December 9, 2020

TO:  
Assistant Director for Detention Management

FROM:  
Lead Compliance Inspector  
The Nakamoto Group, Inc.

SUBJECT:  Annual 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, Maryland, during the period of December 7-9, 2020. This is an IGSA facility.

The annual inspection was performed under the guidance of [Name], Lead Compliance Inspector. Team members were:

<table>
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<tr>
<th>Subject Matter Field</th>
<th>Team Member</th>
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<tr>
<td>Detainee Rights</td>
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<tr>
<td>Security</td>
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<td>Medical Care</td>
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<td>Safety</td>
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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 rating of Meets Standards during the August 2019 annual 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 2019 and 2020 PBNDS 2011 annual inspections:
The inspection team identified twenty (20) deficient components in the following nine (9) standards:

Admission and Release – 1
Funds and Personal Property – 1
Sexual Abuse and Assault Prevention and Intervention – 1, which is a Priority component
Disciplinary System - 1
Medical Care – 2
Significant Self-Harm and Suicide Prevention and Intervention – 2
Disability Identification, Assessment and Accommodation – 10
Correspondence and Other Mail – 1
Detainee Transfers – 1

**Facility Snapshot/Description**

The Howard County Detention Center is located about one hour north of Washington D.C. on Interstate 95. The facility opened in 1983. It is owned by Howard County and operated under the jurisdiction of the Howard County Department of Corrections. The remaining population was comprised of adult male and female detainees from Howard County, U.S. Marshal Service and the State of Maryland Department of Corrections. The facility only houses male ICE detainees with a high custody level. During COVID-19 conditions, ICE detainees do not comingle with non-ICE detainees.

The facility is a stand-alone, two-story building which is surrounded by one fourteen-foot-high, chain-link fence supplemented with razor ribbon on top and bottom. There is a partial perimeter road/path around the compound that is foot patrolled by an unarmed officer at least once each shift. Surveillance cameras offer visibility around the entire perimeter and down the interior movement corridors. All exterior building doors and interior security gates and doors are under constant camera surveillance and controlled by central control staff. The facility is equipped with a 300+ surveillance camera network that is monitored 24 hours a day. There are additional buildings/sheds outside the secure perimeter that house some maintenance equipment and provide warehouse storage space for the hazardous substances and other commodities.

There are twelve individual housing units which are a combination of two-tier housing units of various capacities designed into one-bed and two-bed cell arrangements, and dormitories ranging in size from 36-90 beds. There is one special management unit (SMU) designed with eight, two-bed cells. There were no ICE detainees in the SMU during the inspection. The facility has dedicated sections of the housing units to serve as COVID-19 wings; they were occupied with a daily changing number of active COVID-19 cases throughout the inspection.

Each general population housing unit has a common dayroom which is equipped with: a television; fixed table/chair units for detainees to eat their meals, play games, and gather for conversation; a bank of wall-
mounted telephones; kiosks on which detainees can receive/send emails, conduct video-visits, send requests directly to facility and ICE/ERO staff, order commissary, file grievances, check their account balance, view the LexisNexis collection, the facility handbook, and all announcements/schedules; and access fee-based entertainment programs. Detainees are provided indoor and outdoor recreation. Each housing unit has at least one portable law library LexisNexis computer workstation located in a dedicated room.

Sign-up sheets for detainee interviews were posted prior to the start of the inspection; only six detainees registered an interest in speaking with an inspector. During the afternoon of 12/7/2020, the compliance manager announced an ICE detainee had tested positive for COVID-19 which resulted in the ICE detainee housing unit put on lockdown for quarantine. Facility protocol prohibits detainees coming off the wing except for an emergency; interviews did not meet the criteria. Hence, no detainee interviews were conducted.

Medical services are provided by WellPath. The food service operation is managed by Trinity Services Group. Maintenance operations are provided by Howard County employees. Detainee telephone and kiosk services are provided by IC Solutions.

An assessment of the general cleanliness of the facility could not be determined due to the remote nature of the inspection. ICE detainees are not charged medical co-pays.

Areas of Concern/Significant Observations

The inspection was conducted remotely, and inspectors were unable to personally observe practices and procedures within the facility. The inspection team relied upon photographs and/or videos to validate the observation of many standards. There was one deficient standard discovered during the inspection.

4.8 Disability Identification, Assessment and Accommodation:

Policy: This detention standard requires that facilities housing ICE/ERO detainees act affirmatively to prevent disability discrimination. It outlines the necessary processes to ensure that detainees with a disability will have an equal opportunity to participate in, access, and enjoy the benefits of the facility’s programs, services, and activities. Such participation will be accomplished in the least restrictive and most integrated setting possible, through the provision of reasonable accommodations, modifications, and/or auxiliary aids and services, as necessary, and in a facility that is physically accessible.

Finding: The policies do not address timelines for reviewing requests, modifications, and reassessments.

The facility does not currently have a multidisciplinary team which reviews detainee requests for accommodation. This involves four components.

There is no documentation to show new staff, contractors, and volunteers receive training on the facility's Disability and Reasonable Accommodations procedures as part of pre-service or annual refresher training.

Health care providers complete a Medical Awareness Form when a detainee has a special need which has been granted accommodation. The notification is distributed to facility personnel via the computerized Jail Management System (JMS); however, there was no documentation that the form includes:

- Date of initial assessment interview;
- Summary of detainee’s request (including date of request) or facility observation;
- Finding of disability and impairment limits;
• Facility decisions on requested accommodations;
• Provision and date of aids and services;
• Copies of written notifications provided to the detainee; and
• Results and dates of reassessments, if applicable.

There is no documentation when considering requests for reasonable accommodations or modifications that the facility engages in an interactive and individualized process, as outlined in the standard. Ordinarily, requests for accommodation are received during the health care screening process during in-processing and during classification.

The facility has not yet designated a Disability Compliance Manager.

Recommendation: Amend the policy to include reviewing requests, modifications, and reassessments. Create a multidisciplinary team. Establish, teach, and document training on the facility's Disability and Reasonable Accommodations procedures to new staff, contractors, and volunteers as part of their preservice or annual training.

Develop a Medical Awareness Form which includes all standard requirements, ensure health care providers complete the form when a detainee has a special need that has been granted accommodation, and distribute the information to facility personnel via the computerized Jail Management System (JMS).

Ensure documentation is generated when considering requests for reasonable accommodations or modifications that shows the facility has engaged in an interactive and individualized process, as required by the standard.

The OIC should designate a Disability Compliance Manager

Recommended Rating and Justification

The Lead Compliance Inspector recommends that the facility receive a rating of Meets Standards unless unobserved practices and conditions are contrary to what was reported to the inspection team. The facility complies with the ICE Performance-Based National Detention Standards (PBNDS) 2011 for Over 72-hour facilities. One (1) standard was rated as Does Not Meet Standard and five (5) standards were Not Applicable (N/A). All remaining thirty-seven (37) standards were found to Meet Standards.

LCI Assurance Statement

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

• ICE Officials –
• Facility Staff –