



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
Telephone: 651-361-7146 Fax: 651-642-0314 Email: ie-support.doc@state.mn.us

INSPECTION DETAILS FOR:

Mille Lacs County Jail

Address: 640 Third Street SE, Milaca, MN 56353

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Annual **Inspected By:** Jen Pfeifer – Senior Detention Facility Inspector **Inspected on:** 04/23/2025

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 Dustin Naumann

Officials Present for Exit Interview: Jail Administrator Dustin Naumann

Issued Inspection Report to: Jail Administrator Dustin Naumann; Sheriff Kyle Burton; County Administrator Dillon Hayes; Regional Manager Jacob McLellan

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	3	0	97.62%	Compliance rating of 100%
2911	Essential	100	96	4	0	96.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 07/01/2025 **Ends On:** 06/30/2026 **Facility Type:** Jail
Placed on Biennial Status: No **Biennial Status Annual Compliance Form Due On:**
Delinquent Juvenile Hold Approval: 6 hrs **Certificate Holder:** Mille Lacs 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	120	6/2/2010	85	102.00	None.	

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance**Total: 3****1. 2911.1000 TRAINING PLAN.**

A facility administrator or designee shall develop and implement a training plan for the orientation of new employees and volunteers and provide for continuing in-service training programs for all employees and volunteers. Training plans shall be documented and describe curriculum, methods of instruction, and objectives. In-service training plans shall be prepared annually and shall provide documentation indicating that training for individual employees has taken into consideration their length of service, position within the organization, and previous training completed.

Inspection Findings:

The training plan does not include a description of the curriculum.

Corrective Actions:

The facility shall include the requirement for the description of curriculum in the training plan and submit to the inspector for approval within 30 days of receipt of this report.

Response Needed By: 07/31/2025**2. 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:

Weekly lock inspections are not being conducted every week. Weekly documentation of these inspections was not completed for all weeks in the months of December 2024 and February and March of 2025.

Corrective Actions:

The facility shall ensure that the required weekly lock inspections are being completed. The facility shall submit completed lock inspections to the inspector on the last day of every month beginning June 30, 2025, for 6 months. The inspector will continue to monitor for compliance.

Response Needed By: 06/30/2025**3. 2911.7200 HOUSEKEEPING, SANITATION, AND PLANT MAINTENANCE. Subpart 1. General.**

A facility shall have a policy and procedure that provides that the facility shall: A. be kept in good repair to protect the health, comfort, safety, and well-being of inmates and staff; B. document weekly sanitation inspections; and C. document deficiencies from the weekly sanitation inspection, if any, have been ordered.

Inspection Findings:

Weekly sanitation inspections are not being conducted every week. Weekly documentation of these inspections was not completed for all weeks in the months of December 2024 and February and March of 2025.

Corrective Actions:

The facility shall ensure that the required weekly sanitation inspections are being completed. The facility shall submit completed sanitation inspections to the inspector on the last day of every month beginning June 30, 2025, for 6 months. The inspector will continue to monitor for compliance.

Response Needed By: 06/30/2025**Chapter 2911 - Essential Rules Not In Compliance****Total: 4****1. 2911.0330 APPROVED CAPACITY. Subpart 2. Approved bed capacity.**

Approved bed capacity, excluding holding areas and beds designed for disciplinary or administrative segregation purposes, shall be based on the following criteria: A. single occupancy cells shall provide a minimum of 70 square feet of floor space per inmate; B. single occupancy cells or detention rooms in facilities used for detention or confinement of inmates prior to May 15, 1978, shall provide a minimum of 50 square feet of floor space per inmate; C. dormitories shall provide a minimum of 60 square feet of floor space per inmate; and D. double occupancy cells shall provide a minimum of 70 square feet of floor space.

Inspection Findings:

Four cells in the intake area of the facility, do not meet the minimum requirement of 70 square feet of floor space per inmate, as required in this rule part.

Corrective Actions:

The facility shall discontinue use of these four cells for inmate housing until the requirements in this rule part are met.

Response Needed By: 06/30/2025

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:

The required monthly security inspection was not completed in February 2025.

Corrective Actions:

The facility shall ensure that the required monthly security inspections are being completed. The facility shall submit completed security inspections to the inspector on the last day of every month beginning June 30, 2025, for 6 months. The inspector will continue to monitor.

Response Needed By: 06/30/2025

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:

Weekly fire inspections are not being conducted every week. Weekly documentation of these inspections was not completed for all weeks in the months of December 2024 and February and March of 2025.

Corrective Actions:

The facility shall ensure that the required weekly fire inspections are being completed. The facility shall submit completed fire inspections to the inspector on the last day of every month beginning June 30, 2025, for 6 months. The inspector will continue to monitor for compliance.

Response Needed By: 06/30/2025

4. 2911.7400 POLICIES AND PROCEDURES TO DETECT DETERIORATION OF BUILDING AND EQUIPMENT.

The facility administrator or designee shall have policies and procedures designed to detect building and equipment deterioration, safety hazards, and unsanitary conditions. Policies and procedures shall include requirements that facility staff report unsanitary and unsafe conditions as well as physical plant and equipment repairs and replacement needs; and documentation that appropriate work orders or requests for budget resources to effect needed repair, replacement, or corrections have been made.

Inspection Findings:

The facility has a procedure for the identification of building and equipment deterioration. The shower floors, specifically, B100, F100, and J100 are in need of repair.

Corrective Actions:

Immediate attention is required to address the shower floors to ensure these areas meet safety and hygiene standards. The inspector will continue to monitor for compliance to ensure that needed preventative maintenance is being completed.

Response Needed By: 06/30/2025

INSPECTION COMMENTS**Physical Plant:**

The intake area is the highest traffic area of the jail. The intake area has 5 cells, but only one with a toilet and sink. This increases movement and slows productivity in the area as staff are required to bring inmates to the bathroom as needed. Four of the five cells do not meet square footage requirements for living space or bed requirements.

Due to the age and deterioration of the building, it is recommended that the County address the long-term needs of the inmate population.

The facility will remain on annual inspections.

JJDPA Compliance

On April 24, 2025, a Juvenile Justice and Delinquency Prevention (JJDP) Act audit was conducted. The Mille Lacs County jail has 6-hour hold approval. This allows the facility to hold a delinquent juvenile up to 6 hours, excluding weekends and holidays. The three core requirements that are looked at during our facility review are Deinstitutionalization of Status Offenders (DSO), Removal of Juveniles for Adult Jail and Adult Lockups (Jail Removal), and Sight and Sound separation.

According to facility records, the Mille Lacs County Jail held or processed one (1) juvenile between October 1, 2024, and the day of the inspection.

DSO: No violations of the facility holding status offenders in the jail were found. Upon review of the files, indication was that juveniles that were brought into the facility were indeed there for delinquent offenses. No juveniles were brought into the secure portion of the jail and were processed in the facility lobby.

Jail Removal: There was no violation for this core requirement.

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.

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

Based on the documentation reviewed, the facility has no violations of the JJDP act.

Report completed By: Jen Pfeifer – Senior Detention Facility Inspector

Signature:

