



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:

McLeod County Jail

Address: 801 Tenth Street E, Glencoe, MN 55336

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Jake Nelson – Senior Detention Facility Inspector **Inspected on:** 02/05/2025

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

Officials Present During Inspection: Jail Administrator Will Feltmann

Officials Present for Exit Interview: Jail Administrator Will Feltmann

Issued Inspection Report to: Jail Administrator Will Feltmann; Sheriff Tim Langenfeld; County Administrator Sheila Murphy; 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	126	123	2	1	98.41%	Compliance rating of 100%
2911	Essential	100	99	1	0	99.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 04/01/2025 **Ends On:** 03/31/2027 **Facility Type:** Jail

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 03/31/2026

Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** McLeod County Sheriff's Office
801 10th Street E
Glencoe, MN 55336

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	59	5/21/2018	85	50.15	None.	

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance**Total: 2**

1. 2911.2525 ADMISSIONS. Subpart 1. Policies and procedures.

A facility shall have written policies and procedures for processing new inmates to the facility to include, at a minimum, the following: A. obtaining and documenting available emergency medical information within two hours of admission; B. verification of court commitment papers or other legal documentation of detention. Verification shall include checking the date of admission, duration of confinement, and specific charges; C. a search of the inmate and the inmate's possessions; D. inventory and storage of the inmate's personal property; E. initial medical screening to include an assessment of the inmate's health status, including any medical or mental health needs; F. telephone calls made by the inmate during the booking and admission process and prior to assignment to other housing areas; G. shower and hair cleansing; H. issue of bedding, clothing, and personal hygiene items according to the rule requirements applicable to the anticipated length of stay of the inmate; I. photographing and fingerprinting including notation of identifying marks or unusual characteristics such as birthmarks or tattoos; J. interviewing to obtain the following identifying data: (1) name and aliases of person; (2) current address, or last known address; (3) health insurance information; (4) gender; (5) age; (6) date of birth; (7) place of birth; (8) race; (9) present or last place of employment; (10) emergency contact including name, relation, address, and telephone number; and (11) additional information concerning special custody requirements or special needs; K. initial classification of the inmate and assignment to a housing unit; L. an assigned booking number; and M. Social Security number, driver's license number, or state identification number, if available.

Inspection Findings:

A review of ten files showed two inmates who did not have the intake mental health screening completed accurately. One inmate was referred for mental health services, when the scoring did not require them to be. The other was not referred, when the scoring required them to be.

Corrective Actions:

All staff must be retrained on properly completing the intake mental health screening. Send documentation of training completion to the Department of Corrections by April 1, 2025.

Response Needed By: 04/01/2025

2. 2911.6600 DELIVERY. Subpart 16. Keep-on-person medications.

There shall be a policy and procedure for keep-on-person medications that provides for: A. medications identified and approved by the health authority as appropriate for self-administration and storage in an inmate's cell; B. procedures for an inmate's overdose of the medication; C. consequences if too much medication is found in the inmate's possession; D. how the distribution of medications under this subpart is going to be documented; and E. nonprescription medications, if any, that are available to inmates through vending machines or commissary. Keep-on-person medications shall be documented for each inmate.

Inspection Findings:

The facility's policy does not include all elements required in the Rule. Specifically, Item B.

Corrective Actions:

The facility must include all elements of the Rule in their policy. Send documentation of the updated policy to the Department of Corrections by April 1, 2025.

Response Needed By: 04/01/2025**Chapter 2911 - Essential Rules Not In Compliance****Total: 1**

1. 2911.2800 ADMINISTRATIVE SEGREGATION. Subpart 4. Policy.

Written policy and procedure shall provide that the status of inmates in administrative segregation is reviewed every seven days. These policies shall provide: A. that the review is documented and placed in the inmate's file; B. that the inmate in administrative segregation receive visits from the facility administrator or designee a minimum of once every seven days as a part of the administrative review process; and C. that the review process that is used to release an inmate from administrative segregation is specified.

Inspection Findings:

The facility only had one inmate on administrative segregation at the time of the inspection. A review of the inmate's file showed that the inmate had not received visits from the facility administrator every 7-days, as part of the administrative review process.

Corrective Actions:

The facility must develop an administrative review process that includes visits from the facility administrator, or designee, every 7-days. Send documentation of the updated process to the Department of Corrections by April 1, 2025.

Response Needed By: 04/01/2025

Chapter 2911 - Mandatory Rules In Compliance With Recommendations

Total: 1

1. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 5. Well-being.

A facility shall have a system providing for well-being checks of inmates. A written policy and procedure shall provide that all inmates are personally observed by a custody staff person at least once every 30 minutes. Thirty-minute checks should be staggered. If a well-being check does not occur due to an emergency, it must be documented in the jail log and have supervisory review and approval. More frequent observation is required for those inmates of a special need classification who may be harmful to themselves. Examples of inmates of a special need classification include those classified as potentially suicidal, or as mentally ill, or those experiencing withdrawal from drugs or alcohol.

Inspection Findings:

A review of well-being checks on three different days, in three different housing units, showed two well-being checks completed at too fast a pace to adequately observe the inmate's well-being.

Corrective Actions:

The facility has a well-established audit system in place. The facility shall continue this audit system, and the Department of Corrections will continue to monitor well-being check compliance through random facility visits.

Response Needed By:

INSPECTION COMMENTS

The facility has approximately a half-dozen cell doors that need glass repairs. The damaged glass is not considered a safety risk at this time. The County should begin exploring replacements before the damage becomes a potential safety risk, and those cells or units cannot be occupied.

The facility shall remain on biennial inspections.

JJDPA Compliance**Juvenile Compliance Monitoring:**

On February 5, 2025, a Juvenile Justice and Delinquency Prevention Act audit was conducted. The McLeod County Jail has received a "Rural Exception" to the Juvenile Justice and Delinquency Prevention Act (JJDP). This allows the facility to hold a delinquent juvenile up to 24 hours, excluding weekends and holiday. There are three core requirements that are looked at during our facility review. Those core requirements are Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups (Jail Removal), and Sight and Sound separation.

According to the DOC Portal System, the McLeod County Jail held or processed zero (0) juveniles for the Federal Fiscal year 2024. I reviewed approximately 100 percent of the juvenile data for this time period, and approximately 100 percent of the files. The findings are as follows:

DSO: There were no violation of the DSO requirements.

Jail Removal: According to data, all youth were removed within the 24-hour time frame as required by the JJDP Act.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation. This includes the route taken to Court holding. Policies and the court schedule also indicate proper sight and sound separation are maintained. This was verified on previous visits.

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

Based on the documentation that I reviewed, there were no violations of the JJDP act based on the McLeod County juvenile holding data for the current Federal Fiscal year.

Report completed By: Jake Nelson – Senior Detention Facility Inspector

Signature:

