HOWARD COUNTY DEPARTMENT OF CORRECTIONS POLICY & PROCEDURE

ARS SMULLS WILL BE PARTITION OF DEPARTMENT OF	SUBJECT:	Inmate Rights, Discipline and Services
	P & P #:	H-707
	TITLE:	Inmate/Detainee Grievance Procedure
	EFFECTIVE DATE:	May 10, 2020
	REVIEWED BY	Genea Simperialle
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	AUTHORITY:	Jack Kavanagh
		Jack Kavanagh, Director

POLICY: A viable complaint process is available to inmates/detainees to allow systematic redress of conditions relating to confinement. This policy encourages internal problem solving at the level of most direct inmate/detainee contact. A viable grievance procedure reduces the number of court filed law suits. The grievance procedure will function as the proper appeal method for disposition passed by the facility disciplinary committee or for minor disciplinary action. Inmates/detainees may use the Inmate/Detainee Grievance Procedure without reprisal, penalty or interference. Classification actions and assignments to housing units are **not** grievable actions.

REFERENCES: Maryland Commission on Correctional Standards – Adult Detention Centers (MCCS-ADC) Standards .05 F, J, and Performance Based National Detention Standard (PBNDS) Section 6.2.

DEFINITIONS:

<u>Classification Action:</u> Placement of inmates/detainees in the appropriate levels of custody security and housing.

<u>Housing Assignment:</u> Based upon the assessment, render a recommendation regarding an inmate's security, program placement, or movement.

Work Day: A work day is Monday through Friday. Saturday, Sunday and holidays are not included.

Grievance: A circumstance or action considered to be unjust or a problem needing to be remedied.

PROCEDURES:

I. Emergency Grievances

Any grievance that is of an emergency nature shall be handled immediately. These include, but are not limited to situation of personal safety, sexual abuse, security of

the facility, medical emergency, death and or serious illness of a family member. The Director/Deputy Director shall be advised of the emergency grievance and the resolution as soon as practicably possible. This notification shall not delay response to the emergency grievance.

II. Informal Resolution

Informal resolution between inmates/detainees and staff is encouraged. If the inmate/detainee cannot find an informal solution and wishes to utilize the grievance procedure, the Howard County Department of Corrections has established a formal resolution process.

III. Formal Resolution

- A. An inmate/detainee may obtain a Grievance Form (H-707a) attached as appendix 1 from a correctional officer or classification counselor.
- B. The inmate/detainee initiating the grievance must complete sections A and B of the Inmate/Detainee Grievance form. Section B requires a brief description of the issue, as well as the requested remedy. The inmate/detainee must include his/her name and ID number. After completing these sections, the inmate/detainee shall submit the form to any correctional officer or classification counselor who shall review it to determine if it can be resolved at his/her level.
- C. A medical grievance may be placed in a sealed envelope and marked medical grievance. The grievance will be handled and investigated according to this policy.
- D. A medical grievance from an ICE detainee shall be place in the medical grievance mailbox on their assigned housing unit labeled Medical Grievances.
 - 1. The Health Service Administrator (HSA) shall be responsible and ensure the ICE medical mailbox is checked daily.
 - 2. The HSA/designee shall be responsible for maintaining the medical grievance log according to PBNDS standards stipulating the following information:
 - a. Assign a grievance log number;
 - b. Date grievance was filed;
 - c. Date received by Medical personnel;
 - d. Nature of grievance;
 - e. Date decision provided to ICE detainee with the receipt (pink copy); and
 - f. Outcome of the adjudication.
- E. The HSA/designee shall act within the standard grievance timeframe of five (5) work days from the date received in accordance with PBNDS standards. It is expected that the matter will be resolved within that timeframe. If for some

reason the matter is not finally concluded, the detainee will receive a response as to findings and the action being taken.

- 1. Original 1st. copy maintained in the medical department; and
- 2. Yellow copy provided to ICE detainee after disposition.
- F. ICE detainees may file an appeal within five (5) days of receiving date on the decision to the Grievance Appeal Board (GAB). The GAB will respond to any appeals to grievance decisions within five (5) days of receipt of the appeal.
- G. If an ICE detainee is still not satisfied, he/she may appeal the GAB's decision to the Director. The Director shall respond to any appeals to the Grievance within five (5) days. If an ICE detainee is still not satisfied, he/she may appeal the decision to the appropriate ICE official.
- H. The receiving staff person shall review the complaint and/or:
 - 1. Resolve the complaint, checking the resolved box in section C and indicate how the complaint was resolved; or
 - a. Resolving the complaint should include discussing the matter with other departmental staff available (e.g. medical and dietary).
 - b. Resolution of the complaint should be verbally discussed with the Shift Leader to determine concurrence.
 - 2. If the complaint is not resolved, check the unresolved box in section C. and explain why. Before determining that a matter cannot be resolved, the staff member shall discuss the matter with the Shift Leader.
 - 3. The receiving staff person shall sign in section C. prior to the inmate/detainee signature.
 - 4. Have the inmate/detainee sign section C. and give the inmate/detainee the pink copy of the form as receipt.
- I After completing section C. of the form and giving the inmate/detainee the pink copy, the receiving staff person shall forward it to the Shift Leader for review.
- J. The Shift Leader shall:
 - 1. Review the action taken and concur, sign in section D. and forward the grievance form to the Audit Coordinator; or
 - 2. Non-concur and forward to the Audit Coordinator; or
 - 3. Forward to the Audit Coordinator as unresolved.
- K. The Audit Coordinator shall review the grievance and assign a log number. The Audit Coordinator shall forward the grievance to appropriate staff using

- Form H-707a attached as Appendix 1 and shall include a due date for response and any special instructions.
- L. Grievances containing allegations of staff misconduct shall be investigated by the Grievance office with the assistance of the Investigative office. Those grievances filed by ICE detainees shall be forwarded to ICE officials.
- M. Investigating staff shall complete the Form H-707b attached as Appendix 2 and return it to the Audit Coordinator within the specified time. If there is a legitimate reason for delay in completing the investigation the investigator staff shall confer with the Audit Coordinator. The Audit Coordinator shall inform the Director/designee if an investigation is not returned in the authorized time frame.
- N. The Audit Coordinator shall review the investigation, response and prepare the grievance for final disposition.
- O. The Audit Coordinator shall sign the final disposition in section E. and forward the response to the inmate/detainee. The inmate/detainee shall sign the grievance acknowledging receipt of decision.
- P. If the inmate/detainee refuses to sign, the staff person serving the notice shall indicate the inmate's/detainee's refusal and sign and date the form as witness to the inmate's refusal. The inmate/detainee is to receive a copy of the decision. A copy is also to be placed in the basefile. The original shall be returned to the Audit Coordinator.

IV. <u>Timeframes for Grievance Responses</u>

- A. All grievances (excluding ICE) shall be responded to within fifteen work days of the day received and receipted for. It is expected that the matter will be resolved within that timeframe. If for some reason the matter is not finally concluded, the inmate will receive a response as to findings and the action being taken.
- B. For ICE detainee grievances, the timeframe for response is five (5) work days from the date received and receipted for in accordance with that agency's standards. It is expected that the matter will be resolved within that timeframe. If for some reason the matter is not finally concluded, the detainee will receive a response as to findings and the action being taken.
- C. In the event an inmate is transferred to another correctional facility, they may still invoke the grievance procedure at the facility they are leaving, if they do so from their new location in writing and within ten (10) days.

V. Establishment of a Grievance Council

A. The Director shall assign at least two (2) staff to review all grievance responses for each calendar month. The counsel shall complete this review by no later than the 15th of the preceding month of the grievance.

- B. The council shall review all responses to ensure that they were properly responded to as well as to determine if the best resolution was reached.
- C. The council may recommend:
 - 1. Revision of a response to a grievance.
 - 2. Changes to policy or procedure based on review of the monthly grievance action.
 - 3. Follow-up action with staff based on staff handling of grievances.
- D. The council's monthly review shall be deemed appropriate by the Director's signature on the monthly tracking form.

VI. <u>Inmate/Detainee Appeals</u>

- A. An inmate/detainee may appeal the decision within five (5) days of receiving date on the decision day to the Director.
- B. The Director will respond to any appeals to grievance decisions within five (5) days. If an ICE detainee is still not satisfied, he/she may appeal the decision to the appropriate ICE official.

VII. Record Keeping

The Grievance Coordinator shall compile a monthly report listing all grievances received for the reporting month on the Inmate/Detainee Grievance Tracking System Form H-707c attached as appendix 3. The Compliance Manager shall also track all cases sent for investigation by the Director/designee.

VIII. Directors Prerogative

The Director has the authority to revise/change a policy or post order as needed to meet the operational demands of the Department. As the changes are initiated, they may be communicated by an email, memoranda or in rare circumstances verbal due to unforeseen situations.

ATTACHMENTS: Appendix 1, Inmate/Detainee Grievance, HCDC Form H-707a.

Appendix 2, Inmate/Detainee Grievance Investigation, HCDC Form H-707b.

Appendix 3, Inmate/Detainee Grievance Tracking System, HCDC Form H-707c.

RESCISSIONS: HCDC Policy H-707 Inmate Grievance Procedure effective May 6,

2019, January 21, 2019, February 7, 2018, February 10, 2017, April

21, 2016.

Log #	<u>.</u>	_	
205 "			

Howard County Department of Corrections Inmate/Detainee Grievance

A. Did you attempt to resolve this issue with the app	propriate staff? _	□ yes□ no	
Emergency grievances must be brought to a staff like, the personal safety of an inmate; security of serious illness in an inmate's family.	-	-	
B. Grievance: (Inmate/Detainee briefly describe the p	problem and request	ted remedy)	
Inmate/Detainee's Name:	#	Date:	
C. Receipt (pink copy) and Informal Resolution: Resolved – Unresolved How/Why: Receiving Staff Signature:			
Inmate/Detainee Signature of Receipt:			
D. Shift Leader Review Formal Resolution: Concur that the action at Informal Resolution is acceptable Resolved by Shift Leader. Signature Refer for formal investigation and resolution to the Audi		r is resolved:	
E. Date Received By Audit Compliance Office: Concur matter resolved Other Action:			
Director/Designee Signature:		Date:	-
Inmate/Detainee Signature:		Date:	-

Distribution: Original Copy: Grievance Coordinator Copy for Inmate/Detainee Basefile

Yellow Copy: Inmate/Detainee -After Final Review

Pink Copy: Inmate/Detainee Receipt

Howard County Department of Corrections

Inmate/Detainee Grievance Investigation

To:	Today's I	Today's Date:		
From:	,Audit Coordinat	or Due Date:		
RE Inmate/Detainee Grievance from:	ID No#:	Log #:		
Please review the attached grievance a complaint.	and related documents and instructions	and resolve and/or address the		
Investigative Findings:				
Action Required/Taken:				
Signature and date				
	Audit Coordinator's Review	□ Concur □ Other		
	Signature:	Date:		
Director/Designee Review Director/Designee's Signature:	D	ate:		
Comments:				

Inmate/Detainee Grievance Tracking System Month: _____ __Year: _____ **Inmate/Detainee Name** Subject of Disposition Date Date Log Merit, Meritorious, Closed Received Number and Number Complaint Resolved