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: Pine County Detention Center

Address: 635 Northridge Drive NW, SUITE 130, Pine City, MN 55063

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Rachel Dotseth – Detention Facility Inspector **Inspected on:** 03/18/2026

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: Assistant Jail Administrator Ryan Thompson; Jail Administrator Rodney Williamson

Officials Present for Exit Interview: Assistant Jail Administrator Ryan Thompson; Jail Administrator Rodney Williamson

Issued Inspection Report to: Assistant Jail Administrator Ryan Thompson; Jail Administrator Rodney Williamson; Sheriff Jeff Nelson

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	119	7	0	94.44%	Compliance rating of 100%
2911	Essential	101	99	2	0	98.02%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 05/01/2026 **Ends On:** 04/30/2028 **Facility Type:** Jail

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 04/30/2027

Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** Pine 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	131	6/15/2005	85	111.35	None.	

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance Total: 7

1. 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 has a procedure requiring all inmates to receive orientation during the admission process. However, a review of five inmate files found that three did not contain the documentation of a statement signed and dated by the inmate that the inmate completed and understands orientation.

Corrective Actions:

The facility implemented a new procedure at the beginning of 2026. The facility shall provide refresher training to correctional staff on completing and filing the orientation acknowledgment form. Once all staff have received the refresher training, submit it to the inspector for review. The inspector shall continue to monitor for compliance.

Response Needed By: 04/30/2026

2. 2911.2525 ADMISSIONS. Subpart 4. Inmate personal property.

A facility shall have a written policy and procedure that: A. provides for the itemized inventory and secure storage of all personal property of a newly admitted inmate, including money and other valuables; B. specifies any personal property an inmate may retain in the inmate's possession; and C. provides that the inmate shall sign a receipt for all property held until release.

Inspection Findings:

The facility has a procedure for inventorying all inmate personal property during the admission process. However, a review of five inmate files found that all five did not contain the documentation of a signed receipt for all property held until release.

Corrective Actions:

The facility shall provide refresher training to correctional staff on completing and filing the property acknowledgment form. Once all staff have received the refresher training, submit to the inspector for review. The inspector shall continue to monitor for compliance.

Response Needed By: 04/30/2026

3. 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 showed that two staff did not complete the quarter two reviews for 2025.

Corrective Actions:

The facility has implemented a revised program for better tracking of quarterly reviews. The inspector will continue to monitor for compliance.

Response Needed By:

4. 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 facility records indicates that documentation for weekly lock testing was missing for the weeks of February 8, 15, and 22, 2026.

Corrective Actions:

Prior to the inspection, the facility corrected this issue. The inspector will continue to monitor for compliance.

Response Needed By:

5. 2911.6200 MEDICAL AND DENTAL RECORDS. Subpart 1a. Medical and dental records.

A facility shall record complaints of illness or injury and actions taken. Medical or dental records are maintained on inmates under medical or dental care. Records shall include: A. the limitations and disabilities of the inmate; B. instructions for inmate care; C. orders for medication including stop date; D. any special treatment or diet; E. activity restriction; and F. times and dates when the inmate was seen by medical personnel. Medical and dental records shall be available to staff for consultation in case of illness and for recording administration of medications.

Inspection Findings:

According to Minnesota Statute 241.021, Subdivision 4f(a), “Correctional facilities licensed by the commissioner shall administer to confined and incarcerated persons the same medications prescribed to those individuals prior to their confinement or incarceration.”

Due to the absence of medication verification documentation, the inspector was unable to confirm whether the medications that were denied or administered were consistent with those prescribed to the inmate prior to incarceration.

Corrective Actions:

This issue was corrected on-site. The inspector reviewed additional inmate files and confirmed that the required documentation was properly completed. The inspector will continue to monitor for compliance.

Response Needed By:

6. 2911.6600 DELIVERY. Subpart 5. Recording deliveries.

A person responsible for delivering medications shall do so according to orders, and record the delivery of medications in a manner approved by the health care authority.

Inspection Findings:

Counts were accurate, but staff were not documenting the correct amount given and the number of medications remaining, per facility procedure.

Corrective Actions:

The facility is in the process of conducting a medication refresher training for staff. Once all staff have been trained, submit the documentation to the inspector for review. The inspector will continue to monitor for compliance.

Response Needed By: 04/30/2026

7. 2911.7200 HOUSEKEEPING, SANITATION, AND PLANT MAINTENANCE. Subpart 4. Plan.

A facility shall establish a plan for the daily inspection of housekeeping, sanitation, and plant maintenance.

Inspection Findings:

The facility was not completing daily inspections of housekeeping, sanitation, and plant maintenance.

Corrective Actions:

The facility has implemented a new plan and procedure to ensure daily inspections of housekeeping, sanitation, and plant maintenance occur. The inspector will continue to monitor for compliance.

Response Needed By:

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

1. 2911.1300 CUSTODY STAFF TRAINING.

A facility shall have a written policy and procedure that provides that all custody staff receive 120 hours of orientation and training during the first year of employment. Forty of these hours are completed prior to being independently assigned to a particular post. All persons in this category are given an additional 16 hours of training each subsequent year. At a minimum, training completed before independent assignment to a particular post shall include: A. security procedures; B. supervision of inmates; C. signs of suicide risk and suicide precautions; D. vulnerable inmates; E. response to resistance regulations and tactics; F. report writing; G. inmate rules and regulations; H. rights and responsibilities of inmates; I. fire and emergency procedures; J. key control; K. interpersonal relations and communication skills; L. diversity training; M. distribution of medications; N. right to know; and O. blood-borne pathogens and communicable diseases.

Inspection Findings:

The Training Sergeant was unable to provide documentation verifying that newly hired custody staff receive training in N. Right to Know. The Training Sergeant also stated that the facility does not have a designated training course specific to this training.

Corrective Actions:

Upon identification of this finding, the facility has implemented a training module to ensure all newly hired custody staff complete the required "Right to Know" training. Once the staff has completed this training, submit the documentation to the inspector. The inspector will continue to monitor for compliance.

Response Needed By: 04/30/2026

2. 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 facility records indicates that weekly fire inspections were missing for the weeks of February 8, 15, and 22, 2026.

Corrective Actions:

Prior to the inspection, the facility corrected this issue. The inspector will continue to monitor for compliance.

Response Needed By:

INSPECTION COMMENTS

The jail will remain on biennial inspections.

According to Minnesota Statute 241.89, Subdivision 2(A1), "The head of each correctional facility shall ensure that every woman incarcerated at the facility is tested for pregnancy on or before day 14 of incarceration, if under 50 years of age, unless the inmate refuses the test."

Due to the absence of a refusal form, the inspector was unable to confirm whether the inmate was offered or denied a pregnancy test on or before day 14 of incarceration.

This issue was corrected on-site. The inspector reviewed additional inmate files and confirmed that the required documentation was properly completed on other female inmates. The inspector will continue to monitor for compliance.

Minnesota Rule 2911.2800 Subdivision 4, "Written policy and procedure shall provide that the status of inmates in administrative segregation is reviewed every seven days. These policies shall provide: That the review is documented and placed in the inmate's file; that the inmate in administrative segregation receives visits from the facility administrator or designee a minimum of once every seven days as a part of the administrative review process; and that the review process that is used to release an inmate from administrative segregation is specified."

The facility has a policy and procedure that provides that the status of inmates in administrative segregation is reviewed every seven days. A review of inmate files showed that one review was completed at the eight-day mark. This was discussed during the inspection, and the facility has updated its review process to ensure reviews happen within the 7-day timeframe. The Inspector will continue to monitor for compliance.

JJDPA Compliance

On March 17, 2026, a Juvenile Justice and Delinquency Prevention Act (JJDPA) audit was conducted.

A review of DOC Portal data indicated that 2 juvenile(s) was/were processed in the Pine County Jail from October 1, 2024, to March 17, 2026. A review of the data identified zero violations. The facility has been given a rural exception.

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 Pine County Jail.

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