



Department of Public Safety and Correctional Services

Maryland Commission on Correctional Standards

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VERONICA D. MOORE
EXECUTIVE DIRECTOR

287th Commission (Virtual) Meeting

March 27, 2025

Minutes

MEMBERS PRESENT:

Annie Harvey, Chairperson and Deputy Secretary of Operations, Department of Public Safety and Correctional Services

Mary Denise Davis, Assistant Attorney General, representing Attorney General Anthony G. Brown

Lakia James, Correctional Officer, Local Correctional Facility

Courtney League, (Vice Chairperson) Assistant Secretary for Design, Construction and Energy, Department of General Services, Representing Secretary Atif Chaudhry

Daniel Lee, Budget Analyst, Department of Budget and Management, Representing Secretary Helene T. Grady

Kelly Russell, Councilperson, Local Elected Official, City of Frederick, Maryland

MEMBERS ABSENT:

April Cockrell, Citizen Member

Cleveland Friday, Commissioner, Division of Pretrial Detention Services

Niani Smith, Citizen Member

STAFF PRESENT:

Veronica Moore, Executive Director

Tanya Joyner, Assistant Executive Director

Brian Raivel, Senior Correctional Program Specialist

Mechelle Johnson, Correctional Program Specialist

Brandon Dickens, Auditor

Tammy McCotter, Auditor

Paulette Wyndham, Auditor

LaDonna Newman, Management Associate

VIRTUAL GUESTS:

Commissioner Phil Morgan, Division of Corrections

Deputy Commissioner Keith Dickens, Division of Corrections

Assistant Commissioner Laura Armstead, Division of Corrections Eastern Region

Assistant Commissioner Jeff Nines, Division of Corrections, Western Region

Director Christina Tyler, Wicomico County Department of Corrections

Deputy Director Michael Jamison, Wicomico County Department of Corrections

Deputy Director Thomas Kimball, Wicomico County Department of Corrections

Major Preston Foreman, Wicomico County Department of Corrections
Captain James Bare, Wicomico County Department of Corrections
Captain Jonathan Watson, Wicomico County Department of Corrections
Shyra Stevenson (Training/Audit), Wicomico County Department of Corrections
MCO Joshua Foster, Wicomico County Department of Corrections
Nancy Paredes, Classification Supervisor, Wicomico County Department of Corrections
Jack Schevel, Maintenance Supervisor, Wicomico County Department of Corrections
Dawn Chewning, HSA WellPath, Wicomico County Department of Corrections
Jessica Pruitt, MH Wellpath, Wicomico County Department of Corrections
Amanda Waley, (Medical), Wicomico County Department of Corrections
Director Roland Sheppard, Kent County Detention Center
Corporal Lacrishia Scarborough, Kent County Detention Center
Major Bo Greenwood, Queen Anne's County Department of Corrections
Captain Briana Cottman, Queen Anne's County Department of Corrections
Lieutenant Heather Edwards, Queen Anne's County Department of Corrections
Corporal David Pratt, Queen Anne's County Department of Corrections
Corporal Shawn Duckery, Queen Anne's County Department of Corrections
Tim Selin, Acting Assistant Corrections Bureau Chief, Frederick County Detention Center/Annex
Director Randy Martin, Frederick County Detention Center/Annex
Bonita Badgette, WellPath, Frederick County Detention Center/Annex
Romand Lewis, WellPath, Frederick County Detention Center/Annex
Director Ryan Ross, Charles County Detention Center
Lieutenant Taylor, Charles County Detention Center
Lieutenant Matthew Irby, Charles County Detention Center
Lieutenant Michael Smith, Charles County Detention Center
Lieutenant Conley, Charles County Detention Center
Warden Kathleen Landerkin, Metropolitan Transition Center
Assistant Warden Bettie Harris, Metropolitan Transition Center
Security Chief Shanae Ross, Metropolitan Transition Center
Superintendent Christopher Klein, Anne Arundel County Department of Detention Facilities-
Jennifer Road Detention Center
Correctional Facility Administrator Michael Borgese, Anne Arundel County Department of
Detention Facilities-Jennifer Road Detention Center
Officer Rachel Frankenfield, Anne Arundel County Department of Detention Facilities-
Jennifer Road Detention Center
Assistant Correctional Facility Administrator Shannon Carter, Anne Arundel County Department
of Detention Facilities-Jennifer Road Detention Center
Assistant Correctional Facility Administrator Jasper Ingle, Anne Arundel County Department of
Detention Facilities-Jennifer Road Detention Center
Warden Laura Golliday, Roxbury Correctional Institution
Acting Assistant Warden Kathryn Gorsuch, Roxbury Correctional Institution
Security Chief Dave Appel, Roxbury Correctional Institution
COII Tracy Purdy, Roxbury Correctional Institution

The Maryland Commission on Correctional Standards held the 287th Meeting (Virtual Meeting) via Google Meet. The agenda was as follows:

1. Welcome/Introduction/Remarks
2. Approval of January 30, 2025, Meeting Minutes
3. Chair's Comments
4. Executive Director's Comments
5. Consideration of Final Reports
 - Wicomico County Department of Corrections
 - Kent County Department of Corrections
 - Queen Anne's County Department of Corrections
 - Frederick County Detention Center and Annex
 - Charles County Detention Center
6. Continuing Business-Monitoring Reports
 - Metropolitan Transition Center
 - Anne Arundel County Department of Detention Facilities-Jennifer Road Detention Center
 - Roxbury Correctional Institution
7. New Business
8. Announcements
9. Adjournment

1. WELCOME/INTRODUCTION/REMARKS

Chairperson Annie Harvey officially called to order the 287th Commission (Virtual) Meeting at 10:00 AM. Chairperson Harvey welcomed everyone to the 287th Commission (Virtual) Meeting. Chairperson Harvey stated that she is the Deputy Secretary of Operations for the Department of Public Safety and Correctional Services and the chair of the Board of the Commission on Correctional Standards. Chairperson Harvey stated that she would go over the procedural notes and explanations concerning the meeting. Chairperson Harvey advised the attendees that the Commission (Virtual) Meeting would be recorded. Chairperson Harvey reminded the members and guests to mute all microphones and cell phones during the meeting. Chairperson Harvey stated that the facility management and attendees may choose if they would like to leave the meeting, once their report is presented and the report has been voted upon by the Commission Board. Chairperson Harvey reported that the managing officials had received the meeting agenda and the agenda would be displayed on the screen throughout the meeting. Chairperson Harvey stated that the Recognition of Achievement awards will be forwarded to the managing officials at the conclusion of the meeting. Chairperson Harvey deferred to Executive Director Veronica Moore to conduct a Roll Call (attendance) of the Commission members for the purpose of a quorum for the virtual meeting. Executive Director Moore advised Chairperson Harvey that a quorum was achieved in order to hold the meeting. Chairperson Harvey commented that if a report is presented that falls under her area of responsibility, she would have to recuse herself from the voting process concerning the audit/monitoring report.

2. APPROVAL OF MINUTES-JANUARY 30, 2025

Chairperson Annie Harvey entertained a virtual motion and vote concerning the approval of the Minutes of the January 30, 2025 meeting. Chairperson Harvey called for a motion to accept/approve the Minutes of the January 30, 2025 virtual meeting. Vice Chairperson Courtney League made a motion to approve the Minutes of the January 30, 2025 virtual meeting and Assistant Attorney General Mary Denise Davis seconded. The unanimous response of silence denoted the approval of the Minutes of the January 30, 2025 Commission (Virtual) meeting.

3. CHAIR'S COMMENTS

Chairperson Annie Harvey expressed appreciation to Deputy Secretary Courtney League for agreeing to serve as the Vice Chairperson of the Board of the Commission on Correctional Standards. Chairperson Harvey commented that she believed that they will make an awesome team working along with Executive Director Moore and her team. Chairperson Harvey stated that she just wanted to say thank you to Deputy Secretary Courtney League (Vice Chairperson) for being willing to support the agencies that are involved in this process. Chairperson Harvey reminded the attendees of the voting process concerning the audit/monitoring reports. Chairperson Harvey stated that during the process that there will be a motion to accept the report and a second of the motion. Chairperson Harvey stated that if there are no disagreements or nays, the reports will be accepted.

4. EXECUTIVE DIRECTOR'S COMMENTS

Executive Director Veronica Moore welcomed the newest MCCS staff member to the team, Ms. Paulette Wyndham. Executive Moore reported that Ms. Wyndham joined MCCS in the beginning of March 2025. Executive Director Moore announced that the spring DAI training will be held on May 21, 2025 at the Public Safety Education and Training Center located in Sykesville, Maryland. Executive Director Moore commented that targeted invites will be going out to specific facilities for the spring DAI training. Executive Director Moore reported that MCCS conducts the training for one half of the facilities one part of the year and the other part of the training during the second part of the year. Executive Director Moore stated that as always, she would like to thank our correctional community for their support of the audits and the DAI program and other efforts that they support throughout the year.

Chairperson Annie Harvey reminded the attendees to state their full name while responding to any questions from the Commission members. Chairperson Harvey stated that at any point, an individual may determine that they need to recuse themselves to please make sure that they state their name in full to ensure that the information concerning the recusal is documented. Chairperson Harvey reminded the facility representatives that they will have the opportunity to make comments. Chairperson Harvey stated that the Commission members will also have an opportunity to make comments and ask questions after the reading of each report.

5. CONSIDERATION OF FINAL AUDIT REPORTS

• WICOMICO COUNTY DEPARTMENT OF CORRECTIONS

Correctional Program Specialist Mechelle Johnson presented the audit report concerning the onsite audit conducted at the Wicomico County Department of Corrections on September 17-19, 2024 by Commission staff and two Duly Authorized Inspectors. The Wicomico County Department of Corrections, houses locally adjudicated and non-adjudicated male and female inmates. The Detention Center is located in Salisbury, Maryland and is managed daily by Director Christina Tyler. After a thorough review of the required documentation, the Wicomico County Department of Corrections was found to be in substantial compliance with the standards for an Adult Detention Center. The identified deficiencies are listed: Records of the checks on the whereabouts of work release inmates and drug and alcohol testing of work release and community workers (lawn, maintenance workers, etc.) were not available for the audit period of October 1, 2021 through September 1, 2024, as required by the standard. Records of the Chain of Custody for contraband did not match records of confiscated contraband, which cited that a chain of custody deposition of disposal records indicated that there were no disposals of contraband, during the audit period of October 1, 2021 through September 1, 2024, as required by policy and the standard. Records of the daily inventory and issue and return of maintenance tools were not available for review for the audit period of October 1, 2021 through April 1, 2024, as required by the standard. Quarterly fire drills on each shift were not conducted for the following locations during the noted quarters and years of the audit period of October 1, 2021 through September 1, 2024, as required by the standard: 2021 HU-A, HU-B, Trustee Dorm, SMU1; 2022 HU-A, HU-B, Trustee Dorm, SMU1, Female Housing Unit, SMU3; 2023 HU-A, HU-B, Trustee Dorm, SMU1, Female Housing Unit, SMU2, SMU3; and 2024 HU-A, HU-B, Trustee Dorm, SMU1. A comprehensive health inspection was not conducted of the dietary department in 2023 of the audit period, as required by the standard. Records of the quarterly inspections and inventories of TCFs located in the boiler room, car wash shed, laundry room and maintenance areas were not available for the audit period, October 1, 2021 through September 1, 2024, as required by the standard. Records were not available to demonstrate the return of issued inmate clothing and uniforms within the audit period, October 1, 2021 through September 1, 2024, as required by the standard. Records were not available to demonstrate the return of bedding and linen, within the audit period, October 1, 2021 through September 1, 2024, as required by the standard. 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. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. The facility utilized Google Meet to assist with facilitating remote reviews, interviews and inventories, during the pre-onsite audit phase of the audit. Primary and secondary documentation was provided via a Google Drive and access granted to the auditors. Significant progress was made regarding the review of standard documentation which allowed for sufficient on-site audit time at the facility to complete further standard reviews. The majority of the secondary documentation was automated and computerized, at the facility. The information and documentation was accessible to the audit team with staff's assistance. During the on-site audit, primary and secondary documentation was located in the audit coordinator's office, the multipurpose room and other documentation was located in specific areas where the function occurred. Facility staff was available to escort and answer questions. Wicomico staff

would benefit from implementing a method to ensure documentation is being completed, as required by policy and to audit the standards. The facility was found to be in good condition on the day of the audit. The facility was toured by five teams of auditors. Maintenance and sanitation issues which required attention were noted by the auditors of the following: several ceiling tiles were missing or needed adjustments, fire sprinkler heads needed cleaning or dust removed, a shower curtains were missing in all SMU housing units, cell #4 in SMU door jams or sticks, and graffiti and mold was observed throughout B-block and C-block in pods A-E. A corrective action plan for the deficiencies, found during the tour, was submitted by facility staff and the cited areas noted, required additional time to address by the maintenance department. Sanitation and maintenance issues must be consistently monitored with supervision, oversight, and follow-up in order to ensure the areas are properly addressed and the facility is a safe and sanitary environment for staff and inmates. The Maryland Commission on Correctional Standards will conduct a remote monitoring review on compliance documentation which must be submitted to MCCC by Friday, October 3, 2025, to assess compliance with the standards found in noncompliance during the remote audit process. Once compliance has been determined, the Wicomico County Department of Corrections may be recommended to receive the Recognition of Achievement Award. The Wicomico County Department of Corrections staff members were committed to the remote audit process for this audit. Management utilizes the standards as an effective management tool. The County Commissioners are encouraged to continue to provide the support and resources necessary to the Wicomico County Department of Corrections to maintain compliance with the standards.

Chairperson Annie Harvey welcomed comments from the representatives of the Wicomico County Department of Corrections. Director Christina Tyler commented that the administration and staff were thankful to have another set of eyes to identify the deficiencies. Director Tyler commented that they are working diligently to comply with all the recommendations and requirements.

Chairperson Annie Harvey welcomed comments and questions from the Commission members. Assistant Attorney General Mary Denise Davis inquired about the current number of 35 vacancies concerning correctional officers/privates. Director Tyler reported that as of today, the number of vacancies had decreased. Director Tyler reported that they are working diligently to recruit and hire. Assistant Attorney General Davis commented that it just was a large number and she was just wondering if it was a typo. Director Tyler commented that it was not a typo. Vice Chairperson League raised a question concerning a discrepancy with the date on page 2 of the audit report. Vice Chairperson League asked if the date October 1, 2024 was correct. Correctional Program Specialist Mechelle Johnson responded that the date should be October 1, 2021. Vice Chairperson League raised a question concerning the graffiti and mold that was identified during the facility tour. Vice Chairperson League asked if the mold had been abated. Director Tyler responded that the issue had been addressed. Vice Chairperson League asked what steps were taken to address the mold. Director Tyler responded that a new heating/ventilation system was installed. Director Tyler commented that the installation of the new heating/ventilation system appears to be addressing a good portion of the issues concerning the mold. Vice Chairperson League commented that it was an area of concern; because mold reoccurs when the system is not functioning properly or the humidity is above a certain level. Vice Chairperson League thanked Director Tyler for her response and clarification concerning the matter.

Chairperson Annie Harvey entertained a virtual motion and a vote to approve the audit report with the established monitoring date. Vice Chairperson Courtney League made a motion to approve the audit report and Councilperson Kelly Russell seconded. The unanimous response of silence denoted the approval of the audit report and the established monitoring date.

- **KENT COUNTY DETENTION CENTER**

Ms. Tammy McCotter resented the audit report concerning the onsite audit conducted at the Kent County Detention Center on October 8-9, 2024 by Commission staff and two Duly Authorized Inspectors. The Kent County Detention Center is located in Chestertown, Maryland. The detention center houses pretrial, federal, sentenced and work release male and female inmates. These inmates are classified at the maximum to minimum levels of security. The facility comes under the daily administrative authority of Acting Director Roland Sheppard. After a thorough review of the required documentation, the Kent County Detention Center was found to be in compliance with the majority of the standards for an Adult Detention Center. The identified deficiencies are listed: Weekly inventories of the emergency bag were not available for the audit period of November 2021 - December 2021, January 2022 – July 2022, September 2022 - December 2022 and January 2023, March 2023 - June 2023, as required by the standard. A comprehensive health inspection was not conducted in 2022 by the Maryland Department of Health and Mental Hygiene, as required by the standard and COMAR 10.15.03. Prior to the audit, the facility submitted the required pre-audit materials and remote audit documentation to the MCCS office for auditor review. Secondary documentation was centralized in the conference/multipurpose room. Computers were available to access policies, procedures and additional electronic audit documentation. The facility utilized a One Drive to provide and access standard documentation for remote review. Additional documentation was located in units of the facility where the specific functions occur. Facility escorts were assigned to auditors in order to appropriately access areas of the facility. Audit progress debriefings were held daily with the audit coordinator. A debriefing meeting occurred on the last day of the field audit, with management and staff, upon the close of the on-site audit, to provide feedback regarding the status of the audit process. Lastly, a closing conference was held remotely to present the final and official results of the audit findings. Instructional manuals of standard operating procedures, inmate orientation materials, post orders, policies, procedures, and emergency plans, were reviewed and found to be current, beneficial to staff and responsive to the needs of the inmates, staff and the community. During the tour, four groups of auditors were escorted to their assigned areas of the facility and to non-quarantined areas, to assess the condition of the facility, health and safety aspects. Areas of the facility were carefully inspected by each auditor, according to their assigned areas. Overall, the physical plant was found to be clean, orderly, and in good condition, during the facility tour. Auditor concerns regarding the tour were noted and addressed prior to the exit conference. The areas noted by auditors, during the tour, were immediately addressed by the Detention Center staff, during the on-site audit and shortly after the remote audit process concluded. The Maryland Commission on Correctional Standards will conduct a monitoring review of the documentation required to be submitted to MCCS, no later than Friday, October 10, 2025, to assess compliance with the standards found in noncompliance at the audit. Necessary inventories may be conducted remotely and a date and time will be arranged by MCCS and the KCDC audit staff. Once compliance has been established, the Kent County Detention Center may be recommended to receive the Recognition of Achievement Award. The

Kent County Detention Center's staff demonstrated consistent utilization of the standards for an Adult Detention Center, to effectively manage and improve the daily operations of the facility. Management, staff, and the County Commissioners are committed to the audit process in obtaining total compliance with the standards. The Kent County Detention Center is encouraged to continue to uphold the standards, ensure compliance, and operate within the guidelines of the State of Maryland.

Chairperson Annie Harvey welcomed comments from the representatives of the Kent County Detention Center. Director Sheppard expressed appreciation to the auditors. Director Sheppard commented that the auditors were very professional throughout the audit. Director Sheppard extended kudos to Lieutenant Lacrishia Scarborough for doing an excellent job concerning her first audit. Lieutenant Scarborough commented that the audit was a great experience. She stated that it is always a pleasure to have the auditors visit the facility. Lieutenant Scarborough commented that the documentation concerning the two deficiencies will be ready at the time of the monitoring review.

Chairperson Annie Harvey welcomed questions from the Commission members. Assistant Attorney General Mary Denise Davis referenced page 11 of the audit report in which the first paragraph contained an incomplete sentence. Executive Director Moore stated that the sentence would be modified to reflect a complete sentence.

Chairperson Annie Harvey entertained a virtual motion and a vote to approve the audit report as written with the established monitoring date. Vice Chairperson Courtney League made a motion to approve the audit report and Councilperson Kelly Russell seconded. The unanimous response of silence denoted the approval of the audit report and the established monitoring date.

- **QUEEN ANNE'S COUNTY DEPARTMENT OF CORRECTIONS**

Senior Correctional Program Specialist Brian Raivel presented the audit report concerning the on-site audit at the Queen Anne's County Department of Corrections conducted on October 8-9, 2024 by Commission staff and two Duly Authorized Inspectors. The Queen Anne's County Department of Corrections is located in Centreville, Maryland, and houses male and female sentenced and pretrial inmates classified at the minimum to maximum-security levels. The facility comes under the administrative authority of the Queen Anne's County Board of Commissioners and is managed daily by Warden LaMonte Cooke. After a thorough review of the required documentation, the Queen Anne's County Detention Center was found to be in substantial compliance with the standards for an Adult Detention Center. The identified deficiencies are listed: Records were not available for inmates' participation in outside work details with access to the public and there were no records of random drug/ alcohol testing of the same for the entire audit period April 1, 2022 through November 1, 2024, as required by the standard. Records were not available of the administration for the Controlled Dangerous Substances/Medications for three individuals from September 1, 2023 through December 1, 2023, as required by the standard. Records were not available of the weekly inventory of controlled dangerous substances which had no administration records, incoming medication and medication upon release/transfer as documented on the Wellpath Receipt for Medication form for the entire audit period April 1, 2022 through November 1, 2024, as required by the standard. Records were not available of monthly

inventories and inspections for the emergency bag and quarterly inspections of the medical instruments for the entire audit period of April 1, 2022 through November 1, 2024, as required by the standard. Records were not available of the usage of needles/syringes for the entire audit period of April 1, 2022 through November 1, 2024, as required by the standard. The licensing and certifications of the medical personnel were not provided, for First Aid/ CPR certifications of 9 medical personnel, for current licenses of 3 medical personnel, for current CDS and/or DEA licenses of 7 medical personnel, as required by the standard. The Remote Audit Process was initiated for this audit and the facility provided compliance documentation and the pre-audit packet for remote review, via a virtual Google Drive, by the auditors. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. Remote interviews were conducted with the male and female inmates; and remote inventories were able to be conducted, as a part of the remote auditing process, during the pre-onsite audit phase of the audit. Primary and secondary documentation was provided via the Google Drive. The administration and staff were prepared for the audit. Primary and secondary documentation was available on-site where the function occurred. On-site documents were easily accessible to the audit team with staff's assistance. The facility's correctional staff were available to escort the audit team, answer questions, and provide documentation to auditors, upon request. Pre-audit materials and remote audit documentation was submitted to the MCCS office prior to the audit. The audit team reviewed the facility policies, procedures, post orders, emergency plans, and orientation manuals. This documentation was found to be informative, and functional to the needs of staff, inmates and the community. Four groups of auditors conducted a tour of the facility. The auditors noted a few maintenance issues to include graffiti on the walls in H Pod, dirty vents in the kitchen, missing ceiling tiles in the main control, a clogged toilet in C1, and rusted sprinklers in A and F Pod. A corrective action plan to address the minor tour issues was not provided by the facility, prior to the conclusion of the audit. The facility was found to be clean, sanitary, orderly and well maintained by the staff and inmates. The Maryland Commission on Correctional Standards will conduct a monitoring review on Friday, October 10, 2025, to assess compliance of the five standards found in non-compliance at the audit. Once compliance has been established, the Queen Anne's County Detention Center may be recommended to receive the Recognition of Achievement Award. The Maryland Commission on Correctional Standards will conduct a monitoring review on Friday, October 10, 2025, to assess compliance of the five standards found in non-compliance at the audit. Once compliance has been established, the Queen Anne's County Detention Center may be recommended to receive the Recognition of Achievement Award. The Queen Anne's County Detention Center strives to incorporate the standards in their daily facility operations, for use as an effective management tool. The support and the necessary resources should be consistently provided to the Queen Anne's County Detention Center by County Commissioners to promote compliance with the standards for an Adult Detention Center.

Chairperson Annie Harvey welcomed comments from the representatives of the Queen Anne's County Department of Corrections. Major Milton Greenwood thanked the audit team for visiting the detention center to conduct the audit.

Chairperson Annie Harvey entertained a virtual motion and vote to approve the audit report with the established monitoring date. Vice Chairperson Courtney League made a motion to approve the audit report and Councilperson Kelly Russell seconded. The unanimous response of silence denoted the approval of the audit report and the established monitoring date.

- **FREDERICK COUNTY DETENTION CENTER AND ANNEX**

Ms. Paulette Wyndham presented the audit report concerning the on-site audit conducted at the Frederick County Detention Center and Annex on November 19-20, 2024 by Commission staff and three Duly Authorized Inspectors. The Frederick County Detention Center and Annex is located in Frederick, Maryland and houses both male and female sentenced and pretrial inmates. The Annex is an extension of the detention center, located across the main road, and allows inmates to participate in work release in the community. The facility is under the administrative authority of Sheriff Charles Jenkins and the daily management of Lieutenant Colonel William DeLauter. After a thorough review of the required documentation, the Frederick County Detention Center and Annex was found to be in compliance with a majority of the standards for an Adult Detention Center. The identified deficiencies are listed: There were no records of the monthly inventory and inspection of the first aid kits from December 2021 through January 2023, as required by the standard. Physical examinations were not conducted within 14 days of the inmate's arrival to the facility in twenty-eight of the seventy inmate medical files reviewed, for the audit period, as required by the standard. 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. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. Primary and secondary documentation was provided via a Google Drive and access was granted to the auditors. The majority of the secondary documentation was automated and computerized, a process that proved to be very functional for auditing the standards. The administration and staff were well prepared for the audit. Facility staff was available to escort, answer questions and direct audit team members to the appropriate locations for secondary documentation. Overall, the facility has exceeded at meeting the goals of remote audit processes, in the remote and onsite phases. The current manuals of standard operating procedures were found to be instructional to staff and functional to the needs of the inmates. Emergency plans and post orders addressed staff and inmate concerns as well as public safety. Inmate Orientation materials addressed those issues important to the inmate population. The facility provided Inmate Handbooks for the Detention Center and the Annex (Work Release Center) for review. The facility was found to be in exceptional condition, during the tour, which was conducted by four groups. The physical plant of both the detention center and annex revealed minimal housekeeping and sanitation issues, as noted by the auditors. The majority of the cited issues were addressed by facility and maintenance staff, prior to the conclusion of the audit. The facility's maintenance issues which require additional time to address were the peeling ceiling paint in the children's visitation area, painting of the visitation booths and servicing of the kitchen fire suppression pipes. A corrective action plan was provided regarding the resolution and repairs to address the issues cited by the auditors. The Frederick County Detention Center and Annex staff and inmates maintain a high level of sanitation. The facility's environment is clean and orderly for the inmates and staff. The Maryland Commission on Correctional Standards' staff will conduct a monitoring review on documentation which must be submitted to MCCS by Thursday, October 2, 2025 to assess compliance with the standards found in noncompliance at the audit. Once compliance has been established, the Frederick County Detention Center and Annex will be recommended to receive the Recognition of Achievement Award. In conclusion, the Frederick County Detention Center and Annex staff demonstrated exceptional preparation for the Remote Audit Process. The facility has continued utilization of technology in daily jail management. This system has proven to

work exceptionally with the remote auditing processes. The management and staff are committed to advancing technological methods in correctional facility management to ensure compliance with the standards.

Chairperson Annie Harvey welcomed comments from the representatives of the Frederick County Detention Center and Annex. Acting Assistant Corrections Chief Tim Selin thanked the audit team for visiting the facility and identifying the two deficiencies. Acting Assistant Corrections Chief Selin addressed the two deficiencies. Acting Assistant Corrections Chief Selin reported that the noncompliance concerning standard .02 E (2) Emergency Medical Services was identified in January 2024 and corrected at that time. Acting Assistant Corrections Chief Selin reported that the standard's concerning standard .02 O Physical Examinations was due to an issue with the electronic medical records which has been resolved. Acting Assistant Corrections Chief Selin commented that they look forward to the monitoring review.

Chairperson Annie Harvey entertained a virtual motion and vote to approve the audit report with the established monitoring date. Vice Chairperson Courtney League made a motion to approve the audit report with the established monitoring date and Councilperson Kelly Russell seconded. The unanimous response of silence denoted the approval of the audit report and the established monitoring date.

Executive Director Moore asked if there was a representative present from the Division of Correction. Assistant Commissioner Jeff Nines responded that he was present. Executive Director Moore asked if there was a representative present from the Division of Pretrial and Detention Services. There was no response.

- **CHARLES COUNTY DETENTION CENTER**

Mr. Brandon Dickens presented the audit report concerning the on-site audit conducted at the Charles County Detention Center on November 19-20, 2024 by Commission staff and three Duly Authorized Inspectors. The Charles County Detention Center is located in La Plata, Maryland. The facility detains sentenced and pretrial male and female inmates at the minimum to maximum levels of security. The facility is managed daily by Director Ryan V. Ross and operates under the administrative authority of Sheriff Troy D. Berry. After a comprehensive and thorough review of the required documentation, the Charles County Detention Center was found to be in compliance with the majority of the standards for an Adult Detention Center. The identified deficiency is as follows: Records of TCF issuance demonstrated that 33 of 36 months did not demonstrate accountability for TCF's removed from storage which resulted in the reconciliation of the issuance logs of TCF's on a monthly basis and did not demonstrate an accountability of TCF's in storage, as required by the standards. The Remote Audit Process was initiated for this audit and the facility provided compliance documentation and the preaudit packet for remote review by the auditors. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. The facility utilized Google Meet to assist with facilitating remote reviews, interviews and inventories, during the pre-onsite audit phase of the audit. Primary and secondary documentation was provided via a ShareFile Drive and access granted to the auditors. Significant progress was made regarding the review of standard documentation which allowed for sufficient on-site audit time at the facility to complete

further standard reviews. The majority of the secondary documentation was provided through the ShareFile Drive, a process that proved to be very functional for auditing the standards. The administration and staff were well prepared for the audit. The information and documentation was easily accessible to the audit team with staff's assistance. The Audit Coordinator and his team also provided auditors with documentation as requested and in a timely manner. During the on-site audit, primary and secondary documentation was located in the audit coordinator's office and muster room and other documentation was located in specific areas where the function occurred. Additionally, the ShareFile Drive was accessible to the auditors with a computer and laptops available in the muster room. Facility staff was available to escort and answer questions, as necessary. The current manuals of standard operating procedures were found to be instructional to staff and functional to the needs of the inmates. Emergency plans and post orders addressed staff and inmate concerns and public safety. Inmate Orientation materials addressed those issues important to the inmate population. The facility provided Inmate Handbooks for review. The physical plant was in excellent condition during the tour of the facility. Four groups of auditors were escorted throughout the facility. During the tour, minor maintenance and sanitation issues were cited by the auditors. The majority of these issues were addressed prior to the end of the on-site audit and on November 22, 2024, per the submitted compliance plan. Work orders were provided for areas that required additional time to repair as follows: B Block's D Section Dayroom's lower shower has mildew which was cleaned and painted, B Block's C Section Dayroom's upper and lower showers cannot run at the same time and B-Block's B Section's cell #2 computer shows open when the cell is secure. A corrective action plan to address the areas which needed additional time for repair was provided by management. The facility was found to be clean, sanitary, orderly and well maintained by the staff and inmates. The Maryland Commission on Correctional Standards will conduct a monitoring review on the documentation required to be submitted to M CCS, no later Friday, October 17, 2025 to assess compliance with the standard found in noncompliance at the audit. Upon completion of the assessment of the noncompliant standard, the Charles County Detention Center may be recommended for the Recognition of Achievement Award. In conclusion, the staff at the Charles County Detention Center are dedicated and take pride in their facility. The standards are recognized as an important tool in the processes for management of a correctional facility. Their commitment is demonstrated by their efforts to ensure compliance with the standards of an Adult Detention Center. The county administration is encouraged to continue to provide the necessary support and resources to maintain a high level of compliance.

Chairperson Annie Harvey welcomed comments from the representatives of the Charles County Detention Center. Director Ryan Ross commented that he was happy to be present for the Commission meeting. Director Ross commented that he looks forward to a successful monitoring review in the fall in order to complete the audit process.

Chairperson Annie Harvey welcomed comments and questions from the Commission members. Vice Chairperson Courtney League raised a question about the mold issue. Vice Chairperson League asked if the issue concerning the mold had been corrected as indicated in the audit report. Vice Chairperson League inquired about the cause of the mold and if it was due to a leak behind the wall. Director Ross reported that it was not mold. Director Ross commented that the issue was remedied with cleaning and paint.

Chairperson Annie Harvey entertained a virtual motion and vote to approve the audit report with the established monitoring date. Vice Chairperson Courtney League made a motion to approve the audit report with the established monitoring date and Councilperson Kelly Russell seconded. The unanimous response of silence denoted the approval of the audit report and the established monitoring date.

Chairperson Annie Harvey requested a recusal concerning the draft audit report of the Metropolitan Transition Center. The Metropolitan Transition Center falls under the responsibility of DSO Annie Harvey. Corporal Lakia James also requested a recusal concerning the draft audit report of the Metropolitan Transition Center. Chairperson Harvey turned the meeting over to Vice Chairperson Courtney League.

8. CONTINUING BUSINESS

MONITORING REPORTS

- **METROPOLITAN TRANSITION CENTER**

Ms. Tammy McCotter reported on the monitoring review conducted on December, 2024 concerning the Metropolitan Transition Center's non-compliant standards. Ms. McCotter reported that the purpose was to review the standard found in non-compliance during the previous monitoring review conducted October 2023. Ms. McCotter reported that this was the second monitoring review since the audit. The documentation, to substantiate compliance with the standard, was submitted on the MCCS U drive's MTC Restrictive folder by Sergeant Marilynn Smith. The results of the monitoring period from October 1, 2024 through November 1, 2024 were as follows: Standard .08 D Official Publications/ Annual Review was found to be compliant. The list of Metropolitan Transition Center Annual Review of Publications, the Warden's review/change log, the Post Order Review forms and the Facility Manuals review forms were received and assessed for compliance. A review of the documents provided by Metropolitan Transition Center demonstrated that annual reviews of the official publications, post orders and manuals were conducted, during the monitoring period, as required by the standard. Inspection reports were reviewed from other regulatory agencies. Dietary Menus were reviewed and approved on July 1, 2024 by Scott Steininger, Dietician (Lic. #D01350). The Maryland Department of Labor, Licensing, and Regulations completed a MOSHA inspection on June 6, 2024 with six deficiencies noted. Three deficiencies were corrected on site and three are pending completion, at the time of this report. A Maryland Department of Health and Human Hygiene comprehensive inspection was conducted, on December 3, 2024. The Baltimore City Fire/EMS Department-Office of the Fire Marshal inspected the facility on July 15, 2024 with two violations. The fire alarm and sprinkler system was reported as inoperable and the facility is under a 24-hour fire watch in parts of the facility. The status of the compliance with the fire safety regulation and the operations of the facility's fire alarm system will be assessed for compliance at the next MCCS audit. After a thorough review of the secondary documentation for the noncompliant standard, the facility is found to be in compliance; however, the facility had until April 1, 2024 to be compliant with all of the standards for an Adult Detention Center. The Recognition of Achievement Award must be achieved within 1 year of the Commission's

approval of the compliance plan, March 30, 2023, in accordance with COMAR 12.14.01.05. The Metropolitan Transition Center is not eligible for the Recognition of Achievement Award.

Vice Chairperson Courtney League welcomed comments from Warden Kathleen Landerkin. Warden Landerkin expressed appreciation to MCCC for their patience throughout the audit process. Warden Landerkin also thanked her team for their efforts during the audit. Warden Landerkin reported that there were about a hundred policies that needed to be reviewed, that had not been reviewed during the 2023 audit. Warden Landerkin thanked the staff for their diligent efforts. Vice Chairperson League thanked Warden Landerkin and her staff for their persistence and efforts concerning the policies.

Vice Chairperson Courtney League welcomed comments and questions from the Commission members. Vice Chairperson League raised a question in regard to the violations noted concerning the Fire Marshal's report. Vice Chairperson League asked if there is a plan in place to address the violations. Warden Kathleen Landerkin referenced that the last email that she had did not have the specific information. Warden Landerkin stated that there was an issue with the fire pump located in the DB block. Warden Landerkin stated that she would have to get back to the Commission members with the specifics concerning the matter. Executive Director Moore advised the Commission Board that the Metropolitan Transition Center is another facility that MCCC will be monitoring as well concerning the fire safety issues. Vice Chairperson League inquired about how often the monitoring occurs concerning fire safety issues. Executive Director Moore responded that the monitoring will occur on a quarterly basis. Executive Moore referenced the previous Commission meeting and reported that basically all facilities that are having fire safety issues, she generally sends out an email to the managing official to request an update and then she will provide the information to the Commission board at the next Commission meeting scheduled to take place on July 31, 2025. Vice Chairperson League thanked Executive Director Moore for the clarification on the matter.

Vice Chairperson Courtney League entertained a virtual motion and vote to accept the monitoring report as written with the caveat that the Metropolitan Transition Center is not eligible for the Recognition of Achievement award for the facility's failure to come into compliance (Standard .08 D Official Publication and Annual Review) within one year of the approval of the compliance plan. Councilperson Kelly Russell made a motion to approve the monitoring report as written as noted in the motion and Assistant Attorney General Mary Denise Davis seconded. The unanimous response of silence denoted the approval of the monitoring report.

Chairperson Annie Harvey resumed facilitating the meeting.

- **ANNE ARUNDEL COUNTY DEPARTMENT OF DETENTION FACILITIES - JENNIFER ROAD DETENTION CENTER**

Ms. Paulette Wyndham reported on the monitoring review conducted on October 11, 2024 concerning the Anne Arundel County Department of Detention Facilities - Jennifer Road Detention Center' non-compliant standards. Ms. Wyndham reported that the review was conducted by Auditor Cassandra Holdsclaw. The purpose was to review the standard found in non-compliance at the

initial audit conducted in August 2023. This was the first monitoring review since the audit. The documentation, to substantiate compliance with the standard, was submitted by Corporal Rachel Frankenfield (Audit Coordinator) via Google One Drive. The results of the monitoring period from April 1, 2024 through October 1, 2024 were as follows: Standard .02 J (3, 5, 6) Control of Medications was found to be compliant. A review was conducted of the Anne Arundel County Department of Detention Facilities–Jennifer Road Detention Center, Medication Disposal Log, the 1.1 Medication Receipt, the Wellpath Receipt for Medication, and the Wellpath Standard Operating Procedures for Incoming Medication, with the Wellpath Corrective Action Plan. Documentation demonstrated that unused and expired medications were disposed of or returned to the pharmacy, in accordance with DHMH/DEA guidelines. Records of these actions included all persons witnessing or participating in the disposal/return. The records included the amount and type of medication disposed, date the medication was destroyed/returned, and the method of disposal. A review of the 1.1 Medication Receipt, Wellpath Receipt for Medication demonstrated the handling and management of personal medications of inmates upon admission to the facility and the disposition of facility and personal prescription medications at release/transfer. All documentation reviewed proved that inmate medication was properly documented during intake and disposal, and the records were maintained, as required by policy and the standard. Inspection reports were reviewed from other regulatory agencies. The Fire Marshal Inspection was conducted on October 30, 2024, with no violations noted. The Maryland Department of Health and Mental Hygiene conducted a Comprehensive Food Service Facility Inspection on December 30, 2024, with three violations noted and abated on the day of inspection. Dietary Menus were approved on April 19, 2024, by Julia Dunnigan, Dietician (Lic. DX4883). The Maryland Department of Labor, Licensing, and Regulations, MOSHA inspection, was conducted in the facility on June 14, 2023, which listed two violations. A corrective action plan was noted on Appendix B. Employer Report of Action Taken on July 14, 2023, noting one violation was abated. After a thorough review of the secondary documentation for the one non-compliant standard, the facility was found to be in total compliance with all of the standards for an Adult Detention Center. The Anne Arundel County Department of Detention Facilities – Jennifer Road Detention Center is recommended to receive the Recognition of Achievement Award.

Chairperson Annie Harvey welcomed comments from the representatives of the Anne Arundel County Department of Detention Facilities–Jennifer Road Detention Center. Superintendent Christopher Klein expressed appreciation to the auditors for coming out and providing a fair and impartial audit of the facility. Superintendent Klein commented that they always welcome the opportunity for other individuals to come in and see how the facility is doing and how the team is working hard every day to achieve the standards that the Commission sets forth. Superintendent Klein mentioned that this is probably Correctional Facility Administrator Borgese's last MCCA audit as he plans to retire in the summer of 2025. Superintendent Klein commented that he just wanted to thank Correctional Facility Administrator Borgese for his years of service and dedication to the county. Superintendent Klein spoke on Correctional Facility Administrator Borgese's dedication to the profession in assuring that the facility is safe, secure and adheres to the standards, as well as, other standards such as the ACA standards. Superintendent Klein commented that the administration was appreciative for a clean, fair and impartial audit of the facility. Superintendent Klein commented that Correctional Facility Administrator Borgese really takes pride in his job and has a great team

behind him. Superintendent Klein commented that he would be remised if he did not also thank the team especially, Corporal Rachel Frankenfield for her dedication to making sure that all of the documentation is in the right place and not only that, she ensures that they are actually following these practices. Superintendent Klein remarked that they are always looking at how they can improve and provide a safe correctional system. Superintendent Klein concluded his comments and deferred to Correctional Facility Administrator Borgese for his comments. Correctional Facility Administrator Michael Borgese announced his retirement effective August 2025. Correctional Facility Administrator Borgese thanked Superintendent Klein for his kind words. Correctional Facility Administrator Borgese commented that it has been a pleasure working with the MCCS team over the years. Correctional Facility Administrator Borgese remarked that it has always been positive and productive. He said it is nothing that they have shied away from. Correctional Facility Administrator Borgese commented that he would like to thank everyone for all their efforts.

Chairperson Annie Harvey entertained a virtual motion to approve the monitoring report concerning the Anne Arundel County Detention Center-Jennifer Road Detention Center and grant the Recognition of Achievement award. Vice Chairperson Courtney League made a motion to approve the monitoring report and grant the Recognition of Achievement award and Councilperson Kelly Russell seconded. The unanimous response of silence denoted the approval of the monitoring report and the Recognition of Achievement award. The Commission members congratulated the administration and staff on the achievement of total compliance with the standards.

Chairperson Annie Harvey requested a recusal concerning the draft audit report of the Roxbury Correctional Institution. The Roxbury Correctional Institution falls under the responsibility of DSO Annie Harvey. Chairperson Annie Harvey turned the meeting over to Vice Chairperson Courtney League.

- **ROXBURY CORRECTIONAL INSTITUTION**

Mr. Brandon Dickens reported on the monitoring review conducted on November 22, 2024 concerning the Roxbury Correctional Institution's non-compliant standards. Mr. Dickens reported that the review was conducted by Correctional Program Specialist Mechelle Johnson, Auditors Tammy McCotter, and Rene' Flowers. The purpose was to review the standards found in non-compliance at the initial audit conducted in August 2023. This was the first monitoring review since the audit. All documentation to substantiate compliance with the standards was submitted by Corporal Joseph Miller (Audit Coordinator). The results of the monitoring period from April 1, 2024 through October 1, 2024 were as follows: Standard .01 E (3) Security Equipment was found to be compliant. The RCI Appendix 2 to ID 110-9-1 Monthly Security Inspection forms were provided. A review of the records for the security equipment inventory demonstrated that all areas for security equipment were recorded and all security equipment was inventoried and inspected during the monitoring period, as required by the standard. Standard .01 J (2) Search Procedures was found to be compliant. A review of RCI Mass Search, Table of Content, and reports from staff for the semi-annual searches was conducted for 2024. RCI policies, EmD.DOC.110.0026-Search Plans and DPSCS OPS.110.0050-Search Protocol, were also reviewed. Based on the records reviewed, the facility conducted searches, at least once,

randomly and unannounced. of all inmate living and activity areas in 2024. The facility has met the requirements for semi-annual searches during the monitoring period, as required by the standard. Standard .01 K (2, 3) Key Control was found to be compliant. The following documents were reviewed to establish compliance: Appendix 23 to RCI I.D.110.0011. and Master Control Center Key Inventory/Inspection. The documentation concerning the daily inventories of keys for the Base Key watch system, Master Control and MCE proved that keys were inventoried daily, as required by the standard. Additionally, documentation for the quarterly inspections of key blanks, the key vault, and vault locks was assessed. The documentation noted that the keys were quarterly inspected for condition and were well-maintained throughout the monitoring period, in accordance with the standards. Standard .01 L (2) Tool Control was found to be compliant. The Tools and Dangerous Utensil Inventory forms for RCI were provided. A review of the documents demonstrated that quarterly inspections for the condition of tools was noted. Inspections were performed for all tools and the physical inventory was found to be accurate. All tools were accounted for and well-maintained during the monitoring period, as required by the standard. Standard .01 M (1) Transportation of Inmates was found to be compliant. A list of Roxbury Correctional Institution officers' that are eligible to drive a state vehicle, and MVA spot checks were submitted and reviewed. MVA spot checks were conducted on the approved drivers on the list. All drivers were appropriately licensed to operate a transportation vehicle, as required by policy and the standard. Standard .01 P (4) Special Confinement was found to be compliant. The RCI Appendix 1 to DCD 110-5, Record of Segregation Confinement documents were submitted for assessment. The documentation demonstrated that access to programs and services i.e. visits, commissary, and sick call were offered to individuals that were placed in special confinement. The inmates in special housing activities were documented for the entire monitoring period, as required by the standard and policy. Standard .04 A (4) Toxic, Caustic and Flammable Materials was found to be compliant. The Roxbury Correctional Institution Chemical Perpetual Inventory Appendix 5 to RCI.080.0004 forms were received for review. The records noted the following areas: The Barber Shop, The Barber school, Gym, Chapel Masonry, Auto tech, Auto Dept. Supply, MCE Graphics, Food Service, Dental, Master Control, TAC Room, Key Control Vault, and Sanitation cart. The TCFs were accounted for in all areas with the perpetual inventory. All documentation indicated that a system of accountability was in place for the issuance of all TCF's, for the monitoring period, as required by the standard and policy. Inspection reports were reviewed from other regulatory agencies. The Maryland State Fire Marshal conducted a fire safety inspection on May 8, 2024 noting multiple violations and the system was reported as inoperable. This issue will be reevaluated during the next scheduled MCCS audit. The Maryland Department of Health and Mental Hygiene conducted a Food Service Facility comprehensive inspection on July 17, 2024, noting seven violations. A corrective action plan for all violations was submitted on August 2, 2024. Dietary Menus were reviewed and approved on July 1, 2024 by Scott Steininger, Dietician (Lic. #DO1350). The Maryland Department of Labor, Licensing, and Regulations conducted a MOSHA inspection at the facility on October 10, 2023, which listed four violations and one was abated during the visit. A follow-up visit was conducted by MOSHA on November 20, 2023, verifying that the remaining three violations were resolved. After a thorough review of the secondary documentation for the seven non-compliant standards, the facility was found to be in compliance with all of the standards for an Adult Correctional Institution. The Roxbury Correctional Institution is recommended to receive the Recognition of Achievement Award.

Vice Chairperson Courtney League welcomed comments from the representatives of the Roxbury Correctional Institution. Warden Laura Golliday thanked the audit team for an in-depth look at the operations of the facility. Warden Golliday commented that the administration was appreciative of the feedback of the audit team.

Vice Chairperson Courtney League welcomed comments and questions from the Commission members. Assistant Attorney General Mary Denise Davis asked if the facility is under a twenty-four hour fire watch. Warden Golliday responded that currently the facility is utilizing the fire watch.

Vice Chairperson Courtney League entertained a virtual motion to approve the monitoring report and grant the Recognition of Achievement award concerning the Roxbury Correctional Institution. Councilperson Kelly Russell made a motion to approve the monitoring report and grant the Recognition of Achievement award and Assistant Attorney General Mary Denise Davis seconded. The unanimous response of silence denoted the approval of the monitoring report and the Recognition of Achievement award. The Commission members congratulated the administration and staff on the achievement of total compliance with the standards.

Vice Chairperson Courtney League turned the meeting over to Chairperson Annie Harvey to facilitate the meeting.

7. NEW BUSINESS

No new business was introduced at the meeting.

8. ANNOUNCEMENTS

Executive Director Moore commented that the next regularly scheduled virtual Commission meeting will be held on July 31, 2025 at 10:00 a.m. Executive Director Moore commented that a Commission meeting is not held in May due to the holiday. Executive Director Moore reported that the extended period of time between the next regularly scheduled meeting would be used to meet with new members. Chairperson Annie Harvey extended appreciation to Executive Director Moore for providing an orientation concerning the Commission board. Chairperson Harvey commented that it was greatly appreciated. Vice Chairperson Courtney League echoed the comments made by Chairperson Harvey.

9. ADJOURNMENT

Chairperson Annie Harvey adjourned the 287th Commission (Virtual) Meeting at 11:25 a.m. Chairperson Harvey extended wishes to everyone to have a great day.