles during the federal fiscal year from October 1, 2024, to the date of this inspection. 100 percent of the federal year juvenile data was reviewed. The findings are as follows:

DSO: No violations of the facility holding status offenders in the jail.

Jail Removal: No violations for the jail removal standard.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation.

The facility does not participate in any "Scared Straight" programs for any youth that are under public authority.

Based on the documentation reviewed, zero (0) violations of the JJDP Act were determined during the Le Sueur County inspection.

**Report completed By:** Rachel Dotseth – Detention Facility Inspector

**Signature:**

