



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:

Address: 3850 200th Avenue, Breckenridge, MN 56520

MN Governing Rule: 2960 Children's Residential Facility

Inspection Type: Annual **Inspected By:** Stephanie Kantola – Detention Facility Inspector **Inspected on:** 11/19/2025 to 11/20/2025

Inspection Method: Onsite scheduled biennial inspection.

Officials Present During Inspection: Executive Director Joanna Etzler

Officials Present for Exit Interview: Executive Director Joanna Etzler

Issued Inspection Report to: Executive Director Joanna Etzler

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	350	317	33

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 01/01/2026 **Ends On:** 12/31/2026 **Facility Type:** Non-Secure Juvenile Residential Facility

Placed on Biennial Status: No **Biennial Status Annual Compliance Form Due On:**

Delinquent Juvenile Hold Approval:

Certificate Holder: Valley-Lake Boy's Home , Inc.
PO Box 411
Breckenridge, MN 56520

Special Conditions: Inspection report reviewed with facility on 01/21/2026

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	Pre 96 LTSR	Post 96 LTSR	Bed Details	Conditions
Restrictive Technique Services	Male	14	11/1/2001	100	14.00	0	0	None.	

RULE COMPLIANCE DETAILS

Chapter 2960 - Mandatory Rules Not In Compliance

Total: 33

- 2960.0040 STATEMENT OF INTENDED USE. Subpart 1.

The license holder must submit a statement of intended use as part of the license application. The statement of intended use must, at a minimum, meet the requirements in items A to F: A. state the license holder's expertise and qualifications to provide the services noted in the program description; B. describe the target population to be served with consideration of at least the following characteristics of the residents: cultural background, gender, age, medically fragile condition, and legal status, including children in need of protection or services petition status, delinquency, and whether the resident is in the facility as a voluntary placement or self referral; C. state the primary needs of residents that the license holder will meet in the licensed facility; D. identify those resident services provided within the setting and those services to be provided by programs outside the setting; E. state how the license holder will involve the resident's cultural or ethnic community to ensure culturally appropriate care; and F. describe the specific extent and limitations of the program, including whether the license holder would use a restrictive procedure with a resident, under what conditions a restrictive procedure would be used, and what type of restrictive procedures a license holder would use if the license holder was certified to use restrictive procedures.

Inspection Findings:

The license holder's statement of intended use does not include the requirements in Subpart D.

Corrective Actions:

The license holder must update their statement of intended use that includes the requirements in subpart D.

Response Needed By:

2. 2960.0060 PROGRAM OUTCOMES MEASUREMENT, EVALUATION, AND COMMUNITY INVOLVEMENT. Subpart 3. Program evaluation.

A. The license holder must annually evaluate strengths and weaknesses of the program using at least the performance indicators in subitems (1) to (7): (1) accidents; (2) the use of restrictive procedures; (3) grievances; (4) adverse findings, allegations of maltreatment under Minnesota Statutes, section 626.556, citations, and legal actions against the license holder; (5) results of a resident and family satisfaction survey required in part 2960.0140, subpart 1; (6) information from subparts 1 and 2; and (7) critical incidents. B. The program evaluation in item A must be kept for two licensing periods.

Inspection Findings:

The license holder's annual evaluation does not contain subitems 1, 3, 4, and 5.

Additionally, the license holder does not meet the requirements of 2960.0060 Subpart 2, as the license holder does not ensure measurement of outcomes.

*MN Rule 2960.0060 Subpart 2 Outcome measures. The license holder must ensure measurement of the outcomes of the license holder's services intended to promote the resident's development as physically and mentally healthy persons. The measurement must note the degree to which the license holder's services provided to the resident or the resident's family have been successful in achieving the intended outcome of the services offered to the resident and the resident's family. The license holder must measure the success in achieving the outcomes identified in the license holder's policy statement required by subpart 1. The commissioner of human services or corrections may require license holders to measure specific factors related to the outcomes in subpart 1.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit a plan to MN DOC identifying how they will be compliant with outcome measures and program evaluations.

Response Needed By: 02/20/2026

3. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 3.A.. Resident admission documentation.

Upon or within five working days after admission, the license holder must obtain and document the information in items A and B to the extent permitted by law: legal authority for resident placement;

Inspection Findings:

Two of three resident files reviewed did not contain documentation of legal authority for placement. *This is a repeat violation from the license holder's 2023 inspection.

Additionally, three of three resident files reviewed did not contain the required information in the resident's file required in subpart B. The missing subitems from subpart B include: 7, 8, 9, 10, 11, and 12.

*2960.0070 Subpart 3 B (7) race or cultural heritage, languages the resident speaks and writes, and tribal affiliation, if any; (8) description of presenting problems, including medical problems, circumstances leading to admission, mental health concerns, safety concerns including assault behavior, and victimization concerns; (9) description of assets and strengths of the resident and, if available, related information from the resident, resident's family, and concerned persons in the resident's life; (10) name, address, and telephone number of the contact person for the last educational program the resident attended, if applicable; (11) spiritual or religious affiliation of the resident and the resident's family; and (12) the placing agency's case plan goals for the resident, if available.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit a plan to MN DOC to ensure the requirements of resident admission documentation are met.

Response Needed By: 02/20/2026

4. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 4.A.. Inventory and handling of resident property.

The license holder must inventory the resident's personal property, including clothing, and have the resident and the license holder sign the inventory upon admission. If the resident refuses to sign the inventory, two facility staff must sign the inventory. The license holder must ensure that a resident retain the use and availability of personal funds or property unless restrictions are justified in the resident's treatment plan. The license holder must ensure separation of resident funds from funds of the license holder, the residential program, or program staff.

Inspection Findings:

One of three resident files reviewed did not contain a signature from the facility. *This is a repeat violation from the license holder's 2023 inspection.

Additionally, license holder does not ensure separation of resident funds from the funds of the license holder, funds are kept in a cash box with no physical separation.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit to MN DOC a plan that ensures MN Rule 2960 requirements for inventory and handling of resident property is met.

Response Needed By: 02/20/2026

5. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 5.A.. Resident screening.

A resident admitted to a facility must be appropriately screened by a trained person, using screening instruments approved by the commissioner of human services and corrections. The license holder must ensure that the screenings in subitems (1) to (6) are completed if not completed prior to admission. The form used for screening in subitems (1) to (6) must be reviewed by a licensed professional in a related field.

Inspection Findings:

Three of three resident files reviewed did not document the required information for resident screenings.

*Three of three resident files reviewed did not document on the health screen the history of abuse; vulnerability to abuse; current medications; and recent physician's and clinic's name, address, and telephone number.

*One of three resident files reviewed did not contain a completed education screen

*One of three resident files reviewed did not contain the required written risk management plan as required based on the screening.

*One of three resident files reviewed did not contain a completed cultural screen.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit to MN DOC a plan that ensures resident screenings meet MN Rule 2960 requirements.

Response Needed By: 02/20/2026

6. 2960.0070 ADMISSION POLICY AND PROCESS. Subpart 5.D.. Resident screening.

A resident admitted to a facility must be appropriately screened by a trained person, using screening instruments approved by the commissioner of human services and corrections. D. The screenings must include documented inquiries and the results of the inquiries regarding the degree to which the resident's family desires to be involved during the resident's stay at the facility. The resident and resident's family response must be documented.

Inspection Findings:

Three of three resident files reviewed did not document the resident's response to the degree of involvement.

Additionally, three of three resident files reviewed did not document the dates of the family's response to the degree of involvement, therefore it could not be determined if they were completed within the required timeframe.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet MN Rule 2960 requirements of resident screening.

Response Needed By:

7. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 11.D.1.. Health and hygiene services.

The license holder must meet the conditions in items A to F. D. The license holder, in consultation with a medically licensed person, must have a plan for the safe storage and delivery of medicine. The license holder must meet the requirements in subitems (1) to (5). (1) The license holder must contact a newly admitted resident's prescribing medically licensed person to verify the following information regarding prescribed medication: (a) instructions about how the medication must be administered; (b) the symptoms that the medication will alleviate; and (c) the symptoms that would warrant consultation with the physician.

Inspection Findings:

Three of three resident files reviewed did not contain documentation of the license holder contacting a newly admitted resident's prescribing medically licensed person to verify the required information.

Additionally, one of three resident files reviewed revealed no documentation of the license holder attempting to contact the child's parent or guardian to seek permission for the facility to administer medication.

*2960.0080 11 D (2) The license holder must document attempts to contact the child's parent or guardian? to seek permission for the facility to administer the medication. If permission is denied and the? parent has the legal right to deny permission, then the medication will be discontinued under the? supervision of a physician unless a court order to administer the medication is obtained.

Additionally, three of three resident files reviewed revealed medication sheets with missing documentation of medications given. The license holder did not document on the medication sheets if medications were given to the residents.

*2960.0080 11 D (4) The license holder must document and follow the prescribing physician's directions for monitoring medications used by the resident.

Corrective Actions:

Immediately and on an ongoing basis the license holder must comply with MN Rule 2960 requirements with health and hygiene services.

Response Needed By:

8. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 11.D.5.. Health and hygiene services.

The license holder must meet the conditions in items A to F. D. The license holder, in consultation with a medically licensed person, must have a plan for the safe storage and delivery of medicine. The license holder must meet the requirements in subitems (1) to (5). (5) Facility staff responsible for medication assistance, other than a medically licensed person, must have a certificate verifying their successful completion of a trained medication aide program for unlicensed personnel offered through a postsecondary institution, or staff must be trained to provide medication assistance according to a formalized training program offered by the license holder and taught by a registered nurse.

Inspection Findings:

Two of two personnel files reviewed revealed that the medication assistance training was not taught by a registered nurse.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit a medication administration training plan to MN DOC. After the medication training plan has been approved by MN DOC, within 30 days the license holder must train all staff on medication administration by a registered nurse and submit the staffs' training verification to MN DOC.

Response Needed By: 02/20/2026

9. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 11.D.5.b.. Health and hygiene services.

The license holder must meet the conditions in items A to F. D. The license holder, in consultation with a medically licensed person, must have a plan for the safe storage and delivery of medicine. The license holder must meet the requirements in subitems (1) to (5). A medically licensed person must provide consultation and review of the license holder's administration of medications at least monthly.

Inspection Findings:

The license holder did not have a medically licensed person providing consultation and review of the license holder's administration of medication for 15 months (August 2024-November 2025).

Additionally, the license holder did not have a current copy of their medical provider's license.

*MN Rule 2960.0150 Subpart 2 The license holder must keep records showing that staff professional licensure is current.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit a plan to MN DOC identifying the license holder meeting MN Rule 2960 requirements for a licensed medical professional.

Response Needed By: 02/20/2026

10. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 14.d.. Emergency plan.

The plan must specify responsibilities assumed by the license holder for assisting a resident who requires emergency care or special assistance to a resident in emergencies. The license holder must review the plan with staff and residents at least once every six months.

Inspection Findings:

Four of four resident files reviewed did not contain documentation of review of the emergency plan at least once every six months.

Additionally, four of four personnel files reviewed did contain documentation of review of the emergency plan at least once every six months.

Additionally, the license holder's emergency plan does not identify specific responsibilities assumed by the license holder for assisting a resident who requires emergency care or special assistance to a resident in emergencies.

Corrective Actions:

Within 30 days of receipt of this report the license holder is to submit an updated emergency plan and a plan to document compliance of reviewing the plan with staff and residents to MN DOC.

Response Needed By: 02/20/2026

11. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 18.A.4.. Resident and family grievance procedures.

A. The written grievance procedure must require, at a minimum, that: (4) a person filing a grievance must receive a response within five days.

Inspection Findings:

A review of the license holder's grievances revealed five of nine grievances did not receive a response within five days.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder is to submit to MN DOC a plan that meets MN Rule 2960 requirements for grievances.

Response Needed By: 02/20/2026

12. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 3.A.. Cooperation in treatment and basic service delivery.

The license holder must cooperate with the resident's case manager and other appropriate parties in creating and delivering basic services. In addition, the license holder must: A. work with the resident, parent, or legal representative, and the resident's case manager and treatment team, if applicable, to implement the resident's case plan during the resident's stay in the facility. The license holder must also coordinate the license holder's plan for services to the resident with the placing agency's case plan for the resident and work with the placing agency to identify the resident's projected length of stay and conditions under which the family will be reunited, if appropriate, or specify the alternative permanency plan and what the license holder will do to help carry out the plan;

Inspection Findings:

Three of three resident files reviewed did not contain case plans, nor did the resident files contain documentation of the license holder attempting to obtain the case plans.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet MN Rule 2960 requirements for resident case plans.

Response Needed By:

13. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 5.A.. Discipline policy and procedures required.

The license holder must have discipline policies and procedure that require the resident's abuse history and developmental, cultural, disability, and gender needs be taken into consideration when deciding the disciplinary action to be taken with a resident. The policy must include the requirements in items A to E. A. The license holder must not subject residents to: (1) corporal punishment, including, but not limited to: rough handling, shoving, ear or hair pulling, shaking, slapping, kicking, biting, pinching, hitting, throwing objects, or spanking; (2) verbal abuse, including, but not limited to: name calling; derogatory statements about the resident or resident's family, race, gender, disability, sexual orientation, religion, or culture; or statements intended to shame, threaten, humiliate, or frighten the resident; (3) punishment for lapses in toilet habits, including bed wetting and soiling; (4) withholding of basic needs, including, but not limited to: a nutritious diet, drinking water, clothing, hygiene facilities, normal sleeping conditions, proper lighting, educational services, exercise activities, ventilation and proper temperature, mail, family visits, positive reinforcement, nurturing, or medical care. However, a resident who destroys bedding or clothing, or uses these or other items to hurt the resident or others, may be deprived of such articles according to the resident's case plan or, for a facility licensed by the commissioner of corrections, according to part 2960.0270, subpart 6; (5) assigning work that is dangerous or not consistent with the resident's case plan; (6) disciplining one resident for the unrelated behavior or action of another, except for the imposition of restrictions on the resident's peer group as part of a recognized treatment program; (7) use of restrictive techniques or procedures as punishment, for convenience of staff, to compensate for not having an adequate number of staff, or to substitute for program services; (8) restrictions on a resident's communications beyond the restrictions specified in the resident's treatment plan or case plan; and (9) requirements to assume uncomfortable or fixed positions for an extended length of time, or to march, stand, or kneel as punishment.

Inspection Findings:

A review of the license holder's policy and procedure manual revealed numerous missing policies required in MN Rule 2960. This was communicated to the license holder via the 2960 checklist and at the exit interview as to which parts of the Rule that the license holder's policy and procedure manual is missing.

Corrective Actions:

Within 60 days of receipt of this inspection report, the license holder must submit all required policies that were not available and were identified with the license holder as missing from the license holder's policy and procedure manual. The license holder's policy and procedure manual must be in compliance with MN Rule 2960 and approved by MN DOC.

Response Needed By: 03/22/2026

14. 2960.0080 FACILITY OPERATIONAL SERVICES, POLICIES, AND PRACTICES. Subpart 9.D.. Educational services.

The license holder must ensure that educational services are provided to residents according to items A to D, except where not applicable, due to the age of the resident or the resident's short stay in the facility. D. The license holder must provide education about chemical health to the resident who has had a problem related to inappropriate chemical use, but who does not have a sufficient chemical use history to refer to treatment. The education must provide the resident with opportunities to examine the problems associated with inappropriate chemical use.

Inspection Findings:

Two of two resident files reviewed identified chemical use by the residents, however, no documentation of education provided.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet requirements of MN Rule 2960 with educational services.

Response Needed By:

15. 2960.0100 PERSONNEL POLICIES. Subpart 1. staffing plan.

The license holder must have a staffing plan that: A. is approved by the commissioner of human services or corrections; B. identifies the assignments of facility staff; and C. meets the cultural and ethnic needs of the facility residents to the extent permitted by law.

Inspection Findings:

The license holder's staffing plan does not include requirements of MN Rule 2960.0100 Subpart 1 C.

Additionally, the license holder's staffing plan does not include requirements of MN Rule 2960.0150 Subpart 3 E.

* MN Rule 2960.0150 Subpart 3 E The written staffing plan must include a contingency plan that ensures an immediate response by on-call staff of the same gender as the resident when: (1) supervision of a resident by staff of the same gender is required under item D, subitems (1) to (4); (2) when necessary to meet the assessed needs of the resident as determined in part 2960.0070, subpart 5, item B, subitem (2); or (3) when necessary to appropriately care for a resident who was a victim of sexual abuse.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit an updated staffing plan to MN DOC.

Response Needed By: 02/20/2026

16. 2960.0100 PERSONNEL POLICIES. Subpart 2. Recruitment of culturally balanced staff.

To the extent permitted by law, it is the license holder's responsibility to actively recruit, hire, and retain full time staff who are responsive to the diversity of the population served. If the facility staffing plan does not meet the cultural and racial needs of facility residents according to subpart 1, item C, the license holder must document the reasons why and work with cultural or racial communities to meet the needs of residents. In addition, the license holder must contact a cultural or racial community group related to the resident's cultural or racial minority background and seek information about how to provide opportunities for the resident to associate with adult and peer role models with similar cultural and racial backgrounds on a regular basis. The license holder must maintain annual documentation regarding the license holder's efforts to meet the requirements of this subpart.

Inspection Findings:

The license holder does not have a staffing plan that meets the cultural and racial needs of facility residents according to subpart 1, item C. Additionally the license holder does not have annual documentation regarding the license holder's efforts to meet the requirements of this subpart.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit a plan to MN DOC that will include MN Rule 2960 compliance with recruitment of culturally balanced staff and documentation. This is to be completed in conjunction with Violation 15 for MN Rule 2960.0100 Subpart 1.

Response Needed By: 02/20/2026

17. 2960.0100 PERSONNEL POLICIES. Subpart 3.A.1.. Orientation and in-service training.

Orientation training must include at least the subjects in subitems (1) to (6): (1) emergency procedures, including evacuation routes, emergency telephone numbers, severe storm and tornado procedures, and location of facility alarms and equipment;

Inspection Findings:

Two of two personnel files reviewed for orientation training did not contain required documentation of subitems 1-6.

Additionally, the two personnel files did not contain orientation documentation required for orientation items per MN Rule 2960.0560 Subpart 4 A.

*MN Rule 2960.0560 Subpart 4 A. staff person who provides correctional program services must complete orientation training related to the specific job functions for which the staff person was hired and the needs of the residents the person is serving. During the first 45 calendar days of employment, and before assuming sole responsibility for care of residents, staff who provide correctional program services must complete training in the topics in subitems (1) to (7): (1) the license holder's policies and procedures related to correctional program services; (2) resident rights; (3) emergency procedures; (4) policies and procedures on approved restrictive procedures, strip searches, and resident-assisted searches; (5) rules of conduct and policies and procedures related to resident behavior; (6) emergency and crisis services; and(7) problems and needs of residents and their families).

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit to MN DOC an orientation and in-service training plan which includes how the trainings will be documented. Additionally, the license holder must ensure staff are trained as required.

Response Needed By: 02/20/2026

18. 2960.0100 PERSONNEL POLICIES. Subpart 4. specialized training.

If needed, license holders and staff must have specialized training to develop skills to care for residents. Specialized training must be directly related to serving the program's target population and to meeting the program's certification requirement, if the program has been certified.

Inspection Findings:

The license holder currently holds a specialized setting certification for those sex trafficked and commercially sexually exploited or those at risk. Three of four personnel files reviewed did not contain specialized training for this area of the license holder's target population.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit to MN DOC a training plan that includes specialized training to develop skills to care for the targeted population, this is to be completed in conjunction with Violation 17 for MN Rule 2960.0100 Subpart 3 A 1.

Response Needed By: 02/20/2026

19. 2960.0100 PERSONNEL POLICIES. Subpart 5. Documentation of training.

The license holder must document the date and number of hours of orientation and in service training completed by each staff person in each topic area and the name of the entity that provided the training.

Inspection Findings:

Four of four personnel files reviewed did not contain the required documentation required for staff trainings.

Additionally, determination was not able to be made if requirements were met for MN Rule 2960.0100 Subpart 6 due to lack of training documentation.

*MN Rule 2960.0100 Subpart 6 A. The license holder and staff must have the education and experience required to meet the functions and program activities that the license holder declared in the facility statement of intended use according to part 2960.0040. The license holder, or the license holder's representative acting on behalf of the license holder, must be a responsible, mature, healthy adult who is able to carry out the license holder's duties. The license holder and staff must be able to accomplish the license holder's duties to the resident's case plan and treatment plan and meet the resident's needs. B. Staff must be trained in gender-based needs and issues.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder is submit a plan to MN DOC what will include MN Rule 2960 compliance with personnel training and documentation. This is to be completed in conjunction with Violation 17 for MN Rule 2960.0100 Subpart 3 A 1.

Response Needed By: 02/20/2026

20. 2960.0100 PERSONNEL POLICIES. Subpart 7. Background study.

A license holder and individuals identified in Minnesota Statutes, sections 241.021 and 245A.04, subdivision 3, must submit to a background study. A. Background checks conducted by the Department of Human Services are conducted according to Minnesota Statutes, section 245A.04, subdivision 3. B. Background checks conducted by the Department of Corrections are conducted according to Minnesota Statutes, section 241.021, subdivision 6.

Inspection Findings:

The license holder submitted a background study for an employee who began working on July 24, 2025. The license holder was provided a letter from DHS on that same day that identified the individual cannot provide any services until a clearance or other background study determination allows the individual to work. The license holder allowed the individual to continue working without the proper clearance. The employee's background study cleared on October 20, 2025.

Corrective Actions:

Immediately and on an ongoing basis the license holder is to follow all MN Rule 2960 requirements regarding background studies. Within 30 days of receipt of this inspection report the license holder is to submit a plan to MN DOC that outlines how they will achieve and maintain compliance with employee background studies.

Response Needed By:

21. 2960.0140 QUALITY ASSURANCE, IMPROVEMENT, AND PROGRAM OUTCOMES. Subpart 1. Resident and family satisfaction survey.

A. The license holder may ask the commissioner of human services or corrections for permission to use a random sample of residents, parents, and guardians. At a minimum, the license holder must attempt to survey each released resident, the resident's parents or legal guardians and custodians, and the referring agency regarding the license holder's satisfaction with the services in subitems (1) to (7): (1) daily care and support of the resident during the resident's stay, including recreation, food, sleeping accommodations, general care, and emotional support of the resident; (2) the accuracy, usefulness, and appropriateness of the screening and assessment of the resident's physical and emotional well being and functioning; (3) provisions for the resident's safety; (4) support of the resident's regular and special education, related services, and support for implementing the resident's individual education plan; (5) support of obtaining needed medical, dental, mental health, and other services identified in the resident's screening and assessments or otherwise observed or reported by staff or other persons involved with the resident's care; (6) the positive and negative effects on the resident and the resident's family of the treatment offered to the resident, such as mental health, chemical dependency, or sex offender treatment; and (7) support of family and community reintegration, if appropriate. B. The results of each resident's survey must be available on file in the facility for review for at least two inspection cycles.

Inspection Findings:

The license holder's survey does not contain subitem 6.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet requirements of MN Rule 2960 with satisfaction surveys.

Response Needed By:

22. 2960.0140 QUALITY ASSURANCE, IMPROVEMENT, AND PROGRAM OUTCOMES. Subpart 2. Treatment plan compliance.

Following the resident's discharge, the license holder must document the extent to which the resident's stay in the facility met the goals and objectives identified in the resident's treatment plan. Documentation must include at least: A. the services identified in the resident's treatment plan that were provided to the resident directly by the license holder and the services that were provided by a provider other than the license holder; and B. the extent to which the services provided to the resident contributed to achieving the goals and objectives identified in the resident's treatment plan.

Inspection Findings:

The discharged resident's file reviewed did not contain documentation that met the requirements of this Rule part.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet MN Rule 2960 requirements with treatment plan compliance.

Response Needed By:

23. 2960.0160 ADMISSION POLICIES AND PROCESS. Subpart 2. Ability to meet resident needs.

Before admission of a resident, the license holder must examine the placement agency's information about the resident and must determine and document whether the program can meet the resident's needs. The license holder must document whether: A summary of the assessment results must be written by a chemical dependency counselor or assessor, indicating whether the needs identified in the assessment can be addressed by the license holder while the resident participates in the license holder's program, or whether the resident must be referred to an appropriate treatment setting.

Inspection Findings:

Three of three resident files reviewed did not document the required information for determining the license holder's ability to meet the resident's needs.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must submit a plan to MN DOC for examining and documenting the license holder's ability to meet the resident's needs.

Response Needed By: 02/20/2026

24. 2960.0160 ADMISSION POLICIES AND PROCESS. Subpart 4.A.. Information to residents.

The license holder must give residents the information in items A to C. A. Copies of facility rules must be made available to all residents who can read at the time of admission. The facility rules must include: (1) rules governing conduct, disciplinary consequences, and appeal procedures; (2) procedures for obtaining hygiene and other personal items; and (3) policies and procedures governing visiting, correspondence, bathing, laundry, grievances, clothing, bedding exchange, and other operational procedures.

Inspection Findings:

One of three resident files reviewed did not contain documentation that the information required to be given to the resident at admission occurred at admission. The resident admitted to the facility on 07/29/2025 and the information was documented as given to the resident on 10/07/2025.

Additionally, three of three resident files reviewed did not contain documentation telling the resident's parent, guardian, or custodian that resident rights were available.

*MN Rule 2960.0050 Subpart 3 B The license holder must tell the resident's parent, guardian, or custodian within a reasonable time after admission to the facility that the information in item A is available.

Additionally, the license holder did not inform the residents how to contact the appropriate state-appointed ombudsman.

*MN Rule 2960.0050 Subpart 3 E The license holder must inform residents how to contact the appropriate state-appointed ombudsman and give residents the name, address, and telephone number of the state-appointed ombudsman.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet MN Rule 2960 requirements with information given to residents and resident's parent, guardian, or custodian.

Response Needed By:

25. 2960.0180 FACILITY OPERATIONAL SERVICE POLICIES AND PRACTICES. Subpart 2.B.1.. Facility programs.

The license holder must prepare written program descriptions and policies and procedures that implement the program described. Measurable program outcomes must also be identified. B. Each resident must have a treatment plan. (1) The license holder must begin to develop a treatment plan within ten days of admission.

Inspection Findings:

One of three resident files reviewed did not contain a treatment plan that began to be developed within ten days of the resident admission. *This is a repeat violation from the license holder's 2023 Inspection.

Corrective Actions:

Immediately and on an ongoing basis the license holder must begin development of a resident treatment plan within ten days of admission.

The license holder must submit to MN DOC treatment plans for the next five resident admissions.

Response Needed By: 02/20/2026

26. 2960.0180 FACILITY OPERATIONAL SERVICE POLICIES AND PRACTICES. Subpart 3. Records and reports

The license holder must have a record retention schedule. The license holder must: A. comply with reporting requirements of Minnesota Statutes, section 253C.01; B. maintain the records in subitems (1) to (13) according to state law: (1) admission and release records; (2) resident personal property records; (3) special occurrence or incident records; (4) records of staff and volunteer training; (5) food service records; (6) daily log records; (7) records about which services were provided to each resident, outcomes of treatment for each resident, and outcomes for program services and program evaluation reports; (8) medical and dental records; (9) disciplinary records and records of appeals; (10) special and regular education records; (11) resident, family, and referring agency satisfaction survey; (12) for facilities licensed by the commissioner of corrections, records on strip searches and resident-assisted searches; and (13) for facilities licensed by the commissioner of corrections, records on safety-based separation under parts 2960.0720 to 2960.0750; and C. store records in an organized, retrievable manner that ensures confidentiality.

Inspection Findings:

Four of four personnel files did not have required training documentation.

*File 1 and File 2 did not have the required training documents for 2024.

*File 3 and File 4 it was unclear what training the staff had received because the documentation was not clear.

Corrective Actions:

This is to be included in Corrective Action for this inspection report's Violation 17 for MN Rule 2960.0100 Subpart 3 A 1.

Additionally, within 30 days of receipt of this inspection report the license holder is to ensure that all staff are current on MN Rule 2960 training requirements and provide the document verification to MN DOC.

Response Needed By: 02/20/2026

27. 2960.0180 FACILITY OPERATIONAL SERVICE POLICIES AND PRACTICES. Subpart 4. Audio or visual recording of resident.

Photographs, videotapes, and motion pictures of a resident taken on program premises or by program personnel are considered a resident record. Photographs of a resident for identification and recordings by videotape and audiotape for the purpose of enhancing therapy, staff supervision, or security may be required. A resident must be informed when actions are being recorded, and has the right to refuse any recording unless authorized by law, necessary for program security, or to protect the health and safety of a resident. The use of an audio or visual recording of a resident must comply with data practices laws.

Inspection Findings:

The license holder was not informing residents when actions are being recorded.

Corrective Actions:

Immediately and on an ongoing basis the license holder must follow MN Rule 2960 regarding audio and visual recording of a resident.

Response Needed By:

28. 2960.0190 DISCHARGE AND AFTERCARE. Subpart 1.A.. Discharge.

The license holder must meet requirements of items A and B. A. Prior to the resident's release from the program, the license holder, in conjunction with the placing agency, must develop a transition services plan for the resident. The plan must recommend ways to meet the resident's needs and identify resources that are available in the community to address the resident's continuing needs after release from the facility. The plan must consider the environment into which the resident will return, and recommend how the resident may deal with issues and potential challenges within that environment. The plan must be developed with input from the resident, the resident's family members, if appropriate, the providing school district, and the persons who will provide support services to the resident upon release. A copy of the plan must be given to the resident and to the school, or to the residential treatment facility that the resident will attend or is placed in after release.

Inspection Findings:

The discharge resident's file reviewed did not contain a transitional services plan.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet requirements of MN Rule 2960 with transitional services plans.

Response Needed By:

29. 2960.0190 DISCHARGE AND AFTERCARE. Subpart 1.C.. Discharge.

The license holder must meet requirements of items A and B. C. The license holder must give written notice of the resident's projected discharge date to: (1) the resident; (2) the resident's case manager and parent, if permitted, or legal guardian; (3) the providing school district; and (4) the school district the resident will go to, if known.

Inspection Findings:

The resident's discharge file reviewed did not contain written notice of discharge. *This is a repeat violation from the license holder's 2023 Inspection.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet requirements of MN Rule 2960 with requirements of discharge. The license holder must submit to MN DOC the next five discharged residents' written notices of discharge.

Response Needed By: 02/20/2026

30. 2960.0550 PROGRAM CERTIFICATION APPROVAL. Subpart 4.D.. Minimum criteria for certification.

The license holder must implement a plan that provides opportunities for physical exercise and recreational activities for residents. The plan must include at least the following requirements: (1) regulations that are reasonable/necessary to protect the facility's security & the resident's welfare; (2) at least two hours daily of organized and supervised physical exercise and recreational activities and leisure time activities for residents, excluding time spent watching television. Organized and supervised physical exercise and recreational activities include preplanned exercise or activities that are supervised and directed by qualified or trained staff; (3) provisions for indoor space and equipment for active recreation; and (4) provisions for outdoor recreational space, equipment, and supportive staff for outdoor recreational program services.

Inspection Findings:

The license holder does not consistently provide at least two hours of daily organized and supervised physical exercise and recreational activities and leisure time activities for residents.

Corrective Actions:

Immediately and on an ongoing basis the license holder must provide at least two hours of daily organized and supervised physical exercise and recreational activities and leisure time activities for residents.

Response Needed By:

31. 2960.0560 PERSONNEL STANDARDS. Subpart 3. supervision of treatment.

The program director must: A. supervise the development of each resident's individual treatment plan; B. be involved in the resident's treatment planning process and sign the resident's individual treatment plan; C. supervise the implementation of the individual treatment plan and the ongoing documentation and evaluation of each resident's progress; and D. document on a biweekly basis a review of all the program services provided for the resident in the preceding week.

Inspection Findings:

Review of the license holder's resident files revealed:

*one of three resident files did not contain a treatment plan

*two of two resident files did not contain documentation on a biweekly basis a review of all the program services provided for the resident in the preceding weeks.

Additionally, two of two resident files reviewed did not document the review of the resident's case and treatment plans on a monthly basis.

*MN Rule 2960.0180 Subpart 2 B (2) The license holder must review the resident's case and treatment plans on a monthly basis or, if necessary, more often and recommend changes, if appropriate.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder is to submit to MN DOC a plan to ensure that reviews of resident treatment plans and reviews of program services will meet MN Rule 2960 requirements.

Response Needed By: 02/20/2026

32. 2960.0560 PERSONNEL STANDARDS. Subpart 5. Individual staff development and evaluation plan.

The license holder must ensure that an annual individual staff development and evaluation plan is developed and implemented for each person who provides, supervises, or directly administers correctional program services. The plan must: A. be developed within 90 days after the person begins employment and at least annually thereafter; B. meet the staff development needs specified in the person's annual employee evaluation; and C. ensure that an employee who provides, supervises, or directly administers program services has sufficient training to be competent to deliver the correctional services assigned to the employee.

Inspection Findings:

Two of four personnel files reviewed revealed File 2 and File 4 did not have documentation that met requirements for this Rule part.

*File 2 did not have an evaluation plan for 2024.

*File 4 did not have an evaluation plan developed within 90 days of employment.

Corrective Actions:

Immediately and on an ongoing basis the license holder must meet MN Rule 2960 requirements for staff development and evaluation plans.

Response Needed By:

33. 2960.0570 FACILITY OPERATIONAL POLICIES AND PROCEDURES. Subpart 3. security policies and procedures.

The license holder must have security policies and procedures that include the topics in items A to K: A. control and recovery of contraband; B. delivery and service procedure; C. prohibition of firearms and other weapons in resident areas; D. search procedures, including strip searches and resident-assisted searches; E. escort of residents outside security area; F. when residents are not under direct supervision, conducting well-being checks at least once every 30 minutes, as direct supervision and well-being checks are defined under part 2960.0720, subpart 3; G. lock and key procedures; H. inspection of physical plant procedures; I. count procedures; J. weapons, tools, equipment, medications, and hazardous substances; and K. use of chemical irritants.

Inspection Findings:

Eight of ten well-being checks reviewed on camera were out of compliance.

*Three of the eight out of compliance well-being checks were over the 30-minute time frame.

*Six of the eight out of compliance well-being checks were not completed in a manner that ensured the staff observed residents were present, alive, and were not experiencing visible or audible distress.

Corrective Actions:

Within 30 days of receipt of this inspection report the license holder must retrain all staff on well-being checks and submit documentation of the trainings to MN DOC.

Response Needed By: 02/20/2026

INSPECTION COMMENTS

The license holder will be placed on an annual inspection cycle due to the number and nature of violations to ensure there is adequate support and guidance for the next scheduled inspection.

JJDPA Compliance

Valley Lake Boys Home is a nonsecure group residential facility.

Report completed By: Stephanie Kantola – Detention Facility Inspector

Signature: