



## 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:

#### Volunteers Of America Regional Corrections Center

**Address:** 2825 E Lake Street, Minneapolis, MN 55406

**MN Governing Rule:** 2920 Adult Community-Based Residential Correctional Facility

**Inspection Type:** Biennial **Inspected By:** Lauren Bizzotto – Detention Facility Inspector **Inspected on:** 06/12/2025

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

**Officials Present During Inspection:** Director Chris Doege; Program Manager Carlin Koehler

**Officials Present for Exit Interview:** Director Chris Doege; Program Manager Carlin Koehler

**Issued Inspection Report to:** Director Chris Doege; Program Manager Carlin Koehler

### RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance	Total Compliance With Recommendations	Compliance Rating	Substantial Compliance Result/Criteria
2920	Mandatory	25	24	1	0	96.00%	Compliance rating of 100%
2920	Essential	81	78	3	0	96.30%	Compliance rating of 90%

### TERMS OF OPERATION

**Authority to Operate:** approval **Begins On:** 09/01/2025 **Ends On:** 08/31/2027 **Facility Type:** Adult Community-Based Residential Correctional Facility

**Placed on Biennial Status:** Yes **Biennial Status Annual Compliance Form Due On:** 08/31/2026

**Delinquent Juvenile Hold Approval:** no approval **Certificate Holder:** Volunteers of America

**Special Conditions:** None.

#### 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
Adult Community-Based Residential Correctional Facility	Male	58	8/1/2018	100	58.00	None.	

### RULE COMPLIANCE DETAILS

**Chapter 2920 - Mandatory Rules Not In Compliance****Total: 1****1. 2920.3900 MANTOUX TEST OR CHEST X RAY REQUIRED.**

It is mandatory that staff and residents be screened for tuberculosis according to Minnesota Statutes, section 144.445.

**Inspection Findings:**

One of three resident records reviewed did not have an updated tuberculosis screening.

**Corrective Actions:**

**Within 30 days of receipt of this report, ensure all residents have an updated tuberculosis screening. This will be monitored during site visits.**

**Response Needed By: 08/29/2025****Chapter 2920 - Essential Rules Not In Compliance****Total: 3****1. 2920.4400 ADMISSION FORM.**

The adult community-based residential correctional facility referral form on each client to be admitted into residency includes at a minimum: A. name; B. address; C. date of birth; D. sex; E. reason for referral; F. whom to notify in case of emergency; G. date information gathered; H. signature of both interviewee and interviewer gathering information; I. name of referring agency of committing authority; J. special medical problems or needs; K. legal status, including jurisdiction, length, and conditions of placement; L. financial arrangements for medical care; M. financial arrangements for placement; N. present medications; O. driver's license or Minnesota state identification number; and P. vehicle title and vehicle insurance, if applicable.

**Inspection Findings:**

The facility does not have a referral form that including all elements of this Rule part.

**Corrective Actions:**

**Within 30 days of receipt of this report, the facility must develop a referral form that includes all elements of this rule part and submit it to the Department of Corrections for review.**

**Response Needed By: 08/29/2025****2. 2920.6500 DISASTERS AND EMERGENCIES; PLANS AND PROCEDURES. Subpart 2. Reporting of unusual occurrences.**

Incidents of an unusual or serious nature must be reported within ten days of the incident to the Department of Corrections in a manner required by the department. Incidents of an unusual or serious nature include such incidents as: A. attempted suicide; B. suicide; C. homicide; D. death, by means other than suicide or homicide; E. serious injury or illness incurred subsequent to placement including incidents resulting in hospitalization for medical care or hospitalization associated with mental health needs; F. incidents of fire requiring medical treatment of staff or residents or a response by a local fire authority; G. riot; H. assaults of one resident by another; I. assaults of staff by resident; J. occurrences of infectious diseases and action taken relative to same when a medical authority has determined that the inmate must be isolated from other inmates; and K. sexual misconduct between residents or between staff and a resident.

**Inspection Findings:**

The facility's administration team stated that they have not reported unusual occurrences to the Department of Corrections.

**Corrective Actions:**

**Immediately upon receiving this report, the facility must submit unusual occurrences in accordance with the regulations outlined in this rule part. Within 30 days of receipt of this report, the facility must submit all unusual occurrences that occurred from the beginning of calendar year 2024 to the present date.**

**Response Needed By: 08/29/2025****3. 2920.6600 BUILDINGS AND GROUNDS. Subpart 1. General.**

Building and grounds must be clean and in good repair. There must be a maintenance budget for ongoing repair and replacement of equipment for the facility.

**Inspection Findings:**

The carpet is dirty and in poor condition in all resident rooms that have not been recently updated with new carpet.

**Corrective Actions:**

within 30 days of receiving this report submit a plan for updating the remaining rooms with new carpet.

**Response Needed By: 08/29/2025**

**INSPECTION COMMENTS**

The facility will remain on biennial inspections.

**JJDPA Compliance**

N/A

**Report completed By:** Lauren Bizzotto – Detention Facility Inspector

**Signature:**

