



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:

Village Ranch Rochester

Address: 1117 First Avenue NE, Rochester, MN 55906

MN Governing Rule: 2960 Children's Residential Facility

Inspection Type: Biennial **Inspected By:** Peter Zimprich – Detention Facility Inspector

Inspected on: 08/25/2025

Inspection Method: On-site

Officials Present During Inspection:

Officials Present for Exit Interview:

Issued Inspection Report to:

RULE COMPLIANCE SUMMARY

Rule Chapter	Requirement Type	Total Applicable	Total Compliance	Total Non Compliance
2960	Mandatory	349	342	7

TERMS OF OPERATION

Authority to Operate: **Begins On:** 04/01/2025 **Ends On:** 03/31/2027 **Facility Type:** Non-Secure Juvenile Residential Facility

Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 03/31/2026

Delinquent Juvenile Hold Approval: **Certificate Holder:** Scott Bakeberg
13637 60th St. 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
Group Residential Services	Male	12	4/1/2015	100	12.00	0	0	None.	

RULE COMPLIANCE DETAILS

Chapter 2960 - Mandatory Rules Not In Compliance

Total: 7

1. 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 inventories reviewed did not contain a staff signature.

Corrective Actions:

Immediately and on an ongoing basis, the license holder must comply with all 2960 standards regarding inventory and handling of resident property.

Response Needed By:

2. 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:

Two of three resident files reviewed did not contain the resident's response for desired degree of family involvement.
One of three resident files reviewed did not contain resident's and family's response for desired degree of family involvement.

Corrective Actions:

The license holder updated their screening tool during the on-site inspection. No further action is required at this time.

Response Needed By:

3. 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:

The license holder does not contact a newly admitted resident's prescribing medically licensed person to verify information regarding prescribed medication.

Corrective Actions:

Immediately and on an ongoing basis the license holder must establish and follow a process for contacting a newly admitted resident's prescribing medically licensed person to verify instructions about how the medication must be administered, the symptoms that the medication will alleviate, and the symptoms that would warrant consultation with the physician.

Response Needed By:

4. 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:

The license holder does not review emergency procedures for serious illness and disappearance of a resident with residents at least once every six months.

Corrective Actions:

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

Response Needed By:

5. 2960.0090 DISCHARGE AND AFTERCARE. Subpart 3. Return of resident's property.

The license holder must return all of the resident's personal property to the resident along with a signed receipt upon discharge, unless prohibited to do so by law or case plan. Discrepancies between the resident's inventoried property turned over to the facility at admission and the property returned to the resident at discharge, and the resolution of the discrepancy, must be documented by facility staff.

Inspection Findings:

One resident discharge file reviewed did not contain a signed inventory receipt upon discharge.

Corrective Actions:

Immediately and on an on-going basis, the license holder must comply with all 2960 standards regarding return of resident's property.

Response Needed By:

6. 2960.0100 PERSONNEL POLICIES. Subpart 3.A.4.. Orientation and in-service training.

Orientation training must include at least the subjects in subitems (1) to (6): (4) general and special needs, including disability needs, of residents and families served;

Inspection Findings:

One personnel file reviewed did not contain training regarding general and special needs, including disability needs, of residents and families served.

Corrective Actions:

Within 30 days of the receipt of this inspection report, the license holder must submit to the DOC an orientation plan that includes training on the disability needs, of residents and families served.

Response Needed By: 10/22/2025

7. 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 adequately address the accuracy, usefulness, and appropriateness of the screening and assessment of the resident's physical and emotional well-being and functioning, and the support of the resident's regular and special education, related services, and support for implementing the resident's individualized education program.

Corrective Actions:

Within 30 days of the receipt of this inspection report, the license holder must submit to the DOC a resident and family satisfaction survey that complies with all 2960 standards regarding satisfaction surveys.

Response Needed By: 10/22/2025

INSPECTION COMMENTS

The biennial facility inspection was a scheduled on-site inspection.

JJDPa Compliance

This is a nonsecure facility.

Report completed By: Peter Zimprich – Detention Facility Inspector

Signature:

Peter Zimprich