



Facility Inspection Report Issued By The Minnesota Department of Corrections Pursuant to MN Statute 241.021, Subdivision 1

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INSPECTION DETAILS FOR:

Wadena County Jail

Address: 415 S Jefferson, Wadena, MN 56482

MN Governing Rule: 2911 Local Adult Detention Facilities

Inspection Type: Biennial **Inspected By:** Lori Schopf – Senior Detention Facility Inspector **Inspected on:** 10/01/2025 to 10/16/2025

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: Jail Administrator Tim Stroeing

Officials Present for Exit Interview: Jail Administrator Tim Stroeing; Sheriff Mike Carr

Issued Inspection Report to: Jail Administrator Tim Stroeing; Sheriff Mike Carr; County Administrator Ryan Odden

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	121	5	0	96.03%	Compliance rating of 100%
2911	Essential	100	95	5	0	95.00%	Compliance rating of 90%

TERMS OF OPERATION

Authority to Operate: approval **Begins On:** 11/01/2025 **Ends On:** 10/31/2027 **Facility Type:** Jail
Placed on Biennial Status: Yes **Biennial Status Annual Compliance Form Due On:** 10/31/2026
Delinquent Juvenile Hold Approval: 24 hrs exclusive of weekends and holidays **Certificate Holder:** Wadena 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	27	7/23/2001	86	23.22	None.	

RULE COMPLIANCE DETAILS

Chapter 2911 - Mandatory Rules Not In Compliance

Total: 5

1. 2911.2525 ADMISSIONS. Subpart 1. Policies and procedures.

A facility shall have written policies and procedures for processing new inmates to the facility to include, at a minimum, the following: A. obtaining and documenting available emergency medical information within two hours of admission; B. verification of court commitment papers or other legal documentation of detention. Verification shall include checking the date of admission, duration of confinement, and specific charges; C. a search of the inmate and the inmate's possessions; D. inventory and storage of the inmate's personal property; E. initial medical screening to include an assessment of the inmate's health status, including any medical or mental health needs; F. telephone calls made by the inmate during the booking and admission process and prior to assignment to other housing areas; G. shower and hair cleansing; H. issue of bedding, clothing, and personal hygiene items according to the rule requirements applicable to the anticipated length of stay of the inmate; I. photographing and fingerprinting including notation of identifying marks or unusual characteristics such as birthmarks or tattoos; J. interviewing to obtain the following identifying data: (1) name and aliases of person; (2) current address, or last known address; (3) health insurance information; (4) gender; (5) age; (6) date of birth; (7) place of birth; (8) race; (9) present or last place of employment; (10) emergency contact including name, relation, address, and telephone number; and (11) additional information concerning special custody requirements or special needs; K. initial classification of the inmate and assignment to a housing unit; L. an assigned booking number; and M. Social Security number, driver's license number, or state identification number, if available.

Inspection Findings:

A review of all in-custody inmate files showed that one inmate was not referred for mental health services, when their mental health screening indicated a referral should have been made.

Corrective Actions:

All staff must be trained on the updated procedure for completing the mental health screenings. Specifically, the scoring requirements for when inmates need to be referred for mental health services. Upon completion, documentation of the training must be submitted to the inspector.

Response Needed By: 11/17/2025

2. 2911.4500 SUPERVISION OF MEAL SERVING.

Meals shall be served under the direct supervision of staff.

Inspection Findings:

Video review showed on September 26, 2025, at 1138 hours, meals were not served under the direct supervision of staff.

Corrective Actions:

Since the inspection, the facility has changed its procedures to ensure all inmates are personally observed taking a meal tray. The inspector will continue to monitor for compliance.

Response Needed By:

3. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 4. Counting.

A facility shall have a written policy describing the system of counting inmates. Formal counts shall be completed with an official entry made in the daily log at least once each eight hours. The facility shall maintain a system that identifies the whereabouts of all inmates in custody and includes a system of accountability for inmates approved for temporary absences from their assigned housing units. A written policy and procedure shall provide that staff regulate inmate movement.

Inspection Findings:

A review of documentation showed that in August 2025, the facility conducted 21 formal counts beyond the required eight-hour time frame.

Corrective Actions:

Develop a system to ensure formal counts are completed at least every 8 hours. Send documentation of the updated procedure to the inspector.

Response Needed By: 11/17/2025

4. 2911.5000 POST ORDERS; FORMAL INMATE COUNT; WELL-BEING CHECKS. Subpart 5. Well-being.

A facility shall have a system providing for well-being checks of inmates. A written policy and procedure shall provide that all inmates are personally observed by a custody staff person at least once every 30 minutes. Thirty-minute checks should be staggered. If a well-being check does not occur due to an emergency, it must be documented in the jail log and have supervisory review and approval. More frequent observation is required for those inmates of a special need classification who may be harmful to themselves. Examples of inmates of a special need classification include those classified as potentially suicidal, or as mentally ill, or those experiencing withdrawal from drugs or alcohol.

Inspection Findings:

A review of well-being checks was conducted via video for multiple dates, times, and shifts. All well-being checks were completed within 30 minutes; however, on September 26, 2025, there was a check completed at 1138 hours where staff logged a meal pass as a well-being check, and the staff did not personally observe all inmates receiving a tray.

Corrective Actions:

Since the inspection, the facility has changed its procedures for meal delivery to ensure all inmates are personally observed taking a meal tray. The inspector will continue to monitor for compliance.

Response Needed By:**5. 2911.6800 CONTROL. Subpart 1. Records.**

Records of receipt, the quantity of the drugs, and the disposition of all prescription medications shall be maintained in detail to enable an accurate accounting.

Inspection Findings:

A review of all the inmate medication administration records (MAR) found that one inmate's medication count was not correct.

Corrective Actions:

The facility must develop a system to properly record all medications that are delivered to the facility, to allow for accurate accounting of prescribed medications.

Response Needed By: 11/17/2025**Chapter 2911 - Essential Rules Not In Compliance****Total: 5****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:

Documentation showed that one custody staff member, who began employment in 2025, completed the required hours of orientation training; however, the training did not cover all of the minimum requirements outlined in the rule.

Corrective Actions:

The Jail Administrator must ensure the custody staff complete diversity, vulnerable adult, and response to resistance training. Upon completion, documentation of the training must be submitted to the inspector.

Response Needed By: 11/17/2025**2. 2911.2800 ADMINISTRATIVE SEGREGATION. Subpart 4. Policy.**

Written policy and procedure shall provide that the status of inmates in administrative segregation is reviewed every seven days. These policies shall provide: A. that the review is documented and placed in the inmate's file; B. that the inmate in administrative segregation receive visits from the facility administrator or designee a minimum of once every seven days as a part of the administrative review process; and C. that the review process that is used to release an inmate from administrative segregation is specified.

Inspection Findings:

One inmate housed in Administrative Segregation did not have documentation confirming that their status was reviewed every seven days, as required.

Corrective Actions:

The facility has updated its process for documenting 7-day reviews for inmates in Administrative Segregation. The inspector will continue to monitor for compliance.

Response Needed By:

3. 2911.2850 INMATE DISCIPLINE PLAN. Subpart 6. Removing clothing and bedding.

The facility administrator or designee shall have a policy and procedure for removing clothing and bedding from an inmate. The following shall be included: A. clothing and bedding shall be removed from an inmate only when the inmate's behavior threatens the health, safety, or security of self, other persons, or property. When appropriate, alternative clothing and bedding shall be issued; B. clothing and bedding shall be returned to the inmate as soon as it is reasonable to believe the behavior that caused the action will not continue; C. the decision to deprive an inmate of articles of clothing or bedding shall be reviewed by the officer in charge or the supervisor during each eight-hour period; and D. the review shall be documented.

Inspection Findings:

The facility does not have a documented procedure requiring a review, every eight hours, of the decision to deprive an inmate of articles of clothing or bedding.

Corrective Actions:

Develop a procedure that requires staff to document a review of the decision to continue depriving an inmate of clothing or bedding.

Response Needed By: 11/17/2025

4. 2911.3100 INMATE ACTIVITIES AND PROGRAMS. Subpart 1. Written plan.

A facility administrator or designee shall have and implement a written plan for the constructive scheduling of inmate time. The plan shall: A. identify programs offered in the facility and when the programs are offered; B. identify persons conducting the program and whether or not the persons are facility staff, external community resources under contract, or volunteers; C. be consistent with established legal rights of inmates, type and status of inmates detained in the facility, and rule requirements associated with the facility's classification; D. provide inmates with the option to refuse to participate in facility programs, except work assignments and programs required by statute or court order; E. when males and females are housed in the same facility, provide comparable opportunities for participation in programs and services; and F. require documentation of programs offered and inmates participating in programs.

Inspection Findings:

The facility has a written plan that identifies when programs are offered in the facility, but there was no documentation available to confirm which inmates participated in the programs.

Corrective Actions:

The facility has developed and implemented a process for documenting inmate participation in all scheduled programs. The inspector will continue to monitor for compliance.

Response Needed By:

5. 2911.3500 VOLUNTEERS.

When volunteers are used in facility programs, a written policy and procedure shall provide that a staff member is responsible for coordinating the volunteer service program. The policy includes the following elements: A. lines of authority, responsibility, and accountability for the volunteer services; B. a procedure for the screening and selection of volunteers; C. an orientation training program appropriate to the nature of the assignment; D. a requirement that volunteers agree in writing to abide by all facility rules and policies, with emphasis on security and confidentiality of information; and E. a statement that the administrator may discontinue a volunteer activity at any time by written notice.

Inspection Findings:

There was no documentation that volunteers had agreed in writing to abide by all facility rules and policies, with emphasis on security and confidentiality of information

Corrective Actions:

Since the inspection, the facility has updated its volunteer agreement form to include a statement requiring volunteers to agree to follow all facility rules and policies.

Response Needed By:

INSPECTION COMMENTS**JJDPA Compliance**

On October 1, 2025, a Juvenile Justice and Delinquency Prevention (JJDP) Act Audit was conducted. A review of DOC Portal indicated that fourteen (14) juveniles were processed in the Wadena County Jail from October 1, 2024, to October 1, 2025. A review of data identified no violations.

DSO: No violations determined of the facility holding status offenders in the jail.

Jail Removal: No violations of the jail removal standard.

Sight and Sound Separation: The facility design and policies allow for proper sight and sound separation.

The facility does not participate in any "Scared Straight" programs for any youth that are under public authority.

Based on the documentation reviewed, zero (0) violations of the JJDP Act were identified during the Wadena County Jail inspection.

Report completed By: Lori Schopf – Senior Detention Facility Inspector

Signature:

