

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

***Executive Summary***

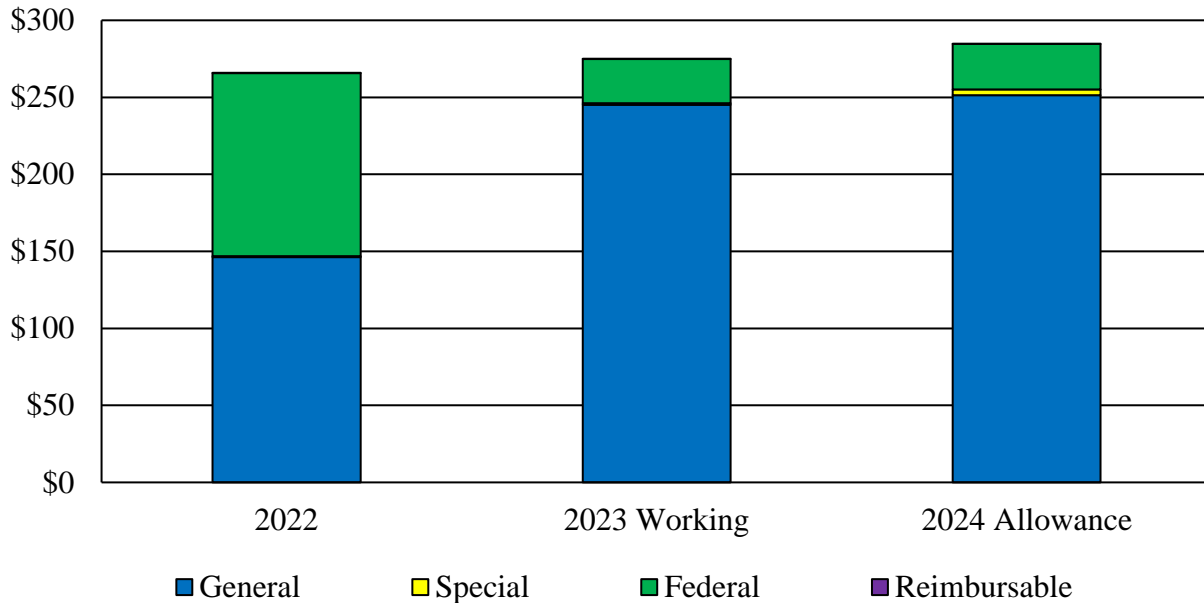
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The Division of Pretrial Detention and Services (DPDS) is responsible for processing and managing the care, custody, and control of Baltimore City arrestees and detainees in a safe, humane, and secure environment. DPDS also supervises the operation 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***

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**Fiscal 2024 Budget Increases \$9.8 Million, or 3.6%, to \$284.7 Million**  
**(\$ in Millions)**



Note: Numbers may not sum due to rounding. The fiscal 2023 working appropriation includes deficiency appropriations including this agency's share of a deficiency appropriation budgeted in the Statewide Account within the Department of Budget and Management (DBM). Fiscal 2024 salary enhancements are budgeted in the Statewide Account within DBM.

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For further information contact: Jacob C. Cash

Jacob.Cash@mlis.state.md.us

## ***Key Observations***

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- ***Safety Concerns Highlighted by 43 Assaults Per 100 Average Offenders and 1 Homicide in Baltimore Central Booking and Intake Center (BCBIC):*** Safety is the number one concern for DPSCS, but performance measures show a dangerous and volatile environment for staff and offenders.
- ***Overtime Hours and Costs Rising:*** Ongoing staffing shortages require existing employees to work more overtime, which has grown to historical levels. Overtime drives the overall budget increase with \$7.1 million more in the fiscal 2024 allowance than the fiscal 2023 working appropriation.

## **Operating Budget Recommended Actions**

1. Add language restricting funds pending a report on overtime.

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## ***Operating Budget Analysis***

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### **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 BCBIC; the Metropolitan Transition Center (MTC); the Youth Detention Center (YDC); 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***

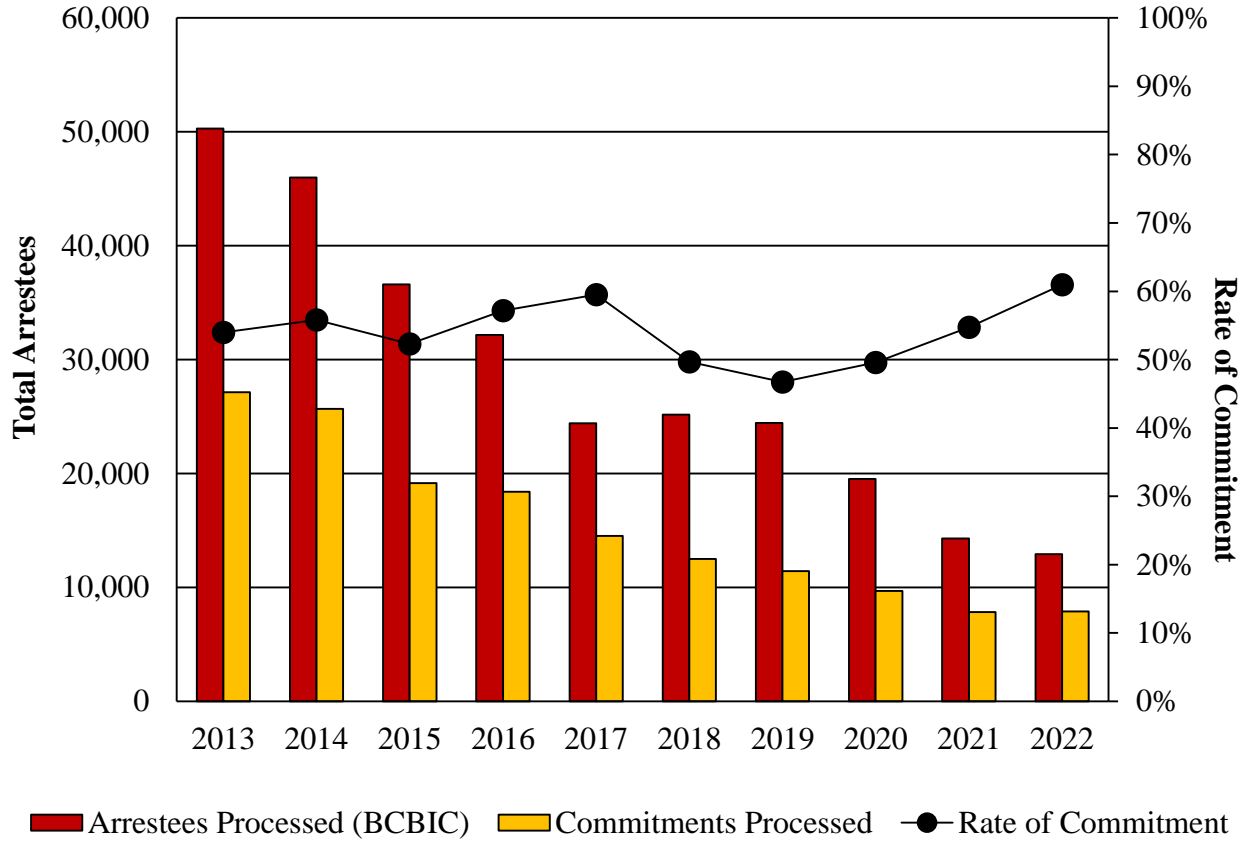
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### **1. Arrests Decline, Detainees Stabilize, and Sentenced Offenders Decrease**

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 12% each year this decade, as seen in **Exhibit 1**. However, from fiscal 2021 to 2022, commitments processed increased slightly for the first time. Arrestees declined, but the rate of commitment increased. In fiscal 2022:

- arrestees processed decreased by 1,384, or 10%;
- commitments increased by 47, or 1%; and
- the rate of commitment increased by 6 percentage points to 61%.

**Exhibit 1  
Arrestees Processed and Rate of Commitment  
Fiscal 2013-2022**

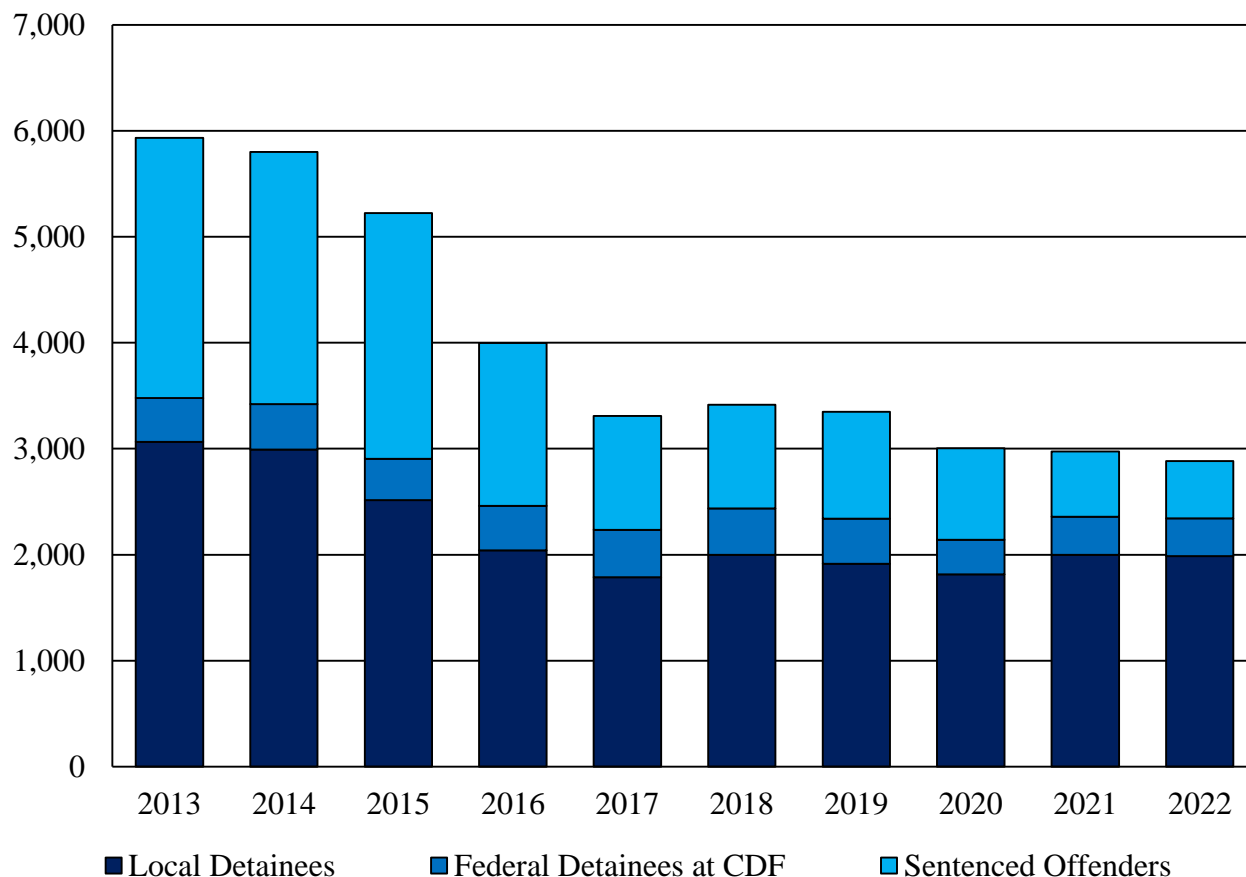


BCBIC: Baltimore Central Booking and Intake Center

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 2013-2022**



CDF: Chesapeake Detention Facility

Source: Department of Public Safety and Correctional Services

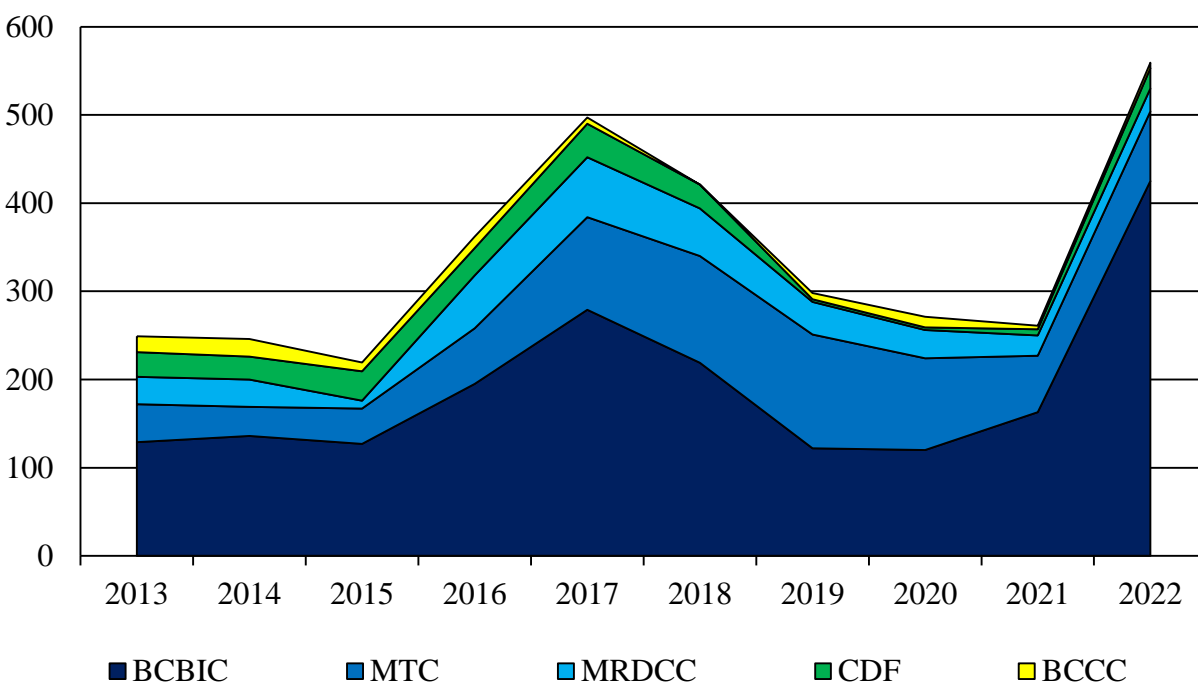
Since fiscal 2017, the overall population under DPDS jurisdiction has not changed to a great extent. This is due, in part, to bail reform, which has resulted in more defendants released without bond but has also increased those held without bond. While overall commitments have not increased, those committed 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 the ADP. The population declined in the past three years 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 slower movements by the courts. The length of stay improved by the end of fiscal 2021 to 5.8 months, which was comparable to pre-pandemic levels. In July 2022, the length of stay reduced

to approximately 3.1 months on average for BCBIC, MTC, MRDCC, and YDC sentenced offenders.

## 2. Assaults Spike 94% in DPDS Facilities

**Exhibit 3** shows the number of offender-on-offender assaults within BCBIC, MRDCC, MTC, CDF, and BCCC since fiscal 2013. Assaults at BCBIC have spiked to the highest number and highest rate seen since the Managing for Results (MFR) measure started tracking this number. Offender-on-offender assaults in BCBIC more than doubled from 163 in fiscal 2021 to 425 in fiscal 2022. Assaults on staff also increased by 45% for these facilities and nearly doubled at BCBIC from 45 to 88.

**Exhibit 3  
Offender-on-offender Assaults in Baltimore City Facilities  
Fiscal 2013-2022**



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

Note: Estimated assaults calculated by multiplying average daily population of facility by rate of assault per fiscal year.

Source: Department of Public Safety and Correctional Services; Department of Legislative Services

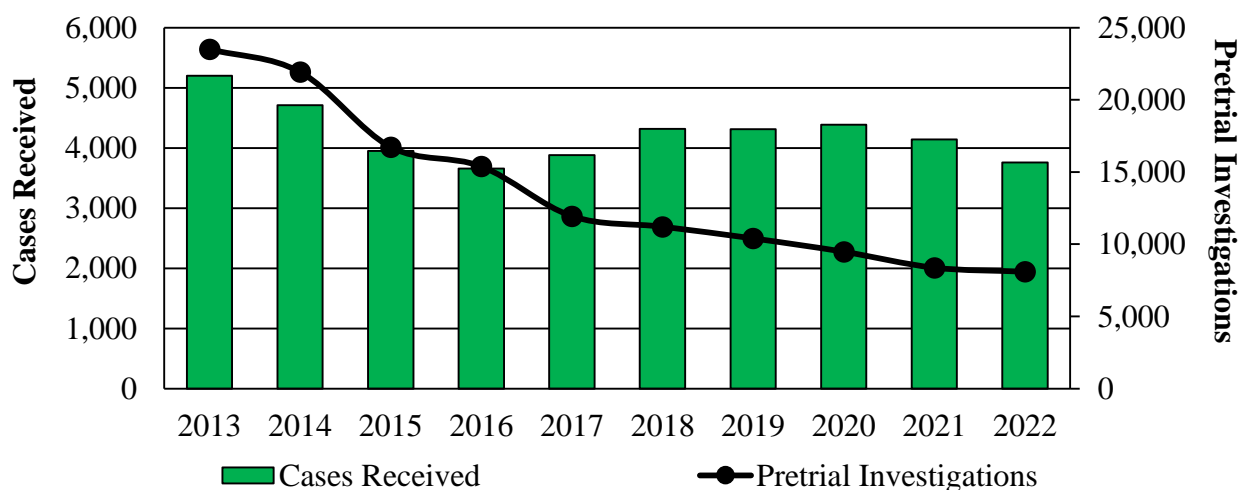
The facilities with the highest rate of assaults per 100 ADP are BCBIC and MTC with 43.4 and 14.0 offender-on-offender assaults per 100 ADP, respectively. The level of safety in facilities is impacted by the state of the workforce, which has been strained from years of growing mandatory overtime. Tired employees are less likely to pick up on dangerous situations and may even contribute to the danger through negligence. Further information on overtime can be found in Issue 1 of this analysis.

### 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 2013 to 2022 is 66%. PRSP received over 4,000 cases per year on average, 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 declined in fiscal 2021 due to sustained court closures and again in fiscal 2022 to only 3,757. **Exhibit 4** shows the decline in pretrial investigations along with the number of supervision cases received each year over the past decade. At the end of fiscal 2022, PRSP had 964 clients on supervision, which is less than the average during the last decade.

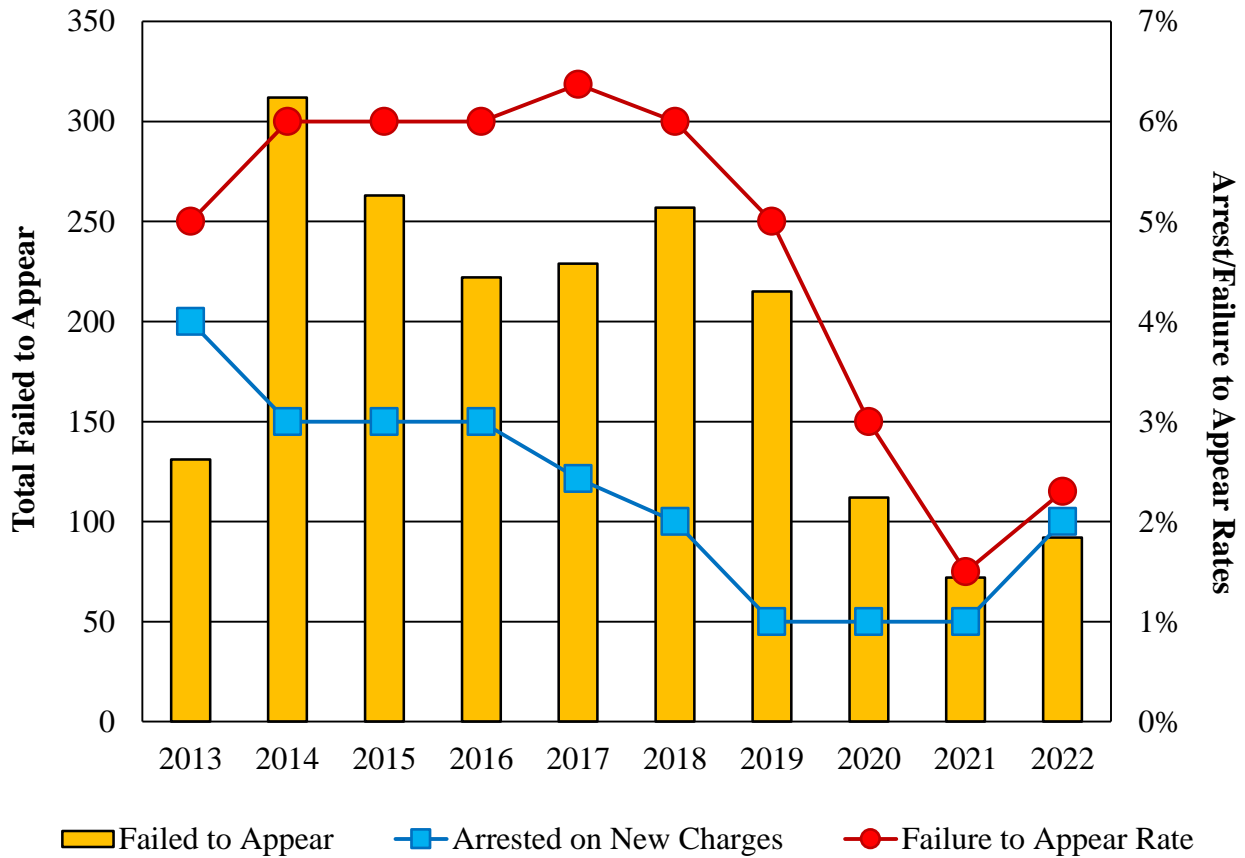
**Exhibit 4**  
**Defendants under Pretrial Release Supervision or Investigation**  
**Fiscal 2013-2022**



Source: Department of Public Safety and Correctional Services

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 2022 – 2% of defendants were arrested on new charges and 2% (92 individuals) failed to appear in court. The decrease from fiscal 2019 to 2021 may have been partially the result of court closures, but PRSP continues to meet both of its MFR goals as reopening continues.

**Exhibit 5**  
**PRSP Defendants Arrested on New Charges and Failure to Appear Rates**  
**Fiscal 2013-2022**



PRSP: Pretrial Release Services Program

Source: Department of Public Safety and Correctional Services



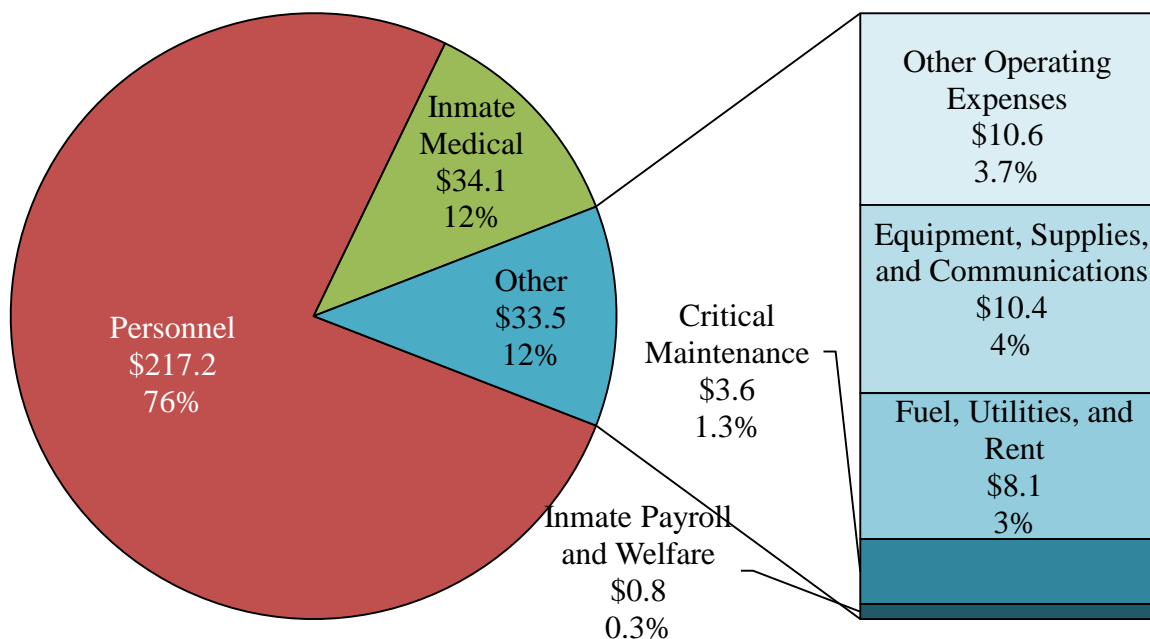
## Fiscal 2023

Actual spending in fiscal 2022 on overtime was higher than anticipated in the working appropriation by 10.6%, or \$4.6 million. Hours worked on overtime are increasing again in fiscal 2023, particularly for DPDS where the working appropriation is lower than actuals and will likely require transfer of salary savings from elsewhere in the department again if hiring does not pick up. **DPSCS should identify the overall amount of vacancy savings in fiscal 2022 that was used to fund other purposes and the amount of excess vacancy savings generated so far in fiscal 2023.** Further information on overtime can be found in Issue 1 of this analysis.

## Fiscal 2024 Overview of Agency Spending

The fiscal 2024 allowance for DPDS is \$284.7 million. Three-quarters of agency spending is dedicated to personnel costs for the 1,792 regular positions. Inmate medical care, including mental health, dental, and pharmacy services, accounts for approximately \$34.1 million, or 12%. Other costs to operate facilities and provide services to inmates are \$33.5 million. **Exhibit 6** shows DPDS expenses by category.

**Exhibit 6**  
**Overview of Agency Spending**  
 Fiscal 2024 Allowance  
 (\$ in Thousands)



Source: Governor’s Fiscal 2024 Budget Books

**Proposed Budget Change**

The fiscal 2024 allowance for DPDS increases by \$9.8 million from the fiscal 2023 working appropriation. Overtime is the single largest driver of the increase. **Exhibit 7** shows the budget change by spending item.

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

<b>How Much It Grows:</b>	<b><u>General Fund</u></b>	<b><u>Special Fund</u></b>	<b><u>Federal Fund</u></b>	<b><u>Reimb. Fund</u></b>	<b><u>Total</u></b>
Fiscal 2022 Actual	\$146,283	\$509	\$118,875	\$163	\$265,830
Fiscal 2023 Working Appropriation	245,123	1,046	28,603	171	274,943
Fiscal 2024 Allowance	<u>251,478</u>	<u>3,712</u>	<u>29,407</u>	<u>151</u>	<u>284,748</u>
Fiscal 2023-2024 Amount Change	\$6,355	\$2,665	\$804	-\$20	\$9,805
Fiscal 2023-2024 Percent Change	2.6%	254.7%	2.8%	-11.8%	3.6%

<b>Where It Goes:</b>	<b><u>Change</u></b>
<b>Personnel Expenses</b>	
Overtime earnings .....	\$7,084
Employee and retiree health insurance .....	3,215
Annualization of November 2022 4.5% COLA.....	1,734
Workers’ compensation premium assessment .....	729
Employee retirement contributions .....	134
Other fringe benefit adjustments .....	-17
Position transfers .....	-171
Regular earnings .....	-912
Turnover adjustments.....	-1,640
<b>Other Changes</b>	
Critical maintenance .....	1,473
Fuel and utilities.....	726
Inmate Transport Unit vehicle replacements .....	365
Other operational changes.....	-32
Dietary contractual workers.....	-41

*Q00T04 – DPSCS – Division of Pretrial Detention and Services*

<b>Where It Goes:</b>	<b><u>Change</u></b>
Supplies and materials .....	-136
Reduction in SUD treatment costs related to establishing an MAT program.....	-947
Medical, dental, and pharmacy costs .....	-1,763
<b>Total</b>	<b>\$9,805</b>

COLA: cost-of-living adjustment  
MAT: medication assisted treatment  
SUD: substance use disorder

Note: Numbers may not sum to total due to rounding.

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### **Budget Increases Most for Personnel Costs**

The large amount of overtime created by staffing shortages in correctional facilities drives the budget change with a total increase of \$7.1 million for DPDS. For more information, Issue 1 of this analysis details the recent increases in overtime. Annualization of a 4.5% cost-of-living adjustment provided in November 2022 adds \$1.7 million to the fiscal 2024 allowance. Health insurance costs, driven by the market, account for \$3.2 million of the increase. The amount budgeted for turnover expectancy is also adjusted from 12.4% to 13.7%, removing \$1.6 million.

Of the other operational changes, critical maintenance and vehicle replacement costs increase to match actuals. Electricity costs also increase substantially in line with the current electricity and utility market. Medical, dental, and pharmacy costs also decrease for DPDS as the overall amounts for these services are distributed across DPSCS functions in proportion to their share of the inmate population.

### **New Substance Use Disorder Treatment Contracts**

Substance Abuse disorder (SUD) treatment spending appears to decrease in fiscal 2024, but it should be noted that SUD spending increases overall by a wide margin from fiscal 2022 actuals. DPSCS recently came into contract with GEO Reentry Services to provide SUD services for facilities in Baltimore City and Westcare Foundation for facilities across the State. Part of the SUD contract is bringing the department into compliance with Chapter 352 of 2019, the Medication Assisted Treatment Pilot Program. This pilot program incurs startup costs in fiscal 2023 that do not continue into fiscal 2024, causing the numbers to appear deflated.

## ***Personnel Data***

	<b><u>FY 22</u></b>	<b><u>FY 23</u></b>	<b><u>FY 24</u></b>	<b><u>FY 23-24</u></b>
	<b><u>Actual</u></b>	<b><u>Working</u></b>	<b><u>Allowance</u></b>	<b><u>Change</u></b>
Regular Positions	1,775.60	1,793.60	1,791.60	-2.00
Contractual FTEs	<u>19.42</u>	<u>92.58</u>	<u>37.36</u>	<u>-55.22</u>
<b>Total Personnel</b>	<b>1,795.02</b>	<b>1,886.18</b>	<b>1,828.96</b>	<b>-57.22</b>

### ***Vacancy Data: Regular Positions***

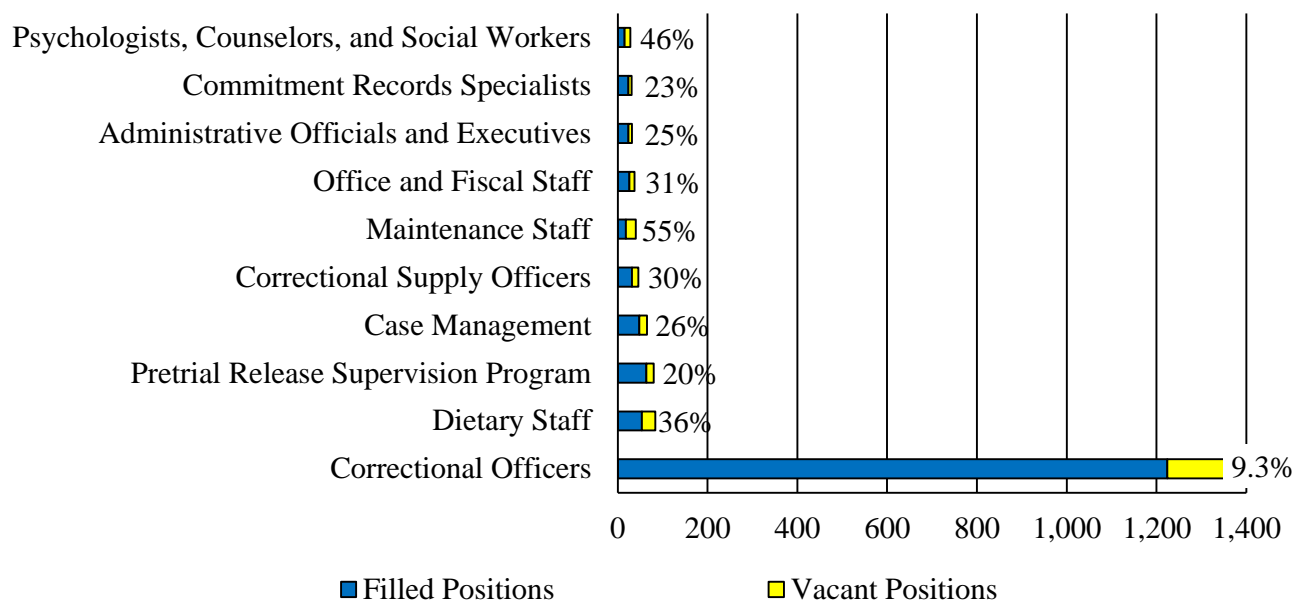
Turnover and Necessary Vacancies, Excluding New Positions	245.45	13.70%
Positions and Percentage Vacant as of 12/31/22	264.60	14.75%
Vacancies Above Turnover	19.15	

- Contractual full-time equivalents are reduced by 55, but funding remains the same. This action removed about 34 contractual dietary positions that were vacant more often than filled.
- A correctional officer (CO) lieutenant and CO sergeant are transferred out of DPDS and into the Office of the Secretary as part of enhancing security operations.

### **Vacancies**

Positions within DPDS are 14.75% vacant as of January 2023. This is higher than the January 2022 rate of 12.8%. The increase in the vacancy rate is driven by an increase in CO vacancies, as these make up the majority of DPDS employees, and 34 more COs are vacant than a year ago. Vacancy rates are highest within the maintenance staff (55%), office and fiscal staff (31%), and mental health professionals and social workers series (46%). The highest number of vacancies is within the CO series responsible for maintaining custody of offenders. DPDS is allowed 1,350 CO positions, but 126 are currently vacant, or 9.3%. **Exhibit 8** lists the programs with the highest vacancies in the division with their respective vacancy rates. As high as these vacancy rates are currently, some categories have improved from a year ago, including Commitment Records Specialists, PRSP staff, and office and fiscal staff.

**Exhibit 8  
Vacancies by Classification  
January 2023**



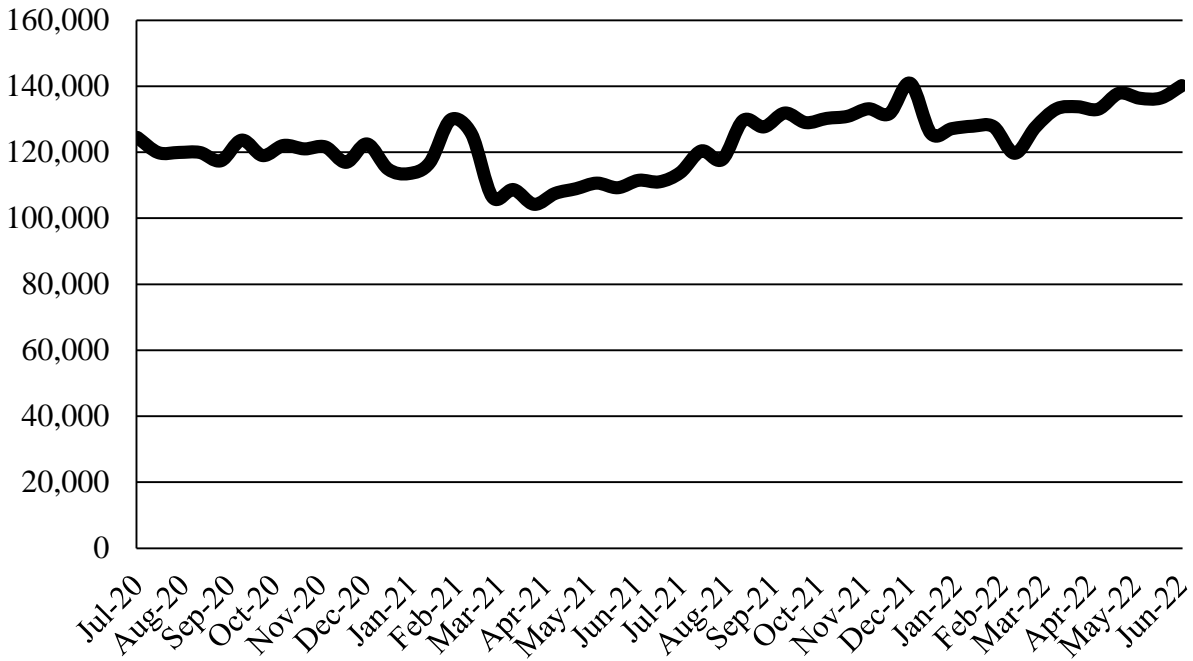
Source: Department of Budget and Management

## *Issues*

### **1. Overtime Hours and Spending Rose Significantly in Fiscal 2022**

Since fiscal 2015, DPSCS has struggled to fill their vacant CO positions. This has been a point of particular concern due to the safety risks associated with overworked personnel in an already dangerous environment. While assaults are on the increase, staffing shortages that have been documented in the budget analyses for DPSCS Corrections – Q00B and DPSCS Overview – Q00 have driven overtime to unseen levels both in cost and in total hours worked. DPSCS provided an accounting of CO I and CO II overtime by facility for fiscal 2022 and previously provided an accounting extending to July 2020 per two-week pay period. **Exhibit 9** shows the increase over time since the end of fiscal 2021. Overtime dipped during COVID-19 due to increased hiring and facilities seeing less foot traffic resulting from health protocols, which eased the burden on officers. However, hiring has fallen below attrition again, populations under custody are rising, and health protocols have eased.

**Exhibit 9**  
**Departmentwide CO I and CO II Overtime Hours Worked**  
**Fiscal 2021-2022**



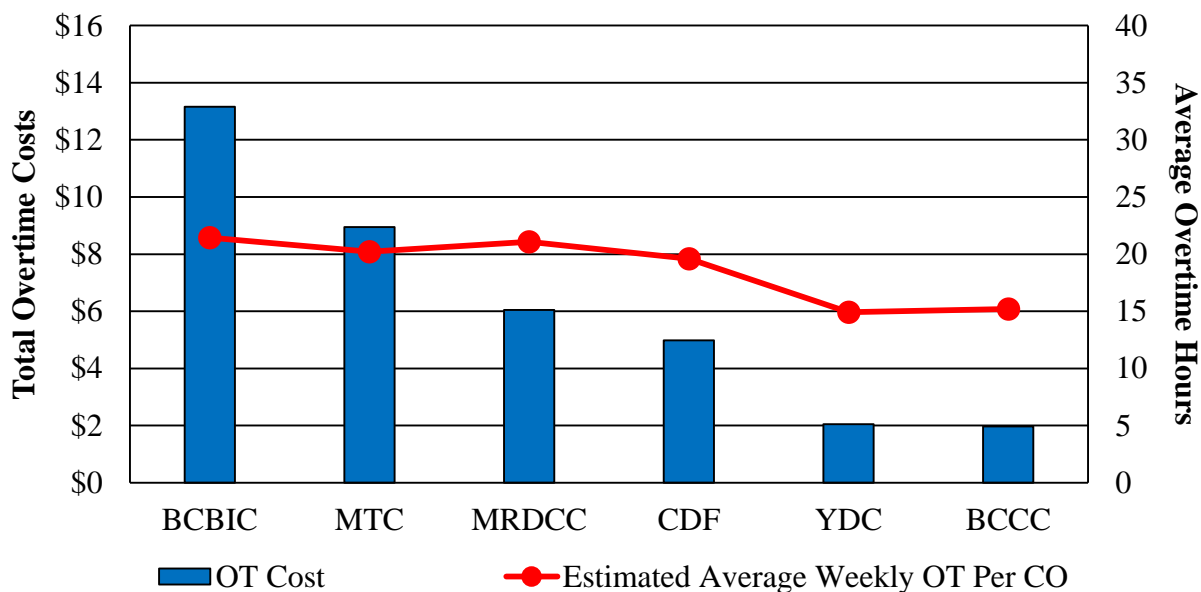
CO: correctional officer

Note: Data only show overtime earnings and hours for CO I and CO II positions and excludes those in the Deputy Secretary of Operations.

Source: Department of Public Safety and Correctional Services

From June 2021 to June 2022, departmentwide overtime hours worked rose from 114,000 to 144,000, an increase of 26%. In that same timeframe, overtime spent per pay period increased 24% from \$4.6 million to \$5.7 million. In fiscal 2022, overtime hours were especially high in a few DPDS facilities. Four out of six Baltimore City facilities saw CO overtime averaging approximately 20 hours per week. BCBIC uses the most overtime and should be noted as having the highest traffic of offenders in and out and the highest level of assaults. **Exhibit 10** breaks down entry-level CO overtime for DPDS facilities, totaling \$37 million for fiscal 2022.

**Exhibit 10  
DPDS Overtime by Facility  
Fiscal 2022  
(\$ in Millions)**



BCBIC: Baltimore Central Booking and Intake Center  
 BCCC: Baltimore City Correctional Center  
 CDF: Chesapeake Detention Facility  
 CO: Correctional Officer  
 MRDCC: Maryland Reception Diagnostic and Classification Center  
 MTC: Metropolitan Transition Center  
 OT: Overtime  
 YDC: Youth Detention Center

Note: Data show overtime earnings and hours for CO I and CO II positions only. Average overtime hours worked per CO per week was estimated by dividing average overtime hours per pay week for each facility in fiscal 2022 by the total number of CO I and CO II PINs adjusted by the average CO vacancy rate for fiscal 2022.

Source: Department of Public Safety and Correctional Services

Excessive overtime has become a drain on human resources in the department and led to a riskier work environment for State employees, offenders, and volunteers. The amounts have trended steeply while DPSCS has struggled to fill CO positions. There have also been systemic errors in accounting for overtime that led to an ongoing U.S. Department of Labor investigation into unpaid wages. The investigation has already resulted in retroactive payments of \$30 million in fiscal 2022 and is anticipated to result in additional retroactive payments.

In recognition of the fundamental need to reduce the number of overtime hours required by staff, the Department of Legislative Services (DLS) recommends the budget committees adopt budget bill language restricting funds until a report is submitted on overtime hours and assaults. The report should include the following information:

- a breakdown of CO overtime hours worked and expenses paid per facility per pay period from July 2015 to July 2023;
  - an analysis of assaults in facilities that utilizes the case information available to the department to determine patterns in assaults with regard to overtime use and any other factor that may influence assault rates;
  - a detailed description of the specific actions taken to reduce overtime costs and the assessed and projected impacts of those actions; and
  - an update on the U.S. Department of Labor investigation into overtime pay errors, including the number of individuals affected, the timeframe affected, and the total and median amounts required to be paid.
2. **DPDS Remains Out of Compliance with Medical Provisions of *Duvall v. Hogan* Settlement Despite Consultancy**

### **Background**

In 2015, the American Civil Liberties Union filed on behalf of Jerome Duvall and other Baltimore City Detention Center (BCDC) detainees to reopen a partial settlement agreement regarding conditions at the former BCDC. The *Duvall v. Hogan* settlement agreement as amended contained stipulations in several areas. Of the areas listed below, DPDS is in substantial compliance with daily “Sick Call” and the three physical plant compliance 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;



*Q00T04 – DPSCS – Division of Pretrial Detention and Services*

- 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 subprovisions 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.

**Compliance Downgraded on Certain Medical and Mental Health Requirements**

The Office of Administrative Services received \$750,000 in fiscal 2023 to procure attorneys and experts to reach substantive compliance with a number of provisions of the *Duvall* litigation within 18 months. From December 2021 to September 2022, since the consultation agreement was put in place, seven provisions have been upgraded in compliance, while eight have been downgraded. This may reflect fluctuations in compliance based on temporary efforts as well as the termination of a medical record system procurement and the addition of a new SUD treatment and mental health contract. The upgraded provisions are listed in **Exhibit 11**.

**Exhibit 11**  
**Upgraded Areas of *Duvall* Settlement Compliance**  
**December 2021 to September 2022**

<u>Provision</u>	<u>Description</u>	<u>Status</u>
18f	Plan of Care accessibility to clinicians.	Partial Compliance
19b	Appropriate documentation of Medication Administration Records to include nursing credentials and refusal info.	Partial Compliance
21b	Designated trained staff to address Americans with Disabilities Act (ADA) patient accommodations.	Partial Compliance
21c	ADA patients access to same care/visits as general population.	Partial Compliance
25c	Timely mental health evaluations by Mental Health Professionals when urgently referred within 24 hours.	Substantial Compliance
25f-ii	Mental health treatment plan established within 14 days of admissions into the facility if clinically indicated.	Substantial Compliance
25g	Mental health reassessed upon return from State hospital for mental health problems.	Substantial Compliance

Source: Department of Public Safety and Correctional Services

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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 all four Sick Call provisions. DPDS is in substantial compliance with three and partial compliance with four provisions relating to the interaction between medical staff and custody staff. **Exhibit 12** shows provisions that were downgraded since December 2021 according to information provided by DPSCS in the 2022 and 2023 sessions.

DPDS is substantially compliant for one and partially compliant for three provisions relating to inmates with disabilities, an improvement over the two noncompliant provisions in December 2022. However, one provision was downgraded from substantial to partial compliance with regards to ensuring those with disabilities that require special accommodations receive those accommodations.

**Exhibit 12**  
**Downgraded Areas of *Duvall* Settlement Compliance**  
**December 2021 to September 2022**

<u>Provision</u>	<u>Description</u>	<u>Status</u>
17b	Assessment of urgent needs and identification prescribed medications within 24 hours of Initial Medical and Mental Health Screen.	Partial Compliance**
19e – ii.	Clinicians to document review of all results within a reasonable timeframe.	Noncompliance*
19f	Clinicians to order labs within timeframes consistent with test urgency.	Noncompliance*
19g	Clinicians’ recognition and communication of clearly defined abnormal vital signs with appropriate actions taken.	Noncompliance*
20c	Medical having daily access to the Offender Case Management System patient location information.	Partial Compliance**
20d	Cooperation between custody and medical for organized medication administration.	Partial Compliance**
21a	Timely delivery of necessary medical supplies and special housing accommodations.	Partial Compliance**
22b	Specialists’ referrals with review and approval of consultations not exceeding 48 hours for urgent care and five business days for routine care.	Noncompliance*
22c	Logs are maintained documenting approval request dates, Utilization Management action dates, outcome details, and referral purpose.	Noncompliance*

\* Downgraded from Partial Compliance

\*\* Downgraded from Substantial Compliance

Source: Department of Public Safety and Correctional Services

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 586 inmates require some type of ADA accommodation. However, the majority of facilities remain partially out of ADA compliance on wheelchair accessibility for inmates, staff, and the public. An ongoing survey of DPSCS facilities 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 2023 *Capital Improvement Program* (CIP) 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, which has an extensive backlog of \$80 million.

### **Planned Improvements Are Delayed**

First, 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. The project has been in the works for many years and the current iteration received funding in fiscal 2021 for design. Delays have pushed design start back at least six months and total cost estimates have increased by \$50 million in the current 2023 CIP.

Second, DPSCS is implementing a new Electronic Patient Health Record (EPHR) as a Major Information Technology Development Project (MITDP). The legacy system has been identified as an obstacle to reaching substantial compliance on several of the medical and mental health care provisions. An award was made on November 1, 2020, in the amount of \$31.2 million over seven years to Fusion Capital Management, LLC. Teams began working on the successful extraction of legacy data, and progress was made on the development of templates, forms, and other pertinent processes relative to medical and mental health workflows.

The EPHR was scheduled for completion in January 2023, but the vendor failed to meet several contractual obligations during its work, and a notice of default was submitted, terminating the contract on May 24, 2022. As a mitigation measure, DPSCS sought a two-year contract extension for its legacy EPHR vendor (NextGen) to provide ongoing services relative to software licensing, maintenance, support, and customizations for the legacy EPHR to meet the legal requirements as set forth in *Duvall*. The department plans to resolicit the project in the first quarter of fiscal 2024 as it works on other MITDPs. This may place the department approximately three years behind schedule. A program manager is assigned to the project.

DPSCS still has much work to be done in reaching and maintaining compliance. **DPSCS should brief the committees regarding the actions and results of the legal consultants hired to assist with *Duvall* compliance. DPSCS should also comment on actions that are necessary to ensure that staff follow standards of compliance, particularly in areas where compliance has been downgraded.**

## Operating Budget Recommended Actions

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1. Add the following language to the general fund appropriation:

, provided that \$300,000 of this appropriation made for the purpose of overtime earnings may not be expended until the Department of Public Safety and Correctional Services submits a report on overtime and assaults. The report scope shall include the entire department. The report shall include:

- (1) a breakdown of correctional officer overtime hours worked and expenses paid per facility per pay period from July 2015 to July 2023;
- (2) a detailed description of the specific actions taken to reduce overtime costs and the assessed and projected impacts of those actions;
- (3) an analysis of assaults in facilities that utilizes the case information available to the department to determine patterns in assaults with regard to overtime use and any other factor that may influence assault rates;
- (4) a detailed description of the specific actions taken to reduce assaults and the assessed and projected impacts of those actions; and
- (5) an update on the U.S. Department of Labor investigation into overtime pay errors, including the number of individuals affected, the timeframe affected, and the total and median amounts required to be paid.

The report shall be submitted by October 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

**Explanation:** Excessive overtime has become a drain on human resources in the department and led to a riskier work environment for State employees, offenders, and volunteers. The amounts have trended steeply since the Department of Public Safety and Correctional Services (DPSCS) has struggled to fill correctional officer positions. Assaults are also on the rise particularly in detention facilities. There have also been systemic errors in accounting for overtime that led to an ongoing U.S. Department of Labor investigation into unpaid wages. The investigation has already resulted in retroactive payments of \$30 million in fiscal 2022 and is anticipated to result in additional retroactive payments. This language restricts overtime funding in the fiscal 2024 budget for the Baltimore Central Booking and Intake Center until a report is submitted detailing overtime trends, assault patterns, and efforts to reduce overtime.

*Q00T04 – DPSCS – Division of Pretrial Detention and Services*

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Overtime and assaults report	DPSCS	October 1, 2023

**Appendix 1**  
**2022 Joint Chairmen’s Report Responses from Agency**

The 2022 *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.

- ***Inmate Behavioral Health Report:*** The budget committees have been concerned with the state of mental health care provided to inmates in the care of DPSCS, particularly related to the provisions of the *Duvall v. Hogan* settlement agreement. DPSCS provided a detailed breakdown of the process for determining behavioral health needs, an example plan of care, and statistics regarding overall behavioral health needs for the incarcerated population.
  - Acute cases can be very intense and require heightened levels of supervision from mental health and custodial staff. Risk reduction plans include removing or securing any methods of self-harm, decreasing isolation, decreasing unhealthy impulses, reestablishing equilibrium, and restoring the patient to a state of feeling safe, secure, and in control.
  - Several levels of care are available and triaged via an initial medical and mental health screening, a suicide risk evaluation, and a seven-day follow up assessment of the offender’s adjustment to incarceration. Level 1 care represents outpatient psychology and counseling services available at all facilities; Level 2 care represents Special Needs Units (SNU) at BCBIC, Maryland Correctional Institution for Women (MCIW), Roxbury Correctional Institution (RCI), and North Branch Correctional Institution; and Level 3 care represents Licensed Inpatient Mental Health Units (IMHU) at the Patuxent Institution, BCBIC, and MCIW.
  - Level 1 care is performed in general population. Level 2 care is considered general population but is located in SNUs with an ADP of 87 in June 2022. Level 3 care is performed in IMHUs with an ADP of 178 in June 2022. The SNUs at RCI and MCIW reached capacity in fiscal 2022 50% and 25% of the time, respectively. None of the IMHUs reached capacity in any month of fiscal 2022. Mental health records of incarcerated individuals show that 26% were mentally ill on average in fiscal 2022.

**Appendix 2**  
***Duvall v. Hogan Provisions***

<b><u>Provision</u></b>	<b><u>Description</u></b>	<b><u>Status – September 2022</u></b>
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)	Partial 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 seven 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.	Partial Compliance+
19a	Timely, uninterrupted medication renewal.	Noncompliance



*Q00T04 – DPSCS – Division of Pretrial Detention and Services*

<b><u>Provision</u></b>	<b><u>Description</u></b>	<b><u>Status – September 2022</u></b>
19b	Appropriate documentation of Medication Administration Records to include nursing credentials and refusal info.	Partial Compliance+
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.	Noncompliance*
19f	Clinicians to order labs within timeframes consistent with test urgency.	Noncompliance*
19g	Clinicians’ recognition and communication of clearly defined abnormal vital signs with appropriate actions taken.	Noncompliance**
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.	Partial Compliance**
20d	Cooperation between custody and medical for organized medication administration.	Partial Compliance**
20e	Temperature-controlled housing and heat stratification.	Substantial Compliance

*Q00T04 – DPSCS – Division of Pretrial Detention and Services*

<b><u>Provision</u></b>	<b><u>Description</u></b>	<b><u>Status – September 2022</u></b>
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.	Partial Compliance**
21b	Designated trained staff to address Americans with Disabilities Act (ADA) patient accommodations.	Partial Compliance+
21c	ADA patients access to same care/visits as general population.	Partial Compliance+
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 five business days for routine care.	Noncompliance**
22c	Logs are maintained documenting approval request dates, Utilization Management action dates, outcome details, and referral purpose.	Noncompliance**
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

*Q00T04 – DPSCS – Division of Pretrial Detention and Services*

<b><u>Provision</u></b>	<b><u>Description</u></b>	<b><u>Status – September 2022</u></b>
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.	Substantial 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.	Substantial 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.	Substantial Compliance++
25h	Ability of anyone to place patient on suicide watch.	Substantial Compliance

\* Downgraded from Partial Compliance

\*\* Downgraded from Substantial Compliance

+ Upgraded from Noncompliance

++ Upgraded from Partial 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 22</u> <u>Actual</u>	<u>FY 23</u> <u>Working</u> <u>Appropriation</u>	<u>FY 24</u> <u>Allowance</u>	<u>FY 23 - FY 24</u> <u>Amount Change</u>	<u>Percent</u> <u>Change</u>
<b>Positions</b>					
01 Regular	1,775.60	1,793.60	1,791.60	-2.00	-0.1%
02 Contractual	19.42	92.58	37.36	-55.22	-59.6%
<b>Total Positions</b>	<b>1,795.02</b>	<b>1,886.18</b>	<b>1,828.96</b>	<b>-57.22</b>	<b>-3.0%</b>
<b>Objects</b>					
01 Salaries and Wages	\$ 202,933,538	\$ 203,535,219	\$ 217,160,887	\$ 13,625,668	6.7%
02 Technical and Special Fees	1,013,489	653,734	630,900	-22,834	-3.5%
03 Communication	670,910	638,926	671,950	33,024	5.2%
04 Travel	2,959	10,000	8,000	-2,000	-20.0%
06 Fuel and Utilities	9,307,884	6,835,300	7,561,797	726,497	10.6%
07 Motor Vehicles	606,653	331,267	696,470	365,203	110.2%
08 Contractual Services	39,376,405	46,156,051	43,334,002	-2,822,049	-6.1%
09 Supplies and Materials	10,580,016	9,764,059	9,628,497	-135,562	-1.4%
10 Equipment – Replacement	507,196	118,620	120,570	1,950	1.6%
11 Equipment – Additional	109,810	0	0	0	0.0%
12 Grants, Subsidies, and Contributions	401,655	829,310	824,094	-5,216	-0.6%
13 Fixed Charges	319,045	457,651	510,976	53,325	11.7%
14 Land and Structures	0	2,127,000	3,600,000	1,473,000	69.3%
<b>Total Objects</b>	<b>\$ 265,829,560</b>	<b>\$ 271,457,137</b>	<b>\$ 284,748,143</b>	<b>\$ 13,291,006</b>	<b>4.9%</b>
<b>Funds</b>					
01 General Fund	\$ 146,283,043	\$ 242,055,479	\$ 251,478,373	\$ 9,422,894	3.9%
03 Special Fund	508,641	1,043,088	3,711,843	2,668,755	255.9%
05 Federal Fund	118,875,221	28,187,180	29,406,717	1,219,537	4.3%
09 Reimbursable Fund	162,655	171,390	151,210	-20,180	-11.8%
<b>Total Funds</b>	<b>\$ 265,829,560</b>	<b>\$ 271,457,137</b>	<b>\$ 284,748,143</b>	<b>\$ 13,291,006</b>	<b>4.9%</b>

Note: The fiscal 2023 appropriation does not include deficiencies. The fiscal 2024 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 22 Actual</u>	<u>FY 23 Wrk Approp</u>	<u>FY 24 Allowance</u>	<u>Change</u>	<u>FY 23 - FY 24 % Change</u>
01 Chesapeake Detention Facility	\$ 31,356,925	\$ 32,715,249	\$ 39,981,883	\$ 7,266,634	22.2%
02 Pretrial Release Services	5,625,813	7,117,431	7,299,751	182,320	2.6%
04 Central Booking and Intake Facility	81,195,884	81,379,340	83,810,065	2,430,725	3.0%
05 Baltimore Pretrial Complex	16,952,832	17,275,022	18,476,969	1,201,947	7.0%
06 Maryland Reception Diagnostic and	42,547,386	45,070,585	45,510,713	440,128	1.0%
07 Baltimore City Correctional Center	18,178,432	18,283,373	19,212,825	929,452	5.1%
08 Metropolitan Transition Center	68,019,799	67,319,054	68,014,560	695,506	1.0%
09 General Administration	1,952,489	2,297,083	2,441,377	144,294	6.3%
<b>Total Expenditures</b>	<b>\$ 265,829,560</b>	<b>\$ 271,457,137</b>	<b>\$ 284,748,143</b>	<b>\$ 13,291,006</b>	<b>4.9%</b>
General Fund	\$ 146,283,043	\$ 242,055,479	\$ 251,478,373	\$ 9,422,894	3.9%
Special Fund	508,641	1,043,088	3,711,843	2,668,755	255.9%
Federal Fund	118,875,221	28,187,180	29,406,717	1,219,537	4.3%
<b>Total Appropriations</b>	<b>\$ 265,666,905</b>	<b>\$ 271,285,747</b>	<b>\$ 284,596,933</b>	<b>\$ 13,311,186</b>	<b>4.9%</b>
Reimbursable Fund	\$ 162,655	\$ 171,390	\$ 151,210	-\$ 20,180	-11.8%
<b>Total Funds</b>	<b>\$ 265,829,560</b>	<b>\$ 271,457,137</b>	<b>\$ 284,748,143</b>	<b>\$ 13,291,006</b>	<b>4.9%</b>

Note: The fiscal 2023 appropriation does not include deficiencies. The fiscal 2024 allowance does not include contingent reductions or cost-of-living adjustments.