



Department of Public Safety and Correctional Services

Maryland Commission on Correctional Standards

6776 REISTERSTOWN ROAD • SUITE 304 • BALTIMORE, MARYLAND 21215-2341
(410) 585-3830 • FAX (410) 764-4113 • V/TTY (800) 735-2258 • www.dpsscs@maryland.gov

STATE OF MARYLAND

WES MOORE
GOVERNOR

ARUNA MILLER
LT. GOVERNOR

CAROLYN SCRUGGS
SECRETARY

ANTHONY A. GASKINS
CHIEF OF STAFF

CHRISTINA LENTZ
DEPUTY SECRETARY
ADMINISTRATION

ANNIE D. HARVEY
DEPUTY SECRETARY
OPERATIONS

ANGELINA GUARINO
ASSISTANT SECRETARY
POLICY, DATA AND GRANTS

VACANT
ASSISTANT SECRETARY
PROGRAMS, TREATMENT AND
RE-ENTRY SERVICES

THOMAS REECE
CHAIRPERSON

VERONICA D. MOORE
EXECUTIVE DIRECTOR

ROXBURY CORRECTIONAL INSTITUTION

AUDIT REPORT

MARCH 28, 2024

An audit of the Roxbury Correctional Institution was conducted on August 22-24, 2023 by Commission staff and six Duly Authorized Inspectors. This Final Report and Compliance Plan were approved by the Commission on Correctional Standards at its virtual meeting on March 28, 2024.

SUMMARY

The Roxbury Correctional Institution is located in Hagerstown, Maryland, houses male inmates committed to the Division of Correction, classified and sentenced at the medium level of security. The facility is under the administrative authority of Commissioner Phil Morgan. The facility is managed daily by Warden Carlos Bivens.

AUDIT RESULTS

After a thorough review of the required documentation, the Roxbury Correctional Institution was found to be in compliance with the majority of the standards for an Adult Correctional Institution. The identified deficiencies are listed below:

- **Records of the monthly inspection of security equipment were not available for the Armory from May 2022-July 2023, and the Master Control from March 2023-April 2023, during the audit period, as required by the standard.**
- **A second semi-annual facility search was not conducted for January 2021 – December 2021 nor January 2022 – December 2022, during the audit period, as required by the standard.**

- **Quarterly inspections of keys were not conducted for the key rings, vault keys, and vault locks during various quarters of each year, during the audit period of September 1, 2020 through August 1, 2023, as required by the standard.**
- **Records were not available for the daily inventory of the Master Control Center keys for January 2021 - March 2021, November 2022 – December 2022, and the MCE Graphics keys from September 2020 – August 2023, during the audit period, as required by the standard.**
- **Records of the quarterly inspections of the tools were not available for the majority of the audit period of September 2020 through August 2023 in 62 of the tool areas, as required by the standard.**
- **MVA license checks were not conducted from September 2020 through August 2023, on officers approved to transport inmates, during the audit period, as required by the standard.**
- **Special Confinement records did not denote inmate activity, such as, visits, commissary, sick call or mail from September 2020 through June 2023, during the audit period, as required by the standard.**
- **Records of perpetual inventories of TCF's, which demonstrated issuance, were not available for the entire audit period for Auto Tech, Auto Department Supply, or the TAC Room, nor were they available for a majority of the audit period for the Barbershop, Gym, Chapel, Masonry, MCE Graphics, Food Service, Dental, ASIA, Master Control, Key Control Vault, 11-7 Sanitation, and there was incorrect accounting of TCFs in the Barber School, during the audit period of September 2020 through August 2023, as required by the standard.**

AUDIT PROCESS

The Remote Audit Process was initiated for this audit and the facility provided compliance documentation and the pre-audit packet for remote review by the auditors. The facility utilized the MCCS U drive and the RCI restrictive folder developed to facilitate the remote audit process. The audit coordinator demonstrated a high level of organization for documents within the RCI restrictive folder and those provided on-site. During the on-site audit, the facility staff was available to escort the audit team members to various locations throughout the facility, provided additional information upon request and answered questions, as needed from the auditors. The majority of the secondary documentation was located throughout the facility at the respective units, departments, in the conference room or in the audit coordinator's office. The facility improved its ability to facilitate remote inventories, interviews and reviews which enhanced the overall remote audit process. The audit coordination team and staff worked as a team to assist the auditors, address questions and resolve audit matters to ensure the on-site audit process was handled efficiently.

The manuals of standard operating procedures were found to be informative, and comprehensive and address safety and community concerns. The post orders, emergency plans and inmate orientation materials meet the needs of staff, inmates and the community. Standard .01Q requiring Separation of Sexes was non-applicable; because, this facility only houses male inmates.

FACILITY TOUR NOTES

The facility was toured by six groups of auditors and escorts. The facility demonstrated a high level of sanitation throughout, during the tour. Auditors cited very minor sanitation issues. A Tour Corrective Action Plan was provided to MCCA for areas that required additional time to address and repair. These areas include: in the Commissary, the tiles were water damaged; in the Dispensary, the dental air vents need cleaning, the glass is broken at ASIA #2, the toilet is inoperable in ASIA #3; in A Building, the light needs to be replaced in the Assistant Warden's office, the air vent needs cleaning in operations; in the Base, the entrance vestibule needs cleaning; in Housing Unit #3, the laundry filters need to be replaced, exterior screens need to be cleaned on A-Tier, there were 2 lights out in the control center and 1 light out in the stairwell of the control center; in Housing Unit #5, A-Tier, the laundry machine is inoperable, the water is not working in Cell 28, the hot water is not working in Cell 26, the toilet is slow to flush in Cell 44, graffiti needs to be removed from the walls, in Cell 25, the window will not close due to a birds nest, water is leaking when the toilet is flushed, the pipe chase between Cells 11 and 12 is leaking; in Food Service, the dishwasher and the refrigerator is out of service, the dryer racks hood lights are out; in the Chapel, the window blinds in room 116 need to be replaced, the ceiling tiles need to be replaced in room 108; in Receiving and ID, the vents need to be cleaned; in Housing Unit #2, A-Tier, the dryer vents need to be cleaned, the dayroom sink is leaking, there is chipped paint, the pipe chases have leaks and appear rusted, in Housing Unit #2, B-Tier, the upper level washing machine is broken, the light is dim in Cell 27, the upper level microwave is broken, the exterior window screens need cleaning, the paint is chipping throughout the tier, the pipe chases have leaks; in Housing Unit #2, C-Tier, there is a crack in the tier window, the washing machine and dryer do not work, the upper level shower has peeling paint, the lower level recreation hall sink has low water pressure, the sink is leaking, the lower level shower has chipped paint; in the Education Building, the ceiling tile needs to be replaced, the light panels need cleaning, the office areas have chipped paint, the multipurpose room floor needs cleaning. The outside facility grounds were very well manicured. The facility staff and the inmates continue to focus on an environment which is clean and safe.

MANAGING FOR RESULTS

The Department of Public Safety and Correctional Services (DPSCS) Managing for Results (MFR) initiative includes specific core objectives that address compliance with the minimum standards for places of adult confinement. Outlined below are the results for these objectives:

- Percent of applicable inmate security standards met 64%
- Percent of applicable inmate well-being standards met
 - * Medical, dental and mental health 100%
 - * Food Service 100%
 - * Housing and Sanitation 88%

The compliance results are incorporated as a part of this audit report for the Department of Public Safety and Correctional Services 2024 fiscal year reporting requirements for MFR.

CONCLUSION

The Maryland Commission on Correctional Standards will conduct a **monitoring review** of the documentation required to be submitted to MCCA, **no later than Tuesday, October 15, 2024**, to assess compliance with the standards found in noncompliance, at the audit. Upon completion of the assessment of the noncompliant standards, the Roxbury Correctional Institution may be recommended for the Recognition of Achievement Award.

The administration and staff of the Roxbury Correctional Institution continue to strive to meet the standards by using them as a guiding tool. The standards should be utilized in the daily operations of the facility to ensure the facility is achieving compliance. The Department of Public Safety is encouraged to provide the necessary resources to the facility, in order to foster Roxbury Correctional Institution's total compliance as an Adult Correctional Institution.

ROXBURY CORRECTIONAL INSTITUTION
COMPLIANCE PLAN

COMPLIANCE DUE DATE: October 1, 2024

MONITORING REVIEW DATE: October 15, 2024

Non-Compliance Standards	Deficiencies Noted	Corrective Action Needed
.01 E (3) Security Equipment	Records of the monthly inspection of security equipment were not available for the Armory from May 2022-July 2023 and the Master Control from March 2023-April 2023, during the audit period, as required by the standard.	Records of the monthly inspection of security equipment must be conducted and records maintained for all areas for the audit period, as required by the standard.
.01 J (2) Searches	A second semi-annual facility search was not conducted for January 2021 – December 2021 nor January 2022 – December 2022, during the audit period, as required by the standard.	Semi-annual facility searches must be conducted in all inmate living and activity areas and documentation must be maintained for the entire audit period, as required by the standard.
.01 K (2) Key Control	Quarterly inspections of keys were not conducted for the key rings, vault keys and vault locks during various quarters of each year, during the audit period of September 2020 through August 1, 2023, as required by the standard.	Quarterly inspections of keys must be conducted and documentation maintained for all areas for the audit period, as required by the standard.
.01 K (3) Key Control	Records were not available for the daily inventory of the Master Control Center keys for January 2021 - March 2021 and November 2022 – December 2022 and the MCE Graphics keys from September 2020 – August 2023, during the audit period, as required by the standard.	Daily inventories of keys of keys must be conducted and documentation maintained for all areas for the audit period, as required by the standard.

ROXBURY CORRECTIONAL INSTITUTION

COMPLIANCE PLAN

COMPLIANCE DUE DATE: October 1, 2024

MONITORING REVIEW DATE: October 15, 2024

Non-Compliance Standards	Deficiencies Noted	Corrective Action Needed
.01 L (2) Tool Control	Records of the quarterly inspections of the tools were not available for the majority of the audit period of September 2020 through August 2023 in 62 of the tool areas, as required by the standard.	Quarterly inspections of tools must be conducted and documentation maintained for all areas for the audit period, as required by the standard.
.01 M (1) Transportation of Inmates	MVA license checks were not conducted from September 2020 through August 2023, on officers approved to transport inmates, during the audit period, as required by the standard.	Authorized persons to transport inmates must have required motor vehicle licensure, which requires MVA license checks, annually, to be conducted and documentation is to be maintained for the audit period, as required by the standard.
.01 P (4) Special Confinement	Special Confinement records did not denote inmate activity, such as, visits, commissary, sick call or mail from September 2020 – June 2023, during the audit period, as required by the standard.	Documentation of an inmate’s access to services, program and activities, on special confinement, must be documented and available for the audit period, as required by the standard.

ROXBURY CORRECTIONAL INSTITUTION

COMPLIANCE PLAN

COMPLIANCE DUE DATE: October 1, 2024

MONITORING REVIEW DATE: October 15, 2024

Non-Compliance Standards	Deficiencies Noted	Corrective Action Needed
.04 A (4) Toxic, Caustic and Flammable Materials	Records of perpetual inventories of TCF's, which demonstrated issuance, were not available for the entire audit period for Auto Tech, Auto Department Supply, or the TAC Room, nor were they available for a majority of the audit period for the Barbershop, Gym, Chapel, Masonry, MCE Graphics, Food Service, Dental, ASIA, Master Control, Key Control Vault, 11-7 Sanitation and there was incorrect accounting of TCFs in the Barber School, during the audit period of September 2020 through August 2023, as required by the standard.	Issue and disposal of TCFs, i.e. perpetual inventories or issuance records, must be conducted and the records maintained for the entire audit period for all areas, as required by the standard.

Audit Activities

1. Facility:

Roxbury Correctional Institution

Date(s):

August 22-24, 2023

2. Audit Team Members:

Code	Name	Title/Rank	Affiliation
A	Veronica Moore	Executive Director/ ATL	MCCS
B	Tanya Joyner	Assistant Executive Director	MCCS
C	Brian Raivel	Correctional Program Specialist	MCCS
D	LaShawn Payton-Muhammad	Auditor	MCCS
E	Tareda Armwood-Faison	Officer/Auditor	MCCS
F	Diana Viville	Auditor	MCCS
G	Fateema Mobley	Lieutenant	MCIJ
H	Barry Jenkins	Correctional Officer II	CMCF
I	Amie Stott	Correctional Officer II	NBCI
J	Darlene Tasker	Sergeant	AACDF - ORCC
K	Jordan Tichnell	Correctional Case Management Supervisor	WCI
L	Lisa Mazingo	Correctional Case Management Specialist II	MCTC

3. Assigned Standards:

E, H	.01	Security/Inmate Control	J	.05	Inmate Rights
A, B, C, D, F	.02	Inmate Safety	K, L	.06	Classification
C, D	.03	Inmate Food Services	K, L	.07	Hearings
G, H	.04	Inmate Housing/Sanitation	C, D, J	.08	Administrative Record Keeping

4. Team Arrival/Departure Times:

Date: August 22-24, 2023 Team: A-L Arrival: 9:00 a.m. Departure: 4:30 p.m.

5. Entrance Interview:

Date: August 17, 2023

Time: 11:00 a.m. via Google Meet

Audit Team Members Present: A-F, H, J-L

Facility Staff Present: Warden Ricardo Bivens, Assistant Warden Todd Hull, Security Chief Dave Appel, Captain Stanford Hoffman, Lieutenant Rebekah Burke, Case Management Supervisor Kathryn Gorsuch, COII Tracy Purdy (Audit Coordinator) and other invited staff,

6. Tour: 6 Groups

Date: August 22, 2023

Time: 9:30 a.m. – 12:15 p.m.

Audit Team Members: A-L

Escorts: Captain S. Hoffman, Lieutenant R. Thomas, Captain L. Walley, Lieutenant R. Burke, Case Management Specialist II K. Baker, and Captain D. Newlin.

7. Inmate Interviews:

Date: August 7, 2023

Time: 10:00 a.m. – 10:30 a.m.

Audit Team Member: E

Characteristics:

Males: 5

Females: 0

Location: Remote Google Meet

8. Staff Interviews:

Characteristics:

Males: 13

Females: 10

Security: 11

Admin: 5

Medical: 3

Support: 3

Other: 1

9. Exit Interview:

Date: September 6, 2023

Time: 10:00 a.m. via Google Meet

Meet

Audit Team Members Present: A-F, H, J-L

Facility Staff Present: Warden Ricardo Bivens, Assistant Warden Todd Hull, Security Chief Dave Appel, Lieutenant Rebekah Burke, COII Tracy Purdy (Audit Coordinator) and other invited staff.

Descriptive Outline

- A. FACILITY: Roxbury Correctional Institution
- B. CATEGORY: Adult Correctional Institution
- C. ADMINISTRATIVE AUTHORITY: Commissioner Phil Morgan
- D. MANAGING OFFICIAL: Warden Carlos Bivens
- E. AUDIT COORDINATORS: Tracy Purdy, Correction Officer II
- F. STAFFING PATTERNS (as of this date): 6/15/2023 for contractual; PT for part-time

Rank/Title	#Positions	#Pending MCTA	Male	Female	Minorities	Vacancies
1. Administrative Personnel						
A. Warden/Director/Chief/ Superintendent	1		1			
B. Asst/Deputy/Warden/ Director	1		1			
C. Security Chief	1		1			
D. Other						
2. Security Personnel						
A. Major	3		3			
B. Captain	9		8	1	2	
C. Lieutenant	23		21	2	0	1
D. Sergeant	27		27	0	1	19
E. Corporal	131		115	16	32	0
F. Private	14		12	2	10	39
G. Other						

Rank/Title	#Positions	#Pending MCTA	Male	Female	Minorities	Vacancies
3. Treatment Personnel						
A. Counselors/Case Workers/Case Managers	13		7	6	2	0
B. Social Workers	3		2	1		
C. Psychologists	5		1	3		1
D. Other						
4. Support Personnel						
A. Recreation	2		1			1
B. Chaplains	1		1		1	1
C. Cook/Dietary	20		9	5	7	7
D. Supply Officer	5		3	2		1
E. Maintenance	4		4			0
F. Clerical	73		39	30	10	4
G. Other						
5. Medical Personnel						
A. Physicians	1		1			0
B. Nurses (R.N., L.P.N)	11		4	7	6	5.6
C. Physician's Assistants	1			1		0
D. Nurse Practitioners	0					0
E. Dentists	4		4		2	
F. Other						

G. PROGRAM/SERVICES:

1. Self-Help Activities

	#Participants	Frequency/Schedule
A. Inmate Council	5	monthly
B. Substance Abuse Counseling	33	bi-weekly
C. Mental Health Counseling/Therapy/ Psychologist/Psychiatrist	Psychology-273 Psychiatry-170	bi-weekly
1. SNU (Special Needs Unit)	22	Every 2 weeks
2. SNU Aftercare	15	Every 2 weeks
D. Alcoholics Anonymous	0	for audit period
E. Narcotics Anonymous	0	for audit period
F. Religious Services	18 services	bi-weekly (just started back up)
G. Other		

2. General Privileges

A. Library	General population weekly, Special confinement-library book/cart/ weekly
B. Commissary	Once weekly for all inmates
C. Visiting	Saturdays & Sundays 8AM- 1:45PM
D. Telephone Use	Daily rotation during rec hall time 8AM - 10Pm Confinement, daily rotation as pertains to schedule
E. Mail	Mail is delivered Mondays-Fridays except holidays
F. Exercise:	Indoor General Population 3 times daily.
	Outdoor Special Confinement 6 days per week. Seasonal intramural sports available to General Population
G. Recreation:	
Games	Yes Always
TV/VCR	Yes Always
Radios	Yes Always
H. Other	

3. Institutional Programs/Trusty Assignments

	#Participants	Frequency/Schedule
A. Sanitation	611	weekly
B. Laundry	33	weekly
C. Kitchen	267	weekly
D. Commissary	0	Contractor
E. Other		
1. Maryland Correctional Enterprise	96	4 days/weekly
2. Academic and Vocational	140 / 50	5 days/weekly
3. Inmate Observation Aides	19	As needed
4. Blood spill Assignments	11	As needed
5. Maintenance Assignments	27	5 days/weekly

4. Off-Site Programs/Work Crews

	#Participants	Frequency/Schedule
N/A		

Adult Correctional Institutions

H. <u>INMATE POPULATION</u> (as of):	June 15, 2023	Differences†
1. Operating Capacity	<u>1796</u>	<u>-2</u>
2. Current Total	<u>1577</u>	<u>-113</u>
3. Maximum Custody	<u>0</u>	<u>-10</u>
4. Medium Custody	<u>1537</u>	<u>-65</u>
5. Minimum Custody	<u>33</u>	<u>-17</u>
6. Pre-Release Custody	<u>7</u>	<u>-21</u>
7. Held for Other Jurisdictions	<u>0</u>	<u>0</u>
8. Out of Other Jurisdictions	<u>0</u>	<u>-1</u>
9. Special Confinement	<u>204</u>	<u>3</u>
a. Disciplinary Detention	<u>51</u>	<u>6</u>
b. Administrative Segregation	<u>80</u>	<u>-76</u>
c. Protective Custody	<u>73</u>	<u>73</u>
d. Medical Isolation	<u>0</u>	<u>0</u>
10. Hospital/Infirmary	<u>3</u>	<u>3</u>
11. Inmate Characteristics:		
a. Average Age	<u>39.2</u>	
b. % of Minorities	<u>Black-72.8%</u> <u>White-21.6%</u> <u>Latinx-5.0%</u> <u>American Indian-.3%</u> <u>Asian-.1%</u> <u>Unknown-.1%</u>	
c. Predominant Charges/Offenses	<u>443 Homicide, 331 Robbery, 224 Assault</u>	
d. Average Sentence Length	<u>259.7 sentence months</u> <u>96.5 Stay months</u>	
12. Work Release	<u>0</u>	<u>0</u>

†To be calculated by M.C.C.S.

Significant Changes

A. Staffing

1. The total number of authorized positions are 353
2. 273.4 of those positions are filled
3. The number of overall vacancies are 79.6

B. Programs/Services

1. No new programs or services has been established for this audit period.

C. Inmate Population

1. The inmate population has decreased to 1577 from 1798 in 2020.

D. Physical Plant

1. 114 additional cameras has been installed
2. Heat wheels have been replaced within all housing units
3. Transformers replaced on perimeter
4. Perimeter lights have been upgraded

E. Major Equipment Purchases

1. Purchased 2 new tractors
2. Purchased an air compressor within the shops
3. Purchased 2 new freezers within Food Service
4. Purchased all new inmate dining room tables and rec tables.
5. Purchased new gym equipment

F. Future Plans

- 1.) New perimeter fence
- 2.) Gatehouse
- 3.) Add additional cameras