



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:

Village Ranch Girls Program

Address: 380 Annandale Boulevard, Annandale, MN 55302

MN Governing Rule: 2960 Children's Residential Facility

Inspection Type: Biennial **Inspected By:** Kristi Strang – Director

Inspected on: 02/25/2025

Inspection Method: The biennial facility inspection was a scheduled on-site inspection.

Officials Present During Inspection: CEO Scott Bakeberg; Program Director Bill Salmela

Officials Present for Exit Interview: CEO Scott Bakeberg; Program Director Bill Salmela

Issued Inspection Report to: CEO Scott Bakeberg; Program Director Bill Salmela; Regional Manager Dayna Burmeister

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	349	346	3

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 11/01/2024 **Ends On:** 10/31/2026 **Facility Type:** Non-Secure Juvenile Residential Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 10/31/2025

Delinquent Juvenile Hold Approval: Not Applicable

Certificate Holder: Scott Bakeberg
13637 60th Street SW
Cokato, MN 55321

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	Pre 96 LTSR	Post 96 LTSR	Bed Details	Conditions
Restrictive Technique Services	Female	16	12/1/2016	100	16.00	0	0	Age range 12 - 18.	

RULE COMPLIANCE DETAILS

Chapter 2960 - Mandatory Rules Not In Compliance**Total: 3****1. 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:

One of two resident files reviewed for requirements governing admission screenings showed the family involvement screening was left blank

Corrective Actions:

Immediately and on an ongoing basis, the license holder must comply with all 2960 standards regarding resident screening.

Response Needed By:**2. 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:

One of two resident files reviewed for requirements governing biweekly reviews of program services did not contain documentation of services provided for the week of 01/26/2025 through 02/06/2025.

Corrective Actions:

Immediately and on an ongoing basis, the license holder must comply with all 2960 standards regarding biweekly reviews.

Response Needed By:**3. 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:

Staff members were not completing well-being checks in a manner that a reasonable person could ensure that the resident is present and alive; and identify whether the resident is experiencing visible or audible distress.

Corrective Actions:

This was reviewed and discussed with supervisory staff during the inspection and the facility indicated all staff would be retrained. No further action required.

Response Needed By:

INSPECTION COMMENTS

Facility was provided technical assistance on requesting and obtaining case plans.

JJDP A Compliance

This is a nonsecure program

Report completed By: Kristi Strang – Director

Signature: