

November 29, 2018

TO: [REDACTED]
Assistant Director for Detention Management

FROM: [REDACTED]
Lead Compliance Inspector
The Nakamoto Group, Inc.

SUBJECT: **Annual Detention Inspection of the Howard County Detention Center**

The Nakamoto Group, Inc. performed an annual inspection for compliance with the ICE Performance-Based National Detention Standards (PBNDS 2011) of the Howard County Detention Center in Jessup, MD, during the period of November 27-29 2018. This is an IGSA facility.

The inspection was performed under the guidance of [REDACTED], Lead Compliance Inspector. Team Members were:

Subject Matter Field	Team Member
Detainee Rights	[REDACTED]
Security	[REDACTED]
Medical Care	[REDACTED]
Medical Care	[REDACTED]
Safety	[REDACTED]

Type of Inspection

This is a scheduled annual inspection, which is performed to determine overall compliance with the ICE PBNDS 2011 for Over 72 hour facilities. The facility received a previous rating of Meets Standards during the October 2017 inspection.

Inspection Summary

The Howard County Detention Center is currently accredited by:

- The American Correctional Association (ACA) - No
- The National Commission on Correctional Health Care (NCCHC) - No
- The Joint Commission (TJC) - No
- Prison Rape Elimination Act (PREA) - Yes

Standards Compliance

The following information is a summary of the standards that were reviewed and overall compliance that was determined as a result of the 2017 and 2018 annual inspections:

2017 Annual Inspection	
Meets Standards	39
Does Not Meet Standards	0
At Risk	0
Repeat Deficiency	0
Not Applicable	3

2018 Annual Inspection	
Meets Standards	38
Does Not Meet Standards	0
At-Risk	0
Repeat Finding	0
Not Applicable	4

The inspection team identified twenty-six (26) deficient components in the following eleven (11) standards:

- Environmental Health and Safety – 1
- Custody Classification System – 3
- Special Management Units – 4, one of which is a priority component
- Staff Detainee Communication – 1
- Food Service - 6, one of which is a priority component
- Recreation – 1, which is a priority component
- Telephone Access – 3, one of which is a priority component
- Visitation - 1
- Detainee Handbook - 2, one of which is a priority component
- Grievance System – 3, two of which are priority components
- Law Libraries and Legal Material - 1

Facility Snapshot/Description

The Howard County Detention Center is a [REDACTED] facility located in a business district in Jessup, MD. The facility is operated by the County Executive and managed by the Director of Corrections. [REDACTED]

The facility is a two-story structure consisting of twelve general population housing units and several other housing units designated for administrative and disciplinary segregation and special confinement. Housing units are provided indirect supervision with roving officers and camera surveillance. Both indoor and outdoor recreation is provided. ICE detainees do not participate in the voluntary work program.

Each housing unit has a dayroom area with table, chairs, a television, telephones and a sufficient number of showers and wash basins. The atmosphere was calm, and detainees approached the inspection team without hesitation. Sanitation throughout the facility was acceptable.

The inspectors visited the housing units several times during the inspection. Detainees were interviewed in groups and individually in a confidential setting. Four detainees with limited English proficiency (LEP) were interviewed by a bilingual inspector and one detainee was interviewed in Arabic using a telephonic language translation line. All detainees stated that they felt safe at the facility. The detainees stated that they were generally treated with respect by facility and ICE staff. Detainees in the minimum security housing unit stated that there was one officer who constantly denies their requests for toilet paper and other hygiene items and directs derogatory comments to them. This was brought to the attention of com-

mand staff. Detainees in West 6 felt that one of the detainees was strong-arming Hispanic detainees. This was also brought to the attention of command staff.

There were no substantive concerns regarding food or medical care. Detainees stated that ICE officers do not visit the housing units every week as scheduled, and they often just enter the safety vestibule and do not enter the housing unit to talk to detainees. Several detainees stated that they were unable to access LexisNexis on the computers that are placed in the housing units for them to use. The computers were checked, and it was determined the LexisNexis program cannot be accessed as the program has expired. An inspection of the law library determined that LexisNexis can be accessed on the computers in the library; however, they have not been updated since July 2018. One detainee stated that he did not have an attorney and could not afford to hire one and did not know how to contact the free legal providers. It was determined that the contact numbers were not posted in his housing unit. The posting was placed in the housing unit during the inspection.

The facility does not charge co-payments for medical, mental health or dental care for ICE detainees. Health services are provided through a contract with Wellpath, formerly Correct Care Solutions. All other services are provided by county employees.

Areas of Concern/Significant Observations

The inspection team identified seven (7) deficient priority components:

Special Management Unit

Priority Component #18: Health care personnel conduct face-to-face medical assessments for every detainee in an SMU at least once daily, and where reason for concern exist, assessments are followed up with a complete evaluation by a qualified medical or mental health professional, and indicated treatment. Medical visits shall be recorded on the SMU housing record or comparable form, and any action taken shall be documented in a separate logbook.”

Finding: Inspection of the SMU and interviews with two compliance personnel and several security personnel indicated that medical personnel do not conduct daily face-to face medical assessments for each detainee housed in the SMU. An interview with the HSA, indicated daily face-to-face assessments of SMU detainees was occurring, however, there was no documentation to support her claim.

Recommendation: Health care personnel should conduct face-to-face medical assessments for every detainee in SMU daily.

Food Service

Priority Component #16: A registered dietitian shall conduct a complete nutritional analysis that meets U.S. Recommended Daily Allowances (RDA), at least annually, of every master-cycle menu planned by the FSA. The dietitian must certify menus before they are incorporated into the food service program.

Finding: The regular menu was certified by a registered dietitian on 3/12/2018. However, the common fare menu and the kosher menu have not been certified as nutritionally adequate by a registered dietitian as required by the standard.

Recommendation: The OIC needs to ensure that all master-cycle menus are certified as nutritionally adequate by a registered dietitian before they are incorporated into the food service program.

Recreation

Priority Component #12: Recreation for detainees housed in the SMU shall be separate from general population. Detainees in the SMU for administrative reasons shall be offered at least one hour of exercise opportunities per day, seven days a week, outside their cells, and outdoors when practicable, and scheduled at a reasonable time. Detainees in the SMU for disciplinary reasons shall be offered at least one hour of recreation per day, five days a week, outside their cells, and outdoors when practicable, and scheduled at a reasonable time. Where cover is not provided to mitigate inclement weather, detainees shall be provided weather-appropriate equipment and attire.

Finding: Facility policy states that detainees on administrative or disciplinary status shall be offered and allowed out of their cell for one hour of outdoor recreation, seven days a week.

Detainees housed in the SMU on disciplinary or administrative status are not offered one hour of recreation outside their cell and outside when practicable as required by the standard. The actual practice for detainees on disciplinary status is for outdoor recreation and shower time to be included in their one hour of recreation time. If a detainee wants to maintain personal hygiene, their time in the shower is deducted from their outdoor recreation time. The actual practice for detainees on administrative status is for outdoor recreation, showers and phone calls to be included in their one hour of recreation time. If a detainee wants to maintain personal hygiene and/or make a phone call, their time in the shower and/or on the phone is deducted from their outdoor recreation time.

Recommendation: The OIC needs to ensure that detainees housed in the SMU are offered recreation outside their cell and outside when practicable for a minimum of one hour daily for detainees on administrative status and one hour for a minimum of five days a week for detainees on disciplinary status.

Telephone Access

Priority Component #13: (In part) All detainees are able to call their consulate, the DHS Office of the Inspector General, the ICE/OPR Joint Intake Center, and any organization on the ICE/ERO provided list of free legal service providers at no charge to the detainee or receiving party. The FOD will ensure that all information is kept current and provided to each facility. Updated contact lists are posted in the detainee housing units.

Finding: The Pro Bono Legal Service Providers list is not posted in housing unit W-6. The consulate lists posted in the housing units are dated 11/15/2016.

Recommendation: A current list of the Pro Bono Legal Service Providers should be posted in all detainee housing units and the consulate contact information should be updated.

Detainee Handbook

Priority Component #7: The detainee handbook (local supplement) addresses the following issues:

- The rules, regulations, policies and procedures with which every detainee must comply
- Detainee rights and responsibilities
- Procedures for requesting interpretive services for essential communication
- The facility's services and programs
- The facility's classification system

- Medical care
- The facility's zero tolerance policy for all forms of sexual abuse and assault
- The facility's rules of conduct and prohibited acts, the disciplinary scale, the sanctions imposed for violations of the rules, the disciplinary process, the procedure for appealing disciplinary findings, and detainees' rights in the disciplinary system (as required by Standard 3.1)
- Information about the facility's grievance system, including medical grievances (as required by Standard 6.2)
- The facility's policies on telephone access and on the monitoring of telephone calls, if telephone calls are monitored
- The facility's visitation rules and hours
- Rules and procedures governing access to the law library (as required by Standard 6.3) and to legal counsel
- Content and procedures of the facility's rules on legal rights group presentations, and the availability of legal orientation programs
- The facility's rules on correspondence and other mail (including information on correspondence procedures as required by Standard 5.1)
- The facility's policies and procedures related to personal property (as required by Standard 2.5)
- The facility's marriage request procedures
- Contact information for the ICE/ERO Field Office and the scheduled hours and days that ICE/ERO staff is available to be contacted by detainees at the facility
- Procedures to submit written questions, requests, or concerns to ICE/ERO staff, as well as the availability of assistance to prepare such requests.

Finding: The handbook fails to provide detainees with information on the grievance system including the handling, processing and the appeal process of medical grievances as required in the standard.

Recommendation: The OIC needs to ensure the handbook describes the handling and processing of medical grievances including the appeal process in accordance with the standard.

Grievance System

Priority Component #1: Each facility shall have written policy and procedures for a detainee grievance system that:

- Establishes a procedure for any detainee to file a formal grievance;
- Establishes a procedure to track or log all ICE detainee grievances separately from other facility populations;
- Establishes reasonable time limits for:
 - Processing, investigating, and responding to grievances;
 - Convening a grievance committee (or actions of a single designated grievance officer) to review formal complaints; and
 - Providing written responses to detainees who filed formal grievances, including the basis for the decision.
- Ensures a procedure in which all medical grievances are received by the administrative health au-

thority within 24 hours or the next business day, with a response from medical staff within five working days, where practicable;

- Establishes a special procedure for time-sensitive, emergency grievances, including having a mechanism by which emergency medical grievances are screened as soon as practicable by appropriate personnel;
- Ensures each grievance receives appropriate review;
- Provides at least one independent appeal that excludes individuals previously involved in the decision making process for the same grievance;
- Includes guarantees against reprisal; and

Ensures information, advice, and directions are provided to detainees in a language or manner they can understand, or that interpretation/translation services are utilized.

Finding: The policy does not address medical grievances or a procedure in which all medical grievances are received by the administrative health authority within 24 hours or the next business day, with a response from medical staff within five working days, where practicable.

Recommendation: Policy and procedures need to be developed to include medical grievances and the appropriate protocols.

Priority Component #12: Upon receipt, facility staff must forward all detainee grievances containing allegations of staff misconduct to a supervisor or higher-level official in the chain of command. While such grievances are to be processed through the facility's established grievance system, CDFs and IGSA facilities must also forward a copy of any grievance alleging staff misconduct to ICE/ERO in a timely manner.

Finding: The grievance policy does not address the allegation of staff misconduct. There is no policy or procedure in place that outlines how to report and process the allegation of staff misconduct up through the chain of command and does not address appropriate notification to ICE/ERO.

Recommendation: Policy and procedures need to be developed to include the proper protocols and notifications for a grievance alleging staff misconduct.

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Does Not Meet Standards. The facility does not comply with the ICE Performance Based National Detention Standards (PBNDS) 2011 for Over 72 hour facilities as evidenced by seven (7) priority components rated as Does Not Meet Standard. No (0) standards were found Does Not Meet Standards and four (4) standards were Not Applicable (N/A). All remaining thirty-eight (38) standards were found to Meet Standards.

LCI Assurance Statement

The findings of compliance and non-compliance are accurately and completely documented on the G-324 Inspection Form and are supported by documentation in the inspection file. An out brief was conducted at the facility and in addition to the entire Nakamoto Group, Inc. Inspection Team, the following were present:

- ICE Officials – [REDACTED]



The Nakamoto Group, Inc.

- Facility Staff – [REDACTED] and other facility staff

[REDACTED], Lead Compliance Inspector
Printed Name of LCI

November 29, 2018
Date