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# *STANDARDS MANUAL*

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MARYLAND COMMISSION  
ON  
CORRECTIONAL STANDARDS

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TABLE OF CONTENTS

INTRODUCTION

THE STANDARDS MANUAL

.CROSS REFERENCE

.DEFINITIONS .

.STANDARDS/COMPLIANCE CRITERIA/COMPLIANCE EXPLANATIONS

AUDIT PROCESS

.AUDIT REPORT CONTENTS

.AUDIT FORMS

.AUDIT AIDS

REFERENCES

.COMMISSION MEMBERS AND STAFF

.TABLES OF ORGANIZATION

.LISTING OF ADULT PLACES OF CORRECTIONAL CONFINEMENT

..ADULT DETENTION CENTERS (ADC)

..ADULT CORRECTIONAL INSTITUTIONS (ACI)

..ADULT COMMUNITY CORRECTIONAL FACILITIES (ACCF)

.STANDARDS ACT

## MARYLAND COMMISSION ON CORRECTIONAL STANDARDS

### INTRODUCTION

The Maryland Commission on Correctional Standards (Commission), an administrative agency within the Department of Public Safety and Correctional Services, was established by Act of the 1980 General Assembly. The enabling legislation is codified as Article 41, Section 4-401 of the Annotated Code. The Commission consists of eleven members, eight of whom are appointed by the Governor with the advice and consent of the Senate for terms of three years, and three ex-officio members who are the Attorney General, the Secretary of the Department of Budget and Fiscal Planning, and the Secretary of the Department of General Services. The appointed members include two citizens, two local correctional officials, two State correctional officials, one local elected official, and one representative of a national correctional standards setting organization.

The Commission is responsible to advise the Secretary of the Department of Public Safety and Correctional Services regarding standards for State and local correctional facilities which he is authorized to adopt. The Commission staff audits all adult correctional facilities regularly to determine levels of compliance, develops audit reports for Commission review and approval, provides and arranges for technical assistance to correct areas of noncompliance, routinely monitors compliance plans, and takes other such actions necessary to ensure continued compliance.

The Commission members were appointed in October 1980, and met for the first time the following month. In January 1981, an Executive Director and Assistant Executive Director were selected with the approval of the Secretary. In April 1981, a work plan was approved which authorized: continued inspection of local detention facilities under the existing minimum standards promulgated in May 1972; the development of rules and regulations to accomplish the Commission's objectives; and, the drafting of correctional standards.

In developing the standards, the staff studied case law as well as the available bodies of correctional standards from other states and those of national organizations to ensure reasonable compatibility. In addition, the staff consulted and coordinated with other departments and agencies at the local and State levels as well as with legislatively mandated Advisory Boards to ensure that the proposed standards were realistic and attainable.

In July 1981, a working set of standards was developed by the staff, approved by the Commission, and forwarded to the Advisory Boards for comment. After further reviews by the Commission and Advisory Boards, an initial draft of standards was presented to the Secretary in November 1981. These standards were reviewed by the Secretary and returned to the Commission for revision. After revision the standards were approved and proposed by the Secretary for official publication. The repeal of the former Minimum Jail and Lockup Standards was also proposed at this time.

On April 26, 1982, approximately 75 minimum standards for State prisons, local jails and community correctional facilities became effective and the former standards were repealed. These mandatory standards address the issues of Security and Inmate Control, Inmate Safety, Inmate Food Services, Inmate Housing and Sanitation, Inmate Rights, Classification, Hearings, and Administrative Record Keeping. During May 1982, nine training sessions were held throughout the State to familiarize managing officials with the Standards Manual, which was developed to assist facility personnel in meeting the standards. Auditing activities began in June 1982 and averaged about three per month.

In May 1983, the staff recognized the need to revise and amend several of the standards based on audit experiences, input from correctional practitioners and other interested parties, and an increased awareness of the intent and requirements of the standards. Suggested revisions as well as a few new standards were presented to the Commission in June 1983. The standards were then forwarded to the Advisory Boards for comment in July 1983. After further review by the Commission, the revised standards were approved at its September 28, 1983 meeting and forwarded to the Secretary who proposed them in November 1983 as Departmental regulations. During December 1983, five training sessions on the revised Standards Manual were held throughout the State to update managing officials on the changes. The initial round of audits was also completed in December 1983. The revised standards became effective on February 27, 1984, with the second round of audits starting at approximately the same time.

In the Spring of 1984, it became apparent that additional standards should be developed to complete the work on the life, health, safety and constitutional issues. Suggested concepts were presented to the Commission in May 1984. The concepts were then forwarded to the Advisory Boards for comment on June 28, 1984. Their remarks were considered by the Commission at its July 25, 1984 meeting. The standards were then developed by staff, reviewed by the Commission and passed on to the Advisory

Boards for comment on November 30, 1984. After further review by the Commission, the new regulations were approved at the January 9, 1985 meeting and forwarded to the Secretary. He approved the standards without modifications and proposed them in March 1985. All but two became effective on July 29, 1985. These two new standards were again proposed and became effective on February 10, 1986.

In June 1985, the staff also felt that the existing standards needed to be revised and amended to minimize inconsistencies in language and syntax and to address problems with interpretation. These minor changes were approved by the Commission on July 24, 1985 and forwarded to the Secretary for adoption. He approved them without modification and proposed them in November 1985. They became effective on February 10, 1986.

During December 1985, five training sessions on the revised Standards Manual were held throughout the State to update managing officials on the changes. The third round of audits was initiated in January 1986 and continued until March 1988 due to staff vacancies and other circumstances.

Preparatory to the consideration of the future direction of Commission activities in view of a new administration, a meeting of the Advisory Boards was held on May 7, 1987 to discuss the progress of the Commission, potential modifications to the standards and audit process from an operational perspective and possible development of additional regulations. Also, surveys were distributed in May and August 1987 to all managing officials of adult correctional facilities in an effort to evaluate the basic auditing principles presently in place and the feasibility of the existing regulations. In addition, the Executive Director provided a two hour workshop at the Maryland Correctional Administrators Association (MCAA) conference, held June 15-17, 1987, on the topic of standards in corrections in order to determine the perspective of local corrections officials with regard to future standards development and current implementation. On October 7, 1987, the Commission conducted its second Public Meeting to assist in the assessment of the potential for future standards development as well as possible modifications to the system of inspecting and reporting. The results of the meeting supplemented the input from the previously mentioned survey, and provided the basis for the development and presentation of a long range planning document to the Secretary. The final product was approved by the Commission at its meeting on May 25, 1988 and forwarded to the Secretary for his consideration in June 1988.

In June 1988, a "refresher" course was held at three locations for all interested parties on the audit process and "problem" standards prior to the implementation of the fourth audit cycle in July 1988. The Future Directions of the Commission plan was discussed with the Secretary on September 28 and October 5, 1988 and he met with the Commission on December 13, 1988 to chart the course for the next several years with regard to standards development and audit process/report format changes. The audit cycle continued until completion in December 1990.

In June 1990, surveys were disseminated to all managing officials soliciting input about the possibility of new standards development, revision to the existing regulations for the first time since February 1986, and modifications to the audit process/report format to address concerns about the interval between audits of respective facilities, perceived inconsistencies in decision making, interpretation problems, disruption to normal routine of facility operations, etc. Concurrently, the Department of Public Safety and Correctional Service initiated efforts to reorganize, to maximize efficiency and effectiveness. In addition, government began to experience budgetary problems which affected available personnel and other fiscal resources. As a result, the Commission requested and was granted a moratorium in January 1991 to concentrate full time on standards revisions/development and dramatic modification of the audit process and report format. Toward that end, the Advisory Boards were convened on March 15, May 17 and July 17, 1991 to review and comment on the suggested changes to the Administrative Procedures and the proposed Minimum Standards for Adult Detention Centers, Adult Correctional Institutions and Adult Community Correctional Facilities. After considerable discussion, the Secretary of the Department of Public Safety and Correctional Services submitted the process changes and revised jail standards in the August 23, 1991 edition of the Maryland Register. On September 11, 17 and 24, 1991, technical assistance/orientation sessions were held at three locations throughout the State for local jurisdictions and staff of the Division of Audit and Compliance. The fifth full audit cycle commenced in November 1991 for detention centers.

The revised standards for prisons and community corrections facilities were approved by the Commission but held pending the study of additional standards development. These regulations should be available in January 1992, at which time, orientation sessions will be held and the schedule distributed. During the period October to December 1991, formal training was held at various locations to implement the innovative concept of "duly authorized inspectors".

## THE STANDARDS MANUAL

This Manual has primarily been developed and revised as part of the technical assistance mandate to aid the managing official in meeting Commission standards governing the operation and management of community correctional facilities, correctional institutions and detention centers. The sections noted in the table of contents have been included to facilitate the development of written policies and procedures, and the gathering of compliance documentation.

The revised standards comprise one section of the Manual. In this section, a cross reference is provided to familiarize the reader with the COMAR codification changes as well as the different Descriptors. These are short phrases used to simplify references to particular regulations. A listing of Definitions follows which is presented to clarify terminology, phrases and meanings in an effort to minimize problems with interpretation of standards compliance requirements. The Compliance Criteria and Explanations will assist in understanding the intent of the standards and suggest methods to meet them. They may also be used as a guide for writing policy and procedure statements. Written policies and procedures are of primary importance in complying with virtually all of the standards as well as being crucial to the existence of good correctional management principles.

The updated Audit Process is described in detail in the next section. This section should be studied by the managing official to assist in preparation for the actual on-site visit. It specifies the time frames involved, persons responsible for certain actions, forms to be utilized, etc. It also discusses the opportunities available to the managing official to comment on the audit prior to the final distribution of the audit report. In addition, this section includes a statement on the Contents of the Audit Report, describes the Forms to be used during the audit process, as well as provides several Aids to assist the managing official and key staff in identifying documentation to substantiate compliance.

Finally, a Reference section is presented with various materials to assist the reader in understanding the standards and audit process, in the context of the Department of Public Safety and Correctional Services (DPSCS), to educate them about the enabling legislation and to inform them regarding the key actors in the process.

MARYLAND COMMISSION ON CORRECTIONAL STANDARDS  
CROSS REFERENCE FOR ORIGINAL AND REVISED STANDARDS

ADULT DETENTION CENTERS

Original Standard/Old Descriptor	New Standard/New Descriptor
A. SECURITY/INMATE CONTROL	.02 STANDARDS-SECURITY AND INMATE CONTROL
1. Use of Physical Force	A. SAME (1-4)
2. Use of Deadly Force	B. SAME
3. Emergency Security Plans (A-D)	C. SAME (1-6)
4. Security Plans Training	D. Emergency Security Plans Awareness
5. Firearms/Chemical Agents (A-G)	E. Security Equipment (1-6)
6. Firearms/Security Equipment Training	F. Security Equipment Training
7. Contingency Plan	Consolidated with .02-C
8. Inmates Exerting Control	G. SAME
9. Supervision of Inmates (A-E)	H. SAME (1-6)
10. Post Orders	I. SAME
11. Search Regulations (A-J)	J. Search Procedures (1-12)
12. Security Equipment	Consolidated with .02.E.
13. Key Control (A-H)	K. SAME (1-8)
14. Tool Control (A-D)	L. SAME (1-6)
15. Transportation-Inmates (A-D)	M. SAME (1-4)
16. Admission/Receiving Process (A-F)	N. Intake Procedures (1-5)
17. Release/Discharge Process (A-D)	O. Release Procedures (1-3)
18. Special Confinement (A-E)	P. SAME (1-5)
19. Secure Perimeter	Consolidated with .02.H.
20. Separation of Sexes	Q. SAME

B. INMATE SAFETY	.03 STANDARDS-INMATE SAFETY
1. Fire Safety Inspection	A. SAME
2. Internal Fire Safety Insp.	B. SAME
3. Fire Evacuation Plan (A-F)	C. Disaster Plans (1-5)
4. Fire Evacuation Training	D. Disaster Plans Awareness
5. Emergency Plans (A-E)	Consolidated with .03.C.
6. Emergency Plans Training	Consolidated with .03.D.
7. Emergency Medical Care (A-C)	E. Emergency Medical Services (1-3)
8. Medical Emergency Evacuation	Consolidated with .03.C.
9. Emergency Medical Training	Consolidated with .03.E.
10. Access to Health Care	F. Routine Health Services
11. Reception Medical Screening (A-C)	G. SAME
12. Dispensing Medications	H. SAME (1-3)
13. Adm. of Medications (A-D)	I. SAME (1-4)
14. Control of Medications (A-F)	J. SAME (1-6)
-----NEW STANDARD-----	K. Control of Medical and Dental Instruments (1-7)
15. Medical Testing	L. SAME
16. Licensing/Certification	M. SAME
17. Medical Judgement	N. SAME
18. Physical Examinations	O. SAME
19. Pre-Release Medical Screening	P. Release Medical Screening
20. Safety Inspections	Q. MOSHA Inspections
21. Mental Health Services	R. SAME
22. Notification of Next of Kin	S. SAME
C. INMATE FOOD SERVICES	.04 STANDARDS-INMATE FOOD SERVICES
1. Adequate Diet	A. Menu Approval
2. Frequency of Meals	B. SAME
3. Health Inspection	C. SAME

- |  |  |
|--|--|
| 4. Personal Hygiene                          | D. Dietary Hygiene Practices                           |
| 5. Medical Screening                         | E. Dietary Medical Screening                           |
| 6. Medical Diets                             | F. Special Diets                                       |
| 7. Use of Food as Punishment/<br>Reward      | G. SAME  |
| 8. Monitoring Food Services                  | H. Supervision of Food Servs.                          |
| 9. Weekly Food Service<br>Inspections        | I. Weekly Dietary Sanitation<br>Inspections            |
| 10. Religious Diets                          | Consolidated with .04.F.                               |
| 11. Control of Kitchen Utensils<br>(A-D)     | J. Kitchen Utensil Control<br>(1-6)                    |
| <br>D. INMATE HOUSING AND<br>SANITATION      | <br>.05 STANDARDS-INMATE HOUSING<br>AND SANITATION     |
| 1. General Sanitation<br>Requirements        | Consolidated with .05.C.                               |
| 2. Toxic, Caustic and<br>Flammable Materials | A. Toxic, Caustic/Flammable<br>Materials Control (1-4) |
| 3. Weekly Sanitation<br>Inspections          | B. Weekly Facility<br>Sanitation Inspections           |
| 4. Housekeeping Plan (A-B)                   | C. General Sanitation<br>Requirements (1-3)            |
| 5. Personal Accommodations                   | D. SAME  |
| 6. Personal Hygiene Articles                 | E. SAME  |
| 7. Clothing Issue                            | F. Inmate Clothing                                     |
| 8. Bedding Issue                             | G. Inmate Bedding and Linen                            |
| 9. Laundering                                | H. Inmate Laundry Services                             |
| 10. Inmate Property<br>Control (A-E)         | I. Inmate Property<br>Management (1-7)                 |
| 11. Allowable Personal Property              | Consolidated with .05.I.                               |

E. INMATE RIGHTS	.06 STANDARDS-INMATE RIGHTS
1. Nondiscrimination	A. SAME
2. Protection from Abuse	B. SAME
3. Legal Matters	C. SAME (1-5)
4. Practice of Religion	D. Religious Practices Consolidated with .06.C.
5. Legal Visits	E. Mail Practices
6. Mail	F. SAME (1-8) Consolidated with .09.A.
7. Inmate Orientation	G. Convicted Inmates/ Program Participation
8. Access to Case File	H. Pretrial Inmates/ Program Participation
9. Convicted Inmates/Programs	I. SAME
10. Pre-Trial Inmates/Programs	J. Internal Complaint System
11. Regular Exercise	K. SAME Consolidated with .06.E.
12. Complaints	L. SAME Consolidated with .02.N.
13. Personal Grooming	M. SAME
14. Postage Allowance	N. Visitation Practices
15. Access to Media	O. General Telephone Use
16. Telephone Calls	
17. Housing of Juveniles	
18. General Visitation	
19. Telephone Use	
F. CLASSIFICATION	.07 STANDARDS-CLASSIFICATION
1. Classification Procedures	A. Classification Process (1-5)
2. Classification Training	B. Classification Process Awareness Consolidated with .06.F.
3. Inmate Awareness	
G. HEARINGS	.08 STANDARDS-HEARINGS
1. Formal Disciplinary Process	A. Formal Disciplinary Hearing Process (1-6)
2. Disciplinary Process Training	B. Formal Disciplinary Hearing Process Awareness Consolidated with .06.F.
3. Disciplinary Process Awareness	

H. ADMINISTRATIVE RECORD  
KEEPING

1. Confidentiality of  
Case Files (A-C)
2. Computation of Good Time
3. Inmate Funds
4. Policy and Procedure  
Annual Review
5. Case Records (A-D)

.09 STANDARDS- ADMINISTRATIVE  
RECORD KEEPING

- A. Confidentiality of  
Case Records (1-5)
- B. Computation of Sentence  
Credits
- C. Management of Inmate Funds  
(1-4)
- D. Official Publications  
Annual Review
- E. SAME (1-5)

MARYLAND COMMISSION ON CORRECTIONAL STANDARDS

DEFINITIONS

A. The following terms have the meanings indicated.

B. Terms Defined.

- (1) "Administration of medications" means the act of giving a single dose of a prescribed or over the counter drug to an inmate according to established guidelines.
- (2) "Administrative segregation" means a form of physical separation from the general population determined by the classification process or authorized personnel when the continued presence of an inmate in the general population would pose a serious threat to:
  - (a) Life;
  - (b) Property;
  - (c) Self;
  - (d) Staff or other inmates;
  - (e) The security or orderly functioning of the facility; or
  - (f) The well being of society.
- (3) "Adult community correctional facility" means a community based program operated by local government, State government, or private corporation under contract with those jurisdictions providing a group residence and special treatment services for sentenced and unsentenced inmates

## DEFINITIONS

2

- (4) "Adult correctional institution" means the Patuxent Institution or a facility operated by the Division of Correction for the confinement of sentenced inmates.
- (5) "Adult detention center" means a facility operated by State or local government for the detention of an inmate pending adjudication and for the confinement of sentenced inmates, except for the Patuxent Institution or a facility operated by the State of Maryland.
- (6) "Adult place of confinement" means any State, local, or private adult community correctional, adult correctional institution, or adult detention center.
- (7) "Adverse job action" means a disruption to the normal operation of the institution by concerted action or inaction of facility employees.
- (8) "Annual" means an action or activity performed each calendar year at intervals of 12 months.
- (9) "Appeal" means a formal request for review of an action or decision by a higher authority.
- (10) "Applicable statute" means approved legislation or formal regulation which governs a particular activity, operation or function.

(11) "Approved standards" means those standards in the following areas:

- (a) Personnel;
- (b) Training;
- (c) Administration;
- (d) Management;
- (e) Planning and coordination;
- (f) Research and evaluation;
- (g) Physical plant;
- (h) Special management inmates;
- (i) Rules and discipline;
- (j) Mail and visiting;
- (k) Reception and orientation;
- (l) Inmate property control;
- (m) Inmate work programs;
- (n) Education and vocational training;
- (o) Library services;
- (p) Religious services;
- (q) Recreational activities;
- (r) Counseling;
- (s) Release preparation; and
- (t) Volunteers.

These standards shall apply to State adult correctional facilities and may be adopted, in whole or in part, for use by a local adult correctional facility.

## DEFINITIONS

4

- (12) "Audit" means an inspection of an adult place of correctional confinement by the Commission on Correctional Standards.
- (13) "Audit team" means Commission staff and other duly authorized inspectors.
- (14) "Authorized personnel" means an employee of the facility or agency empowered by the managing official to carry out particular, designated tasks, duties, responsibilities or functions.
- (15) "Authorized representative of the State Fire Marshal" means an employee of a local fire agency who has been empowered to fulfill the duties and perform the functions of the Office of the State Fire Marshal in that jurisdiction.
- (16) "Body cavity search" means a procedure performed by qualified health care personnel by which internal cavities of the body including anal, vaginal, oral, nasal and aural areas are physically examined manually or by instrument to check for the presence of contraband.
- (17) "Case records" means information concerning an inmate's personal, criminal and medical history, behavior and activities while incarcerated, which may include, but is not limited to:

## DEFINITIONS

5

- (a) Commitment papers;
  - (b) Court orders;
  - (c) Detainers;
  - (d) Personal property receipts;
  - (e) Visitor's list;
  - (f) Photographs;
  - (g) Fingerprints;
  - (h) Disciplinary reports and hearings results;
  - (i) Record of complaints;
  - (j) Work assignments;
  - (k) Program activity reports;
  - (l) Classification actions;
  - (m) Progress notes;
  - (n) Release of information consent forms; and
  - (o) Miscellaneous correspondence.
- (18) "Caustic material" means a substance capable of corroding, dissolving or destroying by chemical action or reaction.
- (19) "Certification" means a written document indicating that an individual or agency has complied with or obtained the formal requirements of an authorizing organization, body or association which permits the individuals or agencies to perform specified activities.

## DEFINITIONS

6

- (20) **"Chemical agent"** means an active substance used to deter activities that might cause personal injury or property damage.
- (21) **"Classification"** means a formal, comprehensive and continuing process by which an inmate is assessed for risk and needs and assigned to programs and services, a level of security and degree of supervision in relation to existing resources.
- (22) **"Commission"** means the Maryland Commission on Correctional Standards.
- (23) **"Contraband"** means an item, material or substance that is not authorized by the managing official.
- (24) **"Controlled substance"** means a medication that requires a written prescription listing the prescribing physician's or dentist's Drug Enforcement Administration registration number.
- (25) **"Deadly force"** means the force that a trained and authorized professional employee uses with the purpose of causing, or which the authorized professional employee knows will create a substantial risk of causing death or serious bodily harm.

## DEFINITIONS

7

- (26) **"Disciplinary detention"** means a form of physical separation in which an inmate found guilty by a disciplinary hearing is confined for a designated period of time apart from the general population.
- (27) **"Disciplinary hearing"** means an impartial, nonjudicial administrative procedure to determine if substantial evidence exists to find an inmate guilty of a rule violation.
- (28) **"Dispensing medication"** means the act of preparing a prescription drug by the issuance of one or more doses from a stock or bulk container by authorized health care personnel.
- (29) **"Duly authorized inspector"** means any person designated to perform an audit under the authority of the Secretary.
- (30) **"Emergency"** means a situation occurring within a facility or its property requiring the deployment of resources to save lives, protect public safety and property, ensure the proper level of security or avert or lessen the severity of the situation.
- (31) **"Emergency communications system"** means equipment which can be utilized to contact on short notice local and State law enforcement, rescue or safety agencies and facility personnel to respond to a crisis situation.

## DEFINITIONS

8

- (32) **"Emergency medical services"** means care for an acute illness, serious injury or other unexpected health care need that cannot be delayed and which is provided by qualified health care personnel, local ambulance service or hospital emergency room or a health care clinic.
- (33) **"Escape"** means unauthorized departure of an inmate from a place of lawful confinement or custody.
- (34) **"Evacuation"** means to move inmates, staff and visitors from a threatened area of hazard to a safe, secure location.
- (35) **"Exclusionary offense"** means an act alleged or committed by a child 14 years old or older which, if committed by an adult, would be a crime punishable by death or life imprisonment, or an act by a child 16 years old or older of robbery or attempted robbery with a dangerous or deadly weapon.
- (36) **"Executive director"** means the Executive Director of the Commission.
- (37) **"Exercise"** means a scheduled out of cell or room activity including individual or team sports and indoor or outdoor opportunities.

## DEFINITIONS

9

- (38) "Facility perimeter" means the outer portion of a correctional facility and grounds that provides the secure confinement of inmates.
- (39) "Formal internal complaint system" means the method by which an inmate may address grievances to the appropriate authority regarding circumstances or actions considered to be unjust.
- (40) "General population" means inmates assigned to a custody status absent restrictions with respect to programs, services and opportunities.
- (41) "Handicapped" means having a mental or physical impediment or disadvantage that substantially limits an individual's ability to use programs or services.
- (42) "Health trained" means correctional personnel who have been instructed to carry out specific duties with regard to the performance of certain health care functions.
- (43) "Indigent" means an inmate with limited funds and and insufficient resources necessary to provide for basic needs.
- (44) "Initial reception facility" means a correctional facility where an inmate is first admitted for processing from police custody, a court lockup or other holding facility.

- (45) "Inmate" means an individual in pretrial, unsentenced or sentenced status who is lawfully confined in a correctional facility.
- (46) "Inspection" means the observation or examination of an item to assess its condition and utility.
- (47) "Inventory" means a detailed listing used to determine the presence of certain items during a specified period of time.
- (48) "Juvenile" means a person under the age of majority who has not been adjudicated as an adult or who has not committed an exclusionary offense.
- (49) "Legal mail" means correspondence between an inmate and the courts, legal counsel and other judicial, legislative and executive authorities specifically designated as privileged.
- (50) "Managing official" means the person responsible for the administration and operation of a correctional facility.
- (51) "Mandatory standards" means those standards in the following areas:
- (a) Security and inmate control;
  - (b) Inmate safety;
  - (c) Food services;
  - (d) Inmate housing and sanitation;

- (e) Inmate rights;
- (f) Classification;
- (g) Hearings; and
- (h) Administrative record keeping.

These standards apply to State and local adult correctional facilities.

- (52) **"Medical isolation"** means the physical housing of an inmate apart from the general population based on a medical judgement or diagnostic decision rendered by qualified health care personnel.
- (53) **"Medical screening"** means a system of structured observation and formal health assessment by qualified health care personnel or trained person to identify an individual who poses a health or safety threat to themselves or others.
- (54) **"Mentally retarded"** means exhibiting significantly subaverage general intellectual functioning, accompanied by significant deficits or impairments in adaptive functioning, with onset before the age of 18.
- (55) **"Person in interest"** means an individual who is the subject of a record or a representative designated by that person.

- (56) "Physical examination" means a thorough evaluation of a patient's current physical condition and medical history by authorized health care personnel.
- (57) "Physical force" means the minimal amount of physical contact used by trained and authorized correctional personnel to control an individual's behavior and enforce or restore order.
- (58) "Policy" means a statement of guiding principles approved by the appropriate authority which determines the general direction of present or future decisions and actions of correctional facility personnel toward the attainment of the stated goals and objectives.
- (59) "Post orders" means a list of specific job functions, duties and responsibilities required of each duty position.
- (60) "Procedure" means the detailed and sequential set of steps or actions to ensure the implementation of the approved policy.
- (61) "Protective custody" means a form of separation from the general population for an inmate requesting or requiring protection from others or for reasons of health or safety.

- (62) "Protocol" means a written order that specifies the steps to be taken in appraising a person's physical status.
- (63) "Qualified health care personnel" means physicians, dentists, psychiatrists, psychologists, nurses, physician's assistants, nurse practitioners, pharmacists, and other professional persons licensed, registered or certified according to State requirements to practice the duties and functions appropriate to their qualifications.
- (64) "Records retention schedule" means an official document listing and describing all of the records of a facility or agency, and providing authorization for the destruction of those records that are not essential to its operation after the lapse of a stated period of time, and for permanent maintenance of those records considered to be of enduring value.
- (65) "Responding agencies and organizations" means a body which is identified in the emergency plans as potentially involved in or responsible for the implementation of a portion of these plans.
- (66) "Secretary" means the Secretary of the Department of Public Safety and Correctional Services.

- (67) "Security round" means a tour, check or other action in which correctional personnel walk through the facility, particularly inmate living and activity areas, to observe inmate behavior, monitor security and safety equipment, conduct informal searches and note irregularities or unusual circumstances.
- (68) "Sick call" means the medical care provided an ambulatory inmate who: (a) Has expressed a need for nonemergency medical attention through an established request system; and, (b) Is evaluated and treated in a clinical setting.
- (69) "Standing orders" means a written medical instruction that specifies the same course of treatment for each person suspected of having a given condition.
- (70) "Toxic material" means a substance that directly or through chemical reaction or mixture can produce possible injury or harm to the body through the skin, digestive tract, or respiratory tract.
- (71) "Training" means the formal process by which staff are made aware or informed of essential duties and responsibilities.

(72) "Trained personnel" means any person receiving required information for which documentation can be produced.

(73) "Visual search" means an observation of an inmate's unclothed body to determine the presence of contraband.

## STANDARDS/COMPLIANCE CRITERIA/COMPLIANCE EXPLANATIONS

This section contains an "INTRODUCTION" for each of the following functional areas.

- .02 SECURITY AND INMATE CONTROL
- .03 INMATE SAFETY
- .04 INMATE FOOD SERVICES
- .05 INMATE HOUSING AND SANITATION
- .06 INMATE RIGHTS
- .07 CLASSIFICATION
- .08 HEARINGS
- .09 ADMINISTRATIVE RECORD KEEPING

The Introduction is a general statement describing the standards contained in that area.

Under each Introduction is the standard but not as it appears in COMAR. The "Descriptor" has been added for purposes of ease of reference and some format changes have been made to facilitate readability. The Compliance Criteria/Compliance Explanations attempt to interpret or explain the intent of the standard, and further define what ought to be done to achieve compliance. They also serve as guidance for the Duly Authorized Inspectors to evaluate/assess the requirements to substantiate a compliance decision. They may, in addition, provide a basis for recommendations/suggestions to enhance compliance over time.

MARYLAND COMMISSION ON CORRECTIONAL STANDARDS  
STANDARDS AND COMPLIANCE EXPLANATIONS

.02 SECURITY AND INMATE CONTROL

The maintenance and provision for the secure management of a facility is essential for the public safety, well being of correctional personnel, and that of the inmate population. Without control, all other programs and services cannot function properly. The primary consideration in facility administration is preserving order and security.

A. USE OF PHYSICAL FORCE

The managing official shall have a written policy, governing the use of physical force, which includes a provision for written reports of all instances of use of force, and which shall include but not be limited to the following:

- (1) Instances of justifiable self defense;
- (2) Protection of others;
- (3) Protection of property; and,
- (4) Prevention of escape.

Compliance Criteria:

.Written policy inclusive of all elements (1-4).  
.Reports of use, if any.

Compliance Explanation:

Physical force is to be used only to the degree necessary to prevent inmates from harming themselves and others, destroying property, escaping, physically resisting lawful commands, and threatening the order of the facility. Under no circumstances is physical force to be used as punishment or discipline. It must only be used as a last resort and be in accordance with statutory authority. All instances of the use of force must be documented and submitted to the managing official no later than the conclusion of the tour of duty. All injured persons must receive prompt medical treatment.

**B. USE OF DEADLY FORCE**

The managing official shall have a written policy, governing the use of deadly force to prevent escape or manage an immediate danger to life situation, which shall include provisions for formal investigation of all instances of use of deadly force and submission of written reports for supervisory review.

**Compliance Criteria:**

- .Written policy inclusive of all elements.
- .Reports of use and investigation, if any.

**Compliance Explanation:**

Deadly force is to be used only after other actions have been found ineffective, unless the staff person believes that a person's life is immediately threatened or to prevent an escape. Only trained and authorized personnel are to initiate deadly force. All instances of the use of deadly force must be documented and submitted to the managing official for thorough investigation prior to the conclusion of the tour of duty. All injured persons must receive prompt medical treatment.

**C. EMERGENCY SECURITY PLANS**

The managing official shall have written emergency plans for riots, disturbances, hostage-taking, escapes, bomb threats, adverse employee job actions, and other such circumstances which include provisions for:

- (1) Documented coordination with appropriate responding agencies and organizations;
- (2) Specific description of staff duties and responsibilities including record keeping of all significant activities;
- (3) The placement and housing of inmates within the facility and at alternate sites when the facility or portions thereof are rendered uninhabitable;

- (4) Availability and use of an emergency communications system in urgent, special or unusual conditions;
- (5) Designation of an appropriate location to serve as an operations center during the emergency; and
- (6) Specification of the requirements to ensure command and control of the situation.

**Compliance Criteria:**

Written plans addressing all security related emergencies and inclusive of all elements.

- (1) Correspondence/records of meetings with responding agencies named in plan(s).
- (2) Designation of staff involved and their required actions, inclusive, but not limited to: post assignments, identification of essential/nonessential services, programs and operations, adjustments to shift hours, if any, etc., records of plan implementation, if any.
- (3) Identification of temporary extended housing in nonaffected areas as well as alternate housing outside the facility.
- (4) Observation of emergency communication equipment such as intercom, siren, panic buttons, radios and telephones.
- (5) Observation of designated operations center.
- (6) Chain of command listing.

**Compliance Explanation:**

The emergency security plans must include the personnel involved, specific areas of staff responsibility, disposition and supervision of inmates within the facility and/or at alternate locations, procedures for public alert/notification, provision for notification of participating/responding agencies and organizations, arrangements for medical treatment of injured persons, and provisions for prompt written reports to the managing official by all persons involved in the emergency situation. The plans must be periodically reviewed, updated

as needed, and coordinated with participating agencies and organizations, and communicated to all appropriate personnel. The plans must address such emergencies as bomb threats, hunger strikes, adverse job actions, escape, riots/disturbances, hostage-taking, etc. Efforts must be made to ensure staff safety during these emergencies through the provision of functional and appropriate communication (i.e. walkie-talkie, panic buttons, crisis telephones, audio/video monitoring systems, etc.) A strategically placed operations center and chain of command also needs to be identified. Procedures for escapes must be available to include: prompt reporting of the incident to the managing official; notification of appropriate personnel; implementation of searches and counts; notification of law enforcement and other public safety agencies, community representatives and media; provision of pertinent information to all involved parties; prompt writing of reports; and, notification of all pertinent agencies/persons upon capture

In the event of a mass "sick out", work slow down, employee strike, or other such adverse job action, a plan to continue the essential services and operations of a facility must also be developed. The plan must include emergency provisions for the supervision of the facility and inmates including staffing patterns (12 hour v. 8 hour shifts, minimum posts to be manned, positions and/or persons to be involved, etc.), descriptions of activities/programs/services to be postponed, restricted, modified etc., documented working agreements with law enforcement and other related agencies to assist in providing coverage/services, procedures for media notification, and methods to deal with the participants. Care must be taken to restrict access of sensitive provisions of the plan from the general public, inmate population and certain personnel.

**D. EMERGENCY SECURITY PLANS AWARENESS**

The managing official shall have a written policy and procedure ensuring that all personnel directly or indirectly involved are informed of pertinent aspects of the emergency security plans.

**Compliance Criteria:**

- .Written policy and procedure.
- .Training records, pre/in service training curricula, written acknowledgements for all involved personnel.
- .Staff interviews.

**Compliance Explanation:**

Accurate and complete records must be available to document that all personnel involved in responding to security emergencies have been made aware of pertinent aspects of the plans including periodic revisions/updates.

**E. SECURITY EQUIPMENT**

The managing official shall have a written policy and procedure governing the availability, control, accountability, storage and use of firearms, ammunition, chemical agents, restraining devices, communication apparatus, riot equipment and other security related equipment which includes provisions for:

- (1) Secure storage outside inmate living and activity areas;
- (2) A current master listing;
- (3) Monthly inspection and inventory to determine condition and accountability;
- (4) Specification of persons authorized access and use;
- (5) Designation of circumstances for use; and
- (6) A record of issue and inspection upon return.

**Compliance Criteria:**

.Written policy addressing all security related equipment and elements.

- (1) Observation of storage area(s).
- (2) An up to date listing of all equipment.
- (3) Routine and consistent records of monthly inventories/inspections.

- (4) Written designation of persons authorized use; observation.
- (5) Written designation of situations/conditions of use.
- (6) Distribution/return records.

Compliance Explanation:

Firearms, ammunition, chemical agents, restraining devices (i.e. handcuffs, leg irons, strait jackets, waist chains, etc.), communications apparatus, riot equipment and other security related equipment (batons, shields, helmets, body vests, etc.), must be stored in a manner which ensures that they are inaccessible to inmates and the public. Secure storage can include a safe, locked cabinet or drawer, vault, locked closet or other arsenal, armory or depository which is under close supervision. Only under emergency circumstances should weapons be allowed within the secure perimeter of the facility

Only those weapons, security devices and chemical agents, authorized by the managing official, shall be issued to trained and qualified personnel. Firearms and chemical agents shall only be used as directed by established procedures regarding the use of force, the transportation of inmates, and certain post assignments (i.e. towers, exercise yard, etc.). The distribution and return of firearms, ammunition and chemical agents must be documented and maintained on file to ensure accountability and condition.

Instruments of restraint should be used as a precaution against escape during transfer for medical reasons, and as a prevention against inmate self injury, injury to others or property damage. They should be applied only for the amount of time absolutely necessary and then only with the authorization of the managing official, qualified health care personnel or designee.

A monthly inventory and inspection must also be performed to ensure that an adequate supply of firearms, ammunition, security devices and chemical agents are available to determine their serviceability and/or expiration dates. Records must be maintained of all inventories and inspections. Any of these devices needing maintenance, repair or replacement shall be given immediate attention. An up to date master listing must be maintained to assist in inventory controls.

**F. SECURITY EQUIPMENT TRAINING**

The managing official shall have a written policy and procedure ensuring that authorized personnel are trained and qualified in the use, safety and care of firearms, chemical agents and other security related equipment.

**Compliance Criteria:**

- .Written policy and procedure.
- .Entrance level training and annual firearms certification records.
- .Pre/in-service curricula.
- .Staff interviews.

**Compliance Explanation:**

Designated personnel shall meet the firearms qualifications mandated by the Maryland Correctional Training Commission prior to being authorized their use including annual certification. Verifiable training in the use of chemical agents and security equipment must be given to all appropriate staff prior to being authorized their use. In-service training shall also be provided and documented on an on-going basis.

**G. INMATES EXERTING CONTROL**

The managing official shall have a written policy which prohibits an inmate from supervising, controlling, and exerting or assuming authority over other inmates.

**Compliance Criteria:**

- .Written policy.
- .Observation.
- .Interviews with staff and inmates

**Compliance Explanation:**

Supervision, control and authority over inmates is the sole responsibility of staff. It cannot be delegated to inmates. Any relinquishing of authority over inmates could lead to abuses (i.e. "con-boss" system, "kangaroo courts", bribery, extortion, blackmail, etc.) as well as a general breakdown of security and control. Favoritism and preferential treatment must be discouraged. The use of trustees, inmate clerks and aides (i.e. tutors) must be limited, carefully regulated, and under the close supervision/control of staff.

#### H. SUPERVISION OF INMATES

The managing official shall have a written policy and procedure providing for the supervision of inmates which includes provisions for:

- (1) One recorded count per shift;
- (2) Security rounds on each shift of inmate living and activity areas recorded by the observing facility personnel;
- (3) Monitoring of a minimum security inmate in the community to verify whereabouts;
- (4) Drug and alcohol testing of an inmate;
- (5) Secure and orderly movement of an inmate; and
- (6) Weekly recorded inspection by security personnel of locks, bars, windows, doors and the facility perimeter.

#### Compliance Criteria:

Written policy and procedure addressing all elements, staffing pattern, etc.

- (1) Records of counts.
- (2) Records of security rounds.
- (3) Records of telephone checks, on-site visits and third party notifications (i.e. letters, pay stubs, etc.)
- (4) Records of substance abuse testing and results.
- (5) Records of inmate movement (passes, escort, lists, schedules, etc.).
- (6) Routine and consistent inspection reports in/ outside of the perimeter.

#### Compliance Explanation:

Sufficient trained personnel must be available to permit 24 hour coverage to ensure continuous facility supervision and perform necessary security duties and

responsibilities. Random and regular "rounds" or "tours" must be made of all housing units to respond to the reasonable needs of inmates, to ensure their protection, and to maintain control. All significant observations, events, activities, and conditions must be documented. Other areas of the facility interior and perimeter must also be examined on a routine basis and proper records maintained.

Formal counts must be conducted regularly and recorded. Periodic informal counts are also to be performed. During a count, the inmate must be physically observed or his location noted. A master count system must be available to reflect all housing and work assignment changes, transfers, releases, admissions, court trips, etc.

Inmates in community release programs (work release, road crews, community service projects, etc.) and those having access to the public shall be routinely tested for alcohol and/or drug use, and must be periodically observed by site visits, monitored by telephone or their whereabouts otherwise verified by the appropriate authority (i.e. letters, pay stubs, etc.). Other significant elements of supervision include: spot checks of the general population to monitor substance abuse; designated methods of controlling inmate movement, including the use of a "pass system" in larger facilities, and time punch clocks or sign out/in logs for community access programs; and, regular inspections of all bars, locks, windows, doors, etc., and their maintenance. Appropriate documentation must be maintained to substantiate these practices.

#### I. POST ORDERS

The managing official shall have a written post order, acknowledged by appropriate personnel, at every security position

#### Compliance Criteria:

- . Observation of post orders at designated locations.
- . Written acknowledgement by staff.

**Compliance Explanation:**

Post orders describe the specific procedures to carry out the job assignment of a particular security position. They indicate the duties, responsibilities and requirements of a person assigned to a post as well as the schedule of activities to be followed. Post orders ensure accountability, assist in staff training, and provide continuity in the event of personnel changes. All post orders must be periodically reviewed, updated, and revised as needed with the changes communicated to appropriate personnel. A copy of the post orders must be available at each security position for easy reference by security personnel. Accurate and complete documentation must be available to show that all appropriate personnel have been made aware of the post orders and any revisions.

**J. SEARCH PROCEDURES**

The managing official shall have a written policy and procedure governing the search of the facility, vehicles, inmates, visitors, and staff which includes provisions for:

- (1) A personnel search according to established policies;
- (2) A semiannual recorded search of inmate living and activity areas;
- (3) A recorded search of an inmate involved in community activities;
- (4) Searches of other inmates;
- (5) A recorded search of a vehicle which enters the facility perimeter;
- (6) A search of a visitor performed in accordance with established policies;
- (7) Protection of inmate property;
- (8) A receipt to be given to an inmate whose personal property is confiscated and identified as returnable;

- (9) Chain of custody and the preservation of evidence according to established policies;
- (10) Inspection of body cavities to be conducted in private by qualified health care personnel when there is a reasonable belief that the inmate possesses contraband of a life-threatening or health endangering nature;
- (11) A visual search of an inmate to be performed in private by facility personnel of the same sex; and
- (12) Informing security personnel of the search regulations.

Compliance Criteria:

.Written policy and procedure addressing all elements.

- (1) Observation of records of staff searches, if any.
- (2) Records of facility searches.
- (3) Records of searches of minimum security inmates.
- (4) Observation of searches and records, if any.
- (5) Records of vehicle searches.
- (6) Observation of searches and records, if any.
- (7) Staff/inmate interviews and inmate complaints, if any.
- (8) Receipts for confiscated property and disciplinary reports.
- (9) Chain of custody records.
- (10) Records of body cavity searches, if any.
- (11) Visual search records, if any.
- (12) Written acknowledgements by staff.

Compliance Explanation:

The search procedures must include the conditions under which area, vehicle, package, and inmate and staff searches are authorized, identify the personnel designated to order and conduct searches, indicate how they will be performed, and provide for appropriate documentation to be maintained on file. Records must be maintained to verify that the search procedures have been communicated to all appropriate personnel.

A complete search should be made of every cell or living area prior to occupancy. A random, unannounced and thorough inspection (i.e. "shakedown") must be made of all areas which inmates have access on a regular basis with records maintained.

Vehicles transporting personnel, inmates or supplies are to be thoroughly searched to prevent escape and the introduction of contraband. All visitors shall be informed of the search policy to alleviate any confusion and to discourage the introduction of contraband.

All inmates involved in community activities or having direct contact with the public shall be thoroughly searched upon return to the facility or housing areas. Inmates in the general population must also be searched as deemed appropriate to maintain order and security. Every attempt should be made to keep trustees and inmates on community release separate from the general population to minimize the introduction of contraband.

Strip searches are necessary to maintain the security of the facility and to protect staff as well as inmates. Strip searches shall be done on all sentenced inmates before they are placed in the general population, and may be done on other inmates as deemed appropriate (e.g. return from contact visits, etc.). Whenever they are performed, they must be done in private by a member of the same sex, unless under emergency situations.

Every attempt must be made to ensure the dignity and integrity of the person who is searched, to respect personal property, and to preserve any evidence of a suspected crime. These latter searches must also provide for the legal protection of individual rights afforded under the 4th Amendment. Care must be taken

to ensure that the chain of custody is maintained. Metal detectors and body sensors shall be used instead of "pat-downs", "strip" or body cavity searches whenever possible. When body cavity searches are warranted, they must be performed in private only by qualified health care personnel. Otherwise, less obtrusive methods can be used to locate and confiscate suspected contraband and/or weapons.

**K. KEY CONTROL**

The managing official shall have a written policy and procedure governing the availability, control, storage, and use of facility keys which includes provisions for:

- (1) Secure storage outside inmate living and activity areas;
- (2) Quarterly inspection to determine condition;
- (3) Daily inventory to ensure accountability;
- (4) Specification of persons authorized access and use;
- (5) A record of issue and return;
- (6) A duplicate key for each lock;
- (7) Designation of emergency and restricted keys; and
- (8) A current master listing.

**Compliance Criteria:**

Written policy and procedure addressing all elements.

- (1) Observation of storage areas.
- (2) Routine and consistent records of quarterly inspections.
- (3) Routine and consistent records of daily inventory.
- (4) Written designation of persons authorized access/use; observation.
- (5) Records of issue/return.

(6) Observation.

(7) Observation; listing of restricted/emergency keys.

(8) An up to date listing of all keys.

Compliance Explanation:

Keys, particularly those associated with perimeter security doors, shall be stored in a manner which ensures that they are inaccessible to inmates and the public. Secure storage can include a safe, locked cabinet or drawer, vault, locked closet or other depository which is under close staff supervision. If feasible, they should be secured in a central location and stored in a manner which permits an easy determination of their presence or absence. At least a daily inventory must be made to ensure that keys are readily available. All keys shall be inspected at least quarterly to determine their condition. Records must be maintained of all inventories and inspections. Any keys needing maintenance, repair or replacement must be given immediate attention. All keys are to be numbered and indicated on an up to date master listing for easy reference. A duplicate key must be maintained for each lock to address any problem situations (i.e. key broken, bent, lost, etc.).

Keys restricted for issue to certain personnel must be clearly identified. Any key control system shall provide for a current accounting of the location and possessor of each key, emphasizing documented control/issue when keys are being passed from shift to shift, person to person, etc. Inmates must never have access to any keys with the exception of those to their living quarters or work assignments, when appropriate, and to personal lockers. Security keys must never be removed from the facility unless under emergency circumstances or as directed by the managing official.

Keys to be used in the case of emergency must be clearly designated for identification by sight (i.e. color-coded, etc.), and/or touch. These keys shall only be issued to appropriate personnel at the order of the managing official or designee.

**L. TOOL CONTROL**

The managing official shall have a written policy and procedure governing the availability, control, storage and use of tools which includes provisions for:

- (1) Secure storage outside inmate living and activity areas;
- (2) Quarterly inspection to determine condition;
- (3) Daily inventory to ensure accountability;
- (4) Specification of persons authorized to use;
- (5) A record of issue and return; and
- (6) A current master listing.

**Compliance Criteria:**

.Written policy and procedure addressing all elements..

- (1) Observation of storage areas.
- (2) Routine and consistent records of quarterly inspections.
- (3) Routine and consistent records of daily inventory.
- (4) Written designation of persons authorized use; observation.
- (5) Records of issue/return.
- (6) An up to date listing of all tools.

**Compliance Explanation:**

Tools such as hacksaws, hammers, screw drivers, welding equipment, etc., can cause serious injury or death. Consequently, they must be locked in a secure location which ensures they are inaccessible to unauthorized staff and inmates. Secure storage can include a safe, locked cabinet or drawer, vault, locked closet or other depository which is under close staff supervision.

They should be stored in a manner which permits an easy determination of their presence or absence. An up to date listing of all tools must be available for easy reference and consideration should be given to an identification system (i.e. etching, color-coded, etc.).

A system must be devised to record the daily inventory, distribution and return of tools to provide for proper security and control. All tools shall be inspected at least quarterly to determine their serviceability. Any tools needing maintenance, repair or replacement shall be given immediate attention. Inmates must not be allowed access to tools except for designated circumstances in the performance of assigned duties and responsibilities. Only those personnel involved in maintenance and related matters shall be permitted the use of tools.

#### **M. TRANSPORTATION OF INMATES**

The managing official shall have a written policy and procedure governing the transportation of an inmate outside the facility which includes provisions for:

- (1) Current weapons qualification and required motor vehicle licensure of a person authorized to transport;
- (2) Designation of circumstances for use of firearms, chemical agents, and restraining equipment;
- (3) Protection of inmates, staff, public, and property; and
- (4) Appropriate response in the event of accident.

#### **Compliance Criteria:**

.Written policy and procedure addressing all elements.

- (1) Records of security equipment qualifications and vehicle licensure.
- (2) Observation and staff interviews.
- (3) Records of inmate and vehicle searches; vehicle safety/maintenance checks, etc., if any.
- (4) Accident reports, if any.

Compliance Explanation:

Only those security personnel trained and certified in, qualified in the use of firearms, first aid and CPR, chemical agents and restraining equipment, and aware of the appropriate security precautions and vehicle safety regulations shall be assigned to transportation duties. A listing of these staff members must be maintained for easy reference. Efforts should be made to ensure that adequate personnel are provided as escorts. At least one staff member of the same sex as the inmates must be involved in transportation duties. The circumstances, situations and conditions under which firearms and security equipment can be used during transportation must be specified and clear instructions made available to all appropriate personnel. Particular attention is to be given to the potential of escape and possible physical harm to staff, inmates and the public as a result of the use of a motor vehicle.

All drivers must be appropriately licensed to operate the transportation vehicle and both vehicle and driver properly insured according to applicable statutes and regulations. All motor vehicles (i.e. automobiles, buses, vans, etc.) shall be properly maintained in safe operating condition. Regular safety inspections and routine maintenance records shall be maintained on file. Approved fire extinguishers and first aid kits shall be available in the case of emergency.

Extreme care must be taken with regard to vehicle keys. When the vehicle is not in use, ignition keys are to be removed and secured. All doors and trunks are to be remain locked at all times. Seat belts are to be used as required by applicable regulations. Instructions regarding actions to be taken in case of an accident (i.e. use of CPR/first aid, abandonment of vehicle, communications with base station, etc.) shall be made available to appropriate personnel.

**N. INTAKE PROCEDURES**

The managing official shall have a written policy and procedure governing the admission of a newly received inmate to an initial reception facility which includes provisions for:

- (1) Verification of legal commitment;
- (2) Search of an inmate in accordance with applicable case law;
- (3) A system of positive identification of an inmate;
- (4) Collection of personal data; and
- (5) Documentation of opportunity to make initial telephone calls.

**Compliance Criteria:**

.Written policy and procedure addressing all elements.

- (1) Review of commitment records.
- (2) Search records, if any.
- (3) Review of records and observation.
- (4) Review of intake records.
- (5) Records of calls.

**Compliance Explanation:**

Inmates entering a correctional setting may be unfamiliar with staff expectations and unsure of institutional regimen. Therefore, efforts should be made to assign personnel to the receiving unit with adequate experience in handling inmates, considerable knowledge of the facility operations, and good interpersonal skills to ensure a consistent, effective admissions process.

Care must be taken to substantiate that the inmate is properly detained in the custody of the jurisdiction in questions by virtue of the receipt of a legal commitment or other appropriate court document. A complete and thorough visual examination of the subject inmate (i.e.

for contraband, identifying factors, physical characteristics and medical problems) should be performed except on pre-trial inmates (i.e. temporary detainees) who have not appeared before a commissioner or judge or who are expected to be released prior to placement in the general population (i.e. within 24 hours). Only in cases when either the charge, the circumstances surrounding the alleged offense, the frisk search, or any other information available to the intake officer (i.e. suicide risk) indicates that the inmate may be in possession of contraband of a life threatening or health endangering nature can a strip search be considered on "temporary detainees". (Reference Smith v. Montgomery) Inmates should also be afforded opportunity to shower and receive hygiene care/decontamination as indicated. Photographing, fingerprinting and assignment of a registering number to each inmate for identification purposes must be performed.

Upon admission, all pretrial inmates must be permitted to complete at least two local or collect long distance telephone calls in privacy to inform attorneys, bondsmen, family, friends, etc., of their location, and to solicit assistance in securing release. Procedures should include provisions for dialing the number, verification of the person identified by the inmate to receive the call, conditions under which communication may be monitored, etc. Records must be maintained of all telephone calls made by arrested persons.

Personal information to initiate the case record file should include such things as: description of the crime (official and/or inmate version); summary of the criminal history (adult and/or juvenile, arrests and/or convictions, etc.); social information (i.e. family history, use of drugs and/or alcohol, etc.); medical/psychological history (hospitalizations, injuries, medications, suicide attempts, etc); educational/vocational levels and achievements; employment status and history; general intake information (i.e. name, date of birth, address, etc.); and, staff recommendations.

Efforts should be made to keep the newly admitted inmate separate from the general population to permit a close observation/assessment of behavior by the staff prior to initial housing assignment.

O. RELEASE PROCEDURES

The managing official shall have a written policy and procedure governing the release of an inmate which includes provisions for:

- (1) Verification of identity;
- (2) Authentication of authorization to discharge; and
- (3) Notification to affected agencies and persons as required by law or regulation.

Compliance Criteria:

.Written policy and procedure addressing all elements.

- (1) Review of records and observation.
- (2) Review of release records.
- (3) Review of case records.

Compliance Explanation

Efforts should be made to assign personnel to the discharge unit with adequate experience in dealing with inmates and the public, appropriate awareness of the criminal justice system and sufficient social skills to ensure a consistent and efficient release process.

From the standpoint of liability and public safety, considerable care must be taken to correctly identify the subject inmate scheduled for release or transfer (i.e. by fingerprints, identification card, etc.), and to verify the authorizing documentation presented to discharge the inmate (i.e. writ of habeas corpus, parole release order, court order, release by expiration of sentence, etc).

Prior to discharge or as soon thereafter as possible, all matters relating to the facility should be completed (i.e. claims for lost or damaged personal property, reimbursement for lost or destroyed issued property, reconciliation of any outstanding fund balances/debts, medical screening, etc.). Records should be kept of these actions.

All agencies or authorities (i.e. local health department, offices of the Division of Parole and Probation, law enforcement agencies, other correctional facilities, judicial offices, and other affected persons, such as victims, must be contacted if required (Article 27, Section 761) prior to an inmate's release or as soon thereafter as possible with appropriate records maintained on file.

P. SPECIAL CONFINEMENT

The managing official shall have a written policy and procedure governing the placement, removal, supervision, and rights of an inmate assigned to administrative segregation, disciplinary detention, medical isolation and protective custody status which includes provisions for:

- (1) Identification of persons authorized to place and remove an inmate from special confinement;
- (2) Designation of circumstances and conditions warranting assignment and release;
- (3) Specification of time frames, methods, and persons authorized to review status;
- (4) Access to services, programs, and activities consistent with the inmate's status; and
- (5) Maintenance of supervision records of specified activities and occurrences.

Compliance Criteria:

.Written policy and procedure addressing all special confinement statuses and elements.

.(1-5) Records review; observation.

Compliance Explanation:

Separation from the general population is only to be used when there is no other viable alternative to protect the inmate, staff, public, property and facility security and order, and then only to the extent necessary to return the inmate(s) and facility to normal.

Only the managing official, or designee, or in the case of medical isolation, qualified health care personnel, are authorized to order the immediate placement of inmates in special confinement status. Otherwise, the placement can only be made after a due process hearing before a person or committee of persons not directly involved in the matter. If the placement is made pursuant to emergency circumstances, a review hearing must take place as soon as possible thereafter. In the case of protective custody, inmates may request such status with a signed consent form; however, records must be maintained of all such actions.

Reviews of the status of those assigned to special confinement must be performed on a specific and routine basis to determine if the reasons for such confinement still exist. The managing official, designee, qualified health care personnel, or a designated committee of persons, have the authority to review and/or remove inmates from segregation status. Records of all such actions must be maintained on file.

Those assigned to administrative segregation (e.g. escape risks, notorious criminals, etc.), which may be for relatively extensive periods of time, must be provided with access to programs conducive to their well being. Those inmates assigned to protective custody (e.g. youthful offender, has enemies, etc.) can be permitted to participate in as many programs and services as possible subject only to considerations of facility order and security.

Placement in medical isolation can be for as long as the condition causing such decision exists and/or as deemed appropriate by the medical authority. Inmates must be permitted to participate in as many programs and services as possible subject to considerations of the health and security of the affected inmate, other inmates, facility staff, visitors and public. Disciplinary detention is ordinarily given for short periods of time in order to maintain control and manage behavior. Inmates assigned to this status shall be allowed access to programs and services conducive to their well being and consistent with the safety and security of the facility. If there is adequate justification for

the removal of some or all personal items and the restriction from some or all programs and services, the decision must be made by the managing official or designee in advance of the move to segregation or as soon thereafter as possible, unless circumstances otherwise dictate. The action and rationale for the decision must be documented.

The following programs, services and items/articles should be available to inmates in special confinement to the extent possible that they are to those assigned to the general population: prescription medications; non-degrading clothing unless adjusted for self protection (i.e. belts, shoe strings, etc.); access to personal items unless their destruction or abuse may lead to self injury or imminent danger to staff (i.e. eye-glasses, writing utensils, etc.); wholesome, nutritional meals; regular shaving and shower opportunities; issue and exchange of bedding and clothing; barbering and hair care services; mail, telephone and visitation privileges; access to legal reference and general reading materials; recreation and exercise opportunities; access to programs (i.e. education, vocational training, substance abuse therapy, etc.); and, access to treatment professionals (i.e. physicians, nurses, counselors, psychologists, etc.).

Records must be maintained of all routine and significant activities, occurrences and matters of interest relating to inmates relegated to special confinement (i.e. admissions, visits, showers, exercise periods, unusual behavior, mail, releases, etc.).

Regular rounds must be made of these housing areas by supervisory staff to ensure proper treatment. Frequent observations shall be made by housing personnel to ensure that emergency situations and circumstances are routinely noted and promptly addressed (e.g. every 30 minutes for "suicide watch", etc.), all of which must be recorded and maintained on file.

Q. SEPARATION OF SEXES

The managing official shall provide living quarters for male and female inmates which are separate and distinct to ensure privacy.

Compliance Criteria:

.Observation.

Compliance Explanation:

Male and female inmates must have separate and distinct sleeping quarters, both visually and to the extent possible, acoustically, to provide privacy, maintain individual integrity and ensure facility order and security. However, both sexes shall have equal access to facility program space and opportunities.

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**.03 INMATE SAFETY.**

It is in the best interest of the general public, correctional administrators, and the appropriate governmental authorities that the life, health and safety needs of the incarcerated population, facility employees and visitors are met on a continuing basis. Fire preervices, medical, dental, and mental health services, and the protection against other life threatening or health endangering conditions are essential to the effective administration, sound management, and efficient operation of a correctional facility.

**A. FIRE SAFETY INSPECTIONS**

The managing official shall have a written policy and procedure ensuring that the facility meets all fire safety regulations as verified by an annual inspection by authorized representatives of the State Fire Marshal.

**Compliance Criteria:**

.Written policy and procedure; observation; documented annual inspections; verification of corrective action.

**Compliance Explanation:**

Inspections by the State Fire Marshal or authorized representatives are to be implemented at 12 month intervals to ensure total compliance with State COMAR 12.13.01 and/or local fire safety codes. Any violations of the requirements are to be corrected as soon as practicable and in accordance with time frames established by the authority having jurisdiction. Any exceptions, variances or equivalencies must be approved in writing by the appropriate authority. Consideration should be given to the development of a "tickler" system to ensure inspections are performed on schedule. Reports of these annual inspections and corrective actions are to be maintained on file.

**B. INTERNAL FIRE SAFETY INSPECTION**

The managing official shall have a written policy and procedure requiring facility personnel with documented training in fire safety practices to perform monthly internal inspections to monitor compliance with fire safety and prevention regulations.

**Compliance Criteria:**

.Written policy and procedure; observation; routine and consistent monthly inspection reports; written designation of internal fire safety officer(s); record of training.

**Compliance Explanation:**

Monthly inspections of the facility by qualified personnel are necessary to ensure that: equipment is functional; evacuation routes are clearly marked; exits are accessible; combustibles are properly stored; housing areas are free of excessive materials; and, the facility fire safety and prevention program is being followed. This program should include provisions for: an interior alarm system; several means of egress; prompt notification of the fire department and other public safety agencies; a heat and/or smoke detection system; emergency lighting; proper location and periodic inspection of fire extinguishing equipment; and, a means to evacuate smoke. The program should also provide for the use of fire retardant mattresses and pillows and noncombustible building materials, and the specification of the types and quantity of combustibles permitted in housing areas. Training of internal inspectors must be documented and records of the inspections and corrective action are to be maintained on file.

**C. DISASTER PLANS**

The managing official shall have written disaster plans for fires, chemical spills, civil defense, natural disasters, power outage and other such circumstances which include provisions for:

- (1) Documented coordination with appropriate responding agencies and organizations;

- (2) Specific description of staff duties and responsibilities;
- (3) Full, partial and medical evacuation addressing:
  - (a) The handling of injured persons;
  - (b) Security considerations;
  - (c) Instructions for responding emergency personnel and vehicles; and
  - (d) Movement of affected persons to safe areas;
- (4) The placement and housing of inmates within the facility and at alternate sites when the facility or portions of it are rendered uninhabitable; and
- (5) Quarterly fire drills on each shift to include inmates, unless their inclusion compromises security.

Compliance Criteria:

Written plans addressing designated disasters and including all elements.

- (1) Correspondence/records of meetings with responding agencies named in the plan(s).
- (2) Designation of staff involved and their required actions, inclusive of, but not limited to: post assignments, identification of essential/nonessential services/programs/operations, adjustments to shift hours, if any, etc.
- (3) Records of implementation, if any; staff interviews.
- (4) Identification of temporary internal housing in nonaffected areas as well as alternate housing outside of the facility.
- (5) Routine and consistent records of fire drills on each shift.

### Compliance Explanation

Communication will enhance cooperation and ensure more efficient and workable procedures by accessing the specialized knowledge and expertise of responding agencies/organizations. The instructions for staff during these crisis situations need to be clear and comprehensive to include, but not be limited ] to: proper use of security equipment for the evacuation and transportation of inmates to other secure to site locations; attention to victims/injured persons including staff, visitors and inmates (i.e. movement v. nonmovement, etc.); designation of the location of litters, stretchers, etc.; indication of the routes of access/egress to be used by emergency vehicles/personnel; security precautions concerning escort of emergency personnel; handling of nonaffected inmates, etc. (i.e. lockdown, etc.); procedures for the notification of responding persons, agencies and organizations, etc. Evacuation procedures should include a designation of routes which are clearly marked by use of charts, arrows on the walls, floors and/or other readily understood and clearly visible signs. Equipment necessary to maintain essential lights, power and communication is critical to maintain the outside communications and life sustaining functions.

The plans need to identify areas within the facility to be used as temporary shelters when portions of the structure are no longer appropriate for housing as well as external locations (e.g. schools, National Guard/Reserve installations, other correctional facilities, etc.) capable of serving as living quarters for an extended period. Evidence of agreements with these external locations are to be maintained on file.

Drills which closely approximate actual emergency conditions are to be held quarterly on each shift with records maintained on file. All parts of the facility should be included at least once a year. If practical and in concert with security considerations, inmates should be included to enhance their familiarity with their expected responses during such emergencies. Comprehensive reports should be retained on file of all actual disaster situations as well as the handling of all cases requiring medical attention.

**D. DISASTER PLANS AWARENESS**

The managing official shall have a written policy and procedure ensuring that all personnel are informed of the disaster plans.

**Compliance Criteria:**

.Written policy and procedure; training records; pre/in service training curricula; written acknowledgements for all involved personnel; staff interviews.

**Compliance Explanation:**

Awareness of disaster plans is an essential element of "orientation" for all full time, part time and contractual facility personnel, excluding volunteers. All personnel are to be apprised of changes to the plans as they occur with documentation maintained on file. Any and all methods to inform personnel need to be routinely documented and clearly demonstrable.

**E. EMERGENCY MEDICAL SERVICES**

The managing official shall have a written policy and procedure ensuring 24 hour emergency medical services including provisions for:

- (1) Access to health care facilities and qualified health care personnel;
- (2) Designation of first aid kit content and location, approved by qualified health care personnel, and monthly inventories to determine supply; and
- (3) A person with current certification in basic first aid and cardiopulmonary resuscitation (CPR) available to inmate living and activity areas on each shift.

**Compliance Criteria:**

.Written policy and procedure including all elements.

- (1) Observation; contracts/agreements; duty schedules

- (2) Observation; routine and consistent record of monthly inventories; written kit content approval.
- (3) Up to date certification records; duty schedule and post assignments.

Compliance Explanation:

Facility, contractual and off-site resources must be available to address emergency medical care needs. This includes arrangements with nearby hospitals, clinics or other facilities for services which cannot appropriately be provided within the facility, "on call" physician service, contractual agreements to provide a broader range of services, etc. First aid kits, which are approved by qualified health care personnel, must be located at readily known and accessible locations throughout the facility and in facility vehicles as determined by the health authority. The contents of the first aid kits are to be regularly inventoried on a monthly basis and their condition and supply evaluated. Accurate records must be maintained on file of kit replenishment.

The training program established in conjunction with qualified health care personnel should contain at a minimum: an awareness of potential emergency situations including the recognition of the signs and symptoms of gross and obvious injuries, illnesses and emotional disturbances; a knowledge of what to do in life threatening or health endangering situations; and, an acquaintance with emergency medical procedures including the methods of obtaining assistance. The training must be provided to appropriate personnel prior to permanent work assignment with records maintained on file. The essential elements (Basic First Aid and CPR) of the training program are to be repeated on a regular basis according to established guidelines to maintain current certification. Care must be taken to ensure a maximum response time of four minutes to any area of the facility or grounds by properly certified personnel.

F. ROUTINE HEALTH SERVICES

The managing official shall have a written policy and procedure specifying the method for requesting weekly access to sick call and the provisions for

prompt staff referral of special medical problems to appropriate health care professionals, which is communicated to personnel having direct contact with inmates.

Compliance Criteria:

Written policy and procedure; contracts/agreements; schedules; implementation records; medical files; pre/in service training curricula; written acknowledgements for involved personnel; staff interviews.

Compliance Explanation:

The system for processing medical complaints must be communicated to all staff during orientation or prior to permanent assignment, and should be part of regular in-service training. Records of staff awareness need to be maintained on file. The sick call access and referral process, for the handling of routine health problems, must be without unreasonable delay and not be subject to "quota" systems. Current, confidential and accurate records of inmate treatment are to be maintained.

G. RECEPTION MEDICAL SCREENING

The managing official shall have a written policy and procedure which provides that medical screening of an inmate is conducted by health trained or qualified health care personnel within 24 hours of admission to an initial reception facility.

Compliance Criteria:

Written policy and procedure; contracts/agreements, implementation records; medical files; training records, if appropriate.

Compliance Explanation:

As soon as possible, but not more than 24 hours after admission, medical screening is to be performed on all inmates. Nonmedical personnel performing these tasks must receive appropriate training by qualified health care personnel which is recorded and maintained on file. The health assessment should be completed prior to movement to the general population. The assessment should include an observation and identification of behavior (state of

consciousness, mental status, appearance, conduct, ease of movement, etc.), and physical condition (tremors, sweating, rashes, infestations, bruises, lesions, cuts, abrasions, body deformities, needle tracks, etc.) Significant family and personal history information including immunization status, substance abuse background, conditions requiring immediate medical attention (e.g. medical diet, etc.), medications taken, the collection of data to compile medical, dental and psychiatric history (e.g. hospitalizations, etc.), and signs and symptoms of communicable diseases should also be noted. Medical screening will assist in making proper housing, work and other classification referrals, and may minimize the potential for further complications such as deaths, epidemics, suicides and assaults. The medical screening should take place in a location and under conditions which maintain the dignity and integrity of the inmate. Records are to be maintained as part of the medical file of screenings.

#### H. DISPENSING MEDICATIONS

The managing official shall have a written policy and procedure for the dispensing of prescribed medication which includes provisions for:

- (1) Prescription initiation by authorized persons;
- (2) Designation of the method for the filling of prescription orders; and
- (3) Specification of the system of packaging and labelling of prescription medication.

#### Compliance Criteria:

.Written policy and procedure addressing all elements.

- (1) Contracts/agreements/schedules; records of prescription origin with required counter-signature, etc.
- (2) Contacts/agreements; observations; medical records.
- (3) Contracts/agreements ; observations; staff interviews.

Compliance Explanation:

The methods of initiating, filling, transferring/transporting/handling and packaging, and labelling of prescription medications for inmate consumption must conform to current Department of Health and Mental Hygiene (DHMH) and Drug Enforcement Administration (DEA) guidelines and regulations. Records to support acceptable/required practices must be maintained for examination and verification by all regulatory agencies. Prescription medication may only be dispensed by a pharmacist or authorized prescriber, including a licensed physician, dentist and podiatrist or nurse practitioner and physician's assistant with appropriate physician countersignature within 48 hours. Techniques for filling prescriptions, such as facsimile processing, call-in, daily pharmacy visits, etc., which are in use, must correspond to existing procedural content. Maintenance of stock and/or bulk medications should be limited and a formulary, listing medication approved for the treatment of inmate patients, should be considered as a means to control the variety/quantity of medications within a facility.

Consideration should also be given to the use of unit dosage in correctional facilities. The use of unit dosages: permits the return of unused medications to a pharmacy for credit; allows for better control of medications; is safer and more sanitary; and, can limit the amount of medication maintained by the facility. Medication must be packaged in properly labelled containers with name, contents, directions, "stop" dates, and other vital information clearly indicated. The prescription renewal procedures should also be identified, routinely followed and properly documented. A modified unit dose system using blister cards/packages/containers, which are dispensed by a pharmacist and hermetically sealed, may be practical and cost efficient for many correctional facilities. Inmates on work release or other authorized absences from the institution, needing a limited amount of medication while out of the facility, should be issued a properly labelled container by responsible facility personnel prior to release.

**I. ADMINISTRATION OF MEDICATIONS**

The managing official shall have a written policy and procedure for the administration of prescription and over the counter medication which includes provisions for:

- (1) Standing orders or protocol approved by the physician in charge;
- (2) Instruction of nonmedical personnel on the proper method of administration by qualified health care personnel;
- (3) A record of the administration and refusal of medications; and
- (4) Designation of circumstances for inmate self-administration.

**Compliance Criteria:**

Written policy and procedure addressing all elements

- (1) Approved documents.
- (2) Training curricula and records; staff/inmate interviews; observations.
- (3) Review of records.
- (4) Observation; review of records; staff/inmate interviews, etc.

**Compliance Explanation:**

Medications are only to be administered by trained/qualified personnel according to the directions of the prescribing authority which may include standing orders and/or protocol. Only under designated circumstances may medications be handled by inmates (i.e. self-administration) and then only when specifically authorized by the attending physician. The swallowing of a tablet, capsule or liquid (or self-injection) should be personally observed by administering personnel when the single dose method is utilized. Records of distribution or refusal of

medication are to be maintained in a manner and format approved by the facility medical authority and placed in the medical file. Procedures for the administration of over the counter medicines also need to be formalized, including an appropriate record keeping system. Nonmedical personnel involved in these practices must be trained in the proper methods of administration by qualified health care personnel with records of training maintained on file.

**J. CONTROL OF MEDICATIONS**

The managing official shall have a written policy and procedure governing the availability, control, storage, and management of prescription, stock and over the counter medications which includes provisions for:

- (1) Secure storage of facility medications;
- (2) Specification of persons having access;
- (3) Recorded disposal of unused and expired medications;
- (4) A weekly inventory of controlled substances;
- (5) Handling of personal medication of a newly admitted inmate; and
- (6) Handling of personal and facility prescribed medication for an inmate transferred or released.

**Compliance Criteria:**

Written policy and procedure addressing all elements.

- (1) Observation of storage areas.
- (2) Written designation of authorized access; observation.
- (3) Records of disposition.
- (4) Records of routine and consistent weekly inventories.

(5) Observation; records; staff interviews.

(6) Observation; records; staff interviews.

Compliance Explanation:

Medications must be kept in a secure location which ensures they are inaccessible to inmates and unauthorized personnel. Secure storage can include a safe, locked cabinet or drawer, locked closet or other depository which is under close staff supervision. All unused and expired medications are to be disposed of or returned to the pharmacy in accordance with DHMH/DEA guidelines. Records of these actions must include all persons witnessing or participating in the disposal/return. A record should include the amount and type of medication involved, date destroyed/returned and method of disposal. If unit dosage is used or modified unit doses are packaged in blister cards by an authorized prescriber, the medications may be returned for credit to the pharmacy from which they were dispensed.

On a weekly basis the amount and type of controlled dangerous substances (i.e. those requiring the use of a physician's registration number) are to be reconciled by designated personnel with records maintained on file. The handling and management of personal medications of inmates upon admission to the facility and the disposition of facility and personal prescription medications at release/transfer must be specified and records maintained.

**K. CONTROL OF MEDICAL AND DENTAL INSTRUMENTS**

The managing official shall have a written policy and procedure governing the availability, control, storage, and use of needles, syringes and instruments which includes provision for:

- (1) Secure storage outside inmate living and activity areas;
- (2) Specification of persons having access and use;

- (3) Quarterly inspection to determine condition;
- (4) Weekly inventory to determine accountability;
- (5) Disposal of needles and syringes according to established regulations;
- (6) Maintenance of a record of use of needles and syringes; and
- (7) A current master listing of medical and dental instruments.

**Compliance Criteria:**

Written policy and procedure addressing all elements.

- (1) Observation of storage areas.
- (2) Written designation of authorized access; observation.
- (3) Records of routine and consistent quarterly inspections.
- (4) Records of routine and consistent weekly inventories.
- (5) Records of routine and consistent disposal.
- (6) Records of routine and consistent use.
- (7) Up to date listing of all implements.

**Compliance Explanation:**

Medical and dental instruments (i.e. needles, syringes, scalpels, etc.) must be kept in secure locations which ensure they are inaccessible to inmates and unauthorized personnel. Secure storage can include a safe, locked cabinet or drawer, locked closet or other depository which is under close staff supervision. A current listing of all instruments is to be maintained for inventory purposes. Control procedures are to include provisions for weekly inventories to determine accountability and quarterly inspections to assess condition. Records of the use of needles/syringes and their disposal, in accordance with DHMH regulations, are to be maintained on file.

**L. MEDICAL TESTING**

The managing official shall have a written policy prohibiting the use of an inmate for medical, pharmaceutical or cosmetic experiments, that does not preclude the individual treatment of an inmate based on need for a specific medical procedure which is not generally available.

**Compliance Criteria:**

.Written policy and procedure; observations; contracts/agreements; staff/inmate interviews.

**Compliance Explanation:**

The responsibility of the managing official to ensure the safety and well being of inmates cannot be guaranteed when they are involved in medical experiments. Even though these programs may be voluntary, they are not permitted because inmates cannot truly exercise free will due to the possibility of subtle inducements, the promise of reward or monetary payment, etc. However, this should not preclude individual treatment of an inmate based on the need for a specific medical procedure which may be generally available in the community.

**M. LICENSING/CERTIFICATION**

The managing official shall have a written policy and procedure ensuring that health care personnel who provide services to inmates have current credentials, certifications or licenses according to State requirements.

**Compliance Criteria:**

.Written policy and procedure; verification of up to date credentials; contracts/agreements; roster.

**Compliance Explanation**

All qualified health care personnel (i.e. full time and part time, contractual) who provide services to inmates must meet State licensing/certification requirements to perform the duties and responsibilities specified in written job descriptions. Verification of current credentials must be maintained on file to document that they are qualified by training and experience

**N. MEDICAL JUDGEMENT**

The managing official shall have a written policy specifying that matters of medical, psychiatric, and dental judgement are:

- (1) The province of qualified health care personnel; and
- (2) Not subject to interference by facility personnel unless necessary to maintain order and security.

**Compliance Criteria:**

Written policy; observation; staff/inmate interviews.

**Compliance Explanation:**

No restrictions can be imposed by managing officials on matters of medical, psychiatric, and dental judgements except those necessary to maintain order and security. Correctional personnel are to facilitate the prescribed instructions of medical personnel in such matters as medication dispensation, medical diets, medical/psychiatric after care, special work assignments or work restriction without interference or unnecessary delay.

**O. PHYSICAL EXAMINATIONS**

The managing official shall provide for a written policy and procedure requiring a physical examination of an inmate by qualified health care personnel within 14 days of admission at the initial reception facility

**Compliance Criteria:**

Written policy and procedure; medical records.

**Compliance Explanation:**

A health appraisal on each inmate, excluding intra-system transfers, is to be completed no later than 14 days following admission. If there is documented evidence of a health appraisal within the previous

90 days, a new examination is not required. The health appraisal should include, but not be limited to: an observation of the individual; review of receiving screening; collection of pertinent data on height, weight, pulse, blood pressure, temperature and other vital signs; laboratory and/or diagnostic tests as needed to detect communicable and contagious diseases, etc; initiation of medication and appropriate therapy; completion of the health history; and, recommendations/clearance for housing, job assignment and program participation. The examination can only be performed by physicians, nurse practitioners and physician's assistants. The examination should be performed in privacy and ensure the dignity of the inmate. Records are to be maintained as part of the medical file.

**P. RELEASE MEDICAL SCREENING**

The managing official shall have a written policy and procedure ensuring that inmate medical records are screened by qualified health care personnel before or within seven days after release to determine if a medical condition exists which would require referral to community medical resources

**Compliance Criteria:**

Written policy and procedure; medical records; referrals, if any.

**Compliance Explanation:**

A physical evaluation and/or medical file review by qualified health care personnel is to be completed on all inmates prior to release from confinement or within seven days thereafter to protect the public from communicable diseases and to provide assistance to persons needing continuing care. A referral to community medical/mental health care agencies should be made when indicated. Records of continuity of care and/or referrals are to be maintained as part of the medical file.

**Q. MOSHA INSPECTIONS**

The managing official shall have a written policy and procedure ensuring that the facility meets

safety regulations as verified by inspections held every two years by the Maryland Occupational Safety and Health Administration (MOSHA).

Compliance Criteria:

Written policy and procedure; records of inspections and corrective action(s); observation.

Compliance Explanation:

The Maryland Occupational Safety and Health Administration (MOSHA) is a part of the Division of Labor and Industry within the Department of Licensing and Regulation, whose authority includes safety inspections of any place where work is performed. A correctional facility, being a public building, may be particularly liable for damages resulting from injuries or accidents occurring on the premises. An inspection of the facility is required at least every two years to provide for staff safety in the work place. Additional services, including consultation and staff training are also available upon request. All violations of applicable MOSHA regulations (Maryland Code of Regulations .09.12.31) and according to established time frames are to be addressed as soon as practicable. Documentation of these inspections and verification of corrective actions are to be maintained on file. Consideration should be given to the development of a "tickler" system to ensure inspections are performed as required.

R. MENTAL HEALTH SERVICES

The managing official shall have a written policy and procedure governing the identification, housing, treatment, supervision, and referral of mentally ill and retarded inmates according to established guidelines to include due process guarantees

Compliance Criteria:

Written policy and procedure; observations; records, staff/inmate interviews

Compliance Explanation:

The number of inmates with severe mental health or retardation problems in correctional facilities is a source of concern for criminal justice professionals. These kinds of individuals often lack the ability to successfully adapt to a corrective environment; therefore, their incarceration in an adult place of confinement is often inappropriate. They are particularly vulnerable to abuse and require a disproportionate amount of attention by staff. They may pose a danger to themselves or others and are frequently incapable of attending to their basic physiological needs.

Care of the mentally ill and/or retarded inmates requires provisions for detection, diagnosis, treatment and referral services. To the extent possible, severely disturbed and/or mentally retarded inmates should be referred for placement to appropriate noncorrectional settings for care. Short of that possibility or while awaiting transfer to such facilities, these inmates are to be housed in specially designated areas of the institution with close and constant staff supervision. The health professionals employed at or assigned to the facility can assist in setting up an environment conducive to mental health care.

The mental health professionals, clinics, hospitals and other sources of assistance in these matters are to be clearly identified with appropriate facility personnel made aware of these resources and the procedures for contacting them.

Inmates suspected of having any of these problems should undergo a comprehensive mental health assessment and evaluation within a reasonable period of time by qualified mental health personnel (i.e. psychologists, social workers, psychiatrists, etc.) to include: a review of the initial health screening data; the collection and review of additional information based on correctional staff observations; diagnostic interviews; compilation of a mental health history; etc.

The treatment plan should be suited to the individual needs of the inmate and not limited by the programs, resources and services within the correctional facility. The plan may include crisis intervention, a brief or extended period of assessment, short or long term individual and/or group therapy, medication, specialized counseling, and/or inpatient hospitalization.

When transfer is indicated, there should be a joint consultation between mental health and security staff regarding the conditions of transfer and appropriate security precautions. Transfer must take place after due process hearings as required by the Attorney General per Article HG 10-620-9 and applicable case law. Medical and legal authorities should be consulted and used as the basis for the development of policies and procedures regarding these matters.

**S. NOTIFICATION OF NEXT OF KIN**

The managing official shall have a written policy and procedure governing the notification of next of kin in cases of serious illness, serious injury, or death.

**Compliance Criteria:**

.Written policy and procedure; examples, if any.

**Compliance Explanation:**

In cases of death or serious illness/injury of an inmate, the managing official or designee will initiate contact with the next of kin identified by the inmate at admission at the earliest opportunity. Records are to be maintained of such contacts. If possible, in cases of serious injury/illness, facility personnel should obtain permission from the inmate prior to contacting the next of kin in order to avoid any situations or circumstances in which/where the inmate may not wish such communications to be initiated. At no time should the media be contacted before the designated next of kin.

**.04 INMATE FOOD SERVICES**

Meals which are wholesome, nutritionally adequate, well prepared, ample in portion, and served at reasonable intervals are essential to the health, behavior and morale of inmates. Meals meeting this description will work to minimize a major source of complaint which could ultimately lead to discontent, disorder and costly litigation. It is equally imperative that services associated with meeting the dietary needs of inmates be sanitary and safe.

**A. MENU APPROVAL**

The managing official shall have a written policy and procedure providing for a menu approved annually by a registered dietitian.

**Compliance Criteria:**

.Written policy and procedure; documented annual approval

**Compliance Explanation:**

Annual or cycle menus, approved in writing by a registered dietitian, are to be maintained on file to verify that they meet nationally recommended dietary allowances for basic nutrition. All menus should be planned in advance, dated and substantially followed. Any changes to an approved menu or substitutions in meals actually served should be determined by dietary personnel, documented and be of equal nutritional value. A system should be developed to ensure reviews occur on schedule. Consideration should be given to posting the menu or otherwise making it available to staff and inmates.

**B. FREQUENCY OF MEALS**

The managing official shall have a written policy and procedure ensuring that three meals a day are served with not more than a 14 hour interval between the evening meal and breakfast.

**Compliance Criteria:**

.Written policy and procedure; implementation records; staff/inmate interviews; observations; meal schedules.

**Compliance Explanation:**

Three distinct meals during each 24 hour period, two of which ought to be hot, allow an opportunity to meet nutritional guidelines and offer a greater variety of food. Meals are to be served to ensure that an interval of not more than 14 hours is maintained between the evening meal and breakfast. While meals should be scheduled at regular intervals, special arrangements may be necessary for inmates in work and community programs or those engaged in other programmed activities. Departure from regular meal-times may also be necessary on weekends, holidays and for special circumstances; however, basic nutritional goals must be met.

**C. HEALTH INSPECTION**

The managing official shall have a written policy and procedure ensuring that the food service operation is currently licensed and meets State sanitation and health regulations as verified by inspection as required by the health department.

**Compliance Criteria:**

Written policy and procedure; documented inspections and record of corrective action; license/permit; observations.

**Compliance Explanation:**

Food service facilities and equipment must meet Department of Health and Mental Hygiene Regulations (COMAR 10.15.03). Documentation of inspections local health department are to be maintained on file and a license/permit posted or otherwise made available. Consideration should be given to the development of a "tickler" system to ensure inspections are performed on schedule. All health code violations are to be corrected as soon as practicable and in accordance with established time frames with documentation validating such corrective actions retained. Any exceptions or variances must be approved in writing by the health department. When food services are provided by outside sources, the

facility should have written verification that the provider complies with applicable regulations. Routine housekeeping procedures; maintenance of food preparation equipment and availability of adequate storage and proper refrigeration/freezer/water temperatures; access to hygiene facilities; and, effective training of dietary personnel will enhance conformance with applicable health codes.

#### D. DIETARY HYGIENE PRACTICES

The managing official shall have a written policy and procedure ensuring that persons involved in the preparation and handling of food comply with the health department regulations regarding personal hygiene and clothing.

##### Compliance Criteria

Written policy and procedure; posted rules; inspection reports

##### Compliance Explanation:

Measures to ensure personal hygiene are required by State and local health codes. Good personal hygiene habits reduce the possibility of contamination of food. Hand washing facilities should be immediately accessible to all food handlers. Toilet facilities should also be reasonably accessible to the food service areas. Hair nets or caps and clean, washable clothing are necessary to prevent the spread of contagion. All food handlers should be instructed to wash their hands upon reporting to duty and after using toilet facilities. Inmates and other persons working in food service should be monitored each day for health and cleanliness (i.e. clean hands/finger-nails, open wounds/sores, etc.). Smoking must not be permitted in food preparation and dining areas. Staff should be thoroughly trained in proper hygiene practices, and procedures for cleanliness should be conspicuously posted.

#### E. DIETARY MEDICAL SCREENING

The managing official shall have a written policy and procedure ensuring that staff and inmates involved in the preparation and handling of food receive medical screening by qualified health care professionals before assignment and annually after that.

**Compliance Criteria:**

.Written policy and procedure; medical clearance records for inmates/staff; observation; job assignment records.

**Compliance Explanation:**

Preassignment medical screening and annual reexamination of staff and inmates involved in the preparation and handling of food is intended to identify communicable, contagious and infectious diseases or other disqualifying health problems. The medical clearance must be performed by qualified health care personnel with the records maintained on file. The screening must include at a minimum an examination and a medical records review. A system/process should be developed to ensure the annual screenings are performed on schedule.

**F. SPECIAL DIETS**

The managing official shall provide for a written policy and procedure authorizing special diets as prescribed by qualified health care personnel and as necessary to adhere to the mandatory requirements of recognized faiths.

**Compliance Criteria:**

.Written policy and procedure; records of initiation, provision, renewal; staff/inmate interviews; observation.

**Compliance Explanation:**

Special medical or religious diets are to be provided with specific health problems as identified by qualified health care personnel or those of commonly recognized faiths as determined by the managing official in conjunction with the facility chaplain. The content of these diets should conform as closely as possible to the approved menu. Special diets should be continued until specifically terminated by the approval authority. Menus for more common medical conditions, such as diabetes, etc., may include provisions for substitutions or alternate food selections, extra rations of acceptable menu items, etc. Consideration should also be given to

accommodating dietary preferences during particular recognized religious holidays (e.g. Ramadan, etc.). The distribution/availability of these meals should be recorded and maintained on file. Staff and inmates should be made aware of the procedures for obtaining and renewing such diets.

**G. USE OF FOOD AS PUNISHMENT/REWARD**

The managing official shall have a written policy which prohibits the use of food as punishment or reward.

**Compliance Criteria:**

.Written policy; observation; staff/inmate interviews.

**Compliance Explanation:**

Food is not to be withheld as a disciplinary measure. The use of food as compensation to an individual inmate or to promote favoritism may create unrest among the general population; consequently, it is prohibited. It does not preclude the rewarding of groups of inmates with special foods in return for special services or under special circumstances.

**H. SUPERVISION OF FOOD SERVICES**

The managing official shall have a written policy and procedure ensuring that personnel continuously supervise the food service operation.

**Compliance Criteria:**

.Written policy and procedure; job descriptions; staff/inmate work schedules; observation; post orders.

**Compliance Explanation:**

Direct and continuous monitoring of the food service operation is necessary to ensure cleanliness, avoid waste, prevent theft, ensure safety and maintain security.

**I. WEEKLY DIETARY SANITATION INSPECTIONS**

The managing official shall have a written policy and procedure requiring weekly sanitation inspections of food preparation, food storage, food service, and dining areas.

**Compliance Criteria:**

Written policy and procedure; observation; routine and consistent weekly inspection reports.

**Compliance Explanation:**

Regular sanitation inspections are necessary to ensure that food service equipment is maintained and functioning properly; proper hygiene practices are followed; food is properly stored off the floor, in a clean dry area, and separated from cleaning supplies and materials; refrigeration and freezer units are maintained at proper temperatures; refuse and waste disposal practices are appropriate; and, all areas are free of vermin and pests. Inspections and corrective actions are to be recorded and maintained on file. These inspections may be performed by administrative, medical, or dietary personnel, including the person supervising food service operations.

**J. KITCHEN UTENSILS**

The managing official shall have a written policy and procedure governing the availability, control, storage, and use of kitchen utensils which includes provisions for:

- (1) Secure storage outside inmate living areas;
- (2) Daily inventory to ensure accountability;
- (3) Quarterly inspection to determine condition;
- (4) A record of issue and return;
- (5) Specification of persons authorized access and use; and
- (6) A current master listing.

**Compliance Criteria:**

.Written policy and procedure addressing all elements:

- (1) Observation of storage areas.
- (2) Records of routine and consistent daily inventories.
- (3) Records of routine and consistent quarterly inspections.
- (4) Records of issue/return.
- (5) Written designation of authorized access/use; observation.
- (6) Up to date listing of all utensils.

**Compliance Explanation:**

Kitchen utensils such as knives and other cutting implements or other such objects which may serve as potential weapons need to be maintained in a secure location which minimizes the possibility of inmate contact and which provides controlled access by only designated personnel. Secure storage can include a safe, locked cabinet or drawer, vault, locked closet or other depository which is under close staff supervision. They are to be stored in a manner which permits an easy determination of their presence or absence and a current listing of these items is needed to validate inventory accuracy. A daily inventory by facility personnel is required to ensure proper security and control must also be developed. Utensils are also to be examined at least quarterly for operability and safety. Records of these activities are to be maintained on file. Inmates permitted specified use must be under the direct supervision of facility staff. With regard to regular tableware (i.e. forks, spoons, etc.), appropriate security precautions should be taken to ensure that these potentially dangerous items do not leave the dining areas after each meal. The use of plastic, disposable utensils may be considered as an alternative.

**.05 INMATE HOUSING AND SANITATION**

The maintenance of a clean, sanitary, healthful environment contributes to the good morale of staff and inmates. Good living and working conditions are recognized as important factors in inmate stability and staff retention. Proper sanitation also minimizes the possibility of severe health hazards and potential life threatening situations for staff and inmates alike.

**A. TOXIC, CAUSTIC AND FLAMMABLE MATERIALS**

The managing official shall have a written policy and procedure governing the availability, control, storage, and use of flammable, toxic and caustic materials which include provisions for:

- (1) Secure storage outside inmate living and activity areas;
- (2) Quarterly inspection and inventory to determine condition and accountability;
- (3) Specification of persons authorized access and use; and
- (4) A record of issue and disposal.

**Compliance Criteria:**

.Written policy and procedure addressing all areas.

- (1) Observation.
- (2) Routine and consistent records of quarterly inspections/inventories.
- (3) Written designation of persons authorized access; observation.
- (4) Distribution and disposal records.

**Compliance Explanation:**

Toxic, caustic and flammable/combustible materials (i.e. lye, insecticides, denatured alcohol, paint, etc.) pose a threat to the health, welfare and safety of facility personnel and inmates. These materials are to be

securely stored and their use closely monitored, which limits inmate access to the extent possible. A system of accountability must be developed for the distribution/issuance of these materials, which includes supervision by qualified staff and proper record keeping. A regular inventory and inspection of these materials must also be made, documented and maintained on file. Toxic, caustic and flammable materials are to be disposed of only in conformance with applicable Federal, State and local regulations with appropriate records maintained.

**B. WEEKLY FACILITY SANITATION INSPECTIONS**

The managing official shall have a written policy and procedure requiring weekly sanitation inspections of internal and external facility areas.

**Compliance Criteria:**

- .Written policy and procedure.
- .Routine and consistent records of weekly inspections.

**Compliance Explanation:**

A designated staff member shall conduct comprehensive and thorough regular inspections of all areas of the facility and grounds to ensure compliance with health regulations and acceptable levels of sanitation. The facility sanitation inspection should consider the: maintenance of sanitation equipment; availability and condition of sanitation equipment; storage of perishables and dangerous materials; presence of vermin; disposal of wastes; overall cleanliness; clutter/disarray; etc. All inspections must be documented including notations of deficiencies and corrective action.

**C. GENERAL SANITATION REQUIREMENTS**

The managing official shall have a written policy and procedure governing facility housekeeping which includes provisions for:

- (1) Specific description of staff and inmate duties and responsibilities;
- (2) Quarterly vermin and pest control services; and
- (3) Weekly trash removal.

**Compliance Criteria:**

.Written policy and procedure addressing all elements.

- (1) Cleaning assignments; schedules; inmate worker job descriptions; observation.
- (2) Contracts; records of provision; observation.
- (3) Contracts; records of provision; observation.

**Compliance Explanation:**

A housekeeping plan must be developed which specifies facility sanitation/maintenance procedures, including the number and kinds of tasks needed, the manpower necessary and supervision required. Liquid and solid wastes (i.e. grease, human waste, trash, garbage, etc.) shall be stored in proper containers and disposed of on a regular basis. Control of vermin and pests must be ensured through the use of licensed exterminators and approved internal extermination programs on a regular basis. Accepted sanitation practices and the proper storage and removal of wastes including trash will assist in controlling vermin.

**D. PERSONAL ACCOMMODATIONS**

The managing official shall ensure that the facility provides sufficient toilet, shower, and bathing accommodations to maintain basic health and personal hygiene.

**Compliance Criteria:**

.Observation and/or schedules of availability.

**Compliance Explanation:**

An adequate number of operable and accessible toilet, bathing and shower facilities must be provided to maintain personal hygiene and to minimize communicable/contagious diseases. The ratio is: one toilet and wash basin per ten inmates; and, one shower per fifteen inmates or the opportunity to bathe at least three times per week. Work releasees and inmates assigned facility work assignments should have greater access to toilet, shower and bathing facilities. Each living unit should have ready access to hot and cold running water.

**E. PERSONAL HYGIENE ARTICLES**

The managing official shall have a written policy and procedure providing articles necessary to maintain proper personal hygiene to include toothbrush, toothpaste or toothpowder, toilet tissue, soap, shaving items, and feminine hygiene articles upon admission and routinely after that, and for an indigent inmate.

**Compliance Criteria:**

- .Written policy and procedure addressing all hygiene articles.
- .Written definition of indigency.
- .Records of provision/availability to general population and indigents.
- .Staff/inmate interviews.

**Compliance Explanation:**

Inmates must be able to obtain personal hygiene items necessary to maintain basic health. Provisions must be made to issue these items to inmates, permit their purchase, or allow their receipt from visitors. All approved hygiene items received from visitors shall be inspected for contraband. Shampoo, deodorant, colognes, etc., are other articles which can be made available to inmates, subject only to restrictions necessary to ensure facility order and security. Special arrangements must be made to provide basic hygiene articles to indigents and records of issue maintained. The definition of indigency must be specified in writing. The use of a standardized kit for all newly admitted inmates should be considered and records of distribution must be maintained.

**F. INMATE CLOTHING**

The managing official shall have a written policy and procedure providing for a record of the issue and return of clothing to an inmate unless personal clothing is allowed.

**Compliance Criteria:**

- .Written policy and procedure.
- .Records of distribution/return.

**Compliance Explanation:**

Inmate personal clothing received at the facility from visitors must be inspected for contraband. Personal clothing should be allowed for inmates participating in community activities and programs. Adequate clothing must be provided to indigents and inmates without community ties with records maintained of issuance. Special/protective clothing and related equipment must be routinely provided to inmates designated for particular facility assignments (i.e. dietary, hospital, garage, maintenance shops, vocational programs, etc.).

Provision is to be made to account for the distribution and return of all clothing issued to inmates upon admission and thereafter, including exchange. Inmates should be held accountable for the care of issued clothing with appropriate disciplinary measures and reimbursement schedules designated if destroyed or abused. The amount and kind of clothing permitted or issued should be determined by the season, program assignment, security status, etc. An adequate supply of such clothing and equipment should be maintained to permit exchange and/or replacement as frequently as necessary and be stored in a clean, dry area. The clothing should be properly fitted, climatically suitable, durable and presentable. All clothing must be laundered before reissue.

**G. INMATE BEDDING AND LINEN**

The managing official shall have a written policy and procedure providing for a record of the issue and return to an inmate of mattresses, pillows, sheets, pillow cases, towels, wash clothes and blankets.

**Compliance Criteria:**

- .Written policy and procedure.
- .Records of distribution/return.

**Compliance Explanation:**

Bedding and linen are necessary to ensure good health and hygiene. Upon admission, inmates must receive at least one clean sheet, mattress and sufficient blankets for the season. Wash cloths and towels should also be supplied, if available. If pillows are distributed, pillow cases need to be issued. Provision must be made

for the distribution and return of these articles upon admission and thereafter, including exchange. Inmates should be held accountable for their care with appropriate disciplinary measures and reimbursement schedules specified if destroyed or abused. Excess linens should be stored in a clean, dry area and an adequate supply should be maintained to permit exchange and/or replacement as frequently as necessary. If personal bedding items are permitted from visitors and they are inspected for contraband, care should be taken to ensure cleanliness and sanitation. All blankets, pillows and mattresses should be cleaned before reissue and linen and towels must be laundered before reissue.

#### H. INMATE LAUNDRY SERVICES

The managing official shall have a written policy and procedure providing for weekly laundering and accountability of issued and personal clothing and linens.

##### Compliance Criteria:

- .Written policy and procedure.
- .Schedules, records of exchange; observation.

##### Compliance Explanation:

Laundry services must be provided at the facility, through contractual arrangements in the community (i.e. exchange with visitors, etc.). Bedding, linens and personal and issued clothing must be laundered at least weekly. Blankets, mattresses and pillows also need to be cleaned on a routine basis. There must be a system to account for articles during laundering (i.e. record of exchange, laundry lists, etc.). No inmate is to be deprived of clothing during the laundering period. Inmates must be discouraged from laundering clothing in sinks, wash basins, bathtubs or showers due to health considerations. The presence of clotheslines in housing areas is also discouraged for security reasons.

#### I. INMATE PROPERTY MANAGEMENT

The managing official shall have a written policy and procedure providing for the management of inmate personal property which includes provisions for:

- (1) Designation of property limitations;
- (2) A listing of all property confiscated;
- (3) The signature of inmate and personnel upon confiscation and return;
- (4) A semi-annual inventory of property retained by the facility;
- (5) Replacement of damaged or lost items;
- (6) Recorded disposition of property abandoned by an inmate; and
- (7) Recorded modifications to established listing.

**Compliance Criteria:**

.Written policy and procedure.

- (1) Approved property list and observation.
- (2) Initial inventory records.
- (3) Review of records and observations.
- (4) Review of semi-annual inventory records.
- (5) Records, if any, and inmate complaints; inmate interviews.
- (6) Disposition records.
- (7) Review of inventory records.

**Compliance Explanation:**

Inmate property is to be stored in a clean, dry area. All valuables are to be placed in a safe or other secure location. Inmates must be permitted to retain a reasonable amount of personal items that do not pose a threat to the order and security of the facility. A list of allowable clothing, valuables, books, magazines and newspapers, personal hygiene articles, commissary items, etc., must be developed and made known to all inmates upon admission. The acceptable limits on general property must be strictly and consistently

enforced to discourage the accumulation of such items in order to minimize clutter, reduce potential problems with vermin and pests and diminish the possibility of fire or health hazard. Excess property is to be released to the custody of individuals authorized in writing by inmates, or otherwise confiscated. An accurate, itemized property listing must be completed, inclusive of inmate and staff signatures and dates, to protect the administration and staff from possible liability and the inmate from loss. Any modifications to the listing (i.e. additions, deletions, etc.), must be noted, signed and dated.

Regularly, all inmate personal property and valuables must be inventoried and all discrepancies (of overages, underages, damage, etc.) promptly reported in writing to the managing official. Damaged or lost items must be replaced or reimbursement made within a reasonable time period. A time limit on the storage of inmate property must be specified, after which unclaimed property may be used by the facility, donated to private or other public agencies, destroyed or sold. Records of these actions must be maintained on file.

**.06 INMATE RIGHTS**

Increased assertion and recognition of the rights of confined persons has been an important force for meaningful change and accountability in correctional systems and practices. These standards set forth the basic rights of inmates consistent with fundamental legal principles as expressed in judicial opinions and constitutional guarantees, sound correctional management practices and the humane treatment of inmates. Provision of these rights minimizes the possibility of costly litigation resulting in lawsuits by inmates, special interest groups, and the Civil Rights Division of the United States Department of Justice. The provision of these rights also reduces the civil liability of correctional personnel and government entities.

**A. NON-DISCRIMINATION**

The managing official shall have a written policy stating that an inmate is not discriminated against with regard to programs, services, or activities on the basis of race, religion, national origin, sex, handicap or political beliefs.

**Compliance Criteria:**

.Written policy and procedures; observation; inmate interviews; complaints, if any, handbook.

**Compliance Explanation:**

The managing official must ensure: essential equality in living conditions; nondiscriminatory decision making affecting status, activities and terms of incarceration; and, equal access to institutional and community programs, assignments and resources, including education, employment, training, recreation, and family contacts. The policy should be communicated to all staff and its conformance strictly enforced. Inmates must also be made aware of the policy upon admission.

**B. PROTECTION FROM ABUSE**

The managing official shall have a written policy which establishes inmate protection from physical and mental abuse and harassment by personnel.

**Compliance Criteria:**

.Written policy; inmate interviews; observations; complaints, if any, handbook.

**Compliance Explanation:**

The managing official must provide a safe, healthful environment with inmates protected from corporal punishment, injury, personal and mental abuse, harassment, sexual assault, manipulation, etc. No sanctions, are to be permitted which adversely affect the health, physical welfare, or psychological well being of inmates. The policy should be communicated to all personnel and inmates and its conformance closely monitored and strictly enforced.

**C. LEGAL MATTERS**

The managing official shall have a written policy and procedure regarding inmate legal matters which includes provisions for:

- (1) Access to the courts;
- (2) Availability of legal reference materials;
- (3) Handling of legal mail;
- (4) Confidential visits with legal counsel and their authorized representatives; and
- (5) Use of the telephone for legal purposes.

**Compliance Criteria:**

.Written policy and procedures addressing all elements, handbook, complaints, if any.

- (1) Case file review; inmate interviews.
- (2) Observation of library, records of use of LASI/ LIPS or other legal references; library schedule; library staffing.
- (3) Logs, mail records; observations; inmate interviews.

- (4) Visitation records; observation of private space.
- (5) Case file review; telephone schedules, telephone log/records; inmate interviews.

Compliance Explanation:

Inmates must be allowed to present to the courts any issue or submit any grievance without undue delay. This should include: challenging the legality of their convictions or confinement; seeking redress for alleged illegal conditions or treatment while confined; pursuing remedies in connection with civil matters; and, asserting the rights protected by the constitution, statutory provisions or common law, etc. Inmates are not to be subjected to reprisal, penalty or interference as a result of their attempts to seek administrative or judicial relief. Access through telephone, correspondence, and visitation with attorneys, their authorized representatives, and other persons with legal training must be provided to address alleged grievances. These provisions are to be communicated to inmates upon admission to the facility.

The constitutional right to legal counsel of choice must be protected. Attorneys of record must be permitted to consult with inmates in a private and confidential setting. Attorneys should be allowed unlimited visits including the opportunity for communication during other than normal visiting hours upon request and on the basis of special circumstances. Attorney visits should not count against the approved number of visits. Only those restrictions necessary to maintain facility order and security should be imposed.

Inmates must be permitted to send sealed letters to: attorneys of record; the courts; officials of the confining authority; State and local chief executive officers; administrators of grievance systems; and, members of the paroling authority. All mail from these special classes of persons are to be opened only to inspect for contraband and then only in the presence of the inmate.

Inmates must be provided reasonable access to an appropriate law library possessing an adequate collection of standard legal research and reference materials or specific alternatives such as LASI/LIPS. Inmates should

be allowed to obtain legal supplies and have access to legal services such as a typing service or typewriters, photocopier or photocopying service, Legal Aid Bureau, Inc., the Public Defender's Office, etc., to assist them in the preparation, processing and filing of legal documents. Inmates should be allowed to acquire and retain personal legal references and research materials. Provisions should be considered to make items such as paper, pencil, etc., available to indigent inmates. Only those restrictions necessary to maintain facility order and security and to ensure the health, safety, and well being of staff and inmates should be imposed.

**D. RELIGIOUS PRACTICES**

The managing official shall have a written policy and procedure which permits an inmate to practice a religion of choice subject only to the restrictions necessary to maintain facility order and security.

**Compliance Criteria:**

Written policy and procedures; staffing; records of provision; schedules; inmate interviews; observations of space, handbook.

**Compliance Explanation:**

The constitutional right to pursue any lawful and legitimate religious practice must be guaranteed to all inmates consistent with maintaining the order and security of the facility. All recognized religions must be accorded equal status and protection. The determination of a recognized faith by the managing official in conjunction with the facility chaplain should consider whether there is a body of literature stating specific religious principles and whether the practices are recognized by a group sharing common ethical, moral or intellectual views.

Responsible and reasonable access to religious facilities, clergymen, publications, and symbols must be assured. Inmates should be permitted liberal visitation privileges from representatives of their faiths. Modes of dress or appearance should be permitted to the extent that they do not interfere with identification and security. Inmates are to be kept informed about opportunities to participate in religious programs and

activities on a continuing basis, including an orientation upon admission. Under no circumstances are inmates to be required to engage or participate in religious activities, nor is their failure to do so to influence decision making.

**E. MAIL PRACTICES**

The managing official shall have a written policy and procedure governing the handling of inmate correspondence and packages, including provisions for postage allowance to an indigent inmate.

**Compliance Criteria:**

Written policy and procedures; observation; inmate interviews; records of provisions to indigents; definition of indigency; staffing; schedules; handbook.

**Compliance Explanation:**

Inmates shall be permitted to send sealed letters and to receive same from a designated class of persons/organizations. Correspondence should not be read, rejected or restricted except where there is clear and convincing evidence that it poses a threat to the order, security or safety of the facility, public officials, or the general public. Rejection is also permitted where there is a reasonable belief that the correspondence is being or will be used to further illegal activities. Records of such rejection must be maintained and the appropriate inmate informed. Censorship, though permitted by the U.S. Postmaster General, should not be practiced.

There must be no limitation on the number of letters permitted in a specified time period, the length of the correspondence, the content of the correspondence, nor the source of the letter except where the limitations are justified for reason of public safety or facility order or security. Any package or container sent to or by an inmate must be inspected for contraband. Provisions should also be addressed regarding inmate access to publications, the forwarding of mail after transfer or release, and correspondence to other inmates within the facility or between inmates in correctional institutions. Inmates must be made aware of the pertinent policies and procedures upon admission.

All indigent inmates by whatever official definition must be afforded a reasonable and specified amount of free postage for legal mail, and correspondence necessary to maintain community ties. Financial assistance to inmates in these matters relieves tension, reduces a source of complaint, and ensures the right of access to legal resources. Accurate records must be maintained of each inmate's financial status and the provision of postage upon request. There should be a means to provide for reimbursement by the inmate upon accumulation of sufficient funds.

F. INMATE ORIENTATION

The managing official shall have a written policy and procedure governing inmate orientation which includes provisions for informing staff having direct contact with inmates and inmates within seven days of admission, and with this inmate orientation including instructions regarding:

- (2) Disaster plan responses;
- (2) Classification process;
- (3) Rules, regulations and disciplinary procedures;
- (4) Complaint process;
- (5) Search practices;
- (6) Access to case record procedures;
- (7) Programs and services regulated by standards; and
- (8) Access to sick call procedures.

Compliance Criteria:

Written policy and procedures addressing all elements; review of case records/orientation schedules; training records or written acknowledgements by appropriate personnel; pre/in service training curricula and schedules; orientation programs/handbook; inmate/staff interviews.

**Compliance Explanation:**

Clear, concise and specific written rules and regulations specifying the violations, sanctions, disciplinary hearing procedures and appeals process must be communicated to all inmates at intake or shortly thereafter. The rules and regulations should also be conspicuously posted in housing and other areas accessible to inmates and available in inmate libraries, etc. Staff assistance should be provided to inmates with language or comprehension problems. Documentation must be available to verify that inmates received orientation/notification of the rules and regulations (i.e. handbook/booklet, video presentation, verbal presentation, etc.). Any changes or revisions are to be communicated to inmates prior to implementation. All staff having direct contact with inmates must also be made aware of the information given to inmates during orientation so that personnel are cognizant of the requirements of inmate conduct.

The programs, services, opportunities and processes (e.g. access to case file, complaint, sick call, etc.) available to inmates must be specified at the time of orientation so that they may consider the options and evaluate the resources necessary to address identified needs as well as to respond appropriately to official expectations, including in emergency situations.

All inmates must be made aware of the classification process including the: classification options; criteria for determining classification status; procedures for presenting appeals and requesting reclassification; and, rights, duties, responsibilities and privileges of each status. Any revisions of the classification system must be communicated to all inmates before implementation.

**G. CONVICTED INMATES/PROGRAM PARTICIPATION**

The managing official shall have a written policy which ensures the right of a convicted inmate to decline to participate in activities, services and programs with the exception of work assignments, adult basic education programs, or programs specifically mandated by statute, ordered by the sentencing court, or based upon written agreement.

**Compliance Criteria:**

.Written policy; records of participation; inmate interviews; handbook; observation; complaints, if any.

**Compliance Explanation:**

Convicted inmates can be compelled to engage in work assignments essential to support the operation, safety and maintenance of the facility (i.e. food services, sanitary details, prison industries, etc.). Refusal to participate in facility work assignments/programs mandated by statute (i.e. medical and dental care, etc.) ordered by the sentencing court (i.e. work release, substance abuse therapy, etc.), and agreed upon in writing (i.e. basic education, community placement, etc.) must be documented and appropriate action initiated. Inmates may, however, refuse to participate in vocational training, religious services, counseling, psychological/psychiatric treatment, recreation/exercise, community activities, pre-release programs, etc. This information is to be communicated to all inmates upon admission.

**H. PRE-TRIAL INMATES/PROGRAM PARTICIPATION**

The managing official shall have a written policy which ensures the right of a pretrial inmate to decline to participate in facility programming and work assignments, other than housekeeping.

**Compliance Criteria:**

.Written policy; records of participation; inmate interviews; handbook; observation; complaints, if any.

**Compliance Explanation:**

Pre-trial inmates can be required to maintain the cleanliness and orderliness of their living areas and to perform assignments which ensure the security of the facility or which are mandated by the court.

Pre-trial inmates cannot be compelled to engage in any other facility programs, activities or assignments, and no penalty may be applied as a result of a refusal to participate. Pre-trial inmates should, however, be granted the opportunity to voluntarily participate in work assignments and facility programming. This information is to be communicated to all inmates upon admission.

**I. REGULAR EXERCISE**

The managing official shall have a written policy and procedure providing the facilities, equipment, personnel, and opportunity for regular exercise which specifies the circumstances, frequency, schedule, and length of exercise periods.

**Compliance Criteria:**

.Written policy and procedures; records of opportunity to participate; staffing; schedules; inmate/staff interviews; observation of equipment and space; handbook; complaints, if any.

**Compliance Explanation:**

Varied opportunities should be made available to all inmates for regular exercise to reduce tensions and boredom, encourage the creative use of leisure time, and ensure basic health. Exercise should only be restricted when necessary to maintain facility security and order.

Adequate space and equipment in proportion to the inmate population should be provided to permit at least one hour per day of exercise five days a week, including outdoor exercise, weather permitting. In the absence of a specific indoor exercise area, multi-purpose rooms or other space outside the cell/living area must be made available. Facility personnel should be identified to coordinate the exercise program, which should include schedules of activities. Documentation should be maintained to substantiate the implementation of the formal exercise program. Inmates are to be informed of exercise opportunities at intake.

**J. INTERNAL COMPLAINT SYSTEM**

The managing official shall have a written policy and procedure providing for a formal internal complaint system about which personnel having direct contact with inmates are informed.

**Compliance Criteria:**

.Written policy and procedures; records of complaints/resolutions; case file review; staff/inmate interviews; training records of written acknowledgements by all appropriate staff; handbook; pre/in service training curricula and schedules.

**Compliance Explanation:**

An internal complaint system is an administrative means for inmates to resolve grievances with facility policies, procedures, rules, regulations and practices. It should consider acts of facility personnel and matters of concern not already addressed in the appeal processes regarding parole, classification and discipline. A method of expressing complaints enhances inmate morale, ensures the right to due process, minimizes the possibility of costly litigation, and provides a means of evaluating existing policies, practices, conditions and personnel. The system must encourage informal resolution whenever possible; provide for the transmittal of complaints without alteration, interference or delay; provide for a written response including rationale within a prescribed time period; and, ensure access by all inmates without reprisal, penalty or sanction. Records of all complaints and resolutions should be maintained. In addition, appropriate staff are to be informed of the complaint process to facilitate timely implementation. The system is to be communicated to all inmates upon admission.

**K. PERSONAL GROOMING**

The managing official shall provide for a written policy which ensures the right of an inmate to exercise freedom in personal grooming and appearance subject only to facility requirements essential to safety, security, identification, and hygiene.

**Compliance Criteria:**

.Written policy; handbook; observation; inmate interviews; provision/availability (i.e. schedule) of hair care services; complaints, if any.

**Compliance Explanation:**

Inmates must be provided a reasonable choice of selection of hair style and length and appearance (e.g. beards, moustaches, etc.), subject only to the need to ensure proper hygiene, identification, and the order and security of the facility. Such provision enhances inmate morale and respects personal identity. The policy should take into consideration the: inmate's work assignment; security status; involvement with the community; religious beliefs; etc. Any restrictions placed by the

managing official on appearance must be specified in writing, communicated to all inmates upon admission, and consistently enforced.

L. ACCESS TO MEDIA

The managing official shall have a written policy and procedure permitting an inmate reasonable contact with the communication media.

Compliance Criteria:

Written policy and procedures; handbook; records of access/denial; inmate interviews; complaints, if any.

Compliance Explanation:

The managing official is to allow contact by legitimate media (i.e. newspaper, television and radio, etc.) representatives who request, preferably in writing, permission to visit the facility. Disapproval of visits must be documented and subject only to the restrictions necessary to maintain security and order, ensure the privacy and dignity of inmates, and preserve the health and safety of staff, inmates and visitors. Access should be granted for purposes of reporting items of public interest and concern, not to provide publicity for any inmate or particular group of inmates. Contact with the community through media communications (e.g. telephone, correspondence, visits, etc.) ensures a more informed public, enhances inmate morale, and protects the right of freedom of speech. Inmates must sign consent waivers prior to being interviewed, photographed and/or taped to protect against invasion of privacy and possible litigation. The attorneys of record should be notified where pre-trial inmates seek contact with communications media to ensure legal protection. Denials should be documented with rationale. Inmates must be made aware of these procedures upon admission.

M. HOUSING OF JUVENILES

The managing official shall have a written policy and procedure which prohibits a juvenile from being detained in or committed to an adult correctional facility unless legal jurisdiction has been waived to the adult authorities or the juvenile is formally charged with having committed an exclusionary offense.

**Compliance Criteria:**

.Written policy and procedures; staff/inmate interviews; case file review; observation.

**Compliance Explanation:**

In accordance with State and Federal law (i.e. Juvenile Justice and Delinquency Prevention Act of 1974, as amended), no juvenile, unless waived from juvenile court to criminal court or alleged to have committed an exclusionary offense (a child 14 years old or older and alleged to have committed an act which, if committed by an adult, would be a crime punishable by death or life imprisonment, or a child 16 years old or older and alleged to have committed the crime of robbery with a dangerous or deadly weapon or attempted robbery with a dangerous or deadly weapon) may be detained in or committed to an adult jail, detention center or correctional facility. Nonqualifying juveniles should not be detained pending disposition, even for short periods of time, but rather contact the Juvenile Justice Advisory Council for further information and request the forwarding/sentencing/committing agency to remove the juvenile at once. Every effort should be made to house waived juveniles, regardless of offense, out of sight and sound of adult inmates.

**N. VISITATION PRACTICES**

The managing official shall have a written policy and procedure governing visitation which specifies the circumstances, frequency, schedule, and length of the visitation period.

**Compliance Criteria:**

.Written policy and procedures; handbook schedules; records of provision; case file review; inmate interviews; observation; complaints, if any.

**Compliance Explanation:**

The visitation policy is to be brought to the attention of all inmates upon admission and should be communicated to the public by an appropriate means (i.e. signs, posters, etc.). The amount and length of visits and the number of visitors must be determined consistent with the

institutional schedule of activities, space available, personnel constraints or substantial security concerns sufficient to justify any restrictions. The days and hours designated for visiting need to be reasonable and suited as much as possible to the convenience of the staff, inmates and public (i.e. weekends, holidays, evening hours, etc.). Persons identified by the inmate admission or thereafter are not to be denied access without clear and convincing evidence that their visitation would jeopardize facility order and security.

If a listing of potential visitors is utilized, it should be obtained at orientation with a provision for modification at regular intervals thereafter. Those under a certain age, as determined by the facility, should not be permitted access to the facility without an accompanying adult unless authorized by the managing official or designee. Reasonable restrictions may also be placed on visitor attire and behavior to minimize potential problems. Procedures must be developed and implemented for the registration and monitoring of visitors, search of visitors, and secure storage of personal possessions during the visitation period. The amount of staff surveillance and observation should be limited to the extent possible to ensure privacy, while at the same time, providing adequate security and control.

Provisions should be made to permit special visits based upon exigent circumstances (i.e. persons coming long distances, family emergencies and other special situations) as approved in writing by the managing official.

O. GENERAL TELEPHONE USE

The managing official shall have a written policy and procedure governing inmate access to telephones which specifies the circumstances, frequency, schedule, and length of calls.

Compliance Criteria:

.Written policy and procedures; records of provision; schedules; handbook; inmate interviews; observations; complaints, if any.

Compliance Explanation:

Calls are only to be limited by the institutional schedule of activities, number of telephones available, personnel constraints and security considerations. The frequency, schedule, length and restrictions on calls must be communicated to all inmates upon admission. The days and times need to be reasonable and suited to the extent possible to the convenience of staff, inmates and public.

Where inmates have routine access to telephones, a schedule should be considered to ensure equitable availability. Reasonable notice should be given to inmates that the time limit is about to expire to allow them sufficient opportunity to complete their conversations. Calls should be in private unless there are compelling reasons to monitor the conversation. Long distance collect calls may also be permitted according to established guidelines. In circumstances where coin operated telephones are used, inmates should be permitted a sufficient amount of funds to maintain community ties.

Reasonable opportunities should be provided for general population inmates to make telephone calls in emergency situations, and under other approved conditions. The length of these special calls should be governed by the particular set of circumstances and should not be counted against those normally permitted. Incoming calls should only be accepted under unusual or emergency conditions specifically approved by the managing official. Access to institutional phones normally reserved for staff use should be restricted from inmate use except in exigent circumstances. Use of telephones must not interfere with institutional assignments, programs, counts, etc. In the event of documented inmate abuse of the telephone privileges, the use may be restricted, suspended or revoked.

## .07 CLASSIFICATION

The objective of classification is the placement of inmates into the appropriate levels of custody and security in order to provide reasonable behavioral controls over those inmates. A classification system also provides for the placement of inmates into work, educational and other available programs based on the assessment of individual need. Proper classification also ensures the security, safety and welfare of staff, inmates and the society at large.

### A. CLASSIFICATION PROCESS

The managing official shall have a written policy and procedure establishing a classification process to determine housing, job and other assignments which includes provisions for:

- (1) Designation of persons involved in decision making;
- (2) Criteria for decision making;
- (3) Initial inmate classification within one week of admission and annual reclassification;
- (4) A record of decisions; and
- (5) Review of all decisions by the managing official or designee.

#### Compliance Criteria:

.Written policy and procedures addressing all elements; staffing; case file review; staff/inmate interviews; handbook.

#### Compliance Explanation:

Within one week period after admission, all inmates must receive a formal classification review to consider housing and program assignments. Written procedures need to be developed: designating facility personnel involved in classification actions; describing the decision making process; indicating the criteria considered in decision making; specifying classification options (e.g. security status and participation in

institutional and community activities); identifying the responsibilities, privileges, duties and rights of each status/program; and, ensuring the inmate's participation. A classification team may include: security personnel; counselors; psychological/medical personnel; social workers; chaplains; educational/vocational personnel; etc. They are authorized to make decisions regarding security level, training and educational programs, work assignments, access to community release activities, etc.

The criteria used to determine/modify the classification decisions should include: intent of court; period of confinement; instant offense; past criminal history; prior and current institutional adjustment; needs of others in the community (family, employers, etc.); history of alcohol and drug abuse; need for treatment services; level of maturity, attitude, trust and motivation; psychological evaluation in cases involving violence; escape history; and, other similar items deemed appropriate by the managing official. Unless waived in writing, inmates should be permitted to attend classification hearings to present pertinent information that may influence the decision. Decisions, recommendations and rationale must be in writing and presented to the managing official or his designee for review within a reasonable time period. Procedures need to be developed to permit appeals of reviewed decisions and requests for reclassification.

The frequent review of the status of each inmate ensures that the program remains viable and appropriate to the needs of the inmate, staff and public. This regular and formal comprehensive review of all matters affecting an inmate's status (i.e. custody level, housing assignment, vocational/educational training, work assignment, specialized programming such as Alcoholics/Narcotics Anonymous, etc., parole eligibility, etc.) also mitigates against an inmate's "slipping through the cracks", or "dropping out" of the mainstream of institutional life.

The program assessment/evaluation must be performed at least annually taking into consideration the type of facility, profile of the inmate population, average length of sentence, availability of treatment programs and services, etc. Reviews which involve a major change in program designation and/or change in custody level must be made according to due process guarantees including an appeals mechanism. Records are to be maintained on file of all such actions.

The criteria and procedures for determining and modifying program/custody level status must be clearly indicated and made known to all inmates upon admission to include the conditions under which an inmate may initiate an evaluation/review to determine his/her progress.

**B. CLASSIFICATION PROCESS AWARENESS**

The managing official shall have a written policy and procedure ensuring that persons involved in classification decision making are informed of the classification process.

**Compliance Criteria:**

.Written policy and procedures; training records or written acknowledgement by appropriate personnel; staff interviews; pre/in services training curricula and schedules.

**Compliance Explanation:**

Personnel involved in the process of classification must be made aware of the factors determining the placement of inmates in programs, activities, and assignments. Periodic in-service training should also be provided. All training must be documented. Any revisions of the classification system are to be communicated to appropriate personnel prior to implementation.

**.08 HEARINGS**

The right of due process guarantees, afforded to all members of society, also apply to inmates incarcerated in Maryland's places of adult confinement. These include the right to fair and unbiased hearings, the right to call witnesses and representatives, and the right to appeal unfavorable decisions. Such provisions not only meet constitutional minima but also create a safer correctional environment by reducing the potential for disturbances and disorders.

**A. FORMAL DISCIPLINARY HEARING PROCESS**

The managing official shall have a written policy and procedure governing a formal disciplinary hearing by an impartial person or committee of persons not directly involved in the incident which includes provisions for:

- (1) Inmate receipt of a written description of the incident and a specification of the rule violation or violations within 48 hours of the alleged infraction;
- (2) Inmate appearance at the disciplinary hearing within 96 hours of the alleged infraction, excluding weekends and holidays, but not less than 24 hours after notification of charges, unless waived by the inmate;
- (3) The inmate to be given an opportunity to request and question witnesses, to have staff representatives, to make statements on the inmate's behalf, and to present documentary evidence;
- (4) A record of hearing decisions and rationale;
- (5) Review of decisions by the managing official or designee; and
- (6) An appeal process.

**Compliance Criteria:**

.Written policy and procedures addressing all elements; case file review disciplinary records; staff/inmate interviews; handbook.

**Compliance Explanation:**

Disciplinary proceedings are intended to ensure a swift hearing by an impartial person to mitigate against the arbitrary imposition of punishment. Informal means of resolving minor inmate misbehavior should be used whenever possible. A written report, submitted to the inmate and designated facility personnel within 48 hours of the incident, must contain: rule(s) allegedly violated; a formal statement of charge(s); description of the incident including staff and inmate witnesses; disposition of physical evidence; any immediate action taken; the date and time of the report; and, the signature of the reporting person. The managing official needs to provide for a timely investigation by persons not directly involved in the incident. Alleged criminal acts must be referred to the appropriate authorities for possible prosecution when deemed appropriate.

The report and the results of any investigation shall be presented to a person or committee of persons, not involved in the alleged incident, who are specifically delegated by the managing official the authority and responsibility for conducting hearings within 96 hours of the infraction. The inmate is to have an opportunity to appear in person, unless waived in writing or justified for security reasons, submit documentary evidence, present and question witnesses, request staff representatives and make statements on his/her own behalf. The decision of the hearing person or body must be recorded in writing, promptly communicated to the inmate, and referred to the managing official/designee for review and approval. An appeal of reviewed decisions is to be available to all inmates within a reasonable time period.

**B. FORMAL DISCIPLINARY HEARING PROCESS AWARENESS**

The managing official shall have a written policy and procedure ensuring that persons having direct contact with inmates are informed of the facility rules and regulations and disciplinary procedures.

**Compliance Criteria:**

.Written policy and procedures; training records or written acknowledgement by appropriate personnel; staff interviews; pre-/in service training curricula and schedules.

Compliance Explanation:

All facility personnel who have direct contact with inmates must be thoroughly familiar with all the rules and regulations pertaining to inmate conduct, possible penalties, disciplinary reporting requirements, and formal hearing procedures. Continuous in-service training in this area enhances understanding and consistency in application. Records of training must be maintained. Any procedural changes are to be communicated to appropriate personnel prior to implementation.

## .09 ADMINISTRATIVE RECORD KEEPING

The systematic recording, management and maintenance of data and information pertaining to inmate case records, diminution of sentence, financial matters, etc., enhance the efficiency and effectiveness of the facility by providing administrative and supervisory personnel with the requisite materials to facilitate planning, implementation and evaluation of facility programs and services.

### A. CONFIDENTIALITY OF CASE RECORDS

The managing official shall have a written policy and procedure ensuring the confidentiality of and methods of access to a case record by an inmate, person in interest, and an individual or agency making a formal request which includes provisions for:

- (1) Identification of persons authorized to approve access;
- (2) Specific designation of materials subject to disclosure and restriction in accordance with applicable statutes and regulations;
- (3) A release of information consent form;
- (4) A record of access decisions; and
- (5) An appeal process for those persons who are denied access.

#### Compliance Criteria:

Written policy and procedures addressing all elements; case records review; staff inmate interviews; complaints, if any; records of provision/denial; handbook.

#### Compliance Explanation:

The circumstances warranting the release of specific case record information must be determined. "Release of Information" forms are to be developed to document authorized disclosures of information, and should contain at a minimum, name and number of the inmate, agency, organization, facility or person requesting the information, designation of the information to be disclosed,

rationale or purpose of disclosure, signature and date of inmate and witness and an expiration date. The procedures regarding access to case files (e.g. medical files, commitment records, sociological information, criminal history information, etc.) must specify what information may be disclosed or restricted, the conditions under which the records may be reviewed, and the duties and responsibilities of the "custodian" consistent with Article 27, Section 695, of the Annotated Code of Maryland, Article Health General 4.301 to 4.403, etc.

Information which may be withheld with proper notification and justification includes that which: constitutes a diagnostic opinion that may seriously disrupt a rehabilitation program or otherwise influence facility adjustment; was obtained under promise of confidentiality; might jeopardize facility security or order; and, may cause possible harm to others, etc. Certain information may be released without permission such as directory information (i.e. name, age, court of jurisdiction, offense, sentence, date of admission, address of record, etc., as determined in operational procedures). Persons are to be provided the opportunity to examine, copy, challenge the accuracy of, and request the amendment or expungement of information contained in case files according to established guidelines. Records of all reviews must be maintained on file, including denials and appeals.

#### B. COMPUTATION OF SENTENCE CREDITS

The managing official shall have a written policy and procedure which provides for the accurate computation and recording of good conduct, industrial and special project credits in accordance with applicable statutes.

##### Compliance Criteria:

Written policy and procedures; computation records; staff interviews; complaints, if any.

##### Compliance Explanation:

Good conduct, industrial and special credit time records must be accurately maintained according to the requirements in Article 27, Sections 700 and 704A, of the Annotated Code of Maryland and other established guidelines. A complete accounting of all earned credits must

be included in the records of inmates transferred from one facility or jurisdiction to another. Loss of good time and industrial time is only to be in accordance with written disciplinary procedures and records maintained on file. The programs and activities eligible for special credit time are to be specified in writing. Weekenders and inmates sentenced to less than 30 days are to receive good conduct time on the same prorated basis as are all other inmates.

### C. MANAGEMENT OF INMATE FUNDS

The managing official shall have a written policy and procedure governing the management of inmate funds which includes provisions for:

- (1) Confiscation and receipting of monies upon admission unless retention is otherwise authorized;
- (2) Establishment of an inmate account;
- (3) A record of financial transactions including transfer to other facilities; and
- (4) Recorded return of funds upon release.

#### Compliance Criteria:

.Written policy and procedures addressing all elements; financial records; handbook; staff/inmate interviews; complaints, if any.

#### Compliance Explanation:

The collection, safeguarding and disbursement of inmate funds are to be handled by designated personnel knowledgeable of proper accounting principles. These procedures should be designed to protect inmate funds from theft and other abuses. They shall include maintenance of appropriate financial records (i.e. credits, debits, disbursements, etc.); preparation of periodic fiscal reports; and, provision for regular audits.

Inmates are to be provided receipts of all transactions regarding their financial accounts. All monies are to be retained by the facility to minimize the possibility of gambling, "loan sharks", extortion and other such consequences. Inmates in certain classifications (e.g. work

release, etc.) may be permitted to retain funds in their possession under certain conditions. A system of accounts must be developed and implemented to address the variety of potential financial activities (intake, commissary, reimbursement for room and board, disbursements for fines, restitution, etc., inmate pay, transfer/release, etc.).

**D. OFFICIAL PUBLICATIONS/ANNUAL REVIEW**

The managing official shall have a written policy and procedure providing for the recorded annual review of policies, procedures, post orders, inmate orientation materials, operating manuals, and other official publications to determine current application and utility.

**Compliance Criteria:**

Written policy and procedures; schedules; review documentation; staff interviews.

**Compliance Explanation:**

A frequent and thorough review of all official publication (i.e. regulations, policies, procedures, post orders, emergency plans, orientation handbooks, manuals, etc.) will ensure that they remain appropriate and continue to contribute to the effective administration and operation of the facility. Such reviews/updates/revisions shall be documented and include the date of the review, the signature/initials of the person(s) performing the task and the outcome (i.e. retain, modify, rescind, etc.). A regular review of these materials should facilitate the formal incorporation of various changes made during the year, prevent the disorganized accumulation of a series of memoranda, and assist in decision making regarding previously discussed but unresolved matters.

The review may be performed by the managing official, persons responsible for particular functional areas or a committee of persons specifically assigned the task. The reviews must be routinely scheduled (i.e. anniversary date of policy and procedure implementation, annually on calendar or fiscal year basis, etc.).

**E. CASE RECORDS**

The managing official shall have a written policy and procedure requiring a complete case record for each inmate which includes provisions for:

- (1) Secure storage outside inmate living and activity areas;
- (2) Specification of file content and order;
- (3) A date and signature on all documents and entries;
- (4) Establishment of a records retention schedule with documentation of disposition; and
- (5) Transfer of pertinent records to other correctional facilities.

**Compliance Criteria:**

.Written policy and procedures inclusive of all elements; case file review; staff interview; observations schedule; records of distribution/disposal/transfer.

**Compliance Explanation:**

Inmate case records represent the cumulative institutional history of an inmate including but not limited to: important events, significant decisions and rationale, dates services rendered, institutional adjustment, etc. This information provides the managing official and key personnel with information upon which to evaluate inmate progress and serves as a resource to assist in decision making regarding custody assignment and program planning. Case records must always be under the supervision of authorized facility personnel in an area free from access by unauthorized staff, inmates and the public. They are to be stored in secure file cabinets or other such containers that are reasonably safe from forced entry, fire, vermin, moisture, etc. File cabinets with case records should be clearly identified and marked "confidential" to prevent accidental entry by unauthorized individuals. A signed receipt should be completed and maintained whenever records are removed from the secure location.

These files should also be organized in a uniform fashion with standardized forms, designated contents and specification of an established format/sequence/order to separate particular functional areas (i.e. disciplinary actions, classification decisions, commitment/diminution of sentence records, medical/dental/psychological/psychiatric matters, etc.). This process will assist staff in locating pertinent information, filing properly and identifying gaps in documentation. All noteworthy entries and significant documents are to be dated and signed to ensure proper accountability, and to minimize the potential consequences of litigation and legal liability.

When an inmate is transferred, certain case records or a synopsis of important events and occurrences must be forwarded to the receiving institution with the inmate or shortly thereafter to ensure the continuity of the service delivery and to avoid the duplication of costly and/or timely programs and services. Since storage space for inactive records is limited, procedures must be developed to establish a schedule for the transfer or destruction of information that is designated as no longer having relevance or importance. Records are to be maintained on file to document such transfer/destruction to ensure accountability.

## AUDIT PROCESS

### GENERAL

The Maryland Commission on Correctional Standards (MCCS) will conduct regular formal audits of every State, local and private adult place of correctional confinement to determine levels of compliance with the applicable regulations promulgated by the Secretary of the Department of Public Safety and Correctional Services (DPSCS), identify deficiencies, suggest corrective action plans and provide technical assistance as needed. The schedule of audits will be communicated to the respective managing official, as well as other interested parties prior to the initiation of any audit cycle. All audits will be announced and shall occur at least biennially.

### PRE-AUDIT ACTIVITIES

The Executive Director or designee will contact the facility managing official at least 60 days prior to the scheduled audit to agree upon the specific dates and times for the audit; request that certain materials, information and documentation be made available or forwarded at least 30 days prior to the on-site visit for consideration by Commission staff; and, answer any questions regarding the audit process, standards interpretation, etc.

The Executive Director will assign an Audit Team Leader (ATL) from the Commission staff and designate the audit team composition from the established listing of trained/certified "duly authorized inspectors" (DAI), taking into consideration the size, nature and location of the facility, particular circumstances/needs, certain audit experience/expertise, etc., and availability of inspectors. The Executive Director will ensure that all DAIs receive relevant materials (i.e. facility descriptive, outline and other necessary information) at least two weeks prior to the scheduled visit. Upon receipt of the required materials [descriptive outline, significant changes and listing of facility specific primary documentation by standard] from the facility subject to inspection, the Executive Director will review the submission in conjunction with the ATL and other Commission staff for completeness and accuracy. If there are questions, the ATL will contact the managing official to request additional information, clarify matters and otherwise address any Commission staff concerns. The Executive Director will then assign particular sections of the regulations to the ATL and

other Commission staff, at which time, the facility written publications maintained at the Commission offices and at other identified central repositories will be reviewed utilizing the facility designations, agency "working files" and other relevant documents to assess compliance with the policy and procedure requirements of the applicable regulations. During the week preceding the scheduled on-site audit, the Executive Director will hold a meeting of the Audit Team Leader and other staff to discuss the aforementioned compliance review for the purpose of substantiating policy and procedure scheduling of compliance; identifying deficiencies, needs for additional information and other issues of concern; and, recognizing those areas which warrant recommendations/suggestions to enhance compliance over time. The ATL will contact the managing official to confirm the audit arrangements, generally share the results of the preliminary review, including any requests for clarification and indicate team composition. The ATL will also communicate with the designated DAIs to ensure their awareness of the logistics of the audit (i.e. directions to the facility, arrival times, standards assigned, etc.).

#### ON-SITE AUDIT ACTIVITIES

The ATL and DAIs will meet with the managing official and other key facility personnel upon arrival to hold an entrance interview for the purpose of introducing themselves, discussing the scope of the audit exercise, providing a tentative schedule/agenda of activities, explaining the inspection process/reporting format and answering any inquiries/questions. The entrance interview allows for an exchange of information and clarification of any outstanding issues prior to the actual audit. The ATL will then meet with the DAIs to reiterate the individual standards assignments, answer any questions, further organize the required tasks, distribute the designated forms to be completed and share the results of the primary documentation review performed at the Commission offices. If a DAI fails to arrive at the facility, the ATL will temporarily reassign the standards in question and notify the Executive Director, who will take appropriate action.

The audit team will make a complete tour of all parts of the facility and grounds to observe the state of cleanliness and repair, determine the general conditions of confinement and assess the overall quality of life. The ATL will arrange the tour itinerary in conjunction with the managing official to maximize the use of available resources as well as to minimize

the amount of disruption to the facility's normal routine. During the course of the tour, audit team members will hold brief informal discussions with facility personnel in the performance of their duties and inmates to obtain an overview of the facility and to gather general information. The ATL will ensure that the tour observations and the significant staff and inmate remarks of the respective DAIs are shared with the team members at a debriefing held at the conclusion of the tour. In addition, if the ATL detects or identifies a life threatening or health endangering practice or condition, the Executive Director will be contacted immediately, at which time, he/she may give verbal notice to the managing official to immediately cease the practice or condition or may order the facility closed. Written notice will be forwarded within 24 hours by the person giving the notice or order to the managing official with copies to the executive authority of the jurisdiction, the Secretary of the DPSCS and the Commission Chairperson. Within 96 hours of the verbal notice or order, the Commission will convene a hearing, according to established procedures, to review and confirm or countermand the order.

Audit team members are encouraged to return to various areas of the facility for a close examination of specific standards required materials/activities to assist in compliance decision making. The audit team member who is assigned the standards relating to Inmate Rights (.06A-O) will normally be responsible for conducting the formal inmate interviews according to established guidelines. If a facility has an official inmate representative body, then they will be interviewed in a group setting without staff presence for approximately one hour hour to determine their perspective regarding standards related matters. If not, the managing official will be asked to request inmates to volunteer to participate, ensuring a representative cross-section of the inmate population. Under no circumstances shall the managing official pre-select those persons to be interviewed. The interview will be conducted using proper interviewing techniques and will require the completion of the appropriate form.

The DAIs will then initiate a review of the secondary documentation to substantiate compliance with the applicable standards to which they have been assigned. The review should take place in an area within the facility that provides adequate space, privacy and accessibility to personnel, inmates, records and the physical plant. To the extent possible/practicable, the

facility should centralize the documentation of regular/routine activities and functions in a structured fashion to facilitate the timely completion of the review process. It is the Commission's policy that the burden of proof for supporting compliance is on the facility not the audit team. Facility personnel should remain readily available during the course of the audit to answer questions, present additional documentation and provide escort to certain parts of the facility as needed. However, it should also be noted that the audit team will work independently; therefore, no staff person should be in the area designated for the team's use during the audit.

The DAIs will complete the Standards Worksheet indicating their preliminary decisions of compliance, noncompliance and nonapplicability as well as make recommendations to improve operations and programs. The DAIs should be guided by the concept that compliance is demonstrated by meeting all of the individual elements of the standard at all times, which means routine and consistent implementation of the required function or activity since the last audit or, if noncompliance at that time, the date at which compliance was achieved during the monitoring period. Proof of compliance will be measured at the time of the audit; however, documentation presented subsequently may be considered. Notwithstanding this principle of strict interpretation, judgement should be based on the "substantive" rather than the "total" or "absolute" definition of compliance, while taking into consideration "good faith efforts" and "preponderance of evidence" where appropriate. DAIs will apply the established guidelines regarding the number of personnel and inmate files to be reviewed and remain cognizant of the methods of documenting compliance (i.e. written materials in the form of policies and procedures, records, logs, etc; discussions with staff, inmates and other persons; and observation. Verbal verification alone is never sufficient to support compliance. During the course of the audit, the ATL will remain available to provide standards interpretation, clarify requirements for compliance determinations and otherwise provide assistance to the DAIs and facility personnel as needed. As the DAIs complete their review of assigned standards, they will meet with the ATL to review and discuss their preliminary findings for the purpose of confirming their respective decisions. The ATL will record the audit findings on the appropriate form in preparation for the exit conference. If the ATL does not concur with the DAI's finding, he/she will attempt to resolve the disagreement. If unable to do so, the ATL will either contact the Executive Director by telephone for clarification or otherwise suspend any decision until able to confer with the Executive Director. If

unable to reach a consensus with regard to compliance findings, the DAI may submit a minority report to the Executive Director which will be disseminated to the Commission prior to the meeting at which the final report and compliance plan will be considered.

At the conclusion of the on-site visit, the team members will meet with the managing official or designee and other facility staff at an exit conference to discuss the results of the audit. The ATL will summarize the audit conclusions, present general observations and remarks, offer specific recommendations and comment on overall audit preparation. DAIs will present the particular findings for those standards where they were the primary auditor. In addition, compliance plans will be suggested to address identified deficiencies. Those present will also be afforded the opportunity to ask questions, request clarification and inquire about reporting procedures. A copy of the Audit Results Form will be given to the managing official or designee for appropriate action. Any appeals/requests for variance may also be registered with the ATL, who shall indicate that they are to be submitted in writing to the Executive Director within 30 days.

#### POST AUDIT ACTIVITIES

The ATL will meet with the Executive Director within five (5) working days following the completion of the on-site visit to discuss the audit results prior to the formalization of the findings, including, but not limited to: resolving disagreements between the ATL and DAI regarding particular compliance issues; considering appeals by the facility managing official; evaluating variance requests for presentation to the Commission; validating nonapplicable determinations; and, generally receiving a briefing on the audit outcome. The ATL will be responsible for presenting the evaluation form on each DAI to the Executive Director within 30 days of the completion of the audit, and will submit the audit report to the Executive Director, managing official of the facility and DAI for review and comment within 30 days of the completion of the site visit. The Executive Director will incorporate any substantive comments received in the ensuing period and issue the final report and compliance plan to the Commission members for consideration and approval at the next scheduled meeting, but no later than 60 days from the completion of the audit. The managing official will also be notified by an appropriate means of any significant changes to the report. The report will consist of a summary of audit team activities during the course of the audit; a statement of the significant changes since the last audit as well as future plans; a concise description of the physical plant and an outline of the inmate programs

and services; inmate population characteristics and trends; and, staffing pattern and organizational structure; and, a listing of all noted deficiencies, required corrective action and a compliance plan completion date. At the same time, under separate cover, the Executive Director will forward to the managing official and Commission members information regarding the substantive inmate and staff interview remarks as well as the specific recommendations to enhance compliance as part of the Commission's technical assistance mandate.

The Commission will formally consider the final report and compliance plan at regularly scheduled, open meetings to which a representative of the facility will be invited to observe, ask questions, provide additional information/clarification about certain standards related issues, explain appeals and variance requests previously submitted in writing, etc. The ATL will present the report, answer inquiries from the Commission members and otherwise be available to respond to questions, concerns, etc. The Commission Chairperson will then ask the membership to consider the final report and compliance plan, including the deadlines for addressing noncompliance items, as well as address any appeals/variance requests. Once approved, the Executive Director will disseminate the final report and compliance plan to the specified distribution, depending on jurisdictional factors within 15 days of the Commission's action. It should be noted that the report is a public document and will be made available to interested persons upon request according to guidelines established in COMAR 12.11.02. The Secretary of the DPSCS will also receive copies of the report as well as the previously mentioned memoranda regarding inmate/staff remarks and specific suggestions for the improvement of facility operations. The Secretary may issue correspondence to the jurisdiction regarding the audit outcome.

#### AUDIT FOLLOW-UP ACTIVITIES

All compliance plans will have a completion due date which is six months from the first day of the month following the Commission's approval of the final report. The Executive Director will ensure that a memorandum is sent to the managing official at least 30 days prior to the approved completion date to notify the jurisdiction that documentation will be due to substantiate compliance with identified deficiencies. If compliance is asserted, the managing official will contact the Executive Director or ATL to indicate that documentation is being forwarded or to request an on-site monitoring visit, depending on the number and kind of violations. If documentation is submitted, the ATL will initiate a documentation review and inform the Executive Director and managing official of the

results by memorandum within 30 days. If a site visit is requested, the Executive Director or ATL will contact the managing official to arrange for a mutually agreed upon date and time. All monitoring visits will be performed by Commission staff under the direction of the ATL unless otherwise deemed appropriate by the Executive Director. If the managing official indicates that the initial plans for corrective action cannot be met or the documentation review in the Commission offices or on site determines that to be the case, the managing official will submit a written request to the Executive Director for modification of the compliance deadlines. If information becomes available which indicates that standards previously determined in compliance and are now in noncompliance, the Commission will be notified at the next regularly scheduled meeting for appropriate action. The request, with supporting rationale, will be presented to the Commission for their consideration at the next regularly scheduled meeting. If approved, the Commission will issue a one-time only revised plan for corrective action of six months from the original due date. If disapproved, the Commission may conduct a formal hearing according to established procedures to determine whether certain facility functions, operations or practices should be limited or discontinued, the facility closed or other appropriate action taken.

The Executive Director will recommend to the Commission, at regular scheduled meetings, the presentation of the Recognition of Achievement (ROA) award to any facility which has attained total compliance with all applicable regulations within one year of the approval of the compliance plan. If approved, the Executive Director will notify the jurisdiction in writing and request that they make the formal arrangements for the presentation at which a representative of the Commission and/or agency will officially give the award to the managing official or designee. For a facility which does not achieve 100% compliance within one year, Commission staff shall continue to monitor the correction of the remaining deficiencies until the next scheduled audit on a schedule determined by the Commission upon notification of the failure to qualify for the ROA.

A primary goal of the agency is to facilitate total compliance with the standards, thereby fostering public safety, staff welfare and inmate well being. Every effort will be made to assist in this matter. When requested, Commission staff will provide technical assistance personally/directly or by referral to other resources. However, if substantial noncompliance continues over time or if the managing official fails to make a "good faith effort" to achieve compliance, Commission staff will notify the Commission.

## AUDIT REPORT CONTENTS

### I. SUMMARY

An assessment of such issues as organization, format, content and structure of standard operating procedures (SOP) manuals, post orders, emergency plans and inmate orientation booklets, forms, etc.; comments on the degree of preparation for the audit, organization of documentation materials, and staff awareness of and involvement with the standards process; observations about physical plant maintenance and cleanliness matters, etc; and, remarks about the totality of conditions and quality of life issues are presented in a narrative fashion. An introduction stresses the overall results of the audit (i.e. major deficiencies, noncompliance tendencies, etc.). A concluding segment puts the audit in perspective in relation to previous reports and identifies needs for assistance or support from appropriate sources.

### II. AUDIT ACTIVITIES

A chronicle of the activities and actions of the audit team during the on-site visit.

### III. STANDARDS DETERMINED NOT APPLICABLE

A listing with accompanying rationale.

### IV. STANDARDS FOUND IN NON-COMPLIANCE

A listing in chart form with a brief statement of the deficiency, a compliance plan and a completion date.

### V. SIGNIFICANT CHANGES

A listing of the recent changes of note with regard to the physical plant, inmate programming and population trends, major equipment purchases and staffing.

## AUDIT REPORT CONTENTS CONT'D

### VI. DESCRIPTIVE OUTLINE

#### A. Physical Plant

A brief statement on the location of the facility and a description of the structure and grounds with an emphasis on the general configuration.

#### B. Inmate Programs and Services

A listing of the treatment opportunities and other related programs and services available to the inmate population including schedules of accessibility/provision and number of participants, if possible.

#### C. Staffing Pattern

A listing of authorized positions by category, the number of vacancies, the number of staff awaiting completion of the training mandated by the Maryland Correctional Training Commission, the number of female and minority personnel, and indication of contractual/part time employees.

#### D. Inmate Population Characteristics

A breakdown of the inmate population into basic descriptive categories, a specification of the number, kinds and types involved in various activities, and a comparative analysis with the figures from the previous audit when possible.

MARYLAND COMMISSION ON CORRECTIONAL STANDARDS  
STANDARDS WORKSHEET

FACILITY: \_\_\_\_\_ DATE(S) \_\_\_\_\_

.02 STANDARDS

SECURITY AND INMATE CONTROL

DOCUMENTATION/COMMENTS

\_\_A. USE OF PHYSICAL FORCE

\_\_1. Self-defense

\_\_2. Protect others

\_\_3. Protect property

\_\_4. Prevent escapes

\_\_B. USE OF DEADLY FORCE

\_\_C. EMERGENCY SECURITY PLANS

\_\_1. Coordination

\_\_2. Duties/Responsibilities

\_\_3. Alternate housing

\_\_4. Emergency communications

\_\_5. Designated operations center

\_\_6. Specified command/control

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.02 STANDARDS  
SECURITY AND INMATE CONTROL CONT'D****DOCUMENTATION/COMMENTS**

---

**\_\_D. EMERGENCY/SECURITY PLANS AWARENESS**

---

**\_\_E. SECURITY EQUIPMENT****\_\_1. Secure storage****\_\_2. A current master listing****\_\_3. Monthly inspection/inventory****\_\_4. Authorized access****\_\_5. Use circumstances****\_\_6. Issue/return**

---

**\_\_F. SECURITY EQUIPMENT TRAINING**

---

**\_\_G. INMATES EXERTING CONTROL**

## STANDARDS WORKSHEET

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

.02 STANDARDS  
SECURITY AND INMATE CONTROL CONT'D

DOCUMENTATION/COMMENTS

---

\_\_H. SUPERVISION OF INMATES

\_\_1. Counts

\_\_2. Rounds

\_\_3. Monitoring whereabouts

\_\_4. Drug/alcohol testing

\_\_5. Secure/orderly movement

\_\_6. Wkly. security inspections

---

\_\_I. POST ORDERS

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

.02 STANDARDS.  
SECURITY AND INMATE CONTROL CONT'D

DOCUMENTATION/COMMENTS

---

\_\_J. SEARCH PROCEDURES

- \_\_1. Personnel searches
  
- \_\_2. Biannual facility search
  
- \_\_3. Search of inmates with community access
  
- \_\_4. Search of other inmates
  
- \_\_5. Vehicle searches
  
- \_\_6. Visitor search
  
- \_\_7. Property protection
  
- \_\_8. Receipting
  
- \_\_9. Chain of custody
  
- \_\_10. Body cavity search
  
- \_\_11. Visual ("strip") search
  
- \_\_12. Staff instruction

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.02 STANDARDS  
SECURITY AND INMATE CONTROL CONT'D**

DOCUMENTATION/COMMENTS

---

**\_\_K. KEY CONTROL**

- \_\_1. Secure storage
- \_\_2. Quarterly inspection
- \_\_3. Daily inventory
- \_\_4. Authorized access
- \_\_5. Issue/return
- \_\_6. Duplicates
- \_\_7. Emergency/restricted keys
- \_\_8. Current master listing

---

**\_\_L. TOOL CONTROL**

- \_\_1. Secure storage
- \_\_2. Quarterly inspection



FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.02 STANDARDS  
SECURITY AND INMATE CONTROL CONT'D**

DOCUMENTATION/COMMENTS

---

**\_\_N. INTAKE PROCEDURES****\_\_1. Commitment verification****\_\_2. Search****\_\_3. Positive identification****\_\_4. Intake data****\_\_5. Initial phone call**

---

**\_\_O. RELEASE PROCEDURES****\_\_1. Identification verification****\_\_2. Release confirmation****\_\_3. Notification of affected agencies/persons**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

.02 STANDARDS  
SECURITY AND INMATE CONTROL CON'T

DOCUMENTATION/COMMENTS

---

\_\_P. SPECIAL CONFINEMENT

\_\_1. Placement/removal authority

\_\_2. Conditions/circumstances for assignment/release

\_\_3. Review procedures

\_\_4. Program/service access

\_\_5. Supervision records

---

\_\_Q. SEPARATION OF SEXES

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.03 STANDARDS  
INMATE SAFETY**

## DOCUMENTATION/COMMENTS

---

**\_\_A. FIRE SAFETY INSPECTION**

---

**\_\_B. INTERNAL FIRE SAFETY INSPECTION**

---

**\_\_C. DISASTER PLANS****\_\_1. Coordination****\_\_2. Duties/responsibilities****\_\_3. Evacuation instructions****\_\_4. Alternate housing****\_\_5. Quarterly fire drills  
on each shift**

---

**\_\_D. DISASTER PLANS AWARENESS**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.03 STANDARDS  
INMATE SAFETY CONT'D**

DOCUMENTATION/COMMENTS

---

**\_\_E. EMERGENCY MEDICAL SERVICES**

- \_\_1. Access to facilities/personnel
  
  
- \_\_2. Monthly inventory of designated/approved kits
  
  
- \_\_3. First aid/CPR certification requirements

---

**\_\_F. ROUTINE HEALTH SERVICES**

---

**\_\_G. RECEPTION MEDICAL SCREENING**

---

**\_\_H. DISPENSING MEDICATIONS**

- \_\_1. Authorized prescription initiation
  
  
- \_\_2. Method for filling prescriptions
  
  
- \_\_3. System of packaging and labelling

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.03 STANDARDS  
INMATE SAFETY CONT'D****DOCUMENTATION/COMMENTS**

---

**\_\_I. ADMINISTRATION OF MEDICATIONS****\_\_1. Standing orders/protocol****\_\_2. Administration instruction to nonmedical personnel****\_\_3. Administration/refusal records****\_\_4. Circumstances for self-administration**

---

**\_\_J. CONTROL OF MEDICATIONS****\_\_1. Secure storage****\_\_2. Specified access****\_\_3. Disposal procedures****\_\_4. Weekly inventory of controlled substances****\_\_5. Incoming med. handling****\_\_6. Transfer/release medicine handling**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.03 STANDARDS  
INMATE SAFETY CONT'D**

DOCUMENTATION/COMMENTS

---

**\_\_K. CONTROL OF MEDICAL AND DENTAL INSTRUMENTS****\_\_1. Secure storage****\_\_2. Specified access****\_\_3. Quarterly inspection****\_\_4. Weekly inventory****\_\_5. Disposal procedures****\_\_6. Needle/syringe usage records****\_\_7. Current master listing**

---

**\_\_L. MEDICAL TESTING**

---

**\_\_M. LICENSING/CERTIFICATION**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.03 STANDARDS  
INMATE SAFETY CONT'D**

DOCUMENTATION/COMMENTS

---

**\_\_N. MEDICAL JUDGEMENT**

(1) Decisions by qualified health care personnel.

(2) Nonintervention by staff.

---

**\_\_O. PHYSICAL EXAMINATIONS**

---

**\_\_P. RELEASE MEDICAL SCREENING**

---

**\_\_Q. MOSHA INSPECTION**

---

**\_\_R. MENTAL HEALTH SERVICES**

---

**\_\_S. NOTIFICATION OF NEXT OF KIN**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

.04 STANDARDS  
INMATE FOOD SERVICES

DOCUMENTATION/COMMENTS

\_\_\_\_A. MENU APPROVAL

\_\_\_\_B. FREQUENCY OF MEALS

\_\_\_\_C. HEALTH INSPECTION

\_\_\_\_D. DIETARY HYGIENE PRACTICES

\_\_\_\_E. DIETARY MEDICAL SCREENING

\_\_\_\_F. SPECIAL DIETS

\_\_\_\_G. USE OF FOOD AS PUNISHMENT/REWARD

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.04 STANDARDS  
INMATE FOOD SERVICES CONT'D**

DOCUMENTATION/COMMENTS

---

**\_\_H. SUPERVISION OF FOOD SERVICES**

---

**\_\_I. WEEKLY DIETARY SANITATION INSPECTIONS**

---

**\_\_J. KITCHEN UTENSIL CONTROL****\_\_1. Secure storage****\_\_2. Daily inventory****\_\_3. Quarterly inspection****\_\_4. Issue/return****\_\_5. Specified access/use****\_\_6. Current master listing**

FACILITY \_\_\_\_\_

DATE(S) \_\_\_\_\_

**.05 STANDARDS  
INMATE HOUSING AND SANITATION**

DOCUMENTATION/COMMENTS

---

**\_\_A. TOXIC, CAUSTIC AND FLAMMABLE MATERIALS CONTROL****\_\_1. Secure storage****\_\_2. Quarterly inspection/inventory****\_\_3. Authorized access/use****\_\_4. Issue and disposal**

---

**\_\_B. WEEKLY FACILITY SANITATION INSPECTIONS**

---

**\_\_C. GENERAL SANITATION REQUIREMENTS****\_\_1. Staff/inmate duties****\_\_2. Quarterly vermin/pest control****\_\_3. Weekly trash removal**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

.05 STANDARDS  
INMATE HOUSING AND SANITATION CONT'D

DOCUMENTATION/COMMENTS

\_\_\_\_D. PERSONAL ACCOMMODATIONS

\_\_\_\_E. PERSONAL HYGIENE ARTICLES

\_\_\_\_F. INMATE CLOTHING

\_\_\_\_G. INMATE BEDDING AND LINEN

\_\_\_\_H. INMATE LAUNDRY SERVICES

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.05 STANDARDS  
INMATE HOUSING AND SANITATION CONT'D****DOCUMENTATION/COMMENTS****\_\_1. INMATE PROPERTY MANAGEMENT****\_\_1. Allowable property list****\_\_2. Itemized listing****\_\_3. Signatures upon confiscation/return****\_\_4. Biannual inventory****\_\_5. Replacement procedures****\_\_6. Disposal procedures****\_\_7. Modifications to listing**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

.06 STANDARDS  
INMATE RIGHTS

DOCUMENTATION/COMMENTS

\_\_A. NONDISCRIMINATION

\_\_B. PROTECTION FROM ABUSE

\_\_C. LEGAL MATTERS

\_\_1. Court access

\_\_2. Reference materials/availability

\_\_3. Legal mail handling

\_\_4. Legal visits availability

\_\_5. Legal calls access

\_\_D. RELIGIOUS PRACTICES

FACILITY \_\_\_\_\_

DATE(S) \_\_\_\_\_

.06 STANDARDS  
INMATE RIGHTS CONT'D

DOCUMENTATION/COMMENTS

---

\_\_E. MAIL PRACTICES

---

\_\_F. INMATE ORIENTATION

\_\_1. Emergency plans

\_\_2. Classification procedures

\_\_3. Rules/regulations/disciplinary process

\_\_4. Complaint process

\_\_5. Search practices

\_\_6. Access to case records

\_\_7. Programs/services regulated by standard

\_\_8. Sick call access

FACILITY \_\_\_\_\_

DATE(S) \_\_\_\_\_

.06 STANDARDS  
INMATE RIGHTS CONT'D

DOCUMENTATION/COMMENTS

\_\_\_G. CONVICTED INMATES/PROGRAM PARTICIPATION

\_\_\_H. PRETRIAL INMATES/PROGRAM PARTICIPATION

\_\_\_I. REGULAR EXERCISE

\_\_\_J. INTERNAL COMPLAINT SYSTEM

\_\_\_K. PERSONAL GROOMING

\_\_\_L. ACCESS TO MEDIA

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

.06 STANDARDS  
INMATE RIGHTS CONT'D

DOCUMENTATION/COMMENTS

---

\_\_M. HOUSING OF JUVENILES

---

\_\_N. VISITATION PRACTICES

---

\_\_O. GENERAL TELEPHONE USE

FACILITY \_\_\_\_\_

DATE(S) \_\_\_\_\_

.07 STANDARDS  
CLASSIFICATION

DOCUMENTATION/COMMENTS

---

\_\_A. CLASSIFICATION PROCESS

\_\_1. Decision makers identification

\_\_2. Criteria

\_\_3. Initial classification/annual reclassification

\_\_4. Recorded decisions

\_\_5. Managing official review

---

\_\_B. CLASSIFICATION PROCESS AWARENESS

FACILITY \_\_\_\_\_

DATE(S) \_\_\_\_\_

**.08 STANDARDS  
HEARINGS****DOCUMENTATION/COMMENTS**

---

**\_\_A. FORMAL DISCIPLINARY HEARING PROCESS****\_\_1. 48 hour inmate notification****\_\_2. Inmate appearance****\_\_3. Witness/representatives/evidence****\_\_4. Recorded decisions****\_\_5. Managing official review****\_\_6. Appeal process**

---

**\_\_B. FORMAL DISCIPLINARY HEARING PROCESS AWARENESS**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

**.09 STANDARDS  
ADMINISTRATIVE RECORD KEEPING****DOCUMENTATION/COMMENTS**

---

**\_\_A. CONFIDENTIALITY OF CASE RECORDS****\_\_1. Access approval authority****\_\_2. Restricted/accessible information****\_\_3. Release consent form****\_\_4. Recorded decisions****\_\_5. Appeal process**

---

**\_\_B. COMPUTATION OF SENTENCE CREDITS**

FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

## .09 STANDARDS

## ADMINISTRATIVE RECORD KEEPING CONT'D

## DOCUMENTATION/COMMENTS

---

C. MANAGEMENT OF INMATE FUNDS1. Confiscation and receipting procedures2. Establishment of inmate accounts3. Records of all transactions4. Recorded return upon release

---

D. OFFICIAL PUBLICATIONS ANNUAL REVIEW

---

E. CASE RECORDS1. Secure storage2. File content and order3. Dated signatures4. Disposal/retention schedules5. Transfer procedures



WILLIAM DONALD SCHAEFER  
GOVERNOR

MELVIN A. STEINBERG  
LT. GOVERNOR

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SECRETARY

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CHAIRPERSON

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DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES  
MARYLAND COMMISSION ON CORRECTIONAL STANDARDS

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BALTIMORE, MARYLAND 21215-2345  
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**TO: Managing Officials/Addressees**

**FROM: Paul S. Hastmann, Executive Director**

**RE: Listing of Primary Documentation**

As you may recall, we requested that each jurisdiction provide us with a copy or otherwise make available all official publications (i.e. SOP manual, post orders, inmate handbook, emergency plans, etc.) and that we be included in any update/revisions. The purpose of this request was to have all relevant documents readily accessible to Commission staff to allow for off-site review of primary documentation (policy and procedure requirements), thereby minimizing the disruption to facility operations, limiting the time needed on site and reducing travel and overtime costs.

In order to assist the Commission staff and Duly Authorized Inspectors (DAI) in their consideration of documentation to substantiate compliance with applicable regulations, we ask that you perform a self-assessment utilizing the attached forms and return them to the Commission offices in the next 30 days. You should use the commentaries and compliance criteria contained in the Standards Manual to help you in identifying those facility specific documents which meet the policy and procedure requirements of the standard. You may also consider the Audit Form left with you from the last audit as a reference document. By so doing, the site visit will primarily concentrate on observations, discussions with staff and inmates and the review of secondary documentation (i.e. logs, forms, records, etc.) to substantiate the routine and consistent implementation of the procedures indicated in your referenced listing. Please note the SOP/post order number, handbook page number, etc. It would also be helpful if you would indicate the specific page(s) of a particular document to facilitate any office review. The attached sample should prove to be of assistance in the timely completion of this important task. Nothing precludes you from

TO: Managing Officials/Addressees  
FROM: Paul S. Hastmann, MCCS  
RE: Listing of Primary Documentation  
Page two

completing and submitting the aforementioned self-evaluation in advance of your scheduled audit. Nevertheless, if there are questions about standards interpretation or the use of the attached forms, contact us at your earliest opportunity.

**NOTE:** It is the facility's responsibility to provide the documentation necessary to demonstrate compliance with each standard. Ultimately, the burden of proof for supporting compliance is on the managing official.

## MARYLAND COMMISSION ON CORRECTIONAL STANDARDS

### INSTRUCTIONS FOR CONDUCTING

#### INMATE INTERVIEWS

Inmate interviews are held to determine their perspective about standards related matters, to provide assistance in compliance decision making, and, in conjunction with tour observations, review of records, etc., to assess morale. The audit team member who is assigned the standards addressing Inmate Rights (.06 A-0) will usually be assigned this task. If the facility has an inmate representative body, then that group or, if the size is prohibitive, the officers or designees of that body, will be interviewed in a group setting without staff presence for approximately one hour. If no such official body exists, the managing official will be asked to request inmates to participate on a voluntary basis, ensuring a cross-section of the inmate population (e.g. race, sex, legal status, program status, custody level, etc.). Under no circumstances shall the managing official be permitted to pre-select those inmates to be interviewed.

The audit team member will introduce his/her self and briefly explain the purpose of the interview. The interviewer should make no promises other than that the remarks will be brought to the attention of the managing official for whatever action is deemed appropriate. No judgements are to be made about the veracity or legitimacy of particular comments. At no time are personal cases, especially the legal aspects thereof, to be discussed. Efforts should be made to keep the discussion related to the subject matter on the attached format (i.e. avoid tangential remarks, etc.), attempt to "strike a balance" between positive and negative comments; minimize the domination of the discussion by one speaker by directing some of the questions to others to elicit participation; and, seek to obtain a consensus if responses to inquiries vary to a significant degree.

The audit team member must record the remarks as completely and accurately as possible on the attached outline. The interview should be concluded in about an hour and the results communicated to the Audit Team Leader at the earliest opportunity. The Audit Team Leader/Duly Authorized Inspector will share pertinent remarks in summary at the exit conference. The Executive Director will disseminate the complete format/outline to the Secretary, Commission members and the managing official within 60 days of the completion of the audit.

**INSTRUCTIONS FOR CONDUCTING  
INMATE INTERVIEWS CONT'D**

**PAGE TWO**

It should be noted that the information on the format/  
outline will not be part of the official Final Audit Report nor  
will the report make any mention of the outcome of the inter-  
views. The interview responses are provided for informational  
purposes only. They do not represent the official position of  
the Secretary, Commission or audit team members nor should they  
be considered conclusive in that the MCCS is not an inmate  
advocacy group nor an investigating body.

MARYLAND COMMISSION ON CORRECTIONAL STANDARDS

INMATE INTERVIEWS

FACILITY: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

INTERVIEWER(S): \_\_\_\_\_ TITLE: \_\_\_\_\_  
\_\_\_\_\_ TITLE: \_\_\_\_\_

GROUP COMPOSITION (#M/F): \_\_\_\_\_

A. FOOD SERVICES

QUALITY (i.e. temperature, texture, taste, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

QUANTITY/PORTION CONTROL: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MENU VARIETY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MEDICAL DIETS (availability): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RELIGIOUS DIETS (availability): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CLEANLINESS (i.e. dining area, utensils, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TIMELINESS/ADHERENCE TO SCHEDULE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HYGIENE PRACTICES OF INMATE WORKERS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. MEDICAL SERVICES

SICK CALL (responsiveness): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HEALTH CARE STAFF (professionalism, quality of care, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RECEPTION SCREENING/PHYSICAL EXAMS (timeliness, thoroughness): \_\_\_\_\_

MEDICATION (timeliness, record keeping, etc.): \_\_\_\_\_

OTHER: \_\_\_\_\_

C. PHYSICAL PLANT

MAINTENANCE/REPAIR ISSUES: \_\_\_\_\_

CROWDING/CRAMPED LIVING QUARTERS: \_\_\_\_\_

HEATING/VENTILATION (temperature, air circulation, etc.): \_\_\_\_\_

ACCOMMODATIONS (sufficient operable numbers, hot water, etc.) \_\_\_\_\_

GROUNDS (appearance, spaciousness): \_\_\_\_\_

CLEANLINESS/HOUSEKEEPING/CLUTTER: \_\_\_\_\_

OTHER: \_\_\_\_\_

D. RELATIONSHIPS

INMATE/INMATE: \_\_\_\_\_

INMATE/CUSTODY STAFF (consistency, professionalism, responsiveness, etc.): \_\_\_\_\_

INMATE/TREATMENT STAFF (genuine interest, motivation, etc.): \_\_\_\_\_

INMATE/ADMINISTRATION (accessibility, concern, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E. PROGRAMS/SERVICES/OPPORTUNITIES (availability, accessibility, quality)

EDUCATION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DRUG/ALCOHOL/OTHER COUNSELING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LIBRARY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VISITING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MAIL HANDLING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMISSARY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HYGIENE ARTICLES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CLOTHING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RELIGIOUS SERVICES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RECREATION/EXERCISE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMPLAINT PROCESS/SYSTEM: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LEGAL MATTERS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

GROOMING/HAIR CARE SERVICES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

BEDDING/LINEN: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LAUNDERING: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

F. GENERAL

ORIENTATION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CUSTODY SUPERVISION/PRACTICES (counts, rounds, searches, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DRILLS/DISASTER RESPONSES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FINANCES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ACCESS TO RECORDS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROPERTY MANAGEMENT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CLASSIFICATION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## GUIDELINES FOR CONDUCTING AUDITS

### I. FILE REVIEW

INMATE CASE RECORDS (i.e. medical, commitment, base or other such files).

NOTE 1: The following chart indicates the minimum percentage of inmate related records which are to be reviewed according to the size of the inmate population. Nothing precludes the ATL or DAI from examining additional files if time permits and/or circumstances warrant.

<u>FACILITY SIZE (# OF INMATES)</u>	<u>% OF FILES TO BE REVIEWED</u>
1-50	100%
51-100	75%
101-200	50%
201-500	25%
501-1000	15%
1001-2000	10%
OVER 2000	5%

### II. PERSONNEL FILES (i.e. training records, staff personnel files and other such files).

NOTE 2: The following chart reflects the minimum percentage of personnel related records to be considered for review by the audit team based on the number of full time staff assigned to the facility. Nothing precludes the ATL or DAI from examining additional files if time permits or circumstances warrant.

<u># OF FULL TIME PERSONNEL</u>	<u>% OF FILES TO BE REVIEWED</u>
1-25	100%
26-50	75%
51-100	50%
101-250	25%
251-500	15%
OVER 500	10%

NOTE 3: The files to be reviewed shall be selected by the audit team members at random. Under no circumstances are records pre-selected by the facility to be accepted. Releases are not necessary per the Attorney General's advice of counsel. Due to the regulatory nature of the agency, all files are subject to inspection.

NOTE 4: Personnel and/or inmate files are never to be removed from the audit site.

WILLIAM DONALD SCHAEFER  
GOVERNOR

MELVIN A. STEINBERG  
LT. GOVERNOR



STATE OF MARYLAND  
**DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES**  
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CHAIRPERSON

PAUL S. HASTMANN  
EXECUTIVE DIRECTOR

**TO: Managing Officials/Addressees**

**FROM: Paul S. Hastmann, Executive Director**

**RE: DESCRIPTIVE UPDATE**

The attached forms are to be utilized to update the information contained in the last audit report. Please fill them out as completely, accurately and quickly as possible and return them to the Commission offices in the next 30 days. Commission staff will review them thoroughly and get back to you within two weeks of receipt if there are any questions or needs for additional information. If you need help or clarification about any of the requested items, contact our office at your earliest opportunity. Please note that this outline format replaces the narrative used in previous reports which will become part of the Final Report; therefore, comprehensiveness and exactness are vitally important. The following represents some specific instructions about the completion of the forms. In addition, we have included a sample to provide additional guidance in this matter.

**Significant Changes**

The intent of this section is to give the reader pertinent information about possible inmate population trends, substantive modifications to physical structure/programs/staff complement and plans to address future growth. The managing official or designee should use the last audit report as a frame of reference to indicate the significant changes. Other sources of such information include but are not limited to: annual reports, budget submissions, planning documents, etc. It is suggested that this section be filled out after the descriptive outline part of the questionnaire is completed.

TO: Managing Officials/Addressees  
FROM: Paul S. Hastmann, MCCA  
RE: DESCRIPTIVE UPDATE  
Page 2

### Descriptive Outline

The staffing pattern section of the questionnaire essentially requests that the managing official list all personnel according to functional category (i.e. administrative, security, etc.), indicate the number of filled positions, note the number that have yet to complete the entrance level training requirements of the Maryland Correctional Training Commission (MCTC), state the sex and race composition of the personnel complement and indicate the number of vacancies by position. The information should be based on the most recent figures available (please note the date under the heading). Under the number of positions, break down the total using the codes "C" and "PT" as reflected on the form. Each functional category has a section for other to accommodate jurisdictional differences in position title/personnel designations.

The programs and services part of the questionnaire has been subdivided to address the variety and diversity of such opportunities in Maryland's correctional facilities. If the category does not apply to your jurisdiction, then leave it blank. If there are programs or services which are not listed, please enter them by name in the item marked other. An estimate of the actual or average number of participants/attendees in the various programs and their frequency/schedule would be informative for the report readers. Only the latter information is requested with respect to general privileges since they are available to all general and most special inmate populations unless circumstances dictate otherwise. The listing of institutional assignments would include work assignments (i.e. sanitation, dietary, etc.) as well as vocational training/apprenticeship programs, educational programs (e.g. ABE, GED, college, etc.) and social/life skills training. Off-site programs would consist of community work crews ("road gangs"), inmate volunteer programs, etc. Again, the number of participants and frequency of participation would be helpful.

The physical plant section need only contain the changes from the last report. Please make a copy of that section from the previous report, note the modifications directly and include with this submission. If there have been significant renovation or additions to the existing facility, describe the new physical plant configuration utilizing the format used in prior reports.

TO: Managing Officials/Addressees  
FROM: Paul S. Hastmann, MCCS  
RE: DESCRIPTIVE UPDATE  
Page 3

The section on inmate population involves filling in the figures from the most recent information available. While the characteristics part is optional, you are encouraged to provide the statistics from annual reports, etc. The percentage change will be computed by Commission staff comparing/contrasting the figures from the previous report.

The aforementioned format will be utilized for the reports of all existing facilities subject to the Commission's regulatory mandate. If anyone wishes to review a narrative report, they are available in each facility's respective working file. For new facilities, an entire narrative report will be developed and then replaced during the next audit cycle by the outline format.

PSH:rc

ADDRESSEES:

Managing Officials - Adult Detention Centers  
Adult Correctional Institutions  
Adult Community Correctional Facilities

MARYLAND COMMISSION ON CORRECTIONAL STANDARDS

AUDIT TEAM LEADER EVALUATION OF  
DULY AUTHORIZED INSPECTOR (DAI)

AUDIT DATE(S): \_\_\_\_\_

FACILITY: \_\_\_\_\_

AUDIT TEAM LEADER: \_\_\_\_\_

DAI: \_\_\_\_\_

The MCCS needs to ensure that correctional facilities and programs receive audits that are complete, thorough and conducted in a professional manner. To do so, please evaluate each DAI that participated in the aforementioned facility audit. The information you provide will be kept confidential and be used to assess the individual performance of the named DAI. The performance standards included in this form are only guidelines and are not all inclusive. Additional comments are encouraged. The evaluation will be utilized to identify possible deficiencies in the approved training program, to assist in the screening of potential inspectors, and otherwise to enhance the overall effectiveness of the audit process.

For each of the following items, please rate the DAI's performance by circling one number on the scale that you feel best represents the auditor's performance on the item indicated.

Performance Rating

	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
	Needs Improvement	Acceptable	Good	Very Good	Outstanding
1. The inspector understood the intent of the MCCS standards.	1	2	3	4	5
2. The inspector was familiar with Commission policies regarding the audit process.	1	2	3	4	5
3. The inspector was knowledgeable about the operation of the facility.	1	2	3	4	5

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 4. The inspector thoroughly reviewed the documentation prepared by MCCS and facility staff.  | 1 | 2 | 3 | 4 | 5 |
| 5. The inspector worked well with other members of the audit team.   | 1 | 2 | 3 | 4 | 5 |
| 6. The inspector allowed facility staff to gather additional documentation if questions arose on certain standards.  | 1 | 2 | 3 | 4 | 5 |
| 7. The inspector maintained a professional demeanor.   | 1 | 2 | 3 | 4 | 5 |
| 8. The inspector's judgements and interpretations were based on the standards, not on his/her feelings.  | 1 | 2 | 3 | 4 | 5 |
| 9. The inspector exhibited a helpful, cooperative and positive attitude in dealing with facility staff.  | 1 | 2 | 3 | 4 | 5 |
| 10. The inspector kept facility staff well informed throughout the audit.  | 1 | 2 | 3 | 4 | 5 |
| 11. The inspector spent an appropriate amount of time interviewing facility staff and inmates.   | 1 | 2 | 3 | 4 | 5 |
| 12. The inspector was able to identify problems for resolution during the course of the audit including the collection of evidence sufficient to substantiate preliminary compliance assessment. | 1 | 2 | 3 | 4 | 5 |
| 13. During the entrance interview the inspector was cordial and informative regarding his/her background and experience.   | 1 | 2 | 3 | 4 | 5 |
| 14. The inspector's presentation during the exit interview was well organized and comprehensive.   | 1 | 2 | 3 | 4 | 5 |
| 15. The inspector presented technical assistance for improving the program within the framework of the standards.  | 1 | 2 | 3 | 4 | 5 |

- 16. The inspector was able to assist facility staff when questions regarding interpretation of standards and documentation arose. 1 2 3 4 5
  
- 17. The inspector's judgement regarding operational, program and compliance weaknesses was accurate, thorough and based on the conditions that existed at the time of the audit. 1 2 3 4 5
  
- 18. The inspector submitted all written materials according to established requirements. 1 2 3 4 5
  
- 19. The inspector exhibited good time management. 1 2 3 4 5
  
- 20. What is your overall rating of the inspector's performance? 1 2 3 4 5

Additional comments regarding the DAI's performance.

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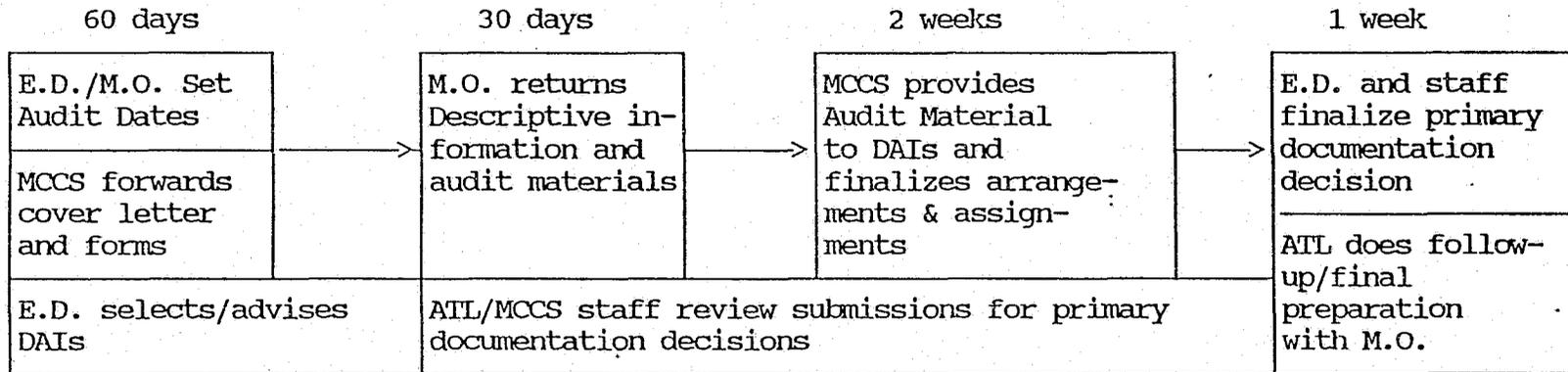
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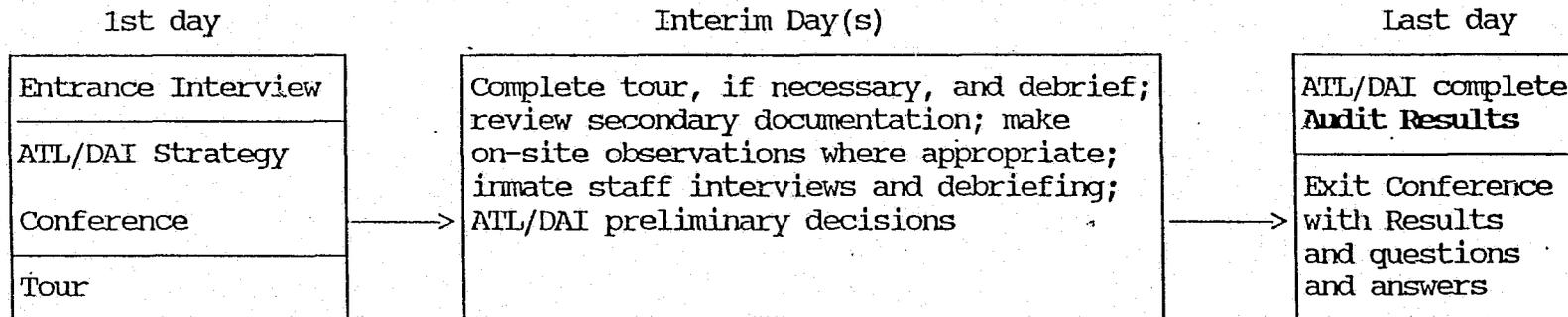
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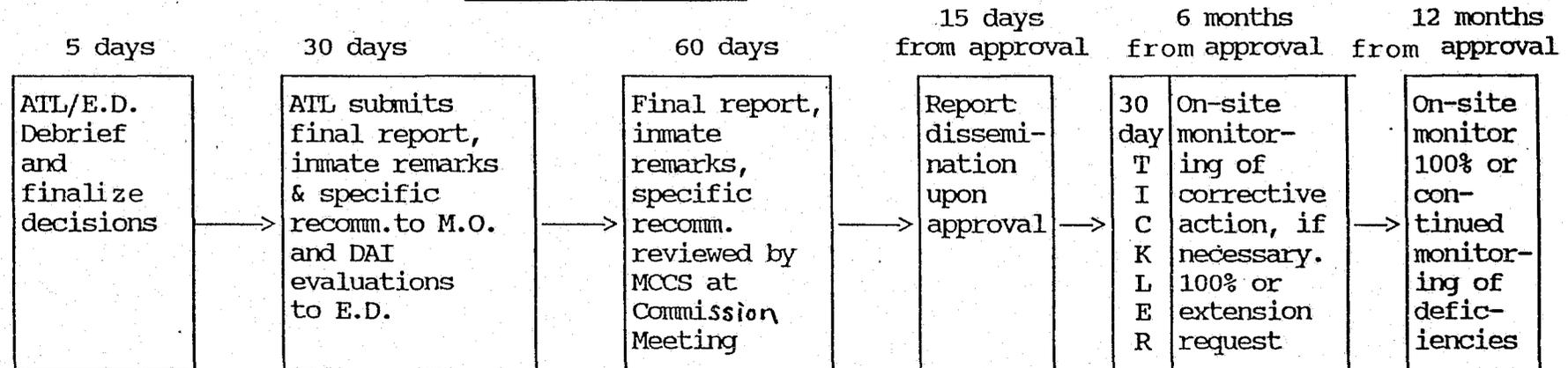
**MCCS AUDIT PROCESS TIMELINES**  
**PREAUDIT ACTIVITY (60 DAYS)**



**ON-SITE AUDIT ACTIVITY (DAYS VARY)**



**POST AUDIT ACTIVITY**



E.D.=Executive Director M.O.=Managing Official ATL=Audit Team Leader  
DAI=Duly Authorized Inspector ROA=Recognition of Achievement

100% compliance eligible for ROA

AUDIT ACTIVITIES

1. FACILITY \_\_\_\_\_ DATE(S) \_\_\_\_\_

2. AUDIT TEAM MEMBERS

<u>CODE</u>	<u>NAME</u>	<u>TITLE/RANK</u>	<u>AFFILIATION</u>	<u>PHONE #</u>
A				
B				
C				
D				
E				
F				

3. ASSIGNED STANDARDS (by corresponding team member letter above)

- |                                   |                                       |
|-----------------------------------|---------------------------------------|
| ____.02 SECURITY/INMATE CONTROL   | ____.06 INMATE RIGHTS                 |
| ____.03 INMATE SAFETY             | ____.07 CLASSIFICATION                |
| ____.04 INMATE FOOD SERVICES      | ____.08 HEARINGS                      |
| ____.05 INMATE HOUSING/SANITATION | ____.09 ADMINISTRATIVE RECORD KEEPING |

4. TEAM ARRIVAL/DEPARTURE TIMES

<u>DATE</u>	<u>ARRIVAL</u>	<u>DEPARTURE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. ENTRANCE INTERVIEW: DATE \_\_\_\_\_ TIME \_\_\_\_\_  
AUDIT TEAM MEMBERS PRESENT: \_\_\_\_\_  
FACILITY STAFF PRESENT (NAME/POSITION) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. TOUR: DATE(S) \_\_\_\_\_ TIME \_\_\_\_\_

AUDIT TEAM MEMBERS: \_\_\_\_\_  
ESCORTS: \_\_\_\_\_

7. INMATE INTERVIEWS: DATE \_\_\_\_\_ TIME \_\_\_\_\_

AUDIT TEAM MEMBER: \_\_\_\_\_  
CHARACTERISTICS: MALES \_\_\_\_\_ FEMALES \_\_\_\_\_ LOCATION \_\_\_\_\_

8. STAFF INTERVIEWS:

CHARACTERISTICS: MALES \_\_\_\_\_ FEMALES \_\_\_\_\_ SECURITY \_\_\_\_\_ ADMIN. \_\_\_\_\_  
MEDICAL \_\_\_\_\_ SUPPORT \_\_\_\_\_ OTHER \_\_\_\_\_

9. EXIT INTERVIEW: DATE \_\_\_\_\_ TIME \_\_\_\_\_

AUDIT TEAM MEMBERS PRESENT \_\_\_\_\_  
FACILITY STAFF PRESENT: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER REMARKS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ADULT DETENTION CENTERS

H. INMATE POPULATION (As of \_\_\_\_\_) % CHANGE\*

1. Operating Capacity
2. Males
3. Females
4. Total
5. Locally Sentenced
6. Awaiting Trial
7. Awaiting PSI
8. Awaiting Transfer to DOC
9. Held for Other Jurisdicitons
10. Out to Other Jurisdictions
11. Weekenders
12. Hospital/Infirmary
13. Special Confinement
  - a. Disciplinary Detention
  - b. Administrative Segregation
  - c. Protective Custody
  - d. Medical Isolation
14. Work Release
15. Home Detention
  - a. Pre-trial
  - b. Sentenced
16. Pre-Trial Services
17. Inmate Characteristics (Optional)
  - a. Average Age
  - b. % of Minorities
  - c. Predominant charges/offenses
  - d. Average sentence length
18. Other:

\*TO BE CALCULATED BY MCCS.

ADULT CORRECTIONAL INSTITUTIONS/  
ADULT COMMUNITY CORRECTIONAL FACILITIES

- H. INMATE POPULATION (as of \_\_\_\_\_) % CHANGE\*
1. Operating Capacity
  2. Current Total
  3. Maximum Custody
  4. Medium Custody
  5. Minimum Custody
  6. Pre-Release Custody
  7. Held for Other Jurisdictions
  8. Out to Other Jurisdictions
  9. Special Confinement
    - a. Disciplinary Detention
    - b. Administrative Segregation
    - c. Protective Custody
    - d. Medical Isolation
  10. Hospital/Infirmary
  11. Inmate Characteristics (Optional)
    - a. Average age
    - b. % of Minorities
    - c. Predominant charge/offense
    - d. Average length of sentence
  12. Work Release
  13. Other:

\*TO BE CALCULATED BY MCCS.

**AUDIT RESULTS**

**REGULATION:** \_\_\_\_\_

**NONCOM-  
PLIANCE**

**RECOM-  
MENDA-  
TIONS**

**NON-  
APPLI-  
CABLE**

**STATEMENT OF DEFICIENCY(IES):**

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**RECOMMENDATIONS:**

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**REMARKS:** (e.g. appeal, variance request, statement of nonapplicability, general observations, incidents of note, etc.)

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**SIGNATURES:**

**DAI:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ATL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**NOTE:** Form is to be filled out and copy given to managing official/designee in cases of standards in **noncompliance**, **nonapplicability**, **recommendations** or other special incidents of note.

COMPLIANCE PLAN

COMPLETION DUE DATE: \_\_\_\_\_

NON-COMPLIANCE  
STANDARD(S)

DEFICIENCY(IES)  
NOTED

CORRECTIVE  
ACTION NEEDED

## SIGNIFICANT CHANGES

- A. STAFFING (Chronological, when and what)
  - 1. Administrative Change(s)
  - 2. Kind and number of positions added/deleted.
  - 3. Alteration to "rank" structure.
  - 4. Other
  
- B. PROGRAMS/SERVICES (Chronological, when and what)
  - 1. Additions
  - 2. Deletions
  - 3. Modifications
  
- C. INMATE POPULATION (See Appendix)
  
- D. PHYSICAL PLANT (Chronological, when and what)
  - 1. Renovation
  - 2. New Construction
  - 3. Major Equipment Acquisitions
    - a. Replacement
    - b. New
  
- E. FUTURE PLANS (Chronological, when and what).

DESCRIPTIVE OUTLINE

- A. FACILITY:
- B. CATEGORY (Chapter type)
- C. ADMINISTRATIVE AUTHORITY:
- D. MANAGING OFFICIAL (name, title, telephone number)
- E. AUDIT COORDINATOR(S) (name, title, telephone number)
- F. STAFFING PATTERN as of this date  
Use "C" for contractual/"PT" for part time)

<u>RANK/TITLE</u>	<u># POSI-</u> <u>TIONS</u>	<u># PENDING</u> <u>MCTA</u>	<u>M</u>	<u>F</u>	<u>MINO</u> <u>RITIES</u>	<u>VACAN</u> <u>CIES</u>
1. <u>ADM. PERSONNEL</u>						
A. Warden/ Director/Supt.						
B. Asst./Deputy Warden/Supt./ Director						
C. Security Chief						
D. Other (List)						
2. <u>SECURITY PERSNL.</u> (i.e. COs, deputies, etc.)						
A. Major						
B. Captain						
C. Lieutenant						
D. Sergeant						
E. Corporal						
F. Private						
G. Other (list)						
3. <u>TREATMENT PERSNL.</u>						
A. Counselors/ Case Workers/ Case Managers						
B. Social Workers						
C. Psychologists						
D. Other (list)						

	<u>*POSITIONS</u>	<u>*PENDING MCTA</u>	<u>M</u>	<u>F</u>	<u>MINORITIES</u>	<u>VACANCIES</u>
4. <u>SUPPORT PERSONNEL</u>						
A. Recreation						
B. Chaplains						
C. Cooks/Dietary						
D. Supply Off.						
E. Maintenance						
F. Clerical						
G. Other (list)						
5. <u>MEDICAL PERSONAL</u>						
A. Physicians						
B. Nurses (RN, LPN)						
C. Physician Asst.						
D. Nurse Practit.						
E. Dentists						
F. Other (list)						

G. PROGRAMS/SERVICES (if applicable)

\* Participants      Frequency/Schedule

1. Self-Help Activities

- A. Inmate Council
- B. Substance Abuse Counseling
- C. Mental Health Counseling/Therapy
- D. AA
- E. NA
- F. Religious Services
- G. Bible Study
- F. Other (list)

2. General Privileges

Frequency/Schedule

- A. Library
- B. Commissary
- C. Visiting
- D. Telephone Use
- E. Mail

- F. Exercise
  - \_\_\_ Indoor
  - \_\_\_ Outdoor
- G. Recreation
  - \_\_\_ Games
  - \_\_\_ TV/VCR
  - \_\_\_ Radios
  - Other (list)

3. INSTITUTIONAL PROGRAMS/  
TRUSTY ASSIGNMENTS

# Participants

Frequency/  
Schedule

List:

4. OFF SITE PROGRAMS/  
WORK CREWS

IV. DESCRIPTIVE OUTLINE

- A. FACILITY: METROPOLITAN CORRECTIONAL CENTER
- B. CATEGORY (Chapter type) ADULT DETENTION CENTER
- C. ADMINISTRATIVE AUTHORITY: SHERIFF
- D. MANAGING OFFICIAL (name, title, telephone number)  
JOHN SAMPSON, WARDEN - 301-555-1234
- E. AUDIT COORDINATOR(S) (name, title, telephone number)  
FRED ARNOLD, RECORDS SUPERVISOR - 301-555-1234
- F. STAFFING PATTERN as of this date  
Use "C" for contractual/"PT" for part time)

<u>RANK/TITLE</u>	<u># POSI- TIONS</u>	<u># PENDING MCTA</u>	<u>M</u>	<u>F</u>	<u>MINO RITIES</u>	<u>VACAN CIES</u>
<b>1. <u>ADM. PERSONNEL</u></b>						
A. Warden/ Director/Supt.	1		1		1	
B. Asst./Deputy Warden/Supt./ Director						
C. Security Chief	1		1			
D. Other (List)						
<b>2. <u>SECURITY PERSNL.</u></b> (i.e. COs, deputies, etc.)						
A. Major						
B. Captain	3		2	1	1	
C. Lieutenant	3		3		1	
D. Sergeant	5		4		3	
E. Corporal	43	4	26	17	14	
F. Private	2	2	1	1		5
G. Other (list)						
<b>3. <u>TREATMENT PERSNL.</u></b>						
A.8 Counselors/ Case Workers/ Case Managers	2		1	1		
B. Social Worker	1			1		
C. Psychologists	1PT					
D. Other (list)						

DESCRIPTIVE OUTLINE CONT'D

PAGE 2

	<u>*POSITIONS</u>	<u>*PENDING MCTA</u>	<u>M</u>	<u>F</u>	<u>MINORITIES</u>	<u>VACANCIES</u>
<b>4. <u>SUPPORT PERSONNEL</u></b>						
A. Recreation						
B. Chaplains	1C		1			
C. Cooks/Dietary	2+1PT		1	2	1	
D. Supply Off.						
E. Maintenance	Provided by County government					
F. Clerical	3		3		1	
G. Other (list)	1		1			
	Records Supervisor					

<b>5. <u>MEDICAL PERSONNEL</u></b>						
A. Physicians	1C		1			
B. Nurses(RN,LPN)	2C			2		
C. Physician Asst.	1C					
D. Nurse Practit.						
E. Dentists						
F. Other (list)	Medical services provided by ABC, Inc.					

**G. PROGRAMS/SERVICES (if applicable)**

# Participants      Frequency/Schedule

**1. Self-Help Activities**

A. Inmate Council	4	1 x wk.
B. Substance Abuse Counseling	varies	2 x wk.
C. Mental Health Counseling/Therapy	varies	1 x wk.
D. AA	20	2 x wk.
E. NA	30	2 x wk.
F. Religious Services	varies	3 x wk.
G. Bible Study	varies	2 x wk.
F. Other (list)		

**2. General Privileges**

Frequency/Schedule

A. Library	Daily
B. Commissary	3 days/wk.
C. Visiting	Daily
D. Telephone Use	Daily
E. Mail	Daily

DESCRIPTIVE OUTLINE CONT'D

- F. Exercise
  - Indoor 1 hr. 5 x wk.
  - Outdoor weather permitting
- G. Recreation
  - Games dayroom
  - TV/VCR dayroom/cable
  - Radios personal not allowed
  - Other (list)

3. INSTITUTIONAL PROGRAMS/  
TRUSTY ASSIGNMENTS

# Participants

Frequency/  
Schedule

List:

Kitchen	18	7 days/wk.
Laundry	6	5 days/wk.
Sanitation	4	7 days/wk.

4. OFF SITE PROGRAMS/  
WORK CREWS

County roads*	2	5 days/wk.
Sheriff's office	2	5 days/wk.
Hospital	3	3 days/wk.

H. PHYSICAL PLANT

See attached

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\*County Roads Program temporarily suspended.

SIGNIFICANT CHANGESA. STAFFING

1. Previous warden retired effective June 30, 1991. Current warden began July 1, 1991.
2. Fourteen correctional officer and two clerical positions were added as of January 1, 1991.

B. PROGRAMS/SERVICES

1. ABC, Inc., initiated provision of contract health care services on July 1, 1991.
2. Narcotics Anonymous meetings were instituted in March 1991 and convene twice weekly.

C. INMATE POPULATION

1. The facility has experienced a significant increase in population since the last audit. See attached chart.

D. PHYSICAL PLANT

1. An additional ten beds have been placed in each of the four dayrooms to accommodate overcrowding.
2. Funds have been allocated for a new housing wing with construction to begin in July 1992.
3. Administrative operations have been enhanced with two new computers.

A video camcorder and VCR have been obtained for security purposes.

E. FUTURE PLANS

1. A DWI/treatment center is being considered.

ADULT DETENTION CENTERS

I. <u>INMATE POPULATION</u> (As of 11/1/92)	<u>% CHANGE*</u>
1. Operating Capacity <u>128</u>	--
2. Males <u>117</u>	+42%
3. Females <u>14</u>	+110%
4. Total <u>131</u>	+74%
5. Locally Sentenced <u>58</u>	+60%
6. Awaiting Trial <u>65</u>	+75%
7. Awaiting PSI <u>4</u>	+50%
8. Awaiting Transfer to DOC <u>3</u>	-30%
9. Held for Other Jurisdicitons <u>1</u>	+50%
10. Out to Other Jurisdictions <u>0</u>	--
11. Weekenders <u>0</u>	--
12. Hospital/Infirmary <u>      </u> / <u>      </u>	<u>      </u>
13. Special Confinement <u>5</u>	--
a. Disciplinary Detention <u>3</u>	
b. Administrative Segregation <u>0</u>	
c. Protective Custody <u>1</u>	
d. Medical Isolation <u>1</u>	
14. Work Release <u>24</u>	+25%
15. Home Detention <u>0</u>	--
a. Pre-trial <u>      </u>	
b. Sentenced <u>      </u>	
16. Pre-Trial Services <u>0</u>	--
17. Inmate Characteristics (Optional)	
a. Average Age <u>      </u>	--
b. % of Minorities <u>47%</u>	
c. Predominant charges/offenses <u>      </u>	--
d. Average sentence length <u>      </u>	--
18. Other: <u>      </u>	--

\*TO BE CALCULATED BY MCCS.

COMPLIANCE PLAN

COMPLETION DUE DATE: \_\_\_\_\_ 6/1/93 \_\_\_\_\_

NON-COMPLIANCE  
STANDARD(S)

DEFICIENCY(IES)  
NOTED

CORRECTIVE  
ACTION NEEDED

.02-J  
SEARCH REGULATIONS

(5) Vehicle searches

(5) Records were not  
maintained.

(5) Retain docu-  
mentation.

(7) Protection of  
inmate property

(7) The SOP failed to  
address inmate  
property protection  
during searches.

(7) Revise SOP.

FACILITY: METROPOLITAN CORRECTIONAL CENTER

AUDIT RESULTS

REGULATION: .02 J SEARCH REGULATIONS

_____ (5); (7)	NONCOM- PLIANCE	_____ (1)	RECOM- MENDA- TIONS	_____ NON- APPLI- CABLE
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STATEMENT OF DEFICIENCY(IES):

- (5) Records were not maintained for vehicle searches.
- (7) The SOP failed to address protection of inmate property.

RECOMMENDATIONS:

- (1) The SOP and employee handbook should be inclusive of the staff search policy/procedure.

REMARKS: (e.g. appeal, variance request, statement of nonapplicability, general observations, incidents of note, etc.)

SIGNATURES:

DAI: \_\_\_\_\_ DATE: \_\_\_\_\_

ATL: \_\_\_\_\_ DATE: \_\_\_\_\_

NOTE: Form is to be filled out and copy given to managing official/designee in cases of standards in noncompliance, nonapplicability, recommendations or other special incidents of note.

MARYLAND COMMISSION ON CORRECTIONAL STANDARDS

COMMISSION MEMBERS

MARIE C. HENDERSON  
CHAIRPERSON  
CITIZEN MEMBER

\*\*\*\*\*

KENNETH TAYLOR  
WARDEN  
EASTERN CORRECTIONAL  
INSTITUTION

CHARLES L. BENTON  
SECRETARY  
DEPARTMENT OF BUDGET AND  
FISCAL PLANNING  
(Marsha Herr-Rep.)

J. JOSEPH CURRAN, JR.  
ATTORNEY GENERAL  
STATE OF MARYLAND  
(Alan Eason, AAG, DPSCS, Rep.)

MARTIN WALSH  
SECRETARY  
DEPARTMENT OF GENERAL SERVICES  
(Robert Taylor, Rep.)

FRANK MAZZONE  
ASSISTANT COMMISSIONER  
DIVISION OF CORRECTION

JEFFREY WASHINGTON  
ADMINISTRATOR  
AMERICAN CORRECTIONAL ASSOC.

MARK A. LEVINE  
UNDER SHERIFF  
BALTIMORE COUNTY  
SHERIFF'S DEPARTMENT

MICHAEL RUGGIO  
CITIZEN MEMBER

JOHN W. STOTLER  
COUNTY COMMISSIONER  
ALLEGANY COUNTY

STAFF TO THE COMMISSION

PAUL S. HASTMANN  
EXECUTIVE DIRECTOR

RONALD F. DRECHSLER  
ASSISTANT EXECUTIVE DIRECTOR

REGINA A. CRAWFORD  
ADMINISTRATIVE AIDE

DONALD JONES  
CORRECTIONAL PROGRAM  
SPECIALIST

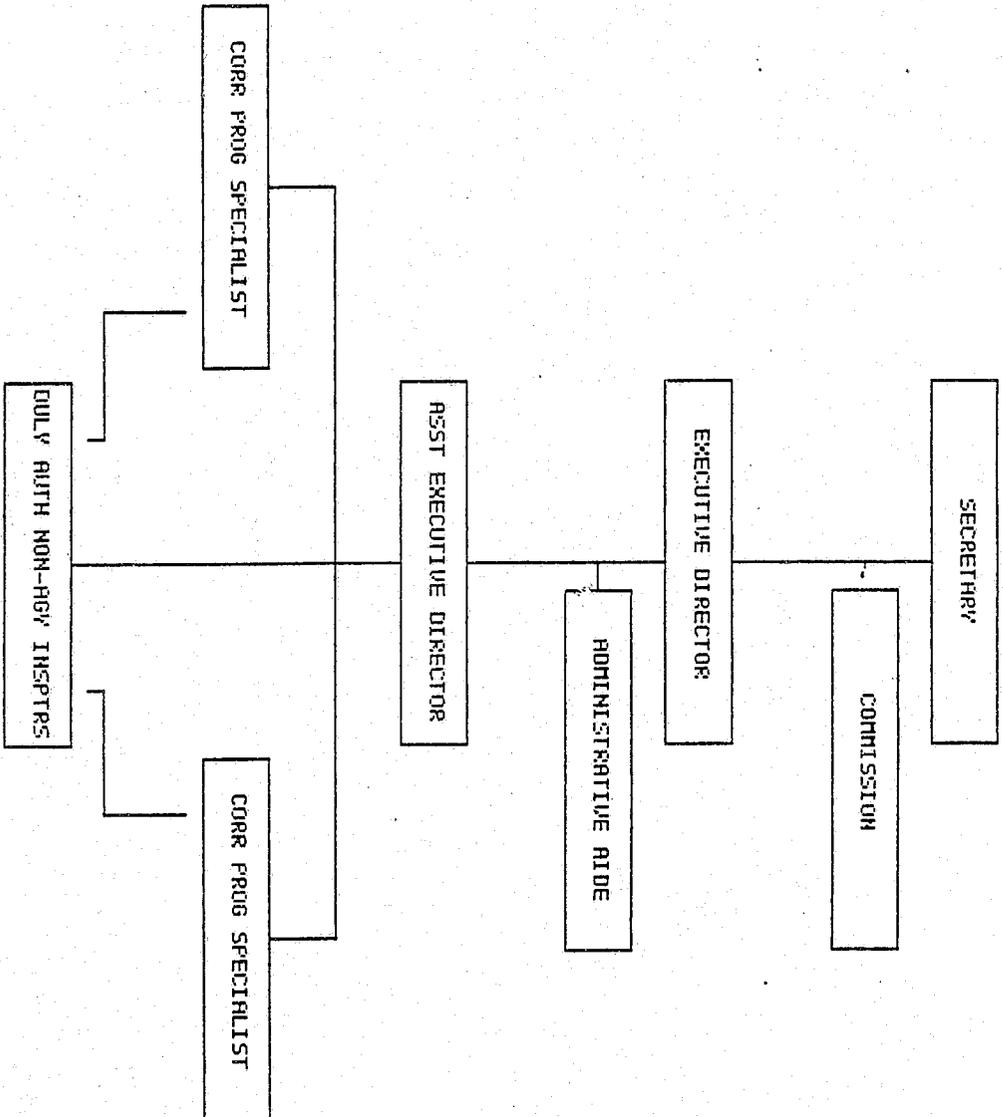
ERNESTINE DEVANCE  
CORRECTIONAL PROGRAM SPECIALIST

OFFICES

PLAZA OFFICE CENTER  
SUITE 303, 6776 REISTERSTOWN ROAD  
BALTIMORE, MARYLAND 21215  
410-764-4265

Revised 11/91

COMMISSION ON CORRECTIONAL STANDARDS  
OCTOBER, 1991



35-14,00.01

ADMINISTRATORS OF  
LOCAL DETENTION CENTERS

Lt. John A. Bone  
Jail Administrator  
Allegany County Jail  
59 Prospect Square  
Cumberland, Maryland 21502  
301-777-5918/5961  
(Sheriff Gary Simpson)

Richard J. Baker  
Superintendent  
Anne Arundel County  
Detention Center  
131 Jennifer Road  
Annapolis, Maryland 21401  
410-974-6750 or 222-7084/7373

James Dean, Administrator  
Baltimore County Detention Center  
404 Kenilworth Drive  
Towson, Maryland 21204  
410-337-6700  
(Sheriff Norman Pepersack)

LaMont Flanagan  
Commisisoner  
Baltimore City Detention Center  
Administration Office  
400 East Madison Street  
Baltimore, Maryland 21202  
301-637-1319

Robert Lusby  
Jail Administrator  
Calvert County Detention Center  
325 Stafford Road  
Barstow, Maryland 20610  
410-535-4300  
(Sheriff Lawrence Stinnett)

Charles L. Andrew  
Caroline County Jail  
101 Gay Street  
Denton, Maryland 21629  
410-479-2515  
(Sheriff Louis C. Andrew)

Steve Turvin, Acting Warden  
Carroll County Detention Center  
100 North Court Street  
Westminster, Maryland 21157  
410-876-2440 or 857-2620  
(Sheriff John Brown)

Jeff Clewer, Acting Director  
Cecil County Detention Center  
500 Landing Lane  
Elkton, Maryland 21921  
410-398-3344  
(Sheriff Rodney Kennedy)

Lt. Charles McDevitt, Director  
Charles County Detention Cnt.  
P.O. Box 189  
LaPlata, Maryland 20646  
301-932-3100  
(Sheriff James F. Gartland)

Donald Satterfield  
Director of Corrections  
Dorchester County  
2804 Gypsy Hill Road  
Cambridge, Maryland 21613  
(Sheriff Philip McKelvey)  
410-228-8101

Lt. Barry Stanton  
Acting Administrator  
Frederick County Detention Cnt  
7300 Marcie's Choice Lane  
Frederick, Maryland 21701  
301-694-2555  
(Sheriff Carl Harbaugh)

Sheriff Martin V. Evans  
Garrett County Jail  
203 South Fourth Street  
Oakland, Maryland 21550  
301-334-1911

ADMINISTRATORS OF LOCAL DETENTION CENTERS

Major E. Dale Zepp  
Administrator  
Harford County Detention Center  
P. O. Box 150  
Bel Air, Maryland 21014  
410-838-2110  
(Sheriff Robert Comes)

James N. Rollins  
Director of Corrections  
Howard County Detention Center  
7301 Waterloo Road (P.O. 250)  
Jessup, Maryland 20794  
410-313-5200/5230

William Kelly, Warden  
Kent County Detention Center  
Route 5, Box 444-Flatland Road  
Chestertown, Maryland 21620  
410-778-6025

Calvin A. Lightfoot, Director  
Montgomery County Department  
Correction & Rehabilitation  
The Judicial Center, 4th Floor  
50 Courthouse Square  
Rockville, Maryland 20850  
301-217-7545

Al Hanulik, Acting Director  
Montgomery County  
Detention Center  
1307 Seven Locks Road  
Rockville, Maryland 20854  
301-424-0940

Samuel F. Saxton, Director  
Department of Corrections  
Prince George's County  
13400 Dille Drive  
Upper Marlboro, Maryland 20772  
301-952-7015

LaMonte E. Cooke, Warden  
Queen Anne's County Jail  
P. O. Box 718  
Centreville, Maryland 21617  
410-758-3817

Stanley Williams, Commander  
St. Mary's County  
Detention Center  
P.O. Box 426  
Leonardtown, Maryland 20650  
301-475-5621 or 475-2113  
(Sheriff Wayne L. Pettit)

Earl Charnick, Warden  
Somerset County Detention Ctr.  
Route 1, Box 425  
Westover, Maryland 21871  
410-651-9223

Lawrence DiNisio, Warden  
Talbot County Detention Ctr.  
Federal and West Streets  
Easton, Maryland 21601  
410-822-1373

Lt. W. Wayne McAllister  
Administrator  
Washington County Det. Center  
500 Western Maryland Parkway  
Hagerstown, Maryland 21740  
301-791-3300  
(Sheriff Charles Mades)

John W. Welch  
Director of Corrections  
Wicomico County  
Detention Center  
411 Naylor Mill Road  
Salisbury, Maryland 21801  
410-548-4850

Ira F. Shockley  
Warden  
Worcester County  
Detention Center  
P.O. Box 189  
Snow Hill, Maryland 21863  
410-632-1300

ADULT CORRECTIONAL INSTITUTIONS

Devon Brown, Warden  
Maryland Reception, Diagnostic  
and Classification Center  
550 East Madison Street  
Baltimore, Maryland 21202  
410-332-0970

Sewall Smith, Warden  
Maryland Penitentiary  
954 Forrest Street  
Baltimore, Maryland 21202  
410-837-2135

Eugene Nuth, Warden  
Maryland Correctional  
Institution-Jessup  
P. O. Box 549  
Jessup, Maryland 20794  
410-799-7610

Melanie Pereira, Warden  
Maryland Correctional  
Institution for Women  
P. O. Box 535  
Jessup, Maryland 20794  
410-799-5550

William Smith, Warden  
Maryland House of  
Correction  
P. O. Box 534  
Jessup, Maryland 20794  
410-799-0100

Patrick Conroy  
Facility Administrator  
Baltimore City  
Correctional Center  
901 Greenmount Avenue  
Baltimore, Maryland 21202  
410-234-1400

Joseph Henneberry  
Director  
Patuxent Institution  
P.O. BOX 700  
Jessup, Maryland 20794  
410-799-3400

Thomas R. Corcoran, Warden  
Maryland Correctional  
Pre-Release System  
P. O. Box 537  
Jessup, Maryland 20794  
410-799-1363

Richard Vernon  
Assistant Warden  
Brockbridge Corr. Facility  
P. O. Box 537  
Jessup, Maryland 20794  
410-799-1363

Jon P. Galley, Warden  
Roxbury Correctional  
Institution  
Route 3, Box 4444  
Hagerstown, Maryland 21740  
301-797-2250

Joseph Sacchet, Acting Warden  
Maryland Correctional  
Training Center  
Route 3, Box 3333  
Hagerstown, Maryland 21746  
301-791-7200

Lloyd Waters, Warden  
Maryland Correctional  
Institution-Hagerstown  
Route 3, Box 2000  
Hagerstown, Maryland 21746  
301-733-2800

Kenneth Taylor, Warden  
Eastern Correctional  
Institution  
Route 1, Box 500  
Westover, Maryland 21871  
410-651-9000

James Sanders  
Assistant Warden  
Maryland Correctional  
Adjustment Center  
401 East Madison Street  
Baltimore, Maryland 21202  
410-539-5445

ADULT COMMUNITY CORRECTIONAL FACILITIES

State Facilities

Phillip Thomas  
Facility Administrator  
Baltimore Pre-Release Unit  
926 Greenmount Avenue  
Baltimore, Maryland 21202  
410-333-4370

Marsha Maloff  
Facility Administrator  
Central Laundry Facility  
P. O. Box 395  
Sykesville, Maryland 21784  
410-549-2402

Raymond S. Grimes  
Facility Administrator  
Southern Maryland Pre-  
Release Unit  
Route 1, Box 159  
Charlotte Hall, Maryland 20622  
410-974-2060

George Kaloroumakis  
Facility Administrator  
Poplar Hill Pre-Release Unit  
P. O. Box 349  
Quantico, Maryland 21856  
410-543-6615

Thomas Passaro  
Facility Administrator  
Jessup Pre-Release Unit  
P. O. Box 536  
Jessup, Maryland 20794  
410-799-8400

Barbara Shaw  
Facility Administrator  
Pre-Release Units for Women  
..4500 Park Heights Avenue  
Baltimore, Maryland 21215  
410-333-7673 and  
..301 North Calverton Road  
Baltimore, Maryland 21223  
410-566-5747

Major James C. Conners  
Security Administrator  
Patuxent Re-Entry Facility  
319 West Monument Street  
Baltimore, Maryland 21201  
410-234-0220

Major Robert Clay  
Commander  
Herman L. Toulson Boot Camp  
P.O. Box 1425  
Jessup, Maryland 20794  
410-799-4040

Earl Runde  
Facility Administrator  
Eastern Pre-Release Unit  
P.O. BOX 22-B  
Church Hill, Maryland 21623  
410-758-1596

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ADULT COMMUNITY CORRECTIONAL FACILITY  
CONT'D

Private Facilities

Rev. Joseph R. Wenderoth  
Executive Director  
Dismas House of Baltimore, Inc.  
105 South Mount Street  
P.O. Box 4435  
Baltimore, Maryland 21223  
410-566-9400

Thomas Snowden, Director  
Dismas House West  
105 S. Mount Street  
Baltimore, Maryland 21223  
410-566-9400

William O. Robinson  
Acting Director  
Dismas House East  
1415 North Caroline Street  
Baltimore, Maryland 21213  
410-539-2520

Julian L. Morgan  
Executive Director  
Threshold, Inc.  
1702 St. Paul St.  
Baltimore, Maryland 21202  
410-727-0100

James Shannon  
Program Director  
Work Release Center  
Volunteers of America  
1105 East Fayette Street  
Baltimore, Maryland 21201  
410-563-9003

Barbara Noone Boro  
Acting Director  
Correctional Services-VOA  
Administration Office  
2809 Boston Street  
Baltimore, Maryland 21224  
410-522-0600

Local Facilities

Henry W. Stewart, Director  
Baltimore County Work  
Release Center  
200 Baltimore Avenue  
Towson, Maryland 21204  
410-887-2240

Johnny Lough, Acting Director  
Cecil County Community  
Adult Rehabilitation Center  
500 Landing Lane  
Elkton, Maryland 21921  
410-398-3344

Kent W. Mason, Director  
Montgomery County Pre-  
Release Center  
11651 Nebel Street  
Rockville, Maryland 20850  
301-468-4200

Constance Harris, Coordinator  
Prince George's County  
DWI Facility  
13401 Dille Drive  
Upper Marlboro, Maryland 20772  
301-952-7200

Willie Nelson, Director  
Prince George's County  
Work Release Center  
Hyattsville Justice Center  
5000 Rhode Island Avenue  
Hyattsville, Maryland 207891  
301-699-2920

MARYLAND COMMISSION ON CORRECTIONAL STANDARDS

ARTICLE 41, SECTION 4-401

ANNOTATED CODE OF MARYLAND

(A) The General Assembly hereby finds and declares the need to improve the method of establishing standards for correctional facilities and programs and insuring compliance with such standards in order to better protect the health, safety, and welfare of Maryland's citizens by reducing incidents of crime.

(B) (1) In this section the following words have the meanings indicated.

(2) "Commission" means the Maryland Commission on Correctional Standards.

(3) "County" means any county of the State and Baltimore City.

(4) "Municipality" means any incorporated City of the State other than Baltimore City.

(5) "State Correctional Facility" means all places of correctional confinement or correctional institutions within the State of Maryland, primarily operated by the Maryland State Government, including Patuxent Institution.

(6) "Local Correctional Facility" means all places of correctional confinement or correctional institutions within the State of Maryland, primarily operated by local governments.

(7) "Mandatory Standards" means policies and procedures in areas of security and inmate control, inmate safety, inmate food services, inmate housing and sanitation, inmate rights, classification, hearings, and administrative recordkeeping. These standards shall apply to all State and local correctional facilities and shall be consistent with Federal and State law.

(8) "Approved Standards" means policies and procedures in areas such as personnel, training, administration, management, planning and coordination, research and evaluation, physical plant, special management inmates, rules and discipline, mail and visiting, reception and orientation, inmate property control, inmate work programs, education and vocational training, library services, religious services, recreational activities, counseling, release preparation and volunteers, consistent with Federal and State laws. These standards shall apply to all State correctional facilities and may be adopted, in whole or in part, for use by any local correctional facility.

(C) (1) There is a Commission on Correctional Standards. The Commission is an agency of the Department of Public Safety and Correctional Services.

(2) The Governor, by and with the advice and consent of the Senate, shall appoint the 11 members of the Commission, who collectively possess the following qualifications:

(I) Two members shall be Maryland citizens who are not directly employed in the field of corrections;

(II) Two members shall be State government correctional personnel;

(III) Two members shall be local government correctional personnel;

(IV) One member shall be an official or employee of the Commission on Accreditation for Corrections or a similar national correctional accreditation organization;

(V) The Attorney General, Secretary of General Services, and Secretary of State Planning shall be ex-officio members;

(VI) One member shall be an elected official from a local governing body.

(3) Each member of the Commission other than the Attorney General, Secretary of General Services, and Secretary of State Planning shall serve a term of office which is 3 years, except that, of the initial members, three shall be appointed for a term of 1 year, three shall be appointed for a term of 2 years, and two shall be appointed for a term of 3 years.

(4) The Commission, at its initial organizational meeting and thereafter annually, shall elect a Chairman and Vice Chairman from among its members.

(5) The Commission shall meet at such times as a majority of its members or its Chairman may determine.

(6) A simple majority of the members of the Commission shall constitute a quorum for the transaction of any business, the performance of any duty, or the exercise of any of its authority.

(7) The members of the Commission shall receive no salary for service on the Commission, but shall be reimbursed, as provided in the budget, for their reasonable expenses lawfully incurred in the performance of their official function in accordance with standard travel regulations.

(8) The Commission shall report annually to the Governor and to the General Assembly on its activities, and shall provide the Secretary of Public Safety and Correctional Services and the governing body of each county and municipality which has a correctional facility with a copy of its report.

(D) The Commission:

(1) Shall advise the Secretary regarding all mandatory and approved standards for State and local correctional facilities which he is authorized to adopt.

(2) May, to the extent authorized in the budget, provide technical assistance to aid the various jurisdictions in their effort to comply with the mandatory and approved standards.

(3) Shall establish and implement a process for the inspection of facilities in order to determine and certify compliance with applicable standards.

(4) Shall determine deadlines for remedial action and reinspection when inspection reports indicate noncompliance with applicable standards.

(5) May subpoena witnesses and hold public hearings in accordance with the Administrative Procedures Act prior to making a final decision on ordering the closing of a correctional facility or one of its elements.

(6) May issue orders to cease operations of one or more correctional procedures or functions of a correctional facility which has been determined, after a hearing, to be in violation of the mandatory standards. Reasonable notice of a hearing must be given to the agency.

(7) May review and act on appeals of staff inspection reports.

(8) Shall adopt administrative rules and regulations to accomplish the purpose of this section.

(9) Shall appoint, with the approval of the Secretary of Public Safety and Correctional Services, an Executive Director who shall serve at the pleasure of the Commission, perform such administrative functions as the Commission shall direct, and receive a salary as provided in the budget.

(10) Shall employ such other persons as may be necessary to carry out the provisions of this section and as provided for in the State budget.

(11) Shall consult and coordinate with national bodies promulgating correctional standards for the purpose of providing a reasonable compatibility between the State standards and nationally established standards.

(12) Shall consult and cooperate with other departments and agencies of the State and local jurisdictions concerning correctional standards.

(13) May perform such other acts as may be necessary and appropriate to carry out the functions and duties as set forth above.

(E) In the event a duly authorized inspector or the Commission finds a condition that is life threatening or health endangering, he may order the immediate cessation of operation. Within 96 hours of the issuance of such an order, the Commission shall hold a full hearing for the purpose of reviewing and confirming or countermanding the order. When a correctional facility is ordered closed all prisoners therein shall be transferred to and shall be accepted in a place of detention which the Secretary shall determine to

suitable, the expenses therein to be paid by the governing body responsible for the cost of the closed facility.

(F) (1) The Commission shall establish Advisory Boards to assist it. These may include Advisory Boards on:

(I) Adult Detention Centers and Lockups;

(II) Adult Correctional Institutions;

(III) Adult Community Correctional Facilities.

(2) The Chairperson of an Advisory Board shall be a Commission member.

(3) Members will be appointed to the Advisory Boards by the Commission Chairman with the approval of the Commission.

Section 2. And be it further enacted, that the Jail Programming and Inspection Officer (the position previously created under Article 27, Section 704(a)) and his staff shall become members of the staff of the Commission. The persons occupying these positions on the effective date of this Act shall continue to receive the same level of salary and benefits previously compensated. The duties of these positions shall be assigned by the Executive Director of the Commission.

Section 3. And be it further enacted, that this Act shall take effect July 1, 1980.