# ATTACHMENT L - COT/GAD X-10 Contractor Electronic Funds (EFT) Registration Request Form

# State of Maryland Comptroller of Maryland

Date of request	
<b>Business identifica</b>	ation information (Address to be used in case of default to check):
Business name	
Address line 1	
Address line 2	
City	State Zip code
Taxpayer identifie	cation number:
Federal Employe	er Identification Number:
(or)	Social Security Number:
different from above	ame, title, e-mail and phone number including area code. (And address if ve):
Financial instituti Name and address	on information:
Contact name, pho	ne number (include area code),
ABA number	
Account number	Checking Money Market Savings
Account type	Checking Wiolicy Warket Savings
Format Desired:	CCDCCD+CTX* (Check one.)
*Not	te – There may be a charge to you by your bank with this format.
A VOIDED CH	IECK from the bank account shall be attached.

(OVER)

# To Requestor:

Please retain a copy of this form for your records. Please allow approximately 30 days from the date of your request for the Comptroller's and Treasurer's Offices to process your request. Failure to maintain current information with this office could result in errors in payment processing. If you have any questions, please call the EFT registration desk at 410-260-7375.

**Please submit form to:** EFT Registration, General Accounting Division

Room 205, P.O. Box 746

Annapolis, Maryland 21404-0746

Instructions: Electronic Funds Transfer instructions are located: http://compnet.comp.state.md.us/gad. Questions may be requested by email, <a href="mailto:gad@comp.state.md.us">gad@comp.state.md.us</a>. Or call 1-888-784-0144. COT/GAD X-10

# **ATTACHMENT M – Living Wage Requirements**

# Living Wage Requirements for Service Contracts

- A. This contract is subject to the Living Wage requirements under Title 18, State Finance and Procurement Article, Annotated Code of Maryland and the regulations proposed by the Commissioner of Labor and Industry. The Living Wage generally applies to a Contractor or Subcontractor who performs work on a State contract for services that is valued at \$100,000 or more. An employee is subject to the Living Wage if he/she is at least 18 years old or will turn 18 during the duration of the contract; works at least 13 consecutive weeks on the State Contract and spends at least one-half of the employee's time during any work week on the State Contract. The Living Wage Law does not apply to an employee who works less than thirteen consecutive weeks and full-time on a contract subject to the Living Wage.
- B. The Living Wage Law does not apply to:
  - (1) A Contractor who:
    - (A) has a State contract for services valued at less than \$100,000, or
    - (B) employs 10 or fewer employees and has a State contract for services valued at less than \$500,000.
  - (2) A Subcontractor who:
- 1. performs work on a State contract for services valued at less than \$100,000,
  - (B) employs 10 or fewer employees and performs work on a State contract for servic valued at less than \$500,000, or
    - (C) performs work for a Contractor not covered by the Living Wage Law as defined in B (1)(B) above, or B(3) or C below.
  - (3) Contracts involving services needed for the following:
    - (A) Services with a Public Service Company;
    - (B) Services with a nonprofit organization;
    - (C) Services with an officer or other entity that is in the Executive Branch of the State government and is authorized by law to enter into procurement ("Unit"); or
      - a. Services between a Unit and a County or Baltimore City.

- C. If the Unit responsible for the State contract determines that application of the Living Wage would conflict with any applicable Federal program, the Living Wage does not apply to the contract or program.
- D. A Contractor must not split or subdivide a contract, pay an employee through a third party, or treat an employee as an independent Contractor or assign work to employees to avoid the imposition of any of the requirements of Title 18, State Finance and Procurement, Annotated Code of Maryland.
- E. Each Contractor/Subcontractor, subject to the Living Wage Law, shall post in a prominent and easily accessible place at the work site(s) of covered employees a notice of the Living Wage Rates, employee rights under the law, and the name, address, and telephone number of the Commissioner.
- F. The Commissioner of Labor and Industry shall adjust the wage rates by the annual average increase or decrease, if any, in the Consumer Price Index for all urban consumers for the Washington/Baltimore metropolitan area, or any successor index, for the previous calendar year, not later than 90 days after the start of each fiscal year. The Commissioner shall publish any adjustments to the wage rates on the Division of Labor and Industry's Website. An employer subject to the Living Wage Law must comply with the rate requirements during the initial term of the contract and all subsequent renewal periods, including any increases in the wage rate, required by the Commissioner, automatically upon the effective date of the revised wage rate.
- G. A Contractor/Subcontractor who reduces the wages paid to an employee based on the employer's share of the health insurance premium, as provided in §18-103(c), State Finance and Procurement Article, Annotated Code of Maryland, shall not lower an employee's wage rate below the minimum wage as set in §3-413, Labor and Employment Article, Annotated Code of Maryland. A Contractor/Subcontractor who reduces the wages paid to an employee based on the employer's share of health insurance premium shall comply with any record reporting requirements established by the Commissioner of Labor and Industry.
- H. A Contractor/Subcontractor may reduce the wage rates paid under §18-103(a), State Finance and Procurement, Annotated Code of Maryland, by no more than 50 cents of the hourly cost of the employer's contribution to an employee's deferred compensation plan. A Contractor/Subcontractor who reduces the wages paid to an employee based on the employer's contribution to an employee's deferred compensation plan shall not lower the employee's wage rate below the minimum wage as set in §3-413, Labor and Employment Article, Annotated Code of Maryland.
- I. Under Title 18, State and Finance Procurement Article, Annotated Code of Maryland, if the Commissioner determines that the Contractor/Subcontractor violated a provision of this title or regulations of the Commissioner, the Contractor/Subcontractor shall pay restitution to each affected employee, and the State may assess liquidated damages of \$20 per day for each employee paid less than the Living Wage.
- J. Information pertaining to reporting obligations may be found by going to the DLLR Website <a href="http://www.dllr.state.md.us/">http://www.dllr.state.md.us/</a> and clicking on Living Wage.

# Affidavit of Agreement Maryland Living Wage Requirements-Service Contracts

Contract No	)			
Name of Co	ontractor			
Address				
City		_ State	Zip Code	
	If the Contract is Exen	npt from the	e Living Wage Law	
affirms that			of the above named Contractor, herebs Living Wage Law for the following	•
	Bidder/Offeror is a nonprof	it organizati	on	
	Bidders/Offeror is a public	service com	pany	
	Bidder/Offeror employs 10 value is less than \$500,000		employees and the proposed contra-	ct
	Bidder/Offeror employs m		employees and the proposed contra-	ct

# If the Contract is a Living Wage Contract

A. The Undersigned, being an authorized representative of the above named Contractor, hereby affirms our commitment to comply with Title 18, State Finance and Procurement Article, Annotated Code of Maryland and, if required, to submit all payroll reports to the Commissioner of Labor and Industry with regard to the above stated contract. The Bidder/Offeror agrees to pay covered employees who are subject to living wage at least the living wage rate in effect at the time service is provided for hours spent on State contract activities, and to ensure that its Subcontractors who are not exempt also pay the required living wage rate to their covered employees who are subject to the living wage for hours spent on a State contract for services. The Contractor agrees to comply with, and ensure its Subcontractors comply with, the rate requirements during the initial term of the contract and all subsequent renewal periods, including any increases in the wage rate established by the Commissioner of Labor and Industry, automatically upon the effective date of the revised wage rate.

# Affidavit of Agreement (continued) Maryland Living Wage Requirements-Service Contracts

B.	(initial here if applicable) The Bidder/Offeror affirms it h						
	no covered employees for the following reasons: (check all that apply):						
	The employee(s) proposed to work on the contract will spend less than chalf of the employee's time during any work week on the contract	ne-					
	The employee(s) proposed to work on the contract is 17 years of age younger during the duration of the contract; or	or					
	The employee(s) proposed to work on the contract will work less than consecutive weeks on the State contract.	13					
	Commissioner of Labor and Industry reserves the right to request payroll records data that the Commissioner deems sufficient to confirm these affirmations at any times.						
Name	of Authorized Representative:						
Signat	ture of Authorized Representative Date						
Title							
Witne	ess Name (Typed or Printed)						
Witne	ess Signature Date						

ATTACHM	IENT N – Fac		ility Medica	tion Distrib	oution Meth	od
ATTACIIVI		Requir	ements	uon Distric	oution Meth	ou

		Attachment N Facility-By-Facility Medication Distribution Methods Pill Line at				Pill Line at
Facility	Location of Pill Line	Housing Unit	Cell to Cell	Pill Line at Medical Unit	Notes	Mental Health Units
ODIE	D	ON A seed D Describes	E North Arrad D O'dea	NI		
CBIF	Dormitory		5 North A and B Sides	None		
	Dormitory	4N A and B Dormitory		None		
	Dormitory	3C A and B Dormitory		None		
	Dormitory	4C A and B Dormitory		None		
	Dormitory	3S A and B Dormitory		None		
	Dormitory	4S A and B Dormitory		None		
					Mathadana administradi in the	
	December	50 A and D D and the		Nicos	Methadone administered in the	
	Dormitory	5S A and B Dormitory		None	dispensary only	
					methadone administered in the	
MTC			V	V		
MTC			X	X	Infirmary only	
MRDCC	tiers		X			
BCCC	แษาร		Λ	Χ		
BPRU				X		
MCAC	tiers		Seg			
HDU	tioio		OUG	X		
TIDO				χ		
		F2 and C2 and PIW -				
PATX		L1,L2,L4 M2-4, N2-4	Seg	×		X
BCF			Oug	X X		
SMPRU				X		
HTBC				X X		
JPRU				X		
MCIJ				X		
CLF				X		
JCI	Barber Shop- AM					
JCI	Commissary- PM					
JCI	,		seg units			
JCI			<u> </u>	Narcs/Special Treatments		
JCI			Hub tier	Insulin		
JRH			X			
MCI-J		Pharmacy of K Unit	Seg H Building			
MCI-W		CMHC-W	Seg Bldg 192C	X		Х
EPRU			J J -	X		

Instructions: If the "Pill Line at Mental Health Units" Column is checked off, it is the responsibility of the mental health contractor to provide staff. All other medication distribution on this attachment are the responsibility of the Medical contractor.

						Pill Line at Mental Health
Facility	Location of Pill Line	Housing Unit	Cell to Cell	Pill Line at Medical Unit	Notes	Units
PHPRÚ		<u> </u>		X		
ECI-X				X		
ECI-W			Seg- Unit 4			
ECI-E			Seg-Unit 5			
			Unit 6 B-tier only if			
ECI-E			Plus men	6,7,8 x		
			Unit 8 D-tier medically			
ECI-E			impaired			
ECI-E			Unit 9 disabled, frail			
ECI- W				HU 1-3		
ECI- Inf			X			
	Pill Line at Two					
	locations: Back Keys					
	and Room near					
MCI-H	Education wing		Seg Unit			
			J-1 and all medically			
			ordered "feed-ins" and			
MCI-H			H2 and F2			
			HU 3, 4 and 5 Seg			
			and Admin Seg,			
			medically ordered and			
			medically ordered			
WCI	Medical Unit		"feed-in"	HU 1, 2, 3 and 5		
					land the second second second second second	
	Haldina Call in Hait				insulin only to general population	
NBCI	Holding Cell in Unit- HU2- HU3 -HU-4		HU-1		inmates (HU 2, 3, & 4) in the	
INDCI	NUZ- NU3 -NU-4		Seg Unit and all		medical area just before meals	
			medically ordered			
RCI			"feed-ins"	Χ		
1,01			Seg Unit plus all			
			temporary housing			
			and medically ordered			
мстс	For HED and EDU		"feed-ins)"	Χ		
WDC	Dormitory	M,N,O,P,Q,R,S,T,U,V	Seg Unit; Single Cells	None	methadone in dispensary only	
50	Dominory	JI-500, 600, 700, 800,	239 21.11, 3111910 20110			
JI	Dormitory	900		None		
		B,C,D,E, F, G,N,O,P,	Seg Unit, J, K,L,M -			
MDC	Tiers	Q,S	IMHU	None	Methadone in dispensary only	

ATTACHMENT O – DIALYSIS TREATMENT TRENDS

# Attachment O -Dialysis Treatment Trends

	DIALYSIS TRENDS
Jan 2007	41
Feb	43
Mar	41
Apr	33
May	32
Jun	56
Jul	55
Aug	57
Sept	55
Oct	56
Nov	43
Dec	43
Jan 2008	55
Feb	48
Mar	50
Apr	51
May	42
Jun	50
Jul	53
Aug	53
Sept	56
Oct	53
Nov	55
Dec	54
Jan 2009	55
Feb	55
Mar	56
Apr	55
May	53
Jun	54
Jul	49
Aug	48
Sept	43
Oct	41
Nov	41
Dec	35
Jan 2010	39
Feb	34
Mar	34
Apr	38
May	38
Jun	37
Jul	36
Aug	40
Sept	40
Oct	40
Nov	38
Dec	37
Jan 2011	39
Feb	43
Mar	46

# ATTACHMENT P – DOC ARP POLICY / DPDS ADULT HELP/GRIEVANCE

- P-1, DOC ARP Policy 185.003
- P-2, DOC ARP Policy 185.002
- P-3, DPDS Adult Help Request Process 180.4
- P-4, DPDS Adult Grievance Procedures 180.1



# DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES DIVISION OF CORRECTION

DIVISION OF CORP
DIVISION
OF
CORRECTION
DIRECTIVE

PROGRAM:	ADMINISTRATIVE REMEDY PROCEDURES		
<b>DCD</b> #:	185-003		
TITLE:	Institutional Administrative Remedy Procedures		
ISSUED:	August 27, 2008		
<b>EFFECTIVE:</b>	August 27, 2008		
<b>AUTHORITY:</b>	Pal B. OFILE	Paul O'Flaherty Assistant Commissioner	
APPROVED:	I Michael Storeffer	J. Michael Stouffer Commissioner	

#### I. References:

- A. Suits by Prisoners, 42 U.S.C.§ 1997e(a)
- B. Correctional Services Article, §§ 10-201 through 10-210, Annotated Code of Maryland
- C. Courts and Judicial Proceedings Article, §§ 5-1001 through 5-1007, Annotated Code of Maryland
- D. COMAR 12.02.27 and COMAR 12.07.01.
- E. DCD 175-2 and 250-1
- II. Applicable to: All Division of Correction (DOC) inmates housed in DOC institutions and facilities and all DOC staff.
- III. Purpose: To establish procedure for wardens and institutional staff to implement policy as stated in DCD 185-002.
- IV. Definition: None.
- V. Policy: It is the policy of the Division of Correction that:
  - A. Staff and inmates shall be encouraged to make a good faith effort to resolve all institutionally related inmate complaints at the lowest possible level.
  - B. Inmates shall seek formal resolution initially through the Administrative Remedy Procedure when attempts at informal resolution fail or are not pursued.
  - C. Inmates shall adhere to the time periods and other requirements set forth in this Directive and should not expect that any late submission will be considered.
  - D. Requests for administrative remedy and appeals under the Administrative Remedy Procedure be answered on the merits and that substantive relief be provided to the inmate when warranted.

#### VI. Procedures:

#### A. Warden

1. The warden is responsible for the operation of the administrative remedy procedure at the institutional level and for ensuring institutional compliance.

#### 2. The warden shall:

- a. Designate a correctional case management specialist, supervisor, manager, or correctional officer as the institutional administrative remedy coordinator and designate an alternate to function as coordinator in the coordinator's absence:
- b. Designate one supervisor within each department (who shall be referred to as the departmental liaison throughout this series of directives) to serve as an investigator and/or to delegate investigations to departmental staff (this includes the medical department);
- c. Ensure that all inmates and staff are aware of the administrative remedy procedure;
- d. Encourage the use of the informal resolution process by staff and inmates to resolve inmate complaints at the lowest possible level by directing staff to actively participate in the resolution of inmate complaints;
- e. Respond to all complaints within the prescribed time frame; and
- f. Manage the institution's compliance with the administrative remedy directives through the institutional coordinator.

#### B. Administrative Remedy Coordinator (ARC)

1. The administrative remedy coordinator is responsible for managing the operation of the administrative remedy procedure within the institution.

#### 2. The coordinator shall:

- a. Process all formal complaints submitted through the administrative remedy procedure;
- b. Ensure that all institutional staff responsibilities for administrative remedy are completed consistent with established procedures;
- c. Report to the warden any non-compliance with procedures which affect the ability to meet established time frames;
- d. Ensure the availability of all appropriate administrative remedy forms to all inmates by supplying these forms to the case management department, housing unit officers, and the inmate library;

- e. Make appropriate accommodations for any inmate who is not proficient in the English language so that the inmate has access to the ARP process; and
- f. Process all complaints consistent with the procedures and time frames established in the administrative remedy DCDs.

# C. Department Liaisons

- 1. Department liaisons shall be the administrative remedy coordinator's point of contact for all investigations related to that department.
- 2. Department liaisons may choose to either conduct the investigations themselves or assign the complaint to an employee in that department for investigation.

# D. Investigators

- 1. Investigators shall investigate each case assigned to them in accordance with the procedures established in this directive utilizing the Administrative Remedy Procedure Case Summary, Appendix 1 to this directive.
- 2. Investigators shall be responsible and accountable for submitting completed investigations back to the ARC by the due date.
- E. Preliminary Review of an Administrative Remedy Procedure (ARP) Request
  - 1. The warden or the institutional coordinator shall conduct a preliminary review of each request for administrative remedy to determine if the inmate's complaint concerns an emergency request or if the complaint is frivolous or malicious.
  - 2. If is determined that the complaint concerns an emergency request, all regular time limits and procedural requirements shall be set aside and the warden or designee shall, without further substantive review of the request:
    - a. Accelerate the investigative process;
    - b. Direct immediate corrective action; and/or
    - c. Notify the institutional health care provider of any medical complaints that are determined to be emergencies.
  - 3. If the warden determines that the complaint is frivolous or malicious, the warden shall:
    - a. Complete Part B of Appendix 3 to DCD 185-002,
    - b. Indicate that the request is dismissed for procedural reasons final as frivolous or malicious or both;
    - c. Forward the request to the institutional coordinator to be indexed, copied, and distributed; and

- d. Review the request to determine if the inmate properly completed an ARP request as required by DCD 185-002.
- 4. If the inmate fails to properly complete the ARP request and if this failure is vital to determining the inmate's interest or basis for the investigation, the ARC shall dismiss the complaint for procedural reasons pending resubmission.
- 5. Inmates are encouraged but not required to list the steps taken to resolve their complaint informally and a complaint should not be dismissed for procedural reasons pending resubmission to obtain this information.

# F. Resubmitting a Request

- 1. If the institutional coordinator has dismissed a request for procedural reasons as insufficient or incomplete and issued instructions for resubmitting the request, the inmate may resubmit the request to the warden, one time only, by:
  - a. Completing a new Request for Administrative Remedy; and
  - b. Following the specific instructions provided by the institutional coordinator in the receipt portion of Part C (Appendix 3 to DCD 185-002) of the Request for Administrative Remedy.
- 2. Failure to resubmit the request in accordance with the coordinator's instructions shall result in a dismissal for procedural reasons final of the request which is subject to non-concurrence by the headquarters coordinator.
- G. Inmates shall submit their request for administrative remedy to an officer in the control center of the inmate's housing unit, a tier officer, or a custody supervisor. The request will be processed by the officer in accordance with the instructions in DCD 185-002.
- H. The warden may issue an Institutional Bulletin (IB) designating a location to which officers shall deliver the requests.
  - 1. The IB may designate a time and place for inmates to submit their requests.
  - 2. The warden shall ensure that all inmates have at least a daily opportunity to turn in their requests.
  - 3. The requests shall be stamped daily either by staff assigned to the Warden's office or the institutional coordinator. The time frame for indexing starts from the stamp date.
- I. The warden's time frame for responding to a request starts from the date that the officer signs the request.

- J. An inmate may, for any reason, withdraw a complaint by submitting to the institutional or headquarters coordinator a completed Withdrawal Form, Appendix 5 to DCD 185-002. The coordinator shall ensure that:
  - 1. The Withdrawal Form is included in the ARP file; and
  - 2. The inmate is offered a copy.
- K. Indexing and Assigning Case Numbers
  - 1. The administrative remedy coordinator shall maintain the Administrative Remedy Index, Appendix 2 to this directive, to record requests for administrative remedy within five working days of the date stamp on the request. The coordinator shall ensure that:
    - a. The index is maintained electronically with the ability to search for requests by year, inmate name, subject code, and disposition code.
    - b. A new index form is used at the beginning of each calendar month. Enter the institution, month, and year at the top of the form.
    - c. Each request received is assigned a case number consisting of the institution's initials followed by a four digit sequential number followed by the last two digits of the year. The four digit number shall begin at 0001 and return to that number on January 1 of each year. (Example: MCTC-0001-08 would be the number for the first request received by the institutional coordinator of the Maryland Correctional Training Center for the calendar year 2008).
    - d. Each case which is resubmitted in accordance with the coordinator's instructions retains the assigned case number.
    - e. Each case that is returned from the headquarters coordinator due to a non-concurrence of the institutional coordinator's rationale for a dismissal for procedural reasons retains the assigned case number and is investigated.
  - 2. The first five columns should be completed as the request or appeal is indexed.
    - a. The first column shall contain the assigned case number.
    - b. The second column shall contain the inmate's name
    - c. The third column shall contain the inmate's DOC number.
    - d. The fourth column shall contain the date of the month on which the complaint was indexed.
    - e. The fifth column, if applicable, shall contain either:
      - (1) The number code "5" from the disposition codes indicating that a request has been dismissed for procedural reasons pending resubmission; or

- (2) The number code "7" indicating that the case has been returned for investigation due to a non-concur of a dismissal for procedural reasons by the Headquarters Coordinator.
- (3) Column five shall also contain the date on which the resubmitted request is indexed and accepted or the date the non-concur is indexed and accepted.
- f. Column six shall contain the subject code(s) identifying the nature of the complaint. Codes are provided on the reverse side of the index form. The coordinator is responsible for establishing which code is the most appropriate. No more than two subject codes may be entered in this column.
- g. The remaining index entries shall be completed as follows:
  - (1) Column seven shall contain the date of the month on which the warden or commissioner signed the response or the date that the request was dismissed for procedural reasons by the institutional coordinator.
  - (2) Column eight shall either contain the date that the inmate signed the receipt of Warden's response or shall contain the date that the dismissal for procedural reasons by the institutional coordinator was mailed to the inmate.
  - (3) Column nine shall contain a one-digit number from the coding sheet located on the back of the index indicating the disposition of the complaint.
  - (4) Column ten is for the entry of a brief description of the inmate's complaint, the reason for the dismissal for procedural reasons of the complaint, or the date that the resubmitted request is due.
- h. Each line of the index form shall be used through the last entry on the last date of the month.
- i. By the tenth working day of each month, a copy of the previous month's index shall be electronically mailed to the headquarters administrative remedy office.
- j. The coordinator shall ensure that the index is properly updated as dispositions are rendered in previously unresolved cases.
- k. When dispositions have been made for all cases indexed for the month, a copy of the completed index shall be electronically mailed to the headquarters coordinator.

# L. Administrative Remedy Procedure Files

- 1. The administrative remedy coordinator shall maintain a centralized file with a copy of each closed administrative remedy request or appeal with any investigative findings or documentation attached.
  - a. Files shall be maintained chronologically by month and year in the order indexed. A copy of the monthly index shall be kept in the front of each file separating each new month as a directory to the file's contents.
  - b. Files from the previous year may be stored or archived on January 1<sup>st</sup> of the following year. For example, all 2006 files shall be stored or archived effective January 1, 2007. The files shall be stored by year in order of case number with a copy of that year's index in the front. The files shall be kept for at least four years following the final disposition of the request and then shall be destroyed.
- 2. The Warden may authorize these files to be stored electronically provided these files are recoverable should the institution's computers fail.

# M. Quarterly Reports

- 1. Institutional coordinators shall accumulate aggregate data regarding the number and types of requests by subject code heading as listed on the reverse side of the index form using the Request for Administrative Remedy Quarterly Report, Appendix 3 to this directive.
- 2. Reports of the data are to be maintained by the institutional coordinator and available upon request or in the event of an audit.

# N. Dismissal of a Request for Procedural Reasons

- 1. The institutional coordinator shall dismiss the request for procedural reasons pending resubmission when the inmate has failed to properly complete all sections of the request or when the inmate has failed to provide sufficient information or specific information within the complaint essential for the completion of its investigation. (Note: A request without an officer's signature is considered incomplete.) The institutional coordinator shall:
  - a. Provide in the receipt portion, Part C (Appendix 3 to DCD 185-002), the reason(s) why the request is incomplete;
  - b Provide specific instructions for the inmate to properly complete the request for administrative remedy;
  - c. Provide the specific due date of the resubmitted request which is the later of 15 calendar days from dismissal or within the original 30 day time frame; and
  - d. Return the request and a blank request for administrative remedy to the inmate and keep one copy for the file.

- 2. Failure by the inmate to resubmit the request in accordance with the coordinator's instructions or failure to resubmit by the due date given shall result in a final dismissal for procedural reasons at the institutional coordinator's discretion subject to non-concurrence by the headquarters coordinator.
  - a. If the inmate fails to resubmit the request, the disposition date in column seven of the index shall be the date that the resubmission was due.
  - b. If the resubmission is received after the due date, the disposition date is still the date that the resubmission was due, but the date that the late resubmission is received shall be noted in column ten.

#### 3. The institutional coordinator shall:

- a. Accept a late filing or take appropriate action outside of the ARP process for good cause if failure to do so could result in serious harm.
- b. Issue a final dismissal of a request for procedural reasons when the request is regarding any of the following issues:
  - (1) Case management recommendations and decisions;
  - (2) Maryland Parole Commission procedures and decisions;
  - (3) Adjustment hearing procedures and decisions; and
  - (4) Appeals of notices of decision to withhold mail.
- c. Issue a final dismissal of a request for procedural reasons when the inmate has failed to submit the request within the proper time frame unless the inmate establishes that extraordinary circumstances prevented the inmate from filing the request in a timely manner. The institutional coordinator may, as necessary, refer dismissed cases to appropriate institutional staff for evaluation and follow-up outside of the administrative remedy procedure.
- d. Issue a final dismissal of a request for procedural reasons when the inmate's complaint is one which has been previously resolved, is repetitive, or had been previously addressed through the administrative remedy procedure. The coordinator shall note the case number of the request that previously addressed the same issue.
- e. Issue a final dismissal of a request for procedural reasons when the request is in excess of that inmate's monthly limit as established by the Commissioner of Correction.

- 4. The Warden or institutional coordinator shall issue a final dismissal of a request for procedural reasons when it has been determined that the basis of the complaint is the same basis of an investigation under the authority of the Internal Investigative Unit (IIU).
  - a. The dismissal must refer to IIU's case number.
  - b. The response shall read: "Your request is dismissed for procedural reasons final. This issue is being investigated by IIU, case number:

    \_\_\_\_\_\_. Since this case shall be investigated by IIU, no further action shall be taken within the ARP process."
- 5. When a request is dismissed for procedural reasons by the coordinator, the coordinator shall:
  - a. Provide in the receipt portion, Part C (Appendix 3 to DCD 185-002), the rationale for the dismissal for procedural reasons; and
  - b. Sign and date part C (Appendix 3 to DCD 185-002).
- 6. The coordinator shall return any request which is dismissed for procedural reasons to the inmate on the date the request is indexed and reviewed and ensure that the completed dismissed request for administrative remedy is distributed as follows:
  - a. Original and one copy to the inmate; and
  - b. One copy to the administrative remedy file maintained by the coordinator.
- 7. A final dismissal for procedural reasons of a request by the warden or institutional coordinator shall be treated as a substantive decision and the rationale for dismissal may be appealed by the inmate.
- O. Accepting and Investigating a Request for Administrative Remedy
  - 1. The institutional coordinator shall accept requests which are not dismissed for procedural reasons for investigation and response.
  - 2. On the date the request is indexed, the coordinator shall:
    - a. Send the receipt portion, Part C (Appendix 3 to DCD 185-002), of the request for administrative remedy to the inmate;
    - b. Review each request to determine the nature of the complaint and the departmental liaison(s) to whom the investigation should be assigned; and
    - c. Assign the request to the departmental liaison(s) for investigation within 20 calendar days or less.

#### 3. For cross-over cases:

- a. The coordinator of the indexing institution shall send the original request to the coordinator of the institution where the basis for the complaint occurred and shall retain a copy for the file.
- b. The receiving institutional coordinator shall assign the case to the applicable department liaison(s).
- c. The institution where the incident occurred shall be responsible for investigating the request; and
- d. The Warden of that institution shall be responsible for responding to the request.
- e. The original Warden's response, case summary, and supporting documentation shall then be forwarded to the indexing institution so that that coordinator can update the index and ensure that the request is distributed to the inmate.
- f. Both institutions shall maintain an ARP file on the case.
- 4. Upon receipt, the departmental liaison(s) shall either investigate the request or assign the request to a staff person within that department for investigation.
- 5. One or more employees may participate in the investigation of a complaint, provided there is no conflict of interest.
  - a. If a case is assigned to an employee who believes that participation in the investigation would be a conflict of interest, that employee must notify the departmental liaison and substantiate that conflict.
  - b. If the departmental liaison determines that there is a conflict of interest, the departmental liaison shall then assign the investigation to a different employee.
- 6. The assigned investigator shall, at a minimum, complete each of the following steps and document that completion on the Administrative Remedy Procedure Case Summary, Appendix 1 to this directive. Instructions for completing the case summary are as follows:
  - a. Conduct Interviews: Absent good cause, all relevant persons must be interviewed to establish the basis of the inmate's complaint and the chronology of the events. Relevant persons are:
    - (1) The inmate;
    - (2) All relevant witnesses named by the inmate; and
    - (3) All relevant employees, including medical staff.
  - b. If the person interviewed is a staff member, that person shall provide a written report of the facts absent good cause (such as being out on extended leave).

- c. If the complaint is one which involves a situation affecting a group of inmates and interviews of the complainants would disrupt institutional security, operations, or schedules, no interviews shall be required. However, the reason for the lack of interviews must be documented in writing on the Administrative Remedy Procedure Case Summary, Appendix 1 to this Directive.
- d. At the Maryland Correctional Adjustment Center and at the North Branch Correctional Institution, interviews of complainants and relevant inmate witnesses may be conducted via the intercom system to accommodate security requirements. However, personal contact interviews must be conducted, absent good cause, if the intercom is inoperable at the time of the interviews.

#### 7. Establish the Specific Findings of Fact

- a. All reports submitted regarding the case shall be reviewed by the investigator.
- b. Based on the testimony of witnesses and the information contained in the reports submitted, the investigator shall establish and list any actions or events in the order of their occurrence and shall list any additional facts in the case.

#### 8. Review All Relevant Documents

- a. The investigator shall review all relevant directives, institutional directives, bulletins, etc., to establish that all actions were taken in accordance with current policy and procedure.
- b. Any supporting document must be included in the ARP file.

#### 9. Make a Recommendation

- a. The investigator shall make a recommendation for a finding of meritorious, meritorious in part, or dismissal and shall draft a suitable response for the coordinator's review.
- b. The assigned investigator shall submit to the departmental liaison all findings, recommendations, and supporting documentation for return to the institutional coordinator within the time frame specified.
- 10. The coordinator shall review the investigation for completion of all investigative steps, sufficiency of documentation, and application of all relevant directives, etc., and review the recommendation and draft a response.
- 11. Investigations which are found by the coordinator to be incomplete or insufficient or in which the recommendations are not supported by investigative material shall be returned to the investigator with specific instructions for reinvestigation and resubmission.

- 12. All investigative reports and reinvestigations must be submitted within the time frame.
- 13. Upon the withdrawal of a request by an inmate the coordinator shall:
  - a Notify the appropriate departmental liaison to halt the investigation of the request; and
  - b. Document the disposition of the case on the index.
- 14. If it is found that thirty calendar days is insufficient to complete the investigation and respond to the inmate's request, the Warden is permitted one extension of fifteen (15) calendar days.
  - a. The inmate's consent to the extension is not required.
  - b. The Warden or designee shall provide written notification, using the Extension Form (Appendix 4 to DCD 185-002), to the inmate regarding the 15 day extension within the original 30 day timeframe.
  - c. A copy of the extension form shall be maintained in the ARP file.
- 15. Upon receipt of the completed case summary from the departmental liaison, the coordinator shall prepare an appropriate response for the warden's review and signature in Part B (Appendix 3 to DCD 185-002) of the Request for Administrative Remedy. The prepared response shall be based upon:
  - a. The case summary;
  - b. Documents and reports attached; and
  - c. The investigator's recommended response.
- 16. The response should:
  - a. Address fully all issues and allegations raised in the complaint;
  - b. Be easily understood;
  - c. State clearly the facts upon which the decision is based; and
  - d. The first sentence of the warden's response should clearly state the disposition of the inmate's complaint as:
    - (1) Meritorious;
    - (2) Meritorious in part; or
    - (3) Dismissed, as defined in DCD 185-001.

- 17. The warden shall review the response to ensure that the complaint has been satisfactorily resolved and that the response is appropriate.
  - a. If the above criteria have been met, the warden shall sign the response in the space provided in Part B (Appendix 3 to DCD 185-002) of the Request for Administrative Remedy; or
  - b. If the above criteria have not been met to the warden's satisfaction, the warden shall return all information to the coordinator for either:
    - (1) A reinvestigation for additional information; or
    - (2) A revised response.
- 18. The institutional coordinator shall ensure that the completed Request for Administrative Remedy is distributed as follows:
  - a. Original and one copy to the inmate; and
  - b. One copy to the administrative remedy file maintained by the coordinator.
- 19. The inmate shall sign and date the Receipt of Warden's Response, Appendix 4 to this directive, upon delivery of the response.
  - a. One copy of the receipt is issued to the inmate; and
  - b. One copy of the receipt is forwarded to the institutional coordinator to be maintained in the institutional ARP file. This date shall be noted in column eight of the index.
- 20. The inmate may appeal the warden's decision in accordance with policy as stated in the 185 series.
- P. Meritorious or Meritorious in Part Cases
  - 1. When the disposition of an administrative remedy request is meritorious or meritorious in part and relief specified in the warden's response has not been fully provided to the inmate at the time of the response, the warden shall clearly instruct appropriate staff, in writing, to:
    - a. Provide the relief specified; and
    - b. Provide written documentation of the relief provided to the institutional coordinator.
  - 2. The warden may also initiate a change in institutional policy or procedure, if deemed appropriate, as a provision of relief or make a recommendation to the Commissioner or designee for a change in division policy or procedure and acknowledge this action in the response.
  - 3. The warden shall ensure that:
    - a. Staff provides full relief, as specified in the warden's response; and

- b. Staff provides documentation of that relief within ten calendar days of the date of the response.
- 4. The institutional coordinator shall monitor meritorious or meritorious in part cases for compliance by maintaining active cases in a separate location from the dismissed cases or the closed meritorious or meritorious in part cases by:
  - a. Filing such cases chronologically, by calendar due date which shall always be ten calendar days from the date of the warden's response;
  - b. Monitoring the file on no less than a weekly basis for staff compliance;
  - c. Notifying the warden when staff fails to provide the relief specified within the proper time frame; and
  - d. Placing the documentation of the relief provided in the administrative remedy file upon receipt.
- 5. When relief is provided, the case shall be considered closed and filed in accordance with this directive.
- 6. When the relief includes monetary reimbursement for property, the value of the property at the time of loss should be calculated utilizing Appendix 3 to DCD 220-008.
- 7. The inmate should then be presented with the reimbursement value of the property and be asked to sign Appendix 1 to DCD 220-008 which shall indicate whether or not the inmate accepts the settlement.
- 8. If the inmate accepts the settlement, the money should be placed in the inmate's institutional money account under the authority of the Warden and without the review process described in DCD 220-008.
- 9. For purposes of appeal, if the inmate accepts the settlement offered the amount is considered to be correct and all issues in that request are considered settled.
- 10. If the inmate refuses to accept the settlement, that fact shall be documented on Appendix 1 to DCD 220-008 and that form shall be placed in the ARP file. That case is considered closed and no money shall be placed in the inmate's account. The inmate may appeal to the Commissioner within the proper time frame.
- 11. If at the time of Warden's response, the inmate has already refused settlement, the Warden shall:
  - a. State that the request is meritorious in part;
  - b. List the property that the Warden agrees was lost or damaged due to staff negligence;

- c. State what amount was offered to the inmate; and
- d. State that no money shall be deposited into the inmate's account due to the inmate's refusal to accept settlement.

#### Q. Inmate Orientation

- 1. The Introduction to the Administrative Remedy Procedure, Appendix 5 to this DCD shall be read during the orientation of all newly arriving inmates at MRDCC, MCI-W, and all maintaining institutions.
- 2. All wardens shall ensure that the Introduction to the Administrative Remedy Procedure is incorporated into the institutional inmate handbooks.

#### R. Staff Awareness

- 1. The warden shall mandate that all new employees be given and sign for the Administrative Remedy Procedure Fact Sheet for New Employees, Appendix 6 to this directive, about the administrative remedy process.
- 2. The fact sheet shall be maintained in the employee's personnel file kept by the institution.

#### VII. Attachments:

- A. Appendix 1, Administrative Remedy Procedure Case Summary, DOC Form 185-003aR
- B. Appendix 2, Administrative Remedy Index, DOC Form 185-003bR
- C. Appendix 3, Request for Administrative Remedy Quarterly Report, DOC Form 185-003cR
- D. Appendix 4, Receipt of Warden's Response, DOC Form 185-003d
- E. Appendix 5, Introduction to the Administrative Remedy Procedure
- F. Appendix 6, Administrative Remedy Procedure Fact Sheet for New Employees
- G. Appendix 7, Policy Management Audit Form (DOC Form 1-2aR)
- H. Appendix 8, Policy Management Compliance Plan (DOC Form 1-2bR)

VIII. Rescissions: None.

Distribution: A

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# DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES DIVISION OF CORRECTION

PROGRAM:	ADMINISTRATIVE REMEDY PROCEDURES	
<b>DCD</b> #:	185-002	
TITLE:	Administrative Remedy Policy	
ISSUED:	August 4, 2008	
<b>EFFECTIVE:</b>	August 27, 2008	
<b>AUTHORITY:</b>	Paul B. O. Plate	Paul O'Flaherty Assistant Commissioner
APPROVED:	I Michael Stouffer	J. Michael Stouffer Commissioner

# I. References:

- A. Suits by Prisoners, 42 U.S.C.§ 1997e(a)
- B. Correctional Services Article, §§ 10-201 through 10-210, Annotated Code of Maryland
- C. Courts and Judicial Proceedings Article, §§ 5-1001 through 5-1007, Annotated Code of Maryland
- D. COMAR 12.02.27 and COMAR 12.07.01.
- E. DCD 175-2 and 250-1
- II. Applicable to: All Division of Correction inmates housed in Division of Correction institutions and facilities
- III. Purpose: To establish policy for the operation and management of the Administrative Remedy Procedure (ARP).
- IV. Definition: Administrative Remedy Procedure means the procedure established by the Commissioner of Correction for inmate complaint resolution.

# V. Policy:

- A. The Division of Correction encourages staff and inmates to make a good faith effort to resolve all institutionally related inmate complaints at the lowest possible level. Inmates are encouraged, but not required, to seek resolution of complaints through the informal resolution process. Inmates may seek formal resolution through the Administrative Remedy Procedure.
- B. Formal resolution under the Administrative Remedy Procedure consists of two levels:
  - 1. Filing a request for administrative remedy with the Warden, and
  - 2. Appealing to the Commissioner, if not satisfied with the response.

- C. An inmate not satisfied with the outcome of the Administrative Remedy Procedure Process may seek further administrative review in accordance with regulations of the Inmate Grievance Office (IGO).
- D. The purposes of the Administrative Remedy Procedure are to solve inmate problems and to be responsive to inmate concerns. When the Division of Correction finds that a request for administrative remedy or an appeal is meritorious in whole or in part, the Administrative Remedy Procedure, to the extent possible, should provide the inmate with meaningful relief.
- E. It is the policy of the Division of Correction that requests for administrative remedy and appeals under the Administrative Remedy Procedure should be answered on the merits and substantive relief provided to the inmate where warranted. Nevertheless, inmates must adhere to the time periods and other requirements set forth in this Directive and should not expect that any late submission will be considered.

#### VI. Procedures:

- A. Inmates may seek relief through the Administrative Remedy Procedure for issues that include, but are not limited to:
  - 1. Division of Correction and institutional policies and procedures;
  - 2. Medical services;
  - 3. Access to courts;
  - 4. Religious liberties;
  - 5. Lost, damaged, stolen, destroyed, or improperly confiscated property;
  - 6. Use of force;
  - 7. Sentence computation and diminution of confinement;
  - 8. Institutional conditions affecting health, safety, and welfare; and
  - 9. Administration and operation of this procedure.
- B. Inmates may not seek relief through the Administrative Remedy Procedure on the following issues:
  - 1. Case management recommendations and decisions;
  - 2. Maryland Parole Commission procedures and decisions;

- 3. Disciplinary hearing procedures and decisions; and
- 4. Decisions to withhold mail.
- C. Inmates may seek relief concerning case management recommendations and decisions both through informal resolution and under IGO regulations. Disciplinary hearing decisions may be appealed under a wholly separate procedure in accordance with COMAR 12.02.27, applicable DPSCS directives, and under IGO regulations. Under no circumstances should inmates use the Administrative Remedy Procedure to raise any issue concerning disciplinary hearing procedures and decisions. Decisions to withhold mail may be appealed pursuant to DCD 250-1.
- D. Every inmate in the Division of Correction, regardless of physical condition, security level, administrative status, language barrier or housing assignment is entitled to submit a request for administrative remedy on those issues that qualify, and to appeal to the Commissioner if not satisfied with the response. If asked, wardens and staff shall ensure that assistance in filing requests for administrative remedy and appeals under the Administrative Remedy Procedure is available to inmates who are disabled or who are not functionally literate in English. Wardens shall ensure that the proper forms for using the Administrative Remedy Procedure are readily available in all housing units.
- E. Inmates are responsible for using the Administrative Remedy Procedure in good faith and in an honest and straightforward manner. When filing a request for administrative remedy or an appeal, inmates should briefly and clearly state the facts giving rise to the complaint and the relief requested.
- F. The Division of Correction will not allow any retaliation to be taken against inmates who use the Administrative Remedy Procedure in good faith. Inmates may use the Administrative Remedy Procedure to pursue complaints of any retaliation against them. When a claim of retaliation is confirmed, the Warden shall take appropriate action in accordance with Department of Public Safety and Correctional Services standards of conduct.
- G. Inmates may not file request for administrative remedy or appeals on behalf of other inmates, staff, or other third persons (such as visitors). Inmates are also restricted from filing class action complaints under this Directive.
- H. All requests for administrative remedy and appeals to the Commissioner shall be submitted in the name under which the inmate is committed to the custody of the Commissioner of Correction and shall include the inmate's identification number. An inmate may also include a religious name or name authorized by court order.

- I. The transfer of an inmate does not terminate the administrative remedy process, although transfer of an inmate may be relevant to any relief. An inmate who is transferred after an incident but prior to filing a request for administrative remedy shall submit the request to the Warden of the inmate's current institution, within the appropriate time period.
- J. Except as provided in Section VI.K of this Directive, inmates may submit any number of requests for administrative remedy on issues that qualify under the Administrative Remedy Procedure.
- K. The Commissioner of Correction may limit the number of requests an inmate may file if the inmate has misused the Administrative Remedy Procedure by filing requests that are frivolous, unnecessarily duplicative, or which contain threatening, obscene or abusive language or material.
  - 1. The Warden shall make a written recommendation to the Commissioner regarding the number of requests to which the inmate should be limited and the duration of the limitation using the Administrative Remedy Procedure Limitation Request, Appendix 1 to this Directive. The recommendation must provide a compelling reason for the limitation. The Warden's responsibilities under this section may be delegated only to an Assistant Warden.
  - 2. The Commissioner shall review the recommendation to limit an inmate's use of the Administrative Remedy Procedure and respond in writing by approval or disapproval of the recommendation. The Commissioner's responsibilities under this section may only be delegated to an Assistant Commissioner.
  - 3. An inmate may appeal a decision by the Commissioner to limit the number of administrative remedy requests to the IGO. Any appeal must be received by the IGO within 30 days of the date the inmate receives the Commissioner's decision.
  - 4. The Warden may dismiss any requests for administrative remedy that exceed the limit approved by the Commissioner. Regardless of any dismissal, staff shall investigate and take appropriate action on any issue in a request if failure to do so could result in serious harm.
- L. Time Periods and Filing Procedures at the Institutional Level:
  - 1. An inmate may, at any time, attempt informal resolution of a complaint, using both correspondence and discussion with staff, as well as the Informal Inmate Complaint Form, Appendix 2 to this Directive.

- 2. Inmates are encouraged to use informal resolution, but attempting informal resolution does not suspend or stay the deadline for filing a formal request for administrative remedy or any other time period.
- 3. An inmate must date, sign, and submit Request for Administrative Remedy, Appendix 3 to this Directive, within the later of:
  - a. Thirty (30) calendar days of the date on which the incident occurred; or
  - b. Thirty (30) calendar days of the date the inmate first gained knowledge of the incident or injury giving rise to the complaint.
- 4. Wardens should recognize that certain complaints may be ongoing in nature and therefore not always subject to a strict application of this time period. For example, the heating system in an inmate's housing unit has been malfunctioning for over 60 days. However, the weather has been unseasonably warm and the inmate has not complained because he or she has not been cold. The weather suddenly changes and now the inmate is cold and consequently complains about the malfunctioning heating system.
- 5. Requests for administrative remedy concerning sentence computation and diminution of confinement are not subject to the 30-day time period. Although this type of request may be filed at any time, inmates are encouraged to submit a request concerning sentence computation and diminution of confinement as soon as the inmate becomes aware of the problem. Appeals to the Commissioner of Correction concerning sentence computation and diminution of confinement must be filed within the time period set forth in Section VI.M.1 of this Directive.
- 6. When extraordinary circumstances prevent an inmate from submitting a request for administrative remedy within the 30-day time period, the Warden may accept a late filing.
- 7. The inmate shall describe a single complaint or a reasonable number of closely related issues on the request form. "Closely related issues" are those that arise out of a single occurrence or condition. For example, an inmate seeking both medical attention and monetary damages due to a claim of excessive force is clearly raising two closely related issues.
- 8. The inmate shall clearly and briefly state the facts giving rise to the complaint so that the basis for investigation can be determined. The necessary facts include:

- a. The date and location of the occurrence;
- b. The names(s) of staff involved;
- c. The name(s) of any witnesses;
- d. A brief statement of the facts; and,
- e. A brief statement of the relief requested.
- 9. If the inmate includes more than one issue in a single request for administrative remedy and the issues are not closely related or does not provide sufficient information to determine the basis for investigation, the Warden may dismiss the request for procedural reasons.
  - a. If the Warden dismisses a request because the complaint contains multiple unrelated issues or does not provide sufficient information to determine the basis for investigation, the inmate may resubmit a request containing a single issue, or a reasonable number of closely related issues, or may resubmit with additional information needed to determine the basis for investigation.
  - b. The inmate must resubmit the request within the original time period or within 15 days of the date of dismissal, whichever is later.
  - c. Regardless of any dismissal, staff shall investigate and take appropriate action on any issue in a request for administrative remedy if failure to do so could result in serious harm.
- 10. The inmate shall submit the request for administrative remedy to an officer in the control center of the inmate's housing unit, a tier officer, or a custody supervisor. The officer who receives a request for administrative remedy must sign and date the form and provide the inmate with the carbonless copy of the request. The officer who receives a request for administrative remedy must deliver the request to the location designated by the Warden by the end of that officer's shift.
- 11. Within five business days of the date the inmate submits a request for administrative remedy, the Warden shall provide the inmate with a receipt and case number. Inmates are responsible for keeping the carbonless copy of the request for administrative remedy and any receipts. These documents are needed in the event of further proceedings.

- 12. The Warden shall investigate and respond to all requests for administrative remedy within 30 calendar days of the date of submission of the request for administrative remedy.
  - a. The Warden is permitted one extension of 15 calendar days to respond to a request for administrative remedy. The inmate's consent to the extension is not required.
  - b. If the Warden extends the time to respond, the Warden must provide written notice of the extension using the Extension Form, Appendix 4 to this Directive. The completed form must be sent to the inmate within the original 30 days.
- 13. An inmate may withdraw a request for administrative remedy at any time. An inmate who withdraws a request for administrative remedy shall submit the withdrawal using the Withdrawal Form, Appendix 5 to this Directive. Withdrawal of the request may prevent consideration of the claim at a higher level.
- 14. By separate Directive, the Commissioner shall establish standards for the investigation of requests for administrative remedy and preparing responses, as well as the duties of wardens and institutional administrative remedy coordinators.
- 15. Regardless of any dismissal for procedural reasons, staff shall investigate and take appropriate action on any issue in a request for administrative remedy if failure to do so could result in serious harm.
- 16. The Warden shall promptly provide to the inmate any relief ordered in response to a request for administrative remedy or appeal.
- 17. If the Warden fails to respond to a request for administrative remedy within 30 calendar days of the date the request is submitted or within 45 calendar days of the date the request is submitted, if an extension is required by the Warden under Section VI.L.12.a of this Directive, the request for administrative remedy is considered denied and the inmate may appeal to the Commissioner of Correction.
- M. Time Periods and Filing Procedures for Appeals:
  - 1. All appeals to the Commissioner of Correction must be dated, signed and submitted, using the Headquarters Appeal of Administrative Remedy Response, Appendix 6 to this Directive, so that the appeal is received by the Commissioner's Office within 30 calendar days of the date the inmate receives the Warden's response, or within 30 calendar days of the date the response from the Warden was due.

- Appeals concerning sentence computation and diminution of confinement are included within this time period.
- 2. Unless indigent as defined by DCD 175-2, inmates are encouraged to affix proper postage and use the United States Postal Service when submitting an appeal. Inmates may also use institutional courier mail systems to submit appeals. If an institutional courier system is used, the Division of Correction has no responsibility for delivery dates exceeding the applicable time period.
- 3. When extraordinary circumstances prevent an inmate from submitting an appeal so that it is received by the Commissioner's Office within the 30-day time period, the Commissioner may accept a late filing.
- 4. An inmate may appeal to the Commissioner even if the Warden finds the complaint meritorious in whole or in part, for example, if the inmate is dissatisfied with the relief ordered by the Warden.
- 5. When any appeal is received by the Commissioner, the headquarters administrative remedy coordinator shall, within five business days of the date the appeal was received, send the inmate Part C of the appeal notifying the inmate of the date the appeal was received.
- 6. The Commissioner shall investigate and respond to all appeals within 30 calendar days of the date the appeal is received, unless an extension is required under Section VI.M.9.b of this Directive.
- 7. The Commissioner's investigation of an appeal is not limited by any investigation conducted by the Warden. When responding to an appeal, the Commissioner is not limited to affirming or reversing the Warden's decision. The Commissioner may take any action in response to an appeal that is consistent with the major purposes of the Administrative Remedy Procedure.
- 8. A failure by the Warden to respond to a request for administrative remedy in a timely manner does not prevent the Commissioner from responding to an appeal on any basis that was available to the Warden.
- 9. If the inmate appeals to the Commissioner after the Warden has failed to respond in a timely manner, the Commissioner may direct the Warden to investigate the complaint and prepare a recommended response to the appeal for the Commissioner to review.

- a. The Warden shall investigate and prepare a recommended response to the appeal on behalf of the Commissioner and provide the Commissioner with the recommended response within 15 calendar days of the date of the Commissioner's order, or earlier if required by the Commissioner.
- b. If the Warden is directed to investigate and prepare a recommended response on behalf of the Commissioner, the Commissioner is permitted one extension of 15 calendar days to respond to the appeal. The inmate's consent to the extension is not required.
- c. If the Commissioner extends the time to respond to an appeal, the Commissioner must provide written notice to the inmate using the Extension Form, Appendix 4 to this directive within the original 30 days.
- d. The Commissioner may accept or reject the Warden's recommended response, substitute the Commissioner's response, or take any action consistent with the purposes of the Administrative Remedy Procedure, except remanding to the Warden for further proceedings at the institutional level.
- 10. If the inmate appeals to the Commissioner after the Warden has failed to respond in a timely manner, and the inmate subsequently receives a response from the Warden concerning the same request for administrative remedy, the Warden shall also provide the Commissioner with a copy of the untimely response.
  - a. The inmate may withdraw the appeal using the Withdrawal Form, Appendix 5 to this Directive if the inmate is satisfied with the Warden's response, even though the response was not timely.
  - b. If the inmate is not satisfied with the Warden's response, the inmate may continue with the appeal.
  - c. If the inmate continues with the appeal, no further action is required by the inmate. The inmate may but is not required to supplement the appeal based on the Warden's response.
- 11. Any request for administrative remedy submitted directly to the Commissioner without first being submitted to the Warden shall be referred by the Commissioner to the Warden.

- a. The Commissioner shall refer a request for administrative remedy submitted directly to the Commissioner within 30 calendar days of the date the request is received by the Commissioner. The referral shall include the date the request was received.
- b. The Commissioner shall provide written notice of the referral to the inmate within 30 calendar days of the date the request was received by the Commissioner. The inmate's consent to the referral is not required.
- c. In the event of such a referral, the Warden shall provide the inmate with a receipt using Part C of the request within five business days of receiving the referral and shall respond to the inmate within 30 calendar days of the date the Warden receives the referral.
- d. If an extension of 15 calendar days to respond to a referral is required, the Warden shall provide the inmate with written notice within 30 calendar days of the date the Warden received the referral using the Extension Form, Appendix 4 to this Directive. The inmate's consent to the extension is not required.
- e. In all respects, the referral shall be treated as if it were an original request for administrative remedy, except that no referral by the Commissioner shall be dismissed by the Warden for lack of timeliness if the original request was received by the Commissioner within 30 calendar days of the date of the incident or within 30 calendar days of the date the inmate gained knowledge of the incident or injury giving rise to the complaint, whichever is later.
- f. Regardless of any referral, headquarters staff shall investigate and take appropriate action on any issue in a request for administrative remedy submitted directly to the Commissioner if failure to do so could result in serious harm.
- 12. By separate Directive, the Commissioner shall establish standards for the investigation of appeals and preparing responses to appeals, and the duties of the headquarters administrative remedy coordinator.
- 13. Regardless of any dismissal of an appeal for procedural or other reasons, headquarters staff shall investigate and take appropriate action on any issue in an appeal if failure to do so could result in serious harm.

- 14. If the Commissioner fails to respond to an appeal within 30 calendar days of the date the Commissioner receives the appeal, or 45 calendar days of the date received if an extension is required under Section VI.M.9.b of this Directive, the appeal is considered denied, and the inmate may seek further administrative review under regulations of the IGO.
- N. Regulations of the Inmate Grievance Office (IGO) include the following:
  - 1. COMAR 12.07.01.06B provides: "An appeal from the administrative remedy procedure to the Inmate Grievance Office shall be filed within 30 days from the grievant's receipt of a response from the Commissioner [of Correction], or within 30 days of the date the Commissioner's response was due."
  - 2. COMAR 12.07.01.06E provides: "The Inmate Grievance Office may dismiss any disciplinary proceeding appeal and any grievance within the scope of the administrative remedy procedure that has not been exhausted through all institutional remedies in a timely manner."
  - 3. COMAR 12.07.01.06F provides: "A time limitation or procedural bar may be waived [by the Inmate Grievance Office] for a grievance which represents a continuing problem or for which good cause is shown for a failure to proceed in a timely manner."
  - 4. COMAR 12.07.01.07A provides: "The Executive Director shall conduct a preliminary review of a grievance to determine whether it should be dismissed or proceed to a hearing."
  - 5. COMAR 12.07.01.07B(4) provides: "A grievance shall be dismissed on preliminary review as wholly lacking in merit if . . . [t]he grievant has failed to exhaust remedies available under the administrative remedy procedure or the disciplinary proceeding in a timely manner, and has not shown good cause for the failure to do so."
- O. In the Courts of the State of Maryland, judicial review of final decisions in matters before the IGO is available pursuant to Correctional Services Article, § 10-210.
  - 1. The inmate may seek judicial review of a final decision in matters before the IGO in the Circuit Court of the County in which the inmate is confined. Correctional Services Article, § 10-210(b)(2).
  - 2. Courts and Judicial Proceedings Article, § 5-1003(a)(1) provides: "A prisoner may not maintain a civil action until the prisoner has fully exhausted all administrative remedies for resolving the complaint or grievance."

- P. Federal law, 42 U.S.C. § 1997e(a) provides: "No action shall be brought with respect to prison conditions under [42 U.S.C. § 1983], or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."
- Q. This series of Directives establishes policy and procedure for the operation of the Administrative Remedy Procedure throughout the Division of Correction.
- R. The institutional administrative remedy coordinator or designee shall complete the Policy Management Audit Form, Appendix 7 to this Directive in June and December of each calendar year. When deficiencies are noted, a compliance plan shall be completed to address each deficiency. A copy of the completed form(s) shall be forwarded to the:
  - 1. Institutional audit coordinator; and
  - 2. Director, Office of Policy Development, Analysis and Management

The institutional administrative remedy coordinator or designee shall maintain a copy of the form for review during the Headquarters Administrative Remedy Audit.

S. No institutional directives are required or permitted.

#### VII. Attachments:

- A. Appendix 1, Administrative Remedy Procedure Limitation Request (DOC Form 185-002aR)
- B. Appendix 2, Informal Inmate Complaint Form (DOC Form 185-002bR)
- C. Appendix 3, Request for Administrative Remedy (DOC Form 185-002c)
- D. Appendix 4, Extension Form (DOC Form 185-002dR)
- E. Appendix 5, Withdrawal Form (DOC Form 185-002eR)
- F. Appendix 6, Headquarters Appeal of Administrative Remedy Response (DOC Form 185-002fR)
- G. Appendix 7, Policy Management Audit Form (DOC Form 1-2aR) and Policy Management Compliance Plan (DOC Form 1-2bR)

#### VIII. Rescissions:

- 185-001: Table of Contents, dated April 1, 1993
- 185-002: Administrative Remedy Procedure Policy, dated February 15, 2005
- 185-100: Administrative Remedy Procedure Description, dated April 1, 1993
- 185-101: Time Frames, dated April 1, 1993
- 185-200: Institution Program Orientation and Management, dated April 1, 1993
- 185-201: Inmate Orientation, dated April 1, 1993

185-202:	Staff Awareness, dated April 1, 1993
185-203:	Informal Resolution Procedure, dated April 1, 1993
185-204:	Preliminary Review of a Request for Administrative Remedy, dated
	April 1, 1993
185-205:	Administrative Dismissal of a Request, dated April 1, 1993
185-206:	Acceptance and Investigation of a Request for Administrative Remedy, dated April 1, 1993
185-207:	Warden's Response to a Request for Administrative Remedy, dated April 1, 1993
185-208:	Providing Relief to a Request for Administrative Remedy, dated April 1, 1993
185-300:	Headquarters Program Organization and Management, dated April 1, 1993
185-301:	Administrative Dismissal of an Appeal, dated April 1, 1993
185-302:	Acceptance and Investigation of a Headquarters Appeal of Administrative
	Remedy Response, dated April 1, 1993
185-303:	Commissioner's Response to a Headquarters Appeal of Administrative
	Remedy Response, dated April 1, 1993
185-304:	Providing Relief to the Inmate, dated April 1, 1993
185-305:	Adverse Effect Request, dated April 1, 1993
185-400:	Program Description of Procedures for Inmates, dated April 1, 1993
185-401:	Submitting a Complaint for Informal Resolution, dated April 1, 1993
185-402:	Submitting a Request for Administrative Remedy, dated April 1, 1993
185-403:	Submitting a Headquarters Appeal of Administrative Remedy Response, dated
	April 1, 1993
	Professional Training and Development, dated April 1, 1993
185-600:	Documentation and Reporting, dated April 1, 1993

Distribution: A

L

185-700: Audits, dated April 1, 1993

S



### Attachment P-3

## **Department of Public Safety and Correctional Services**

## DIVISION OF PRETRIAL DETENTION AND SERVICES OFFICE OF THE COMMISSIONER

400 E. MADISON STREET . BALTIMORE, MARYLAND 21202 (410) 209-4290 • FAX (410) 209-4250 • TOLL FREE (866) 274-0105 • V/TTY (800) 735-2258 • www.dpscs.state.md.us

STATE OF MARYLAND

MARTIN O'MALLEY GOVERNOR

ANTHONY G. BROWN LT. GOVERNOR

GARY D. MAYNARD SECRETARY

G. LAWRENCE FRANKLIN DEPUTY SECRETARY

THOMASINA HEIRS ASSISTANT SECRETARY/ CHIEF OF STAFF

DIVISION OF PRETRIAL DETENTION AND SERVICES

HOWARD RAY, Jr. COMMISSIONER

BENJAMIN F. BROWN, CCE DEPUTY COMMISSIONER

RENARD E.. BROOKS ASSISTANT COMMISSIONER

#### **CHANGE NOTICE**

PDSD #180-4

Distribution "B" PDSD #259-94

Date: June 20, 2008

Title: Adult Help Request Process

Effective Date: October 8, 2008

- 1. Please replace Attachment A, page 3 of 3, with the enclosed revision.
- 2. Update all PDSD copies and Table of Contents accordingly.

Howard Ray, Jr.

3. Inform all appropriate staff of this change.

Commissioner

# STATE OF MARYLAND DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES DIVISION OF PRETRIAL DETENTION AND SERVICES



Pretrial Detention and Services Directive Number: 180-4

Program: Grievances

Title: Adult Help Request Process

Effective Date: June 20, 2008

Approved by:

Howard Ray, Jr., Commissioner

#### .01 Purpose.

To establish an informal complaint system specifically for the resolution of those complaints filed by residents.

#### .02 Scope.

The Division of Pretrial Detention and Services

#### .03 Policy.

It is the policy of DPDS that residents remanded to the custody of the Division shall have access to an informal complaint process for the resolution of issues not appropriate for the formal grievance process. Separate Help Request Processes shall be established for the adult and for the juvenile populations.

#### .04 Authority/Reference.

- (A) MCCS .05J
- (B) ACA 4-ALDF-6B-01
- (C) PDSD 180-1, Grievance Process.
- (D) PDSD 180-3, Juvenile Help Request Process

#### .05 Definitions

<u>Help Request</u> - Complaint which can be adequately resolved outside of the formal grievance process. These complaints are general in nature and concern product quality, service delivery, etc

<u>Grievance</u> - Complaint alleging unfair treatment, mistreatment, abuse, neglect, inappropriate use of force, staff misconduct, etc.

#### .06 Responsibility/Procedure.

A. <u>Orientation for Help Request Process:</u> All resident orientation shall include instruction for the Help Request Process. Specific examples shall be provided to demonstrate issues appropriate for the Help Request Process and issues appropriate for the formal, multi-level Resident Grievance Process. In addition, a summary of the Help Request Process shall be included in the *Resident Handbook*.

#### B. <u>Help Request Process</u>

- 1. Adult residents may request assistance in matters related to the quality of products, delivery of services, etc. by completing a *Help Request Form* (Attachment A) and submitting it to the Section Officer:
- 2. The Section Officer shall be responsible to ensure that:
  - a. Attempt to resolve all help request issue within their scope of control prior to an offender's completion of a help request form.
  - b. Help Request Forms are always made available to residents;
  - a. Upon request, assistance is provided in completing the form; and
  - c. All completed forms are forwarded to the Building/Tower Supervisor before the end of the shift.
- 3. The Building/Tower Supervisor shall be responsible to:
  - a. Review all *Help Request Forms* and resolve or refer problems for appropriate corrective action within 2 workdays of receipt; and
  - b. Complete the Building/Tower Supervisor's Response on each form and distribute it within 5 workdays of receipt as follows: original to Resident Grievance Office and copy to resident.
  - c. Review all Help Request forms and make a determination of their merit.
- 4. The Resident Grievance Officer shall be responsible to accept and process all Help Request Forms referred by the Building/Tower Supervisors or designee that has been thoroughly investigated and all other options have been exhausted as the equivalent of a completed Step 1 Grievance Form. If a resident has inadvertently used the incorrect form, the Grievance Officer shall ensure that delays or other penalties are not incurred by the resident.

#### C. Documentation

- A Help Request log book shall be maintained in the Building/Tower Supervisor's
  office to record each form received and a notation of action taken.
- 2. The Resident Grievance Officer shall be responsible to ensure that all adult Help Request Forms for the Division are logged and maintained in a separate file system for auditing purposes. Help Request Forms referred to the formal grievance process shall be entered as such in the Help Request log, but tracked and maintained in compliance with PDSD#180-1.

.07 Attachments.

A - Help Request Form

.08 History.

NA

.09 Distribution.

В

## Division of Pretrial Detention and Services Help Request Form

Name		ID#	
Housing Location _			
Area of complaint ( Commissary Food Service Health Care Telephone	Check one)  Mail & Packages Religious Services Property Recreation	Visits Money Other, expla	Maintenance Other residents
State your case. Pro	ovide important details like o	date, time, place, &	names.
What remedy do you	u want?		
			(STOP HERE)
TO BE COMPLET	ED by the BUILDING/TOW	ER SUPERVISOR	& Returned within 5 days
Check Box I took the follo	wing action and have verified	that your complaint is	s now resolved;
· · · · · · · · · · · · · · · · · · ·			
A copy of your your STEP 1 C	ned that your complaint is a m request has been sent to the brievance Form. The Grieval days of their receipt.	Grievance Officer and	d <u>it shall serve as</u>
Signature:Buildi	ng/Tower Supervisor	Date:	

### Attachment P-4

# STATE OF MARYLAND DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES DIVISION OF PRETRIAL DETENTION AND SERVICES



Pretrial Detention and Services Directive Number: 180-1

Program: Grievances

Title: Adult Resident Grievance Procedures

Effective Date: June 20, 2008

Approved by:

Howard Ray, Jr., Commissioner

#### .01 Purpose.

To establish a procedure that provides for an adult resident grievance process within the DPDS.

#### .02 Scope.

The Division of Pretrial Detention and Services (DPDS)

#### .03 Policy.

The grievance process is available to DPDS adult residents to provide a standard method by which they may seek formal administrative decisions or answers to issues or complaints.

Only individual residents shall submit grievances or complaints. No petitions or group (more than one signatory) grievances shall be accepted.

#### .04 Authority/Reference.

MCCS .05J

#### .05 Definitions.

<u>Departmental Liaison</u>: A staff person from each department, appointed by the Managing Official, designee or individual Department Head of the institution to receive, investigate and respond to the Resident Grievance Office regarding formal resident complaints.

Resident Grievance Procedure Committee: a 3- person panel convened when a resident appeals a first step grievance decision. The panel consists of an assistant warden/programming, the Director of Compliance, and a staff person from the Resident Grievance Office.

Resident Grievance Coordinator: DPDS staff persons responsible for the collection and response to resident grievances and/or complaints. This includes recording the status and disposition of each case.

<u>Departmental Liaison</u>: A staff person from each department, appointed by the managing officer, designee or individual department head of the institution to receive, investigate and respond to Resident Grievance Office staff regarding resident complaints.

Working Days: Consecutive days excluding Saturdays, Sundays, and holidays.

Help Request: A complaint which can be adequately resolved outside of the formal grievance process. These complaints are general in nature and may concern product quality, service delivery, etc.

#### .06 Responsibility/Procedure.

#### A. Grievable Issues

- A grievance may be used to address issues regarding conditions of confinement, actions of staff, services received, other residents and/or incidents occurring within or under the authority and control of the Division of Pretrial Detention and Services that have personally affected the resident making the complaint and for which a remedy may be allowed by the Division.
- 2. The grievance process may be used no matter what the resident's custody assessment or disciplinary status.

#### B. Non-grievable Issues

- Misconduct (Notice of Infraction) reports received through the Department's disciplinary procedure may not be appealed through the grievance process. Misconduct reports may only be appealed through the appeal procedure as the referenced in DPSCS 105-5, C, 1, Disciplinary Procedures.
- 2. Grievances may not be submitted about matters that are in the course of litigation.
- 3. Grievances may not be submitted regarding such matters as: terms of court commitment orders; State statues; and court ordered programs.

#### C. Submission of Grievances

- 1. All staff shall attempt to resolve institutionally related grievances.
- 2. If informal resolution (Help Request) is not achieved, the resident may initiate a grievance by completing a Resident Complaint Form, Step I (Appendix A) within 15 calendar days from the date on which the incident occurred or on which the resident first learned of the incident, whichever is later. The form shall be completed in full, indicating the nature of the grievance, the details of the incident, the steps taken to attempt an informal resolution, and the remedy sought.
- 3. The grievance shall be investigated and responded to within 20 working days of receipt of the grievance. Instructions for complaint form completion shall be printed on the reverse side of the *Resident Complaint Form, Step 1*. The following information shall be included in the complaint:

- a. The resident's name, date of submission and housing identifier. The complaint must be submitted in the name under which the resident is committed to the custody of the Commissioner of the DPDS, although a religious name or a name authorized under court order may be included as an alias:
- b. The date on which the incident occurred or the date on which the resident became aware of the situation, the name(s) of the staff and/or residents involved in the complaint, a brief, concise description of the incident, and a description of any efforts made to resolve the complaint informally; and the remedy the resident seeks.
- 4. The completed complaint form shall be submitted to Resident Grievance Office (RGO) staff through the section Resident Council representative, the section officer, or by depositing the completed forms in an institutional mailbox.
- 5. All allegations of assault by staff on residents shall be immediately referred to the Bureau of Special Operations via the Shift Commander.

#### D. Receipt of Complaints

- 1. The RGO staff shall date-stamp each grievance form and log it in within two working days of receipt and review the form to determine if the resident has a grievable and/or non-grievable issue to resolve. A separate log shall be maintained to document complaints (help requests) versus actual grievances. Log information shall include:
  - a. Name:
  - b. Number:
  - c. Housing location:
  - d. Problem:
  - e. Problem synopsis;
  - f. Name of liaison person grievance is referred to (if applicable):
  - g. Date of the referral;
  - Date information is returned to the grievance officer;
  - i. Date the response is sent to the resident:
  - j. Status of the grievance: meritorious, without merit, outside iurisdiction, ongoing, and other; and
  - k. Release date of the resident if he or she is released prior to resolution of the grievance.
- 2. If the complaint form is filled out in its entirety, staff shall forward an acknowledgment letter to each resident within two days of receipt.
- 3. If the complaint form is incomplete, the form shall be returned to the resident with no action taken. Staff shall enclose a letter with the grievance form detailing the reason for the return, and provide the resident with specific instructions to properly complete the grievance. The grievance will be logged in, all possible information will be recorded, and the grievance will be labeled as a resubmit in order to maintain date of incident integrity. Unless the grievance is resubmitted within 5 working days, it will be considered administratively dismissed.

#### E. Investigation of Grievances Involving Medical Services

- The RGO shall not review it for merit but shall: copy the grievance form; log in into the tracking system; and forward a copy of the grievance form to the Agency Contract Operations Monitor (ACOM) within 2 working days.
- 2. Upon receipt of the grievance form, the ACOM shall: copy, log, and forward the grievance form to the appropriate health care provider(s) before the end of the following work day. The ACOM shall provide a carbon copy of the referral to the RGO and shall monitor for a timely response from the health care provider(s).
- 3. Upon receipt of a medical grievance form, the health care provider shall: investigate the grievance; document findings; and forward a detailed written response to the RGO and AÇOM within five working days.
- 4. The RGO staff upon receipt of a response from a health care provider shall: copy; log the provider response(s) into the tracking system; and ensure that a copy of all related provider responses is forwarded to the resident within 2 working days.
- Compliance to resolve medical grievances requires that a medical provider response is sent to the resident within10 days of the initial grievance file date.

#### F. Non-Medical Grievances

- The RGO staff shall review all grievances other than medical grievances and determine if the grievance can be investigated by the grievance staff via the following methods: directives, post orders, computer records, (both BCJL and MOBS), copies of serious incident reports, logbook reviews, employee or resident interviews, etc. In cases where such investigation would not yield the necessary results, the department liaison will be contacted. The liaison shall be given a copy of the grievance and shall investigate the grievance.
- Upon completion of the investigation, the departmental liaison shall provide the RGO staff with the results of the findings within 10 days of the receipt of the grievance. The RGO staff shall review the investigation for sufficiency and draft a response to the resident within 5 days of receipt of the response from the liaison.
- If the resident is released prior to the completion of the investigation process, the grievance will be administratively dismissed except if the grievance deals with monetary reimbursement such as commissary or payroll. In these cases investigation shall be ongoing pending resolution.

#### G. Appealing the Grievance Decision-Step II

 A resident wishing to appeal the Step I decision to his or her complaint shall complete a *Motion for Grievance Committee Step II* form (Appendix B) and submit the form to RGO staff as indicated in section A.4 of this directive.

- Resident Grievance Procedure Committee (RGPC) meetings are scheduled as needed. Prior to convening an RGPC meeting, the RGO director shall meet with the resident to inform him or her of the procedure that shall be followed during the RGPC meeting.
- The RGO staff shall schedule the complaint to be reviewed by the RGPC at a hearing. The hearings will be conducted in an informal manner, beginning with the presentation of the grievance by the grievant, followed by testimony of other parties and/or witnesses.
- 4. The RGPC shall allow committee members to question any of the parties or witnesses concerning their testimony and also allow the grievant or his/her representative to question the parties or witnesses.
- 5. Following the completion of the testimony, the RGPC shall ask the grievant and his/her representative (if applicable) to leave the hearing room so that the RGPC can deliberate on the grievance and discuss solutions.
- After discussion, the RGPC shall vote on the matter and possible solutions.
   The decision is determined by a majority vote by the committee members.
   The resident shall be brought back into the hearing room and informed of the decision.
- 7. If the decision of the RGPC is that the grievance is without merit, RGO staff shall send a written explanation of the committee's decision to the resident within 5 working days of the hearing date.
- 8. If the RGPC finds that the case is meritorious, RGO staff shall put the committee's decision and recommendation for specific relief in writing and send it to the warden within 5 working days of the hearing date. The committee's recommendation is subject to the warden's review. The warden shall review the recommendation and respond to RGO staff within 5 days of its receipt with his or her decision to affirm, reverse, or modify the committee's decision.

#### H. Grievance Procedure-Step III

- A resident wishing to appeal the Step II decision to the warden may do so by completing a Motion to Appeal to the Warden, Step III form (Appendix C,) and submitting it to RGO staff within 3 working days of the decision rendered in Step II.
- 2. RGO staff shall forward a copy of the appeal and all attendant paperwork to the warden within 1 working day of receiving the appeal.
- 3. The warden shall review the grievance, records and the decision, and conduct further inquiries if deemed appropriate. The warden shall submit a written decision on the appeal within 3 working days of receipt of the appeal. RGO staff, the grievant and any parties to the grievance shall receive notification of the warden's decision.

4. A decision from the warden that is not appealed to the next step and determines that the grievance is at least meritorious in part shall direct specific relief to be afforded to the resident. The warden shall direct the appropriate relief and order compliance to his or her order to be carried out and documented within 10 working days (if possible), or as may be otherwise specified in the decision.

#### I. Appealing the Warden's Decision: Step IV

- A resident wishing to appeal the Step III decision to the Assistant Commissioner of the Division of Pretrial Detention and Services shall complete n Motion to Appeal to the Commissioner, Step IV form and forward it to the RGPC within 3 working days of the resident's receipt of the Step II decision.
- 2. The Assistant Commissioner shall direct the RGO staff to inform the grievant and other parties of the time, date and place of the hearing.
- At the conclusion of the hearing, the Assistant Commissioner shall submit a
  written notice of the decision to the resident and copies to RGO staff, within
  20 working days of the hearing. The Assistant Commissioner's decision is
  final.
- 4. If the Assistant Commissioner's decision determines that the grievance is at least meritorious in part, he/she shall direct specific relief to be afforded to the resident. The Assistant Commissioner shall order compliance to his/her order to be carried out and documented within 10 working days (if possible), or as may be otherwise specified in the decision.

#### J. Employee Awareness

- 1. All staff having direct contact with residents are to be informed of the complaint process to facilitate timely implementation.
- It is the responsibility of the warden/department head to ensure that records
  of written acknowledgment of this directive are maintained for all appropriate
  staff and that copies are forwarded to Facility Compliance staff in a timely
  manner.
- .07 Attachments.
- A Resident Grievance Form, Step I (DPDS# 180-1a)
- B Motion for Grievance Committee Step II (DPDS# 180-1b)
- C Motion for Appeal to the Warden Step III (DPDS# 180-1c)
- D Motion for Appeal to the Asst. Commissioner (DPDS# 180-1d)
- .08 History.
- PDSD# 180-1, Inmate Grievance Procedures (11-30-00)
- .09 Distribution. A

## Division of Pretrial Detention and Services Grievance Form

Name:	[ ] BCDC Section:
	[ ] BCBIC
Identification#:	Date:
The subject of my complaint is:(chec	ck only one) See reverse side for instructions
<ul> <li>[ ] 1.Classification</li> <li>[ ] 2. Programs</li> <li>[ ] 3.Mail or Packages</li> <li>[ ] 4.Visits or Telephone Calls</li> <li>[ ] 5.Property or Clothing</li> <li>[ ] 6.Payroll</li> <li>[ ] 7.Medical</li> </ul>	<ul> <li>[ ] 8.Commissary</li> <li>[ ] 9.Complaints against staff or others</li> <li>[ ] 10.Disciplinary Matters</li> <li>[ ] 11.Dietary</li> <li>[ ] 12.Maintenance Conditions</li> <li>[ ] 13.Other</li></ul>
Part	A: Resident Complaint
and the <b>remedy</b> you are seeking.	uding the date of the incident, the persons involved,
Remedy:	
Signature:	

## MOTION FOR GRIEVANCE COMMITTEE

### STEP II

NAME:	ID #:	SECTION:
REASON(S) FO	R APPEAL :	
		<u> </u>
GRIEVANT'S S	IGNATURE:	DATE:
RGP COORDIN	IATOR'S SIGNATURE:	DATE:
RESPONSE OF	THE R.G.C.	
R.G.C. MEMBE	RS	DATE:
		DATE:
		DATE:
DATE RETURN	ED TO GRIEVANT:	
Check One: [	] I AGREE WITH THE COMMITTE	EE'S DECISION
[	] I DISAGREE WITH THE COMM	ITTEE'S DECISION
GRIEVANT'S S	IGNATURE:	DATE:

IF YOU ARE UNHAPPY WITH THE GRIEVANCE COMMITTEE'S RESPONSE, YOU HAVE THE RIGHT TO APPEAL TO THE WARDEN. SEE THE RESIDENT GRIEVANCE COORDINATOR.

## MOTION TO APPEAL TO THE WARDEN

## STEP III

NAME:		ID#:	SECTION:
REASON(S) F	OR APPEAL:		
		······································	
	SIGNATURE:		DATE:
	F THE WARDEN:		
WARDEN'S SI			DATE:
DATE RETURI	NED TO GRIEVANT:	************************	
Check One: [	] I AGREE WITH THE	E WARDEN'S DE	ECISION
[	] I DISAGREE WITH	THE WARDEN'S	DECISION
GRIEVANT'S S	SIGNATURE:		DATE:
	HE COMMISSIONER. S		ONSE YOU HAVE THE RIGHT TO ENT GRIEVANCE

DPDS - FORM #38-92c

## 180-1

## MOTION FOR APPEAL TO THE ASSISTANT COMMISSIONER

## STEP IV

NAME:		ID#:	SECTION:
REASON(S) FOR A	APPEAL:		
· · · · · · · · · · · · · · · · · · ·			
GRIEVANT'S SIGN	ATURE:		DATE:
RESPONSE OF TH	IE ASSITANT COMMISS	SIONER:	
· · · · · · · · · · · · · · · · · · ·			
SIGNATURE: (A	ssistant Commissioner)	D <sub>4</sub>	ATE:
NATE BETHBNEN	TO GRIEVANT:		

DPDS - Form # 38-92d

## ATTACHMENT Q – SAMPLE STATE STAT

- Q-1 Sample State Stat Utilization ReportSample
- Q-2 Sample State Stat Staffing ReportState Stat Template
- Q-3 Sample State Stat Chronic Care Report
- Q-4 Sample State Stat HIV HEP-C Report

Attachment Q1 Sample State Stat Utilization Report

Infirmary	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	<b>May-09</b>	Jun-09
Total Infirmary Days	4380	4242	4138	4036	4609	3429	3355	3512	3390	3520	3804	3725
Baltimore SDA	2176	1775	2178	1911	2002	1770	1534	1554	1564	1464	1736	1762
Eastern SDA	427	370	366	309	357	209	200	304	246	327	297	274
Jessup SDA	1177	1402	1104	1047	1204	1048	953	1024	923	944	930	849
Western SDA	600	695	490	769	1046	612	668	630	657	785	841	840
Total Admissions	174	209	196	216	159	207	153	190	204	243	249	271
Baltimore SDA	67	82	72	66	54	65	52	52	69	81	88	103
Eastern SDA	29	24	32	34	21	36	20	43	41	40	47	55
Jessup SDA	51	58	56	55	43	52	44	49	41	64	57	57
Western SDA	27	45	36	61	41	54	37	46	53	58	57	56
Inpatient	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08		Feb-09	Mar-09	Apr-09	May-09	Jun-09
Total approved days	480	609	441	476	530	503	411	322	405	388	430	491
Jail SDA	85	114	136	116	102	48	40	59	96	106	89	104
Baltimore SDA	109	136	110	123	87	65	85	34	80	64	123	113
Eastern SDA	24	115	48	42	57	82	39	17	27	16	34	31
Jessup SDA	170	153	114	102	163	224	171	142	130	108	101	146
Western SDA	92	91	33	93	121	84	76	70	72	94	77	97
ICU/CCU days	360	414	216	229	216	254	206	151	197	138	194	185
Jail SDA	52	98	62	47	33	19	20	15	45	32	47	52
Baltimore SDA	89	29	45	57	20	32	51	17	38	13	49	33
Eastern SDA	17	103	29	25	25	68	18	4	11	2	26	18
Jessup SDA	133	103	69	50	56	86	68	87	74	45	46	42
Western SDA	69	83	11	50	82	49	49	28	29	46	26	40
Total Admissions	98	137	125	148	137	110	93	92	105	114	128	133
Jail SDA	26	34	47	46	30	20	20	22	29	30	36	38
Baltimore SDA	25	27	23	29	30	17	22	10	24	24	34	25
Eastern SDA	5	15	13	9	9	9	5	4	6	5	9	7
Jessup SDA	33	40	28	39	42	41	29	31	25	29	25	37
Western SDA	9	21	14	25	26	23	17	25	21	26	23	26
Cardiac Admissions			1.	20	28	27	15	23	16	21	28	31
Jail SDA	+							3	1	5	7	11
Baltimore SDA	+							3	4	3	4	3
Eastern SDA	+							2	0	2	4	2
Jessup SDA	+							6	2	5	8	7
Western SDA	+							9	9	6	5	8
Cardiac Days					43	113	94	85	34	45	65	68
Jail SDA	+						3.	4	4	8	7	16
Baltimore SDA	+							9	7	4	6	6
Eastern SDA								4	0	3	10	15
Jessup SDA	+							51	12	19	31	13
Western SDA	+							17	11	11	11	18
Infectious Disease Admits	25	29	33	29	22	18	29	11	19	18	15	24
Jail SDA	+		30									9
Baltimore SDA	+											3
Eastern SDA	+											0
Jessup SDA	+											11
Western SDA	+											1

## Attachment Q1 Sample State Stat Utilization Report

Infirmary	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Infectious Disease Days	126	150	132	92	75	105	79	57	94	62	48	70
Jail SDA												
Baltimore SDA												
Eastern SDA												
Jessup SDA												
Western SDA												
Trauma admits	22	24	13	26	20	15	15	14	20	19	17	30
Jail SDA	7	10	5	12	6	3	3	6	10	9	8	12
Baltimore SDA	2	3	3	2	1	3	3	3	5	2	4	6
Eastern SDA	0	2	2	2	2	1	1	0	1	0	1	1
Jessup SDA	10	5	3	7	8	4	5	1	2			5
Western SDA	3	4	0	3	3	4	3	4	2	5	3	6
Trauma days	80	73	35	68	77	37	52	34	56		50	
Jail SDA	23	28	16	30	13	5		21	23	52	10	
Baltimore SDA	2	17	3	1	3	6	12	4	10	5	25	26
Eastern SDA	0	11	4	8	13	5	1	0			7	2
Jessup SDA	43	9	12	12	22	11	21	1	13			16
Western SDA	12	8	0	17	26	10	8	8	5	18	7	34
ER	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Total ER Trips	149	138	140	141	122	112	95	96	122	121	124	
Jail SDA	48	57	59	50	43	26	18	23	41	37	33	
Baltimore SDA	48	30	21	33	31	24	22	21	21	24	30	23
Eastern SDA	6	7	11	10	9	13	10	9				
Jessup SDA	35	33	37	34	20	34	30	26	40	29	27	32
Western SDA	12	11	12	14	19	15	15	17	11	21	26	
ER Total Trauma	59	65	60	63	58	49	32	37	50	63	51	43
Jail SDA	16	22	19	28	15	10	7	9			12	
Baltimore SDA	23	16	13	15	16	12	10	13	12	13	17	9
Eastern SDA	1	4	7	3	6	7	4	2	1	3		_
Jessup SDA	14	19	16	10	13	14	6	9			10	
Western SDA	5	4	5	7	8	6	5	4	3			
ER Trauma Assault			<b>25</b>	31	28	26	22	16	22	27	21	33
ER Trauma Accidental			35	32	30	23	8	21	28	36	30	10
ER Cardiac			10	16	14	21	10	6	8	9	11	7
Neuro Seizure			9	5	19	11	2	7	5	5	7	5
Neuro Other							9	5	6		_	_
ER GI			12	10	7	6	10	13	11	9		
Other			49	47	24	25	32	28	42	30	35	42
Troponin Pilot	1	1	2	2	1	1	1	2	2			
Troponin Pilot Cost Per ER Visit: Total Cost	\$1,184 \$176,541	\$1,214 \$167,503	\$1,502 \$210,282	\$1,702 \$240,402	\$1,742 \$257,535	\$1,797 \$201,288	\$1,709 \$162,341	\$1,689 \$162,189	\$1,899 \$231,720	\$1,789	\$1,874 \$232,379	\$1,747 \$188,625

## Attachment Q2 Sample State Stat Staffing Report

Baltimore SDA	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	<b>May-09</b>	Jun-09
Medical	100.91%	97.64%	103.57%	105.54%	102.52%	100.21%	97.36%	98.00%	95.93%	100.57%	101.26%	105.94%
Dental	81.20%	81.85%	77.50%	70.58%	80.74%	85.62%	84.08%	94.04%	80.52%	89.28%	88.84%	83.32%
Mental Health	98.84%	100.04%	94.48%	104.44%	93.15%	95.06%	95.79%	93.67%	89.76%	82.41%	92.00%	90.63%
Western SDA	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Medical	83.90%	84.60%	84.28%	74.60%	85.02%	83.78%	86.22%	89.96%	89.40%	88.33%	84.43%	92.38%
Dental	64.55%	69.80%	68.13%	74.34%	78.33%	85.36%	85.60%	77.33%	79.85%	74.45%	84.27%	89.91%
Mental Health	98.83%	73.88%	92.83%	95.90%	107.03%	115.98%	109.03%	112.81%	83.59%	85.89%	72.00%	76.87%
Jessup SDA	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Medical	103.67%	101.24%	102.76%	105.42%	98.57%	106.36%	100.89%	100.66%	93.66%	89.70%	88.49%	91.93%
Dental	71.67%	80.72%	85.60%	81.61%	87.20%	82.50%	83.14%	87.85%	83.21%	83.99%	77.04%	78.72%
Mental Health	91.31%	94.63%	93.96%	100.13%	95.98%	99.30%	94.96%	97.77%	92.98%	88.85%	90.08%	98.05%
Eastern SDA	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Medical	91.45%	94.03%	97.18%	97.92%	101.99%	96.87%	97.06%	97.88%	97.12%	92.91%	97.58%	95.56%
Dental	84.73%	80.55%	85.58%	74.64%	75.82%	75.11%	75.19%	79.15%	81.96%	103.00%	100.42%	101.81%
Mental Health	119.84%	94.35%	126.70%	87.77%	103.44%	101.49%	97.30%	69.69%	55.21%	32.58%	77.48%	67.42%
All SDAs	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Medical	95.0%	94.4%	96.9%	95.9%	97.0%	96.8%	95.4%	96.6%	94.0%	92.9%	92.9%	96.5%
Dental	75.5%	78.2%	79.2%	75.3%	80.5%	82.1%	82.0%	84.6%	81.4%	87.7%	87.6%	88.4%
Mental Health	102.2%	90.7%	102.0%	97.1%	99.9%	103.0%	99.3%	93.5%	80.4%	72.4%	82.9%	83.2%

## Attachment Q3 Sample State Stat Chronic Care Report

### **Psychiatric Care**

Psych Cost	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Western	\$76,625	\$77,854	\$66,782	\$64,536	\$49,997	\$58,019	\$49,657	\$46,913	\$53,410	\$62,151	\$58,895	\$29,994
Jessup	\$69,526	\$62,034	\$52,177	\$49,035	\$40,622	\$44,339	\$34,537	\$40,079	\$47,309	\$45,815	\$46,967	\$26,512
Eastern	\$23,027	\$22,744	\$18,651	\$14,742	\$14,514	\$11,295	\$9,193	\$6,855	\$11,548	\$15,733	\$12,651	\$7,013
Baltimore	\$87,916	\$83,181	\$62,646	\$49,486	\$31,711	\$33,740	\$26,219	\$26,930	\$36,712	\$42,006	\$43,924	\$30,975
Psych PIPM	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Western	\$8.89	\$8.99	\$7.67	\$7.35	\$5.67	\$6.58	\$5.63	\$5.34	\$6.02	\$6.93	\$6.56	\$3.33
Jessup	\$10.01	\$8.91	\$7.49	\$7.07	\$5.89	\$6.45	\$4.99	\$5.73	\$6.82	\$6.65	\$6.86	\$3.87
Eastern	\$6.96	\$6.78	\$5.32	\$4.26	\$4.17	\$3.24	\$2.74	\$2.05	\$3.43	\$4.74	\$3.76	\$2.09
Baltimore	\$11.37	\$10.82	\$8.17	\$6.39	\$4.17	\$4.62	\$3.59	\$3.78	\$5.23	\$5.86	\$6.11	\$4.39
HIV												
HIV Cost	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
Western	\$224,657	\$231,860	\$257,030	\$268,018	\$247,956	\$278,818	\$223,485	\$259,153	\$260,502	\$290,202	\$277,578	\$139,491
Jessup	\$259,556	\$250,358	\$226,912	\$242,867	\$190,704	\$220,949	\$196,284	\$190,129	\$222,565	\$206,663	\$203,453	\$108,818
Eastern	\$144,587	\$161,098	\$145,852	\$156,997	\$159,338	\$116,521	\$107,542	\$95,525	\$116,654	\$124,253	\$111,330	\$69,509
Baltimore	\$264,210	\$240,344	\$224,475	\$210,271	\$198,024	\$218,084	\$187,750	\$178,601	\$229,553	\$254,704	\$259,963	\$217,883
HIV PIPM	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	<b>May-09</b>	Jun-09
444 4 1 11 141	Jui vo	1200	Sep oo	000		200	0	_ 0.0 0.		1-P1 0>	may or	0 4444 0 >
Western	\$26.07	\$26.78	\$29.53	\$30.53	\$28.11	\$31.61	\$25.36	\$29.49	\$29.39	\$32.35	\$30.92	\$15.49
	_		•				_			•	·	_
Western	\$26.07	\$26.78	\$29.53	\$30.53	\$28.11	\$31.61	\$25.36	\$29.49	\$29.39	\$32.35	\$30.92	\$15.49
Western Jessup	\$26.07 \$37.37	\$26.78 \$35.97	\$29.53 \$32.57	\$30.53 \$35.03	\$28.11 \$27.65	\$31.61 \$32.13	\$25.36 \$28.38	\$29.49 \$27.20	\$29.39 \$32.10	\$32.35 \$29.98	\$30.92 \$29.71	\$15.49 \$15.89
Western Jessup Eastern	\$26.07 \$37.37 \$43.71	\$26.78 \$35.97 \$48.02	\$29.53 \$32.57 \$41.57	\$30.53 \$35.03 \$45.32	\$28.11 \$27.65 \$45.77	\$31.61 \$32.13 \$33.44	\$25.36 \$28.38 \$32.08	\$29.49 \$27.20 \$28.59	\$29.39 \$32.10 \$34.66	\$32.35 \$29.98 \$37.41	\$30.92 \$29.71 \$33.12	\$15.49 \$15.89 \$20.74
Western Jessup Eastern Baltimore	\$26.07 \$37.37 \$43.71	\$26.78 \$35.97 \$48.02	\$29.53 \$32.57 \$41.57	\$30.53 \$35.03 \$45.32	\$28.11 \$27.65 \$45.77	\$31.61 \$32.13 \$33.44	\$25.36 \$28.38 \$32.08	\$29.49 \$27.20 \$28.59	\$29.39 \$32.10 \$34.66	\$32.35 \$29.98 \$37.41	\$30.92 \$29.71 \$33.12	\$15.49 \$15.89 \$20.74
Western Jessup Eastern Baltimore Dialysis	\$26.07 \$37.37 \$43.71 \$34.18	\$26.78 \$35.97 \$48.02 \$31.27	\$29.53 \$32.57 \$41.57 \$29.27	\$30.53 \$35.03 \$45.32 \$27.15	\$28.11 \$27.65 \$45.77 \$26.05	\$31.61 \$32.13 \$33.44 \$29.86	\$25.36 \$28.38 \$32.08 \$25.72	\$29.49 \$27.20 \$28.59 \$25.09	\$29.39 \$32.10 \$34.66 \$32.72	\$32.35 \$29.98 \$37.41 \$35.55	\$30.92 \$29.71 \$33.12 \$36.16	\$15.49 \$15.89 \$20.74 \$30.87
Western Jessup Eastern Baltimore Dialysis Dialysis Cost	\$26.07 \$37.37 \$43.71 \$34.18 <b>Jul-08</b>	\$26.78 \$35.97 \$48.02 \$31.27	\$29.53 \$32.57 \$41.57 \$29.27	\$30.53 \$35.03 \$45.32 \$27.15	\$28.11 \$27.65 \$45.77 \$26.05	\$31.61 \$32.13 \$33.44 \$29.86 Dec-08	\$25.36 \$28.38 \$32.08 \$25.72 <b>Jan-09</b>	\$29.49 \$27.20 \$28.59 \$25.09 <b>Feb-09</b>	\$29.39 \$32.10 \$34.66 \$32.72 Mar-09	\$32.35 \$29.98 \$37.41 \$35.55 <b>Apr-09</b>	\$30.92 \$29.71 \$33.12 \$36.16 <b>May-09</b>	\$15.49 \$15.89 \$20.74 \$30.87
Western Jessup Eastern Baltimore Dialysis Dialysis Cost Western	\$26.07 \$37.37 \$43.71 \$34.18 <b>Jul-08</b> \$40,928	\$26.78 \$35.97 \$48.02 \$31.27 <b>Aug-08</b> \$30,138	\$29.53 \$32.57 \$41.57 \$29.27 <b>Sep-08</b> \$48,969	\$30.53 \$35.03 \$45.32 \$27.15 <b>Oct-08</b> \$63,807	\$28.11 \$27.65 \$45.77 \$26.05 <b>Nov-08</b> \$13,119	\$31.61 \$32.13 \$33.44 \$29.86 <b>Dec-08</b> \$26,143	\$25.36 \$28.38 \$32.08 \$25.72 <b>Jan-09</b> \$11,837	\$29.49 \$27.20 \$28.59 \$25.09 <b>Feb-09</b> \$9,924	\$29.39 \$32.10 \$34.66 \$32.72 <b>Mar-09</b> \$13,449	\$32.35 \$29.98 \$37.41 \$35.55 <b>Apr-09</b> \$20,933	\$30.92 \$29.71 \$33.12 \$36.16 <b>May-09</b> \$27,981	\$15.49 \$15.89 \$20.74 \$30.87 <b>Jun-09</b> \$2,745
Western Jessup Eastern Baltimore Dialysis Dialysis Cost Western Jessup	\$26.07 \$37.37 \$43.71 \$34.18 <b>Jul-08</b> \$40,928 \$37,529	\$26.78 \$35.97 \$48.02 \$31.27 <b>Aug-08</b> \$30,138 \$11,927	\$29.53 \$32.57 \$41.57 \$29.27 <b>Sep-08</b> \$48,969 \$19,192	\$30.53 \$35.03 \$45.32 \$27.15 <b>Oct-08</b> \$63,807 \$18,855	\$28.11 \$27.65 \$45.77 \$26.05 <b>Nov-08</b> \$13,119 \$17,948	\$31.61 \$32.13 \$33.44 \$29.86 <b>Dec-08</b> \$26,143 \$24,819	\$25.36 \$28.38 \$32.08 \$25.72 <b>Jan-09</b> \$11,837 \$32,924	\$29.49 \$27.20 \$28.59 \$25.09 <b>Feb-09</b> \$9,924 \$7,543	\$29.39 \$32.10 \$34.66 \$32.72 Mar-09 \$13,449 \$35,071	\$32.35 \$29.98 \$37.41 \$35.55 <b>Apr-09</b> \$20,933 \$41,217	\$30.92 \$29.71 \$33.12 \$36.16 <b>May-09</b> \$27,981 \$17,189	\$15.49 \$15.89 \$20.74 \$30.87 <b>Jun-09</b> \$2,745 \$10,538
Western Jessup Eastern Baltimore Dialysis Dialysis Cost Western Jessup Eastern	\$26.07 \$37.37 \$43.71 \$34.18 <b>Jul-08</b> \$40,928 \$37,529	\$26.78 \$35.97 \$48.02 \$31.27 <b>Aug-08</b> \$30,138 \$11,927 \$51	\$29.53 \$32.57 \$41.57 \$29.27 <b>Sep-08</b> \$48,969 \$19,192 \$51	\$30.53 \$35.03 \$45.32 \$27.15 Oct-08 \$63,807 \$18,855 \$51	\$28.11 \$27.65 \$45.77 \$26.05 <b>Nov-08</b> \$13,119 \$17,948	\$31.61 \$32.13 \$33.44 \$29.86 <b>Dec-08</b> \$26,143 \$24,819 \$100	\$25.36 \$28.38 \$32.08 \$25.72 <b>Jan-09</b> \$11,837 \$32,924 \$0	\$29.49 \$27.20 \$28.59 \$25.09 <b>Feb-09</b> \$9,924 \$7,543	\$29.39 \$32.10 \$34.66 \$32.72 Mar-09 \$13,449 \$35,071 \$0	\$32.35 \$29.98 \$37.41 \$35.55 <b>Apr-09</b> \$20,933 \$41,217 \$0	\$30.92 \$29.71 \$33.12 \$36.16 <b>May-09</b> \$27,981 \$17,189 \$0	\$15.49 \$15.89 \$20.74 \$30.87 <b>Jun-09</b> \$2,745 \$10,538
Western Jessup Eastern Baltimore Dialysis Dialysis Cost Western Jessup Eastern Baltimore	\$26.07 \$37.37 \$43.71 \$34.18 <b>Jul-08</b> \$40,928 \$37,529 \$0 \$26,287	\$26.78 \$35.97 \$48.02 \$31.27 <b>Aug-08</b> \$30,138 \$11,927 \$51 \$20,036	\$29.53 \$32.57 \$41.57 \$29.27 <b>Sep-08</b> \$48,969 \$19,192 \$51 \$21,395	\$30.53 \$35.03 \$45.32 \$27.15 <b>Oct-08</b> \$63,807 \$18,855 \$51 \$26,503	\$28.11 \$27.65 \$45.77 \$26.05 <b>Nov-08</b> \$13,119 \$17,948 \$0 \$25,765	\$31.61 \$32.13 \$33.44 \$29.86 <b>Dec-08</b> \$26,143 \$24,819 \$100 \$36,904	\$25.36 \$28.38 \$32.08 \$25.72 <b>Jan-09</b> \$11,837 \$32,924 \$0 \$18,455	\$29.49 \$27.20 \$28.59 \$25.09 <b>Feb-09</b> \$9,924 \$7,543 \$51 \$32,241	\$29.39 \$32.10 \$34.66 \$32.72 <b>Mar-09</b> \$13,449 \$35,071 \$0 \$25,722	\$32.35 \$29.98 \$37.41 \$35.55 <b>Apr-09</b> \$20,933 \$41,217 \$0 \$68,525	\$30.92 \$29.71 \$33.12 \$36.16 <b>May-09</b> \$27,981 \$17,189 \$0 \$26,762	\$15.49 \$15.89 \$20.74 \$30.87 <b>Jun-09</b> \$2,745 \$10,538 \$0 \$19,445
Western Jessup Eastern Baltimore Dialysis Dialysis Cost Western Jessup Eastern Baltimore Dialysis PIPM	\$26.07 \$37.37 \$43.71 \$34.18 <b>Jul-08</b> \$40,928 \$37,529 \$0 \$26,287 <b>Jul-08</b>	\$26.78 \$35.97 \$48.02 \$31.27 <b>Aug-08</b> \$30,138 \$11,927 \$51 \$20,036 <b>Aug-08</b>	\$29.53 \$32.57 \$41.57 \$29.27 <b>Sep-08</b> \$48,969 \$19,192 \$51 \$21,395 <b>Sep-08</b>	\$30.53 \$35.03 \$45.32 \$27.15 Oct-08 \$63,807 \$18,855 \$51 \$26,503 Oct-08	\$28.11 \$27.65 \$45.77 \$26.05 <b>Nov-08</b> \$13,119 \$17,948 \$0 \$25,765 <b>Nov-08</b>	\$31.61 \$32.13 \$33.44 \$29.86 <b>Dec-08</b> \$26,143 \$24,819 \$100 \$36,904 <b>Dec-08</b>	\$25.36 \$28.38 \$32.08 \$25.72 <b>Jan-09</b> \$11,837 \$32,924 \$0 \$18,455 <b>Jan-09</b>	\$29.49 \$27.20 \$28.59 \$25.09 <b>Feb-09</b> \$9,924 \$7,543 \$51 \$32,241 <b>Feb-09</b>	\$29.39 \$32.10 \$34.66 \$32.72 <b>Mar-09</b> \$13,449 \$35,071 \$0 \$25,722 <b>Mar-09</b>	\$32.35 \$29.98 \$37.41 \$35.55 <b>Apr-09</b> \$20,933 \$41,217 \$0 \$68,525 <b>Apr-09</b>	\$30.92 \$29.71 \$33.12 \$36.16 <b>May-09</b> \$27,981 \$17,189 \$0 \$26,762 <b>May-09</b>	\$15.49 \$15.89 \$20.74 \$30.87 <b>Jun-09</b> \$2,745 \$10,538 \$0 \$19,445 <b>Jun-09</b>
Western Jessup Eastern Baltimore Dialysis Dialysis Cost Western Jessup Eastern Baltimore Dialysis PIPM Western	\$26.07 \$37.37 \$43.71 \$34.18 <b>Jul-08</b> \$40,928 \$37,529 \$0 \$26,287 <b>Jul-08</b> \$4.75	\$26.78 \$35.97 \$48.02 \$31.27 <b>Aug-08</b> \$30,138 \$11,927 \$51 \$20,036 <b>Aug-08</b> \$3.48	\$29.53 \$32.57 \$41.57 \$29.27 <b>Sep-08</b> \$48,969 \$19,192 \$51 \$21,395 <b>Sep-08</b> \$5.63	\$30.53 \$35.03 \$45.32 \$27.15 <b>Oct-08</b> \$63,807 \$18,855 \$51 \$26,503 <b>Oct-08</b> \$7.27	\$28.11 \$27.65 \$45.77 \$26.05 <b>Nov-08</b> \$13,119 \$17,948 \$0 \$25,765 <b>Nov-08</b>	\$31.61 \$32.13 \$33.44 \$29.86 <b>Dec-08</b> \$26,143 \$24,819 \$100 \$36,904 <b>Dec-08</b> \$2.96	\$25.36 \$28.38 \$32.08 \$25.72 <b>Jan-09</b> \$11,837 \$32,924 \$0 \$18,455 <b>Jan-09</b> \$1.34	\$29.49 \$27.20 \$28.59 \$25.09 <b>Feb-09</b> \$9,924 \$7,543 \$51 \$32,241 <b>Feb-09</b>	\$29.39 \$32.10 \$34.66 \$32.72 <b>Mar-09</b> \$13,449 \$35,071 \$0 \$25,722 <b>Mar-09</b> \$1.52	\$32.35 \$29.98 \$37.41 \$35.55 <b>Apr-09</b> \$20,933 \$41,217 \$0 \$68,525 <b>Apr-09</b> \$2.33	\$30.92 \$29.71 \$33.12 \$36.16 <b>May-09</b> \$27,981 \$17,189 \$0 \$26,762 <b>May-09</b> \$3.12	\$15.49 \$15.89 \$20.74 \$30.87 <b>Jun-09</b> \$2,745 \$10,538 \$0 \$19,445 <b>Jun-09</b> \$0.30

## Attachment Q4 Sample State Stat HIV HEP-C Report

HIV Tests: Voluntary Testing	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
State Totals	729	848	966	1062	853	<b>799</b>	671	801	805	884	856	820
Total Admissions			1275	1236	930	1064	1131	1003	1077	1079	1074	1049
State Totals by Percentage			76%	86%	92%	75%	59%	80%	75%	86%	80%	78%
Total Educated										936	991	992
State Totals by Percentage							0%	0%	0%	83%	92%	95%
Western	0	48	64	0	0	0	0	0	0	0		0
Jessup	73	185	299	198	194	115	51	145	169	232	222	169
Eastern	0	0	0	0	0	0	0	0	0	0		0
Baltimore	656	615	603	864	659	684	620	656	636	652	634	651
HIV Tests: Voluntary Testing												
Positive Outcomes	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	<b>May-09</b>	Jun-09
State Totals	7	11	2	8	3	4	8	13	6	6	6	7
Western	0	0	0	0	0	0	0	0	0	0	0	0
Jessup	2	1	0	2	0	1	0	1	0	0	0	1
Eastern	0	0	0	0	0	0	0	0	0	0	0	0
Baltimore	5	10	2	6	3	3	8	12	6	6	6	6
HIV Tests:Tested secondary to												
Symptoms	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	<b>May-09</b>	Jun-09
State Totals	272	201	174	321	201	209	242	152	209	223	192	270
Western	63	17	20	113	97	88	113	26	69	103	57	116
Jessup	28	1	30	38	14	12	19	15	31	28	12	1
Eastern	68	72	60	64	29	27	37	31	36	39	37	55
Baltimore	113	111	64	106	61	82	73	80	73	53	86	98
HIV Tests: Symptomatic Testing												
Positives	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	<b>May-09</b>	Jun-09
State Totals	7	8	6	13	9	13	4	6	5	11	8	9
Western	1	0	0	2	0	3	0	1	1	2	0	0
Jessup	0	1	1	0	1	0	0	1	1	2	0	1
Eastern	1	4	2	0	1	2	2	1	2	0	2	0
Baltimore	5	3	3	11	7	8	2	3	1	7	6	8
HIV+ Patients	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
State Totals	642	583	552	551	<b>568</b>	545	<b>570</b>	588	564	558	<b>572</b>	<b>585</b>
Western	182	136	167	168	171	160	170	167	170	174	172	167
Jessup	198	188	169	172	181	166	164	169	152	160	172	168
Eastern	91	96		93	94	93	90	80		82	75	70
Baltimore	171	163	118	118	122	126	146	172	169		153	180
HIV+ Patients Recieivng HAART	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
State Totals	420	393	374	380	399	389	398	398	401	402	399	384
Western	141	127	123	126	136	131	139	140	143	143	141	139
Jessup	130	123	118	119	123	109	102	108	100	105	108	93
Eastern	75	75	77	72	73	73	69	62	63	75	61	59
Baltimore	74	68	56	63	67	76	88	88	95	79	89	93

## Attachment Q4 Sample State Stat HIV HEP-C Report

Hepatitis C Patients	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
State Totals	1810	1810	1772	1820	1783	1832	1865	1879	1866	1890	1903	1920
Western	634	645	637	655	641	641	646	686	700	754	751	740
Jessup	591	577	578	584	556	607	557	591	587	564	586	577
Eastern	346	353	356	369	368	374	366	334	337	339	302	305
Baltimore	239	235	201	212	218	210	296	268	242	233	264	298
<b>Hepatitis C Patients in Treatment</b>	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09
State Totals	63	64	65	67	65	77	<b>71</b>	<b>76</b>	80	77	<b>71</b>	63
Western	32	31	31	24	24	28	29	23	27	25	27	23
Jessup	15	15	15	17	20	23	19	26	27	28	23	22
Eastern	12	14	14	19	16	20	16	18	19	18	14	11
Baltimore	4	4	5	7	5	6	7	9	7	6	7	7

ATTACHMENT R – MEDICAL STAFFING MATRIX

## Attachment R Medical Staffing Matrix

MR Clerk\*

Service Delivery Area: Baltimore Medical Services

Position - Baltimore Sentenced	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	<b>Hourly Rate</b>
Administrative Personnel			1				1		
Medical Director*		D	D	D	D	D		1.00	
Administrator*		D	D	D	D	D		1.00	
Director of Nurses*		D	D	D	D	D		1.00	
Assistant Director of Nurses*		D	D	D	D	D		1.00	
Financial Labor Analyst		D	D	D	D	D		1.00	
X-Ray Tech (Flexible)		D	D	D	D	D		1.00	
Secretary*		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
Infection Control Clerk*		D	D	D	D	D		1.00	
HR / Staffing Clerk*		D	D	D	D	D		2.00	
UM Clerk*		D	D	D	D	D		1.00	
Courier*		D	D	D	D	D		1.00	
Supply Clerk*		D	D	D	D	D		1.00	
Dispensary -BCCC									
RN		D	D	D	D	D		1.00	
Physician (Flexible)		D	D	D	D			0.90	
LPN	.2D	.2D	.2D	.2D	.2D	.2D	.2D	0.25	
Medical Records - BCCC									
MR Clerk*		D	D	D	D	D		1.00	
	•	•							
Dispensary - BPRU									
RN		D	D	D	D	D		1.00	
Physician (Flexible)				D		D		0.40	
LPN	.2D	.2D	.2D	.2D	.2D	.2D	.2D	0.25	
Medical Records - BPRU									
Medical Records Supervisor*		.5D	.5D	.5D	.5D	.5D		0.50	
•	•	•							
Dispensary - HDU									
RN (Flexible)		D/E	D/E	D/E	D/E	D/E		1.00	
Physician (Flexible)		D		D				0.40	
LPN	.2D	.2D	.2D	.2D	.2D	.2D	.2D	0.25	
Medical Records - HDU	_								
<u> </u>	1	1	1	1	1	i	1	1	1

.5D

.5D

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.5D

0.50

#### Service Delivery Area: Baltimore Medical Services

Position - Baltimore Sentenced	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Dispensary - MCAC									
Physicians (Flexible)**		D	D	D	D	D		0.80	
RN Charge		D	D	D	D	D		1.00	
RN		D	D	D	D	D		1.00	
RN	D						D	0.40	
LPN		.2D	.2D	.2D	.2D	.2D		0.25	
LPN		D	D	D	D	D		0.75	
RN		Е	Е	Е	Е	Е		1.00	
RN	Е						Е	0.40	
LPN	.2E	.2E	.2E	.2E	.2E	.2E	.2E	0.25	
LPN	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	
PA/NP		.5D	.5D	.5D	.5D	.5D		0.50	
Medical Records - MCAC									
MR Clerk*		.5D	.5D	.5D	.5D	.5D		0.50	
Medical Records Clerk (float)		D/E	D/E	D/E	D/E	D/E		1.00	

Dispensary - MTC									
Physician (Flexible)			D			D		0.40	
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN*	D	D	D	D	D	D	D	1.40	
LPN	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide*	D	2D	D	2D	D	2D	D	2.10	
PA/NP		D	D	D	D	D		1.00	
RN	E	Е	Е	Е	Е	Е	Е	1.40	
LPN**	E	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide**	Е	2E	Е	2E	Е	2E	Е	2.10	
RN	N	N	N	N	N	N	N	1.40	
LPN**	N	N	N	N	N	N	N	1.40	•
Cert. Medicine Aide**	N	N	N	N	N	N	N	1.40	

Position - Baltimore Sentenced	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Infirmary - MTC									
Physician* **		D	D	D	D	D		1.00	
RN - Charge		D	D	D	D	D		1.00	
RN	2D	2D	2D	2D	2D	2D	2D	2.80	
Physician (Flexible)**		D	D	D	D	D		1.00	
LPN**	2D	2D	2D	2D	2D	2D	2D	2.80	
Cert. Medicine Aide**	2D	3D	3D	3D	3D	3D	2D	3.80	
Physician (Flexible)**	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	2E	2E	2E	2E	2E	2E	2E	2.80	
LPN	2E	2E	2E	2E	2E	2E	2E	2.80	
Cert. Medicine Aide /CNA	Е	Е	Е	Е	Е	Е	Е	2.80	
RN	2N	2N	2N	2N	2N	2N	2N	2.80	
LPN	N	N	N	N	N	N	N	1.40	
Infection Control - MTC									
RN - Infection Control Coordinator*		D	D	D	D	D		1.00	
LPN Infection Control		4D	4D	4D	4D	4D		4.00	
LPN Infection Control		D	D	D	D	D		1.00	
LPN Infection Control		Е	Е	Е	Е	Е		1.00	
Medical Records - MTC									
RHIT/RHIA*		D	D	D	D	D		1.00	
MR Supervisor*		D	D	D	D	D		1.00	
MR Clerk*		D	D	D	D	D		1.00	
Dispensary - MRDCC									
Infection Control Clerk*		D	D	D	D	D		1.00	
Physician* **		D	D	D	D	D		1.00	
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN**	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
Phlebotomist**		D	D	D	D	D		1.00	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	
LPN	N	N	N	N	N	N	N	1.40	
Intake Services - MRDCC	,								
RN	D	D	D	D	D	D	D	1.40	
RN	D	D	D	D	D	D	D	1.40	
PA/NP		D	D	D	D	D		1.00	
Phlebotomist**		D	D	D	D	D		1.00	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
	Е	Е	Е	Е	Е	Е	Е	1.40	
RN									
RN LPN**	Е	Е	E	Е	Е	Е	Е	1.40	
	E E	E E	E E	E E	E E	E E	E E	1.40 1.40	

2.5D

2.5D

2.5D

2.5D

2.5D

MR Clerk\*

2.50

#### Service Delivery Area: Baltimore Pre-Trial Medical Services

Position - Baltimore Pre-Trial	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	Hourly Rate
Dispensary- MDC		·							
Assistant Director of Nurses*		D	D	D	D	D		1.00	
Administrator*		D	D	D	D	D		1.00	
Ombudsman		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
HR/Staffing Clerk		D	D	D	D	D		1.00	
UM Clerk*		D	D	D	D	D		1.00	
Physician* **		D	D	D	D	D		1.00	
RN - Charge		D	D	D	D	D		1.00	
RN	2D	2D	2D	2D	2D	2D	2D	2.80	
RN		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN**	2D	2D	2D	2D	2D	2D	2D	2.80	
Phlebotomist		D	D	D	D	D		1.00	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**	.25D	4D	4D	4D	4D	4D	.25D	4.50	
PA/NP	D	D	D	D	D	D	D	1.40	
RN	2E	2E	2E	2E	2E	2E	2E	2.80	
LPN**	2E	2E	2E	2E	2E	2E	2E	2.80	
Cert. Medicine Aide** (12 hr. shifts)	3E	3E	3E	3E	3E	3E	3E	4.20	
PA/NP	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	
LPN**	N	N	N	N	N	N	N	1.40	
Cert. Medicine Aide**	N	N	N	N	N	N	N	1.40	
JI Facility									
Physician* **		D	D	D	D	D		0.85	
RN	D	D	D	D	D	D	D	1.40	
RN (Discharge Planning)		D	D	D	D	D		1.00	
LPN (Discharge Planning)		D	D	D	D	D		0.90	
PA/NP		Е	Е	Е	Е	Е		1.00	
LPN**	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	
Medical Records - MDC									
MR Supervisor*		D	D	D	D	D		1.00	
MR Clerk*	3D	3D	3D	3D	3D	3D	3D	4.20	
MR Clerk*	2E	2E	2E	2E	2E	2E	2E	2.80	
	1								
Dispensary/Infirmary - WDC		1	ſ		1		1		ı
Physician* **	D	D	D	D	D	D	D	1.40	
Phlebotomist		D	D	D	D	D		1.00	
RN - Charge	D	D	D	D	D	D	D	1.40	
RN	2D	2D	2D	2D	2D	2D	2D	2.80	
RN		D	D	D	D	D		1.00	
PA/NP	D	D	D	D	D	D	D	1.40	
LPN**	2D	2D	2D	2D	2D	2D	2D	2.80	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**	D			-			D	0.40	
Physician – OB/GYN (Flexible)	1		0.1	1	0.1			0.20	
RN	2E	2E	2E	2E	2E	2E	2E	2.80	
PA/NP	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN	Е	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide** (Flexible)	1	Е	Е	Е	Е	Е		1.00	
PA/NP (Flexible)**	N	N	N	N	N	N	N	1.40	
RN	2N	2N	2N	2N	2N	2N	2N	2.80	
LPN	N	N	N	N	N	N	N	1.40	

#### Service Delivery Area: Baltimore Pre-Trial Medical Services

Intake - WDC	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Physician (Flexible)* **	D	D	D	D	D	D	D	1.40	
RN	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**		D	D	D	D	D		1.00	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
Medical Records - WDC									
MR Supervisor*		D	D	D	D	D		1.00	
MR Clerk*	D	D	D	D	D	D	D	1.40	
MR Clerk*	Е	E	Е	Е	Е	Е	Е	1.40	

	_			•	•		•		
Intake - BCBIC									
Director of Nurses*		D	D	D	D	D		1.00	
Administrator*		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
X-Ray Tech (Flexible)		D	D	D	D	D		1.00	
X-Ray Tech (Flexible)		D		D		D		0.60	
Physician (Flexible)* **	D	2D	2D	2D	2D	2D	D	2.40	
PA/NP	2D	2.80							
RN - Charge	D	D	D	D	D	D	D	1.40	
RN	2D	2.80							
LPN	2D	2.80							
Cert. Medicine Aide**	D	D	D	D	D	D	D	2.80	
Phlebotomist**	D	D	D	D	D	D	D	1.40	
Phlebotomist**			D	D	D			0.60	
Physician	Е	Е	Е	Е	Е	Е	Е	1.40	
PA/NP	2E	2.80							
RN - Charge	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	2E	2.80							
LPN**	Е	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide**	2E	2.80							
RN - Charge		N	N	N	N	N		1.00	
RN - Charge	N						N	0.40	
LPN (Flexible)	N	N	N	N	N	N	N	1.40	
Towers 3,4,5									
RN	D	D	D	D	D	D	D	1.40	
PA/NP	D	D	D	D	D	D	D	1.40	
LPN	D	D	D	D	D	D	D	1.40	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN	Е	E	Е	Е	Е	Е	Е	1.40	
Central Booking Dispensary									
Physician - Lead* (Flexible)	D	D	D	D	D	D	D	1.40	
PA/NP	D	D	D	D	D	D	D	1.40	
RN - Charge	D	D	D	D	D	D	D	1.40	
RN	3D	4.20							
RN	D	D	D	D	D	D	D	1.40	
RN	D	D	D	D	D	D	D	1.40	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN	D	D	D	D	D	D	D	1.40	
Physician	Е							0.40	
RN	2E	3E	3E	3E	3E	3E	2E	3.80	
	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN	E	L							
LPN PA/NP	N	N	N	N	N	N	N	1.40	

## Service Delivery Area: Baltimore Pre-Trial Medical Services

Position - Baltimore Pre-Trial	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE
Female Reception (Sallyport)								
PA/NP	D	D	D	D	D	D	D	1.40
RN	D	D	D	D	D	D	D	1.40
PA/NP	Е	Е	Е	Е	Е	Е	Е	1.40
RN	Е	Е	Е	Е	Е	Е	Е	1.40
PA/NP**	N	N	N	N	N	N	N	1.40
RN	N	N	N	N	N	N	N	1.40

Male Reception (Sallyport)									
Physician (Flexible)	D/E	1.40							
PA/NP	2D	2.80							
RN	D	D	D	D	D	D	D	1.40	
RN	D	D	D	D	D	D	D	1.40	
Physician	Е	Е	Е	Е	Е	Е	Е	1.40	
PA/NP**	2E	2.80							
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN -	Е	Е	Е	Е	Е	Е	Е	1.40	
PA/NP	N	N	N	N	N	N	N	1.40	
RN	N	N	N	N	N	N	N	1.40	
Medical Records - BCBIC									
MR Supervisor*		D	D	D	D	D		1.00	
MR Clerk*	2D	2.80							
MR Clerk*	2E	2.80	•						
MR Clerk*	N	N	N	N	N	N	N	1.40	

#### Service Delivery Area: Jessup Medical Services

Position - Jessup	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	<b>Hourly Rate</b>
Administrative Personnel									
Medical Director* **		D	D	D	D	D		1.00	
Speciality Clinics Clerk*		D	D	D	D	D		1.00	
Courier*		D	D	D	D	D		1.00	

	_							
Dispensary - JCI (MHC-Annex)		1		1		1		
Assistant Director of Nurses*		D	D	D	D	D		1.00
Administrative Assistant*		D	D	D	D	D		1.00
X Ray Tech (Flexible)		D	D	D	D	D		1.00
Physician* **		D	D	D	D	D		1.00
Physicians (Flexible)							D	0.20
PA/NP (Flexible)	D	D	D	D	D	D	D	1.40
RN - Charge		D	D	D	D	D		1.00
RN	D	D	D	D	D	D	D	1.40
LPN**	D	2D	2D	2D	2D	2D	D	2.40
Cert. Medicine Aide** (Flexible)	D	D	D	D	D	D	D	2.80
RN	Е	Е	Е	Е	Е	Е	Е	1.40
LPN**	Е	Е	Е	Е	Е	Е	Е	1.40
Cert. Medicine Aide**	2E	3E	3E	3E	3E	3E	2E	3.80
RN	2N	2.80						
LPN	N	N	N	N	N	N	N	1.40
Infirmary - JCI (MHC-Annex)								
RN - Chronic Care Nurse		2D	2D	2D	2D	2D		2.00
RN	D	D	D	D	D	D	D	1.40
RN	Е	Е	Е	Е	Е	Е	Е	1.40
RN	N	N	N	N	N	N	N	1.40
Medical Records - JCI (MHC-Annex)								
RHIT/RHIA*		D	D	D	D	D		1.00
Medical Records Supervisor*		D	D	D	D	D		1.00
Medical Records Clerk*		2D	2D	2D	2D	2D		2.00
Medical Records Clerk*		D	D	D	D	D		1.00

			I	1					
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Dispensary - MCIW									
Administrator*		D	D	D	D	D		1.00	
Assistant Director of Nurses*		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
HR/Staffing Clerk*		D	D	D	D	D		1.00	
X Ray Tech (Flexible)		D	D	D	D	D		1.00	
Physician* **		D	D	D	D	D		1.00	
Physicians (Flexible)		D						0.20	
PA/NP (Flexible)	D	D	D	D	D	D	D	1.40	
RN - Charge		D	D	D	D	D		1.00	
RN	2D	2D	2D	2D	2D	2D	2D	2.80	
LPN**	2D	2D	2D	2D	2D	2D	2D	2.80	
Cert. Medicine Aide**		D	D	D	D	D		1.00	
PA/NP (Flexible)	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	3E	2E	2E	2E	2E	2E	3E	2.80	
LPN**	2E	2E	2E	2E	2E	2E	2E	2.80	
Cert. Medicine Aide**	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	3E	2N	2N	2N	N	N	3E	2.80	
LPN	N	N	N	N	N	N	N	1.40	
Infirmary - MCIW									
Physicans (Flexible)**	.5D	D	D	D	D	D	.5D	1.20	
RN - Charge		D	D	D	D	D		1.00	
RN	D						D	0.40	
LPN /CNA	2D	2D	2D	2D	2D	2D	2D	3.40	
PA/NP (Flexible)**	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN	Е	Е	Е	Е	Е	Е	Е	1.40	
PA/NP Infirmary/Dispensary (Flexible)**	N	N	N	N	N	N	N	1.40	
RN	N	N	N	N	N	N	N	1.40	
LPN	N	N	N	N	N	N	N	1.40	
Medical Records - MCIW									
Medical Records Supervisor*		D	D	D	D	D		1.00	
Medical Records Clerk		2D	2D	2D	2D	2D		2.00	

#### Service Delivery Area: Jessup Medical Services

		Medical Services							
Position - Jessup	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Dispensary - PATX									
Assistant Director of Nurses*		D	D	D	D	D		1.00	
Administrator*		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
Physician* **		D	D	D	D	D		1.00	
PA/NP (Flexible)	.5D	.5D	.5D	.5D	.5D	.5D	.5D	0.70	
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN	D	D	D	D	D	D	D	1.40	
LPN	D	D	D	D	D	D	D	2.80	
RN	E	Е	Е	Е	Е	Е	Е	1.40	
LPN	E	Е	Е	Е	Е	Е	Е	1.40	
LPN	Е	Е	E	Е	E	Е	Е	2.80	
RN	N	N	N	N	N	N	N	1.40	
Medical Records - PATX									
Medical Records Clerk*		2D	2D	2D	2D	2D		2.00	
Medical Records Clerk*		D	D	D	D	D		0.75	
Dispensary - MCIJ									
Administrator*		D	D	D	D	D		1.00	
Assistant Director of Nurses*		D	D	D	D	D		1.00	

Dispensary - MCIJ									
Administrator*		D	D	D	D	D		1.00	
Assistant Director of Nurses*		D	D	D	D	D		1.00	
Secretary*		D	D	D	D	D		1.00	
Infection Control Clerk*		D	D	D	D	D		1.00	
Physician* **		D	D	D	D	D		1.00	
PA/NP (Flexible)	.5D	0.70							
RN - Infection Control Coordinator*		D	D	D	D	D		1.00	
RN - Infection Control*		D	D	D	D	D		1.00	
LPN - Infection Control*		2D	2D	2D	2D	2D		2.00	
LPN - Infection Control*		D	D	D	D	D		1.00	
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN**	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**		D	D	D	D	D		1.00	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN**	Е	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide**		Е	Е	Е	Е	Е		1.00	
RN	N	N	N	N	N	N	N	1.40	
Medical Records - MCIJ									
Medical Records Clerk*		2D	2D	2D	2D	2D		2.00	

Medical Services									
Position - Jessup	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Infirmary - JRH (MHC)									
Director of Nurses*		D	D	D	D	D		1.00	
Assistant Director of Nurses*		D	D	D	D	D		-	
Administrator*		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
HR / Staffing Clerk*		D	D	D	D	D		1.00	
Speciality Clinics Clerk*		D	D	D	D	D		1.00	
Physicians (Flexible)			D	D	D	D		0.80	
PA/NP (Flexible)	Е	Е	Е	Е	E	Е	Е	1.40	
RN - Charge	D	D	D	D	D	D	D	1.40	
RN		2D	2D	2D	2D	2D		2.00	
LPN**	2D	D	D	D	D	D	2D	1.80	
Cert. Medicine Aide** /CNA		D	D	D	D	D		2.80	
RN	Е	Е	Е	Е	E	Е	Е	1.40	
LPN	2E	2E	2E	2E	2E	2E	2E	2.80	
RN	N	N	N	N	N	N	N	1.40	
LPN	2N	2N	2N	2N	2N	2N	2N	2.80	
Dispensary - HTBC - CLOSED									
Physicians (Flexible)**									
RN - Charge									
RN (Flexible)									
Medical Records - HTBC									
Medical Records Clerk* (Flexible)									
	_								
Dispensary - BBCF									
Physicians (Flexible)**		D	D	D	D	D		0.50	
RN - Charge		D	D	D	D	D		1.00	
RN	D						D	0.40	
LPN		D	D	D	D	D		1.00	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN		Е	Е	Е	Е	Е		1.00	
RN	N	N	N	N	N	N	N	1.40	
Medical Records - BBCF									
Medical Records Clerk*		2D	2D	2D	2D	2D		2.00	
Dispensary - JPRU									
Physician* **		D	D	D	D	D		0.50	
RN - Charge		D	D	D	D	D		1.00	
RN	D						D	0.40	
LPN		D	D	D	D	D		1.00	
RN	Е	Е	Е	Е	E	E	Е	1.40	
Medical Records - JPRU									
0	T								

Medical Records Clerk\*

1.00

#### Service Delivery Area: Jessup Medical Services

			Medica	l Services	1			1	
Position - Jessup	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Dispensary - CLF									
Physician* **		D	D	D	D	D		0.50	
RN - Charge		D	D	D	D	D		1.00	
RN	D						D	0.40	
LPN (Flexible)		D	D	D	D	D		1.00	
RN	Е	Е	E	Е	E	Е	Е	1.40	
Medical Records - CLF									
Medical Records Clerk* (Flexible)		D	D	D	D	D		1.00	
Dispensary - BPRUW - CLOSED									
Physicians (Flexible)**									
RN - Charge									
LPN (Flexible)									
Medical Records - BPRUW									
Medical Records Clerk* (Flexible)									
	<u>.</u>	•	•	•	•		•	•	
Dispensary - EPRU									
Physicians (Flexible)**		D	D					0.45	
RN - Charge		D	D	D	D	D		1.00	
Medical Records - EPRU									
Medical Records Clerk* (Flexible)		.25D	.25D	.25D	.25D	.25D		0.25	
Dispensary - SMPRU									
Physicians (Flexible)**		D	D					0.40	
RN - Charge		D	D	D	D	D		1.00	

.25D

.25D

.25D

.25D

.25D

0.25

Medical Records - SMPRU

Medical Records Clerk\* (Flexible)

#### Service Delivery Area: Eastern Medical Services

	1	1	1	1			1	1	
Position - ECI	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	Hourly Rate
Administrative Personnel - ECI									
Medical Director* **		D	D	D	D	D		1.00	
Director of Nurses*		D	D	D	D	D		1.00	
Assistant Director of Nurses*		D	D	D	D	D		1.00	
X Ray Tech (Flexible)		D		D				0.40	
Phlebotomist		D	D	D	D	D		1.00	
Secretary*		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
Infection Control Clerk*		D	D	D	D	D		1.00	
Specialty Clinics Clerk*		2D	2D	2D	2D	2D		2.00	
Clinical Staff - ECI									
Physician**	D	2D	D	2D	D	2D	D	2.00	
PA/NP**	D	2D	2D	2D	2D	2D	D	2.40	
PA/NP**	Е	Е	Е	Е	Е	Е	Е	1.40	
Dispensary East - ECI									
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN**	D	D	D	D	D	D	D	1.40	
LPN			D					0.20	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN**	Е	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide**	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	
LPN (Flexible)	.5N	.5N	.5N	.5N	.5N	.5N	.5N	0.70	
Dispensary West - ECI									
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN**	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
RN	2E	2E	2E	2E	2E	2E	2E	2.80	
LPN**	Е	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide**		Е	Е	Е	Е	E		1.00	
RN	N	N	N	N	N	N	N	1.40	
LPN (Flexible)	.5N	.5N	.5N	.5N	.5N	.5N	.5N	0.70	
Infection Control - ECI									
PA/NP**		D	D	D	D	D		1.00	
RN - Infection Control Coordinator *		D	D	D	D	D		1.00	
LPN Infection Control		2D	2D	2D	2D	2D		2.00	
LPN Infection Control		D	D	D	D	D		1.00	
Infirmary - ECI									
RN - Charge (Flexible)		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN /CNA	D	D	D	D	D	D	D	2.80	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN	Е	Е	E	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	

#### Service Delivery Area: Eastern Medical Services

Position - ECI	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Chronic Care - ECI									
RN - Chronic Care Nurse (Flexible)		D	D	D	D	D		1.00	

Medical Records - ECI							
RHIT/RHIA*	D	D	D	D	D	1.00	
Medical Records Clerk*	3D	3D	3D	3D	3D	3.00	
Medical Records Clerk* (Flexible)	.5E	.5E	.5E	.5E	.5E	0.50	
Medical Records Clerk* (Flexible)	.5N	.5N	.5N	.5N	.5N	0.50	

Dispensary Annex - ECI									
RN Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN	.5D	0.70							
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN	.5E	0.70							

Dispensary PHPRU							
RN (Flexible)	D/E	D/E	D/E	D/E	D/E	1.00	

#### Service Delivery Area: Western Medical Services

Position - Hagerstown	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	Hourly Rate
Administrative Personnel - MCIH									
Medical Director* **		D	D	D	D	D		1.00	
Physician* **		D	D	D	D	D		1.00	
Director of Nurses*		D	D	D	D	D		1.00	
Assistant Director of Nurses*		D	D	D	D	D		1.00	
Adminstrator*		D	D	D	D	D		1.00	
X Ray Tech (Flexible)		D	D	D	D	D		1.00	
Secretary*		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
Infection Control Clerk*		D	D	D	D	D		1.00	
Specialty Clinics Clerk*		2D	2D	2D	2D	2D		2.00	
HR / Staffing Clerk*		D	D	D	D	D		1.00	
Supply Clerk*		D	D	D	D	D		1.00	

Dispensary MCIH									
Physician* ** (Flexible )		D	D	D	D	D		1.00	
PA/NP (Flexible )	D	D	D	D	D	D	D	1.40	
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN**	D	D	D	D	D	D	D	1.40	
LPN	2D	2D	2D	2D	2D	2D	2D	2.80	
LPN Ombudsman		1/2D	1/2D	1/2D	1/2D	1/2D		0.50	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
PA/NP (Float)	E	Е	Е	Е	Е	Е	Е	1.40	
RN	E	Е	Е	Е	Е	Е	Е	1.40	
LPN**	E	Е	Е	Е	Е	Е	Е	1.40	
LPN	E	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide**	E	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	
LPN	N	N	N	N	N	N	N	1.40	
LPN	N	N	N	N	N	N	N	1.40	
Infirmary MCIH									
Physicians (Flexible)	D						D	0.40	
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN	D	D	D	D	D	D	D	1.40	
RN	E	Е	Е	Е	Е	Е	Е	1.40	
LPN	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	

# Service Delivery Area: Western Medical Services

			Medica	l Services					
Position - Hagerstown	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Chronic Care Clinic - MCIH									
RN - Chronic Care Nurse		D/E	D/E	D/E	D/E	D/E		1.00	
Infection Control - MCIH									
RN - Infection Control Coordinator* (Flexible)		D	D	D	D	D		1.00	
LPN Infection Control		3D	3D	3D	3D	3D		3.00	
LPN Infection Control		D	D	D	D	D		1.00	
Medical Records - MCIH									
RHIT/RHIA*		D	D	D	D	D		1.00	
Medical Records Supervisor*		D	D	D	D	D		1.00	
Medical Records Clerk*		3D	3D	3D	3D	3D		3.00	
	_								
Dispensary - MCTC									
Physician* **		D	D	D	D	D		1.00	
PA/NP (Flexible )	D	D	D	D	D	D	D	1.40	
RN - Charge		D	D	D	D	D		1.00	
RN	2D	2D	2D	2D	2D	2D	2D	2.80	
LPN**	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
RN	2E	2E	2E	2E	2E	2E	2E	2.80	
LPN**	Е	Е	Е	Е	E	Е	Е	1.40	
Cert. Medicine Aide**	Е	Е	Е	Е	E	Е	Е	1.40	
RN	2N	2N	2N	2N	2N	2N	2N	2.80	
Medical Records - MCTC									
Medical Records Supervisor*		D	D	D	D	D		1.00	
Medical Records Clerk*		3D	3D	3D	3D	3D		3.00	
Dispensary - RCI									
Physician* **		D	D	D	D	D		1.00	
PA/NP (Flexible )	D	D	D	D	D	D	D	1.40	
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN**	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN**	Е	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide**	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	
Medical Records - RCI									

D

Medical Records Supervisor\*

Medical Records Clerk\*

D

D

D

D

D

D

D

D

1.00

2.00

# Service Delivery Area: Western Cumberland Medical Services

				Medical Serv					
Position - Cumberland - WCI	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	Hourly Rate
Administrative Personnel									
Medical Director* **		D	D	D	D	D		1.00	
Director of Nurses*		D	D	D	D	D		1.00	
Assistant Director of Nurses*		D	D	D	D	D		1.00	
Administrator*		D	D	D	D	D		1.00	
Secretary*		D	D	D	D	D		1.00	
Administrative Assistant*		D	D	D	D	D		1.00	
Infection Control Clerk*		D	D	D	D	D		1.00	
Specialty Clinics Clerk*		D	D	D	D	D		1.00	
	•								
Clinical - WCI									
PA/NP**		D	D	D	D	D		1.00	
PA/NP**	Е	Е	Е	Е	Е	Е	Е	0.90	
Physicians**	D	D	D	D	D	D	D	1.50	
Dispensary - WCI									
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN**	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide**	D	D	D	D	D	D	D	1.40	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN**	Е	Е	Е	Е	Е	Е	Е	1.40	
Cert. Medicine Aide**	Е	Е	Е	Е	Е	Е	Е	1.40	
RN	N	N	N	N	N	N	N	1.40	
Infection Control Staff - WCI									
RN - Infection Control Coordinator*		D	D	D	D	D		1.00	
LPN Infection Control		D	D	D	D	D		1.00	
LPN Infection Control - Task 5		D	D	D	D	D		1.00	
Infirmary - WCI									
RN - Charge		D	D	D	D	D		1.00	
RN	D	D	D	D	D	D	D	1.40	
LPN	D	D	D	D	D	D	D	1.40	
RN	Е	Е	Е	Е	Е	Е	Е	1.40	
LPN (Flexible)	1.5E	1.5E	1.5E	1.5E	1.5E	1.5E	1.5E	2.10	
RN	N	N	N	N	N	N	N	1.40	
LPN	N	N	N	N	N	N	N	1.40	
[a a a									
Chronic Care Clinic - WCI		-	_	_	-	-			
RN - Chronic Care Nurse		D	D	D	D	D		1.00	
Madical Decoud-									
Medical Records		-	_	_	-	-			
RHIT/RHIA*		D	D	D	D	D	-	1.00	

2D

Medical Records Clerk\*

2D

2D

2D

2D

2.00

#### Service Delivery Area: Western Cumberland Medical Services

n									
Position - NBCI	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	FTE	
Dispensary - NBCI									
Physicians**		D	D	D	D	D		1.00	
PA/NP**	D						D	0.40	
PA/NP**	E	E	Е	Е	Е	Е	Е	1.00	
RN -Charge -		D	D	D	D	D		1.00	
RN -	D	D	D	D	D	D	D	1.40	
LPN - **	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide - **	D	D	D	D	D	D	D	1.40	
Cert. Medicine Aide - ** (Flexible)			D		D	D		0.60	
X-Ray Tech (Flexible) -		.5D	.5D	.5D	.5D	.5D		0.50	
RN -	Е	E	Е	E	Е	Е	Е	1.40	
LPN - **	Е	E	Е	E	Е	Е	Е	1.40	
Cert. Medicine Aide - **	Е	E	Е	E	Е	Е	Е	1.40	
Cert. Medicine Aide - **	E	Е	Е	Е	Е	Е	Е	1.40	
RN -	N	N	N	N	N	N	N	1.40	
LPN (Unfunded)		N	N	N	N	N		1.00	

Medical Records - NBCI							
Medical Records Clerk* -	2D	2D	2D	2D	2D	2.00	

# ATTACHMENT S – RELEASE POLICY

# MARYLAND NOIN OF CORE

**Division of Correction** 

Authorized by: Paul O'Flaherty Assistant Commissioner

of Michael Storeffer

Approved by: J. Michael Stouffer Commissioner

Attachment S Release Policy	
Inmate Release Process	Directive Number: EmD.DOC.230.0005

Related MD Statute/Regulations:

Supersedes: DCIB #33-08,
Western Region Release Process
dated August 27, 2008

Related ACA Standards:

Authorized By:

4-4446 Assistant Commissioner Programs and Services

Related MCCS Standards: Issue Date: March 26, 2009 MCCS .01O, .02Q

Related DOC Directives: Effective Date: March 26, 2009

DCM 100-001; Commitment Procedures Manual; DPSCS Financial Services Manual; OTS Medical Evaluation

Manual
Other References:
Number of Pages: 22

None.

# **Division of Correction Emergency Directive**

# .01 Purpose.

- A. This directive establishes policy and procedure to release a Division of Correction (DOC) inmate housed in a DOC facility.
- B. This directive establishes policy and procedure necessary to implement the provisions of the Memoranda of Understanding between the Maryland (MD):
  - (1) Division of Correction (DOC);
  - (2) Division of Vital Records (DVR);
  - (3) Motor Vehicle Administration (MVA); and

Title:

(4) Social Security Administration (SSA).

# .02 Scope.

This directive applies to a Department agency involved in release of an inmate in custody of the DOC.

# .03 Policy.

- A. Absent an exceptional circumstance, the DOC is responsible for:
- (1) Ensuring each inmate with a new commitment and received at the Maryland Reception Diagnostic and Classification Center (MRDCC) and the Maryland Correctional Institution for Women (MCIW) after December 1, 2008 receives an Individual Case Plan (ICP);

- (2) Ensuring the release of a male inmate from a facility or regional release center in the geographical region of the inmate's home plan;
- (3) Excluding a male inmate with an adjudicated or unadjudicated detainer or open charge, transporting a male inmate to a regional release center within the inmate's home plan area, a minimum of 1 day prior to the inmate's release;
- (4) Ensuring the release of a female inmate from the MCIW or the Baltimore Pre-Release Unit for Women:
- (5) Ensuring, prior to release, an inmate that volunteers, receives assistance in obtaining a:
  - (a) Birth Certificate;
  - (b) Social Security Card;
  - (c) DOC or MD MVA identification (ID) card; and
  - (d) Certificate of Release or Discharge from Active Duty (Form DD214);
- (6) Ensuring an inmate has the opportunity to apply for a birth certificate and MD MVA ID card application and Form DD214, at no cost to the inmate; and
- (7) Ensuring, prior to release an inmate receives a release resource packet.
- B. The DOC is responsible for releasing an inmate with:
- (1) A completed Continuity of Care form, including a referral to a community provider, if applicable;
- (2) If applicable, a 30-day supply of chronic care medication and the remaining dose of any short term antibiotic or medication;
- (3) \$50 cash; and
- (4) The release documentation envelope.

# .04 Definitions.

- A. In this directive, the following terms have the meanings indicated.
- B. Terms Defined.
- (1) "CARC" means Community Adult Rehabilitation Center.
- (2) "Central Region" means a DOC facility located in Baltimore City, Anne Arundel, Carroll and Charles County.

(a)	The	e Central Region includes the:
	(i)	Baltimore City Correctional Center (BCCC);
	(ii)	Baltimore Pre-Release Unit (BPRU);
	(iii)	Maryland Correctional Adjustment Center (MCAC);
	(iv)	Maryland Reception Diagnostic and Classification Center (MRDCC);
	(v)	Metropolitan Transition Center (MTC);
	(vi)	Brockbridge Correctional Facility (BCF);
	(vii)	Jessup Pre-Release Unit (JPRU);
	(viii)	Herman L. Toulson Bootcamp (HLTBC);
	(ix)	Jessup Correctional Institution (JCI);
	(x)	Maryland Correctional Institution Jessup (MCIJ);
	(xi)	Central Laundry Facility (CLF); and
	(xii)	Southern Maryland Pre-Release Unit (SMPRU); and
(b)	) "C	Central Region" also means an inmate with a home plan in:
	(i)	Anne Arundel County;
	(ii)	Baltimore City;
	(iii)	Baltimore County;
	(iv)	Calvert County;
	(v)	Carroll County;
	(vi)	Cecil County;
	(vii)	Charles County;
	(viii)	Harford County;
	(ix)	Howard County;
	(x)	Montgomery County;

(xi)	Prince George's County;	
(xii) Queen Anne's; and		
(xiii) S	St. Mary's County.	
(3) "Eastern Region" means a DOC facility located in Somerset and Wicomico County.		
(a)	The Eastern Region includes the:	
(i)	Eastern Correctional Institution (ECI);	
(ii)	Eastern Correctional Institution Annex (ECI-A);	
(iii)	Poplar Hill Pre-Release Unit (PHPRU); and	
(iv)	Eastern Pre-Release Unit (EPRU); and	
(b) '	The Eastern Region also means an inmate with a home plan in:	
(i)	Caroline County;	
(ii)	Dorchester County;	
(iii)	Kent County;	
(iv)	Somerset County;	
(v)	Talbot County;	
(vi)	Wicomico County; and	
(vii	) Worcester County.	
(4) "Ex	ceptional Circumstance" means an event or an occurrence that:	
(a) l	Prohibits or limits processing an inmate according to this directive; and	
(b)	Releases an inmate without advance notice, such as a:	
(i)	Court release;	
(ii)	Modification of sentence; and	
(iii)	Commitment re-calculation.	

- (5) "Facility Coordinator" means an employee responsible for processing a request and application for an inmate's personal ID documents.
- (6) "Individual Case Plan (ICP)" means:
  - (a) A network based automated plan developed and implemented to provide an opportunity for the inmate to maintain a viable and productive life and for successful re-entry into the community;
  - (b) A multi page plan consisting of identifying issues and strategies for remediation including:
    - (i) Risk factors;
    - (ii) Criminogenic needs;
    - (iii) Substance abuse;
    - (iv) Education;
    - (v) Social or family concerns;
    - (vi) Employment History;
    - (vii) Medical and mental health needs; and
    - (viii) Referrals to cognitive and other therapeutic groups; and
  - (c) A network based automated progress sheet known as "Case Notes", and a release plan.
- (7) "Maintaining Facility" means a facility that will release the inmate, where no transfer to a receiving facility is necessary as prescribed by this directive.
- (8) "Managing Official" means the person responsible for the administration and operation of a correctional facility. The managing official is routinely the:
  - (a) Warden:
  - (b) Facility Administrator; or
  - (c) A designee.
- (9) "Personal ID Documents" means an inmate's personal identification documents requested prior to release, including a:
  - (a) Birth Certificate (MD or out-of-state);
  - (b) Social Security Card;

(c)

DOC or MD MVA identification card; and

(d)	Certificate of Release or Discharge from Active Duty (Form DD214).
(10) '	'Personal Identification card' means DOC ID or MD MVA ID.
. ,	'Receiving Facility' means a DOC facility receiving an inmate a minimum of 1 day prior to the nmate's release with a home plan in its geographic region.
	'Regional Release Center' means a facility that releases an inmate with a home plan in the center's geographical region when the maintaining facility is outside the region.
	'Release Documentation Envelope' means an envelope containing each personal ID document gathered by DOC and departmental staff prior to an inmate's release which may contain:
(a)	The release certificate;
(b)	Birth Certificate;
(c)	Social Security Card;
(d)	MD MVA Identification card;
(e)	Military Discharge Certificate (Form DD214);
(f)	Notice of Sexual Offender Registration Requirements;
(g)	Medication;
(h)	Continuity of Care Form;
(i)	Entitlement information; and
(j)	Money.
	Release Plan" means the culmination of a multi-disciplinary review to assess and develop a comprehensive plan addressing an inmate's needs in the areas of:
(a)	Substance abuse treatment;
(b)	Health care;
(c)	Education;
(d)	Vocational;

Family services; and

(e)

(f) Community transition. (15) "Release Resource Packet" means information detailing available community resources, specifically developed to meet the assessed needs of the inmate following release. (16) "Sending Facility" means a DOC facility sending an inmate a minimum of 1 day prior to the inmate's release to a receiving facility. (17) "Western Region" means a DOC facility located in Allegany County and Washington County. The Western Region includes the: (a) (i) Maryland Correctional Institution-Hagerstown (MCI-H); (ii) Maryland Correctional Training Center (MCTC); (iii) North Branch Correctional Institution (NBCI); (iv) Roxbury Correctional Institution (RCI); and (v) Western Correctional Institution (WCI); and (b) The Western Region also means an inmate with a home plan in: (i) Allegany County; (ii) Frederick County; (iii) Garrett County; and (iv) Washington County. Release Plan/Responsibility. A. The release plan occurs through: (1) Collaborating with each inmate to develop a new or to revise an existing ICP; (2) Documenting case notes for each inmate; (3) Providing each inmate with personal identification documents prior to release; and

B. Director of Volunteer and Transition Services and Community Initiatives Responsibilities.

(4) Providing each inmate with an exit orientation prior to release.

- (1) The Director shall:
  - (a) Serve as the primary contact, for each facility to resolve, operational and financial issues arising from an agreement between the DOC and:
    - (i) DVR;
    - (ii) SSA; and
    - (iii) MD MVA;
  - (b) In cooperation with the managing official or designee, establish a primary and backup facility coordinator for each facility;
  - (c) Provide DVR and SSA with a list identifying the primary and backup facility coordinator of each DOC facility; and
  - (d) Confirm and authorize billing payments for ID documents.
- (2) The director shall track (Appendix 8) and report each inmate that applies, declines, and receives personal ID documents.
- C. Managing Official of a Sending and Maintaining Facility Responsibilities.
- (1) The managing official or designee of a sending facility shall ensure:
  - (a) Except for the release resource packet, the inventorying, packaging and mailing of each inmate property item to the inmate's home plan prior to a transfer to a receiving facility;
  - (b) Case management identifies an inmate for release a minimum of 7 days in advance;
  - (c) If required by \$.05.C.(1)(d)(i)-(iii), an inmate transfers to a regional release center;
  - (d) A minimum of 1 day prior to release, an inmate with a home plan in the:
    - (i) Eastern region, but confined outside of that region, transfers to ECI;
    - (ii) Central region, but confined outside of that region, transfers to MCAC; and
    - (iii) Western Region, but confined outside of that region, transfers to RCI or WCI.
- (2) A minimum of 1 day prior to release, the managing official or designee of a sending facility shall ensure an inmate:
  - (a) Housed at EPRU, with a central region home plan, transfers to BCF notwithstanding §.05.C.(1)(d)(i);

- (b) With an approved out of state home plan, transfers to the regional release center nearest the home plan location;
- (c) With a detainer, transfers to a regional release center, nearest the jurisdiction holding the detainer; and
- (d) Without a home plan, transfers to the regional release center, nearest the sentencing jurisdiction.
- (3) The managing official or designee of the maintaining facility is responsible for ensuring:
  - (a) Case management identifies an inmate for release a minimum of 7 days prior to release;
  - (b) An inmate already housed in the same region as the home plan, remains in that region for release by:
    - (i) The facility currently housing the inmate; or
    - (ii) Any facility within the region;
  - (c) Confiscation of clothing bearing a DOC logo;
  - (d) The inmate retains the release resource packet;
  - (e) The inmate's base file and medical file remain at the facility in accordance with the records retention schedule:
  - (f) Medical staff provides the inmate with a 30-day supply of prescribed chronic care medication, the remaining doses of any short-term antibiotics or medications, and the continuity of care form, prior to release or transfer to a jurisdiction holding a detainer; and
  - (g) Staff release the inmate with:
    - (i) A proper release certificate;
    - (ii) Each personal ID document obtained; and
    - (iii) Money.
- D. Managing Official of a Receiving Facility.
- (1) The managing official or designee of a receiving facility shall ensure staff releases an inmate with:
  - (a) A proper release certificate;
  - (b) Appropriate medication;

(c) Each personal ID document obtained; and

(d)	Mon	ey.
(2)	The ma	anaging official or designee shall permit an inmate to retain the release resource packet.
	Upon a toiletrie	rrival at the receiving facility, the managing official or designee shall provide an inmate with es.
E. Cas	se Mana	agement Responsibilities.
(1) Individual Case Plan.		
(a)	rece	case management manager, or designee, shall ensure an ICP is developed for an inmate ived at a reception unit based on a new commitment, which covers resources detailed in .E.(1)(c)(i)-(vii);
(b)	mair	case management manager, or designee, shall ensure an ICP is developed for an inmate at a ntaining facility, covering resources detailed in §.05.E.(1)(c)(i)-(vii), ng the annual or semi-annual scheduled security reclassification;
(c)	Eacl	h ICP shall identify and address the needs of the inmate utilizing the following resources:
(	(i)	Education;
	(ii)	Vocational;
	(iii)	Substance abuse;
	(iv)	Mental health;
	(v)	Cognitive programs;
(	(vi)	Social work; and
(	(vii)	Community transition resources; and
(d)		case management manager, or designee, shall ensure documentation and maintenance of vant case notes for each inmate.
		se management manager or designee shall provide the OBSCIS projected release report and elease schedule monthly to the following departments:
(a)	Cas	e Management;
(b)	Cust	tody;
		D 10 - £ 22

jurisdiction (any non DPSCS agency).

(c)	) Finance;
(d)	) Medical;
(e)	Mental Health;
(f)	Social Work; and
(g)	) Transition Services.
(3)	The case management manager, or designee, shall distribute an updated OBSCIS projected release report and MAP release schedule as necessary.
(4)	The case management manager, or designee, shall ensure an inmate with an out-of-state home plan is processed in accordance with existing interstate parole procedures.
(5)	If applicable, 30 days prior to the projected release date of an inmate, each department listed in §.05.E.(6) shall administratively:
(a)	Review the projected release report;
(b)	Review the Mutual Agreement Plan (MAP release schedule); and
(c)	Provide the case management manager, or designee, any information relevant to the transition of the inmate to community supervision.
(6)	The multi-disciplinary review referenced in §.05.E.(5) shall be conducted by:
(a)	Case Management;
(b)	) Social Work;
(c)	Mental Health;
(d)	) Medical;
(e)	Addiction; and
(f)	Transition Services.
(7)	Based on information received from the multi-disciplinary review, case management shall conduct a final review of an inmate's ICP 14 days prior to an inmate's release, and make any necessary adjustments.
(8)	The case management manager, or designee, shall ensure, in appropriate cases, the Department of Public Safety and Correctional Services (DPSCS) Transfer Alert form is forwarded to the receiving

- (9) The case management manager, or designee, shall notify the DOC Headquarters Transfer Coordinator, when an inmate from a regional release center is within 7 days of release.
- (10) When an inmate is within 48 hours of release or transfer, designated case management staff shall:
  - (a) Complete a Maryland and National Crime Information Center (NCIC) warrant check and take appropriate steps in accordance with the Case Management Manual; and
  - (b) If applicable, complete the DPSCS Transfer Alert form and email the form to, the receiving facility's case management manager, or designee.
- (11) Upon an inmate's release, the receiving facility's case management manager, or designee, shall:
  - (a) Fax the release documentation to the appropriate DPSCS staff in accordance with the Case Management and Commitment Procedures manuals; and
  - (b) Return each original release document to the sending facility for inclusion in the inmate's base file.

# F. Facility Coordinator Responsibilities.

- (1) The facility coordinator shall:
  - (a) Excluding an inmate with an adjudicated or unadjudicated detainer or open charge, identify an inmate that is 120 through 180 days from release;
  - (b) In a group setting, present the personal ID document process to an inmate who meets the requirement of §.05.F.(1)(a);
  - (c) Assist an inmate with completing the appropriate application form for each ID document;
  - (d) Submit the appropriate application, in a minimum batch order of 2 to the:
    - (i) DVR, Assistant State Registrar: the primary source of contact; or
    - (ii) State Registrar or Deputy Director: the secondary source of contact; and
  - (e) Ensure each application includes the appropriate Tracking Sheet (Appendices 4, 5, 6, 7).
- (2) The facility coordinator shall also:
  - (a) Send DVR, a photocopy of the facility coordinator's state employee ID card for the initial batch order;
  - (b) When submitting a birth certificate, attach a photocopy of the inmate's DOC ID card;
  - (c) When appropriate, submit each required ID document to the MD MVA;

- (d) Send the appropriate application to the SSA branch assigned to the facility;
- (e) Maintain a photocopy of each application and the corresponding tracking sheet;
- (f) Place the ID document in the inmate's basefile; and
- (g) Track and report the issuance of the MVA ID or the DOC ID card at release.
- (3) When an inmate transfers to a pre-release or CARC program prior to submission of an ID request, designated staff at the receiving facility shall process the request and forward the application to the BPRU or MTC facility coordinator for submission to DVR and SSA.
- (4) When an inmate transfers prior to receipt of an ID document, the facility coordinator at the maintaining facility shall forward each document to the appropriate receiving facility for inclusion in the Release Documentation Envelope (Appendix 3).
- (5) By the 15<sup>th</sup> of each month, the facility coordinator shall, forward the following to the Director, Volunteer and Transition Services, and Community Initiatives:
  - (i) A photocopy of each tracking sheet;
  - (ii) A photocopy of each invoice for an inmate held in a CARC facility; and

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- (iii) A photocopy of each month's worksheet (Appendix 8).
- (6) The facility coordinator, release staff and designated staff at the Office of Volunteer and Transition Services, and Community Initiatives shall ensure entry of the following codes on OBSCIS Screen 02 and the date of the action taken:
  - (a) Birth Certificates:

Code	Description
5A BC REQ	Enter to indicate submission of an application for a certified birth certificate.
5B BC DEC	Enter to indicate the inmate declines to authorize an application for a birth certificate.
5C BC REC	Enter to indicate receipt of the birth certificate and placement in section #1 of the inmate's base file.

(b) Social Security Cards:

Code Description

5D SS ID REQU Enter to indicate submission of an application for a duplicate social

security card.

5E SS ID DECL Enter to indicate the inmate declines to authorize an application for

a duplicate social security card.

5F SS ID RECE Enter to indicate receipt of a duplicate social security card and

placement in section #1 of the inmate's base file.

(c) Motor Vehicle Administration ID Card:

Code Description

5M MVA ID REQ Enter to indicate submission of an application for a MD MVA ID

card.

5P MVA ID DEC Enter to indicate the inmate declines to authorize an application for

a MD MVA ID card. If the inmate decides to participate in the

future, removal of this alert is required.

5N MVA REC Enter to indicate receipt and placement of the MD MVA ID card in

section #1 of the inmate's base file.

(7) The Case Management Manager or a designee shall ensure entry of the following codes on the OBSCIS Screen 02 and the date of action taken:

(a) Military Discharge Certification:

Code Description

5J DD214 REQ Enter to indicate submission of an application for a Certificate of

Release or Discharge from Active Duty (Form DD214).

5K DD214 RECV Enter to indicate receipt of an application for a Certificate of

Release or Discharge from Active Duty (Form DD214 form) and

placement in section #1 of the inmate's base file.

(b) Release Plan:

Code Description

5R REL PLAN DEV Enter to indicate the development of the release plan based on

information received as the result of the multi-disciplinary review.

(8) Release staff shall ensure entry of the following codes on OBSCIS Screen 02 and the date of action taken:

(a) Picture ID Cards:

Code Description

5S DOC ID REL Enter to indicate issuance of a DOC picture identification card to

the inmate at the time of release.

5Q MVA ID ISS Enter to indicate issuance of an MD MVA picture ID to the inmate

at the time of release.

(b) Release Documents:

Code Description

5H REL DOC RECV Enter to indicate issuance of each release document (i.e., DVR,

SSA, DD 214, DOC ID, or MD MVA ID, and release resource

packet) to the inmate prior to release from custody.

# G. Medical Responsibilities:

(1) The nurse manager, or designee, shall:

- (a) Review the projected release report and MAP release schedule received from case management and forward any information relative to the development of the inmate's release plan;
- (b) Refer to the Social Work Department an inmate with a stable chronic illness, that requires referral to a community health care provider, when the inmate is within 9 months of release;
- (c) Refer to mental health, or psychiatry an inmate that needs a medication review or adjustment 30 days prior to release;
- (d) Notify the Mental Health Department if an inmate is on psychiatric medication upon:
  - (i) Reviewing the projected release report;
  - (ii) Reviewing the 2 thru 24 month release list; and
  - (iii) Reviewing the MAP release schedule;
- (e) For each inmate with a current prescription at the time of release, and two weeks in advance of release:
  - (i) Order a 30 day supply of chronic care medication; and
  - (ii) Order the remaining doses of short-term antibiotics; and

- (f) Twenty four hours prior to release or transfer to a regional release center:
  - (i) Complete and discuss the Continuity of Care form with the inmate;
  - (ii) Discuss details regarding ongoing treatment, medication, and general guidelines for continued care;
  - (iii) Place a photocopy of the form in the Release Documentation Envelope (Appendix 3); and
  - (iv) Place the inmate's medication in the Release Documentation Envelope (Appendix 3) prior to the inmate's release or transfer to a regional release center.
- (2) When the court releases an inmate, the case management manager or designee, shall make every effort to reach the inmate through mail and collaboration with:
  - (a) A community health organization;
  - (b) An outreach organization;
  - (c) Medical staff; or
  - (d) The immediate family.
- (3) If the case management manager, or designee, is unable to reach the inmate through mail or collaboration as outlined above, the case management manager, or designee, shall use any other means of contact available to the facility.
- H. Mental Health Responsibilities.
- (1) The chief psychologist or lead mental health worker, or designee, shall:
  - (a) Review the projected release report and MAP release schedule received from case management and forward any information relative to the development of the inmate's release plan;
  - (b) Determine if a inmate listed on the report or schedule in §.05.H.(1)(a) is being treated for mental illness and needs a referral to Social Work for release planning;
  - (c) Identify if an inmate on the report or schedule in §.05.H.(1)(a) needs a medication review or adjustment prior to release, and make the changes necessary; and
  - (d) Process a referral from other departments.
- (2) The chief psychologist, lead mental health worker, or designee, shall make an appropriate referral to a community provider.

- I. Social Work Responsibilities.
- (1) The Regional Social Work Supervisor or designee shall:
  - (a) Review the projected release report and MAP release schedule received from case management and forward any information relative to the development of the inmate's release plan;
  - (b) Identify an active social work case, and initiate release planning, if appropriate;
  - (c) Process a referral from another department; and
  - (d) Process entitlement documentation as necessary.
- (2) The regional social work supervisor, or designee, shall ensure the inmate is referred to the appropriate community provider.
- J. Commitment Responsibilities.
  - (1) The commitment manager or designee is responsible for:
    - (a) Verifying the release date;
    - (b) Preparing the Mandatory Supervision Release Certificate; and
    - (c) Preparing the Expiration Release Certificate.
  - (2) The Commitment manager, or designee, shall complete the items listed in §.05.J.(1)(a)-(c) 7 days prior to release.
  - (3) The regional commitment office preparing the release certificate shall monitor an inmate's release date in accordance with the Case Management and Commitment Procedures Manuals for a change to any of the following:
    - (a) Infraction;
    - (b) Automatic loss of special project credit (SPC) housing;
    - (c) Court date: and
    - (d) Additional sentence.
  - (4) The receiving facility's case management manager, or designee, shall proceed with the inmate's release when no change occurs to affect the release date.

- (5) The commitment manager or designee shall notify the case management supervisor or designee in the receiving facility when a change affects the inmate's release date to coordinate:
  - (a) Releasing the inmate before the release date, for time served or as a court release;
  - (b) Executing a new certificate; or
  - (c) Returning the inmate, to the sending facility, with the Director of Case Management and the Assistant Commissioner of Program and Services.

# K. Finance Office Responsibilities.

- (1) The fiscal services chief of the maintaining facility, or of the sending facility in a case where an inmate is released from a regional release center, shall ensure the finance department processes the inmate's account according to:
  - (a) Maryland Offender Banking System (MOBS) Manual;
  - (b) DPSCS Financial Operations Manual; and
  - (c) Accepted accounting principles.
- (2) The fiscal services chief of the maintaining facility or of the sending facility shall also ensure:
  - (a) A non-indigent inmate, prior to release, receives \$50 in cash and the remaining balance is handled according to the DPSCS Financial Operations Manual; and
  - (b) An indigent inmate, prior to release, receives \$50 in cash.
- L. Maryland Parole Commission Responsibilities.
- (1) The Maryland Parole Commission is responsible for notifying case management staff 7 days prior to a parole release.
- (2) The Maryland Parole Commission is also responsible for contacting each party prior to the inmate's release, if any changes or revisions occur.
- M. The Release Officer Responsibilities.
- (1) The release officer, or designee, is responsible for:
  - (a) Confirming the inmate movement;
  - (b) Contacting the following 1 day prior to an inmate transfer:

- (i) DOC Headquarters Transfer Coordinator; and
- (ii) Nurse Manager or designee; and
- (c) Confirming the content in the Release Documentation Envelope (Appendix 3), and sealing and signing the envelope prior to the inmate's release or transfer to a regional release center.
- (2) The release officer, or designee, shall also follow procedures for an inmate with adjudicated or unadjudicated detainer or open charge.
- N. Transportation Responsibilities.
  - (1) The Transportation Unit Commander is responsible for:
    - (a) Coordinating transportation of an inmate to the regional release center based on the inmate's home plan;
    - (b) Ensuring transportation of an inmate occurs in accordance with Department and DOC policy and procedures; and
    - (c) Arranging a special trip for an inmate requiring immediate release.
- (2) The transporting officer shall deliver the inmate's sealed Release Documentation Envelope (Appendix 3) to the receiving facility, containing the:
  - (a) If applicable, Birth Certificate;
  - (b) If applicable, Social Security Card;
  - (c) If applicable, Certificate of Release or Discharge from Active Duty (Form DD214);
  - (d) Excluding MCPRS, release identification;
  - (e) Continuity of Care form;
  - (f) If applicable, medication;
  - (g) If applicable, entitlement documentation;
  - (h) If applicable, Notice of Sexual Offender Registration Requirements; and
  - (i) Inmate property inventory sheet.
- (3) The transporting officer may not transport any inmate property to the receiving facility.

- O. Release Documentation Envelope.
  - (1) A case management specialist, or a designee at the sending, or maintaining facility, shall create and place the following in the Release Documentation Envelope (for filing in section 1 of the inmate's basefile) upon receipt:
    - (a) Release certificate;
    - (b) If applicable, Birth Certificate;
    - (c) If applicable; Social Security Card;
    - (d) If applicable, Military Discharge Certificate (Form DD214); and
    - (e) If applicable, Notice of Sexual Offender Registration Requirements.
  - (2) Prior to the inmate's release, a medical employee shall place the following in the envelope:
    - (a) Medication; and
    - (b) Continuity of Care Form.
  - (3) If applicable, a Social Work employee shall place entitlement documentation in the envelope, prior to the inmate's release.
  - (4) Prior to the inmate's release, the release coordinator or release officer or designee at sending facility shall:
    - (a) Seal and sign the envelope;
    - (b) Staple the release certificate to the envelope; and
    - (c) Photocopy the front of the envelope and forward a photocopy of the envelope to the basefile.
  - (5) Prior to the inmate's release, the release coordinator or release officer or designee at the maintaining facility shall:
    - (a) Seal and sign the envelope;
    - (b) Have the inmate sign the envelope; and
    - (c) Give the envelope to the inmate upon release.
  - (6) The transportation officer shall sign and verify receipt of a sealed envelope.

- (7) When a regional release center releases an inmate, the maintaining or receiving facility case management manager or designee shall:
  - (a) Sign verifying receipt of a sealed envelope;
  - (b) Have the inmate sign the envelope;
  - (c) Photocopy the front of the envelope to be placed in the base file; and
  - (d) Give the envelope to the inmate upon release.
- P. This directive supersedes any existing DOC or institutional directive that may conflict with the policy or procedures written in this directive.
- Q. A facility may not issue an institutional directive on this subject.
- R. Audit Compliance Coordinator Responsibilities.
  - (1) The audit compliance coordinator shall ensure the appropriate department completes Appendix 1, during the self-audit at the facility, to ensure compliance with this directive.
  - (2) Upon receipt of Appendix 1 from the appropriate department, the audit compliance coordinator shall:
    - (a) Review and maintain a photocopy of Appendix 1;
    - (b) Forward a photocopy of Appendix 1 to the:
      - (i) Director, Office of Policy Development, Analysis and Management;
      - (ii) Director, Volunteer and Transition Services and Community Initiatives; and
      - (iii) Director, Case Management; and
    - (c) Ensure development and monitoring of the facility compliance plan for any area of non-compliance.

# .06 Attachment(s).

- A. Appendix 1, Policy Management Audit Form (DOC Form 1-2aR).
- B. Appendix 2, Policy Management Compliance Plan (DOC Form 1-2bR).
- C. Appendix 3, Release Documentation Envelope (DOC Form 230.0005cR).
- D. Appendix 4, Birth Certificate Tracking Sheet.

- E. Appendix 5, Out of State Birth Certificate Tracking Sheet.
- F. Appendix 6, Motor Vehicle Administration Tracking Sheet.
- G. Appendix 7, Social Security Administration Tracking Sheet.
- H. Appendix 8, Inmate ID Document Worksheet.

# .07 History.

This directive rescinds Division of Correction Information Bulletin (DCIB) # 33-08; Western Release Process.

# .08 Distribution: A, L, S