



**U.S. Department of Homeland Security**  
Immigration and Customs Enforcement  
Office of Professional Responsibility Inspections and  
Detention Oversight Division  
Washington, DC 20536-5501

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## Office of Detention Oversight Compliance Inspection

Enforcement and Removal Operations  
ERO Baltimore Field Office  
Anne Arundel County Correctional Center  
Glen Burnie, Maryland

November 14-16, 2018

**COMPLIANCE INSPECTION**  
**for the**  
**ANNE ARUNDEL COUNTY ORDINANCE ROAD CORRECTIONAL**  
**CENTER**  
Glen Burnie, Maryland

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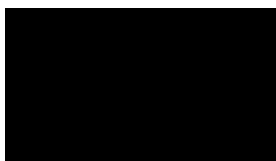
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## FACILITY OVERVIEW

The Office of Detention Oversight (ODO) conducted a compliance inspection of the Anne Arundel County Ordinance Road Correctional Center (ORCC) in Glen Burnie, Maryland from November 14-18, 2018.<sup>1</sup> The facility was built in 1998 and began housing U.S. Immigration and Custom Enforcement (ICE) detainees in October 2017. The facility is owned by Anne Arundel County, Maryland and operated by county employees. The facility operates under the Performance-Based National Detention Standards ICE (PBNDS) 2011.

ICE Office of Enforcement and Removal Operations (ERO) deportation officers are not assigned to the facility on a full-time basis, nor is a Detention Services Manager assigned to the facility on a full-time basis. The director of the facility handles daily facility operations and is supported by ██████ personnel. In addition to ICE detainees, ORCC houses county inmates and United States Marshal Service detainees. Trinity Services provides food services, Keefe Commissary Network provides commissary services, and Correct Care Solutions (CCS) provides health services. The facility is accredited by the Maryland Commission on Correctional Standards, and the National Commission on Correctional Health Care.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity <sup>2</sup>	130
Average ICE Detainee Population <sup>3</sup>	108
Male Detainee Population (as of 11/13/2018)	102
Female Detainee Population (N/A)	N/A

This was ODO's first inspection of ORCC.

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<sup>1</sup> This facility holds male detainees with low and medium security classification levels for periods greater than 72 hours.

<sup>2</sup> Data Source: ERO Facility List Report as of November 13, 2018.

<sup>3</sup> *Ibid*

## FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 MAJOR CATEGORIES

PBNDs 2011 STANDARDS INSPECTED <sup>4</sup>	DEFICIENCIES
<b>Part 1 - Safety</b>	
Environmental Health and Safety	3
<b>Sub-Total</b>	<b>3</b>
<b>Part 2 – Security</b>	
Admission and Release	3
Custody Classification System	0
Funds and Personal Property	0
Sexual Abuse and Assault Prevention and Intervention	3
Special Management Units	0
Staff-Detainee Communication	1
Search of Detainees	1
Use of Force and Restraints	3
<b>Sub-Total</b>	<b>11</b>
<b>Part 4 – Care</b>	
Food Service	4
Disability, Identification, Assessment, and Accommodation	0
Medical Care	0
Medical Care (Women)	N/A
Significant Self-harm and Suicide Prevention and Intervention	0
<b>Sub-Total</b>	<b>4</b>
<b>Part 5 - Activities</b>	
Telephone Access	4
<b>Sub-Total</b>	<b>4</b>
<b>Part 6 – Justice</b>	
Detainee Handbook	3
Grievance System	2
Law Libraries and Legal Materials	2
<b>Sub-Total</b>	<b>7</b>
<b>Total Deficiencies</b>	<b>29</b>

<sup>4</sup> For greater detail on ODO's findings. See the Compliance Inspection Findings section of this report.

## COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, and where detainees are housed for over 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.<sup>5</sup> ODO identifies violations outlined in ICE detention standards, ICE policies, or operational procedures, as “deficiencies”. ODO also acknowledges instances where the facility resolves deficiencies prior to completion of ODO’s inspection -- these corrective actions are annotated with “C” under the Inspection Findings section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is also shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans, and (ii) provide senior executives with an independent assessment of facility operations. Additionally, ODO’s findings inform ICE executive management to aid in the decision-making processes to better allocate resources across the agency’s entire detention inventory.

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<sup>5</sup> ODO reviews the facility’s compliance with selected standards in their entirety.

## DETAINEE RELATIONS

ODO interviewed eleven detainees, each of whom voluntarily agreed to participate. None of the detainees made allegations of discrimination, mistreatment, or abuse. Most detainees reported satisfaction with facility services except for the concerns listed below.

*Medical Care:* One detainee indicated he would rather die in the United States and would kill himself if he gets deported.

- Action taken: ODO asked the detainee if he needed to speak with someone about his feelings and he replied no. ODO spoke with the Nurse Practitioner and the Health Services Authority (HSA) about the detainee's statement and requested he receive a mental health follow-up evaluation. Mental health staff performed the evaluation the same day. Staff informed ODO the detainee denied having suicide ideations.

*Search of Detainees:* Two detainees stated all detainees are routinely strip searched during facility shakedowns. They also indicated they believe the strip-searches violate their privacy.

- Action taken: ODO reviewed the facility's strip search log for the last twelve months and determined detainees are routinely strip searched during routine cell searches. In the last year, a total of [REDACTED] cell searches were done in [REDACTED]. During the cell searches all detainees were strip searched in a designated strip search area in the housing dorm. ODO spoke to facility leadership who confirmed this practice. Though the facility received strip search waivers from ERO, ODO determined this cell search practice exceeds the scope of the waivers. *See* the Compliance Inspection Findings: Searches of Detainees section of this report for further information.

*Food Service:* Eight detainees complained the food was bad, and they were usually served cold and/or undercooked meals. Detainees also claimed they were served expired milk on more than one occasion.

- Action Taken: ODO observed multiple meal services and noted trays were served within the two-hour limit as required by the standard; however, ODO also found food temperatures in the hot food tray were below the acceptable temperature level of 120° Fahrenheit (F). Additionally, ODO observed several expired milk cartons in the facility's refrigerated area, and foods requiring refrigeration were not maintained at 41°F or below. ODO brought these concerns to the attention of food service staff who disposed of the expired milk. *See* the Compliance Inspection Findings: Food Service section of this report for further information.

# COMPLIANCE INSPECTION FINDINGS

## SAFETY

### ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

ODO observed the food service department and found cleaning chemicals (Solitare XL Solid Power, and Multi-Quat Sanitizer) were not properly stored in a secure area (**Deficiency EH&S-1<sup>6</sup>**).

ODO toured the barbering room located in the medical department and found hair clippings on the shelves in the cabinet where tools are kept and noted six clippers had hair trimmings on them. ODO determined the barbering tools were not properly sanitized between haircuts (**Deficiency EH&S-2<sup>7</sup>**).

ODO observed the facility exit/evacuation instructions were in English; however, they were not provided in either Spanish or the next most prevalent language; did not include identification of emergency equipment locations; and Areas of Safe Refuge were not identified and explained on the diagram (**Deficiency EH&S-3<sup>8</sup>**). ODO's interview of staff and review of documentation confirmed that although ORCC conducts fire drills on each shift, the facility does not include timed emergency-key drills in each fire drill (**Deficiency EH&S-4<sup>9</sup>**).

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<sup>6</sup> "All toxic and caustic materials must be stored in secure areas, in their original containers, with the manufacturer's label intact on each container." See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(B)(8)(a).

<sup>7</sup> "Sanitation in barber operations is imperative because of the possible transfer of diseases through direct contact or by towels, combs and clippers. Instruments such as combs and clippers shall not be used successively on detainees without proper cleaning and disinfecting. ...

3. After each detainee visit, all hair care tools that came in contact with the detainee shall be cleaned and effectively disinfected. Ultraviolet lights are not appropriate for sterilization but may be used for maintaining tools that have already been properly sterilized."

See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(E)(3).

<sup>8</sup> "In addition to a general area diagram, the following information must be provided on signs:

a. instructions in English, Spanish and the next most prevalent language at the facility; ...  
c. emergency equipment locations.

Areas of Safe Refuge shall be identified and explained on diagrams. Diagram posting shall be in accordance with applicable fire safety regulations of the jurisdiction." See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(C)(5)(a)(c).

<sup>9</sup> Fire drills shall be conducted and documented at least quarterly in all facility locations including administrative areas. ...

See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(C)(4)(c).



## **SECURITY**

### **ADMISSION AND RELEASE (A&R)**

ODO reviewed 30 randomly-selected detainee files, each containing an Order to Detain, Form I-203 and found ERO Authorizing Officials did not consistently sign the forms. (**Deficiency AR-1<sup>10</sup>**).

ODO reviewed the ORCC orientation video and found it had all elements required by the standard; however; the orientation procedures were not approved in advance by ERO (**Deficiency AR-2<sup>11</sup>**).

ODO observed the release/transfer of 10 detainees and confirmed ORCC returned the detainees' property and funds to include one set of weather-appropriate release clothing. ODO's interviews with staff and review of documentation found release procedures were not approved in advance by ERO (**Deficiency AR-3<sup>12</sup>**).

### **SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION (SAAPI)**

ORCC has a sexual abuse and assault prevention policy which was approved by the facility administrator on March 18, 2016. However, the Field Office Director (FOD) did not review and approve the facility's written policy and procedure (**Deficiency SAAPI-1<sup>13</sup>**). Also, ODO found the facility's procedure for referring incidents to appropriate investigative agencies did not include information on coordinating these referrals with the ICE Office of Professional Responsibility (**Deficiency SAAPI-2<sup>14</sup>**).

ODO interviewed the SAAPI compliance manager, reviewed SAAPI documentation and found the facility did not have any SAAPI incidents in the last twelve months. Although the SAAPI compliance manager stated she conducted an annual review of all SAAPI related incidents, she did not provide ICE ERO a report showing zero incidents (**Deficiency SAAPI-3<sup>15</sup>**).

### **STAFF DETAINEE COMMUNICATION (SDC)**

ICE staff conducts weekly scheduled and unscheduled visits at ORCC. Although the dates and times for scheduled visits are posted in all housing units, ODO found the ICE visitation schedule

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<sup>10</sup> "An Order to Detain or an Order to Release the detainee (Form I-203 or I-203a), bearing the appropriate ICE/ERO Authorizing Official signature, must accompany each newly arriving detainee." See ICE PBNDS 2011, Standard, Admission and Release, Section (V)(E). **This is a Priority Component.**

<sup>11</sup> "Orientation procedures in CDF's and IGSA's must be approved in advance by the local ICE/ERO Field Office." See ICE PBNDS 2011, Standard, Admission and Release, Section (V)(F).

<sup>12</sup> "ICE/ERO shall approve all facility release procedures." See ICE PBNDS, 2011, Standard, Admission and Release, Section (V)(H).

<sup>13</sup> "The facility's written policy and procedures require the review and approval of the Field Office Director." See ICE PBNDS 2011, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (V)(A). **This is a Priority Component.**

<sup>14</sup> "This policy must mandate: procedures for investigating and discipline of assailants, including: c) procedures for coordination of internal administrative investigations with the assigned criminal investigative entity to ensure non-interference with criminal investigations, as well as coordination with the ICE Office of Professional Responsibility (OPR)." See ICE PBNDS 2011, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (V)(A)(5)(c).

<sup>15</sup> "The results and findings of the annual review shall be provided to the facility administrator, Field Office Director or his or her designee, for transmission to the ICE PSA Coordinator." See ICE PBNDS 2011, Standard, Sexual Abuse and Assault Prevention and Intervention, Section (V)(M)(5).

was not in the facility handbook (**Deficiency SDC-1<sup>16</sup>**).

### **SEARCHES OF DETAINEES (SOD)**

Through interviews of facility staff and detainees, ODO found ORCC routinely strip searches detainees during both intake/release and housing unit cell searches. ORCC has two ERO-approved detainee strip search waivers dated March 23, 2017, which specifically allow strip searches in the following instances: during intake and release, before and after court, before and after contact visits, and when a detainee is suspected of hiding contraband. However, in contravention of both the standard and the waivers, all detainees are routinely strip searched and are required to remove or rearrange some or all clothing to allow facility staff to visually inspect breasts, buttocks, and/or genitalia during housing unit cell searches (**Deficiency SD-1<sup>17</sup>**).

ODO notes an **Area of Concern** pertaining to the strip search log. Each housing unit maintains a log to document strip searches conducted during cell searches, and the logs are signed by a sergeant; however, the logs do not include documentation providing a justification for the strip searches. ODO's review of the housing unit strip search logs showed ORCC conducted [REDACTED] where ICE detainees are housed and strip searches were conducted during all cell searches.

### **USE OF FORCE AND RESTRAINTS (UOF&R)**

Through interviews of staff, ODO determined ERO did not approve ORCC's UOF&R form (**Deficiency UOF&R-1<sup>18</sup>**). ODO also found ERO did not approve ORCC's written procedures for after-action review and reporting use of force incidents (**Deficiency UOF&R-2<sup>19</sup>**).

ODO reviewed the training files of [REDACTED] randomly-selected officers to confirm the completion of pre-service training and in-service training. ODO reviewed the training agenda and found ORCC's in-service mandatory training for all officers does not include approved methods of self-defense and defensive tactics (**Deficiency UOF&R-3<sup>20</sup>**).

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<sup>16</sup> "The local supplement to the detainee handbook shall include 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." *See* ICE PBNDS 2011, Standard, Staff Detainee Communication, Section (V)(A).

<sup>17</sup> "Staff shall not routinely require a detainee to remove clothing or require a detainee to expose private parts of his/her body to search for contraband." *See* ICE PBNDS 2011, Standard, Search of Detainees, Section (V)(D)(2)(a).

<sup>18</sup> "All facilities shall have an ICE/ERO-approved form to document all uses of force." *See* ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(O)(2).

<sup>19</sup> "All facilities shall have ICE/ERO-approved written procedures for after-action review of use of force incidents (immediate or calculated) and applications of restraint. All facilities shall model their incident review process after ICE/ERO's process and submit it to ICE/ERO for ERO review and approval. The process must meet or exceed the requirements of ICE/ERO's process." *See* ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(P)(1).

<sup>20</sup> "All new officers shall be sufficiently trained during their first year of employment. Through ongoing training (to occur annually at a minimum), all detention facility staff must be made aware of their responsibilities to effectively handle situations involving aggressive detainees. At a minimum, training shall include: ...

g. approved methods of self-defense and defensive tactics."  
*See* ICE PBNDS 2011, Standard, Use of Force and Restraints, Section (V)(D)(1)(g). **This is a Priority Component.**

## CARE

### FOOD SERVICE (FS)

The food service staff consists of a food service director (FSD) and [REDACTED] cook supervisors but no detainee workers. ODO toured the kitchen to include the freezer, coolers, dry storage room, and dish room areas. ODO found food items on the floor, build-up of food items behind pallets, storage cabinets with spilled food items, and walls that were not properly cleaned (**Deficiency FS-1<sup>21</sup>**). ODO also noticed food items were pushed against the wall, and as a result were not sufficiently spaced from the wall or floor to facilitate pest-control measures (**Deficiency FS-2<sup>22</sup>**). Additionally, the dry room storage door and a nearby spice cabinet were both found unlocked, unsecured, and open with no supervision (**Deficiency FS-3<sup>23</sup>**).

ODO observed food temperatures taken at the time food was placed on the trays met the requirements of the standard; however, food temperatures taken again at the time facility staff picked up the trays for delivery to the detainee housing units, did not meet the standard requirement that hot foods in food trays be maintained at a temperature of at least 120° F (**Deficiency FS-4<sup>24</sup>**).

*Corrective Action:* Prior to completion of the inspection, the FSD increased the heat source on the serving line assembly cart, and placed ice under the pans of the refrigerated items to keep the temperatures cold. Additionally, the Associate Warden instructed the Captain to change the procedures to require facility staff to transport the food carts to the housing units as soon as kitchen staff prepares the food carts. The Warden memorialized this change in the correctional procedural post orders (**C-1**).

## ACTIVITIES

### TELEPHONE ACCESS (TA)

ODO identified posters in each detainee housing unit advising detainees of telephone rules, free legal services, pro bono and consulate contact numbers, and Department of Homeland Security Office of Inspector General posters. However, ODO found the pro bono lists posted in the housing

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<sup>21</sup> “All facilities shall meet the following environmental standards: ...

c. Walls, floors and ceilings must be cleaned routinely.”

See ICE PBNDS 2011, Standard, Food Service, Section (V)(J)(5)(c).

<sup>22</sup> “The following procedures apply when receiving or storing food: ...

d. Store all food item products at least six inches from the floor and sufficiently far from walls to facilitate pest-control measures.”

See ICE PBNDS 2011, Standard, Food Service, Section (V)(K)(3)(d).

<sup>23</sup> “Proper care and control of the dry storeroom involves the following: ...

c. vigilant housekeeping to keep the room clean and free from rodents and vermin (a drain for flushing is desirable);

d. The FSA secures the storeroom under lock and key to prevent pilferage. The FSA is responsible for key distribution.”

See ICE PBNDS 2011, Standard Food Service, Section (V)(K)(7)(c) and (d).

<sup>24</sup> “The following procedures apply to the display, service and transportation of food to main and satellite food service areas: ...

3. sanitary guidelines are observed, with hot foods maintained at a temperature of at least 140 F degrees (120 F degrees in food trays) and foods that require refrigeration maintained at 41 F degrees or below.”

See ICE PBNDS 2011, Standard, Food Service, Section (V)(D)(2)(a)(3). **This is a Priority Component.**

units were dated January 2017 and were not updated quarterly (**Deficiency TA-1<sup>25</sup>**). ODO observed that one housing unit did not have TA rules posted in Spanish (**Deficiency TA-2<sup>26</sup>**) or a list of cards and calling rates (**Deficiency TA-3<sup>27</sup>**).

ODO conducted operational checks on the telephones in the detainee housing units and found them in good working order. However, during ODO's interview of facility staff, ODO determined staff do not ensure there is a dial tone when testing the phones which allows detainees use of the free call platform (**Deficiency TA- 4<sup>28</sup>**).

## **JUSTICE**

### **DETAINEE HANDBOOK (DH)**

ODO reviewed the ORCC Detainee Handbook which is provided to detainees at the time of their admission to the facility. ODO reviewed staff training files and determined facility staff and ICE ERO do not provide initial and annual staff training that cover the elements of both the facility and ICE detainee handbooks (**Deficiency DH-1<sup>29</sup>**).

Updates to the facility handbook are electronically available to staff. However, ODO determined facility staff have not established procedures to immediately communicate revisions of the local handbook to detainees (**Deficiency DH-2<sup>30</sup>**). Furthermore, the facility does not have a committee that oversees any changes or additions that need to be made to the facility handbook (**Deficiency DH-3<sup>31</sup>**).

### **GRIEVANCE SYSTEM (GS)**

ODO reviewed ORCC written policy for the informal and formal grievance process, medical and emergency grievances, and appeals. ODO found ORCC does not have a written policy regarding procedures for urgent access to legal counsel and the law library (**Deficiency GS-1<sup>32</sup>**).

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<sup>25</sup> "All Field Offices are responsible for ensuring facilities which house ICE detainees under their jurisdiction are provided with current pro bono legal service information." See ICE PBNDS 2011, Standard, Telephone Access, Section (V)(A)(3).

<sup>26</sup> "ICE/ERO and the facility shall coordinate in posting these rules where practicable in Spanish and in the language of significant segments of the population with limited English proficiency." See ICE PBNDS 2011, Standard, Telephone Access, Section (V)(C).

<sup>27</sup> "Facilities shall post a list of card and calling rates in each housing unit." See ICE PBNDS 2011, Standard, Telephone Access, Section (V)(A)(2).

<sup>28</sup> "After ensuring that each phone has a dial tone, when testing equipment, the officers must be able to demonstrate that an individual has the ability to make calls using the free call platform." See ICE PBNDS 2011, Standard, Telephone Access, Section (V)(A)(4).

<sup>29</sup> "The facility administrator shall provide a copy of the ICE Handbook and the local supplement to every staff member who has contact with detainees and shall address their contents in initial and annual staff training." See ICE PBNDS 2011, Standard, Detainee Handbook, Section (V)(D).

<sup>30</sup> "The facility administrator shall establish procedures for immediately communicating such changes to staff and detainees:

1. posting changes on bulletin boards in housing units and other prominent areas."

See ICE PBNDS 2011, Standard, Detainee Handbook, Section (V)(E)(1).

<sup>31</sup> "The facility administrator shall appoint a committee to review the local supplement annually and recommend changes." See ICE PBNDS 2011, Standard, Detainee Handbook, Section (V)(E).

<sup>32</sup> "Written procedures shall also cover urgent access to legal counsel and the law library." See ICE PBNDS 2011, Standard, Grievance System, Section (V)(C)(2).

Grievances are handled by the Grievance Officer (GO) who refers all grievances to the appropriate facility department head for response. ODO found the GO does not log all grievances in the facility grievance log (**Deficiency GS-2**<sup>33</sup>).

### **LAW LIBRARIES AND LEGAL MATERIALS (LL&LM)**

ODO toured the two detainee housing units and observed each unit has a law library room equipped with two LexisNexis computers accessible to detainees throughout the day. ODO found that both computers in one unit had password requirements to use the LexisNexis software and, one of the two computers had a non-functioning mouse. Through interviews of facility staff and detainees, ODO determined the password was unknown, staff were unaware of the password restriction, and computers were disabled for the past three days. ODO reviewed the library and housing unit logbooks and found library computers are not inspected daily. Furthermore, the facility does not have a designated person that inspects the equipment daily for functionality (**Deficiency LL&LM-1**<sup>34</sup>).

*Corrective Action:* Prior to completion of the inspection, the computers in D1 unit were rebooted and the non-working mouse was replaced. ODO was able to verify that all computers in the housing dorms were working and had a March 2018 version of the LexisNexis software (**CA-2**).

The facility handbook informs detainees that a law library is available for detainee use but does not inform them of the scheduled hours of access to the law library (**Deficiency LL&LM-2**<sup>35</sup>).

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<sup>33</sup> “Facility staff shall assign each grievance a log number, enter it in the space provided on the detainee grievance form, and record it in the detainee grievance log in chronological order.” See ICE PBNDS 2011, Standard, Grievance System, Section (V)(D).

<sup>34</sup> “Each facility administrator shall designate an employee to inspect equipment daily, at a minimum, to ensure it is in good working order, and to stock sufficient supplies.” See ICE PBNDS 2011, Standard, Law Libraries and Legal Material, Section (V)(D). **This is a Priority Component.**

<sup>35</sup> “The detainee handbook or supplement shall provide detainees the rules and procedures governing access to legal materials, including the following information: ... 2. the scheduled hours of access to the law library; 6. the procedures for notifying a designated employee that library material is missing or damaged; ... 8. if applicable, that LexisNexis is used at the facility and that instructions for its use are available.” See ICE PBNDS 2011, Standard, Law Libraries and Legal Material, Section (V)(N)(2)(6)(8).

## CONCLUSION

ODO would like to commend the facility on its VRS, which helps deaf and hard-of-hearing detainees by connecting them via videophone to a video-based interpreter. ODO considers the use of this system a **Best Practice**.

ODO notes the lack of Special Management Unit (SMU) availability for ICE detainees as an **Area of Concern**. ORCC does not house detainees in a designated SMU for disciplinary or administrative segregation purposes. Instead, detainees requiring separation from the general population are temporarily held in one of four holding cells in the intake area and subsequently transferred by ICE to another location within 24 hours. In the 12 months preceding the inspection, one detainee was removed from the facility for disciplinary reasons. ODO confirmed the detainee was transferred by ICE within 24 hours.

Due to Anne Arundel's current practice of approving all requested reasonable accommodations, ODO found no deficiencies in the Disability, Identification, Assessment, and Accommodation standard; however, ODO recommends the facility proactively establish a multidisciplinary team to assess reasonable accommodation requests should a future change in facility leadership result in a change to the handling of reasonable accommodation requests.<sup>36</sup>

Finally, ODO reviewed the facility's compliance with 17 standards under PBNDS 2011. ODO found the facility compliant with six standards and identified 29 deficiencies in the remaining 11 standards. Five deficiencies were a result of the field office not having approved various facility policies and procedures. ODO recommends ERO work with the facility to remedy any deficiencies which remain outstanding as applicable and in accordance with contractual obligations.

<b>Compliance Inspection Results Compared</b>	<b>FY 2019 (PNDS 2011)</b>
Standards Reviewed	17
Deficient Standards	11
Overall Number of Deficiencies	29
Deficient Priority Components	5
Corrective Action	2

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<sup>36</sup> "The facility's process to appropriately accommodate a detainee with a disability will differ depending on the nature of the impairment or disability being addressed. However, in certain cases, the facility administrator or his or her designee shall automatically convene a multidisciplinary team, as described in section 4 below." See ICE PBNDS 2011, Standard, Disability, Identification, Assessment, and Accommodation, Section (V)(F).