

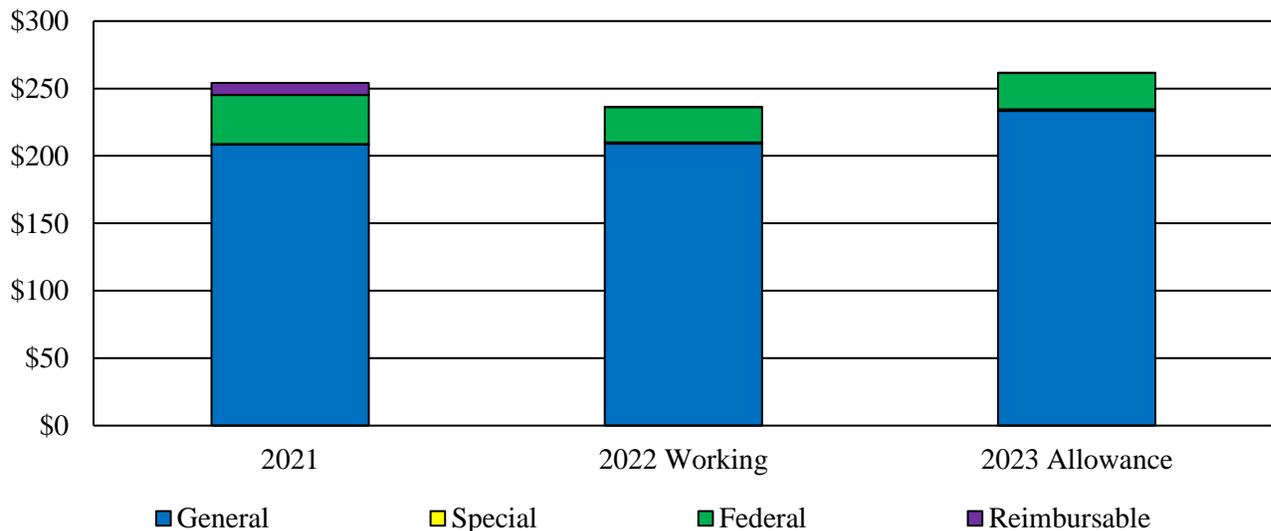
Q00T04
Division of Pretrial Detention and Services
Department of Public Safety and Correctional Services

Executive Summary

The Division of Pretrial Detention and Services (DPDS) is responsible for processing and managing the care, custody, and control of Baltimore City arrestees and detainees in a safe, humane, and secure environment. DPDS also supervises the operation of all Baltimore City Department of Public Safety and Correctional Services (DPSCS) facilities, some of which incarcerate a portion of the State-sentenced inmate population as well as federal detainees. DPDS also oversees the Pretrial Release Services Program (PRSP), which interviews, investigates, and presents recommendations to Baltimore City courts concerning the pretrial release of individuals accused of crimes in Baltimore as well as supervises those released on personal recognizance.

Operating Budget Summary

**Fiscal 2023 Budget Increases \$25.3 Million, or 10.7%, to \$261.7 Million
(\$ in Millions)**



Note: The fiscal 2022 working appropriation and fiscal 2023 allowance do not reflect funding for statewide personnel actions budgeted in the Department of Budget and Management, which include cost-of-living adjustments, increments, bonuses, and may include annual salary review adjustments.

- Realignment of inmates and staff from the Department of Correction (DOC) to DPDS facilities drives the budget increase.

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Key Observations

- ***Substance Use Disorder (SUD) Spending Remains Too Low:*** Funding for SUD treatment services are perennially underutilized, and staff vacancies are very high.
- ***Arrests and Commitments Decline, but Population in Custody Stagnates:*** The COVID-19 pandemic affected court processing speeds, leading to a backup of inmates held in DPDS facilities on pretrial detention. At the same time, arrests and sentenced offenders declined.

Operating Budget Recommended Actions

1. Add budget bill language restricting funds in substance use disorder treatment subprograms to only those subprograms.

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Operating Budget Analysis

Program Description

DPDS is responsible for processing and managing the care, custody, and control of Baltimore City arrestees and detainees in a safe, humane, and secure environment. DPDS operates five detention facilities including the Baltimore Central Booking and Intake Center (BCBIC); the Metropolitan Transition Center (MTC); the Youth Detention Center; the Maryland Reception, Diagnostic, and Classification Center (MRDCC) and the Chesapeake Detention Facility (CDF), which houses federal offenders for the U.S. Marshals Service. The Baltimore City Correctional Center (BCCC) is a correctional facility holding short-sentenced prisoners that falls under the budgetary organization of DPDS due to their location. PRSP is also operated by DPDS and provides investigative and supervisory services regarding the pretrial release of individuals accused of crimes in Baltimore City.

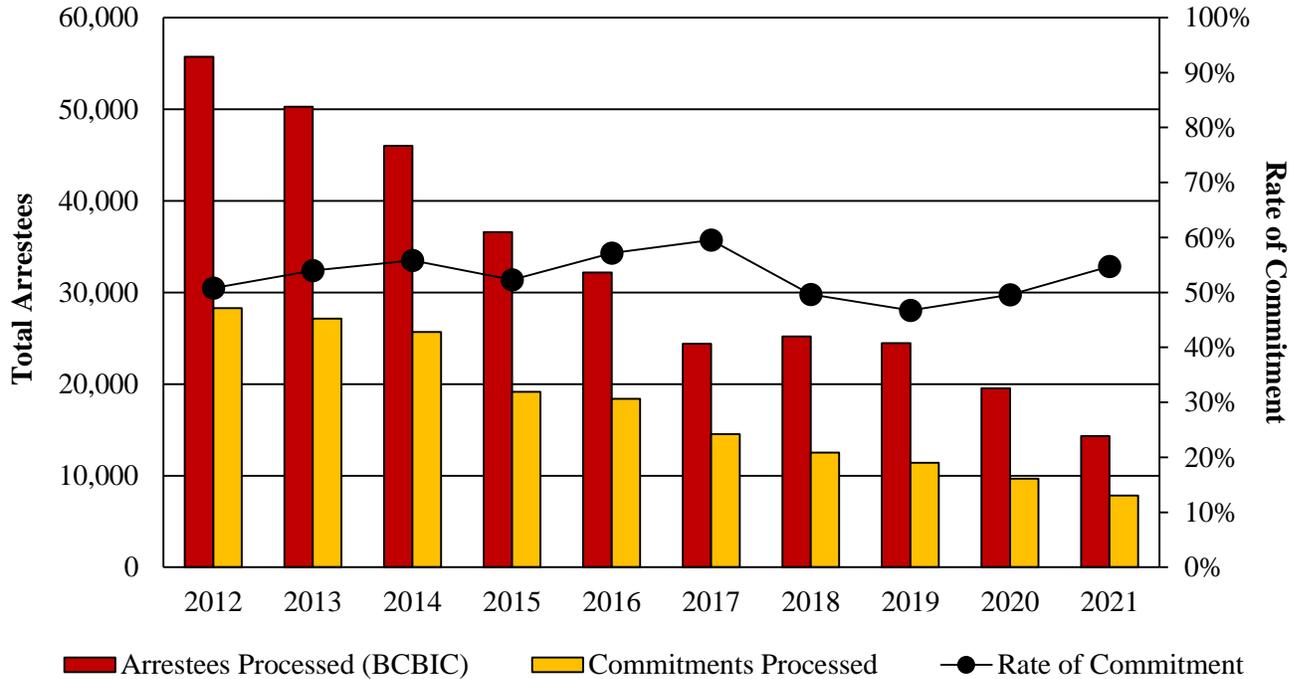
Performance Analysis: Managing for Results

1. Arrests Decline, Detainees Increase, and Sentenced Offenders Decrease

In Baltimore City, all arrestees are processed at BCBIC. The past decade saw a continued decline in overall activity through BCBIC, though the number of arrestees processed (or booked) remained steady from fiscal 2017 to 2019. The number of individuals committed to pretrial detention (those held in jail) steadily declined by an average of 13% each year this decade, as can be seen in **Exhibit 1**. From fiscal 2020 to fiscal 2021:

- arrestees processed declined by 5,217, or 27%;
- commitments declined by 1,848, or 19%; and
- the rate of commitment increased by 5 percentage points to 55%.

Exhibit 1
Arrestees Processed and Rate of Commitment
Fiscal 2012-2021

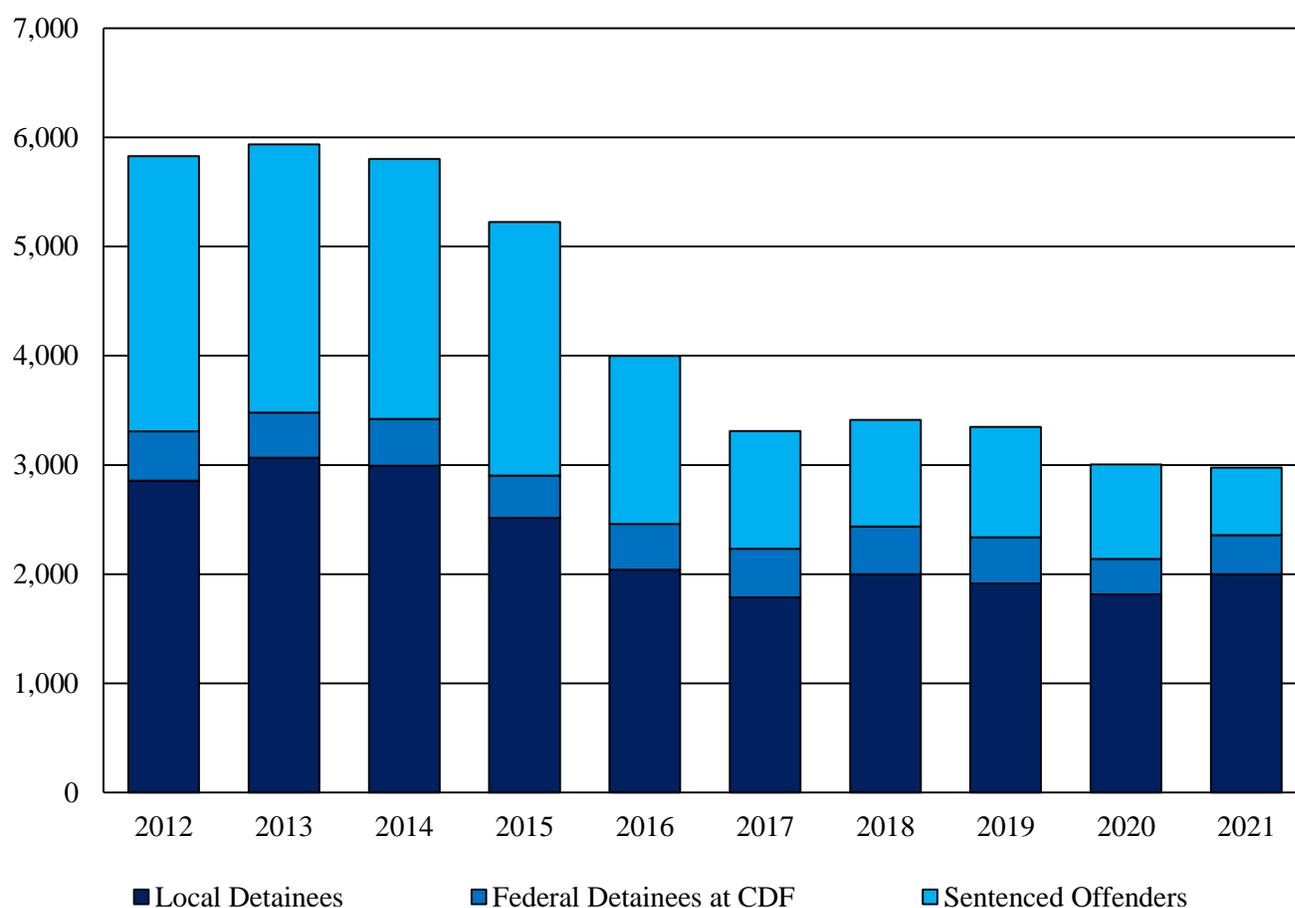


BCBIC: Baltimore Central Booking and Intake Center

Source: Department of Public Safety and Correctional Services

In addition to the pretrial detainees held in Baltimore City, DPDS holds some sentenced offenders in custody. **Exhibit 2** shows the average daily population (ADP) of sentenced offenders, local pretrial detainees, and federal pretrial detainees in Baltimore City for the past 10 years. The decline from fiscal 2014 to 2017 is attributable to the closure of several facilities in the Baltimore City Pretrial Complex and an overall reduction in arrests made in Baltimore City.

Exhibit 2
Average Daily Population of Baltimore City Facilities
Fiscal 2012-2021



CDF: Chesapeake Detention Facility

Source: Department of Public Safety and Correctional Services

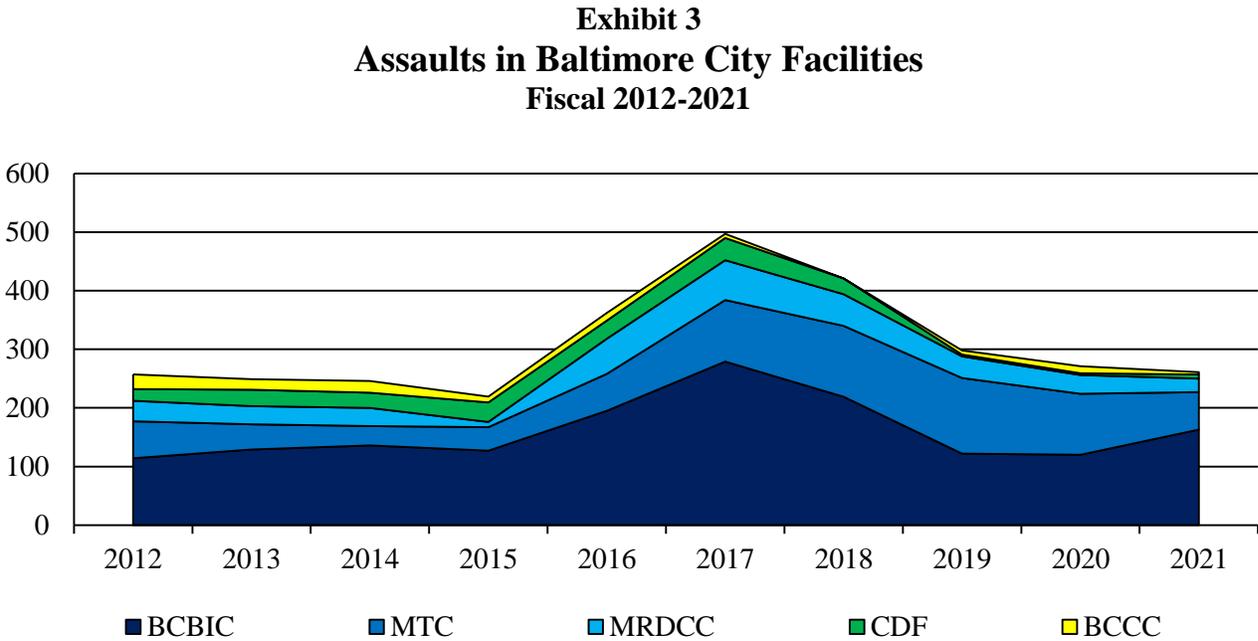
Since fiscal 2017, the overall population under DPDS jurisdiction has not changed to a great extent. This is due, in part, to bail reform, which has resulted in more defendants released without bond but has also increased those held without bond. While overall commitments have not increased, those committed are being held for longer periods, partially attributable to an increase in individuals held without bail. Fewer defendants are being held for longer periods, resulting in a leveling out of ADP. The population declined in fiscal 2020 and 2021 but not to the same extent as arrests or commitments because the rate of release slowed considerably during the COVID-19 pandemic. The length of stay for DPDS facilities was 13.2 months at the end of fiscal 2020 due to the courts' stagnation. The length of stay improved by the end of fiscal 2021 to 5.8 months, which is comparable to pre-pandemic levels.

Baltimore Detainees Held Outside the City Returned in 2021

There was an ADP of 1,999 Baltimore City detainees held during fiscal 2021. Of these, a portion was held outside of Baltimore City: the Maryland Correctional Institution for Women held a daily average of 6 pretrial women; and the Baltimore Pretrial Facility – Jessup (BPF-J) held a daily average of 344 men. At the outset of fiscal 2022, DPSCS closed BPF-J, transferring the inmates and staff back to Baltimore City. BPF-J was a temporary solution to overcrowding that resulted from closing the former Baltimore City Detention Center (BCDC). Newly available space allowed the return of these inmates thanks to the lower sentenced population. This movement of inmates also included the transfer of some sentenced inmates from Baltimore City to the Jessup region, contributing to the decline of sentenced offenders from fiscal 2020 to 2021 in Exhibit 2.

2. Assaults Stabilized in DPDS Facilities

Exhibit 3 shows the number of offender-on-offender assaults within BCBIC, MRDCC, MTC, CDF, and BCCC since fiscal 2012. It should be noted that the facilities that compose DPDS and the operations of each facility have changed over the time period. For instance, assaults spiked at MTC and MRDCC when they took on pretrial detainees.



BCBIC: Baltimore Central Booking and Intake Center
BCCC: Baltimore City Correctional Center
CDF: Chesapeake Detention Facility
MRDCC: Maryland Reception, Diagnostic, and Classification Center
MTC: Metropolitan Transition Center

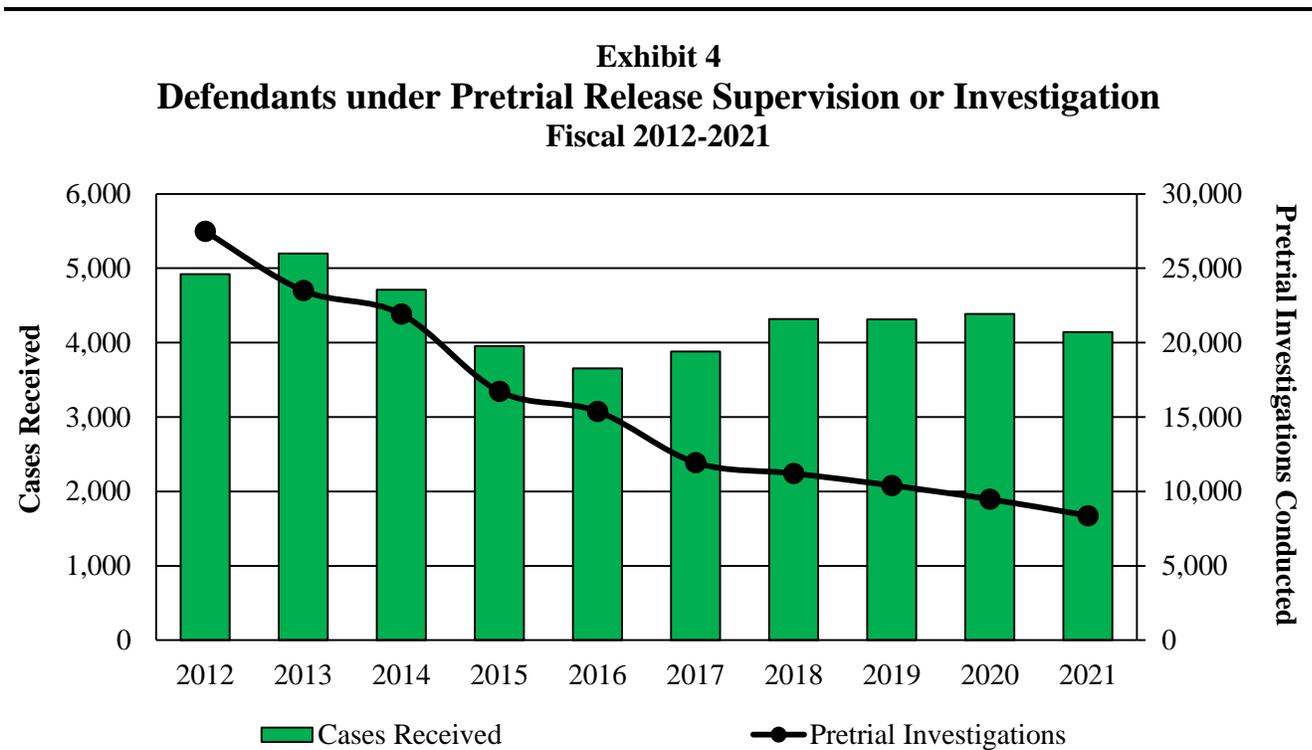
Source: Department of Public Safety and Correctional Services

There were 261 offender-on-offender assaults in these facilities in fiscal 2021, a reduction of 4% from fiscal 2020 and a reduction of 47% from the peak in fiscal 2017. From fiscal 2020 to 2021, BCBIC was the only facility with a large increase in assaults, while MTC had an equally large decrease in assaults. The facilities with the highest rate of assaults per 100 ADP are BCBIC and MTC with 20.7 and 9.3 offender-on-offender assaults per 100 ADP, respectively.

3. Pretrial Release Services Program

PRSP interviews, investigates, and presents recommendations to Baltimore City courts concerning the pretrial release of individuals accused of crimes in Baltimore. PRSP also supervises defendants released on personal recognizance or conditional bail as ordered by the court.

As arrest and detainee populations have decreased, the number of pretrial investigations has also decreased. The number of pretrial investigations held each year has not increased since fiscal 2008. The decline seen from fiscal 2012 to 2021 is 70%. PRSP receives over 4,000 cases per year, partially thanks to judicial policy changes that encouraged the placement of offenders on pretrial supervision rather than monetary bail. The COVID-19 pandemic initially increased placements due to safety concerns within the congregate setting of the Baltimore Pretrial Complex, reaching 4,385 cases received in fiscal 2020. However, cases again declined in fiscal 2021 due to sustained court closures. **Exhibit 4** shows the decline in pretrial investigations along with the number of supervision cases received each year over the past decade.

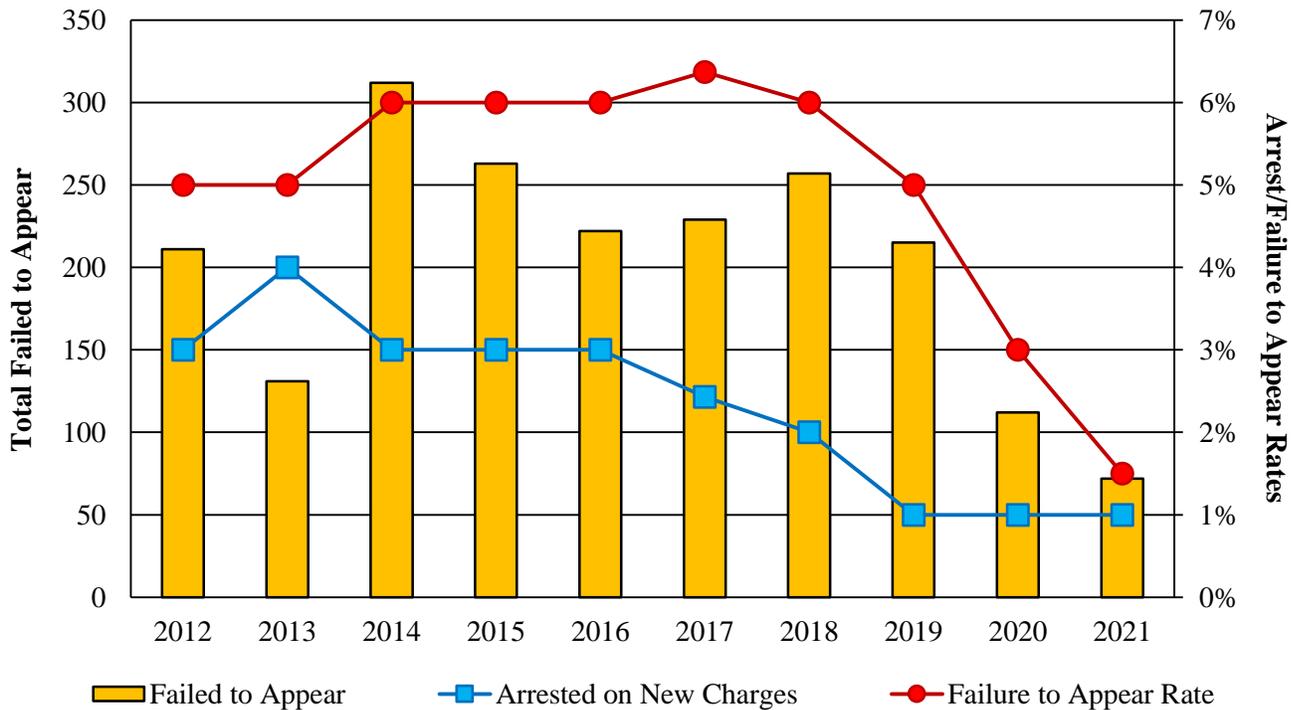


Source: Department of Public Safety and Correctional Services

At the end of fiscal 2021, PRSP had 1,811 clients on supervision, which is higher than the average during the last decade. DPSCS had 48 PRSP agents employed at the end of fiscal 2019, 58 in fiscal 2020, and 49 in fiscal 2021. Together with the increase in cases, this indicates a worsening of caseload ratios.

PRSP’s goal is to ensure that pretrial defendants released into the community comply with bail conditions, do not engage in criminal activity while on release, and appear for court when required. **Exhibit 5** shows that PRSP staff successfully met its goals of having 4% or less of its population arrested on new charges while under supervision and having 8% or less of the population fail to appear for required court dates in fiscal 2021 – just 1% of defendants were arrested on new charges and 3% (112 individuals) failed to appear in court. In fact, the number of those who failed to appear was reduced in half from fiscal 2019 to 2020, and the failure to appear rate was reduced by half again from fiscal 2020 to 2021. The dramatic decrease may have been partially the result of court closures, but PRSP continues to meet both of its Managing for Results goals.

Exhibit 5
PRSP Defendants Arrested on New Charges and Failure to Appear Rates
Fiscal 2012-2021



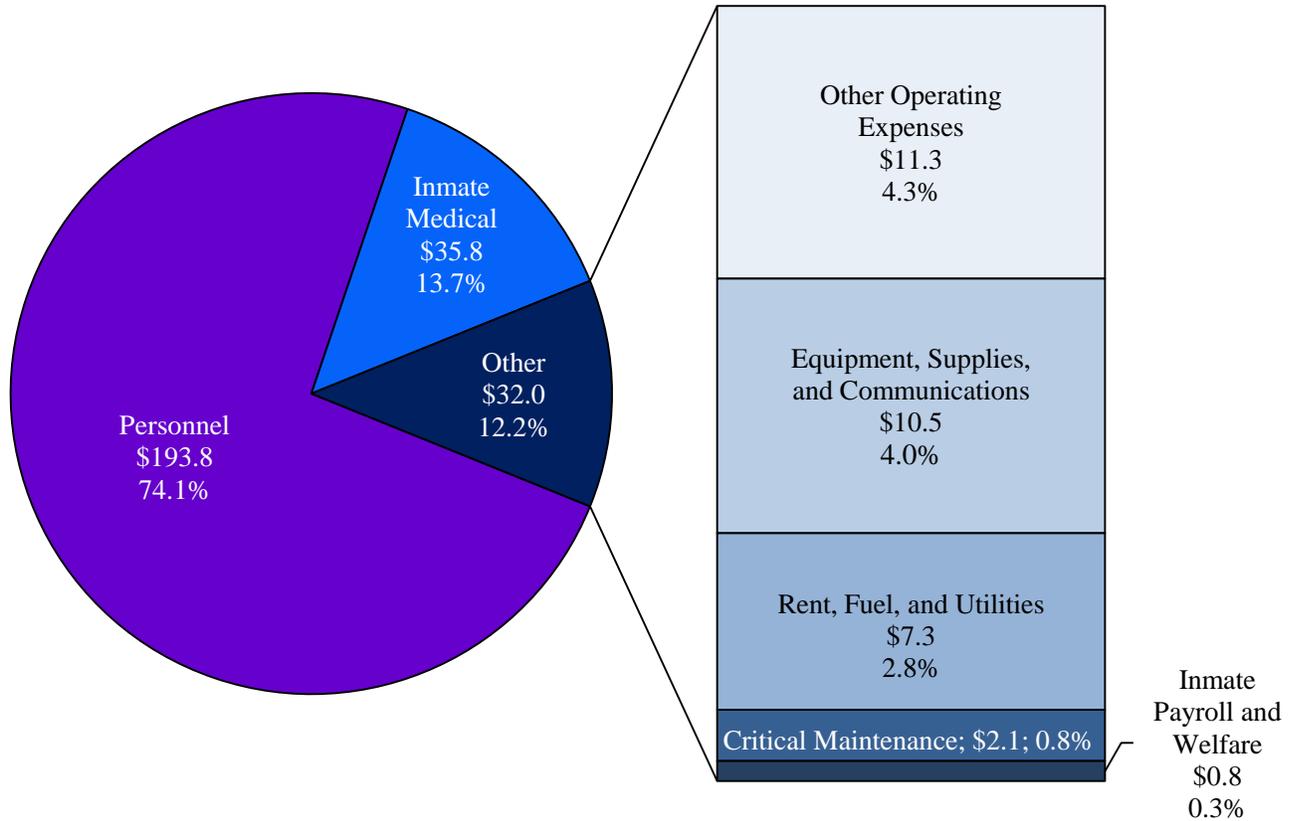
PRSP: Pretrial Release Services Program

Source: Department of Public Safety and Correctional Services

Fiscal 2023 Overview of Agency Spending

The fiscal 2023 allowance for DPDS is \$261.7 million. Three-quarters of agency spending is dedicated to personnel costs for the 1,793 regular positions. Inmate medical care, including mental health, dental, and pharmacy services, accounts for approximately \$36 million, or 13.7%. Other costs to operate facilities and provide services to inmates are \$32 million. **Exhibit 6** shows DPDS expenses by category.

Exhibit 6
Overview of Agency Spending
Fiscal 2023 Allowance
 (\$ in Millions)



Note: The fiscal 2023 allowance does not reflect funding for statewide personnel actions budgeted in the Department of Budget and Management, which includes cost-of-living adjustments, increments, bonuses, and may include annual salary review adjustments.

Source: Governor’s Fiscal 2023 Budget Books

Proposed Budget Change

The fiscal 2023 allowance for DPDS increases by \$25.3 million from the fiscal 2022 working appropriation. **Exhibit 7** shows the budget change by spending item.

Exhibit 7
Proposed Budget
DPSCS – Division of Pretrial Detention and Services
(\$ in Thousands)

How Much It Grows:	General Fund	Special Fund	Federal Fund	Reimb. Fund	Total
Fiscal 2021 Actual	\$208,440	\$394	\$36,237	\$9,151	\$254,223
Fiscal 2022 Working Appropriation	209,011	1,048	26,138	170	236,366
Fiscal 2023 Allowance	<u>233,431</u>	<u>1,033</u>	<u>27,051</u>	<u>171</u>	<u>261,687</u>
Fiscal 2022-2023 Amount Change	\$24,420	-\$14	\$913	\$2	\$25,321
Fiscal 2022-2023 Percent Change	11.7%	-1.4%	3.5%	1.1%	10.7%
Where It Goes:					<u>Change</u>
Personnel Expenses					
Regular earnings					\$3,178
Turnover adjustments.....					3,667
Workers’ compensation premium assessment					2,659
Employee and retiree health insurance					1,608
Social Security and retirement contributions					1,137
Overtime earnings					767
Other fringe benefit adjustments					35
Other Changes					
Medical care cost realignment based on population share					8,921
Housing Unit Door Control replacements at BCBIC, BCCC, and MTC.....					1,737
Food and dietary supplies					1,240
Communications and rental equipment.....					442
Insurance					135
Maintenance for buildings and grounds					96
Laundry and rubbish services.....					37
Contractual employee turnover					25
Other					-31
Employee and inmate uniforms					-45

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Where It Goes:	<u>Change</u>
Electricity and utilities	-132
Travel and vehicles	-156
Total	\$25,321

BCBIC: Baltimore Central Booking and Intake Center
 BCCC: Baltimore City Correctional Center
 DPSCS: Department of Public Safety and Correctional Services
 MTC: Metropolitan Transition Center

Note: Numbers may not sum to total due to rounding. The fiscal 2022 working appropriation and fiscal 2023 allowance do not reflect funding for statewide personnel actions budgeted in the Department of Budget and Management, which include cost-of-living adjustments, increments, bonuses, and may include annual salary review adjustments.

Employees Transferred to DPDS Increases Personnel and Medical Budget

At the outset of fiscal 2022, DPSCS closed BPF-J and transferred over 300 inmates and 18 staff to Baltimore City. These changes, however, are not reflected budgetarily until fiscal 2023 where position transfers account for \$1.1 million of the increase in personnel expenses for DPDS. The remaining personnel growth is attributable to higher salary bases for employees.

The medical contract is a fixed cost across the department, but the share used by each functional unit is realigned annually based on relative inmate populations. Because DPDS is expecting a higher share of the inmate population in fiscal 2023, their allocation for medical expenses is increased by \$8.9 million. Food costs also increase by \$1.2 million due to inflation and a higher share of inmates in DPDS facilities.

Personnel Data

	<u>FY 21</u>	<u>FY 22</u>	<u>FY 23</u>	<u>FY 22-23</u>
	<u>Actual</u>	<u>Working</u>	<u>Allowance</u>	<u>Change</u>
Regular Positions	1,863.60	1,775.60	1,793.60	18.00
Contractual FTEs	<u>23.02</u>	<u>92.72</u>	<u>92.72</u>	<u>0.00</u>
Total Personnel	1,886.62	1,868.32	1,886.32	18.00

Vacancy Data: Regular Positions

Turnover and Necessary Vacancies, Excluding New Positions	179.36	10.00%
Positions and Percentage Vacant as of 12/31/21	227.00	12.78%
Vacancies Above Turnover	47.64	

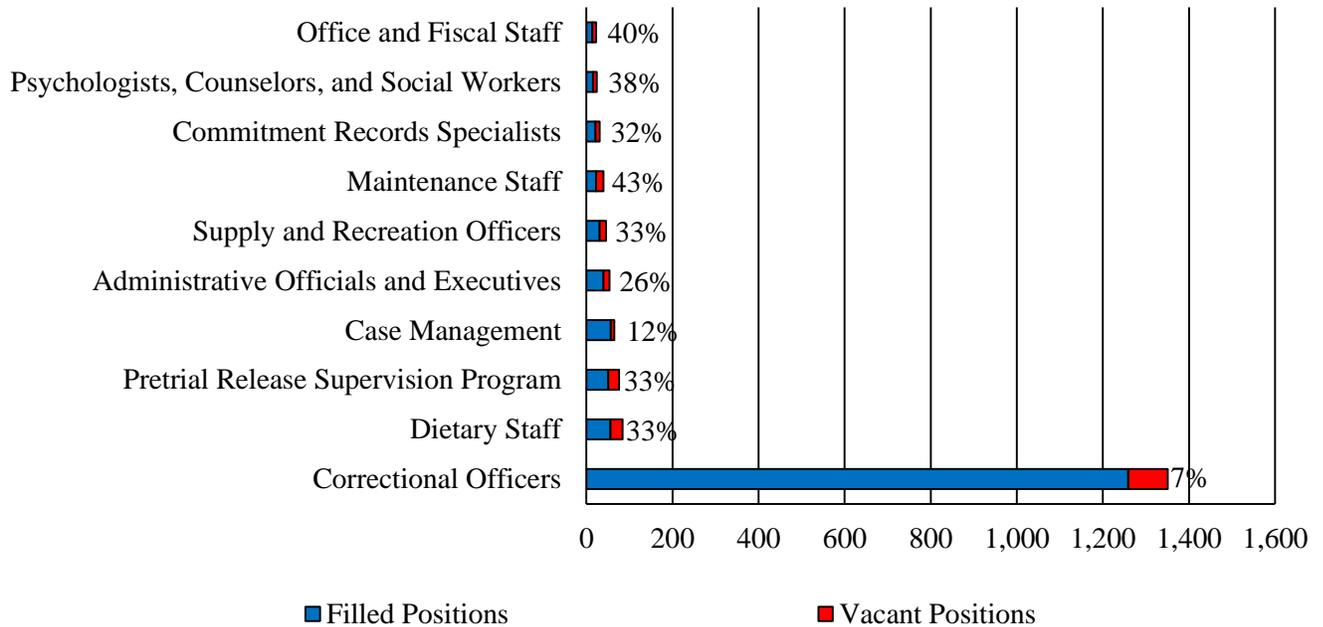
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- The fiscal 2023 allowance increases the regular position complement by 18 positions due to the transfer of staff from BPF-J to the Baltimore Pretrial Complex. The department transferred 29 DOC positions to DPDS and 11 DPDS positions to DOC.
- Turnover adjustments add \$3.6 million to the DPDS allowance. The vacancies needed to meet budgeted turnover is relatively stable from 182 in fiscal 2022 to 179 in fiscal 2023, but the position allowance increased as mentioned previously.

Vacancies

Positions within DPDS are 12.8% vacant as of January 2022. Vacancy rates are highest within the maintenance staff (43%), office and fiscal staff (40%), and mental health professionals and social workers series (38%). The highest number of vacancies is within the correctional officer (CO) series responsible for maintaining custody of offenders. DPDS is allowed 1,351 CO positions, but 92 are currently vacant, or 7%. **Exhibit 8** lists the programs with the highest vacancies in the division with their respective vacancy rates.

**Exhibit 8
Vacancies by Classification
January 2022**



Source: Department of Budget and Management

Issues

1. DPDS Remains Out of Compliance with *Hogan v. Duvall* Settlement

Background

In 2015, the American Civil Liberties Union filed on behalf of Jerome Duvall and other BCDC detainees to reopen a partial settlement agreement regarding conditions at the former BCDC. The *Hogan v. Duvall* settlement agreement as amended contained stipulations in several areas:

- ***Medical and Mental Health Care:***
 - intake and initiation of medication;
 - medical “Plan of Care;”
 - medication management and testing;
 - interaction between medical and custody staff;
 - accommodations for plaintiffs with disabilities;
 - specialty care/consultation;
 - daily “Sick Call;”
 - medical recordkeeping; and
 - mental health care; and
- ***Physical Plant:***
 - housekeeping;
 - vermin control; and
 - equipment and building maintenance and repair.

Substantial Compliance Reached on Physical Plant Requirements

The full listing of provisions and their status can be found in **Appendix 2** of this analysis. DPDS implemented corrective action on the physical plant portion of the settlement agreement in fiscal 2017, including renovations in the MTC kitchen and warehouse, reorganization of dietary staff, and establishment of a pest control contract. The court-assigned monitor declared DPDS to be in substantial compliance with all three areas of the physical plant provision in September 2018.

Substantial Compliance Reached on Certain Medical and Mental Health Requirements

In January 2019, the new medical contract began with Corizon, Inc. The new contract addressed the *Duvall* settlement where applicable and possible. Through departmental efforts and contractual help, DPDS is in substantial compliance with Sick Call. DPDS is in substantial compliance with six and partial compliance with one provision relating to the interaction between medical staff and custody staff. DPDS is substantially compliant for two and noncompliant for two of four provisions relating to inmates with disabilities.

Americans with Disabilities Act (ADA) compliance remains an issue with the department. Due to the aging inmate population and ADA-related liability situations, ADA compliance is more important than ever before, and 662 inmates require some type of ADA accommodation. However, the majority of facilities remain partially out of ADA compliance on wheelchair accessibility for both inmates, staff, and the public. An ongoing survey of DPSCS facilities was delayed due to restrictions on entry at State facilities during the COVID-19 pandemic. Surveys resumed from May 2021 to October 2021 with entry allowed after vaccination verification. The project team is scheduled to review the remaining sites through March 18, 2022. The study currently indicates that most facilities will need some renovations to reach compliance with the ADA and with the related *Duvall* provisions.

To address ADA compliance deficiencies, the fiscal 2023 *Capital Improvement Program* includes two capital construction projects that will increase the amount of ADA housing space in the department by 96 beds. Additionally, the department has plans to complete ADA ramps, elevators, and shower renovations in the coming fiscal years. When the full results of the ADA survey are available, additional projects will be added to the capital construction and facility maintenance list.

DPSCS Will Address the Remaining Provisions in a Few Ways

- The Office of Administrative Services receives \$750,000 in fiscal 2023 to procure attorneys and experts to reach substantive compliance with a number of provisions within *Duvall* litigation within 18 months.
- Second, DPSCS is pursuing a capital construction project in Baltimore City for a Therapeutic Treatment Center (TTC). TTC will be placed on the site of the former BCDC yet allow the department to transform its delivery of intake services, medical and mental health care, and SUD treatment services as well as modernize the current inadequate structures. The project is the largest undertaking by the department in decades and is currently in the design phase.

- Third, DPSCS is pursuing a comprehensive SUD treatment services contract. Issue 2 of this analysis goes into more detail on the status of SUD treatment in the department.
- Fourth, DPSCS is implementing a new Electronic Patient Health Record (EPHR) as a Major Information Technology Development Project. The EPHR, scheduled for completion in January 2023, will allow for greater compliance to medical and mental health care requirements.

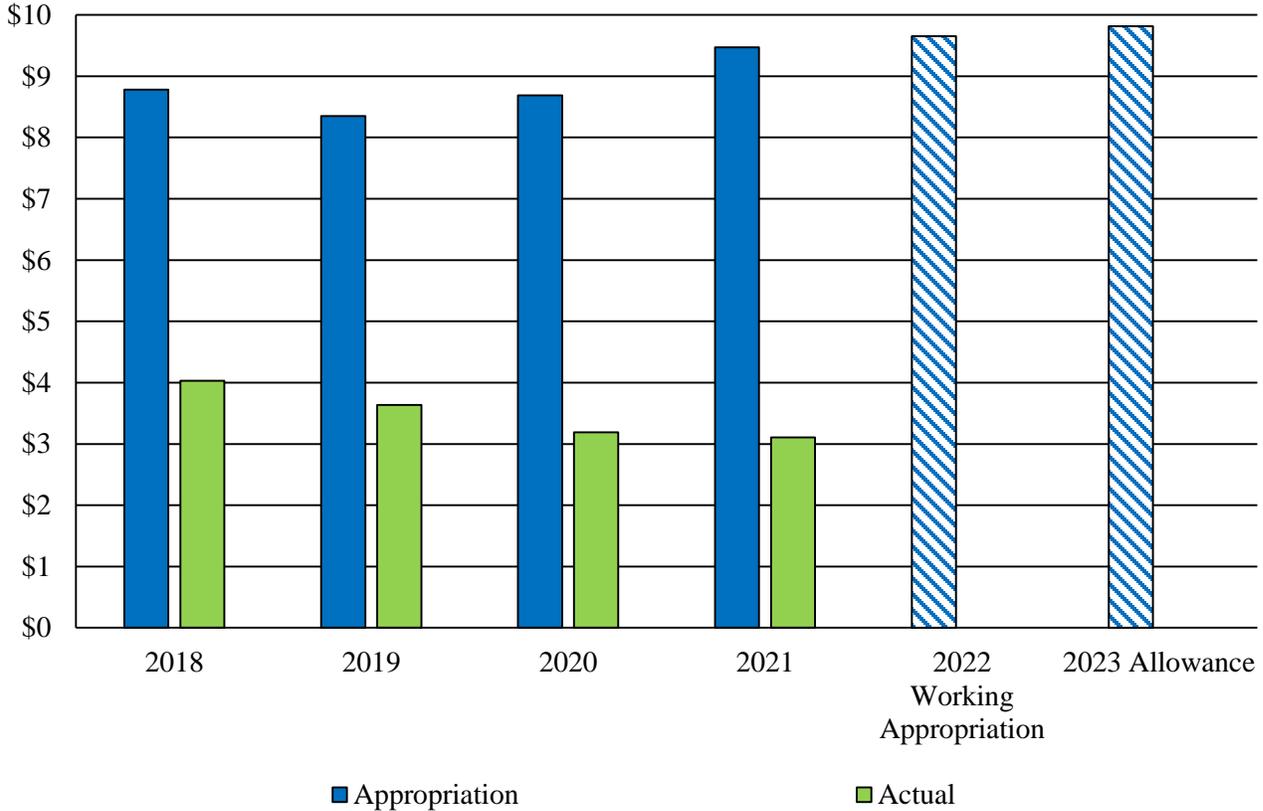
The Department of Legislative Services (DLS) continues to monitor the progress of and expenditures related to *Duvall* case closure. DPSCS has made significant progress yet still has much work to be done. **DPSCS should comment on actionable items and major obstacles related to complying with the *Hogan v. Duvall* settlement agreement.**

2. Substance Use Disorder Treatment Still Lacking

A major component of the *Hogan v. Duvall* settlement agreement is remedying insufficient mental health services and policies. An additional requirement of DPSCS comes from Chapter 532 of 2019, which requires DPSCS to create a medication assisted treatment (MAT) pilot program at the Baltimore Pretrial Complex. The optimal solution is procurement of a comprehensive SUD treatment contract. However, the funds appropriated for SUD treatment services are perennially underspent, particularly for contracts, within the various SUD treatment subprograms across the department. Subprograms include those within eight DOC facilities, four DPDS facilities, the Patuxent Institution, the Division of Parole and Probation (DPP), and the Office of Programs and Services.

Actual spending has consistently fallen below half of the appropriation since at least fiscal 2015, bringing into question both the necessity of continuing these appropriations and the seriousness with which DPSCS approaches SUD treatment. **Exhibit 9** shows that only 40% of the appropriations for SUD services have been expended since fiscal 2018.

Exhibit 9
SUD Treatment Subprogram Spending
Fiscal 2018-2023 Allowance
(\$ in Millions)



Note: The fiscal 2022 working appropriation and fiscal 2023 allowance do not reflect funding for statewide personnel actions budgeted in the Department of Budget and Management, which include cost-of-living adjustments, increments, bonuses, and may include annual salary review adjustments.

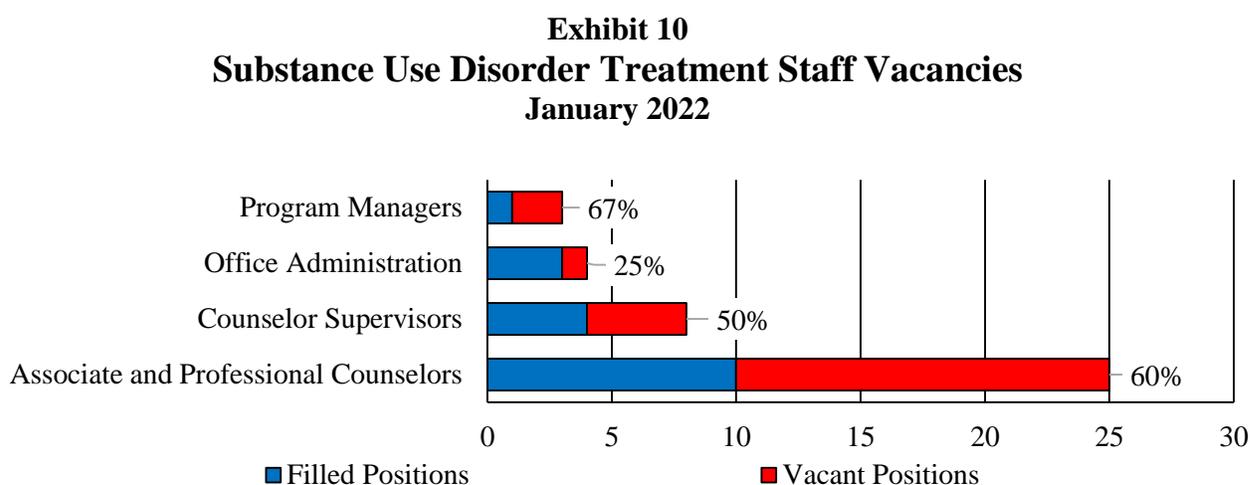
Source: Governor’s Fiscal 2023 Budget Books; Department of Legislative Services

Restricted Funding Remains Underutilized

During the 2020 and 2021 legislative sessions, funding was restricted so that it would only be used for SUD services and not reallocated to other spending shortfalls. Actual departmental spending on SUD treatment has primarily gone toward salaries and fringe benefits for counselors, supervisors, and dedicated support staff, totaling \$2.0 million in fiscal 2021. However, this is still \$1 million below the amount approved for that year.

SUD Programs Are Understaffed

Vacancies are high for SUD treatment subprograms, with 60% of counselors, 50% of counselor supervisors, and 43% of support staff vacant as of January 1, 2022. SUD staff in DPDS facilities are in a worse situation, with 3 of 4 counselor positions and the only counselor supervisor position vacant. **Exhibit 10** displays each filled position and vacancy within the various SUD treatment subprograms across the department. Subprograms include those within eight DOC facilities, four DPDS facilities, the Patuxent Institution, DPP, and the Office of Programs and Services.



Source: Department of Budget and Management

Previous Procurements Canceled – New Contract Under Consideration

In the past few years, there were very few companies and organizations who could satisfy the evolving set of program requirements for facilities throughout the State. Each attempt at soliciting a vendor failed or was retracted, causing actual spending on such contracts to decline by 90% from fiscal 2013 to 2019. In July 2020, DPSCS canceled a nearly complete procurement so it could rework requirements and incorporate precautions related to the COVID-19 pandemic. The new solicitation was released in July 2021 and closed in October 2021.

On January 24, 2022, DPSCS submitted a comprehensive SUD contract to the Office of State Procurement. The contract, set to appear before the Board of Public Works on March 23rd, 2022, would massively expand SUD treatment services and utilize available fiscal 2023 funding. Services and training that must be provided under the contract include, but are not limited to, peer mentoring, cultural and gender sensitivity, and training of custody personnel (specifically, Suboxone-related therapy and diversion prevention). Additional services to be provided shall include alternatives to medication-based pain management, naloxone training/education, and trauma-based therapy. The contractor shall

collaborate with the DPSCS medical, mental health, and pharmacy contractors regarding MAT and with Reentry MAT community liaisons.

MAT Programs

DPDS conducts an SUD screening for each individual during the medical and mental health screening at intake. Currently, methadone is the only medication offered for those diagnosed with an SUD while incarcerated. Chapter 532 requires the development of a comprehensive MAT pilot program at the pretrial complex in Baltimore City by January 2023. The legislation requires the division to offer two other types of MAT – buprenorphine and naltrexone – which do not require the long-term commitment to daily structured administration of the drug and may be preferable to those going in and coming out of temporary DPSCS custody. DPSCS offers a few connections to these services but does not directly provide them to the incarcerated population.

- A National Institute of Drug Abuse funded program that began in 2017 allows inmates in the lowest security classification to receive one dose of naltrexone prior to their release. The program is available at 10 correctional facilities and allows participants to receive additional doses after release via mobile unit or methadone clinic.
- The Project Connections at Re-Entry mobile unit is a nonprofit program with the goal of preventing overdose upon release from pretrial detention. Individuals who were screened at intake for an opioid use disorder may receive their first dose directly following release by visiting the mobile treatment facility. Those who wish to continue buprenorphine treatment may continue to visit the facility while in the community, bridging the gap between release and a stable living situation, so that the danger of overdose is minimized.
- Prerelease inmates within 12 months of release who are transferred to a local reentry program may be eligible for local MAT offerings. Chapter 532 required Howard, Montgomery, Prince George’s, and St. Mary’s counties to offer at least one form of MAT. The Governor’s Office of Crime Prevention, Youth, and Victim Services (GOCPYVS) provided the first report on this program on November 1, 2021, as required by statute.
 - In fiscal 2021, there were a total of 2,126 program referrals, 1,225 screened intakes, and 374 enrollees in the MAT programs. Most enrollees received clinically managed medium-intensity residential services. Additionally, 502 individuals received a peer encounter, and more were referred to other support systems.
 - Other counties have MAT programs, such as Anne Arundel and Frederick counties, but that information is not yet provided. GOCPYVS is required to report on six additional counties for fiscal 2022 and, by fiscal 2023, all counties and DPDS are required to comply. Statute requires GOCPYVS to report annually on participation data.

In the interest of continued oversight and progress on this issue, DLS recommends adding budget bill language restricting the SUD subprogram funding so that it is used for those programs and not used for unrelated purposes.

Operating Budget Recommended Actions

1. Add the following language:

Provided that \$9,815,178 of the appropriation for substance use disorder (SUD) treatment services subprograms may only be expended in those subprograms. Funds may be transferred between SUD treatment services subprograms throughout the Department of Public Safety and Correctional Services. Funds unexpended for this purpose at the end of the fiscal year shall revert to the General Fund or be canceled.

Explanation: Chapter 532 of 2019 directs the Department of Public Safety and Correctional Services (DPSCS) to create a medication assisted treatment program within the confines of the Baltimore Pretrial Complex as well as apply for funding to support local detention centers required to create its own treatment programs. DPSCS has historically underspent the appropriation for SUD services and does not have a contract in place for these services. This language ensures that funds for SUD services will only be spent for that purpose or shall revert to the General Fund or be canceled at the end of the fiscal year.

Appendix 1
2021 Joint Chairmen’s Report Responses from Agency

The 2021 *Joint Chairmen’s Report* (JCR) requested that DPDS prepare one report. Electronic copies of the full JCR responses can be found on the DLS Library website.

- ***Chesapeake Detention Facility Federal Funding Report:*** DPSCS provided information on recent attempts to modify the agreement with the U.S. Marshals Service to operate CDF. CDF is no longer funded adequately through federal payments and attempts by DPSCS to increase these payments through negotiation were inconclusive. On November 3, 2021, Secretary Robert L. Green and the DPSCS executive team met with the Assistant Director of the U.S. Marshals’ Prisoner Operations Division. The assistant director requested that the department propose a timeframe for scaling back the number of federal detainees housed at CDF. The U.S. Marshals Service would then propose an updated reimbursement rate. Presently, the negotiation continues at a slow pace, but steps have been made toward improving the State’s position in this agreement.

Appendix 2
Hogan v. Duvall Provisions

<u>Provision</u>	<u>Description</u>	<u>Status – December 2021</u>
17a	Timely intake.	Partial Compliance
17b	Assessment of urgent needs and identification prescribed medications within 24 hours of Initial Medical and Mental Health Screen (IMMS)	Substantial Compliance
17c	Mental Health timely evaluation for patients on psychotropic medications and/or urgently referred within 24 hours of IMMS.	Partial Compliance
17d	1st Dose medication administration.	Partial Compliance
17e	Documentation of 1st Dose medications or discontinuation.	Partial Compliance
18a	Plan of Care (POC) to include summary of problems, medications, testing, and chronic care appointments.	Partial Compliance
18b	Develop a POC.	Partial Compliance
18c	Conduct chronic care clinics and document in the Electronic Medical Record (EMR) within 7 days of admission into the facility.	Partial Compliance
18d	Clinicians to place order for chronic care clinics in EMR and recommend any specialty care promptly.	Partial Compliance
18e	Clinicians to develop or update POC for any chronic care conditions diagnosed after initial diagnosis.	Partial Compliance
18f	POC accessibility to clinicians.	Noncompliance
19a	Timely, uninterrupted medication renewal.	Noncompliance
19b	Appropriate documentation of Medication Administration Records to include nursing credentials and refusal info.	Noncompliance
19c	Documentation and review of vital signs and glucose results as ordered, per policy.	Noncompliance
19d	Keep-on-Person medication refill.	Noncompliance
19e	Clinicians' timely response to and documentation of critical lab results and any actions taken.	Noncompliance
19e – i.	Clinicians to document review of critical/seriously abnormal lab results within 24 hours of receipt.	Noncompliance
19e – ii.	Clinicians to document review of all results within a reasonable timeframe.	Partial Compliance

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<u>Provision</u>	<u>Description</u>	<u>Status – December 2021</u>
19f	Clinicians to order labs within timeframes consistent with test urgency.	Partial Compliance
19g	Clinicians’ recognition and communication of clearly defined abnormal vital signs with appropriate actions taken.	Substantial Compliance
20a	Patient transport for onsite/offsite appointment and medical testing.	Partial Compliance
20b	Custody to adhere to medically directed accommodations.	Substantial Compliance
20c	Medical having daily access to the Offender Case Management System patient location information.	Substantial Compliance
20d	Cooperation between custody and medical for organized medication administration.	Substantial Compliance
20e	Temperature-controlled housing and heat stratification.	Substantial Compliance
20f	Temperature-controlled housing and heat stratification.	Substantial Compliance
20g	Temperature-controlled housing and heat stratification.	Substantial Compliance
21a	Timely delivery of necessary medical supplies and special housing accommodations.	Substantial Compliance
21b	Designated trained staff to address Americans with Disabilities Act (ADA) patient accommodations.	Noncompliance
21c	ADA patients access to same care/visits as general population.	Noncompliance
21d	Specially equipped and adapted vehicles for ADA patients.	Substantial Compliance
22a	Timely review of requests for routine, urgent, and emergency specialty care.	Partial Compliance
22b	Specialists’ referrals with review and approval of consultations not exceeding 48 hours for urgent care and 5 business days for routine care.	Substantial Compliance
22c	Logs are maintained documenting approval request dates, Utilization Management action dates, outcome details, and referral purpose.	Partial Compliance
22d	If applicable, patients’ medical records contain documentation of request for outside specialty care, date of request, date and nature of the response, date consultation is scheduled, and date of consultation encounter with applicable follow-up care.	Noncompliance
23a	Sick call request pick-up.	Substantial Compliance
23b	Sick call timely triage within 24 hours of receipt.	Substantial Compliance

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<u>Provision</u>	<u>Description</u>	<u>Status – December 2021</u>
23c	Sick call appointment occurrence within 48 hours (72 hours on weekends).	Substantial Compliance
23d	Sick call appropriate clinical judgment and quality of care.	Substantial Compliance
24a	Medical records availability (paper and EMR).	Partial Compliance
25a	Mental health timely suicide risk evaluations and medication within 24 hours.	Partial Compliance
25b	Mental health timely evaluations for patients with bridge orders within 14 days; sooner if clinically indicated.	Partial Compliance
25c	Mental health timely evaluations by Mental Health Professionals when urgently referred within 24 hours.	Partial Compliance
25d	Mental health follow-up appointment for medication renewal.	Partial Compliance
25e	Mental health close observation.	Substantial Compliance
25f – i.	Mental health POC development.	Partial Compliance
25f – ii.	Mental health treatment plan within 14 days of admissions into the facility.	Partial Compliance
25f – iii.	Mental health chronic care follow-up every 90 days.	Partial Compliance
25f – iv.	Mental health POC accessibility to clinicians.	Partial Compliance
25g	Mental health return from State hospital.	Partial Compliance
25h	Ability of anyone to place patient on suicide watch.	Substantial Compliance

Appendix 3
Object/Fund Difference Report
Department of Public Safety and Correctional Services – Division of Pretrial Detention and Services

<u>Object/Fund</u>	<u>FY 21</u> <u>Actual</u>	<u>FY 22</u> <u>Working</u> <u>Appropriation</u>	<u>FY 23</u> <u>Allowance</u>	<u>FY 22 - FY 23</u> <u>Amount Change</u>	<u>Percent</u> <u>Change</u>
Positions					
01 Regular	1,863.60	1,775.60	1,793.60	18.00	1.0%
02 Contractual	23.02	92.72	92.72	0.00	0%
Total Positions	1,886.62	1,868.32	1,886.32	18.00	1.0%
Objects					
01 Salaries and Wages	\$ 190,135,558	\$ 180,766,733	\$ 193,817,903	\$ 13,051,170	7.2%
02 Technical and Special Fees	1,261,143	575,677	600,852	25,175	4.4%
03 Communication	633,293	616,627	638,926	22,299	3.6%
04 Travel	1,372	11,889	10,000	-1,889	-15.9%
06 Fuel and Utilities	8,899,623	6,967,394	6,835,300	-132,094	-1.9%
07 Motor Vehicles	239,170	485,503	331,267	-154,236	-31.8%
08 Contractual Services	43,052,770	36,645,507	46,156,051	9,510,544	26.0%
09 Supplies and Materials	8,550,254	8,629,667	9,764,059	1,134,392	13.1%
10 Equipment – Replacement	644,259	129,470	118,620	-10,850	-8.4%
11 Equipment – Additional	65,421	2,500	0	-2,500	-100.0%
12 Grants, Subsidies, and Contributions	419,429	822,800	829,310	6,510	0.8%
13 Fixed Charges	318,843	322,206	457,651	135,445	42.0%
14 Land and Structures	1,499	390,000	2,127,000	1,737,000	445.4%
Total Objects	\$ 254,222,634	\$ 236,365,973	\$ 261,686,939	\$ 25,320,966	10.7%
Funds					
01 General Fund	\$ 208,439,789	\$ 209,010,862	\$ 233,430,866	\$ 24,420,004	11.7%
03 Special Fund	394,336	1,047,714	1,033,416	-14,298	-1.4%
05 Federal Fund	36,237,154	26,137,807	27,051,267	913,460	3.5%
09 Reimbursable Fund	9,151,355	169,590	171,390	1,800	1.1%
Total Funds	\$ 254,222,634	\$ 236,365,973	\$ 261,686,939	\$ 25,320,966	10.7%

Note: The fiscal 2022 appropriation does not include deficiencies, targeted revenues, or across-the-board reductions. The fiscal 2023 allowance does not include contingent reductions or cost-of-living adjustments.

**Appendix 4
Fiscal Summary**

Department of Public Safety and Correctional Services – Division of Pretrial Detention and Services

<u>Program/Unit</u>	<u>FY 21 Actual</u>	<u>FY 22 Wrk Approp</u>	<u>FY 23 Allowance</u>	<u>Change</u>	<u>FY 22 - FY 23 % Change</u>
01 Chesapeake Detention Facility	\$ 31,475,140	\$ 30,760,533	\$ 31,579,336	\$ 818,803	2.7%
02 Pretrial Release Services	5,619,203	6,112,453	6,651,861	539,408	8.8%
04 Central Booking and Intake Facility	73,608,627	71,039,874	78,554,322	7,514,448	10.6%
05 Baltimore Pretrial Complex	17,290,413	15,894,310	16,733,868	839,558	5.3%
06 Maryland Reception Diagnostic and	40,760,040	35,693,612	43,559,725	7,866,113	22.0%
07 Baltimore City Correctional Center	17,515,439	15,628,161	17,680,447	2,052,286	13.1%
08 Metropolitan Transition Center	66,077,728	59,129,495	64,753,441	5,623,946	9.5%
09 General Administration	1,876,044	2,107,535	2,173,939	66,404	3.2%
Total Expenditures	\$ 254,222,634	\$ 236,365,973	\$ 261,686,939	\$ 25,320,966	10.7%
General Fund	\$ 208,439,789	\$ 209,010,862	\$ 233,430,866	\$ 24,420,004	11.7%
Special Fund	394,336	1,047,714	1,033,416	-14,298	-1.4%
Federal Fund	36,237,154	26,137,807	27,051,267	913,460	3.5%
Total Appropriations	\$ 245,071,279	\$ 236,196,383	\$ 261,515,549	\$ 25,319,166	10.7%
Reimbursable Fund	\$ 9,151,355	\$ 169,590	\$ 171,390	\$ 1,800	1.1%
Total Funds	\$ 254,222,634	\$ 236,365,973	\$ 261,686,939	\$ 25,320,966	10.7%

Note: The fiscal 2022 appropriation does not include deficiencies, targeted revenues, or across-the-board reductions. The fiscal 2023 allowance does not include contingent reductions or cost-of-living adjustments.