


NEW YORK STATE DIVISION OF PAROLE	MANUAL ITEM: 8010.01	DATE: JUNE 2004
 POLICY AND PROCEDURES MANUAL	SUPERSEDES: N/A	PAGE OF 1 of 2
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law CROSS REFERENCES: N/A	SUBJECT: TEMPORARY OPERATING PROCEDURES

PURPOSE:

To allow the Division of Parole to temporarily suspend or modify items in the Policy and Procedure Manual.

POLICY:

The Executive Director, or designee, may temporarily modify or suspend Policies and Procedures of the Division of Parole for cause by issuing a *Temporary Operating Procedures*.

DEFINITION:

Temporary Operating Procedures: Are direct orders issued by the Executive Director, or designee, which have the effect of temporarily modifying or temporarily suspending specific Policies and Procedures of the Division as contained in the Policy and Procedure Manual.

PROCEDURE:

Promulgating Temporary Operating Procedures (TOPs)

A. Executive Director

1. TOPs may only be promulgated by the Executive Director, or designee. All TOPs will be placed in the following format (see Appendix A). The Director of Administration or designee will be responsible for distributing all TOPs to all members of the Division. TOPs may be promulgated by sending them via e-mail or fax to the Executive Team, Operations Directors, and Unit Heads with copies to all Regional Directors, Deputy Regional Directors, Area Supervisors/Bureau Chiefs, and Senior Parole Officers to ensure that all manual holders receive copies of the TOPs.

2. All Executive Team members, Regional Directors, and Unit Heads will acknowledge, within 15 days of the date of issue, to the Director of Administration, or designee, that their staff has received, and has been trained regarding issued TOPs. A log of these acknowledgements will be maintained by the Office of the Director of Administration.
3. The Policy and Procedure Manual Bureau and Counsel's Office will register all TOPs and take appropriate action to ensure that all affected outside agency/parties are notified.
4. TOPs Issued by the Executive Director, or designee, shall have the full force and effect of Division Policy and Procedures.
5. The Executive Director, or designee, may choose to suspend or modify a Manual Item within the Policy and Procedure Manual under, but not limited to, the following circumstances:
 - a. Division funding/equipment no longer permit compliance with Policy and Procedures items;
 - b. There is an emergency situation justifying suspending Policy and Procedure items or sections of items;
 - c. There is a legislative, executive or judicial mandate that changes Division operations; and
 - d. The Policy and Procedure Manual Item in question cannot, for demonstrated reasons, be followed or adhered to.
6. Executive Director, or designee, issued TOPs, will govern the Division's practices for no longer than 6 months, after which time the TOP shall:
 - a. Be terminated and the original Policy and Procedure Manual Item will be reinstated to full force and effect; or
 - b. Be terminated by the promulgation of a new or revised Policy and Procedure Manual Item to supersede the suspended Policy and Procedure Manual Item; or
 - c. Be re-issued for a specified period.
6. All Executive Director issued TOPs will be clearly labeled with the effective and the termination date.

APPENDIX A

TEMPORARY OPERATING PROCEDURE

Number: ____ Year ____

Date Issued:

Date Effective:

Re: Manual Item #


Title:

Section #

Date Terminates:

Issued by EXECUTIVE DIRECTOR (Name)/Designee: (Name)

BE ADVISED THAT:

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8010.02	DATE: APRIL 2005
	SUPERSEDES: N/A	PAGE 1 OF 1
APPROVING AUTHORITY	SOURCE: Executive Law	SUBJECT: OPERATIONAL PROTOCOLS AND PRACTICES
ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	CROSS REFERENCES: N/A	

PURPOSE:

To instruct Parole managers in the requirement to define Operational Protocols and Practices for each unit to ensure standardization of Division operations and compliance with Division policy and procedures.

POLICY:

Each manager will direct that Operational Protocols and Practices be developed and maintained in the form of a handbook for their respective unit staffs. The handbook will detail areas of responsibility and the functions of their unit and will be reviewed and updated annually. All such Operational Protocols and Practices will be consistent with Federal, State and local laws and with policies and procedures of the Division. Staff will comply with the protocols and practices.


DEFINITION: N/A

PROCEDURE:

The managers of the following units, or their designees, will develop Operational Protocols and Practices as described in the policy statement above:

Counsel's Office
Equal Opportunity/Diversity Management
Media Relations/Public Affairs
Office of Internal Audit/Professional Responsibility

Administration
Information Systems
Operations
Policy Analysis
Strategic Planning

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8015.00 SUPERSEDES: November 1985 9443.00 - Disclosure of Documents in Case Records 9500.15-FOIL Subject Matter Lists	DATE: AUGUST 2004 PAGE 1 OF 3
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Title 9 of the NY Codes, Rules and Regulations The NYS Freedom of Information Law (FOIL) Public Officers Law Sec 87 (2) CROSS REFERENCES: 8140.00 - Confidential Information/Special Handling 8220.02 - Victim Impact 9400.07 - Research Requests 9500.16 - Public Information Officer	SUBJECT: DISCLOSURE OF INFORMATION

PURPOSE:

To provide guidelines for Parole staff regarding disclosure of case record information maintained by the Division of Parole.

POLICY:

Upon *proper request*, Parole staff will disclose information contained in case records the disclosure of which would not result in harm to a person or hamper Division operations or unless disclosure is exempted by statute.

DEFINITIONS:

1. *Proper Request*: A written communication from an inmate/releasee, or others including but not limited to; their attorney/representative, employer/employment agency, family, medical personnel, treatment program, third party payer or funding source, asking for information contained in the case record. Also, any official communication from any criminal justice agency asking for information contained in the case record.
2. *Records Access Officer*: The Facility Parole Officer II/Area Supervisor/Bureau Chief, or the Officer they designate, where the request is received is responsible for disclosure of information in case records.

NOTE: All requests for information regarding inmates/releasees received from victims and/or their families or from victim's representatives, which pertain to the Victim Impact Unit, will be referred to

that unit. All inquiries from media sources will be referred to the Special Assistant to the Chairman designated to deal with public information. All requests to conduct research involving the review of case records will be referred to the Director of Policy Analysis. When requests are received under the provisions of FOIL, they must be acknowledge within 5 days and responded to within 2 weeks. When staff receive requests for information from the MEDIA under the provisions of FOIL, they will forward the requests to the Public Information Officer in Central Office. IF requests are received for FOIL subject matter lists, or for other than inmate/releasee information, the requests will be referred through the chain of command to Counsel's Office.

PROCEDURE:

Disclosure

A. Parole Staff

1. Once a proper request is received, and prior to disclosing information, the *Records Access Officer* must receive an authorization signed by the inmate/releasee waiving privacy interest or a copy of a court order assigning counsel pursuant to an administrative appeal. The waiver of privacy interest must contain the elements of Disclosure with Client's Consent Form (see Appendix A).

NOTE: Parole staff are NOT required to obtain authorization from the inmate/releasee for disclosure of information to criminal justice agencies. However, if information is to be forwarded to another criminal justice agency, Parole staff MUST case conference with their supervisor in advance and state the purpose of the disclosure of information.

2. Upon receipt of such a request, the Officer will review the case file to determine any information which is confidential and, therefore, not releasable. If parts of a document are not releasable, the Officer may redact those parts and release the rest of the document. Documents prepared by the Division of Parole will be made available to an inmate or attorney/representative and also documents prepared by other agencies, providing that they do not fall into the following exceptions:
 - a. diagnostic/evaluative opinions, such as, psychiatric/psychological, medical reports, correction counselor/teacher opinion reports, Parole Officer chronological entries and reports but only to the extent that they contain professional diagnostic opinions;
 - b. material which would reveal sources of information obtained upon a promise of confidentiality, such as from persons in the community who request that their identities and/or information provided be kept confidential and

from employees of public or private agencies who request confidentiality;

- c. Pre-Sentence Probation Report, absent a court order from the sentencing judge;
 - d. information which, if disclosed, might result in harm to any person, or hamper Division operations;
 - e. DCJS Criminal History Record Information/ NYSID Report.
3. If the appropriateness of a request is in question, the Officer may inquire up the chain of command.
 4. If access to particular document(s), or portions of document(s), is NOT granted, the Officer, if so requested, will provide reasons for non-disclosure. The Officer will retain a copy of the reply in the case record.
 5. If access to particular document(s), or portions of document(s) IS granted, the Officer will place a memorandum in the case record listing the documents made available to the inmate/release or third party. Where information has been redacted from any document to which access was granted, the Officer will attach a copy the redacted portion of the document to the memorandum.
 6. If an inmate/releasee or attorney/representative intend to appeal a determination not to provide access to a document, the Officer will refer them to Counsel's Office.
 7. With the exception of documents provided to the inmate/releasee free of charge on a one-time basis, the Officer will provide copies at the rate of twenty-five (25) cents per page. Payment will be made by check or money order only payable to the Finance Officer, Division of Parole. The Officer will forward the check or money order to the Finance Officer, Central Office along with a copy of Case Record Payment Notice (see Appendix B). There is no charge when case records are reviewed. However, there is a charge for copies of documents.

NOTE: There is no provision in the Freedom of Information Law (FOIL) to give free copies of documents to indigent inmates/releasees.

8. The Officer will enter all FOIL requests on the F.O.I.L. Request Log (see Appendix C) and send a copy of the log to Counsel's Office monthly.

APPENDIX A DISCLOSURE WITH CLIENT'S CONSENT
APPENDIX B CASE RECORD PAYMENT NOTICE
APPENDIX C F.O.I.L. Request Log

STATE OF NEW YORK – EXECUTIVE DEPARTMENT- DIVISION OF PAROLE

Name of Client (last), first (M.I.)

Identification No.

Expiration Date or Circumstance

Facility/Area Office

Instructions: Prepare one copy for Client's Case Record

DISCLOSURE WITH CLIENT'S CONSENTExtent or nature of information to be disclosed:

Purpose or need for the disclosure:

Name of title of the person or organization to which the disclosure is to be made:

I, the undersigned, have read the above and authorize the staff of this facility to disclose such information as specified above. I understand that this consent may be withdrawn by me at any time except to the extent that action has been taken thereon.

In any event, this consent shall expire by: _____ (contingent expiration date or circumstance). It is also understood that any disclosure is bound by Title 42 of the Code of Federal Regulations governing the confidentiality of alcohol and drug abuse client records and that redisclosure of this information to a party other than the one designated above is forbidden without additional written authorization on my part.

Signature of Client Date

Signature of Witness Date

STATE OF NEW YORK-EXECUTIVE DEPARTMENT-DIVISION OF PAROLE

Case Record Copy Payment Notice

Inmate/Releasee Name _____ ID # _____

Date _____ NYSID # _____

No. of Pages Copied _____ Amount Rec'd. _____

Copies of the releasable portion of the case record have been received by the inmate/releasee or attorney, either as noted below, or as provided by the records access officer.


Signature _____
(Inmate/Releasee or Attorney)_____
(Records Access Officer)

Distribution: Finance Officer (C.O.); - Inst/A.O. Payment Files; -
Inst/A.O. Case Files; - C.O. File

APPENDIX C

Facility/Area Office: _____

*****Copies of FOIL logs are to be forwarded to Counsel's Office in Albany at the end of each month.**

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8105.00	DATE: APRIL 2002
	SUPERCEDES: JANUARY 1992 and 8235.00 – Inmate Information Sheet	PAGE 1 OF 4
APPROVING AUTHORITY MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: EXECUTIVE LAW	SUBJECT: CASE FOLDER/RECORD ORGANIZATION
	CROSS REFERENCES: 8140.00 - Confidential Material 9442.00 - Confidentiality 9500.14 - Disposition of Folders	

PURPOSE:

To provide for a consistent, easily accessible folder/record of information necessary to Parole Officers in order to prepare inmates for release to parole supervision, and to enable them to supervise releasees in the community.

POLICY:

Parole staff will maintain an accurate, updated folder/record for each inmate in Department of Correctional Services (DOCS) custody, and for each releasee. This will be a single folder/record. The arrangement of the contents of the folder/record will be the same in all parole offices.

DEFINITION:

1. *Case Folder/Record* – The collection of all relevant information on a person who is under the supervisory jurisdiction of the Division of Parole, who has been, or who is presently incarcerated awaiting release to such supervision, or who may return to New York supervision or incarceration from another jurisdiction. This information may be contained on paper in a folder or on a computerized record.

Note: All parole staff will take proper precautions with all parole folders/records.

PROCEDURE:

I. Folder/Record Initiation

A. Parole Office Notification:

1. The parole office at a Correctional Facility will be notified by the Inmate Record Coordinator (IRC) when a new inmate is received.

2. The parole staff will initiate the *case folder/record* by preparing a label which contains the inmate's commitment name as it appears on the DOCS Receiving Blotter (DOCS Form IB) typed last name first, all in capital letters, followed by his/her DOCS Identification Number (DIN) and the New York State Identification (NYSID) number typed below the DIN.
3. Parole staff will also include in the record the following information:
 - a. Parole Eligibility Date, month and year of Initial Appearance, tentative Conditional Release Date, Maximum Expiration, and Maximum Expiration of Supervision.
 - b. Need for an interpreter.
 - c. Designation as case with an active warrant date or date when warrant was withdrawn.
 - d. All Parole Board appearances with dates and dispositions.

Note: If folders are used, parole staff will write the information in the appropriate places on the front of the folder. The "Confidential Information" and "CMC Designee" sections are to be left blank.

II. Folder/Record Placement

A. Prior to Parole Board Appearance:

1. Once the folder/record has been initiated, parole staff will enter it in the active files, in alphabetical order, except that at facilities where there is rapid turnover, staff may choose to enter the folder/record in numerical order using the DIN.
2. When cases are to appear before the panel of the Board of Parole within three months, staff will file those folders/records separately from the active files, in alphabetical order by month of appearance.
3. Prior to the Board appearance, staff will place the folders/records for that Board in calendar sheet order.

B. After Parole Board Appearance:

1. Staff will return the folders/records of inmates denied release to the active file.
2. Staff will enter the folders/records of inmates granted release into a separate file.

3. For cases which have been postponed on an Or Earlier basis, staff will enter the folders/records into a separate file and will reschedule for another Parole Board appearance.

C. Conditional and Other Releases:

1. When they are notified by the IRC that an inmate will be Conditionally Released, parole staff will place the folder/record in a separate file, in order of release date.
2. After an inmate's release from custody, staff must transfer the folder/record to the Area Office supervising the releasee.
3. Where folders are used, staff must post the transfer to the Folder Inquiry Tracking System (FITS).
4. When an inmate is discharged by Maximum Expiration of Sentence, Court Order, death, or by some other means, staff will enter the folder/record alphabetically and by year in a separate discharge file and post it to FITS.

III. Arrangement of Materials in Case Folder/Record:

A. Proper Filing of Case Material:

1. Staff will file/enter all materials in the folder/record in compliance with Appendix "A" of this manual item.

IV. Merging of Folders/Records:

A. Combining Folders/Records from Previous Commitments:

1. Staff will send for the prior folder/record using the appropriate request format.
2. Upon receipt of the prior folder/record, staff will combine materials from the prior folder/record into the new folder/record. The materials which MUST be combined from the prior folder/record are limited to the following:
 - a. One copy of each prior Inmate Status Report.
 - b. One copy each of all Violation of Release reports with Supplementary Violation of Release reports including Bureau Analysis, the Hearing Officer Decision Sheet and the Board Affirmation.

- c. One copy of each prior Release Sheet.
- d. One copy of each prior Psychological/Psychiatric Report.
- e. One copy each of all Recission Hearing Reports with related documents.
- f. One copy of all Field Chronological Reports.
- g. One copy each of Birth Certificate and Social Security Card. For Veterans, include Military Discharge/Release from Active Duty (Dept. of Defense form DD 214).
- h. All Pre-Sentence/Pre-Plea Reports.

Note: Where folders are used, dividers (11x14 blank page) are to be placed between each commitment in each section.

APPENDIX "A"

Note: The proper filing of case material is the responsibility of the clerical staff at each point that it is handled for filing. If the case material is found to be arranged improperly, staff is responsible for arranging it in the prescribed manner.

The following is the arrangement of all recorded material, to be arranged chronologically (unless otherwise noted) in the *case record/folder* of the Division of Parole. Listings are top to bottom.

A. Section I-A:

1. Discharge Summary.
2. Discharge Papers.
3. Inactive Notification.
4. Correspondence relating to Supervision (including Onsite Drug and Alcohol Test Record; Form 4169 - a).
5. Inmate Instruction Sheet (Form DP103), if applicable; on top upon release.
6. Area office copy of Certificate of Release. (Form 3010, 3010a)
7. Notice regarding Supervision Fees. (Form 6001)
8. Community Prep. Report/Face Sheet. (Form 4130)
9. Correspondence which impact on Community Prep. (Including, if applicable – Sex Offender Registration documents).
10. Field Investigation Assignment Data/IS-2. (Form 3002)
11. Application/Notice of Program (SSI, ADAP, other).
12. Comprehensive Medical Summary.
13. Health/Medical documentation.
14. Parole Evaluation Data sheet: Form 3006 given to inmate at reception, to fill out and return to the parole office, and again three months before the Board appearance or two months before Conditional Release to be filled out and returned to the parole office.
15. Copies of birth certificate and social security card (always on the very bottom of section).

B. Section I-B:

NOTE: Reasonable Accommodation Forms should be placed in this section in chronological order.

1. Confidential File (on top upon transfer or release, if applicable).
2. Field Chronological Reports (including Transfer and Assignment forms).
3. Assignment and Arrival Report/Notice. (Form 4027)
4. Memo regarding Confidential File, if applicable.
5. Institutional Chronological Entries.
6. Memo regarding CNYPC placement, if applicable.

C. Section II-A:

NOTE: A divider, (i.e.: blank 11x14 paper), should be placed between each course of VOP documentation (the following describes one course).

1. Memo regarding Prospective Re-release Date. (Form 4160 or 4161)
2. Parole Jail Time Certificate. (Form 4017)
3. Final Declaration of Delinquency.
4. Documentation relating to Appeal of VOP decision.
5. Final Hearing Minutes.
6. Parole Revocation Decision Notice/ALJ report. (Form 3008-fc)
7. Documentary Evidence.
8. Correspondence relating to VOP process.
9. Board Action Form. (Form 4003-2a).
10. Area/Bureau Analysis. (Form 4003.2)
11. Preliminary Hearing Minutes.
12. Preliminary Hearing Decision.

13. VOP packet (including the Violation of Release Report (Form 4003), Notice of Violation (Form 9011) and a copy of the Certificate of Release).
14. Parole Warrants. (Forms 4012, 4051, 4054)
15. Notice of Arrest/Warrant Issuance Form 4030 (every application if multiple forms are used, in chronological order in relation to each other).
16. Arrest Report, if applicable.

D. Section II-B:

1. Current Merit Time Eligibility Determination (on top at Board appearance, if applicable).
2. Current Earned Eligibility Program Determination (on top at Board appearance if applicable).

(The following should be placed in chronological order).

3. Inmate and/or other general correspondence.
4. DOCS service-related material.
5. Correspondence/Visitor lists.
6. Telephone Registration List/Telephone Log.
7. Out-to-Court Documentation.
8. DOCS Employment Profile.

E. Section III-A:

1. Memos relating to Special Conditions.
2. Special Conditions (field imposed). (Form 4160)
3. Supplement to conditions of Release. (Form 4160)
4. Certificate of Release. (Form 3010)
5. Conditional Release Application (Form 3041), if applicable.
6. Documents related to appeal of Parole Board Decision, if applicable.
7. Documents related to Rescission Process (Forms 3061, 3062, 3063, 3064), if applicable.

8. Parole Board Hearing Minutes.
9. Parole Board Decision Notice (Form 9026), for JO (Form 9027).
10. Commissioner Worksheet. (Form 9026.2)
11. Update to Inmate Status Report/Confidential Report to the Field (Form DP104), if applicable.
12. Intelligence Packet, if applicable.
13. Report of Non-Appearance, if applicable.
14. Addendum to Inmate Status Report, if applicable.
15. Inmate Status Report. (Form 9032)
16. SEEKER ID/MO and Sex Offender Worksheet.
17. Notice of Parole Board Appearance. (Form 3020)
18. Pre-Sentence Investigation Report(s).
19. Responses to Requests for Disposition.
20. Copies of Requests for Disposition letters.
21. DCJS Criminal History Report.
22. Federal Criminal History Report.



F. Section III-B:

1. Updated Disciplinary Report (on top at Board appearance – discarded after Board appearance).
2. Fingerprint Card/Release Photo (on top upon release).
3. DOCS receiving blotter (Form IB, use only the most updated version).
4. DOCS Time Computation(s) (all computations are to be saved, placed together chronologically, a diagonal line to be drawn across previous computations).
5. Report of Time Allowance Committee Review (stapled to corresponding updated Time Computation).
6. Documentation relating to warrants.

7. Psychiatric/Psychological Reports.
8. Official Recommendations (including Pre-Sentencing Memorandum).
9. Copies of letters soliciting Official Recommendations.
10. Sentence and Commitment Order(s).
11. Reception Photo.

G. Miscellaneous:

1. FPO Worksheet (Form 9026.1) and Post Interview Facility Staff Worksheet (Form 9028) are to be discarded after being posted to GES.
2. In the case of multiple Board appearances, the computerized portion of the previous Inmate Status Report is to be discarded.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8105.04	DATE: MARCH 2003
	SUPERCEDES: JULY 1991	PAGE 1 OF 2
APPROVING AUTHORITY  MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Executive Law 259-A Criminal Procedure Law 390.60-1	SUBJECT: PRE-SENTENCE INVESTIGATION REPORT
	CROSS REFERENCES: 8015.00 - Confidentiality of Records 8105.00 - Case Folder/Record Organization 8305.00 - Inmate Status Report	

PURPOSE:

To instruct Parole staff in obtaining and reviewing a *Pre-sentence Investigation Report*.

POLICY:

In order to ensure that the Parole folder/record contains a reliable description of the offense(s) for which an inmate was convicted/adjudicated, staff will obtain the *Pre-sentence Investigation Report*, as needed.

DEFINITION:

Pre-sentence Investigation Report: Also known as PSIs/PSRs, and as Probation Reports. They are court-ordered documents prepared by Probation Departments and presented to the judge at the time of sentencing. After sentencing, the reports are forwarded to the Department of Correctional Services Inmate Record Coordinator (DOCS IRC) and to facility Parole offices where they are made part of the Parole folder/record.

PROCEDURE:

I. Obtaining the Pre-sentence Investigation Report (PSIs)

A. Facility Parole Staff

1. When a PSI arrives at the reception facility with the inmate, Parole staff at the reception facility will make a copy of the report, retain the original in the Parole folder/record, and send a copy to Central Files.
2. If the PSI does NOT arrive at the reception facility with the inmate, and does not arrive prior to movement of the inmate to another facility, Parole staff at the owning facility will copy the report when it does arrive; retain the original in the Parole folder/record and send a copy to Central Files.

NOTE: Not every commitment to a State correctional facility is accompanied by a PSI. If a PSI is prepared for an offense, and the offense is followed by a second one, the judge may choose not to order a PSI for the later offense. If facility Parole staff does not have a reliable description of the second crime, they will develop the information by contacting the court, the district attorney, the probation department and/or police agencies involved.



NOTE: In some cases a Pre-Plea Report is received instead of a PSI.

II. Reviewing PSIs

A. Facility Parole Staff

1. If staff determines that additional information is needed beyond what is contained in the PSI, staff will contact the court, district attorney, the probation department and/or police agencies involved to get that information.
2. If staff receives a PSI that makes reference to a prior report(s) not attached, they will contact the probation department and request a copy(s).

NOTE: Parole staff is authorized to provide an inmate with a copy of the PSI ONLY when a court order has been received DIRECTLY from the sentencing court granting staff permission to do so.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8105.06 SUPERCEDES: FEBRUARY 1988 NOVEMBER 1985	DATE: JUNE 2002 PAGE 1 OF 1
APPROVING AUTHORITY  MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Executive Law CPL Section 380.70 CROSS REFERENCES: N/A	SUBJECT: SENTENCING MINUTES

PURPOSE:

To provide instructions to Parole staff for obtaining the sentencing minutes of inmates and releasees.

POLICY:

When requested by the Board of Parole, or when deemed appropriate by Parole staff, staff will obtain the sentencing minutes of a case.

DEFINITION:

Sentencing Minutes: The stenographic record of the sentencing proceeding of a person adjudicated/convicted of a crime.

PROCEDURE:

Obtaining *Sentencing Minutes*

A. From the Facility Inmate Record Coordinator (IRC):


1. At the time when the Parole Officer is preparing the Inmate Status Report, facility Parole clerical staff will contact the IRC and request a copy of the sentencing minutes for review by the Officer and for placement in the Parole Folder/Record.
2. If the minutes are not available at the owning facility, Parole staff will request that the IRC obtain them from the previous owning facility or reception center.

B. From the Sentencing Court:

1. If Parole staff are unable to obtain the sentencing minutes from the IRC, they will contact the court (or courts) which sentenced the inmate in the present case(s) and will request the minutes.

NOTE:

Any recommendations contained in the sentencing minutes will be entered in the Inmate Status Report under Official Recommendations.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8105.09 SUPERSEDES: July 1991	DATE: AUGUST 2004 PAGE 1 OF 3
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law CROSS REFERENCES: 8105.00 – Case Folder/ Record Organization 8405.09 – Community Prep 9500.12 – Case Folder Security	SUBJECT: DISTRIBUTION OF FOLDER/RECORD MATERIAL

PURPOSE:

instruct Parole staff in the distribution of material in the inmate/releasee folder/record.

POLICY:

Parole staff at New York State Department of Correctional Services (DOCS) facilities will collate and distribute material in case folders/records.

DEFINITION:

N/A

PROCEDURE

I. New Commitments

A. Reception Center Parole Staff

1. Staff will collate and distribute, as a single package to Central Files, copies of the following material for each folder/record:
 - a. Sentence and Commitment Order(s)
 - b. Pre-Sentence Report(s)

- c. DOCS receiving blotter/Crime and Sentence Information and Legal Date Computation
- d. DOCS Classification Analysis/Risk and Needs Assessment-Questionnaire (effective 9/05)
- e. Division of Criminal Justice Services (DCJS) Repository Inquiry/NYSID/Criminal History Report.

II. Pre-Board Assignments

A. Facility Parole staff

1. For Pre-Board Community Preparation Assignments, staff will distribute folder/record material to Area Offices/Bureaus as follows:
 - a. Community Preparation Assignment Form 3002/IS-2
 - b. Pre-Sentence Report
 - c. Inmate Status Report (i.e. Initial, Reappearance, Merit, Parole Violator Worksheet Presumptive Release), with a copy to Central Files
 - d. Psychiatric Report/Mental Health Status Evaluation (MSE), if any, with copy to Central Files
 - e. Parole Evaluation Data Sheet Form 3006
 - f. Letters Offering Assistance/Employment

III. Post Board

A. Facility Parole staff



1. For Open Date Community Preparation Assignments, staff will distribute material in the same way as for Pre-Board Assignments but will also send to the Area Office/Bureau a copy of the Parole Board Decision Notice.
2. For Parole Denied cases, where Pre-Board Assignments were not made, staff will send copies of the Inmate Status Report and the Psychiatric Report/MSE, if any, to Central Files only.
3. For Conditional Release cases, staff will distribute material in the same way as for Board Assignments and will send to the Area Office/Bureau, along with Form 3002/IS copies of the following:

- a. CR Application Form 3041, signed by inmate
- b. Inmate Status Report (i.e. Initial and most recent Reappearance report)
- c. Comprehensive Medical Summary (CMS), if any
- d. MSE, if any, with a copy to Central Files
- e. Release of Information/Consent for Release of Information Concerning Medical Diagnosis or Treatment, signed by inmate, if CMS included
- f. Authorization for Release of HIV Related Information Form DOH-2557, signed by inmate, if HIV positive.

NOTE: Where material was previously sent, staff will so indicate under the "remarks" section of Form 3002/IS-2.

NOTE: For all releases staff will send, at the time of release, the case folder/record to the area office clearly addressed to the current Parole Officer of record. Where prints and photos have not been received when the folder/record is ready to be sent, the folder/record will be sent and the prints and photos forwarded when they become available.

NOTE: When staff receive special requests for information from field and Central Office units, they will distribute case folder/record material so as to meet the immediate need.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8115.00 SUPERSEDES: November 1985 8120.00 - Federal Criminal Record Histories 8120.01 - Out of State Criminal Record Histories - Triple I	DATE: NOVEMBER 2002 PAGE 1 OF 2
APPROVING AUTHORITY  MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Title 28 US CFR CROSS REFERENCES: 8305.00 - Inmate Status Report 9212.00 - Revocation Process	SUBJECT: CRIMINAL HISTORY RECORD INFORMATION (CHRI)

PURPOSE:

To instruct Parole staff on the authorized reasons for requesting Criminal History Record Information (CHRI), appropriate use and dissemination of CHRI, and how to obtain it.

POLICY:

Parole staff will ensure that the criminal history of each case folder/record is updated as needed. Parole staff will act in accordance with the Division of Parole Use and Dissemination Agreements with the Division of Criminal Justice Services (DCJS) and the New York Statewide Police Information Network (NYSPIN) (see Guidelines Appendix A). Parole staff will request CHRI for authorized purposes only and will properly secure information received.

DEFINITIONS:

1. *New York State Criminal History Record (NYSID Report/Rap Sheet)*: A document which originates from the New York State Division of Criminal Justice Services (DCJS) containing information on New York State arrests, dispositions or other instances where a person has been fingerprinted. The NYSID number and Department of Correctional Services Identification Number (DIN) are used in all records, reports and correspondence concerning an inmate or releasee.
2. *Interstate Identification Index (Triple I)*: A decentralized, interstate exchange of criminal history information. The FBI maintains a name and fingerprint index which includes arrest and disposition information from participating state and Federal agencies. The index contains name(s), numerical identifiers, and physical descriptors of persons with criminal history information. The FBI supplies directly only those records reflecting Federal agency arrests/dispositions and records from states that do not participate.
3. *New York Statewide Police Information Network (NYSPIN)*: A computerized system providing 24-hour access to local, state, Federal, and international law enforcement and criminal justice agencies for exchange of law enforcement related information. NYSPIN terminals in the Division of Parole are primarily used to access CHRI.

PROCEDURE:***New York State Criminal History Record/Triple I*****A. Facility and Field Parole staff:**

1. Facility staff will review each case folder/record to determine if a current criminal history record, dated after the most recent return to incarceration, is required. Particular care should be taken in the cases of returned parole violators to make sure that the most recent record is present.
2. Field staff will review case folders/records when a current criminal history record is required.
3. If facility staff finds that the criminal history record is not current, staff will make a request for a criminal record history to the Inmate Record Coordinator at the facility or to Quality Control Alerts Unit, Division of Parole Central Office, using Form 2520 (see Appendix B).
4. If field staff require a current criminal history record, staff will make a request to the nearest Division *NYSPIN* work station/terminal, or if the work station is not readily available, to the Quality Control Alerts Unit, Division of Parole Central Office.

NOTE: In all cases, "nearest Division *NYSPIN* work station/terminal," means other than Parole Violation Unit (PVU) work stations/terminals, which are reserved for PVU work only. Staff will find available work stations/terminals in the Division List of *NYSPIN* Locations (see Appendix C).

CHRI USE & DISSEMINATION GUIDELINES

I. APPROPRIATE USE OF CHRI AND TRIPLE I INFORMATION

Authorized Division staff may only request New York State Criminal History Record Information or Triple I information for the following purposes:

1. Parole Release Investigation
2. Violation of the Conditions of Parole Investigation
3. Executive Clemency Investigation
4. Certificate of Good Conduct Investigation
5. Certificate of Relief from Disability Investigation
6. Parole Absconder Investigation
7. Early Discharge Investigation
8. Conditional Release Investigation
9. Out-of-State Transfer Investigation
10. NYSID # Check Digit Verification
11. Parole Status Check
12. Parolee Associate Investigation
13. Sex Offender Registry Investigation
14. Warrant Investigation

Written notes must be placed in the parolee case folder for any case where CHRI or Triple I for a parolee associate is accessed. The notes should include the associate's NYSID if known. For any case where CHRI or Triple I information is shared with another law enforcement agency, notes must be placed in the case folder indicating that information was shared and with whom.

II. USE & DISSEMINATION GUIDELINES

1. Requestors of CHRI or Triple I must have an active case or written personal notes or other records to support the inquiry.
2. CHRI and Triple I information is confidential from the time it is generated until the time that it is destroyed. It is never accessible to the public and should never be retained in a file to which the public has access.
3. Releasing CHRI or Triple I or even confirming the absence or presence of them outside criminal justice is prohibited – this includes the parolee or his personal representative.
4. Secondary dissemination of CHRI or Triple I is prohibited unless specifically authorized by law. However, the Division may share CHRI or Triple I with another law enforcement agency actively participating in a Division case.
5. Use of CHRI and Triple I only for a current case or case investigation. Obtain updated information for subsequent transactions.
6. Discarded CHRI and Triple I must be confidentially destroyed.

NEW YORK STATE DIVISION OF PAROLE

CRIMINAL HISTORY RECORD INFORMATION (CHRI) REQUEST

DATE OF REQUEST: ____/____/____

REQUESTOR: NAME _____
TITLE _____
ADDRESS _____
PHONE _____

PURPOSE OF REQUEST: _____
(Must be an approved purpose as cited in Manual Item 8115)

SUBJECT'S NAME _____ SUBJECT'S NYSID _____

SUBJECT IS: _____ PAROLEE _____ ASSOCIATE OF PAROLEE

IF SUBJECT IS AN ASSOCIATE OF A PAROLEE, PLEASE PROVIDE

PAROLEE'S NAME _____

AND NYSID _____

If subject's NYSID is not available, please provide as much of the following information as possible to assist in Criminal History search.

NAME _____ FBI# _____

SEX: _____ MALE _____ FEMALE

RACE: _____ WHITE _____ BLACK _____ OTHER

DOB ____/____/____ SSN ____ - ____ - ____

INFORMATION REQUESTED: _____ NYS RAP SHEET

_____ INTERSTATE IDENTIFICATION INDEX (III)

Completed forms may be forwarded or faxed to Central Office Quality Control / Alerts Unit
Fax (518) 473-5798 or to a designated Operations location.

DATE REQUEST COMPLETED ____/____/____ OPERATOR NAME: _____

07/30/02

FORM 2520

DIVISION NYSPIN LOCATIONS

The following is a list of the Division's current NYSPIN locations with accompanying NYSPIN Symbolics and ORI numbers.

<u>NYSPIN Location</u>	<u>Symbolic</u>	<u>ORI</u>	<u>Telephone</u>
Bronx Area Office 260 E. 161 st Street 9 th Floor Bronx, NY 10451	[REDACTED]	[REDACTED]	718-292-7920
BSS 314 West 40th Street NY, NY 10018	[REDACTED]	[REDACTED]	212-239-6191
Metro I Regional Office 119 W. 31 st Street NY, NY 10001	[REDACTED]	[REDACTED]	212-736-9848
OPR 151 W. 26 th Street 4 th Floor NY, NY 10001	[REDACTED]	[REDACTED]	212-741-4044
Downstate Admin. 314 W. 40 th Street 5 th Floor NY, NY 10018	[REDACTED]	[REDACTED]	212-239-5727
Metro II Office 350 Livingston Street NY, NY 11217	[REDACTED]	[REDACTED]	718-802-9850
Queens Area Office 92-36 Merrick Blvd. 2 nd Floor Jamaica, NY 11433	[REDACTED]	[REDACTED]	718-558-5150
Brooklyn Area Office 14 DeKalb Ave. 2 nd Floor Brooklyn, NY 11201	[REDACTED]	[REDACTED]	718-254-2044

Staten Island

146 Bay Street 1st Floor

Staten Island, NY 10301

718-876-5530

Peekskill

14 Bank St.

Peekskill, NY 10566

914-737-2028

Poughkeepsie

82 Washington Street 1st Floor

Poughkeepsie, NY 12601

845-452-0620

Nassau

250 Fulton Avenue, 1st Floor

Hempstead, NY 11550

516-485-2660

Suffolk

550 Johnson Avenue

Bohemia, NY 11716

631-218-5670

Central L I

81 Executive Blvd.

Farmingdale, NY 11735

631-420-5110

Mt. Vernon

54 South Third Avenue

MT. Vernon, NY 10550

914-699-1810

Region 4

10 Russell Road

Albany, NY 12206

518-459-7322

Interstate

845 Central Avenue

Albany, NY 12206

518-457-7566

Utica

207 Genesee St. 5th Floor

Utica, NY 13501

315-793-2572

Binghamton

44 Hawley Street

Binghamton, NY 13901

607-721-8523

Elmira

362 East 5th Street 1st Floor

Elmira, NY 14901

607-734-6667

Buffalo

125 Main Street

Buffalo, NY 14203

716-847-3481

Syracuse

333 East Washington Street 5th Floor

Syracuse, NY 13202

315-428-4093

Niagara Falls

444 Third Street

Niagara Falls, NY 14301

716-285-5342

Upstate Operations

97 Central Avenue 3rd Floor

Albany, NY 12206

518-473-5421

Central Office ALERTS

97 Central Avenue 2nd Floor

Albany, NY 12206


518-473-9542

Region V

454 East Broad Street

Rochester, NY 14607

585-232-5464

<p>NEW YORK STATE DIVISION OF PAROLE</p>  <p>POLICY AND PROCEDURES MANUAL</p>	<p>MANUAL ITEM: 8120.00 SUPERSEDES: APRIL, 2006</p>	<p>DATE: JANUARY 2011 PAGE 1 OF 3</p>
<p>APPROVING AUTHORITY</p> <p>MARK MANTHEI EXECUTIVE DIRECTOR</p>	<p>SOURCE: N/A</p> <p>CROSS REFERENCES: <u>9203.01 Standards of Supervision</u> <u>9203.02 Case Management System</u> <u>9212.00 Revocation Process</u> <u>8405.09 Community Preparation Investigation</u> <u>9500.04 Case Conferences</u> <u>9208.02 Discharges from Sentence</u> <u>9499.02 Work Schedules and Overtime</u> <u>8612.04 Special Needs</u> <u>9204.09 Supervision Fees</u> <u>9431.02 Substance Abuse Testing</u> <u>9208.15 Merit Termination of Sentence</u></p>	<p>SUBJECT: ParoleSTAT</p>

PURPOSE:

To codify the Division of Parole's ParoleSTAT process as a statewide effort that has been designed to direct agency and staff actions to help increase the number of releasees who successfully complete parole supervision. During these sessions Facility Operations, Field Operations, Reentry Services and the Parole Violation Unit appear to discuss performance standards within each of the disciplines.

POLICY:

All Division of Parole Executive Staff, Regional Directors, Department Heads (and their respective designees), the Director of Staff Development and the Secretary to the Board of Parole will participate in monthly ParoleSTAT sessions that are designed to address agency performance standards and success rates that have been identified as the measurable indicators of the Division's

ability to ensure public safety through the preparation of inmates for release and supervision of parolees to the successful completion of their sentence.

PROCEDURE:

I. EXECUTIVE STAFF RESPONSIBILITY

- A. The Division's Executive Staff will conduct monthly ParoleSTAT sessions with each Regional Director and their staff on a rotating basis to ensure that each Region's information is fully examined two times annually, or as needed.
- B. The Director of Field Operations and/or designee will schedule the monthly sessions, provide guidance for the region to prepare, determine which cases will be reviewed and lead the process of examination at the session for field Operations. Post ParoleSTAT, the Director of Field Operations and/or designee will provide written comment to the region regarding their outcomes, needs that must be addressed, and a request for written response to unresolved issues.
- C. The Director of Operations and/or designee will work with the Regions to codify and record areas of performance that are exceptional and to develop strategies to improve areas of supervision that do not meet statewide standards.
- D. The Director of Facility Operations and/or designee will ensure that facility staff provide to the Office of Policy Analysis, all the data required to perform an evaluation of pre-release performance measures. Post ParoleSTAT, the Director of Facility Operations and/or designee will provide written comment to the Cluster Area Supervisors regarding their outcomes, needs that must be addressed, and a request for written response to unresolved issues.
- E. The Director of Reentry Services and/or designee will ensure that Reentry Services staff provide to the Office of Policy Analysis, all data required to perform an evaluation of pre and post release performance by staff. The Director of Reentry Services and/or designee will work with the Region to prepare an overview of new initiatives within the region, lack of services within the region, and efforts being made to obtain said services.
- F. The Chief of the Parole Violation Unit and/or designee will provide an explanation for caseload sizes, completed hearings, hearings postponed, hearings lost, and parole violators in local jails. The Chief of the Parole Violation Unit and/or designee will present a plan of action to address issues evident in the data provided by the Office of Policy Analysis.

II. MANAGERS RESPONSIBILITY



- A. The Regional Directors, Cluster Area Supervisors, Director of Reentry Services, Reentry Services Specialists, Chief of the Parole Violation Unit and Deputy Chiefs are required to be familiar with the information included in the ParoleSTAT reports and to use these reports to direct their staffs' activities, initiatives and supervision strategies. Moreover, Managers will:
1. Acknowledge and reward performance excellence.
 2. Provide information as directed prior to ParoleSTAT sessions to the Office of Policy Analysis for use in compiling ParoleSTAT reports.
 3. Identify areas of poor performance and define goals for improvement.
 4. Develop a strategy for attaining defined goals.
 5. Implement the strategy in their respective units.
 6. Measure outcomes and/or adjust strategy as needed to meet defined goals.
 7. Recommend development of additional measures that will assist them in managing their units.

III. OFFICE OF POLICY AND ANALYSIS RESPONSIBILITY

- A. Each month, the Division's Office of Policy Analysis will assemble ParoleSTAT performance indicator reports that illustrate the Agency, Region and Bureau performance outcomes for the previous month and year-to-date. These reports will be produced and distributed to the Executive Staff and Regional Directors by the fifteenth (15th) day of each month.
- B. ParoleSTAT reports will be based upon information prepared by the Office of Policy Analysis as well as material submitted from other sources, depending upon the measures being used at the time. Policy Analysis will modify existing measures and develop new measures as necessary.

IV. OFFICE OF INFORMATION SERVICES RESPONSIBILITY

- A. Each month, the Division's Office of Information Services will run an individual report that illustrates the Agency, Region, Bureau, Unit and individual Parole Officer performance indicators as per the ParoleSTAT process. This report will be produced and distributed to the Executive Staff, Regional Directors and Area Supervisors by the fifteenth (15th) day of each month.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8130.01	DATE: APRIL 2006
	SUPERSEDES: N/A	PAGE 1 OF 2 
APPROVING AUTHORITY ANTHONY G. ELLIS II; EXECUTIVE DIRECTOR	SOURCE: N/A	SUBJECT: CASE REVIEW PROCESS
	CROSS REFERENCES: N/A	

PURPOSE

To codify the Division of Parole's Case Review process as a statewide effort that has been designed to assess agency and staff performance in instances wherein cases under the Division's jurisdiction commit high-profile crimes and/or are the subject of public or media inquiry and to assess policy and procedure issues that are germane to the case outcome that is being reviewed.

POLICY

A Case Review will be conducted on any case under the Division's jurisdiction when a releasee under the Division's jurisdiction commits a new crime that results in the death of another individual, or said case receives intense media or public scrutiny.

PROCEDURE



The Executive Director (or her/his designee) will direct that a case review be conducted as soon as practicable after any incident, such as has been described herein, is reported to the Division of Parole. All Parole staff are subject to participation in the Case Review process at the direction of the Agency Executive Director and/or the Director of Operations. Additional participants may include representatives of other agencies (i.e. representatives from the Office for the Prevention of Domestic Violence) that may help to facilitate the Division's examination of the case.

Case reviews will entail a full and complete examination of the case record, including criminal history; institutional record, supervision record, case contacts, chronological records and any record associated with the case that describes the Division's interaction with the case.

The Office of the Executive Director will maintain a record of the case reviews that includes information about the incident, the case, and findings and recommendations of the Case Review process as relates to staff actions and/or policy and procedure modifications recommended as a result of the review process.

The Executive Staff, in conjunction with Staff Development will, based on the recommendations made as a result of the Case Review process, develop directives modifying policy and procedure pending release of updated manual item incorporating said changes.

Regional Directors will discuss directives with Region managers and ensure implementation.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8135.00 SUPERCEDES: FEBRUARY 1993 ADDENDUM 11/96	DATE: JUNE 2002 PAGE 1 OF 2
APPROVING AUTHORITY  MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Executive Law Juvenile Offenders Law Penal Law Section 70.02 CROSS REFERENCES: 8305.00 - Inmate Status Report 8405.09 - Community Prep	SUBJECT: JUVENILE OFFENDER

PURPOSE:

To instruct Parole staff in processing Juvenile Offender cases for Parole Board appearance and for assignment to, and supervision in, the community.

POLICY:

Parole staff will process Juvenile Offender cases in accordance with the provisions of the Juvenile Offender Law to enhance community safety and to assist the offender's successful return to the community.

DEFINITIONS:

1. *Juvenile Offender (JO)*: A person aged 13 convicted of Murder in the Second Degree (except Felony Murder). Additionally, persons aged 14 and 15 convicted of Murder Second Degree, Aggravated Sexual Abuse, Arson First and Second Degree, Assault First Degree, Attempted Kidnapping First Degree, Attempted Murder Second Degree, Burglary First and Second Degree, Kidnapping First Degree, Manslaughter First Degree, Rape First Degree, Robbery First and Second Degree, and Sodomy First Degree. A Juvenile Offender conviction IS a felony conviction and Certificate of Relief from Disabilities eligibility applies in such cases.
2. *Juvenile Offender Sentences*: The Juvenile Offender Law provides specific indeterminate sentences of imprisonment for juvenile offenders and requires that a juvenile offender so sentenced shall be confined by the Director of the Office of Children and Family Services (OCFS) in a secure facility. Sentences range from life imprisonment with a minimum of between five and nine years for those convicted of Murder Second Degree, to a sentence of at least three to at most seven years for conviction of a designated Class C felony. Juvenile offenders are confined in OCFS facilities until transferred to a facility under the jurisdiction of the Department of Correctional Services (DOCS). Transfer may occur between the ages of 16 and 21, depending on individual case needs. Juvenile offenders age 21 and over are transferred to DOCS facilities.



PROCEDURE:

Parole Board Appearance and Parole Supervision

A. Facility and Field Parole Staff:

1. Parole Staff will handle *Juvenile Offenders* in the same way as adult offenders with the following exceptions:

- a. Staff will use juvenile offender guidelines as outlined in the Juvenile Offender Guideline Manual at the time of the Parole Board appearance. Juvenile offender guidelines will be applied to any inmate sentenced as a juvenile regardless of whether or not the inmate is in an OCFS or a DOCS facility at the time the Inmate Status Report is being prepared.
- b. Staff will make community preparation assignments for New York City cases, up to and including age 21, to the Parole Juvenile Offender Unit (PARJO).
- c. When juvenile offender releasees, age 15 and under, are taken into custody for parole violation in New York City, staff will take them to the Bridges Juvenile Center, 1221 Spofford Avenue, Bronx, NY. Outside of New York City, Parole staff will contact the sheriff's department to determine where such releasees can be lodged. Juvenile offenders age 16 and older will be lodged at local county facilities.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	<div style="background-color: black; width: 200px; height: 30px; margin: 0 auto;"></div> MANUAL ITEM: 8140.00 SUPERSEDES: March 1987 August 1994 9442.00 - Confidentiality of Records (and Addendum 9/94)	DATE: SEPTEMBER 2003 PAGE 1 OF 4
APPROVING AUTHORITY  MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Executive Law 259-k Public Officers Law Sec(s) 74 & 87 (2) CROSS REFERENCES: 8015.00 - Disclosure of Information 8105.00 - Case Folder Organization 8140.01 - Noteworthy and Unusual Cases 8220.02 - Victim Impact 9400.07 - Research Requests 9500.14 - Disposition of Closed Folders 9500.15 - Public Access	SUBJECT: CONFIDENTIAL INFORMATION/SPECIAL HANDLING

PURPOSE:

To provide Parole staff with general guidelines for the handling of *confidential information*.

POLICY:

Parole staff will receive, process, and secure information in such a way as to ensure confidentiality. Parole staff will not access or disclose information without authorization from the Facility Parole Officer II/Area Supervisor/Bureau Chief, or designee.

DEFINITION:

Confidential information: Is such that if revealed, might result in harm to a person or hamper Division operations. All information received and processed by Parole staff that has the potential of causing harm to a person or hampering Division operations and is handled with discretion.

PROCEDURE:

Confidential Information

A. Facility Parole Staff

1. When confidential information is received which is deemed to be Victim Impact information/material, the Facility Parole Officer II, or designee, will send the information/material, including any original documents to the Victim Impact Unit, while making a notation as to the date sent and retaining copies of the sent information/material in the case folder.
2. When confidential information is received, processed, and/or produced, the Facility Parole Officer II, or designee, will mark each document for identification as Exhibit A,B,C, etc. and prepare a Confidential Summary Sheet Form 3047 (see Appendix A) designed to accomplish the following:
 - a. Clearly identify all confidential documents on record for any given case;
 - b. Assess or evaluate such confidential material to determine if additional action is warranted, such as preparation of a Threat Report or contact with the Victim Impact Unit;
 - c. Maintain a written record of staff, Board Members or other Officials who review such material.

NOTE: When a petition(s) is received regarding the parole/release of an inmate, the Facility Parole Officer II may take the face sheet of the petition(s) and attach a memorandum to the Parole Board stating the number of signatures on the petition(s), and whether they were for or against release. With the prior approval of the Area Supervisor, the remaining pages of the petition(s) may then be destroyed.

3. The Facility Parole Officer II will enter a memorandum (see Appendix B) in the folder stating that confidential information is available in a separate secure file and the memorandum will be placed on top of any material in Section I-B of the folder.
4. The Officer assigned the case will review all confidential information prior to the pre-parole interview.

5. At the time of the inmate's Parole Board hearing, the Facility Parole Officer II, or designee, will present the confidential information along with the Confidential Summary Sheet to each Board Member Panel. At the conclusion of the hearing, each Board Member must sign and date the Confidential Summary Sheet.

NOTE: Any document(s) returned at the request of the sender must be copied and included in the confidential file. Under no circumstances will the Confidential Summary Sheet be forwarded to the sender.

6. Upon notification of an inmate's release/transfer, staff will review the case folder to determine if a memorandum is present stating that confidential information exists. If so, staff will, at the time of release/transfer place the confidential information and Confidential Summary Sheet into a sealed envelope, attach it to the top of Section I-B of the folder and send the folder to the Area Supervisor/Bureau Chief/Facility Parole Officer II at the receiving Area Office/facility. Staff MUST make an entry on the NOTE line in FITS on the date that the folder is sent stating that confidential information is included.

B. Field Parole Staff

1. When confidential information is received which is deemed to be a Victim Impact Statement, the Area Supervisor/Bureau Chief, or designee, will send the information, including any original documents, to the Victim Impact Unit.
2. When confidential information is received processed and/or produced, the Area Supervisor/Bureau Chief, or designee, will follow the procedures in A, 2 above.
3. The Area Supervisor/Bureau Chief, or designee, MUST enter a memorandum (see Appendix B) in the folder stating that confidential information is available in a separate secure file and the memorandum will be placed on top of any material in section I-B of the folder.

NOTE: Any document(s) returned at the request of the sender must be copied and included in the confidential file. Under no circumstances will the Confidential Summary Sheet be forwarded to the sender.

4. When the releasee is transferred/returned to New York State custody, Parole staff will review the case folder to determine if a memorandum is present stating that confidential information exists. If so, staff will place the confidential information into the folder and send it to the Area Supervisor/Bureau Chief/Facility Parole Officer II at the receiving Area Office/facility.
5. Staff MUST make an entry on the NOTE line in FITS on the date that the folder is sent stating that confidential information is included.

C. Facility and Field Parole Staff

1. When the time arrives to destroy the Parole case folder, staff will take the confidential material and Confidential Summary Sheet out of the folder and mail it to Central Files, with a clear designation that the material is confidential. Staff MUST make an entry in FITS stating on the NOTE: "Confidential material sent to Central Files."

NEW YORK STATE EXECUTIVE DEPARTMENT - DIVISION OF PAROLE

CONFIDENTIAL SUMMARY SHEETINMATE NAMENYSID No.DIN No.BD.C. R.M. E. DATE1. LISTING AND EVALUATION OF CONFIDENTIAL DOCUMENT(S):ExhibitDate of DocumentSynopsisSignature of Officer/DateSIGNATURE/DATE OF ALL PERSONS REVIEWING INFORMATION:

1. _____

7. _____

2. _____

8. _____

3. _____

9. _____

4. _____

10. _____

5. _____

11. _____

6. _____

12. _____

STATE OF NEW YORK
EXECUTIVE DEPARTMENT
DIVISION OF PAROLE

CONFIDENTIAL INFORMATION

PLEASE BE ADVISED THAT THERE IS CONFIDENTIAL
MATERIAL FOR THIS INMATE/RELEASEE FILED UNDER
SEPARATE COVER WITH THE FPOII/AREA
SUPERVISOR/BUREAU CHIEF.

NAME: _____



DIN: _____

NYSID: _____

DATE: _____

KEEP ON TOP

(Section I-B)

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8140.05	DATE: JANUARY 2007
	SUPERSEDES: N/A	PAGE 1 OF 1 
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE:	SUBJECT: DESTRUCTION OF CLOSED CASE FOLDERS
	CROSS REFERENCES: 8140.00 Case Folders Confidential Information Special Handling	

PURPOSE:

To instruct staff in the proper disposition/destruction of case folders.

POLICY:

Staff responsible for the disposition and destruction of closed case folders will establish a system to destroy closed case folders three years from discharge date of supervision.

PROCEDURE:

1. FIELD FOLDERS

- A. Regional Directors or their designee will establish a schedule to destroy folders utilizing means consistent with local ordinances and ensuring confidentiality of the record is maintained.
- B. Staff preparing folders for destruction will enter the following into Folder Information Tracking System (FITS):
 - Date of entry
 - Reason for entry, i.e. Destruction three years from discharge.

2. CENTRAL FILE FOLDERS

Staff at Central Files will NOT destroy folders. Central Files staff will forward folders to the Record Center of the Office of General Services 18 months from discharge date of supervision.

OGS is responsible for destruction of folders. The destruction year is 70 years from date of birth.

4. *"Mixed" sentence cases:* In "mixed" sentence cases there are indeterminate and determinate sentences. A Parole eligibility date is established and the inmate will appear before the Parole Board, where a release decision will be made and conditions imposed.
5. *"Pure" Determinate Sentence cases:* In "pure" sentence cases there is only a determinate sentence. The case folder/record is reviewed by the Parole Board and release conditions are imposed. The inmate will not be scheduled to appear before the Board.

PROCEDURE:**I. Facility Process****A. Facility Parole Staff**

1. Staff will identify cases as *"mixed"* or *"pure"*.
2. Staff will schedule such cases for Parole Board action and Parole Officers will complete the Conditional Release Conditions (CRC) Release Report.
3. After Board action, staff will:
 - a. In a 1995 case, present the inmate with Form 3010 (see Appendix A), for signature no more than two working days prior to the release date.
 - b. In "mixed" 1998 cases with Post Release Supervision, present the inmate with Form 3010, for signature, no more than two working days prior to the release.
 - c. In a "pure" 1998 case with Post Release Supervision, present the inmate with Form 3010 PRS (see Appendix B), for signature, no more than two working days prior to the release date.

NOTE: Cases with Post Release Supervision will have two Maximum Expiration (ME) dates. The first is the incarcerative ME, the second is the ME of parole supervision (Post Release Supervision Maximum Expiration/PRSME) in the community.

4. If the inmate in a 1995 case refuses to sign Form 3010, the inmate can be held until the incarcerative Maximum Expiration (ME) date.
5. If the inmate in a "mixed" 1998 case refuses to sign Form 3010, the inmate can be held until the incarcerative ME date. If at ME the inmate refuses to sign Form 3010, Facility Parole staff will initiate the Violation of Parole process.
6. If the inmate in a "pure" 1998 case refuses to sign Form 3010 PRS, the inmate can be held to the incarcerative ME date. If at ME the

inmate refuses to sign Form 3010 PRS, Facility Parole staff will initiate the Violation of Parole process.

II. Violation of Parole Process

A. Facility Parole staff

1. In a case where an inmate refuses to sign the necessary documents, the Facility Parole Officer II (FPO II), after conference with the cluster Senior Parole Officer (SPO), will initiate the Violation of Parole process by preparing the Violation of Release Report Form 4003 (see Appendix C), Notice of Violation Form 9011 (see Appendix D), and the Notice of Arrest/Warrant Issuance Form 4030 (see Appendix E).
2. The cluster SPO will sign and issue the Warrant for Retaking and Detaining a Paroled or Conditionally Released Person or a Person Released to Post-Release Supervision Form 4054 (see Appendix F).
3. Facility Parole staff will contact the local Parole Violation Unit (PVU) to schedule hearing dates.
4. The FPO II, in conference with the cluster SPO, and in coordination with Department of Correctional Services (DOCS) staff, will plan custody and transportation of the Inmate/Parole Violator in the following manner:
 - a. plan for the arrest to take place at the point of release;
 - b. notify the local jail/detention facility of probable custody;
 - c. at the planned location, order the inmate to sign the release sheet and the Special Condition Form 3020A (see Appendix G);
 - d. upon refusal, arrest the violator, notify the local jail, transport and lodge the violator;
 - e. serve the inmate with the Violation of Parole Report and with form 9011;
 - f. based upon the violator's response, advise the local PVU of hearing scheduling;
 - g. if necessary, represent the Division of Parole at the Preliminary Hearing, and bring a blank Preliminary Violation Hearing Decision and Summary Form 9013 (see Appendix H) and make it available to the hearing officer;

- h. send the case folder/record to the PVU for transfer of case assignment to the Parole Revocation Specialist.

III. Re-Release of Parole Violators

A. Release from a Local Correctional Facility

1. Upon receipt of a Final Revocation Decision from an Administrative Law Judge or the Board of Parole, staff assigned to Riker's Island (downstate) or PRS staff (upstate) will notify the local correctional facility that the warrant will be lifted at the expiration of the violation time assessment.
2. Staff assigned to Riker's Island (downstate) or PRS staff (upstate) will lift the violation warrant upon completion of the Delinquent Time Assessment and, where appropriate, restore the violator to supervision.
3. Riker's Island staff (downstate) or PRS staff (upstate) will ensure that the Supplement to Conditions of Release Form 4160A (Appendix I) is completed.
4. Immediately upon release, Field Parole staff will impose case specific special conditions and record them on the Special Conditions of Release to Parole Supervision form 3020A, and will provide rationales for each condition on a memorandum to the case folder/record.

B. Release from a New York State Correctional Facility

1. Upon return to state custody, Facility parole staff at the owning facility will review the case record to determine the re-release date and/or the delinquent time assessment expiration date.
2. Approximately ninety (90) days prior to the completion of the Delinquent Time Assessment or as early as practical, the Facility Parole Officer II (FPO II) will ensure that the case folder is reviewed and that the inmate is interviewed by staff in preparation for re-release. Facility staff will also complete the IS-2 Field Investigation Assignment request and submit the community preparation package to the appropriate Field Bureau/Office. Staff will complete the Parole Violator Re-Release Worksheet following the completed interview.
3. Staff will calendar the case for review by the Board of Parole sixty (60) days prior to the expiration of the time assessment. The Board of Parole will review the case for imposition of case specific special conditions of release.
4. Following the review by the Board of Parole, staff will enter the applicable special conditions of release and the date of release in the Guidelines Entry System (GES). The inmate is to be released upon the


expiration of the delinquent time assessment. The release date is defined as a date certain, as there is no discretion afforded to the Board of Parole in "pure" determinate sentence cases. Form 9026 Parole Board Release Decision Notice will be distributed as in any Board calendar transaction.

5. Facility parole staff will prepare Form 3010 PRS Certificate of Release to Parole Supervision – Determinate Post-Release Supervision for signature by the inmate. The FPO I or FPO II must witness the signature of the inmate and the release agreement must include the reporting instructions.

NOTE: If the Delinquent Time Assessment expires on a Saturday, Sunday, or holiday, staff will take appropriate steps to ensure that the violator is released on the preceding business day.

NOTE: For cases where the Delinquent Time Assessment has expired or will expire within fourteen (14) days, staff will follow the Emergency Release Procedure (reference 8405.09 Community Preparation) to ensure immediate release or release at the expiration of the time assessment. If it is not possible for the Board of Parole to review the case for imposition of special conditions at the owning facility, it will be necessary for the FPO II to refer the case to Parole Board Operations as soon as practical. Staff is to take whatever steps are necessary to give the Board of Parole the opportunity to impose case specific special conditions.

If the Board of Parole imposes special conditions of release in response to a referral to Board Operations, staff must ensure that the special conditions of release are entered in the Guidelines Entry System (GES) and that the inmate is provided with the appropriate copy of Form 9026 Parole Board Release Decision Notice.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8210.00	DATE: JULY 2004
	SUPERSEDES: July 1991	PAGE 1 OF 2
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law 259-C (4)	SUBJECT: GUIDELINE RANGES
	CROSS REFERENCES: 8135.00 – Juvenile Offenders 8305.00 – Inmate Status Report	

PURPOSE:

To instruct Parole staff in the consistent and accurate application of the Parole Board release decision guidelines.

POLICY:

In order to assist the Board of Parole in facilitating fair and equitable decision making, Parole staff will incorporate the release decision guidelines in *applicable reports* to the Board.

DEFINITIONS:

1. *Applicable Reports*: Reports on all discretionary indeterminate cases except Parole Violator Reappearance and SHOCK cases.
2. *Guideline Application Manual*: There are two separate manuals. One for inmates sentenced as adults, which includes a section on Minimum Period of Incarceration (MPI) guidelines, and one for inmates/residents sentenced as Juvenile Offenders (JO). Where an inmate has been sentenced as both an adult and as a JO, adult guidelines are used.


PROCEDURE:

Application of Guidelines

A. Facility Parole staff

1. Staff will access the appropriate FPO Worksheet, as generated on the GES system.
2. The Facility Parole Officer will review and complete the entire worksheet using the appropriate *Guideline Application Manual* and will ensure that the guideline range is recorded on the Inmate Status Report.

NOTE: In certain historical cases the Minimum Period of Incarceration (MPI) Guidelines may have to be applied.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8220.00	DATE: JULY 2004
	SUPERSEDES: December 1990	PAGE
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law	SUBJECT: LETTERS OF RECOMMENDATION
	CROSS REFERENCES: <u>8105.00</u> – Case Folder Organization <u>8220.01</u> – DA, Judge Letters <u>8220.02</u> – Victim Impact <u>8305.00</u> – Inmate Status Report	

PURPOSE:

To instruct Parole staff in processing letters of recommendation (positive or negative) other than those from the sentencing judge, district attorney and defense attorney.

POLICY:

In order to enhance community protection, to provide relevant information to the Board of Parole, and to help meet Parole supervision needs, Parole staff will ensure that letters of recommendation are noted in the Inmate Status Report and/or entered into the case folder/record.

DEFINITIONS:

N/A

PROCEDURE:



LETTER REVIEW PROCESS

A. Facility Parole staff

1. When letters of recommendation are received, the Facility Parole Officer II (FPO II) will review them, initial them and either enter them in the case folder/record or designate them for special handling. As appropriate, the Officer will acknowledge and/or respond to letters received.

2. If letters are received before the inmate's Board appearance, the Officer will reference them in the Inmate's Plans section of the Inmate Status Report.
3. If letters are received after the completion of the Inmate Status Report, the Officer will reference them in an Addendum to the Report.

NOTE: When a large number of letters of recommendation/petition(s) is received regarding the parole/release of an inmate, the FPO II may take a sample letter or the face sheet of the petition(s) and attach a memorandum to the Parole Board stating the number of letters or signatures on the petition(s), and whether they were for or against release. With the prior approval of the Area Supervisor, the remaining letters or remaining pages of the petition(s) may then be destroyed.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8220.01	DATE: NOVEMBER 2002
	SUPERSEDES: JANUARY 1992 APRIL 1993	PAGE 1 OF 2
APPROVING AUTHORITY  MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Executive Law	SUBJECT: DISTRICT ATTORNEY, JUDGE AND DEFENSE ATTORNEY LETTERS
	CROSS REFERENCES: 8105.00 - Case Folder Organization 8380.01 - Duties/Responsibilities of Staff assigned to Shock Facilities 8612.03 - Medical Parole 9305.02 - Conditional Parole for Deportation Only	

PURPOSE:

To instruct Parole staff in obtaining *recommendations* as to release to parole supervision for cases appearing before the Parole Board.

POLICY:

Parole staff will solicit recommendations from the District Attorney, Sentencing Judge, and Defense Attorney in each case prior to the time of *First Release Appearance* before a panel of the Parole Board, and/or prior to the establishment of a Minimum Period of Imprisonment, to assist the Board members in rendering decisions which will enhance community safety and releasee reintegration.

DEFINITION:

1. *Recommendation*: An official statement in which the Sentencing Judge, the District Attorney, or the Defense Attorney in a particular case expresses an opinion as to an inmate's suitability for release to parole supervision.
2. *First Release Appearance*: An appearance by an inmate before the Parole Board for release consideration which includes Initial, Shock, Merit, Conditional Parole for Deportation Only (CPDO), Early Conditional Parole for Deportation Only (ECPDO), and Medical Parole.

PROCEDURE:**Facility Process****A. Facility Parole Staff**

1. Staff will send letters requesting recommendations as to release consideration when the inmate arrives at the first general confinement facility. Staff will send separate letters to the Sentencing Judge, the District Attorney and the Defense Attorney in each jurisdiction for each state confinement, with copies to be retained in the case folder/record.

NOTE: In Shock Incarceration Facilities, Parole staff will send letters within ten business days after the inmate's arrival. Should the inmate fail to complete the program or be denied release by the Board, Parole staff at the next general confinement facility will send letters requesting recommendations from the Judge, District Attorney, and Defense Attorney.

2. The Facility Parole Officer II will verify that the appropriate letters have been sent. If the letters have not been sent by the Parole office at a previous owning facility, Parole staff at the current facility will send them.
3. When staff receives a reply, they will include it in the case folder/record, and note the reply in the Inmate Status Report.
4. The Facility Parole Officer II will develop controls to ensure that letters are sent out in a timely manner and to monitor replies, in each type case to include:
 - a. Initial - upon arrival at first general confinement facility (see Appendix A)
 - b. Shock - within ten business days of inmate's arrival (see Appendix B)
 - c. Merit Time - upon determination of eligibility (see Appendix A)
 - d. CPDO - upon receipt of a Deportation Order or Order of Removal (see Appendix C)
 - e. ECPDO - upon determination of eligibility (see Appendix D)
 - f. Medical Parole upon determination of eligibility. (see Appendix E)

NOTE: If after reception the inmate receives subsequent felony conviction(s), Parole staff will send letters requesting recommendations to those jurisdictions.

Sample Letter for Initial/Merit

(Your address should be placed here, and use the Division letterhead)

Date: _____

District Attorney

Judge

Attorney

Name: _____

DIN: _____

NYSID: _____

Indictment#: _____

Date Sentenced: _____

Dear Madam or Sir:

The above named person was convicted of:

ConvictionSentenceCounty

This inmate is scheduled to appear before the Board of Parole during the month of _____ or earlier if granted Merit Time pursuant to Section 803 (1)(d) of the Correction Law.

At the time of that appearance, the Board will review this inmate's legal, personal, and social history. The inmate's adjustment, conduct, attitude, and performance in the facility as well as any medical and psychiatric reports and the recommendations of the sentencing judge, the District Attorney, and the comments from any victim of this crime will be considered prior to any Board decision regarding release.

The Board of Parole is requesting a statement and/or recommendation from you regarding this inmate. This request is being made as close as possible to this individual's reception in the State correctional system. This is to help insure that the facts of the case are fresh in the minds of the parties involved and that all pertinent records can be retrieved relatively quickly.

District Attorneys receiving this letter may wish to notify any victims in this case of the scheduled Board appearance. Victims wishing to express their concerns to the Board may write to the Victim Impact Statement Unit, NYS Division of Parole, 97 Central Avenue, Albany, NY 12206. District Attorneys are also requested to advise the Board if any Order of Protection was obtained against this inmate by any of the victims involved in this offense.

A reply to this letter is requested as soon as possible. If no reply is received, the Board may have to make a release decision without the benefit of your input. **Your response will be kept confidential if you so request.**

Sincerely,

Facility Parole Officer II

cc: Inmate Folder

Sample Letter for Shock Incarceration

(Your address should be placed here, and use the Division letterhead)

Date: _____

District Attorney

Judge

Attorney

_____RE: _____
DIN: _____
NYSID#: _____
Indictment#: _____

Dear Madam or Sir:

The above-mentioned inmate was convicted of:

OffenseDateSentenceCounty

This individual is participating in the Department of Corrections' Shock Incarceration Program. This program is highly structured and involves inmate participation in a strict daily routine of discipline, military regimentation, exercise, and work. Inmates in this program are also required to participate in substance abuse workshops, an educational program, pre-release counseling, and self-improvement classes. Successful completion of the program results in the inmate becoming eligible for Parole Release Consideration prior to the expiration of the minimum term.

Should this inmate successfully complete the Shock Program, he may be released to Parole Supervision.

Factors that will be considered by the Board before a release decision is rendered for this inmate include his legal, personal, and social histories as well as medical and psychiatric/psychological reports. The recommendation of the sentencing Judge, the District Attorney, and the victims of this crime will also be considered.

The Board is requesting a statement/recommendation from you regarding this individual. A response with your recommendations is requested within thirty days from the date of this letter. Without a response, the Board may have to make a decision without the benefit of your input.

The District Attorney receiving this letter may wish to advise any victims in this case that they can make their opinion known to the Board by writing to the Victim Impact Statement Unit, NYS Division of Parole, 97 Central Avenue, Albany, NY 12206. The District Attorney is also requested to advise the Board if there was any Order of Protection obtained against this inmate by any of the victims in this case.

Sincerely,

Facility Officer II

Sample Letter for Conditional Parole for Deportation Only

(Your address should be placed here, and use the Division letterhead)

Date: _____

District Attorney

Judge

Attorney

RE: _____
DIN: _____
NYSID#: _____
Indictment#: _____
Date Sentenced: _____

Dear Madam or Sir:

The above named person was convicted of:

Conviction

Sentence

County

It has been determined that this inmate is a criminal alien and may be considered for deportation on or after his minimum parole eligibility date in accordance with Executive Law 259-I (2)(d).

The Board of Parole is requesting a statement and/or recommendation from you regarding this inmate. A reply to this letter is requested within thirty days of the date of this letter. Kindly respond to me at the above address.

Sincerely,

Facility Parole Officer

cc: Inmate Folder

Sample Letter for Early Conditional Parole For Deportation Only

(Your address should be placed here, and use the Division letterhead)

Date: _____

District Attorney

_____Judge

_____Attorney

_____RE: _____
DIN#: _____
NYSID#: _____
Indictment#: _____
Date Sentenced: _____

Dear Madam or Sir:

The above named person was convicted of:

ConvictionSentenceCounty

It has been determined that this inmate is a criminal alien and is subject to deportation pursuant to Executive Law 259-I (2)(d). This inmate is appearing prior to his minimum parole eligibility date under the Sentencing Reform Act of 1995 for consideration for possible deportation only. The inmate may be considered for early deportation prior to the expiration of the court imposed minimum term. If granted, he will be released to Immigration and Naturalization Services for the purpose of deportation only. If Early Conditional Parole for Deportation is not granted, the inmate may be considered by the Board of Parole for deportation at a later date.

The Board of Parole is requesting a statement and/or recommendation from you regarding this inmate. A reply to this letter is requested within thirty days from the date of this letter. Kindly respond to me at the above address.

Sincerely,

Facility Parole Officer II

cc: Inmate folder

Sample Letter for Medical Parole

(Your address should be placed here, and use the Division letterhead)

Date: _____

District Attorney

Judge

Attorney

_____RE: _____
NYSID#: _____
DIN#: _____
Indictment#: _____
Date Convicted: _____

Dear Madam or Sir:

You may already have received correspondence from the Division of Parole requesting any recommendation you may have concerning the above-referenced individual's consideration by the Parole Board for release at the minimum of his sentence. We are writing to you now, as an application for early release on medical parole has been filed with the Division of Parole by the NYS Department of Correctional Services, with respect to this individual. Pursuant to Executive Law section 259-r(2), the above-referenced individual has been certified as suffering from a terminal illness and, in the opinion of the NYS Commissioner of Correctional Services or his designee, is so debilitated that he is unlikely to be physically capable of presenting a danger to society.

While statutory medical confidentiality rules prohibit us from sharing the medical diagnosis, we are able to describe areas of functional impairment, which have been identified by the examining physician. Attached for your review is an excerpt from the DOCS Comprehensive Medical Summary completed on this individual, which describes activities of daily living and physical impairments.

The Board of Parole would appreciate receiving any recommendation or statement you may care to present with respect to this case. The Board will not render a decision regarding this case until at least 15 days from the date of this letter. **Your request will be kept confidential if you so request.**

While we attempt to provide more than the statutorily required 15 day notice in medical parole cases, we also try to schedule these cases for Board interview as quickly as possible given the individual's terminal condition. We urge you, therefore, to respond within the fifteen day time frame if you wish to ensure your recommendation is considered by the Parole Board.

District Attorneys receiving this letter may wish to advise the victim or victims of the date of the parole hearing, providing them with information as to how they can make their concerns known to the Board. Any concerns by the victim(s) should be directed to the victim Impact Statement Unit, NYS Division of Parole, 97 Central Avenue, Albany, New York, 12206. In addition, you are requested to provide the Board with information regarding protective orders obtained against the inmate relative to the victim(s) of the crime which your office prosecuted.


Thank you.

Sincerely,

Facility Parole Officer II

Enc.

cc: Inmate folder

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8220.02 SUPERSEDES: June 1994 June 1992	DATE: MARCH 2004 PAGE 1 OF 3
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law 259-i, and 632-a CPL 440.50 Sec. 1 sub 1 9 NYCRR Sec 8002.4(d) CROSS REFERENCES: 8140.00 - Confidential Information	SUBJECT: VICTIM IMPACT

PURPOSE:

To instruct Parole staff in processing *information* provided by *crime victims*.

POLICY:

Parole staff will ensure that information provided by crime victims is made available to the Board of Parole for consideration when making a discretionary release decision. The Board will consider crime victim information, along with other factors, in reaching a decision to either grant or deny release.

DEFINITIONS:

1. *Information*: Crime victim statement(s) regarding the extent of injury or economic loss, ongoing effects of the crime on the victim's life, the victim's opinion toward the offender(s) potential release and any other information the victim may consider relevant. Such information may be received in written form, and/or as an audio or video taped statement, and, for all violent crimes, via an in-person interview with a Parole Board Member.
2. *Crime Victim*: Person who suffers physical, mental or emotional injury and/or material loss as the result of a crime. This may include the victim's family members and/or representative(s).

NOTE: Parole staff will protect the confidentiality of all victim impact information. Victim impact information is not to be disclosed to the inmate unless such disclosure is expressly authorized by the victim or directed by a court order. In such a case, staff will notify Counsel's Office and the Victim Impact Unit supervisor. Staff will ensure that a copy of the victim's consent or a copy of the court order is placed in the case folder/record and will inquire of Counsel's Office and the Victim Impact Unit supervisor as to how and under what circumstances the authorized disclosure is to be made to the inmate.

PROCEDURE:

I. Victim Impact Process

A. Victim Impact Unit staff

1. When Victim Impact Unit staff receive verifiable communication requesting victim impact services, staff will open a case under the name of the inmate and will process the information for Board review. Staff will provide the victim(s) with information to include, but not limited to, overview of the criminal justice system, discretionary release mechanisms and factors considered by the Board. Staff will also provide case-specific information such as the inmate's scheduled Board appearance and/or postponement, parole date, conditional release date, maximum expiration date and other significant case developments.
2. Upon request, staff will arrange for the victim(s) to provide an in-person victim impact statement during an interview with a member of the Board of Parole under rules promulgated by the Division of Parole.
3. Staff will forward a record of the victim impact interview to the panel of the Board that will interview the inmate for release consideration.
4. Staff will continue to monitor the inmate's case and maintain contact with the victim(s) until the inmate is paroled or conditionally released.

NOTE: The Board member who meets with the victim(s) may or may not be a member of the panel that interviews the inmate.

B. Facility Parole staff


1. When Facility Parole staff receive information from the victim(s), staff will retain copies of the information in a separate confidential file, and will forward the information to the Victim Impact Unit via registered/certified mail.
2. Facility Parole staff will notify the Victim Impact Unit as soon as possible when an inmate in a Victim Impact case becomes eligible for an earlier than anticipated release as in restoration of lost good time or re-computation of sentence.

3. Following the inmate's Board appearance, Facility Parole staff will notify the Victim Impact Unit of the Parole Board decision [REDACTED]

II. Shock Cases

A. Facility Parole staff

1. If an inmate's case record has Victim Impact information, and the inmate is being transferred to a Shock Facility, staff at the sending general confinement facility will notify the Victim Impact Unit of the inmate's entrance into the Shock Program. If the inmate fails to qualify for the Shock Program, the Shock Facility Parole staff will notify the Victim Impact Unit that the inmate is being transferred back to a general confinement facility. If an inmate who has Victim Impact information on file does not complete the Shock Program, the Shock Facility Parole staff will notify the Victim Impact Unit as to when the inmate will next appear before the Board.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8225.00	DATE: JUNE 2002
	SUPERCEDES: DECEMBER 1990 NOVEMBER 1987	PAGE 1 OF 2
APPROVING AUTHORITY	SOURCE:	SUBJECT: SOCIAL SECURITY CARDS
MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	Executive Law Immigration Reform Act CROSS REFERENCES: 8225.01 – Social Security Card Application	

PURPOSE:

To instruct Parole staff in obtaining Social Security cards for inmates prior to release to Parole supervision.

POLICY:

Facility Parole staff will assist inmates to obtain a Social Security card to facilitate return to the community.

DEFINITION:

Immigration Reform Control Act of 1986 – Pursuant to this law, an employer is precluded from hiring an individual who cannot produce proof of employability; a Social Security card is the primary document for this purpose. Applicants for entitlement and benefit programs, including Supplemental Security Income and Public Assistance, must provide a Social Security number in order to receive assistance. Inmates who wish to participate in work/vocational/academic release programs or who apply for college programs will need a Social Security card when filing their application. Knowing the Social Security number is not sufficient in many of these cases; an original Social Security card must be produced.

NOTE: Since it takes a long time to obtain a Social Security card and since the object is to ensure that inmates are released from confinement with this document, Parole Officers are responsible for determining whether an inmate has a Social Security card and assisting the inmate in obtaining a Social Security card, in the true name, as soon after reception in a general confinement facility as possible.

PROCEDURE:

A. Facility Parole Staff

1. The Facility Parole Officer II (FPOII) at each correctional facility will arrange with the Department of Correctional Services (DOCS) staff and the local Social Security Administration Office a procedure which allows inmates to make an application for a duplicate or new (if not previously issued) Social Security card.

2. Parole Staff will determine, and note in the chronological record, whether an inmate has a Social Security number and whether the card is available at the facility.
3. If the inmate has no card or the card is not available, the Facility Parole Officer I (FPOI) or the Agency Program Aide (APA) will assist the inmate to obtain the card or to complete an application form for a new card.
4. Where a Pre-Release/Transitional Services Center is in operation and as one of its functions assists inmates to obtain Social Security cards, Parole staff will refer the inmate to the Center for assistance in completing the Social Security application form to obtain a new card or a replacement card. In such cases, Parole staff will follow-up as necessary to ensure an application has been submitted.
5. Where Parole staff assist the inmate to obtain a Social Security card, the staff will provide a cover letter verifying the information contained in the application for a Social Security card using the attached format (see Appendix A) and will mail the application package to the local Social Security Administration Office.
6. The FPOII will request DOCS staff to have a copy of all Social Security cards forwarded to the Parole Office for inclusion in the Parole folder. This process may include both DOCS mailroom procedures and action by DOCS staff responsible for the inmate's personal property.
7. Once received, Parole staff will file the copy of the Social Security card in the Parole folder/record along with a chronological note of its receipt.
8. When recording the Social Security number in any document, Parole staff will include the inmate's Social Security number and the name in which the card is issued.

Appendix A

Date: _____

Name: _____

Inmate ID#: _____

Social Security #: _____

Social Security Office:

Attached please find a completed Form SS-5 (Application for Social Security Number) requesting a replacement Social Security card for the above-named individual.

I, the undersigned, certify that I have reviewed the above inmate's official prison record and that the identifying information shown below is accurate according to that record.

Name: _____

Date of Birth: _____

Place of Birth: _____

Mother's Name: _____


Father's Name: _____

Other Names Used By Inmate:

Other Social Security Numbers Used:

If you have any further questions, please contact me between the hours of _____ to _____. My telephone number is _____.

Parole Officer

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8225.01	DATE: JULY 2004
	SUPERSEDES: January 1991	PAGE 1 OF 2
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law	SUBJECT: SOCIAL SECURITY APPLICATIONS- DISABILITY AND SSI
	CROSS REFERENCES: 8225.00 - Social Security Card	

PURPOSE:

To instruct Parole staff in assisting inmates, as needed, in applying for Social Security Disability benefits/Supplemental Security Income.

POLICY:

In order to facilitate the return of *disabled* inmates to the community, Parole staff will, as needed, assist them in applying for Social Security Benefits/Supplemental Security Income (SSI) and/or refer the inmate to the appropriate agency to obtain the necessary assistance.

DEFINITION:

Disabled/disability: As determined by the Social Security Administration.



PROCEDURE

SCREENING and APPLICATION

A. Facility Parole staff

1. Upon request, or as needed, the Facility Parole Officer II, or designee, will assist in initiating and facilitating prerelease applications for Social Security benefits for inmates approaching release who suffer from disability or impairment lasting 12 months or more that prevents them from seeking gainful employment. In order to make this preliminary determination, the Officer will utilize medical summaries and mental health evaluations.

NOTE: Proper use of the prerelease agreement between the Division and the Social Security Administration will facilitate release plan development and will ensure continuity of medical care upon release to the community. Inmates who appear to be SSI eligible will have an SSI application filed in accordance with the interagency agreement between the Division and the Social Security Administration. In no case will a potential SSI applicant be considered for the program more than 90 days prior to the scheduled release date. This will allow the Social Security Administration sufficient time to make a medical determination prior to release.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8230.00 SUPEREDES: NOVEMBER 1985 DECEMBER 1990	DATE: NOVEMBER 2002 PAGE 1 OF 3
APPROVING AUTHORITY  MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Executive Law - Article 12-B CROSS REFERENCES: 8305.00 - Inmate Status Report 8364.00 - Pre-Board Report 9102.00 - Parole Board Decision 9300.00 - Interstate Bureau	SUBJECT: WARRANTS AND DETAINERS

PURPOSE:

To instruct Parole staff in the identification of warrant cases, resolution of outstanding charges and notification to area offices of those released to warrant.

POLICY:

To enhance community protection and provide for successful return to the community, persons released to warrants remain under the jurisdiction of the Division of Parole until maximum expiration of Parole supervision or discharge by the Board of Parole. Those released to warrants will be monitored while in confinement and supervised when released to the community. If subsequently released by the *warrant authority* prior to completion of the New York State sentence, releasees must come under the direct supervision of New York State Parole or be accepted for supervision by another state.

DEFINITION:

Warrant Authority: The agency that lodged or holds the warrant or detainer for an inmate/releasee or which currently has custody of the inmate/releasee.

PROCEDURE:

I. Warrant Identification and Clarification

A. Facility Parole Staff

1. Parole staff will clarify details of pending charges or warrants listed in the pre-sentence Report, NYSID Report, or any other section of the case folder/record, and will send necessary inquiries prior to the inmate's appearance before the Board of Parole.

2. Where a warrant is on file, the case folder/record and the Inmate Status Report (ISR) will be so annotated.
3. Staff will obtain copies of all warrant/detainer documents from the facility Inmate Record Coordinator (IRC) and enter them in the case folder/record.

II. Parole Board Decisions

A. Warrant Only

NOTE: A Warrant Only decision is appropriate only when the Division of Parole has an assurance that the inmate will remain in custody on that warrant beyond the maximum expiration of the New York State sentence.

1. Where the Parole Board renders this decision, Parole staff will set an alternate Board appearance date, no later than six months in the future. If:
 - a. the warrant authority does not take custody within six months, staff will bring the case back before the Board, or,
 - b. if the warrant authority states they will not execute the warrant or have no further interest in the case, staff will present the case to the next available Board as a Special Consideration case, and will so note in the Pre-Board Report.

B. Warrant and Program

NOTE: The program must have been approved prior to release to a warrant.

1. Upon receiving the approved Community Preparation Report, the Facility Parole Officer II will coordinate with the facility IRC in the selection of the actual release date and final notification to the warrant authority.
2. If the warrant authority withdraws the warrant, facility Parole staff will process the inmate for release as soon as a Community Preparation Program is investigated and approved by the appropriate Area Supervisor/Bureau Chief in accordance with the prospective release date. No further Board appearance is necessary.

NOTE: The primary consideration is that release on Parole not be delayed due to a warrant authority failing to act.

III. Post-Board Procedure

A. Facility Parole Staff

1. After the Parole Board concludes, staff will notify the IRC of those cases granted release to a warrant and will request that the IRC notify the warrant authority.

B. Release Processing and Notification to Area Offices



1. When it is determined that release to a warrant will take place, staff will enter the following on the appropriate Certificate of Release:

"I will proceed to (specify nature of warrant and SPECIFIC JURISDICTION) warrant and, if released prior to the Maximum Expiration (ME) date of the New York State sentence, I will, within twenty-four hours of my release, make my arrival report to (area office/bureau).

2. In Immigration and Naturalization Service (INS) cases, staff will enter the following on the appropriate Certificate of Release:

"I will proceed directly to INS warrant and if released prior to the ME date of the New York State sentence, I will, within twenty-four hours, make my arrival report to (area office/bureau). If deported, I will not return to the United States without permission of both the New York State Board of Parole and the Immigration and Naturalization Service."

NOTE: In all cases of inmates released to warrants/detainers, including discretionary release to Warrant and Program, conditional release, release at incarcerative maximum with Post-Release Supervision to be completed and release to INS custody, facility Parole staff will so notify, via e-mail, the Area Supervisor/Bureau Chief at the owning field Parole office on the date of release. Staff will send a copy of the e-mail notification to the Quality Control Unit.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8255.00	DATE: MARCH 2003
	SUPERSEDES: NOVEMBER 1985 9431.00 Absconder Temp. Release	PAGE 1 OF 3
APPROVING AUTHORITY MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Correction Law	SUBJECT: TEMPORARY RELEASE 
	CROSS REFERENCES: 8505.00 - Rescission	

PURPOSE:

To provide general guidelines to Parole officers assigned to Temporary Release Committee and/or who supervise inmates in Temporary Release Programs.

POLICY:

Parole officers are required to serve on the Temporary Release Committee at each facility in order to assist in determining suitability of inmates for temporary release. Parole officers will supervise inmates on temporary release to provide for community protection, rehabilitation and reintegration.

DEFINITIONS:

1. *Temporary Release Programs (TRP)*: Programs under which eligible and approved inmates are granted the privilege of leaving correctional facilities to participate in, work release, educational release, alcohol and substance abuse treatment, furlough, day reporting, industrial training, residential treatment and/or community service.
2. *Temporary Releasee*: An inmate participating in one or more temporary release programs.
3. *Temporary Release Committee (TRC)*: A panel comprised of Parole and Department of Correctional Services (DOCS) staff meeting in a correctional facility to evaluate inmates for TRP participation.

PROCEDURE:

I. *Temporary Release Committee*

A. *Facility Parole Officer Responsibilities*

The Facility Parole Officer II, Senior Parole Officer or designated Parole officer, will participate in the regularly scheduled meetings of each facility's Temporary Release Committee.

II. Temporary Release Supervision

A. Field Parole Officer Responsibilities

1. If a proposed residence is submitted, the Parole officer will conduct an investigation to determine suitability. The Officer will complete the investigation within two weeks of assignment and will submit a report to Department of Correctional Services (DOCS) staff approving or disapproving the residence.
2. If the residence is approved, the Officer will conduct one home visit per month.
3. If the *temporary releasee* obtains employment, the Officer will conduct an investigation to determine suitability. If suitable, the Officer will continue to verify with one employment visit per month and/or review of payroll records and will meet with the releasee every two weeks. If unsuitable, the Officer will notify DOCS staff.
4. If the temporary releasee is unemployed, the Officer will meet with the temporary releasee in the office once per week.

NOTE: The Officer will confirm that the employer is aware of the temporary releasee's inmate status.

NOTE: Standards of Supervision for Temporary releasees require a minimum of four contacts per month.

III. Temporary Release Violation

A. Facility and Field Parole Officer Responsibilities

1. The Field Parole Officer will enforce rules governing temporary release and will investigate any alleged violation. If appropriate, the Officer will prepare and/or submit a Misbehavior Report (DOCS Form 2117A) / TRC Review (DOCS Form 4187) to the DOCS Disciplinary Officer at the owning facility within two weeks of the violation. If the release date is suspended, a Parole Rescission Report will be completed within ten days of the suspension.

B. Absconders

1. Outside of New York City


2. In New York City the [REDACTED]

C. Misbehavior Report/New Arrests

1. If the temporary releasee is issued a misbehavior report or has a new arrest, the Officer will investigate and report the facts of the misbehavior and or the criminal charge.
2. The Officer will case conference with the supervisor, and if the temporary releasee had a misbehavior report/new arrest, and has:
 - a. an Open/Parole Date - will immediately notify the assigned Area Office/Bureau. The date may be temporarily suspended and a rescission report may be submitted as appropriate;
 - b. a conditional/merit time release date, a rescission report will NOT be submitted. Parole staff will notify Quality Control, Information Systems, the Board of Parole and the Area Office/Bureau.

NOTE: A Parole supervisor may temporarily suspend a Merit Open Date/Parole Date pending a DOCS Merit Certificate Revocation Proceeding.

NOTE: In New York City, Work Release Facility Parole staff conducts the rescission process.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8265.00	DATE: AUGUST 2004
	SUPERSEDES: December 1996 April 1992 & November 1985	PAGE 1 OF 4
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law 259-i (7) Americans With Disabilities Act Title 2 sub A USDC Clarkson Case 1996	SUBJECT: REASONABLE ACCOMMODATIONS FOR DEAF/HARD OF HEARING INMATES/RELEASEES
	CROSS REFERENCES: 9212.00-Revocation Process	

PURPOSE:

To instruct Parole staff in the requirement to provide *reasonable accommodation* for inmates/releasees who are deaf or hard of hearing.

POLICY:

Parole staff will provide sign language interpreters and/or devices to assist deaf and hard of hearing inmates/releasees so that they can fully communicate during the parole process.

DEFINITION:

Reasonable Accommodation: A specialized service which may include, but is not limited to, when necessary, qualified and/or certified sign language interpreters for persons who use sign language to communicate and other auxiliary aids, services and devices such as a Telecommunications Device for the Deaf (TDD)/ Teletypewriter(TTY) for telephone use, amplified telephone handsets, closed caption decoders, visual alarm systems, sound amplification and listening systems, video text displays, hearing aids and batteries.

PROCEDURE

I. Requirement to Provide Reasonable Accommodation

A. Parole staff

1. Staff will provide a sign language interpreter CERTIFIED by a recognized national or New York State credentialing authority when appropriate to deaf persons participating in:
 - a. Interviews
 - b. Parole Release/Rescission Hearings
 - c. Preliminary Hearings
 - d. Revocation Hearings

NOTE: Reasonable fees for such services are paid for by the Division through state voucher. In order to comply with the law, interpreters must be certified by an organization such as the National Registry of Interpreters for the Deaf. In-house certifications, i.e., certification by the employing agency, will NOT meet statutory requirements.

2. Parole staff may employ QUALIFIED interpreters in other communications with deaf or hard of hearing inmates/releasees where signing is the most effective form of communication. Staff must consider how complex the interaction is and whether the use of a certified interpreter is required by Executive Law. Staff may use qualified interpreters for routine parole related contacts with individuals.

NOTE: A qualified interpreter must be a person who is able to interpret effectively, accurately and impartially, both receptively and expressively, using any specialized vocabulary necessary for communication. While qualified interpreters may include any number of persons, only NON-INMATE qualified interpreters may be used by the Division in situations where confidentiality in medical or mental health treatment must be maintained or where other confidential communications occur.

NOTE: During incarceration, the New York State Department of Correctional Services (DOCS) will supply inmates identified as deaf or hard of hearing with personal devices such as hearing aids. DOCS will provide Division staff with access to such equipment or devices to the extent that it is available. If specialized equipment is not available, the Division is responsible to provide necessary equipment for effective communication. DOCS will identify deaf and hard of hearing inmates, will complete a Needs Assessment Form, and will provide it to the Division.

3. Parole Staff will enter the form in the case folder/record to ensure continuity of appropriate services, aids and devices for inmate/releasees so identified. Staff will review the form upon case transfer or when a revised form is received from DOCS.

II. Reasonable Accommodation Process

A. Parole staff

1. In determining reasonable accommodation, Parole staff must consider the preference of the inmate/releasee, the importance and complexity of the communication, and the context in which the communication is taking place.
2. Parole staff will provide the inmate/releasee with the Notice of Right to Reasonable Accommodation and Notice of Scheduled Interview Date form 8001 and Request for Reasonable Accommodation form 8000.
3. Facility Parole staff will provide the Notice and Request both orally and in writing, at least seven business days prior to any pre-Board interview with a Parole Officer and prior to the interview/hearing between an inmate and the Parole Board.
4. Field Parole staff will follow the same procedures and timeline for releasees.

NOTE: The inmate/releasee may waive reasonable accommodation at any time and the interview/hearing may proceed at the discretion of the Parole Officer/Parole Board.

III. Requests for Accommodation

A. Parole Staff

1. Parole staff will accept inmate/releasee requests for accommodations made orally or in writing to any Division of Parole staff at least five business days in advance of the scheduled interview/hearing. If a request for accommodation is made by or on behalf of an inmate/releasee less than five business days prior to the scheduled interview/hearing, staff will act upon it within one business day of the request. This will not be interpreted to mean that the service must be in place within one business day. If an interpreter or auxiliary aid or device is warranted, staff will advise the inmate/releasee that there may be a delay in the interview/hearing to enable arrangement of necessary accommodations.

NOTE: Any request for assistance or expression of difficulty in communication, or understanding by an inmate must be considered a request for accommodation by Parole staff.



IV. Grants, Denials, Modifications of Requests

A. Parole Staff

1. Staff may grant, deny, or modify a request for reasonable accommodations as follows:

- a. where an interpreter was provided by the Division, this information must be reported to Central Office within five business days of the provision on an interpreter service.
- b. where a request for reasonable accommodation was denied or modified by staff, a written report must be prepared, including a description of the request and the response, and forwarded to Central Office within two business days of the denial or modification.
- c. where an inmate/releasee waives or refuses the right to reasonable accommodation, staff must counsel the inmate/releasee regarding the possible effects if the waiver/refusal. In instances where this remains the inmate/releasee's choice, staff will obtain a waiver/refusal statement as noted on form 8000. This information will be documented in the case folder/record and reported to Central Office within two business days of the waiver/refusal.

NOTE: E-form notification is made to Central Office via EF REASON-ACC PFORMS. Central Office staff will review the case and determine whether the requested accommodation is necessary. Any Board interview/hearing must be postponed pending the outcome of Central Office review. Review will be expedited so as to avoid case postponement to the next Board. Central Office will advise staff in writing whether an interpreter or other accommodation is to be provided.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8305.00 SUPERSEDES: AUGUST 1993 JANUARY 1995 8305.02 - Notice of Board Appearance 8245.00 - Military Information (on Inmates)	DATE: MARCH 2003 PAGE 1 OF 12
APPROVING AUTHORITY  MARTIN CIRINCIONE, EXECUTIVE DIRECTOR	SOURCE: Executive Law CROSS REFERENCES: 8135.00 - Juvenile Offender 8140.00 - Confidential Material, Special Handling 8141.01 - Noteworthy and Unusual Cases 8230.00 - Warrants and Detainers 8305.05 - Distribution of Parole Summaries 8340.00 - Special Psychiatric Process 8380.00 - Preparation of ISR for Shock 8405.09 - Community Preparation 8612.03 - Medical Parole 9103.01 - Certificate of Relief 9305.02 - ECPDO	SUBJECT: INMATE STATUS REPORTS

PURPOSE:

To provide instructions for Parole staff to complete Inmate Status Reports.

POLICY:

Inmate Status Reports provide information to Parole Commissioners to consider in making release decisions, and/or in establishing release conditions. The reports also provide Parole staff and others with information to assist in the supervision and treatment of releasees to enhance public safety.

DEFINITIONS:

1. *Initial Appearance* – A Parole Board hearing, for release consideration, conducted when an inmate, serving an indeterminate sentence, is about to complete the minimum of that sentence.
2. *Reappearance* – A Parole Board hearing, for release consideration after denial of release at an initial appearance or subsequent reappearance.
3. *Merit Time Appearance* - A Parole Board hearing, for release consideration, for an inmate serving an indeterminate sentence who has not yet reached minimum, but who has been issued a positive Merit Time Determination Notice by the Department of Correctional Services (DOCS).

4. *Early Conditional Parole for Deportation Only (ECPDO)* - A Parole Board hearing, for release consideration, for an inmate serving an indeterminate sentence, for other than a violent felony, who has a final order of deportation.
5. *Special Consideration* - A Parole Board hearing, to include, but not limited to, medical parole, alternate date cases, new hearing appeal, and new information for the Board.
6. *Parole Immediately Eligible (P.I.E.)* - A Parole hearing, for release consideration, for an inmate who's Parole Eligibility Date has passed without a Board hearing.
7. *Minimum Period of Incarceration (MPI)* - A Parole Board hearing wherein the Board sets the minimum sentence for an inmate, serving an indeterminate term, for which the court has not set the minimum.
8. *Parole Violator Reappearance (PV Reapp)* - A Parole Board hearing/review, for release consideration, for an inmate who has been returned on a parole violation only (Not a Parole Violator with a New Term).
9. *Conditional Release Conditions (CRC)* - A Parole Board review to impose special conditions on an inmate serving a determinate sentence.
10. *Conditional Release Conditions Parole Violator (CRC)* - A Parole Board review to impose special conditions on an inmate, serving a determinate sentence, returned on a parole violation only.

PROCEDURE:**I. Instructions for Inmate Status Report (Form #9032 see Appendix A)****A. Face Sheet**

NOTE: Parole Violator Reappearances are entered on the Parole Violator Reappearance Form(s) (see Appendices B and C).

1. Facility Parole staff will enter identifying information as follows:

- a. Date of hearing (Month/Year), type of hearing; *Initial, Reappearance, Merit Time, ECPDO, Special Consideration, P.I.E., MPI, CRC.*
- b. Name: Inmate's name at commitment, typed last name (all in capitals), first name and middle initial or name. If commitment name is an alias, enter True Name (TN) under Comments.
- c. New York State Identification Number (NYSID).
- d. New York State Department of Correctional Services Identification Number (DIN) and/or Office of Children and Family Services (OCFS) Number.

- e. Parole Eligibility Date (PE): (month/year).
- f. Conditional Release Date (CR): (month/year or none).
- g. Maximum Expiration Date (ME): (month/year or life).
- h. Post-Release Supervision (PRS): Enter "yes" in the space to denote that the inmate has a period of Post-Release Supervision and enter amount of time. Enter "no" if none.
- i. Date of Birth (DOB): (month/day/year)
- j. Interpreter Required: Enter "yes" in the space to denote that the inmate requires an interpreter, and enter the language/dialect. Enter "no" if not required.

2. Facility Parole staff will enter time information as follows:

- a. Received Date: Date received into DOCS custody (month/day/year).
- b. Parole Violator New Term (PVNT): Enter "yes" in the space to denote that the inmate was under Parole Supervision at the time of the instant offense and has a Delinquency Date resulting from a Parole Revocation, otherwise enter "no". However, if the inmate was on Parole Supervision, but there is no delinquency date, also enter "no" but explain under "Comments".
- c. Time on Parole: Total number of months from date of last release, or last Revoke and Restore, to the date of the Instant Offense; the first offense if multiple offenses.

3. Facility Parole staff will enter crime information as follows:

- a. In the same order as given on the DOCS "Crime and Sentence Data" screen; Crime, felony class, sentence and date of sentence, plea (p) or verdict (v), with names of crimes abbreviated if necessary.
- b. Unless designated with a "cs" directly after the sentence, all sentences will be understood to run concurrently. Sentences ordered to run consecutively with delinquent time owed will be recorded as "cs with DTO of ...months for" and here identify the prior offense (s). If multiple crimes, list the most serious offense.

NOTE: The Officer will include all convictions in the Inmate Status Report, particularly where information exists of any conviction, other than the instant offense, which impacts the inmate's Board Appearance/Review or Maximum Expiration Date. If the inmate is appearing on a sentence imposed while the inmate was already serving another term, the Officer will include those convictions/adjudications. If there has been a break in custody, the inmate will have a new DIN. The DOCS Crime and Sentence Information will not include information on a previous DIN, and Parole staff will have to enter the crime and details manually in the Inmate Status Report and the Facility Parole Officer Worksheet. The Officer will include misdemeanors only if they are part of the Instant Offense.

4. The Facility Parole Officer will record the guideline score using the Guidelines Application Manual and the Guideline Range process. CRC cases do not require guidelines. The Officer will calculate and enter total time served, in months, to the date of either Parole Eligibility for Initials or Reappearance date. Facility Parole staff will enter Merit Eligibility Date and ECPDO date as appropriate.

NOTE: The Officer will use Juvenile Offender (JO) guidelines, as prescribed in the Juvenile Offender Guideline Manual for inmates serving such sentences. The Officer must be alert to the fact that some inmates in DOCS facilities are JO's who have been transferred from OCFS, formerly Division for Youth (DFY) facilities. They remain eligible for JO guidelines for their JO convictions. If the inmate is serving JO and Adult crimes, use Adult Guidelines.

5. Facility Parole staff will denote whether an Earned Eligibility Certificate (EEC) has been granted or denied, or if the inmate is non-certified, by entering an "X" in the space. If non-certified, staff will note whether or not the reasons are on file.
6. Facility Parole staff will enter information regarding inmate participation in any one of the DOCS special programs such as Day Reporting, Comprehensive Alcohol and Substance Abuse Treatment (CASAT), or any one of the Temporary Release programs which include work release, furloughs, community services, leave of absence, educational leave, and industrial training leave. Staff will enter facility, program, and the dates of participation.

NOTE: Day reporting is included separately in this section since an inmate can participate in work release or other special programs and later also participate in day reporting. All Program Violations will be noted including the date and type of infraction.

7. Facility Parole staff will enter an "X" in the space to denote whether a Special Psychiatric Procedure is mandatory, and enter the reason in the "Comments" section; as in Murder conviction, placement in Central New York Psychiatric Center, or other reasons.
8. Facility Parole staff will enter an "X" in the space to denote whether or not the inmate is a U.S citizen.

9. Facility Parole staff will enter an "X" in the space to denote whether there is an active:

- a. Immigration and Naturalization Service (INS) warrant or;
- b. other warrants.

NOTE: All warrants, detainers, special court orders and Notices of Action are to be further described in the "Comments" section.

10. The Facility Parole Officer (FPO) will use the "Comments" section to expand upon information on the face sheet by entering:

- a. True name.
- b. List of multiple alias names (AKA's) as appropriate.
- c. Reason for Special Psychiatric Procedure.
- d. Dates and types of warrants, status of appeals.
- e. Place of birth.
- f. Native Country.
- g. Alien Registration Number.
- h. Maximum Expiration for Parole Supervision Cases.
- i. Other necessary data.

11. Facility Parole staff will enter an "X" in the spaces provided to denote whether or not a reply was received from the:

- a. Judge.
- b. District Attorney.
- c. Defense Attorney.

12. Facility Parole staff will state Certificate of Relief status entering either:

- a. Eligible,
- b. Ineligible, or
- c. N/A – Youthful Offender.

13. Facility Parole staff will list all co-defendants with:

- a. NYSID number.
- b. DIN number.
- c. Current or last known status.

14. Staff will make inquiries, using, but not limited to, FPMS/Parole Management Information System(PARMIS), to update status as

needed. If no record is found, staff will so state. Staff will include, if applicable:

- a. Current Area Office/Bureau.
- b. Assigned Parole Officer.
- c. Most recent decision/release date.

15. Present Offense: The Facility Parole Officer will describe the present offense(s) in a narrative which will be a succinct statement of all the facts relating directly to the commission of the crime(s) including who, what, where, when and how. This will not be a copy of the crime description in the Pre-Sentence Report and will not include additional material unless it would significantly color the details of the crime. The Officer will not include the inmate's statement in the description of the present offense. The Officer will indicate:

- a. Weapon use.
- b. Injuries.
- c. Attempt to flee.
- d. Whether the inmate was on probation or Parole Supervision.
- e. How the inmate came into custody.
- f. Any aggravating or mitigating factors.

In Reappearance cases, the Officer will enter a brief synopsis of the crime and will not refer the reader to the Initial report.

B. Criminal Record

1. Facility staff will enter the inmate's entire criminal record, including out-of-state and federal arrests, listed in the same order as the New York State Criminal History Record (NYSID Report/Rap Sheet), with indictment numbers, under the headings provided. The Present Offense must also be listed and so identified. Staff will include all prior history in sequence with other arrests. Parole or CR date and Inactive Status will be listed under "Disposition" of appropriate felony conviction and if no violation, ME date achieved or discharged date will be recorded directly under Parole Date. Parole Violations will include:

- a. Delinquency date.
- b. Return date.
- c. Time Assessment in months.
- d. Re-parole date, or Revoke and Restore date or CD date.
- e. Discharge or ME date.

In Reappearance cases, the Officer will not restate the Criminal History unless there have been changes and then will enter only the changes.

C. Parole Interview

1. Inmate Statement: The Facility Parole Officer will describe the inmate's attitude toward present and prior offenses, including statement(s) concerning these acts as well as statements concerning any other criminal acts covered by the instant plea. In Reappearance cases, the Inmate's Statement will not be re-entered unless there have been changes. In all cases, date and place of interview will be noted. The Officer will include:
 - a. Motivation or reason for the crime
 - b. Mitigating and/or aggravating factors.
 - c. Drug/alcohol use at the time of crime.
 - d. Duration and extent of substance abuse.
 - e. Whether inmate participated in substance abuse treatment in the community
 - f. Does inmate still agree with statement in PSI?
 - g. Was an interpreter used in the interview?
 - h. Is the inmate appealing this conviction or INS deportation order?
2. Institutional Adjustment: The Officer will provide an overview of the inmate's institutional adjustment, including:
 - a. Program and treatment accomplishments/ assignments, stating length of participation in months.
 - b. Entry on waiting lists.
 - c. Non-participation in recommended programming/treatment, and inmate's explanation for not participating.

NOTE: In Reappearance reports, update program information only from the time of the previous Board appearance.

3. Disciplinary: The Officer will describe the inmate's disciplinary/custodial adjustment. The Officer will state the number of Tier II and Tier III incidents with the total disciplinary confinement time assessed, distinguishing between times actually served and suspended time. The Officer will distinguish between recommended loss of good time and actual loss of good time. The Officer will note serious infractions, such as assaulting a Correction Officer, and include a hardcopy of the Tier III ticket and proceeding. If there are no disciplinary reports, that fact will be stated.

NOTE: In Reappearance reports, note only those disciplinary infractions which were committed since the previous Board appearance.

4. Residence: The Officer will describe the "Residence" identifying with whom (specify relationship) and where the inmate proposes to reside. The Officer will include in this section all descriptive information such as address, telephone number, and apartment number.

NOTE: Directions, precautions, and other information, as needed, will be entered directly on the IS-2 Form and in Part II of the report under "Supervision & Investigations Concerns".

5. Employment: The Officer will describe when and where the inmate proposes to work. Including name, address of employer, and telephone number of employer.

6. Inmate's Plans: The Officer will describe the inmate's short and long-term plans upon release as they relate to:

- a. Family relationships.
- b. Support networks.
- c. Treatment programs.
- d. Employment.

7. Supervision Needs: The Officer will describe specific, non-confidential needs that relate to and justify Special Conditions Recommended. They may include, but are not limited to, the following:

- a. Violent/aggressive behavior.
- b. Substance abuse.
- c. Alcoholism.
- d. Disabilities.
- e. Medical/mental
- f. Domestic violence
- g. Sex Offender.

8. Special Conditions Recommended: The Officer will use standard terminology in listing the Special Conditions as indicated on Form 9028 (see Appendix D).

II. Confidential Information

NOTE: This section is NOT to be given to the inmate or other non-Parole personnel. Only the first section (Part I) is non-confidential information that can be given to the inmate and shared with non-Parole personnel.

A. Confidential Reports

1. Psychiatric/Psychological Reports: The Officer will identify Psychiatric/Psychological reports available in the folder, or requested but not yet received, and the reason for the request. The Officer may comment on the reports received or on any other mental health information.

2. Medical Reports: The Officer will identify medical reports available in the folder, or requested but not yet received, and the reason for the request. The Officer may comment on the reports received or on any other medical information.
3. Confidential Written Reports: The Officer will state whether or not there are any written reports that contain information provided in confidence. The Officer will NOT state specifically the source and content of the information.
4. Evaluation: The Officer will evaluate the inmate's:
 - a. pattern of criminal behavior;
 - b. emotional stability;
 - c. institutional adjustment, including performance in Temporary Release programs;
 - d. disciplinary/custodial adjustment and how this behavior relates to the inmate's pattern of criminal behavior;
 - e. employability;
 - f. family/community/agency support;
 - g. amenability to treatment for chemical dependency and/or mental disorder;
 - h. ability to relate appropriately during the interview;
 - i. demeanor;
 - j. self-perceptions of strengths and weaknesses;
 - k. amenability to supervision;
 - l. inmate's assets and liabilities.

NOTE: The Officer will not summarize or repeat previously stated facts and will not make or imply a recommendation, but will allow the facts to speak for themselves.

III. Confidential Report to Field

A. Physical Description

1. The Officer will complete this section through visual observation on the stated date. Ethnicity will mean race or origin identified as follows:
 - a. WHT. – not of Hispanic origin; persons having origins in any of the original people of Europe, North Africa or the Middle East.
 - b. BLK. – not of Hispanic origin; persons having origins in any of the Black racial groups of Africa.
 - c. HISP. – persons of Puerto Rican, Mexican, Cuban, Central America or other Spanish culture or origin.

- d. ASIAN - persons having origins in any of the original people of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes for example China, Japan, the Philippine Islands, and Samoa.
- e. AM. IND OR ALASK. - persons having origins in any of the original inhabitants of North America who maintain tribal affiliation or community recognition.

The Officer will then enter;

- a. Height.
- b. Weight.
- c. Build; large, average, small.
- d. Complexion; skin tone.
- e. Eye color.
- f. Hair color.
- g. Hairstyles; balding, short, long.
- h. Facial hair; mustache and/or beard.
- i. Corrected vision.
- j. Handedness; left, right, ambidextrous.
- k. Scars; described in exact detail.
- l. Tattoos and other physical traits; described in exact detail.

B. Finances

- 1. The Officer will enter the amount of money currently in the inmate's account and the amount and location of other funds available outside the facility.

C. Supervision/Investigation Concerns

- 1. Supervision/Investigation Concerns: The Officer will describe supervision/investigation concerns with precautions, such as, but not limited to the following:
 - a. assaultive weapon possession/usage and/or history of resisting arrest/absconding;
 - b. affiliation with gangs/organized crime/terrorists;
 - c. history of substance abuse/drug of choice/IV drug use;
 - d. history of sex offense;
 - e. drug seller/street level or higher;
 - f. established method of operating/pattern of criminal behavior;
 - g. whether the crime was notorious, well planned sophisticated or an impulsive act.

- h. amenability to supervision.
- i. physical /mental health problems.
- j. specifics about the residence including, directions, description of building, persons living there, their occupations, weapons, potentially dangerous animals present.

D. Supervision Fee Recommendation

1. The Officer will state, with regard to the Supervision Fee, whether the inmate is eligible or permanently ineligible and provide the reasons as required in the Supervision Fee Procedures dated January 2002.

E. Documentation Status

1. The Officer will note all documents that apply and explain under "Comments" the status of any outstanding or missing documents, will make suggestions for field follow-up, and will enter the inmate's social security number.

F. Service Application

1. The Officer will note all service applications to be initiated by Facility staff prior to release.

IV. General Instructions

A. Facility Parole Staff

1. Upon completion, Parole staff will send a copy of Part I of the Inmate Status Report to the inmate.
2. Parole staff will make copies of Parts I, II, and III, for use by the Commissioners and other Parole staff.
3. At the time of interview, the Parole Officer will present the inmate with a completed Notice of Parole Board Appearance Form 3020, (see Appendix E) and obtain the inmate's signature, acknowledging notification. If the inmate is transferred after receiving Form 3020, the Parole Officer at receiving facility will, within five working days, issue an updated form for the inmate's signature.
4. When pertinent, the Parole Officer will request military records from the National Personnel Records Center using Standard Form 180 (see Appendix F), include a cover letter and release of information form. When it is received, the Officer will include this information in the documentation status section III, E 1 and comment as appropriate.

5. In the case of a subsequent Board, appearance six months or less after a previous appearance, the Officer will submit a memo to the Board updating the inmate's status in lieu of a new Inmate Status Report.

V. Update to Inmate Status Report Form DP104 (see Appendix G)

A. Facility Parole Staff

1. The Officer will use this form as a supplement to Part III – Confidential Report to Field. It is intended to provide updated information on cases scheduled for release. (Only use form as needed)
2. The Officer will use this form as needed for all cases scheduled for Conditional Release. Also, this form will be used for any case scheduled for Parole release where a significant change in inmate status or service plan has occurred since the last report.
3. The Officer will ensure that the Update to Inmate Status Report is completed at least two months (or when practicable in emergency cases) prior to the anticipated release date. The completed form will be forwarded to field staff as an attachment to the IS-2 (Community Preparation Request) with the attachment being noted in the "Remarks" section of the IS-2. A copy of this form will be filed in the Parole folder on top of the last Inmate Status Report.
4. Since the sub-headings are the same as in Part III – Confidential Report to Field, the Officer will refer to that section of the manual for instructions in each sub-heading.

Form 9032 (Rev. 5/02)

STATE OF NEW YORK - EXECUTIVE DEPARTMENT - DIVISION OF PAROLE
INMATE STATUS REPORT

PART I

Name: NYSID: DIN:
PE: CR: ME:
PRS Y N Amount of Time: YRS MOS.
DOB: INTERPRETER: Y N LANGUAGE/DIALECT
Rec'd Date: PVNT: Y N Time on Parole:

Crime, (felony class), sentence & date p(lea) or v(erdict);

1)

2)

3)

4)

Guideline Range: Months; Mos. Total Time Served at PED or Reapp

EEC - Granted Denied Non-Certified
If denied or Non-Certified, are reasons in file:

Special Programs: WR/ from to

Furloughs: ; Day Reporting from to

Program Violations:

Mand. SPP: ; Citizen: ; INS Warrant: ; Other Warrants:

Comments:

Official Statements: Judge ; DA ; Def. Atty ;

Certificate of Relief:

Co-Defendant: Name & NYSID Status

NAME:

NYSID:

DIN:

Present Offense:

NAME:

NYSID:

DIN:

CRIMINAL RECORD

Arrest
Date

Arrest
Charges

Place

Disposition

NAME:

NYSID:

DIN:

PAROLE INTERVIEW

INMATE'S STATEMENT:

INSTITUTIONAL ADJUSTMENT:

DISCIPLINARY:

NAME:

NYSID:

DIN:

PROPOSED RESIDENCE:

PROPOSED EMPLOYMENT:

INMATE'S PLANS:

SUPERVISION NEEDS:

SPECIAL CONDITIONS RECOMMENDED:

Prepared by: _____
FPO I

Approved by: _____
FPO II

Date:

Facility:

NAME:

NYSID:

DIN:

C O N F I D E N T I A L . I N F O R M A T I O N

PSYCHIATRIC/PSYCHOLOGICAL REPORTS:

MEDICAL REPORTS:

CONFIDENTIAL WRITTEN REPORTS:

EVALUATION:

Prepared by: _____
FPO I

Approved by: _____
FPO II

Date:

Facility:

NAME:

NYSID:

DIN:

PART III

CONFIDENTIAL REPORT TO FIELD

PHYSICAL DESCRIPTION:

Ethnicity:	Eye Color:
Height:	Hair Color:
Weight:	Hair Style:
Build:	Facial Hair:
Complexion:	Corrected Vision:

Hand Preference [Right; Left; Ambidextrous]:

Identifying scars:

Tattoos or other identifying physical traits:

FINANCE: \$ in account.
Other funds available on outside:

SUPERVISION & INVESTIGATION CONCERNS:

SUPERVISION FEE RECOMMENDATION:

___ Eligible. Inmate's obligation to make timely payments and the consequences of his failure to do so were discussed during the interview.

___ Permanently Ineligible.

Reason(s):

NAME:

NYSID:

DIN:

CONFIDENTIAL REPORT TO FIELD (CONT.)

4) DOCUMENTATION STATUS:

DOCUMENTATION	IN FOLDER UPON REL.	INMATE'S POSS. UPON REL.	*OUTSTANDING
---------------	------------------------	-----------------------------	--------------

Social Security
Card

Birth Certificate

Alien Reg. Card

Military (DD214)

OMH Report

DOCS Med. Report
(CMS)

ADAP Enroll-
ment Card

Correspondence
List

Visitation
List

Phone Home Prog.

Employment
Profile

School

Transcripts

OTHER (Specify: _____)

*COMMENTS:

5) SERVICE APPLICATION(S) TO BE INITIATED BY FACILITY STAFF PRIOR TO
INMATE'S RELEASE:

___ SSI

___ HIV Uninsured Care Programs (ADAP)

___ PA/Medicaid

___ M11Q or Equivalent

___ V.A. Benefits

___ Other (Specify: _____)

___ None

COMMENTS:

Prepared by: _____
FPO I

Approved by: _____
FPO II

Date:

Facility:

NEW YORK STATE-EXECUTIVE DEPARTMENT-DIVISION OF PAROLE

PAROLE VIOLATOR REAPPEARANCE REPORT

NAME: _____ NYSID: _____ DIN: _____

ASSESSED EXPIRATION DATE: _____ CR: _____ ME: _____

POST RELEASE SUPERVISION: __Y__N AMOUNT OF TIME: _____

STATUS OF COMMUNITY PREP: _____ EEC: __Y__N

CERTIFICATE OF RELIEF: _____ D.O.B.: _____

REVIEW OF PERTINENT FACTORS

1. DISCIPLINARY RECORD: SATISFACTORY _____ UNSATISFACTORY _____
EXPLAIN: _____

2. ESCAPE OR ABSCONDING FROM TEMPORARY RELEASE:
YES __ NO __ EXPLAIN: _____

3. SUBSTANTIAL CHANGE IN THE INMATE'S MENTAL AND/OR
EMOTIONAL CONDITION: YES __ NO __ EXPLAIN: _____

4. ADDITIONAL DEFINITE, DETERMINATE OR INDETERMINATE
SENTENCE: YES __ NO __ EXPLAIN: _____

5. OTHER RELEVANT INFORMATION: YES __ NO __
EXPLAIN: _____

PREPARED BY: _____
FPOI

DECISION - RELEASE : _____
HOLD: _____

APPROVED:
FPOII

SPECIAL CONDITIONS: _____

BOARD MEMBERS _____

DATE: _____

APPENDIX C Conditional Release Conditions Parole Violator Review

CRC PAROLE VIOLATOR REVIEW

NAME _____	M.E. DATE _____
NYSID _____	PRS PERIOD _____
DIN _____	PRSME _____
FACILITY _____	TIME ASSESSMENT _____
BOARD REVIEW DATE _____	EXPIRATION DATE OF CURRENT HOLD _____

STATUS OF COMMUNITY PREPARATION

VIOLATION(S)

PREVIOUS SPECIAL CONDITIONS IMPOSED

(1) PAROLE BOARD

(2) PAROLE OFFICER

CURRENT COMPLIANCE WITH INSTITUTIONAL CONTROLS

_____ SATISFACTORY _____ UNSATISFACTORY WITH EXPLANATION

EXPLANATION:

SUBSTANTIAL CHANGE IN MENTAL OR EMOTIONAL CONDITION

 NO YES (WITH AN EXPLANATION)

EXPLANATION:

ADDITIONAL ARRESTS / CONVICTIONS

 NO YES (WITH AN EXPLANATION)

EXPLANATION:

OTHER RELEVANT INFORMATION

 NO YES (WITH AN EXPLANATION)

EXPLANATION:

SPECIAL CONDITIONS, AND OR INSTRUCTIONS RECOMMENDED

PREPARED BY

APPROVED BY

COMMISSIONER'S SIGNATURE

DATE OF SIGNATURE

APPENDIX D Post-Interview Facility Staff Worksheet Form 9028

New York State - Division of Parole

POST-INTERVIEW FACILITY STAFF WORKSHEET

NAME: _____ DIN: _____ NYSID: _____

OPEN DATE OR EARLIER UPON RECEIPT ELIGIBLE FOR SUPERVISION FEE: YES TRANSIT CASE: (YES/NO)
OF APPROVED FIELD INVESTIGATION: ☐ EEC: ☐ ISSUED ☐ DENIED ☐ NON-CERT ☐ N/A
☐ WARRANT AND PROGRAM ☐ CPDO/ECPDO ☐ WARRANT

COMMENTS:

CONFIDENTIAL COMMENTS: (YES/NO)

GES CODE

SPECIAL CONDITIONS (CHECK ALL CONDITIONS IMPOSED)

- ☒
- SC01 ☐ 1. I WILL SEEK, OBTAIN, AND MAINTAIN EMPLOYMENT AND/OR AN ACADEMIC/VOCATIONAL PROGRAM
- SC02 ☐ 2. I WILL SUBMIT TO SUBSTANCE ABUSE TESTING AS DIRECTED BY THE P.O.
- SC03 ☐ 3. I WILL PARTICIPATE IN A SUBSTANCE ABUSE TREATMENT PROGRAM AS DIRECTED BY THE P.O.
- SC04 ☐ 4. I WILL PARTICIPATE IN AN ALCOHOL ABUSE TREATMENT PROGRAM AS DIRECTED BY THE P.O.
- SC05 ☐ 5. I WILL NOT CONSUME ALCOHOLIC BEVERAGES
- SC06 ☐ 6. I WILL NOT FREQUENT ANY ESTABLISHMENT WHERE ALCOHOL IS SOLD OR SERVED AS ITS MAIN BUSINESS WITHOUT THE WRITTEN PERMISSION OF THE P.O.
- SC07 ☐ 7. I WILL NOT OPERATE ANY MOTOR VEHICLE, APPLY FOR, RENEW, OR POSSESS ANY DRIVERS LICENSE WITHOUT THE WRITTEN PERMISSION OF THE P.O.
- SC08 ☐ 8. I WILL ABIDE BY A CURFEW ESTABLISHED BY THE P.O.
- SC09 ☐ 9. I WILL SUPPORT MY DEPENDENT CHILDREN
- SC10 ☐ 10. I WILL PARTICIPATE IN ANTI-AGGRESSION/ANTI-VIOLENCE COUNSELING AS DIRECTED BY THE P.O.
- SC11 ☐ 11. I WILL COOPERATE WITH A MENTAL HEALTH EVALUATION REFERRAL, AND FOLLOW UP TREATMENT AS DIRECTED BY THE P.O.
- SC12 ☐ 12. I WILL PARTICIPATE IN SEX OFFENDER COUNSELING/TREATMENT AS DIRECTED BY THE P.O.
- SC13 ☐ 13. I WILL HAVE NO CONTACT WITH ANY PERSON UNDER THE AGE OF EIGHTEEN, WITHOUT THE WRITTEN PERMISSION OF THE P.O.
- SC14 ☐ 14. I WILL COMPLY WITH ALL CASE SPECIFIC SEX OFFENDER CONDITIONS TO BE IMPOSED BY THE P.O.
- SC15 ☐ 15. I WILL NOT ASSOCIATE IN ANY WAY OR COMMUNICATE BY ANY MEANS WITH (VICTIM) WITHOUT THE PERMISSION OF THE P.O.
- SC16 ☐ 16. I WILL NOT ASSOCIATE IN ANY WAY OR COMMUNICATE BY ANY MEANS WITH (ASSOCIATE) WITHOUT THE PERMISSION OF THE P.O.
- SC17 ☐ 17. I WILL NOT ASSOCIATE IN ANY WAY OR COMMUNICATE BY ANY MEANS WITH (OTHER) WITHOUT THE PERMISSION OF THE P.O.
- SC18 ☐ 18. I WILL COOPERATE WITH ALL MEDICAL REFERRALS AND TREATMENT RECOMMENDATIONS
- SC19 ☐ 19. I WILL PARTICIPATE IN DOMESTIC VIOLENCE COUNSELING AS DIRECTED BY THE P.O.
- SC20 ☐ 20. I WILL COMPLY WITH ALL COURT ORDERS INCLUDING THOSE ORDERING FINES, SURCHARGES, AND/OR RESTITUTION
- SC21 ☐ 21. I WILL NOT BE A MEMBER OF ANY GANG OR ASSOCIATE WITH ANY KNOWN GANG MEMBER OR ATTEND ANY GANG ACTIVITY OR FUNCTION. I WILL NOT WEAR, DISPLAY, POSSESS, DISTRIBUTE OR USE ANY GANG INSIGNIA OR MATERIAL
- SC22 ☐ 22. I WILL NOT ACT IN ANY FIDUCIARY CAPACITY WITHOUT THE PERMISSION OF THE P.O.

- SC23 ☐ 23. I WILL NOT HAVE A CHECKING, SAVINGS, DEBIT, OR CREDIT CARD ACCOUNT WITHOUT THE PERMISSION OF THE P.O.
- SC24 ☐ 24. I WILL NOT BE INVOLVED IN ANY GAMBLING OR GAMBLING RELATED ACTIVITY WITHOUT THE PERMISSION OF THE P.O.
- SC25 ☐ 25. I WILL PARTICIPATE IN A DWI VICTIM IMPACT PANEL AS DIRECTED BY THE P.O.
- SC26 ☐ 26. I WILL COMPLY WITH ALL ORDERS OF PROTECTION
- SC27 ☐ 27. OTHER
- SC28 ☐ 28. I WILL ABIDE BY THE MANDATORY CONDITION IMPOSED BY THE SEXUAL ASSAULT REFORM ACT, CHAPTER 1 OF THE LAWS OF 2000 ("SARA")
- SC29 ☐ 29. I WILL PROPOSE A RESIDENCE TO BE APPROVED BY THE DIVISION OF PAROLE AND WILL ASSIST THE DIVISION IN ANY EFFORTS IT MAY MAKE ON MY BEHALF TO DEVELOP AN APPROVED RESIDENCE
- SC30 ☐ 30. I WILL RESIDE ONLY IN THE RESIDENCE APPROVED BY THE DIVISION OF PAROLE

POST-INTERVIEW FACILITY STAFF WORKSHEET

NAME _____ DIN _____ NYSID _____

DID THE COMMISSIONER MENTION ANY OF THE FOLLOWING AS A REASON FOR DENIAL (CHECK ALL THAT APPLY):

- ☐ ABSCONDED/REMOVED/FAILED IN TEMP/WORK RELEASE PROGRAM; FURLOUGH FAILURE
- ☐ SERIOUS DISCIPLINE HISTORY OR RECENT DISCIPLINE PROBLEM; KEEPLOCK; SHU; TIER I, II, OR III
- ☐ FAIL TO DEAL WITH ALCOHOL/DRUG PROBLEM OR FURTHER TREATMENT; ASAT
- ☐ EXTREME/EXCESSIVE USE OF VIOLENCE AGAINST VICTIM(S) (BY INMATE AND/OR ACCOMPLICES)
- ☐ PREYED UPON A PARTICULARLY VULNERABLE VICTIM(S) (CHILD-ELDERLY-DISABLED)
- ☐ HISTORY OF PROBATION/PAROLE FAILURES
- ☐ INVOLVED WEAPON USAGE/SHOTGUN
- ☐ HISTORY OF ASSAULTIVE BEHAVIOR
- ☐ LENGTHY PRIOR CRIMINAL BEHAVIOR
- ☐ REFUSED TO APPEAR
- ☐ NEEDS TO PARTICIPATE IN PSYCHOTHERAPY; MSE; MHSE; MENTAL STATUS EVALUATION; MENTAL HEALTH STATUS EVALUATION
- ☐ ACQUIRE GED OR ADDITIONAL ACADEMIC/VOCATIONAL SCHOOLING
- ☐ SHOWS NO REMORSE OR RECOGNITION OF GUILT
- ☐ FURTHER INSTITUTIONAL PROGRAM (WHEN COMMISSIONER HAS NOT SPECIFIED)
- ☐ DA/JUDGE IS OPPOSED TO INMATES RELEASE
- ☐ OFFENSE INVOLVED LARGE QUANTITIES OF DRUGS
- ☐ MULTIPLE VICTIM
- ☐ BIZARRE NATURE OF OFFENSE
- ☐ MULTIPLE OFFENSES/MULTIPLE COUNTS
- ☐ OFFENSE WAS AMONG A SERIES OF OFFENSES
- ☐ OFFENSE COVERED LONG SPAN OF TIME
- ☐ HIGH DEGREE OF SOPHISTICATION INVOLVED IN OFFENSE(S)
- ☐ ALTHOUGH VICTIM WAS INITIATOR
- ☐ ALTHOUGH INVOLVEMENT IN OFFENSE WAS MINIMAL
- ☐ SERIOUSNESS OF THE OFFENSE
- ☐ INVOLVED LARGE AMOUNT OF MONEY
- ☐ MORE THAN ONE PERPETRATOR/ACTING IN CONCERT WITH OTHERS
- ☐ ESCALATION OF CRIMINAL BEHAVIOR
- ☐ DESPITE MINIMAL PRIOR CRIMINAL BEHAVIOR
- ☐ UNSATISFACTORY PAROLE PLAN
- ☐ PATTERN OF SIMILAR OFFENSES
- ☐ OFFENSE INCLUDED SEXUAL ABUSE
- ☐ CAUSED DEATH OF VICTIM

☐ RESENTENCE/COURT ORDER

☐ PIE CREDIT

☐ NEEDS SEX OFFENDER COUNSELING

☐ INVOLVEMENT IN OFFENSE BY COERCION/DURESS

POSTPONEMENTS:

☐ COMPLETION OF RECORDS; FOLDER UNAVAILABLE; WAITING FOR ATTORNEY

☐ INMATE NOT PRODUCED

☐ PSYCHIATRIC REPORT; MSE; MHSE; MENTAL STATUS EVALUATION; MENTAL HEALTH STATUS EVALUATION

☐ SPECIAL PSYCHIATRIC PROCEDURE, 2 PC/SPECIAL PSYCHIATRIC PANEL PROCEDURE (SPP)

☐ NO CONSENSUS

FORM 3020 (REV 9/88)

STATE OF NEW YORK

EXECUTIVE DEPARTMENT

DIVISION OF PAROLE

CORRECTIONAL FACILITY

NOTICE OF PAROLE BOARD APPEARANCE

INMATE NAME	DATE
NYSID NO.	DEPT NO.

You are scheduled to appear before the Board of Parole Hearing which begins _____ for the purpose indicated below:

- ☐ Release Consideration
- ☐ Final Revocation Hearing
- ☐ Establishment of Minimum Period of Incarceration
- ☐ Court Order
- ☐ Special Case (Specify) _____

INMATE SIGNATURE

INSTITUTIONAL SENIOR PAROLE OFFICER

DISTRIBUTION: WHITE / INMATE
CANARY / PAROLE FILE

APPENDIX F

INSTRUCTION AND INFORMATION SHEET FOR SF 180, REQUEST PERTAINING TO MILITARY RECORDS

- Information needed to locate records.** Certain identifying information is necessary to determine the location of an individual's record of military service. Please try to answer each item on the SF 180. If you do not have and cannot obtain the information for an item, show "NA," meaning the information is "not available." Include as much of the requested information as you can.
- 2. Restrictions on release of information.** Release of information is subject to restrictions imposed by the military services consistent with Department of Defense regulations and the provisions of the Freedom of Information Act (FOIA) and the Privacy Act of 1974. The service member (either past or present) or the member's legal guardian has access to almost any information contained in that member's own record. Others requesting information from military personnel/health records must have the release authorization in Section III of the SF 180 signed by the member or legal guardian, but if the appropriate signature cannot be obtained, only limited types of information can be provided. If the former member is deceased, surviving next of kin may, under certain circumstances, be entitled to greater access to a deceased veteran's records than a member of the public. The next of kin may be any of the following: unremarried surviving spouse, father, mother, son, daughter, sister, or brother. Employers and others needing proof of military service are expected to accept the information shown on documents issued by the military service departments at the time a service member is separated.
- 3. Where reply may be sent.** The reply may be sent to the member or any other address designated by the member or other authorized requester.
- 4. Charges for service.** There is no charge for most services provided to members or their surviving next of kin. A nominal fee is charged for certain types of service. In most instances service fees cannot be determined in advance. If your request involves a service fee, you will be notified as soon as that determination is made.
- 5. Health and personnel records.** Health records of persons on active duty are generally kept at the local servicing clinic, and usually are available from the Department of Veterans Affairs a week or two after the last day of active duty. (See page 2 of SF180 for record locations/addresses.)
- 6. Records at the National Personnel Records Center.** Note that it takes at least three months, and often up to seven, for the file to reach the National Personnel Records Center in St. Louis after the military obligation has ended (such as by discharge). If only a short time has passed, please send the inquiry to the address shown for active or current reserve members. Also, if the person has only been released from active duty but is still in a reserve status, the personnel record will stay at the location specified for reservists. A person can retain a reserve obligation for several years, even without attending meetings or receiving annual training. (See page 2 of SF180 for record locations/addresses.)
- 7. Definitions and abbreviations.** DISCHARGED -- the individual has no current military status; HEALTH -- Records of physical examinations, dental treatment, and outpatient medical treatment received while in a duty status (does not include records of treatment while hospitalized); TDRL -- Temporary Disability Retired List.
- 8. Service completed before World War I.** National Archives Trust Fund (NATF) forms must be used to request these records. Obtain the forms by e-mail from inquire@nara.gov or write to the Code 6 address on page 2 of the SF 180.

PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and E.O. 9397 of November 22, 1943. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the facility servicing the service member's record may not have all of the information needed to locate it. The purpose of the information on this form is to assist the facility servicing the records (see the address list) in locating the correct military service record(s) or information to answer your inquiry. This form is then filed in the requested military service record as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Transportation (Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or part of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

Public burden reporting for this collection of information is estimated to be five minutes per response, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (NHP), 8601 Adelphi Road, College Park, MD 20740-6001. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS AS INDICATED IN THE ADDRESS LIST ON PAGE 2 OF THE SF 180.

LOCATION OF MILITARY RECORDS

The various categories of military service records are described in the chart below. For each category there is a code number which indicates the address at the bottom of the page to which this request should be sent. Please refer to the Instruction and Information Sheet accompanying this form as needed.

BRANCH	CURRENT STATUS OF SERVICE MEMBER	ADDRESS CODE	
		Personnel Record	Health Record
AIR FORCE	Discharged, deceased, or retired before 5/1/1994	14	-14
	Discharged, deceased, or retired on or after 5/1/1994	14	11
	Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay	1	
	Reserve, retired reserve in nonpay status, current National Guard officers not on active duty in the Air Force, or National Guard released from active duty in the Air Force	2	
	Current National Guard enlisted not on active duty in the Air Force	13	
COAST GUARD	Discharge, deceased, or retired before 1/1/1898	6	
	Discharged, deceased, or retired 1/1/1898 - 3/31/1998	14	14
	Discharged, deceased, or retired on or after 4/1/1998	14	11
	Active, reserve, or TDRL	3	
MARINE CORPS	Discharged, deceased, or retired before 1/1/1905	6	
	Discharged, deceased, or retired 1/1/1905 - 4/30/1994	14	14
	Discharged, deceased, or retired on or after 5/1/1994	14	11
	Individual Ready Reserve or Fleet Marine Corps Reserve	5	
	Active, Selected Marine Corps Reserve, TDRL	4	
ARMY	Discharged, deceased, or retired before 11/1/1912 (enlisted) or before 7/1/1917 (officer)	6	
	Discharged, deceased, or retired 11/1/1912 - 10/15/1992 (enlisted) or 7/1/1917 - 10/15/1992 (officer)	14	14
	Discharged, deceased, or retired on or after 10/16/1992	14	11
	Reserve; or active duty records of current National Guard members who performed service in the U.S. Army before 7/1/1972	7	
	Active enlisted (including National Guard on active duty in the U.S. Army) or TDRL enlisted	9	
	Active officers (including National Guard on active duty in the U.S. Army) or TDRL officers	8	
	Current National Guard enlisted not on active duty in Army (including records of Army active duty performed after 6/30/1972)	13	
	Current National Guard officers not on active duty in Army (including records of Army active duty performed after 6/30/1972)	12	
NAVY	Discharged, deceased, or retired before 1/1/1886 (enlisted) or before 1/1/1903 (officer)	6	
	Discharged, deceased, or retired 1/1/1886 - 1/30/1994 (enlisted) or 1/1/1903 - 1/30/1994 (officer)	14	14
	Discharged, deceased, or retired 1/31/1994 - 12/31/1994	14	11
	Discharged, deceased, or retired on or after 1/1/1995	10	
	Active, reserve, or TDRL	10	
PUBLIC HEALTH SERVICE	Commissioned Corps - active, inactive, terminated, retired	15	

ADDRESS LIST OF CUSTODIANS (BY CODE NUMBERS SHOWN ABOVE) - Where to write/send this form

1	Air Force Personnel Center HQ AFPC/DPSRP 550 C Street West, Suite 19 Randolph AFB, TX 78150-4721	6	National Archives & Records Administration Old Military and Civil Records (NWCTB-Military) Textual Services Division 700 Pennsylvania Ave., N.W. Washington, DC 20408-0001	11	Department of Veterans Affairs Records Management Center P.O. Box 5020 St. Louis, MO 63115-5020
2	Air Reserve Personnel Center /DSMR HQ ARPC/DPSSA/B 6760 E. Irvington Place, Suite 4600 Denver, CO 80280-4600	7	Commander U.S. Army Reserve Personnel Command ATTN: ARPC-ZCC-B 1 Reserve Way St. Louis, MO 63132-5200	12	Army National Guard Readiness Center NGB-ARP 111 S. George Mason Dr. Arlington, VA 22204-1382
3	Commander CGPC-Adm-3 U.S. Coast Guard 2100 2nd Street, S.W. Washington, DC 20593-0001	8	U.S. Total Army Personnel Command ATTN: TAPC-MSR-S 200 Stoval Street Alexandria, VA 22332-0444	13	The Adjutant General (of the appropriate state, DC, or Puerto Rico)
4	Headquarters U.S. Marine Corps Personnel Management Support Branch (MMSB-10) 2008 Elliot Road Quantico, VA 22134-5030	9	Commander USAEREC ATTN: PCRE-F 8899 E. 56th St. Indianapolis, IN 46249-5301	14	National Personnel Records Center (Military Personnel Records) 9700 Page Ave. St. Louis, MO 63132-5100
5	Marine Corps Reserve Support Command (Code MMI) 15303 Andrews Road Kansas City, MO 64147-1207	10	Navy Personnel Command (PERS-313C1) 5720 Integrity Drive Millington, TN 38055-3130	15	Division of Commissioned Personnel ATTN: Records Officer 5600 Fishers Lane, Room 4-36 Rockville, MD 20857-0001

REQUEST PERTAINING TO MILITARY RECORDS

To ensure the best possible service, please thoroughly review the accompanying instructions before filling out this form. Please print clearly or type. If you need more space, use plain paper.

SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much as possible.)

NAME USED DURING SERVICE (last, first, and middle)		2. SOCIAL SECURITY NO.	3. DATE OF BIRTH	4. PLACE OF BIRTH	
5. SERVICE, PAST AND PRESENT (For an effective records search, it is important that all service be shown below.)					
BRANCH OF SERVICE	DATES OF SERVICE		CHECK ONE		SERVICE NUMBER DURING THIS PERIOD (If unknown, write "unknown")
	DATE ENTERED	DATE RELEASED	OFFICER	ENLISTED	
a. ACTIVE SERVICE					
b. RESERVE SERVICE					
c. NATIONAL GUARD					
6. IS THIS PERSON DECEASED? If "YES" enter the date of death.			7. IS (WAS) THIS PERSON RETIRED FROM MILITARY SERVICE?		
<input type="checkbox"/> NO <input type="checkbox"/> YES			<input type="checkbox"/> NO <input type="checkbox"/> YES		

SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

1. REPORT OF SEPARATION (DD Form 214 or equivalent). This contains information normally needed to verify military service. A copy may be sent to the veteran, the deceased veteran's next of kin, or other persons or organizations if authorized in Section III, below. NOTE: If more than one period of service was performed, even in the same branch, there may be more than one Report of Separation. Be sure to show EACH year that a Report of Separation was issued, for which you need a copy.

☐ An UNDELETED Report of Separation is requested for the year(s) _____

This normally will be a copy of the full separation document including such sensitive items as the character of separation, authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and dates of time lost. An undeleted version is ordinarily required to determine eligibility for benefits.

☐ A DELETED Report of Separation is requested for the year(s) _____

The following information will be deleted from the copy sent: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and for separations after June 30, 1979, character of separation and dates of time lost.

2. OTHER INFORMATION AND/OR DOCUMENTS REQUESTED

3. PURPOSE (Optional - An explanation of the purpose of the request is strictly voluntary. Such information may help the agency answering this request to provide the best possible response and will in no way be used to make a decision to deny the request.)

SECTION III - RETURN ADDRESS AND SIGNATURE**1. REQUESTER IS:**

☐ Military service member or veteran identified in Section I, above

☐ Next of kin of deceased veteran _____ (relation)

☐ Legal guardian (must submit copy of court appointment)

☐ Other (specify) _____

2. SEND INFORMATION/DOCUMENTS TO:

(Please print or type. See item 3 on accompanying instructions.)

3. AUTHORIZATION SIGNATURE REQUIRED (See item 2 on accompanying instructions.) I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section III is true and correct.

Name _____

Street _____ Apt. _____

City _____ State _____ Zip Code _____

Signature of requester (Please do not print.) _____

Date of this request _____ Daytime phone _____

Email address _____

RESET

STATE OF NEW YORK – EXECUTIVE DEPARTMENT – DIVISION OF PAROLE
CONFIDENTIAL REPORT TO FIELD

UPDATE TO INMATE STATUS REPORT

NAME: _____ CR/PAROLE DATE: _____

DIN#: _____ NYSID#: _____

Complete on all CR cases and/or cases where the inmate's status has changed since completion of the Inmate Status Report for Board Appearance. Describe any changes in the categories listed below.

- 1) **PHYSICAL DESCRIPTION:** _____

- 2) **FINANCE:** _____

- 3) **SUPERVISION/INVESTIGATION CONCERNS:** _____

- 4) **DOCUMENTATION STATUS:** _____

- 5) **SERVICE APPLICATIONS:** _____

- 6) **FIELD STAFF FOLLOW-UP:** _____

- 7) **FIELD STAFF ALERT:** _____

PREPARED BY: _____ APPROVED BY: _____

DATE: _____ FACILITY: _____

INSTRUCTION AND INFORMATION SHEET FOR SF 180, REQUEST PERTAINING TO MILITARY RECORDS

- 1. Information needed to locate records.** Certain identifying information is necessary to determine the location of an individual's record of military service. Please try to answer each item on the SF 180. If you do not have and cannot obtain the information for an item, show "NA," meaning the information is "not available." Include as much of the requested information as you can.
- 2. Restrictions on release of information.** Release of information is subject to restrictions imposed by the military services consistent with Department of Defense regulations and the provisions of the Freedom of Information Act (FOIA) and the Privacy Act of 1974. The service member (either past or present) or the member's legal guardian has access to almost any information contained in that member's own record. Others requesting information from military personnel/health records must have the release authorization in Section III of the SF 180 signed by the member or legal guardian, but if the appropriate signature cannot be obtained, only limited types of information can be provided. If the former member is deceased, surviving next of kin may, under certain circumstances, be entitled to greater access to a deceased veteran's records than a member of the public. The next of kin may be any of the following: unmarried surviving spouse, father, mother, son, daughter, sister, or brother. Employers and others needing proof of military service are expected to accept the information shown on documents issued by the military service departments at the time a service member is separated.
- 3. Where reply may be sent.** The reply may be sent to the member or any other address designated by the member or other authorized requester.
- 4. Charges for service.** There is no charge for most services provided to members or their surviving next of kin. A nominal fee is charged for certain types of service. In most instances service fees cannot be determined in advance. If your request involves a service fee, you will be notified as soon as that determination is made.
- 5. Health and personnel records.** Health records of persons on active duty are generally kept at the local servicing clinic, and usually are available from the Department of Veterans Affairs a week or two after the last day of active duty. (See page 2 of SF 180 for record locations/addresses.)
- 6. Records at the National Personnel Records Center.** Note that it takes at least three months, and often up to seven, for the file to reach the National Personnel Records Center in St. Louis after the military obligation has ended (such as by discharge). If only a short time has passed, please send the inquiry to the address shown for active or current reserve members. Also, if the person has only been released from active duty but is still in a reserve status, the personnel record will stay at the location specified for reservists. A person can retain a reserve obligation for several years, even without attending meetings or receiving annual training. (See page 2 of SF 180 for record locations/addresses.)
- 7. Definitions and abbreviations.** DISCHARGED -- the individual has no current military status; HEALTH -- Records of physical examinations, dental treatment, and outpatient medical treatment received while in a duty status (does not include records of treatment while hospitalized); TDRL -- Temporary Disability Retired List.
- 8. Service completed before World War I.** National Archives Trust Fund (NATF) forms must be used to request these records. Obtain the forms by e-mail from inquire@nara.gov or write to the Code 6 address on page 2 of the SF 180.

PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and E.O. 9397 of November 22, 1943. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the facility servicing the service member's record may not have all of the information needed to locate it. The purpose of the information on this form is to assist the facility servicing the records (see the address list) in locating the correct military service record(s) or information to answer your inquiry. This form is then filed in the requested military service record as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Transportation (Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or part of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

Public burden reporting for this collection of information is estimated to be five minutes per response, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (NHP), 8601 Adelphi Road, College Park, MD 20740-6001. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS AS INDICATED IN THE ADDRESS LIST ON PAGE 2 OF THE SF 180.

REQUEST PERTAINING TO MILITARY RECORDS

To ensure the best possible service, please thoroughly review the accompanying instructions before filling out this form. Please print clearly or type. If you need more space, use plain paper.

SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much as possible.)

1. NAME USED DURING SERVICE (last, first, and middle)		2. SOCIAL SECURITY NO.		3. DATE OF BIRTH		4. PLACE OF BIRTH	
5. SERVICE, PAST AND PRESENT		(For an effective records search, it is important that all service be shown below.)					
		DATES OF SERVICE		CHECK ONE		SERVICE NUMBER DURING THIS PERIOD	
BRANCH OF SERVICE		DATE ENTERED	DATE RELEASED	OFFICER	ENLISTED	(If unknown, write "unknown")	
a. ACTIVE SERVICE							
b. RESERVE SERVICE							
c. NATIONAL GUARD							
6. IS THIS PERSON DECEASED? If "YES" enter the date of death.				7. IS (WAS) THIS PERSON RETIRED FROM MILITARY SERVICE?			
<input type="checkbox"/> NO <input type="checkbox"/> YES				<input type="checkbox"/> NO <input type="checkbox"/> YES			

SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

1. **REPORT OF SEPARATION** (DD Form 214 or equivalent). This contains information normally needed to verify military service. A copy may be sent to the veteran, the deceased veteran's next of kin, or other persons or organizations if authorized in Section III, below. NOTE: If more than one period of service was performed, even in the same branch, there may be more than one Report of Separation. Be sure to show EACH year that a Report of Separation was issued, for which you need a copy.

☐ An **UNDELETED** Report of Separation is requested for the year(s) _____

This normally will be a copy of the full separation document including such sensitive items as the character of separation, authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and dates of time lost. An undeleted version is ordinarily required to determine eligibility for benefits.

☐ A **DELETED** Report of Separation is requested for the year(s) _____

The following information will be deleted from the copy sent: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and for separations after June 30, 1979, character of separation and dates of time lost.

2. OTHER INFORMATION AND/OR DOCUMENTS REQUESTED

3. **PURPOSE** (Optional - An explanation of the purpose of the request is strictly voluntary. Such information may help the agency answering this request to provide the best possible response and will in no way be used to make a decision to deny the request.) _____

SECTION III - RETURN ADDRESS AND SIGNATURE**1. REQUESTER IS:**

- ☐ Military service member or veteran identified in Section I, above
- ☐ Next of kin of deceased veteran _____ (relation)

- ☐ Legal guardian (must submit copy of court appointment)
- ☐ Other (specify) _____

2. SEND INFORMATION/DOCUMENTS TO:

(Please print or type. See item 3 on accompanying instructions.)

3. **AUTHORIZATION SIGNATURE REQUIRED** (See item 2 on accompanying instructions.) I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section III is true and correct.

Name

Signature of requester (Please do not print.)

Street

Apt.

Date of this request

Daytime phone

City

State

Zip Code

Email address


LOCATION OF MILITARY RECORDS

The various categories of military service records are described in the chart below. For each category there is a code number which indicates the address at the bottom of the page to which this request should be sent. Please refer to the Instruction and Information Sheet accompanying this form as needed.

ANCH	CURRENT STATUS OF SERVICE MEMBER	ADDRESS CODE	
		Personnel Record	Health Record
AIR FORCE	Discharged, deceased, or retired before 5/1/1994	14	14
	Discharged, deceased, or retired on or after 5/1/1994	14	11
	Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay	1	
	Reserve, retired reserve in nonpay status, current National Guard officers not on active duty in the Air Force, or National Guard released from active duty in the Air Force	2	
	Current National Guard enlisted not on active duty in the Air Force	13	
COAST GUARD	Discharge, deceased, or retired before 1/1/1898	6	
	Discharged, deceased, or retired 1/1/1898 - 3/31/1998	14	14
	Discharged, deceased, or retired on or after 4/1/1998	14	11
	Active, reserve, or TDRL	3	
MARINE CORPS	Discharged, deceased, or retired before 1/1/1905	6	
	Discharged, deceased, or retired 1/1/1905 - 4/30/1994	14	14
	Discharged, deceased, or retired on or after 5/1/1994	14	11
	Individual Ready Reserve or Fleet Marine Corps Reserve	5	
	Active, Selected Marine Corps Reserve, TDRL	4	
ARMY	Discharged, deceased, or retired before 11/1/1912 (enlisted) or before 7/1/1917 (officer)	6	
	Discharged, deceased, or retired 11/1/1912 - 10/15/1992 (enlisted) or 7/1/1917 - 10/15/1992 (officer)	14	14
	Discharged, deceased, or retired on or after 10/16/1992	14	11
	Reserve; or active duty records of current National Guard members who performed service in the U.S. Army before 7/1/1972	7	
	Active enlisted (including National Guard on active duty in the U.S. Army) or TDRL enlisted	9	
	Active officers (including National Guard on active duty in the U.S. Army) or TDRL officers	8	
	Current National Guard enlisted not on active duty in Army (including records of Army active duty performed after 6/30/1972)	13	
	Current National Guard officers not on active duty in Army (including records of Army active duty performed after 6/30/1972)	12	
NAVY	Discharged, deceased, or retired before 1/1/1886 (enlisted) or before 1/1/1903 (officer)	6	
	Discharged, deceased, or retired 1/1/1886 - 1/30/1994 (enlisted) or 1/1/1903 - 1/30/1994 (officer)	14	14
	Discharged, deceased, or retired 1/31/1994 - 12/31/1994	14	11
	Discharged, deceased, or retired on or after 1/1/1995	10	
	Active, reserve, or TDRL	10	
PUBLIC HEALTH SERVICE	Commissioned Corps - active, inactive, terminated, retired	15	

ADDRESS LIST OF CUSTODIANS (BY CODE NUMBERS SHOWN ABOVE) - Where to write/send this form

1	Air Force Personnel Center HQ AFPC/DPSRP 550 C Street West, Suite 19 Randolph AFB, TX 78150-4721	6	National Archives & Records Administration Old Military and Civil Records (NWCTB-Military) Textual Services Division 700 Pennsylvania Ave., N.W. Washington, DC 20408-0001	11	Department of Veterans Affairs Records Management Center P.O. Box 5020 St. Louis, MO 63115-5020
2	Air Reserve Personnel Center /DSMR HQ ARPC/DPSSA/B 6760 E. Irvington Place, Suite 4600 Denver, CO 80280-4600	7	Commander U.S. Army Reserve Personnel Command ATTN: ARPC-ZCC-B 1 Reserve Way St. Louis, MO 63132-5200	12	Army National Guard Readiness Center NGB-ARP 111 S. George Mason Dr. Arlington, VA 22204-1382
3	Commander CGPC-Adm-3 U.S. Coast Guard 2100 2nd Street, S.W. Washington, DC 20593-0001	8	U.S. Total Army Personnel Command ATTN: TAPC-MSR-S 200 Stoval Street Alexandria, VA 22332-0444	13	The Adjutant General (of the appropriate state, DC, or Puerto Rico)
	Headquarters U.S. Marine Corps Personnel Management Support Branch (MMSB-10) 7008 Elliot Road Quantico, VA 22134-5030	9	Commander USAEREC ATTN: PCRE-F 8899 E. 56th St. Indianapolis, IN 46249-5301	14	National Personnel Records Center (Military Personnel Records) 9700 Page Ave. St. Louis, MO 63132-5100
5	Marine Corps Reserve Support Command (Code MMI) 15303 Andrews Road Kansas City, MO 64147-1207	10	Navy Personnel Command (PERS-313C1) 5720 Integrity Drive Millington, TN 38055-3130	15	Division of Commissioned Personnel ATTN: Records Officer 5600 Fishers Lane, Room 4-36 Rockville, MD 20857-0001

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	CONFIDENTIAL	
	MANUAL ITEM: 8305.06	DATE: AUGUST 2004
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SUPERSEDES: June 1988	PAGE 1 OF 2
	SOURCE: Executive Law NYS Correction Law Art 6-c (Sex Offender Registration Act) NYS Penal Law CROSS REFERENCES: 8305.07- Sex Offender	SUBJECT: Sex Offender Analysis Report (SEEKER)

PURPOSE:

instruct Parole staff in the requirement to enter *sex offender* data into *SEEKER*.

POLICY:

In order to enhance community protection and aid in the development and implementation of supervision and treatment plans, Parole staff will gather sex offender data for individual cases and enter it into SEEKER.

DEFINITIONS:

1. *Sex Offender*: Includes all Sex Offender Registry cases and those determined to be sex offenders by the Division of Parole. Should staff determine, through case review and supervisory consultation, that any of the following circumstances exist, in relation to an offender, the offender will be considered a sex offender for supervision and treatment referral purposes:
 - a. Registration or potential registration in New York State as a sex offender under Correction Law Article 6-c, (see Appendix A: Sex Offender Registry Crimes of Conviction).
 - b. persons with documented prior sex offense conviction(s) or adjudications.
 - c. persons with documented conviction(s) or adjudication(s) for offense(s) where the underlying behavior was sexually inappropriate in nature (e.g. an offender who commits a rape during the course of a burglary, but who pleads only to the burglary).

- d. persons without sex offense-specific convictions or adjudications, but where a documented pattern of sexual misbehavior is articulable (e.g. 3 arrests for rape without disposition; probation/parole violation information, disciplinary reports from DOCS or DFY/OFS).
- e. persons who self-report a pattern of sexually inappropriate behaviors.

NOTE: The above does not preclude staff, upon supervisory approval, from identifying a case as a sex offender based on other information not specified above

2. **SEEKER:** An information system, located in Parole Management Information System (PARMIS), which consists of a number of databases used to identify inmates/releasees who are known or suspected sex offenders.

PROCEDURE:

Gathering and Entering Sex Offender Data

A. Facility Parole staff

1. Using the Sex Offender Worksheet, the Parole Officer will gather sex offender data during case review and during interview with inmates and others to include law enforcement agencies, victims and family members.
2. Staff will enter sex offender data into SEEKER.

NOTE: The Facility Parole Officer will ensure that the SEEKER Sex Offender Worksheet on those identified as sex offenders has been completed by the time the IS-2 is sent. The Facility Parole Officer will also ensure that the Worksheet has been completed on all cases prior to release from custody **EVEN IF THEY ARE RELEASED BY MAXIMUM EXPIRATION.**

3. After the Officer completes the Worksheet, staff will enter the data into SEEKER. Instructions on how to enter the data are found in the SEEKER User manual. Staff will place a copy of the Worksheet in the case folder.

B. Field Parole staff

1. Field Parole staff will review the SEEKER entry on sex offenders and update the data as needed.

APPENDIX A

Sex Offender Registry Crimes of Conviction

A CONVICTION OF, OR A CONVICTION FOR AN ATTEMPT, (INCLUDING JUVENILE OFFENDERS) TO COMMIT ANY OF THE PROVISIONS OF THE FOLLOWING SECTIONS OF THE NYS PENAL LAW:

<u>SECTION</u>	<u>CRIME</u>	<u>CLASS</u>
130.20	SEXUAL MISCONDUCT	A Misd
130.25	RAPE 3 rd	B Felony
130.30	RAPE 2 nd	D Felony
130.35	RAPE 1 st Sexual Violent Offense	B Felony
130.40	SODOMY 3 rd	E Felony
130.45	SODOMY 2 nd	D Felony
130.50	SODOMY 1 st Sexual Violent Offense	B Felony
130.52	FORCIBLE TOUCHING *	A Misd
130.53	PERSISTENT SEXUAL ABUSE Sexual Violent Offense	E Felony
130.55	SEXUAL ABUSE 3 rd *	B Misd
130.60	SEXUAL ABUSE 2 nd	A Misd
130.65	SEXUAL ABUSE 1 st Sexual Violent Offense	B Felony
130.65-a	AGGRAVATED SEXUAL ABUSE 4 th Sexual Violent Offense	E Felony
130.66	AGGRAVATED SEXUAL ABUSE 3 rd Sexual Violent Offense	D Felony
130.67	AGGRAVATED SEXUAL ABUSE 2 nd	C Felony

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APPENDIX A

Sex Offender Registry Crimes of Conviction

130.70	AGGRAVATED SEXUAL ABUSE 1 st Sexual Violent Offense	B Felony
130.75	COURSE OF SEXUAL CONDUCT AGAINST A CHILD 1 st Sexual Violent Offense	B Felony
130.80	COURSE OF SEXUAL CONDUCT AGAINST A CHILD 2 nd Sexual Violent Offense	D Felony
130.90	FACILITATING A SEX OFFENSE WITH A CONTROLLED SUBSTANCE Sexual Violent Offense	D Felony
135.05	UNLAWFUL IMPRISONMENT 2 nd **	A Misd
135.10	UNLAWFUL IMPRISONMENT 1 st **	E Felony
135.20	KIDNAPPING 2 nd **	B Felony
135.25	KIDNAPPING 1 st **	A-1 Felony
230.04	PATRONIZING A PROSTITUTE 3 rd	A Misd
230.05	PATRONIZING A PROSTITUTE 2 nd	E Felony
230.06	PATRONIZING A PROSTITUTE 3 rd	D Felony
230.30(2)	PROMOTING PROSTITUTION 2 nd (where the offender advances or profits from the prostitution of a person less than 16 years of age)	C Felony
230.32	PROMOTING PROSTITUTION 1 st	B Felony
235.22	DISSEMINATING INDECENT MATERIAL TO MINORS 1 st	D Felony

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APPENDIX A

Sex Offender Registry Crimes of Conviction

250.45	UNLAWFUL SURVEILLANCE 1 st (Subdivisions 2, 3, 4) ***	E Felony
250.50	UNLAWFUL SURVEILLANCE 1 st ****	D Felony
255.25	INCEST	E Felony
263.05	USE OF A CHILD IN A SEXUAL PERFORMANCE	C Felony
263.10	PROMOTING AN OBSCENE SEXUAL SEXUAL PERFORMANCE BY A CHILD	D Felony
263.11	POSSESSING AN OBSCENE SEXUAL PERFORMANCE BY A CHILD	E Felony
263.15	PROMOTING A SEXUAL PERFORMANCE BY A CHLD	D Felony
263.16	POSSESSING A SEXUAL PERFORMANCE BY A CHILD	E Felony

* Where the victim is less than 18 years of age, or where the defendant has a prior qualifying conviction (defined as a conviction for a sex offense, a sexually violent sex offense, a conviction for P.L. 130.52 or 130.55 or an attempt thereof, regardless of the age of the victim, or when the prior conviction occurred)

** If the victim is less than 17 years of age, and the offender is NOT the parent of the victim

*** These subdivisions are presumptively registerable unless the Court, upon motion, determines that the offender does not have to register

**** Requires a prior qualifying conviction, which is a conviction for any currently registerable offense

**YOUTHFUL OFFENDERS ARE NOT REQUIRED TO REGISTER UNDER
THE SEX OFFENDER REGISTRATION ACT**

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APPENDIX A

SEX OFFENDER REGISTRY CRIMES LIST – FEDERAL OFFENSES

FEDERAL OFFENSES

Acts committed prior to 3/11/02 resulting in a conviction of, or a conviction for an attempt to commit, if the offender is still incarcerated or under Probation or Parole supervision on the effective date of 3/11/02 or acts committed on or after 3/11/02 resulting in a conviction of, or a conviction for an attempt to commit, any of the following:

SECTION

CRIME

18 U.S.C. 2251

SEXUAL EXPLOITATION OF CHILDREN

18 U.S.C. 2251A

SELLING OR BUYING OF CHILDREN

18 U.S.C. 2252


CERTAIN ACTIVITIES RELATING TO MATERIAL INVOLVING THE SEXUAL EXPLOITATION OF CHILDREN

18 U.S.C. 2252A

CERTAIN ACTIVITIES RELATING TO MATERIAL CONSTITUTING OR CONTAINING CHILD PORNOGRAPHY

18 U.S.C. 2260

PRODUCTION OF SEXUALLY EXPLICIT DEPICTIONS OF A MINOR FOR IMPORTATION INTO THE UNITED STATES

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8305.07	DATE: JANUARY 2011
	SUPERSEDES: Guidelines for the Supervision of Sex Offenders	PAGE 1 OF 7
APPROVING AUTHORITY MARK MANTHEI EXECUTIVE DIRECTOR	SOURCE:	SUBJECT: Sex Offender Registration
	CROSS REFERENCES: <u>Correction Law Article 6 – C</u> <u>Executive Law</u> <u>9201.04 - eSTOP</u>	

PURPOSE:

To inform staff regarding New York State's Sex Offender Registration Act (SORA) and to assist staff in the monitoring of offender compliance with NYS Correction Law Article 6-C. This law applies to all individuals who commit a registerable offense (see Appendix A) on or after 1-21-96. It also applies to individuals who committed an offense before 1-21-96, if that individual was still serving a sentence of probation, parole or incarceration for a registerable offense at the time the law went into effect.

POLICY:

It is the policy of the Division of Parole to work in coordination with other criminal justice and law enforcement agencies in the identification and monitoring of offenders subject to the Sex Offender Registry and to support a parolee's compliance with Sex Offender Registry requirements.

PROCEDURE:

I. SEX OFFENDER REGISTRATION

- A. Individuals with a registerable offense must register with the New York State Division of Criminal Justice Services (DCJS) by signing and submitting a Sex Offender Registration Form. If the offender is in the custody of the NYS Department of Correctional Services (NYS DOCS) when identified as requiring registration, DOCS will complete the registration form and obtain the offender's signature 15 days prior to release. (Note: those offenders on probation or parole on 1-21-96, were registered by the supervising agency). Separate case identification and registration procedures apply to offenders accepted for supervision in New York from another state (see Appendix B).

- B. Registration with DCJS requires the offender to report specific information. In order to determine a level of community notification and duration of registration, the sentencing Court holds a hearing to examine case circumstances and recommendations put forth by the NYS Board of Examiners of Sex Offenders. The Court makes a final determination regarding the offender's risk level (an assessment of whether the offender is likely to repeat the same or similar registerable offense).

II. REGISTRY RISK LEVELS AND DESIGNATIONS

- A. The Court may assign one of the following risk levels, which governs the amount and type of information that can be released about the offender:
- Level 1: low risk of repeat offense;
 - Level 2: moderate risk of repeat offense; or
 - Level 3: high risk of repeat offense and a threat to public safety exists.

In the period between registration and risk level determination, a sex offender's risk level is referred to as "pending". Information regarding a "pending" case may only be released in accordance with information available on Level 1 sex offenders.

- B. Additionally, the Court also determines whether the offender should be designated a sexual predator (a sex offender who has been convicted of a sexually violent offense as defined in Article 6-C of Correction Law and who suffers from a mental abnormality or personality disorder that makes him or her likely to engage in predatory sexually violent offenses); a sexually violent offender (a sex offender who has been convicted of a sexually violent offense as defined in Article 6-C of Correction Law); or a predicate sex offender (a sex offender who has been convicted of an offense specified in Article 6-C of Correction Law when the offender has previously been convicted of an offense as defined in Article 6-C of Correction Law). Designations govern the duration of registration (see Appendix C).

III. SORA COMMUNITY NOTIFICATION PROVISIONS

- A. The Sex Offender Registration Act allows the local law enforcement agency where a Level 2 or 3 sex offender resides, to, if it chooses, disseminate information on sex offenders residing in the community to entities with vulnerable populations related to the nature of the offense. The law enforcement agency can only release permitted registration information on Level 2 and Level 3 offenders through community notification.

Registration information includes: name; alias; dob; sex; race; height; weight; eye color; driver license number; home address; internet accounts and screen names; photograph; fingerprints; description of offense; date of conviction; sentence imposed; institution of higher education; and employment address (Level 3 only).

In the case of a Level 2 offender, all registration information except the offender's exact address is available through the DCJS 800 number (1-800-262-3257) or through local law enforcement, should community notification occur. The offender's exact address can be obtained through the DCJS website. (www.criminaljustice.state.ny.us)

In the case of a Level 3 offender, all registration information including the offender's exact address is available through the DCJS website, the DCJS 800 number or through local law enforcement, should community notification occur. Additionally, a DCJS public access website makes available a "Subdirectory of Level 3 Sex Offenders" (including offender photographs) at www.criminaljustice.state.ny.us. The "Subdirectory" is also distributed to law enforcement agencies throughout the state. The public may access the directory at these agency sites.

No community notification is permitted by local law enforcement on Level 1 and "pending" cases. Only confirmation of the offender's registration with DCJS is available in these cases to the public through the Sex Offender Registry 800 number.

IV. OFFENDER RESPONSIBILITIES UNDER SORA

A. In addition to initial registration requirements, all sex offender registrants are required to:

- Annually verify the residence address: DCJS mails to the offender, by non-forwardable mail to the last offender reported address, an address verification form. This is mailed on or about the anniversary of the original registration date. The offender must sign the form, report any changes and mail it back to DCJS within 10 days;
- Report any change of address to DCJS: Offenders are required to notify DCJS in writing, within 10 days of a change of address;
- Notify DCJS of any change in status at an institution of higher education: Offenders are required to notify DCJS in writing, within 10 days, of any institution of higher education at which he or she is or expects to be (whether for compensation or not) enrolled, attending or employed and whether such offender resides or expects to reside in a facility operated by that institution.

B. Level 3 sex offenders and/or offenders with a Sexual Predator designation must also personally verify his or her address every 90 days with the local law enforcement agency having jurisdiction over the offender's residence. Level 3 sex offenders are required to report, in writing, his or her place of employment and employment address to DCJS;

C. Since April 2006, Level 3 sex offender registrants have been required to submit an updated photo once a year and Level 1 and 2 offenders have been required to submit a photo every third year from the date of registration. Offenders are required to report to their local police department to have the photo taken. Jails and prisons are responsible for submitting photos of offenders incarcerated at the time of their photo update anniversary. Approximately 50 days

before a photo is due, DCJS mails a notification to both the offender and the local police department informing them of the offender's responsibility to have a photo taken;

- D. e-JusticeNY has a Sex Offender Management suite that provides law enforcement agencies with information on sex offenders within their jurisdiction or under their supervision who owe an updated photo. A Drop down Menu is provided to allow users to select their specific jurisdiction or all jurisdictions. Offenders appearing on the report do not yet have an updated photo on file with the Registry as of the date of the report. The offenders who owe photographs reports are generated real-time against the Registry database;
- E. Since April 2008, the Electronic Security and Targeting of Online Predators Act (e-STOP) has required all registered sex offenders to register with DCJS all of their internet accounts with internet service providers and any e-mail addresses and screen names used for chat, instant messaging, social networking, etc. If a sex offender changes internet accounts, e-mail addresses or screen names, he/she must notify DCJS no later than 10 days after such change.

V. IDENTIFICATION AND PROCESSING OF SEX OFFENDER REGISTRANTS IN DOCS OR NYS OFFICE OF CHILDREN AND FAMILY SERVICES (OCFS) CUSTODY PRE-RELEASE

- A. As a general rule, NYS DOCS Guidance staff at initial classification determines the need for an offender to register under SORA. Guidance staff will make the registration determination and are responsible for notifying the DOCS Inmate Records Coordinator (IRC). If an inmate receives a new sentence for a crime that requires registration, Guidance staff is responsible for making the registration determination and notifying the IRC. The IRC enters the SOR requirement in the appropriate DOCS mainframe program and monitors the inmate's release status. Guidance staff and the IRC monitor all release types, including release at maximum expiration of the sentence.
- B. Approximately 30 days prior to a registrant's earliest release opportunity, DOCS Guidance staff provides notification to Parole staff at the owning facility, confirming the registration requirement. Facility Parole staff will in turn provide Guidance staff with case-specific information, such as field supervision assignment information and confirmed residence information. Guidance staff completes the Sex Offender Registration Form (DCJS Form 3230) with the inmate at least 15 days prior to release. A completed copy of the registration form is provided to facility Parole staff. The IRC sends the original registration form with a release photograph to DCJS.
- C. If an offender leaving DOCS custody refuses to register, it is DOCS responsibility to notify the local New York State Police unit and the county District Attorney's office to initiate arrest procedures. Any such failure to register or verify may also be the basis for revocation of parole, if applicable, pursuant to Executive Law §259-i (3).
- D. An OCFS Secure Classification Analyst identifies all adjudicated sex offenders coming into the juvenile system and maintains a roster of all JO/YO sex offenders incarcerated in OCFS facilities. Juvenile Offenders with specified sex offenses are required to register under

SORA (note however, that offenders who are granted Youthful Offender status are not required to register). The Secure Classification Analyst monitors Parole Board appearance and release status of all identified OCFS sex offender registrants. Approximately 30 – 60 days prior to an offender's release from an OCFS facility, the Analyst sends a cover memorandum with a Sex Offender Registration Form to OCFS staff. Facility Parole staff provides OCFS staff with field supervision assignment information and residence information. OCFS staff completes and returns the registration form to DCJS. A completed copy of the registration form is provided to the facility Parole Office.

- E. Division of Parole facility staff assists in the process of case identification with both NYS DOCS and OCFS staff. The offender is additionally notified by facility parole staff of the requirement to register as a sex offender, during the pre-Board and/or pre-release interviews. This notification is to be documented by a notation in the CMS case record. The identification of an offender as a sex offender registrant is to be highlighted in all case summaries prepared by facility staff for field staff review and annotated in the case folder and IS-2 (Form 3002), so that an appropriate supervision plan is formulated prior to release. Facility staff will complete the "Notice of Duties as a Sex Offender" form (Form 3012) and provide it to the sex offender (copy to case folder) prior to release.
- F. Upon receipt of an approved community residence program, the FPO II will complete the Sex Offender Registration E-Form (EF SOR 999CLM) providing the following information to DOCS staff at the owning facility: assigned Parole officer; Area Office telephone number; special conditions of release; address of offender; county of residence; and offender's home telephone number. Additionally, if an offender will or expects to be (whether for compensation or not) enrolled, attending or employed at an institution of higher education (see "Directory of Colleges and Universities in New York State" NYS Higher Education Department or view the directory at www.nysed.gov/programs.html), or whether the offender resides or expects to reside in a facility operated by such institution, it is the responsibility of the FPO II to ensure that this information is provided to DOCS staff for sex offender registration purposes. A copy of the completed E-Form will be placed in the case folder.

VI. RESPONSIBILITIES OF PAROLE OFFICERS UNDER THE SEX OFFENDER REGISTRATION ACT

- A. Parole Officers will monitor a sex offender registrant's compliance with the provisions of SORA, including, but not limited to the following activities:
 - Verification of the offender's registration information on file with DCJS immediately upon the offender's release to supervision;
 - Complying with Correction Law §168-c, which requires the supervising officer to notify DCJS, on a form provided by DCJS, within 48 hours when a supervised sex offender changes residence and/or other information (i.e. status of enrollment, attendance, employment, or residence at an institution of higher education; employment, driver license, etc.). Note that additionally, the law requires the offender to provide such a

notice in writing no later than 10 days after a change. The Officer may fulfill his or her obligation in one of two ways:

1. One Form Method: The Officer may mail a DCJS "Change Of Address Form" (Form 3231) with the offender's original signature to DCJS within 48 hours; or
2. Two Forms Method: Within 48 hours, the supervising Officer will forward to DCJS a DCJS "Change of Address Form" (Form 3287), without the offender's signature* AND send or have the offender send to DCJS, no later than 10 days after the change of address or status, a DCJS "Change of Address Form" (Form 3231) with the offender's original signature;

** Note: The officer may submit a change of address form without offender signature for any case that has been incarcerated, lodged, deported, determined to be an absconder or dead.*

3. Verify with DCJS that the offender has complied with registry requirements including change of address and annual address verification requirements. An offender's failure to comply with any registry requirement may be a chargeable offense (see Appendix D) and may be a violation of Parole requirements. Supervising Parole Officers shall ensure any violation of SORA requirements are reviewed to determine if a violation of Parole has occurred as well as referred locally for consideration of any possible criminal charges;
4. Verify that Level 3 and/or sexual predator cases, as determined by SORA, have made their in-person 90 day report to local law enforcement;
5. Determine the offender's compliance with the registry's annual address verification requirements;
6. Verify DCJS sex offender registrants address for the Division's quarterly verification report to DCJS;
7. Verify that the offender has complied with the photo requirement and e-STOP requirement as set forth by law;
8. Assist in registering sex offenders identified by Central Office in coordination with DCJS or DOCS within designated timelines;
9. Educate sex offender registrants regarding their obligations under the Sex Offender Registration Act;
10. Educate the public regarding the supervision of sex offender registrants.

Note: All DCJS referenced forms can be accessed and printed from the e-JusticeNY Sex Offender Management Suite Overview- Forms tab.

APPENDIX A

APPENDIX B

APPENDIX C

APPENDIX D

New York State Sex Offender Registry

Registerable Offenses

December 3, 2008

Individuals convicted of one or more registerable offenses on or after January 21, 1996 must register as a sex offender with the Division of Criminal Justice Services. Additionally, any person convicted of a registerable offense who was incarcerated or under parole or probation supervision for the offense on January 21, 1996 is required to be registered. Below are three categories of offenses which require registration.

I. New York State Penal Law Sex Offenses

The following list contains the New York State Penal Law statutes for which registration as a sex offender is required. Individuals are required to register as a sex offender upon a **conviction** of a registerable offense or a **conviction for an attempt to commit** a registerable offense or a conviction of or a conviction for an attempt to commit a registerable offense as a hate crime or a crime of terrorism.

Penal Law Statute	Offense Class	Offense
120.70	E Felony ¹	luring a child
130.20	A Misdemeanor	sexual misconduct
130.25	E Felony	rape in the third degree
130.30	D Felony	rape in the second degree
130.35	B Felony	rape in the first degree
130.40	E Felony	criminal sexual act in the third degree
130.40	E Felony	sodomy in the third degree
130.45	D Felony	criminal sexual act in the second degree
130.45	D Felony	sodomy in the second degree
130.50	B Felony	criminal sexual act in the first degree
130.50	B Felony	sodomy in the first degree
130.52 ²	A Misdemeanor	forcible touching
130.53	E Felony	persistent sexual abuse
130.55 ²	B Misdemeanor	sexual abuse in the third degree
130.60	A Misdemeanor	sexual abuse in the second degree
130.65	D Felony	sexual abuse in the first degree
130.65-a	E Felony	aggravated sexual abuse in the fourth degree

130.66	D Felony	aggravated sexual abuse in the third degree
130.67	C Felony	aggravated sexual abuse in the second degree
130.70	B Felony	aggravated sexual abuse in the first degree
130.75	B Felony	course of sexual conduct against a child in the first degree
130.80	D Felony	course of sexual conduct against a child in the second degree
130.90	D Felony	facilitating a sex offense with a controlled substance
130.91	Various Felonies	sexually motivated felony(see category II below)
130.95	A-II Felony	predatory sexual assault
130.96	A-II Felony	predatory sexual assault against a child
135.05 ³	A Misdemeanor	unlawful imprisonment in the second degree
135.10 ³	E Felony	unlawful imprisonment in the first degree
135.20 ³	B Felony	kidnapping in the second degree
135.25 ³	A-I Felony	kidnapping in the first degree
230.04 ⁴	A Misdemeanor	patronizing a prostitute in the third degree
230.05	E Felony	patronizing a prostitute in the second degree
230.06	D Felony	patronizing a prostitute in the first degree
230.30(2)	C Felony	promoting prostitution in the second degree
230.32	B Felony	promoting prostitution in the first degree
230.33	B Felony	compelling prostitution
230.34	B Felony	sex trafficking
235.22	D Felony	disseminating indecent material to minors in the first degree
250.45(2), (3) and (4) ⁵	E Felony	unlawful surveillance in the second degree
250.50	D Felony	unlawful surveillance in the first degree
255.25	E Felony	Incest (committed prior to 11/1/06)
255.25	E Felony	Incest in the third degree
255.26	D Felony	Incest in the second degree
255.27	B Felony	Incest in the first degree
263.05	C Felony	use of a child in a sexual performance
263.10	D Felony	promoting an obscene sexual performance by a child
263.11	E Felony	possessing an obscene sexual performance by a child
263.15	D Felony	promoting a sexual performance by a child
263.16	E Felony	possessing a sexual performance by a child
263.30	B Felony	facilitating a sexual performance by a child with a controlled substance or alcohol

- ¹ If the underlying offense is a class A or a class B felony, then the offense of luring a child shall be considered respectively, a class C felony or class D felony.
- ² A registerable offense only if the victim is less than eighteen years of age or where the defendant has a prior conviction for a sex offense, a sexually violent offense, forcible touching or sexual abuse in the third degree or an attempt thereof even if registration was not required for the prior conviction; regardless of when the prior conviction occurred.
- ³ A registerable offense only if the victim is less than seventeen years old and the offender is not the parent of the victim.
- ⁴ A registerable offense only if the person patronized is in fact less than seventeen years old.
- ⁵ A registerable offense unless the trial court finds that registration would be unduly harsh and inappropriate. Please note that an attempt to commit this offense does not require registration.

II. New York State Penal Law Section 130.91 Sexually Motivated Felonies

Registration as a sex offender is also required upon a **conviction** of a certain offense, or a **conviction for an attempt or conspiracy to commit** a certain offense, as a sexually motivated felony pursuant to Penal Law §130.91.

A person commits a sexually motivated felony when he or she commits a "specified offense" for the purpose, in whole or substantial part, of his or her own direct sexual gratification.

A "specified offense" is any of the following offenses:

Penal Law Statute	Offense Class	Offense
120.05	D Felony	assault in the second degree
120.10	B Felony	assault in the first degree
120.06	C Felony	gang assault in the second degree
120.07	B Felony	gang assault in the first degree
120.60	D Felony	stalking in the first degree
125.15(1)	C Felony	manslaughter in the second degree
125.20	B Felony	manslaughter in the first degree
125.25	A-I Felony	murder in the second degree
125.26	A-I Felony	aggravated murder
125.27	A-I Felony	murder in the first degree
135.20	B Felony	kidnapping in the second degree
135.25	A-I Felony	kidnapping in the first degree
140.20	D Felony	burglary in the third degree
140.25	C Felony	burglary in the second degree
140.30	B Felony	burglary in the first degree
150.15	B Felony	arson in the second degree

150.20	A-I Felony	arson in the first degree
160.05	D Felony	robbery in the third degree
160.10	C Felony	robbery in the second degree
160.15	B Felony	robbery in the first degree
230.30	C Felony	promoting prostitution in the second degree
230.32	B Felony	promoting prostitution in the first degree
230.33	B Felony	compelling prostitution
235.22	D Felony	disseminating indecent material to minors in the first degree
263.05	C Felony	use of a child in a sexual performance
263.10	D Felony	promoting an obscene sexual performance by a child
263.15	D Felony	promoting a sexual performance by a child

III. Convictions in Other Jurisdictions

Individuals convicted in another jurisdiction (federal, military, another state or country) who reside in New York State are required to register if:

(1) the individual is convicted of an offense equivalent to a New York State registerable sex offense; or

(2) the individual is convicted of a felony requiring registration in the conviction jurisdiction; or

(3) the individual is convicted of:

- 18 U.S.C.A. § 2251 (sexual exploitation of children);
- 18 U.S.C.A. § 2251A (selling or buying of children);
- 18 U.S.C.A. § 2252 (certain activities relating to material involving the sexual exploitation of minors);
- 18 U.S.C.A. § 2252A (certain activities relating to material constituting or containing child pornography);
- 18 U.S.C.A. § 2260 (production of sexually explicit depictions of a minor for importation into the United States);
- 18 U.S.C.A. § 2422(b) (coercion and enticement)
- 18 U.S.C.A. § 2423 (transportation of minors); or
- 18 U.S.C.A. § 2425 (use of interstate facilities to transmit information about a minor).

APPENDIX B

Procedures to be used by the New York State Division of Parole, the Board of Examiners of Sex Offenders and the Sex Offender Registry for the identification, assessment and registration of supervised offenders convicted in another jurisdiction of an offense which requires registration under the New York State Sex Offender Registration Act

1. Pursuant to 42 U.S.C. §14071(b)(5) and New York State Correction Law §168-k, when a convicted sex offender establishes residence in New York State, the offender is required to notify the New York State Sex Offender Registry (the Registry) of the address no later than 10 days after establishing such residence. The Registry, in turn, must notify the Board of Examiners of Sex Offenders (the Board) of such offender.
2. Additionally, to facilitate the process in those cases where the New York State Division of Parole (Parole) is involved, the Division of Parole's Interstate Bureau will identify offenders who may be subject to sex offender registration in New York and will notify the Board of any offender where Parole has issued reporting instruction or an acceptance of supervision *simultaneous* with the notice to the transferring state. The offender then has up to 120 days to arrive in New York and must report to the field office within 24 hours of arrival.

As a general rule, offenders convicted in another jurisdiction who meet one or both of the following criteria should be referred to the Board:

- A. An offender registered as a sex offender in any other jurisdiction including another country; or
- B. An offender who appears to have been convicted of a sex offense* who was (i) convicted of such offense on or after 1/21/96 or (ii) incarcerated or under supervision for such offense on or after 1/21/96.

* *It is not always clear to an offender or a supervising agency whether an offender is required to register in New York State. Pursuant to Correction Law §168-k(2), the Board must make such determination. The Board bases its determination on whether the offense for which the offender is convicted meets the definition of "sex offense" or "sexually violent offense" as defined in Correction Law §§168-a(2) and 168-a(3).*

Not all registerable offenses have "sex" or a variation of the word "sex" in the title. If an offender is convicted in another jurisdiction of an offense such as incest, kidnapping of a minor, unlawful imprisonment of a minor, video voyeurism, disseminating indecent materials to a minor, patronizing a prostitute who is a minor, promoting prostitution by force or intimidation or promoting prostitution where the prostitute is a minor, such offender should be referred to the Registry. The same procedure should be followed for offenders convicted of pornography type offenses such as using a child in a sexual performance and possessing/promoting a sexual performance by a child. Several federal offenses regarding pornography are specifically listed as registerable offenses in Correction Law §168-a(2)(d)(iii) under the definition of "sex offense": 18 U.S.C. §2251, 18 U.S.C. §2251A, 18 U.S.C. §2252, 18 U.S.C. §2252A and 18 U.S.C. §2260. However, these are not the only registerable federal offenses.

Also note that a conviction for the attempt version of any of these sex offenses except video voyeurism is registerable.

Parole's notice to the Board will include a copy of the entire interstate application file, including, where available, the offender's name and address and any identifying numbers; the previous and current supervising agencies; the crime(s) of conviction and sentence; the sentencing court; prosecuting agency, indictment or docket number; the name, address, and phone number of a contact person from the agency providing notification and copies of all available documents including the pre-sentence investigation, commitment papers, supervision and sentencing information.

3. Upon receipt of notice of a case from the Division of Parole, the Board will enter the offender's information into a database so that the status of the case can be monitored while it is being processed. Whenever possible, within three business days of receipt of notice of a case, the Board will make a determination as to whether or not the offender is required to register as a sex offender in New York State. The Board may be unable to make a determination within 3 business days when there is insufficient evidence to support a determination. If the Board cannot make the determination within 3 business days, it will make the determination as soon as practicable.

4. If a determination is made that the offender **is not required** to register in New York State, the Board will forward a letter addressed to the offender so stating to Parole Central Office with a copy to the Registry. Parole Central Office will then forward the letter to Interstate and to the appropriate Parole field office, to be given to the offender by the supervising Parole Officer when he or she reports.

5. If a determination is made that the offender **is required** to register in New York State, the Board will forward to Parole Central Office a computer generated Sex Offender Registration Form that reflects currently available registration information as well as a letter to the offender informing him or her of the requirement to register. This letter will advise the offender that he or she may submit materials to the Board within 15 days of the receipt of the letter for consideration in the risk level and designation recommendation process. The Board will send a copy of this letter to the Registry to serve as notification that the Board has determined that the offender is required to register and that Parole will be forwarding a signed Sex Offender Registration form when the offender reports upon arrival.

6. Parole Central Office will immediately forward the registration form and the offender letter to the appropriate Parole field office (copy to Interstate). The Parole Officer will transfer the information from the computer generated Sex Offender Registration Form to the official DCJS 4-part Sex Offender Registration Form (DCJS 3230). The field for the offender's risk level is checked off as "pending".

7. If an offender does not report in New York within the allowable time frames, Parole will notify the other state, close its interest in the case and notify the Board. At this point, the Board will close the case as well.

8. Upon the offender's arrival as instructed in New York, the Parole Officer will advise the offender of his or her registration duties and have the offender sign and date **both** the registration form and the letter from the Board. The Parole Officer will sign and date the letter as a witness to the fact that the letter from the Board was delivered to the offender. The Parole Officer will immediately forward the **signed** registration form **and** a **signed** copy of the letter from the Board to the offender to Parole Central Office. Parole Central Office will immediately send the registration form to the Registry and the signed offender letter to the Board (copies to Interstate).

9. Upon receipt of the signed registration form, the Registry will enter all of the information contained in that form into its database. An offender's risk level is entered on the Registry as "pending" until the Registry receives a copy of the final risk level determination from the Court. The Registry then mails a jurisdiction notification letter to the appropriate law enforcement agency.

10. Pursuant to the Sex Offender Registration Act, no later than thirty days prior to the Board making a recommendation, the sex offender shall be notified that his or her case is under review and that he or she is permitted to submit to the Board any information relevant to the review. Therefore, upon receipt of the copy of the signed offender letter from Parole, the Board will note the date that the offender signed the letter notifying the offender that his or her case was under review and will forward its recommendation to the Court no earlier than 30 days after that date.

11. A risk level and designation recommendation will be completed by the Board as expeditiously as possible. Once the recommendation is finalized, the designation, risk assessment instrument and case summary are entered into a database. The computer then generates a 3-part Sentencing Court Memorandum for the Court on which a final risk level and designation can be recorded as well as letters to the District Attorney's Office and the offender indicating the Board has forwarded its recommendation to the Court. Additionally, a designation sheet, risk assessment instrument, and case summary are generated for each party. These packages are sent to each party accordingly and a copy of the District Attorney's letter is also sent to the Registry as notification that the Board has forwarded its recommendation to the Court.

12. The Court then informs the District Attorney's office, the offender and the offender's attorney of the hearing date at least 30 days prior to the hearing. At the hearing, the Court determines the offender's final risk level and designation, indicates such on the 3-part form provided by the Board and attaches an order containing its findings of fact and conclusions of law. The Court keeps the yellow copy of its level and designation determinations, gives the offender the pink copy and forwards the white copy and order to the Registry.

13. The Registry, upon receiving the Court's risk level and designation determinations, immediately enters that information in its database and sends a copy to the Board. The Board enters the Court's determinations into the Board's database.

Appendix C

NEW YORK STATE SEX OFFENDER REGISTRATION ACT - DURATION OF REGISTRATION 1/18/2006

Risk Level	Designation	Duration of Registration	Is offender obligated to personally verify his/her address with local law enforcement every 90 days?
1	sexual predator	life	yes
1	sexually violent offender	life	no
1	predicate sex offender	life	no
1	no designation	20 years from initial registration	no
2	sexual predator	life	yes
2	sexually violent offender	life	no
2	predicate sex offender	life	no
2	no designation	life - but can petition for relief after having been registered for 30 years	no
3	sexual predator	life	yes
3	sexually violent offender	life	yes
3	predicate sex offender	life	yes
3	no designation or designation of lifetime registrant subject to petition for relief	life	yes

Chargeable Offenses - Sex Offender Registration Act (SORA)

Offense	Section	Sub	Class	Pen	Deq	NOC	Pl	Effective Date	Full Law Description
COR	0168-F		E	F	0	3612	Y	08/17/2007	Sex Offender Registry Violation- 1st Offense
COR	0168-F		D	F	0	3612	Y	01/21/1996	Sex Offender Registry Violation- Prior Offense
COR	0168-F	01A	E	F	0	3612	Y	08/17/2007	Sex Offender Fail To Register Prior To Discharge/Release 1st Offense
COR	0168-F	01A	D	F	0	3612	Y	01/21/1996	Sex Offender Fail To Register Prior To Discharge/Release Prior Offense
COR	0168-F	01B	E	F	0	3612	Y	08/17/2007	Sex Offender Fail To Register At Time Of Sentencing- 1st Offense
COR	0168-F	01B	D	F	0	3612	Y	01/21/1996	Sex Offender Fail To Register At Time Of Sentencing- Prior Offense
COR	0168-F	02A	E	F	0	3612	Y	08/17/2007	Sex Offender Fail To Mail Verification Form In 10 Days 1st Offense
COR	0168-F	02A	D	F	0	3612	Y	01/21/1996	Sex Offender Fail To Mail Verification Form In 10 Days Prior Offense
COR	0168-F	02B	E	F	0	3612	Y	08/17/2007	Sex Offender Fail To Provide Photo- 1st Offense
COR	0168-F	02B	D	F	0	3612	Y	01/21/1996	Sex Offender Fail To Provide Photo- Prior Offense
COR	0168-F	02B1	E	F	0	3612	Y	08/17/2007	Sex Offender Fail To Sign Verification Form/Confirm Employment - 1st Offense
COR	0168-F	02B1	D	F	0	3612	Y	05/31/2003	Sex Offender Fail To Sign Verification Form/Confirm Employment - Prior Offense
COR	0168-F	02B2	E	F	0	3612	Y	08/17/2007	Level 3 Sex Offender Fail To Provide Photo- 1st Offense
COR	0168-F	02B2	D	F	0	3612	Y	04/12/2006	Level 3 Sex Offender Fail To Provide Photo- Prior Offense
COR	0168-F	02B3	E	F	0	3612	Y	08/17/2007	Level 1 Or 2 Sex Offender Fail To Provide Photo- 1st Offense
COR	0168-F	02B3	D	F	0	3612	Y	04/12/2006	Level 1 Or 2 Sex Offender Fail To Provide Photo- Prior Offense
COR	0168-F	02B	E	F	0	3612	Y	08/17/2007	Sex Offender Fail To Sign Verification Form/Confirm Address - 1st Offense
COR	0168-F	02B	D	F	0	3612	Y	01/21/1996	Sex Offender Fail To Sign Verification Form/Confirm Address - Prior Offense

Appendix D


Chargeable Offenses - Sex Offender Registration Act (SORA)

COR	0168-F	02-C1	E	F	0	3612	Y	08/17/2007	Sex Offender Fail To Appear For Photo To Be Taken - 1st
COR	0168-F	02-C1	D	F	0	3612	Y	04/12/2006	Sex Offender Fail To Appear To Have Photo Taken - Prior
COR	0168-F	03	E	F	0	3612	Y	08/17/2007	Offense COR 168
COR	0168-F	03	D	F	0	3612	Y	01/21/1996	Level 3/Sex Predator Fail To Verify Address Every 90
COR	0168-F	04	E	F	0	3612	Y	08/17/2007	Level 3/Sex Predator Fail To Verify Address Every 90
COR	0168-F	04	D	F	0	3612	Y	01/21/1996	Days - 1st Offense
COR	0168-F	06	E	F	0	3612	Y	08/17/2007	Level 3/Sex Predator Fail To Report Change Address/Status In
COR	0168-F	06	D	F	0	3612	Y	07/01/2002	Sex Offender Fail To Report Change Address/Status In
COR	0168-F	06	E	F	0	3612	Y	08/17/2007	10 Days - 1st Offense
COR	0168-F	06	D	F	0	3612	Y	08/17/2007	Sex Offender Fail To Register - 1st Offense
COR	0168-G	02	E	F	0	3612	Y	08/17/2007	Nonresident Sex Offender Fail To Register - Prior Offense
COR	0168-T		E	F	0	3612	Y	08/17/2007	Sex Offender On Parole/Probation Fail To Register In 10
COR	0168-T		D	F	0	3613	Y	08/30/2005	Days - 1st Offense
COR	0168-U		B	M	0	4803	N	01/21/1996	Violate Sex Offender Registry Requirement - 1st Offense
COR	0168-V		A	M	0	3613	Y	08/30/2005	Violate Sex Offender Registry Requirement - 2nd Offense
COR	0168-V		D	F	0	3613	Y	08/30/2005	Unauthorized Release Of Information Required By
COR	0168-V		D	F	0	3613	Y	08/30/2005	Correction Law Art 6-C
COR	0168-V		D	F	0	3613	Y	08/30/2005	Registered Sex Offender Work Retail Sales- Frozen
COR	0168-V		D	F	0	3613	Y	08/30/2005	Desserts-1st Offense
COR	0168-V		D	F	0	3613	Y	08/30/2005	Registered Sex Offender Work Retail Sales- Frozen
COR	0168-V		D	F	0	3613	Y	08/30/2005	Desserts -2nd Offense

August 2008

New York State Division of Criminal Justice Services Office of Sex Offender Management Sex Offender Registry
Law enforcement line (518) 457-3175 www.criminaljustice.state.ny.us

Appendix D

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8305.08 SUPERSEDES: Parole Operations Directive January 2009	DATE: JANUARY 2011 PAGE 1 OF 5
APPROVING AUTHORITY MARK MANTHEI EXECUTIVE DIRECTOR	SOURCE: <u>Chapter 410 of the Laws of 2005</u> <u>Chapter 568 of the Laws of 2008</u> <u>9 N.Y.C.R.R. §8002.7</u> <u>Chapter 1 of the Laws of 2000</u> <u>Executive Law §259-c (17)</u> <u>Correction Law Article 6-C</u> <u>Penal Law §220.00 (14)</u> <u>Social Services Law Section §20 (8)</u> CROSS REFERENCES: <u>8405.09 – Community Preparation</u> <u>9203.02 – Case Management System</u>	SUBJECT: Sex Offender Registrants/Placement of Certain Sex Offenders in the Community

PURPOSE:

To instruct staff in the requirements of Chapter 568 of the Laws of 2008 which became effective on January 23, 2009. This Act requires rules and regulations that include guidelines and procedures on the placement of certain Sex Offender Registrants in the community and requires the Division to consider certain specific factors when investigating and approving community residential placement of all pending, Level 2 and Level 3 Sex Offender Registrants.

This legislation also requires the Division's involvement in and approval of temporary housing placements made by local social services districts for undomiciled Pending, Level 2 and Level 3 Sex Offender Registrants where a notice of person likely to seek access to local social services for homeless persons was provided to a local social services district pursuant to Executive Law §259-c (17). This includes both persons being released to supervision and at maximum expiration of sentence.

POLICY:

It is the policy of the Division to structure the community placement of sex offenders designated as Pending, Level 2 and Level 3 offenders pursuant to the Sex Offender Registration Act through the community preparation process of investigation in order to enhance public safety and facilitate the successful return of offenders to their home communities and/or successful placement of eligible offenders into residential services specific to identified needs and eligibility for services.

Additionally, Division will assist local social services districts that request investigation and approval of a potential temporary housing placement in any Pending, Level 2 or Level 3 Sex Offender Registry case being released from the NYS Department of Correctional Services where a notice of registered sex offender being released who is likely to seek access to local social services for homeless persons has occurred.

The following specific factors outlined in Section II. A (below) are required to be considered in approving a community residence placement for sex offenders. The procedures below guide the coordination process between the Division, the Department of Correctional Services and local social service districts.

PROCEDURE:

I. Community Preparation Assignment Regarding Sex Offender Registrants being released on presumptive release, parole, conditional release or post-release supervision

- A. Facility Parole staff will initiate the community preparation process for Sex Offender Registry cases in accord with Manual item 8405.09 and Case Management System (CMS) associated community preparation directives. Where a Registry risk level is **not** known or pending at the time of community preparation assignment, this information shall be recorded in the CMS narrative.

II. Community Preparation Investigation Process

- A. Field Parole staff will investigate the post-release program of Pending, Level 2 and Level 3 sex offenders being released to supervision from incarceration with the objective of attaining the best possible available residential placement. Such investigation shall include, but not be limited to, consideration given to the following factors:
 - 1. The sex offender's level of risk;
 - 2. Any applicability of Executive Law §259-c(14) (see Attachment A);
 - 3. Any known local laws or ordinances restricting the residency of certain sex offenders in the jurisdiction;
 - 4. The proximity of entities with vulnerable populations, including, but not limited to, minors, the elderly, or the disabled;

5. The location of other sex offenders required to register under the Sex Offender Registration Act, specifically whether there is a concentration of registered sex offenders in a certain residential area or municipality;
6. The number, if any, of registered sex offenders at a particular property;
7. The accessibility to family members, friends or other supportive services, including, but not limited to, locally available sex offender treatment programs with preference for placement of such individuals into programs that have demonstrated effectiveness in reducing sex offender recidivism and increasing public safety; and
8. The availability of permanent, stable housing in order to reduce the likelihood that the offender will be transient.

Staff will review all available case information, available sex offender registry and community mapping information as provided through the web based Critical Infrastructure Response Information System (CIRIS) in considering the needs of the case. CIRIS should be considered an investigatory tool. The investigating Officer shall make an entry into CMS, documenting CIRIS review by entering the contact code "CWI" (CIRIS web inquiry).

- B. Cases with an undomiciled residence proposal or where the investigating Parole Officer determines there is a need to refer the case for emergency housing assistance through the local social services district will be identified as early as possible in the community preparation investigation process. The assigned Parole Officer will immediately initiate contact with the local social services district to identify any potential temporary housing placement through the local district for investigation and approval. Where no location for investigation can be identified at this time, the case will likely require investigation on or near the date of release as detailed in Section II. C.
- C. The community preparation investigation findings and report will take into consideration:
 1. All relevant case information, including, but not limited to, the offender's criminal history; current crime of conviction; victim information and orders of protection;
 2. The investigation factors set forth in Section II. A (above);
 3. The structure of the supervision plan and the services to be afforded through either the Division of Parole or some other entity or service provider within the offender's community.

The field office community preparation investigation report will clearly identify any case where investigation and approval of a placement has not yet occurred. In such case, it is the responsibility of the facility Parole Officer to prepare the "Notice to Local Social Service District Of Registered Sex Offender Being Released To Supervision" (Form #9606 revised 12/08- see Attachment B). The form will identify contact information for the assigned Area Supervisor and will be faxed or emailed to the local social services district liaison and the

assigned Area Supervisor by no later than (7) seven days (or as soon as practicable in the case of an emergency release) prior to release.

- D. Where the Division of Parole has been notified in writing by a local social services district that a determination has been made that a Pending, Level 2 or Level 3 sex offender for whom a notice was received is in immediate need of shelter, and an investigation and approval of a proposed temporary housing placement by the DOP is required, the Area Supervisor will ensure that the proposed temporary housing placement is immediately investigated in accord with the anticipated release date and the factors outlined in Section II. A. The Division will share, in writing, the results of its investigation and findings with the local social services district. Investigation results will be communicated to the local social services district designee by email (see Attachment C).
- E. Where time allows and where the initial investigation by the Division resulted in disapproval of the proposed temporary housing location, the local district may request, in writing, an additional temporary housing investigation.
- F. When an investigation by the Division is impracticable within the timeframe necessary for the local social services district to meet the immediate housing need of the offender by the date of release, the Division will complete its investigation within 48 hours of the Division's receipt of the local social services district's notice that such temporary housing placement was necessary to meet the immediate housing need.
- G. In any supervision case where a local social services district places a sex offender into temporary housing and that location appears to be in conflict with local laws or ordinances regarding the placement of such individuals, the enforcement of such local laws or ordinances is best handled by local law enforcement officials acting in accord with the District Attorney's office for that county.

III. Persons releasing from the NYS Department of Correctional Services by maximum expiration of sentence who require notice to a local social services district pursuant to Executive Law §259-c(17)

- A. The New York State Department of Correctional Services (DOCS) identifies sex offender registrants who require notice to a local social services district pursuant to Executive Law §259-c(17). A notice is prepared by the DOCS Guidance and Counseling Unit and is sent approximately (7) seven days (or as soon as practicable in the case of an emergency release) prior to release to the county where the inmate reports he or she may return to (see Attachment D).

The DOCS notice provides the local social service district with contact information for the DOP Area Supervisor, based on information provided by the Division to DOCS. The notice directs the local social service district to send a written request for investigation of potential temporary housing placement to the identified Area Supervisor.

- B. Where the Division of Parole has been notified in writing by a local social services district that a determination has been made that an inmate for whom a notice was received from DOCS is in immediate need of shelter, and an investigation and approval of a contemplated temporary housing placement by the DOP is required, the Area Supervisor will:
1. Open and assign a community preparation investigation on CMS (see instructions in Attachment E); and
 2. Ensure that the contemplated placement is immediately investigated in accord with the anticipated release date and the factors outlined in Section II. A. Note however, the SARA condition, does **not** apply to persons being released without a supervision status; and
 3. Ensure preparation of a written report of the investigative findings, including any reason(s) for denial of a placement; and
 4. Communicate the investigation results by email (see Attachment C) with the local social services district.
- C. Where time allows and where the initial investigation by the Division resulted in disapproval of the proposed temporary housing location, the local district may request, in writing, an additional temporary housing investigation.
- D. When an investigation by the Division is impracticable within the timeframe necessary for the local social services district to meet the immediate housing need by the date of release, the Division will complete its investigation within 48 hours of the Division's receipt of the local social services district's notice that such placement was necessary to meet the immediate housing need.

ATTACHMENT A

ATTACHMENT B

ATTACHMENT C

ATTACHMENT D

ATTACHMENT E

Attachment A

NYS SEXUAL ASSAULT REFORM ACT (SARA) – CHAPTER 1 OF THE LAWS OF 2000 **EFFECTIVE 10/19/2000- Crime List updated 9/10**

EXECUTIVE LAW § 259-c, SUBDIVISION 14 REQUIRES THE BOARD OF PAROLE TO IMPOSE THE MANDATORY CONDITION OF RELEASE UPON ALL INMATES WHO ARE RELEASED TO THE COMMUNITY ON OR AFTER 2/01/2001 WHO ARE LEVEL 3 SEX OFFENDER REGISTRANTS OR OFFENDERS SERVING ONE OR MORE SENTENCES (INCLUDING JUVENILE OFFENDERS AND YOUTHFUL OFFENDERS) FOR THE FOLLOWING SPECIFIED OFFENSES (INCLUDES AN ATTEMPT TO COMMIT ANY OF THE FOLLOWING) WHERE THE VICTIM WAS UNDER THE AGE OF 18 AT THE TIME OF THE OFFENSE.

SECTION - CRIME - CLASS			SECTION - CRIME - CLASS		
130.20	Sexual Misconduct	A Misdemeanor	130.95	Predatory Sexual Assault	A-II Felony
130.25	Rape – 3 rd	E Felony	130.96	Predatory Sexual Assault Against a Child	A-II Felony
130.30	Rape – 2 nd	D Felony	135.05	Unlawful Imprisonment - 2 nd	A Misdemeanor
130.35	Rape – 1 st	B Felony	135.10	Unlawful Imprisonment - 1 st	E Felony
130.40	Sodomy – 3 rd / Criminal Sexual Act 3 rd	E Felony	135.20	Kidnapping - 2 nd	B Felony
130.45	Sodomy – 2 nd / Criminal Sexual Act 2 nd	D Felony	135.25	Kidnapping – 1 st	A-1 Felony
130.50	Sodomy – 1 st / Criminal Sexual Act 1 st	B Felony	135.35	Labor Trafficking	D Felony
130.52	Forcible Touching	A Misdemeanor	135.45	Custodial Interference – 2 nd	A Misdemeanor
130.53	Persistent Sexual Abuse	E Felony	135.50	Custodial Interference – 1 st	E Felony
130.55	Sexual Abuse – 3 rd	B Misdemeanor	135.55	Substitution of Children	E Felony
130.60	Sexual Abuse – 2 nd	A Misdemeanor	135.60	Coercion – 2 nd	A Misdemeanor
130.65	Sexual Abuse – 1 st	D Felony	135.65	Coercion – 1 st	D Felony
130.65-a	Aggravated Sexual Abuse – 4 th	E Felony	255.25	Incest -3 rd	E Felony
130.66	Aggravated Sexual Abuse – 3 rd	D Felony	255.26	Incest -2 nd	D Felony
130.67	Aggravated Sexual Abuse – 2 nd	C Felony	255.27	Incest- 1 st	B Felony
130.70	Aggravated Sexual Abuse – 1 st	B Felony	263.05	Use of a Child In a Sexual Performance	C Felony
130.75	Course of Sexual Conduct Against a Child – 1 st	B Felony	263.10	Promoting An Obscene Sexual Performance By A Child	D Felony
130.80	Course of Sexual Conduct Against a Child – 2 nd	D Felony	263.11	Possessing An Obscene Sexual Performance By A Child	E Felony
130.85	Female Genital Mutilation	E Felony	263.15	Promoting A Sexual Performance By A Child	D Felony
130.90	Facilitating a Sex Offense With a Controlled Substance	D Felony	263.16	Possessing A Sexual Performance By A Child	E Felony
130.91	Sexually Motivated Felony	Felony level same as specified offense	263.30	Facilitating A Sexual Performance by a Child with a Controlled Substance or Alcohol	B Felony

**ATTACHMENT B
NEW YORK STATE DIVISION OF PAROLE**

**NOTICE TO LOCAL SOCIAL SERVICES DISTRICT
OF REGISTERED SEX OFFENDER BEING RELEASED TO SUPERVISION**

This notice is provided pursuant to section 259-c (17) of the New York State Executive Law

Parole Office Providing Notification:

_____ Correctional Facility Phone: _____ Date: _____

The following information is provided to notify your agency that the below referenced individual is likely to seek access to local social services for homeless persons in your district:

Releasee True Name/Commitment Name: _____

DIN/NYSID/DOB: _____

Release Date: _____

Releasing Facility/County: _____

County of Expected Residence: _____

Any Known Need For Handicap Facilities (specify): _____

History Of Sexual Offense Includes (check all that apply):

___ offense(s) against minors

___ 0-6 years old

___ 7-12

___ 13-17

___ not specified

___ offense(s) against elderly

___ offense(s) against disabled

___ other, specify: _____

Please note an in-county temporary housing placement is preferred in this case. If there is a determination by your office that this individual is in need of immediate shelter and investigation and approval of the potential temporary housing placement by the NYS Division of Parole has not yet occurred, you must immediately notify the assigned Area Supervisor, by fax or email, as follows:

Area Supervisor: _____

Address: _____

Fax/Email: _____

Thank you.

cc: case file

Area Office

Central Office Facility Operations

Form# 9606 Revised 6/09

ATTACHMENT C

PART I:

Sample Local Social Services District Request for Executive Law §259-c (17) Investigation by the Division of Parole

TO: New York State Division of Parole
Area Supervisor _____

FROM: _____ County Department of Social Services
_____ (name)

RE: _____ (case name) _____ NYSID
_____ RELEASE DATE

DATE: _____

The _____ County Department of Social Services has received a notice on the above-referenced individual pursuant to section 259-c (17) of the New York State Executive Law.

Our office has determined that this individual is in need of immediate shelter and investigation and approval of the potential temporary housing placement noted below is required:

Name of Organization: _____
Address/Zip Code: _____

Phone number: _____
Contact Person: _____
Comments: _____

Please provide the results of your findings by no later than _____. Should you have any questions, please contact _____ at _____ (phone). Thank you.

PART II:

Sample Division of Parole Report to Local Social Services District Following Investigation of Case pursuant to Executive Law §259-c(17)

NYS DIVISION OF PAROLE REPORT OF TEMPORARY HOUSING PLACEMENT INVESTIGATION

DATE: _____

The above referenced potential temporary housing placement was investigated by the Division of Parole on _____ and was:

_____ approved; or
_____ disapproved (specify reasons: _____

Please contact me at _____ should you have any questions. If additional investigation is required, please submit a new written request. Thank you.
Submitted By: _____, Area Supervisor, NYS Division of Parole

ATTACHMENT D

NEW YORK STATE DEPARTMENT OF CORRECTIONAL SERVICES

NOTICE TO LOCAL SOCIAL SERVICES DISTRICT
OF REGISTERED SEX OFFENDER BEING RELEASED FROM PRISON UPON EXPIRATION OF
SENTENCE

This notice is provided pursuant to section 259-c (17) of the New York State Executive Law

This notice dated _____ is being provided by the Office of the Director of Guidance and Counseling for the New York State Department of Correctional Services, the mailing address for which is 1220 Washington Avenue, Albany, N.Y. 12226. The Director of this office is Galyn V. Schenk and the telephone number is (518) 457-5652. Since the below referenced person is being released because of the expiration of the underlying sentence of imprisonment, such person will NOT be under any criminal justice supervision while in the community. This notice is being provided because information obtained by the Department indicates that the person may seek access to local social services for homeless persons in your district:

Releasee True Name/Commitment Name: _____

DIN/NYSID/DOB: _____

Release Date: _____

Releasing Facility/County: _____

County of Expected Residence: _____

Any Known Need For Handicap Facilities (specify): _____

History Of Sexual Offense Includes (check all that apply):

- ☐ offense(s) against minors
 - ☐ 0-6 years old
 - ☐ 7-12
 - ☐ 13-17
 - ☐ not specified
- ☐ offense(s) against elderly
- ☐ offense(s) against disabled
- ☐ other, specify: _____

If there is a determination by your office that this individual is in need of immediate shelter and investigation and approval of the potential temporary housing placement by the NYS Division of Parole is required, you must immediately notify the assigned Area Supervisor, by fax or email, as follows:

Area Supervisor: _____

Address: _____

Fax/Email: _____

Thank you.

Cc: DOP CO Operations
Case file

revised 1/09

ATTACHMENT E

**CHAPTER 568 LEGISLATION- COMMUNITY PREP INVESTIGATION CASE
CREATION GUIDELINES FOR AREA SUPERVISORS AND/OR SENIOR PAROLE
OFFICERS**

1. Create a case in CMS

Facility: _____ CP Supervision Status: _____
 Area Assignment: _____ Prop Release Date: _____ (mm dd yy)
 Community Prep Type: _____ CP Investigation Due: _____ (mm dd yy)

Enter the following:

Facility subject is to be released from: (Press F4 to look up).

CP Supervision status of '00'

Area (Press F4 to look up)

Proposed release date (ME date), or current date if ME is past.

Comm prep type of '1' (straight date)

CP Investigation date (ME date), or current date if ME is past.

Press <F1>.

2. Create a proposed address in CMS

Enter the 'Proposed' address which needs to be investigated.

3. Create a contact type of 'UDF' with an activity code of 'AP' Address Proposed.

Press <F9> to enter contact.

Example:

```


Contact Date: 12 10 08   (mm dd yy)      Contact Time: 10 : 00 AM (00:00 AM/PM)
Contact Type: UDF UNDOMICILED DSS F      Confidential Contact: N NO (Y/N)
               A c t i v i t y   C o d e s
#1: AP ADDRESS PRO #2: __ ..... #3: __ ..... #4: __ .....
#5: __ ..... #6: __ ..... #7: __ ..... #8: __ .....
Location Code: __ ..... Address: _____
Comment:
REC'V FAX FROM DSS FOR ADDRESS APPROVAL.  CASE CREATED AND ADDRESS PROPOSED.

```

4. Assign the case to the Parole Officer. (Using the Source(03) transfer screen).

5. Advise PO that all contacts and address updates (New proposed, address rejected etc.) are also required to be entered into CMS.

6. To close the community prep when all work is completed, send an e-mail notification to Quality Control, asking that the case be deleted from the PO's caseload in CMS.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8305.09	DATE: JANUARY 2011
	SUPERSEDES:	PAGE 1 OF 7
APPROVING AUTHORITY MARK MANTHEI EXECUTIVE DIRECTOR	SOURCE:	SUBJECT: POLYGRAPH EXAMINATIONS
	CROSS REFERENCES:	

PURPOSE:

To establish guidelines and procedures for the use of polygraph examinations for sex offenders.

POLICY:

It is the policy of the Division of Parole to employ the use of polygraph examination with Individuals on parole, conditional release, or post-release supervision who are subject to discretionary or mandatory supervision as a sex offender as well as respondents ordered to Strict and Intensive Supervision and Treatment (SIST) by a County or Supreme Court under M.H.L. Article 10.

This policy will be used in conjunction with the Standards for Polygraph Examiners as described by The American Polygraph Association (APA). Methods utilized by Polygraph Examiners shall be as described by APA Policies and Procedures. Polygraph Examiners utilized will have graduated from an APA accredited school and have successfully completed an APA approved Post-Conviction Sex Offender Treatment Training Program.

PROCEDURE:

I. PAROLEES/RESPONDENTS SUBJECT TO POLYGRAPH EXAMINATIONS

- A. The following special condition of supervision will be imposed on all cases designated to be supervised as sex offenders, including those placed on Strict and Intensive Supervision and Treatment (SIST), unless otherwise ordered by a Court: "I will participate in the Division of Parole's polygraph program as directed by my Parole Officer. I understand that this will include periodic polygraph sessions consisting of a pre-examination interview, polygraph examination and post-test interview with the Polygraph Examiner or my Parole Officer."

B. The special condition to submit to polygraph examination will be imposed as follows:

1. Pre-release: All sex offender cases will be identified by Facility Parole Officer Staff. The Facility Parole Officer will notify the parolee/respondent of the requirement of polygraph examination, parole/SIST condition and will review the "Notice of Polygraph Examination" form (see Attachment A). A copy of the "Notice of Polygraph Examination" signed by the parolee/respondent will be placed in the case record and noted in CMS.
 2. Post-release: All sex offender cases, including those identified as discretionary cases and those cases ordered to SIST, will be reviewed upon case assignment by the Field Parole Officer. If the polygraph special condition was not previously imposed, the Parole Officer will impose the special condition (unless otherwise ordered by the Court in SIST cases). The Parole Officer will review the "Notice of Polygraph Examination" form (see Attachment A) with the parolee/respondent at the initial interview. A copy of the "Notice of Polygraph Examination" signed by the parolee/respondent will be placed in the case record and noted in CMS.
- C. For reasons such as described below, there may be occasion to document that waiver of polygraph examination is necessary, even if only for a temporary circumstance. Therefore, if after case review by the Parole Officer with the Senior Parole Officer it is determined that the parolee/respondent has a significant medical or mental health issue that precludes the use of polygraph (note: cases with a documented heart condition must provide medical clearance to the Parole Officer before a polygraph examination occurs), is pregnant, or, if in the case of a person on SIST, the Court specifically orders that the respondent not be subject to polygraph examination, an entry into CMS documenting the appropriate waiver reason must be made.

It is the responsibility of the Parole Officer/Senior Parole Officer to ensure that any changes to a waiver status are updated as necessary on CMS.

II. NEED FOR POLYGRAPH EXAMINATION

- A. In determining the need for polygraph examination, the Parole Officer, in case conference with the Senior Parole Officer, will consider whether such examination would serve one of the following purposes:
1. To deter re-offending through early detection of offense cycles; or
 2. to assist the treatment process in cases where there are offense denial or minimization issues; or
 3. to maximize the Parole Officer's ability to assess parolee/respondent risk and to more specifically address treatment and supervision needs; or
 4. to monitor adherence with conditions of supervision and/or in response to information regarding the parolee/respondent activities that might indicate possible parole and/or SIST violations.

Under no circumstance will a polygraph examination be performed at the request of a law enforcement or criminal justice agency other than the Division of Parole. If a parolee or treatment provider makes a request for an examination, the request must be conferenced with the Senior Parole Officer and consideration may be given if it is determined to be required for supervision purposes.

B. The Parole Officer will also review the types and purposes of polygraph examinations, as follows:

1. Full Disclosure or Sexual History Examination: Used to ensure complete disclosure of sexual history by the parolee/respondent and typically administered after a parolee/respondent has been in treatment 3-6 months.
2. Specific Issue Examination: Used to evaluate a specific behavior or allegation during supervision. It is also used when a parolee/respondent denies commission of the crime of conviction or minimizes the offense.
3. Maintenance or Monitoring Examination: Used to verify the parolee /respondent's compliance with treatment and/or supervision conditions. This is typically administered on a periodic basis, usually every six (6) months.

C. In any case recommended for polygraph examination, approval for scheduling an examination will be requested of the Area Supervisor by the Senior Parole Officer. A memorandum to the Area Supervisor will be prepared detailing the case and reasons for the examination.

III. SCHEDULING POLYGRAPH EXAMINATION

A. Upon receipt of approval by the Area Supervisor, the assigned Parole Officer will contact the Polygraph Unit for assignment of a Polygraph Examiner by submitting a completed Polygraph Examination Request Form and required materials (see Attachment B). The Parole Officer will keep a copy of the request in the case folder.

NOTE: SIST cases must be referred to the Polygraph Unit immediately upon release to SIST as a polygraph exam must be conducted on SIST cases within seven (7) business days of release to supervision. All SIST cases and all Level 3 sex offender registry cases will be given scheduling priority by the Polygraph Unit when a polygraph examination is requested. After approval of the polygraph request by the Area Supervisor, the Request for polygraph examination form (Attachment B) shall be submitted directly to the Polygraph Unit (Senior Parole Officer) with all required case materials.

B. The Polygraph Examiner will contact the Parole Officer within three (3) business days of receipt of a request to schedule a time and location for the examination. Any changes in the scheduling of the examination must be made by the Parole Officer through the Polygraph Examiner.

C. The Polygraph Unit will maintain a log (see Attachment C) of all polygraph examinations requested and conducted. The log will include the parolee/respondent's name, NYSID, assigned Parole Officer, assigned Polygraph Examiner, date of the examination, and record of Polygraph Examiner report. This log will be submitted monthly to the SOMU unit.

IV. EXAMINATION PROCEDURES

A. A *pre-examination consultation* between the Parole Officer and Polygraph Examiner is required and will consist of the following:

1. The Parole Officer and the Polygraph Examiner shall discuss the case and the Polygraph Examination Request Form, (see Attachment B). The Parole Officer will forward any additional required case materials to the Polygraph Examiner as requested by the Polygraph Examiner. The Parole Officer will inform the Polygraph Examiner if the parolee/respondent is on medication and/or has any notable medical, physical or mental health issues.
 2. The Parole Officer shall notify the parolee/respondent's counselor or therapist of the scheduled examination, and provide the therapist with the name/contact information of the assigned Polygraph Examiner.
 3. The Parole Officer shall notify the Polygraph Examiner of the name/contact information of the parolee/respondent's counselor or therapist. The Polygraph Examiner shall contact the parolee/respondent's counselor or therapist for consultation prior to the examination.
 4. The Parole Officer will notify the parolee/respondent of the polygraph examination date, time and location. The Parole Officer will review the polygraph special condition with the parolee/respondent prior to the examination.
- B. The Parole Officer will escort the parolee/respondent to the examination. The Polygraph Examiner will conduct a *pre-examination with the parolee/respondent* on the date of the examination, which will consist of the following:
1. The Polygraph Examiner will review polygraph examination procedures with the parolee/respondent.
 2. The Polygraph Examiner will have the parolee/respondent sign the Consent for Polygraph Examination (see Attachment D).
 3. The Polygraph Examiner will make final determination of the parolee/respondent's suitability to participate in the examination.
- C. Attendance at the commencement of the polygraph examination by the supervising Parole Officer is required. The Parole Officer must be available for contact to the Polygraph Examiner during the course of the examination. The Parole Officer will not be present in the examination room unless requested by the Polygraph Examiner. No third party may be in the examination room at the time of the polygraph exam.

V. POST-TEST INTERVIEW

- A. Upon completion of the polygraph examination, the Polygraph Examiner will conduct a post-test interview of the parolee/respondent. The Parole Officer and Polygraph Examiner may consult after the Polygraph Examiner's post-test interview.
- B. The Parole Officer may debrief the parolee/respondent upon completion of the polygraph examination.
- C. The Polygraph Examiner shall disclose all information discussed in the examination with the assigned Parole Officer and therapist, where appropriate.

VI. RESULTS OF POLYGRAPH EXAMINATION PROCESS AND PAROLE/SIST VIOLATIONS

- A. The Polygraph Examiner will prepare a written report (see Attachment E) of the results of the polygraph examination and send a copy to the Area Supervisor /Senior Parole Officer/Parole Officer within five (5) business days of the examination. The report will be reviewed and a copy placed in the case file. Polygraph results will generally include the following:

- 1.
- 2.
- 3.
- 4.

The Senior Parole Officer/Parole Officer will use the Polygraph Examiner's report as a tool in assessing the parolee/respondent's supervision and/or treatment compliance. Results of the polygraph examination indicating deception

The Polygraph Examiner's exam results form is considered privileged information. It may be released to the parolee/respondent if requested upon completion unless

- B. If during a polygraph examination or while in the presence of the Polygraph Examiner a parolee/respondent admits to criminal activity, or violations of parole, conditional release, post-release supervision and/or SIST conditions the Polygraph Examiner may

VII. RECORD KEEPING AND RELEASE OF INFORMATION

- A. Upon completion of the polygraph exam, the Polygraph Examiner must make a CMS entry (contact code "PA" for polygraph administered and activity code "P" for polygraph).
- B. Each Polygraph Examiner will maintain a log of all polygraph examinations and keep it in a separate file for polygraph examination purposes, (Attachment C.) Such logs are considered privileged for record request purposes. Prior to responding to any record requests, the identities of persons other than the parolee/respondent will be redacted.
- C. Each month, the Polygraph Examiner will forward a copy of the polygraph examination log to the Polygraph Senior Parole Officer.
- D. All polygraph exams must be recorded by the Polygraph Examiner via video/audio equipment and the CD reviewed. The video and/or audio recording of the polygraph examination is considered investigatory information and shall be maintained by the Examiner in a secure locked cabinet in accord with agency record retention policy. All recordings will be labeled according to date of examination, name of parolee/respondent and NYSID.
- E. Requests for copying or viewing the videotape from persons or entities other than the Parole Officer shall be referred to Counsel's Office for response.
- F. The Polygraph Examiner will release a copy of the Polygraph Examination Consent Form (see Attachment D) to the parolee/respondent upon completion.
- G. Polygraph Examination Questionnaire Results Chart, Score Sheet, Examiner notes are considered investigatory and are not to be released.

VIII. The need for subsequent Polygraph Examination on individual cases will be reviewed on an on-going basis by the Senior Parole Officer and Parole Officer. Polygraph re-examination may occur as described in Section II of this policy. A monthly on-line print report, NOPOL6, will be available and may be used as a tool to help ensure eligible cases under supervision are referred for polygraph examination.

ATTACHMENT A

ATTACHMENT B

ATTACHMENT C

ATTACHMENT D

ATTACHMENT E

ATTACHMENT F

ATTACHMENT A

NEW YORK STATE DIVISION OF PAROLE

NAME: _____ NYSID: _____

NOTICE OF POLYGRAPH EXAMINATION REQUIREMENTS AND PROCEDURES

The following are the requirements and procedures associated with the Polygraph examination special condition:

1. As a condition of parole, conditional release, post-release supervision and/or Strict and Intensive Supervision and Treatment (SIST), I may be required to undergo one or more polygraph examinations.
2. The purpose of the polygraph examination is to determine whether or not I am complying with my sex offender treatment, parole, conditional release, post-release supervision and/or SIST supervision conditions, and/or if I have re-offended while on parole, conditional release, post-release supervision and/or SIST supervision.
3. Such examinations will occur as directed by my supervising Parole Officer.
4. The polygraph examination **session** consists of a pre- test interview, a polygraph examination with a NYS Division of Parole Polygraph Examiner, and a post-test interview with my Parole Officer and/or Polygraph Examiner.
5. Failure to fully cooperate and participate in any aspect of the polygraph examination **session**, including refusal to answer questions during the examination, may be grounds for violation of my parole, conditional release, post-release supervision and/or SIST supervision.
6. Answers to questions during the polygraph examination **session** may be used in determining appropriate sanctions to be implemented by the Division of Parole or an appropriate Court, including a parole violation hearing or Article 10 civil management proceedings. Additionally, admissions to criminal behavior will result in referral to appropriate law enforcement authorities for investigation and possible prosecution.
7. Any admission to criminal behavior during the polygraph examination **session** may be used against me in a court of law.

I have fully read the above conditions regarding the New York State Division of Parole's Polygraph requirements and procedures. I fully understand each of the above statements as they have been presented to me.

Parolee/Respondent Signature/Date: _____ / _____

Parole Officer Signature/Date: _____ / _____

cc: case file
parolee/respondent

revised 6/08

NEW YORK STATE DIVISION OF PAROLE
REQUEST FOR POLYGRAPH EXAMINATION

To: *NYS Division of Parole Polygraph Unit*

From: PO _____ SPO _____ AS _____

Re: *Parolee/Respondent Name:* _____

NYSID: _____ *SIST case:* ___Y___N *Level 3 SOR:* ___Y___N

Date: _____

Instructions: Please complete the following information as fully as possible (use additional paper if needed). Upon completion, please forward along with the following to the NYS Division of Parole Polygraph Unit. **Note:** Once received, the Polygraph Unit will notify you as to the status of this request.

Materials to Attach:

<input type="checkbox"/> pre-sentence report	<input type="checkbox"/> inmate status report/violation reports
<input type="checkbox"/> legal history	<input type="checkbox"/> psychiatric report if available
<input type="checkbox"/> police/victim statement	<input type="checkbox"/> medical report if available
<input type="checkbox"/> other pertinent information	<input type="checkbox"/> release sheet

Does parolee/respondent fully admit to instant offense? Y or N

If no, provide summary: _____

Is parolee/respondent in sexual offender counseling? Y or N

If yes, name, address and phone number of counselor: _____

Are there any current medical/mental health concerns? Y or N

List: _____

Is parolee/respondent taking any prescribed medications? Y or N

List: _____

Has the parolee/respondent taken a polygraph before? Y or N

If yes, date and name of polygraph examiner and results: _____

Type of test requested (check one):

<input type="checkbox"/>	Maintenance Examination (Parole/SIST Condition compliance)
<input type="checkbox"/>	Monitoring Examination (Sexual behavior under supervision)
<input type="checkbox"/>	Denial test (denies all or part of instant offense)
<input type="checkbox"/>	Sexual History (used in conjunction with therapist request)

NEW YORK STATE DIVISION OF PAROLE

Request For Polygraph Examination (continued)

Are there any specific issues that you would like the polygraph examiner to inquire about during the examination: _____

Brief description of Instant Offense: _____

Parolee/Respondent contact information:

Name: _____

Address: _____

Phone: _____

Parole Officer contact information (required as polygraph examiner must be able to speak with supervising officer at any point during examination):

Name: _____

SPO: _____

Office Phone: _____

Pager: _____

Office _____

Report Day: _____

Cellular: _____

cc: case file

(This portion for Polygraph Unit use)

Date Received: _____

Request Status: Approved _____ Denied _____

Returned for Additional Information _____

cc: Polygraph Unit
Parole Officer

revised 6/08

ATTACHMENT C

PART I:

Sample Local Social Services District Request for Executive Law §259-c (17) Investigation by the Division of Parole

TO: New York State Division of Parole
Area Supervisor _____

FROM: _____ County Department of Social Services

(name)

RE: _____ (case name) _____ NYSID

RELEASE DATE

DATE: _____

The _____ County Department of Social Services has received a notice on the above-referenced individual pursuant to section 259-c (17) of the New York State Executive Law.

Our office has determined that this individual is in need of immediate shelter and investigation and approval of the potential temporary housing placement noted below is required:

Name of Organization: _____
Address/Zip Code: _____

Phone number: _____
Contact Person: _____

Comments: _____

Please provide the results of your findings by no later than _____. Should you have any questions, please contact _____ at _____ (phone). Thank you.

PART II:

Sample Division of Parole Report to Local Social Services District Following Investigation of Case pursuant to Executive Law §259-c(17)

NYS DIVISION OF PAROLE REPORT OF TEMPORARY HOUSING PLACEMENT INVESTIGATION

DATE: _____

The above referenced potential temporary housing placement was investigated by the Division of Parole on _____ and was:

_____ approved; or
_____ disapproved (specify reasons: _____

Please contact me at _____ should you have any questions. If additional investigation is required, please submit a new written request. Thank you.

Submitted By: _____, Area Supervisor, NYS Division of Parole

New York State Division of Parole

Consent for Polygraph Examination

Name of Parolee/Respondent: _____ Date: _____
Name of Examiner: _____ Place of Examination: _____

In accordance with my Parole, conditional release, post-release supervision conditions and/or my conditions of Strict and Intensive Supervision and Treatment (SIST), I, _____, agree to be examined for the mutual benefit of the New York State Division of Parole and myself. I understand that the procedure of this psycho-physiological detector of deception (PDD), also referred to as polygraph examination, involves utilizing electronic components to record physiological reactions. I authorize the placement of the components upon my person. I do not object to having this procedure recorded through audio and/or video means.

I understand that the results of this polygraph examination and related information will be provided to my Parole Officer, and/or sex offender therapist. If on SIST, my results may also be shared with the NYS Office of the Attorney General, the NYS Office of Mental Health and/or the NYS Office of Mental Retardation and Developmental Disabilities.

I understand that I agreed to take this polygraph examination as a condition of my parole, conditional release, post-release supervision and/or SIST. I understand that failure to participate in a polygraph examination as instructed by my Parole Officer and the examiner may result in violation of parole, conditional release, post-release supervision and/or SIST. I understand results that may indicate deception will not be the sole reason for possible parole and/or SIST violation but may be considered by the New York State Division of Parole and/or a civil management Court at violation proceedings. I understand that I may choose not to answer questions. However, failure to answer questions regarding my conformance to parole, conditional release, post-release supervision and/or SIST conditions, in the discretion of the Parole Officer and Polygraph Examiner, may be deemed as a failure to participate in a meaningful way and be submitted to the New York State Division of Parole as a parole, conditional release, post-release supervision and/or SIST violation.

I release the New York State Division of Parole and/or their agents from any liability connected in any way with this polygraph examination. Also, to the best of my knowledge, at this time, I have no physical or mental conditions that could prevent me from taking this polygraph examination.

I have fully read and completely understand the above statements.

Parolee/Respondent: _____ Date: _____ Time: _____

Examiner: _____ Date: _____ Time: _____

Post-Test

I, the undersigned, confirm that I was given a polygraph examination on _____. I further state that all statements made by me were made freely without threats, coercion or intimidation. I certify that all questions asked in the examination were reviewed with me prior to the examination. I was well treated by the polygraph examiner and was not harmed in any way.

Parolee/Respondent: _____ Examiner: _____
Time: _____

cc: case folder; parolee/respondent

revised 6/08

NEW YORK STATE DIVISION OF PAROLE

Polygraph Examination Final Report

To: _____

From: _____

Date: _____

Case Information:

Parolee/Respondent: _____

DIN: _____

Referred By: _____

Place of Exam: _____

NYSID: _____

DOB: _____

Date of Exam: _____

Examiner: _____

Exam Results and Information:

This report () does () does not contain investigatory or evaluative information.

Submitted By: _____ Polygraph Examiner

Date: _____

cc: case file


revised 6/08

I, _____, voluntarily, without threats, duress, coercion, force, promises of immunity or reward, make the following admissions to the New York Division of Parole and/or its agents based upon information developed about me during the administration of a polygraph examination. I understand that this information may be used by the New York State Division of Parole (or other law enforcement agencies) in determining any and all appropriate sanctions against me including, but not limited to, parole, conditional release, post-release supervision and/ or Strict and Intensive Supervision and Treatment violation and/or criminal prosecution.

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page.

Witness/Title: _____ Date: _____ Time: _____

revised 6/08

<p>NEW YORK STATE DIVISION OF PAROLE</p>  <p>POLICY AND PROCEDURES MANUAL</p>	<p>MANUAL ITEM: 8305.10 SUPERSEDES:</p>	<p>DATE: DECEMBER 2010</p>
<p>APPROVING AUTHORITY</p> <p>MARK MANTHEI EXECUTIVE DIRECTOR</p>	<p>SOURCE:</p> <p>CROSS REFERENCES: <u>Executive Law §259-c(14)</u> <u>Correction Law §168-1(6)</u> <u>Penal Law §70.40(2)</u> <u>Penal Law §220(14)</u> <u>Guidelines for the Supervision of Sex Offenders</u></p>	<p>PAGE 1 OF 3</p> <p>SUBJECT;</p> <p>Sexual Assault Reform Act (SARA) Mandatory Condition</p>

PURPOSE:

To provide direction regarding the condition of release to supervision required by the Sexual Assault Reform Act (SARA) and referenced in Executive Law. This condition applies to all inmates released to the community on or after 2/01/2001 who are Level Three sex offender registrants or offenders serving one or more sentences (including Juvenile Offenders and Youthful Offenders) for certain specified offenses.

POLICY:

It is the policy of the Division of Parole to identify persons being released on parole, conditional release, local conditional release and post-release supervision appropriate for imposition of a mandatory condition of supervision pursuant to Executive Law §259-c (14) and to impose the condition at the time of release or other point of eligibility determination. The language of the mandatory condition is:

"I WILL NOT knowingly enter into or upon any school grounds as that term is defined in Penal Law §220(14), or any other facility or institution primarily used for the care or treatment of persons under the age of eighteen (18) while one or more of such persons under the age of eighteen (18) are present.

Only under the following circumstances may I enter upon or into the buildings or grounds of such facilities or institutions:

When I am a registered student, participant or employee of one of the described institutions or facilities and have the written permission of either the superintendent or chief administrator of such institution or facility and my Parole Officer for the limited purpose stated by these individuals;

- 1) I am an employee of a business that has a contract with one of the described institutions or facilities and have the written permission of either the superintendent or chief administrator of such institution or facility and my Parole Officer for the limited purpose stated by these individuals; or
- 2) I have a family member who is enrolled in one of the described institutions or facilities and have the written permission of either the superintendent or chief administrator of such institution or facility and my Parole Officer for the limited purpose stated by these individuals.
- 3) I have a family member who is enrolled in one of the described institutions or facilities and have the written permission of either the superintendent or chief administrator of such institution or facility and my Parole Officer for the limited purpose stated by these individuals.

“School grounds” means (a) in or on or within any building, structure, athletic playing field, playground or land contained within the real property boundary line of a public or private elementary, parochial, intermediate, junior high, vocational, or high school, or (b) any area accessible to the public located within one thousand feet of the real property boundary line comprising any such school or any parked automobile or other parked vehicle located within one thousand feet of the real property boundary line comprising any such school. For the purposes of this section an “area accessible to the public” shall mean sidewalks, streets, parking lots, parks, playgrounds, stores and restaurants.

Nothing in this condition is to be construed as restricting any lawful condition of supervision that may be imposed on the offender.

PROCEDURE:

I. FACILITY OPERATIONS

- A. Facility staff will review cases in preparation for scheduled interviews and reviews to determine whether a particular case should be identified to the Parole Board for imposition of the mandatory condition. Where identified, the requirement for imposition of the mandatory condition must be noted on the Inmate Status Report or other report prepared for the Parole Board. The inmate is to be notified regarding the mandatory condition during the pre-Board and/or pre-release interview. Where there is no opportunity for Parole Board action prior to release, facility staff must impose the condition. Eligible cases include those found in Appendix A.
- B. Facility staff must ensure the condition is entered in GES, noted on the community preparation request (IS-2) and recorded on the release documents.

II. FIELD OPERATIONS

- A. Field staff will review cases under supervision to ensure that any eligible case (see Appendix A) has the mandatory condition imposed. Since Sex Offender Registry risk levels may be determined post-release, or may be modified by a Court, staff must monitor this on an on-going basis and take action as appropriate. Imposition of the condition by the assigned Parole Officer will be provided to the parolee in writing and documented in CMS.

APPENDIX A

APPENDIX B

IS-2

Appendix A

NYS SEXUAL ASSAULT REFORM ACT(SARA)-CHAPTER 1 OF THE LAWS OF 2000 EXECUTIVE LAW §259-c SUBDIVISION 14

EXECUTIVE LAW § 259-c, SUBDIVISION 14 REQUIRES THE BOARD OF PAROLE TO IMPOSE THE MANDATORY CONDITION OF RELEASE UPON ALL INMATES WHO ARE RELEASED TO THE COMMUNITY ON OR AFTER 2/01/2001 WHO ARE LEVEL 3 SEX OFFENDER REGISTRANTS OR OFFENDERS SERVING ONE OR MORE SENTENCES (INCLUDING JUVENILE OFFENDERS AND YOUTHFUL OFFENDERS) FOR THE FOLLOWING SPECIFIED OFFENSES (INCLUDES AN ATTEMPT TO COMMIT ANY OF THE FOLLOWING) WHERE THE VICTIM WAS UNDER THE AGE OF 18 AT THE TIME OF THE OFFENSE:

SECTION	CRIME	CLASS	SECTION	CRIME	CLASS
130.20	Sexual Misconduct	A Misdemeanor	130.95	Predatory Sexual Assault	A-II Felony
130.25	Rape - 3 rd	E Felony	130.96	Predatory Sexual Assault Against a Child	A-II Felony
130.30	Rape - 2 nd	D Felony	135.05	Unlawful Imprisonment - 2 nd	A Misdemeanor
130.35	Rape - 1 st	B Felony	135.10	Unlawful Imprisonment - 1 st	E Felony
130.40	Sodomy - 3 rd / Criminal Sexual Act 3 rd	E Felony	135.20	Kidnapping - 2 nd	B Felony
130.45	Sodomy - 2 nd / Criminal Sexual Act 2 nd	D Felony	135.25	Kidnapping - 1 st	A-I Felony
130.50	Sodomy - 1 st / Criminal Sexual Act 1 st	B Felony	135.35	Labor Trafficking	D Felony
130.52	Forcible Touching	A Misdemeanor	135.45	Custodial Interference - 2 nd	A Misdemeanor
130.53	Persistent Sexual Abuse	E Felony	135.50	Custodial Interference - 1 st	E Felony
130.55	Sexual Abuse - 1 st	B Misdemeanor	135.55	Substitution of Children	E Felony
130.60	Sexual Abuse - 2 nd	A Misdemeanor	135.60	Coercion - 2 nd	A Misdemeanor
130.65	Sexual Abuse - 1 st	D Felony	135.65	Coercion - 1 st	D Felony
130.65-a	Aggravated Sexual Abuse - 4 th	E Felony	255.25	Incest - 3 rd	E Felony
130.66	Aggravated Sexual Abuse - 1 st	D Felony	255.26	Incest - 2 nd	D Felony
130.67	Aggravated Sexual Abuse - 2 nd	C Felony	255.27	Incest - 1 st	B Felony
130.70	Aggravated Sexual Abuse - 1 st	B Felony	263.05	Use of a Child In a Sexual Performance	C Felony
130.75	Course of Sexual Conduct Against a Child - 1 st	B Felony	263.10	Promoting An Obscene Sexual Performance By A Child	D Felony
130.80	Course of Sexual Conduct Against a Child - 2 nd	D Felony	263.11	Possessing An Obscene Sexual Performance By A Child	E Felony
130.85	Female Genital Mutilation	E Felony	263.15	Promoting A Sexual Performance By A Child	D Felony
130.90	Facilitating a Sex Offense With a Controlled Substance	D Felony	263.16	Possessing A Sexual Performance By A Child	E Felony
130.91	Sexually Motivated Felony	Felony level same as specified offense	263.30	Facilitating A Sexual Performance by a Child with a Controlled Substance or Alcohol	B Felony

APPENDIX B

State of New York Executive Department- Division of Parole

MANDATORY CONDITION OF RELEASE TO PAROLE SUPERVISION

Name: _____ NYSID: _____
Date of Release: _____ Supervision Maximum: _____
Facility: _____

I, _____, acknowledge that under the provisions of my Conditions of Release that the following Mandatory Condition has been imposed upon me and that this Mandatory Condition will remain in effect until the termination of my legal period of supervision,
_____ unless otherwise amended in writing by the Division of Parole.

"I WILL NOT knowingly enter into or upon any school grounds as that term is defined in Penal Law §220(14), or any other facility or institution primarily used for the care or treatment of persons under the age of eighteen (18) while one or more of such persons under the age of eighteen (18) are present.

Only under the following circumstances may I enter upon or into the buildings or grounds of such facilities or institutions:

- 1) When I am a registered student, participant or employee of one of the described institutions or facilities and have the written permission of either the superintendent or chief administrator of such institution or facility **and** my Parole Officer for the limited purpose stated by these individuals;
- 2) I am an employee of a business that has a contract with one of the described institutions or facilities and have the written permission of either the superintendent or chief administrator of such institution or facility **and** my Parole Officer for the limited purpose stated by these individuals; or
- 3) I have a family member who is enrolled in one of the described institutions or facilities and have the written permission of either the superintendent or chief administrator of such institution or facility **and** my Parole Officer for the limited purpose stated by these individuals.

"School grounds" means (a) in or on or within any building, structure, athletic playing field, playground or land contained within the real property boundary line of a public or private elementary, parochial, intermediate, junior high, vocational, or high school, or (b) any area accessible to the public located within one thousand feet of the real property boundary line comprising any such school or any parked automobile or other parked vehicle located within one thousand feet of the real property boundary line comprising any such school. For the purposes of this section an "area accessible to the public" shall mean sidewalks, streets, parking lots, parks, playgrounds, stores and restaurants.

I hereby certify that I have read and understand the above mandatory condition of my release and that I have received a copy of this mandatory condition.

Signed this _____ day of _____, 20____.

Releasee: _____ Witness: _____

Copy to: Releasee; Case File; Central File

STATE OF NEW YORK - EXECUTIVE DEPARTMENT - DIVISION OF PAROLE

FORM 3002

NAME

DATE

DEPT. NO.

TO:

NYSID No.

FROM:

STATUS

BOARD DATE

FIELD INVESTIGATION ASSIGNMENT DATA

FIELD CONTACTS REQUESTED

ADDRESS

RELATIONSHIP

INSTITUTIONAL PAROLE OFFICES:

REMARKS:

AREA(S) OF ASSIGNMENT

1 2 3 4 5 6 7 8 9 0 DATE COMPLETED

ATTACHED ARE:

NAME

FACILITY NO.

TYPE OF INVEST.

REC'D AREA OFFICE

ASSIGNED PAROLE OFFICER

DATE DUE

PAROLE OFFICER

FACILITY

FACILITY ASSIGNMENT DATA

NAME

DEPT. NO.

NYSID No.

STATUS

DATE OF ASSIGNMENT

TYPE OF INVESTIGATION

NAME

AREA

DUE DATE

RECEIVED

1 2 3 4 5 6 7 8 9 0

NAME	FACILITY NO.	TYPE OF INVEST.	REC'D AREA OFFICE	ASSIGNED PAROLE OFFICER	DATE DUE	
					PAROLE OFFICER	FACILITY

STATE OF NEW YORK - EXECUTIVE DEPARTMENT - DIVISION OF PAROLE

FORM 3002

NAME

DATE

3

DEPT. NO.

TO:

NYSID No.

FROM:

STATUS

BOARD DATE

FIELD INVESTIGATION ASSIGNMENT DATA

FIELD CONTACTS REQUESTED	ADDRESS	RELATIONSHIP

INSTITUTIONAL PAROLE OFFICES:

REMARKS:

AREA(S) OF ASSIGNMENT	1	2	3	4	5	6	7	8	9	0	DATE COMPLETED
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ATTACHED ARE:

NAME	FACILITY NO.	TYPE OF INVEST.	REC'D AREA OFFICE	ASSIGNED PAROLE OFFICER	DATE DUE	
					PAROLE OFFICER	FACILITY

FACILITY ASSIGNMENT DATA

NAME

DEPT. NO.

NYSID No.

STATUS

DATE OF ASSIGNMENT

TYPE OF INVESTIGATION

NAME	AREA	DUE DATE	RECEIVED
	1 2 3 4 5 6 7 8 9 0		

STATE OF NEW YORK - EXECUTIVE DEPARTMENT - DIVISION OF PAROLE

FORM 3002

NAME

DATE

DEPT. NO.

TO:

NYSID No.

FROM:

STATUS

BOARD DATE

FIELD INVESTIGATION ASSIGNMENT DATA

FIELD CONTACTS REQUESTED

ADDRESS

RELATIONSHIP

INSTITUTIONAL PAROLE OFFICES:

REMARKS:

AREA(S) OF ASSIGNMENT

1 2 3 4 5 6 7 8 9 0 DATE COMPLETED

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NAME

FACILITY NO.

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REC'D AREA OFFICE

ASSIGNED PAROLE OFFICER

DATE DUE

PAROLE OFFICER

FACILITY

FACILITY ASSIGNMENT DATA

NAME

DEPT. NO.

NYSID No.

STATUS

DATE OF ASSIGNMENT

TYPE OF INVESTIGATION

NAME

AREA

DUE DATE

RECEIVED

1 2 3 4 5 6 7 8 9 0

STATE OF NEW YORK - EXECUTIVE DEPARTMENT - DIVISION OF PAROLE

FORM 3002

NAME

DATE

DEPT. NO.

TO:

NYSID No.

FROM:

STATUS

BOARD DATE

FIELD INVESTIGATION ASSIGNMENT DATA

FIELD CONTACTS REQUESTED	ADDRESS	RELATIONSHIP

INSTITUTIONAL PAROLE OFFICES:

REMARKS:

AREA(S) OF ASSIGNMENT	1	2	3	4	5	6	7	8	9	0	DATE COMPLETED
-----------------------	---	---	---	---	---	---	---	---	---	---	----------------

ATTACHED ARE:

NAME	FACILITY NO.	TYPE OF INVEST.	REC'D AREA OFFICE	ASSIGNED PAROLE OFFICER	DATE DUE	
					PAROLE OFFICER	FACILITY

FACILITY ASSIGNMENT DATA

NAME

DEPT. NO.


NYSID No.

STATUS

DATE OF ASSIGNMENT

TYPE OF INVESTIGATION

NAME	AREA										DUE DATE	RECEIVED
	1	2	3	4	5	6	7	8	9	0		

<p>NEW YORK STATE DIVISION OF PAROLE</p>  <p>POLICY AND PROCEDURES MANUAL</p>	<p>MANUAL ITEM: 8305.11</p> <p>SUPERSEDES:</p>	<p>DATE: JANUARY 2011</p> <p>PAGE 1 OF 3</p>
<p>APPROVING AUTHORITY</p> <p>MARK MANTHEI EXECUTIVE DIRECTOR</p>	<p>SOURCE:</p> <p>CROSS REFERENCES: 8305.08 - Placement of Certain Sex Offender Registrants in the Community (not posted yet) <u>8405.09- Community Preparation</u> <u>9201.01-Special Conditions of Release</u></p>	<p>SUBJECT:</p> <p>Parole Board Imposed Special Conditions of Release Regarding Residency</p>

PURPOSE:

To instruct staff in the requirements associated with requesting special conditions of release regarding residency from the Board of Parole for cases with a history of sexual offending and for whom the Division is unable to approve an appropriate residence, and the continuing the community preparation investigation responsibilities of staff for cases where special conditions of release regarding residency have been imposed.

POLICY:

It is the policy of the Division of Parole to facilitate the return of offenders with a history of sexual offense to the community in keeping with case needs and public safety concerns.

PROCEDURE:

I. Community Preparation – Area Office Request For Special Conditions Regarding Residency

- A. Where the assigned area office is unable to approve a viable residence program for a sex offender and residency in a shelter situation is inappropriate or unavailable, special conditions regarding residency may be requested of Central Office Operations Sex Offender Management Unit (SOMU) through the respective Regional Director's office, in the following situations:

1. Residency conditions are required to ensure public safety;
 2. The offender is persistent and/or predatory in sexual offending behavior;
 3. The offender's crime and/or history of sexually deviant behavior is particularly violent and/or heinous; or
 4. If the sexually deviant behavior involves particularly vulnerable populations (children; adolescents; physically frail or elderly victims) and no residence program is available that limits offender access to these populations.
- B. Additionally, the following requirements must be met:
1. All residency options were investigated by assigned field staff and outcomes/reasons for denial documented;
 2. Referral to the Regional Parole Services Program Specialist for potential program placement was completed and no placement was secured;
 3. Written request for special conditions regarding residency documenting all efforts at placement and reasons for finding a residence unsuitable as well as a rationale for the request, was submitted through the chain of command;
 4. The Regional Director or designee has reviewed the request and is satisfied that the special conditions were necessary to ensure public safety;
 5. The request was submitted to SOMU by the Regional Director or designee no less than 10 business days prior to the anticipated release date. If the request did not allow adequate time for SOMU review, reasons for the delay in submission will be provided.
- C. Upon receipt of a request, SOMU will review the case and forward approvable submissions to the Parole Board for further action. SOMU will log all requests and track case outcomes.

II. Facility and Area Office Responsibility For Cases with Parole Board Imposed Special Condition Regarding Residency


- A. Where the Parole Board has imposed special conditions regarding residency (GES SC 29 and SC 30), staff are responsible for the following:
1. Upon receiving written notice from the Board of Parole that the special residency conditions were imposed, facility staff will make an entry into the most recent Board decision in GES by using SC 29 and SC 30. The language of the special conditions are:

“I will propose a residence to be approved by the Division of Parole and will assist the Division in any efforts it may make on my behalf to develop an approved residence” (GES SC 29); and

“ I will reside only in the residence approved by the Division of Parole.”
(GES SC 30).

The date the conditions were imposed and the Commissioner's name must also be entered. The Amended copy of the 9026 must then be distributed to all parties, including the Inmate Records Coordinator (IRC) at the owning facility.

2. The FPOII or designee will meet with the inmate and present the inmate with a copy of the amended 9026, which will include SC 29 and SC 30. The Officer will give the inmate an opportunity to sign for receipt of conditions, but the inmate's failure to sign does not negate the special conditions.
3. The case will be maintained on CMS/PARMIS as an active community preparation assignment. Continuing efforts by the field officer and Regional Parole Services Program Specialist to secure placement of the offender must occur and be documented both in the facility and field chronological record in CMS.
4. Any case with the special residency conditions beyond the conditional release date will continue to appear before the Parole Board as regularly scheduled. Two (2) months prior to reappearance, facility staff will request the assigned field office to prepare a status report for Board reappearance. Field staff will submit a report to facility staff for Board review detailing any investigations conducted regarding the inmate, both by the field officer and the Parole Services Program Specialist.
5. Any case with post-release supervision status where special residency conditions have been imposed will be released to supervision no later than the incarcerative maximum expiration date.
6. SOMU will provide a monthly report to the Regional Directors updating case status for any case where the special conditions regarding residency was identified to SOMU, so as to assist regional staff in case tracking.

NEW YORK STATE DIVISION OF PAROLE	MANUAL ITEM: 8315.01	DATE: AUGUST 2004
 POLICY AND PROCEDURES MANUAL	SUPERSEDES: November 1985	PAGE 1 OF 2
APPROVING AUTHORITY: ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law CROSS REFERENCES: 8255.00 - Temporary Release 9211.52 - Office of Professional Responsibility and Internal Audit 9401.00 - Unusual Incident 9405.01 - Arrest and Transport of Prisoners	SUBJECT: REPORTING ESCAPEES FROM FACILITIES AND ABSCONDERS FROM TEMPORARY RELEASE

PURPOSE:

To instruct Parole staff in reporting escapees from facilities and absconders from temporary release.

POLICY:

If a report is received that an inmate has escaped from a facility or absconded from temporary release, Parole staff will

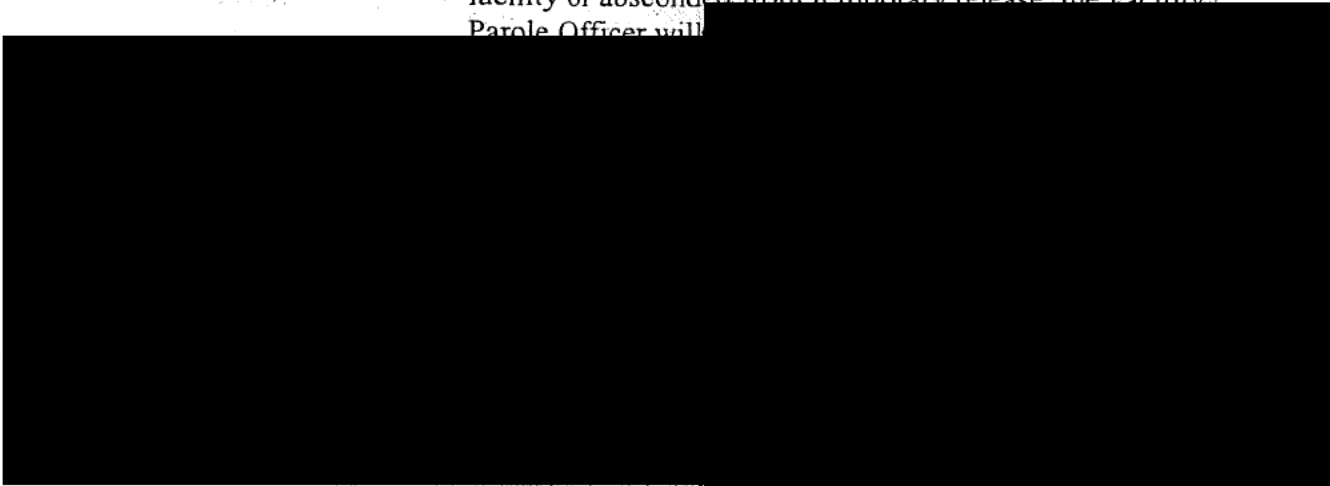
DEFINITIONS:

N/A

PROCEDURE:

I. NOTIFICATION


Facility Parole Officer


1. When a report is received that an inmate has escaped from a facility or absconded from temporary release, the Facility Parole Officer will
- 

B. Field Parole Officer

1. 

NOTE: Where a Community Preparation Assignment has been made, it will remain pending for two weeks. If the inmate is returned to the facility within that period, the Area Office/Bureau is to be notified to complete the assignment and notify any change in conditional release or Board date. If the inmate is not returned by the end of the second week, Facility Parole staff will submit a memo to the Area Office/Bureau, copy to Office of Information Services (OIS)/PARMIS, requesting cancellation of the assignment. When the inmate is subsequently returned, a new assignment will be made based on status at that time.



NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8320.01	DATE: JULY 2004
	SUPERSEDES: April 1994 November 1985	PAGE 1 OF 2
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: EXECUTIVE LAW Section 74 Correction Law I, D	SUBJECT: ASSIGNED RELEASE DATES
	CROSS REFERENCES: 8405.09 – Community Preparation 9212.11 – Re-Release	

PURPOSE:

To instruct Parole staff in the assigning of release dates.

POLICY:

Once a release decision has been granted, Parole staff will assign the earliest possible release date for the inmate.

DEFINITIONS:

1. *Initial/Merit Open Dates*: For Initial/Merit applicants, the release date is the Parole Eligibility Date/Merit Date.
2. *Parole (Straight) Dates*: For Reapplicants with an approved program the release date is within seven (7) working days or less, calculated from the date the Board concludes.
3. *Parole Open Dates*: For Reapplicants for whom an approved program has not been received at the date of the Board, the release date is six weeks OR EARLIER from the date the Board concludes.

NOTE: Open Dates which are past Parole Eligibility Date (PE) will be deemed to be OR EARLIER unless the Board stipulates otherwise.

PROCEDURE:

Release Dates


A. Parole staff

1. Area Supervisors/Bureau Chiefs responsible for the completion of Community Preparation investigations will maintain controls to ensure timely completion.

2. Upon approving a Community Preparation program, the Senior Parole Officer will authorize release via telephone/e-mail to the owning facility Parole Office as soon as is possible, will provide PONs and will send the written program approval.

NOTE: Any hold established by the Parole Board which is less than two years will, at the discretion of the Facility Parole II, result in the Community Preparation Investigation (IS-2) being sent out prior to the next Board appearance.

NOTE: Initial applicants who have approved programs, such as inmates participating in a Temporary Release Program, will be released on their PE date. Where this date falls on a weekend or holiday, the eligibility date may be advanced to the preceding business day. Friday release dates are to be avoided except where the inmates have a residence and where they will be able to make an arrival report at the Area Office prior to 4:00 p.m.

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8330.00	DATE: AUGUST 2004
	SUPERSEDES: February 1996 October 1993	PAGE 1 OF 2
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law 2	SUBJECT: CALENDAR SHEET
	CROSS REFERENCES: 8345.00- Parole Board Appearance Postponement 8355.00- Full Board Case Review 8505.00- Rescission 9212.11- Re-release of Parole Violators	

PURPOSE:

To instruct Facility Parole staff in obtaining and verifying *Calendar Sheets*.

POLICY:

Parole staff will ensure that accurate and complete Calendar Sheets are provided to each panel of the Board of Parole.

DEFINITION:

1. *Calendar Sheets*: The Department of Correctional Services (DOCS)/Office of Child and Family Services (OCFS) generated alphabetical listing of inmates/residents scheduled to appear before a particular panel of the Board of Parole.


PROCEDURE:

I. Calendar Sheet Preparation

A. Facility Parole staff

1. Parole staff will obtain the Calendar Sheet as prepared by the Inmate Record Coordinator (IRC)/Office of Child and Family Services (OCFS) at each facility.
2. Parole staff will verify that the alphabetical listing of inmates is grouped as follows:

-
- a. Or Earlier (OE) Cases/Postponed Cases (includes Merit OE, Initial Reappearance OE, and Minimum Period of Incarceration (MPI) OE (OE)
 - b. Early Conditional Parole for Deportation (ECPDO)
 - c. Medical Parole (Medical)
 - d. Special Consideration (SP Consdr)
 - d. Conditional Release Condition(s) (CRC)
 - e. Merit Presumptive Release Condition(s) (MPRC)
 - f. Presumptive Release Condition(s) (PRC)
 - g. Merit Time (Merit Time)
 - h. Alternate Date (Alt Date)
 - i. Initial (Initial)
 - j. Parole Immediately Eligible (PIE)
 - k. Reappearance (Reapp)
 - l. Parole Violator Reappearance (PV Reapp)
 - m. Conditional Release Conditions-PV (CRC-PV)
 - n. Judicially Sanctioned PV (PVR-JSP)
 - o. Minimum Period of Incarceration (MPI)
 - p. Rescission (Rescission)
3. At the time of the Board the IRC/OCFS will provide Parole staff with four copies of the Calendar Sheet, and staff will distribute them as follows:
 - a. One copy to each Board member
 - b. One copy to the Facility Parole Officer II (FPO II)/Senior Parole Officer (SPO).

NEW YORK STATE DIVISION OF PAROLE  POLICY AND PROCEDURES MANUAL	MANUAL ITEM: 8340.03	DATE: AUGUST 2004
	SUPERSEDES: September 1988	PAGE 1 OF 3
APPROVING AUTHORITY ANTHONY G. ELLIS II, EXECUTIVE DIRECTOR	SOURCE: Executive Law Mental Hygiene Law 33.13 (c) (9)	SUBJECT: REQUEST FOR INFORMATION FROM MENTAL HEALTH AGENCIES WITHOUT RELEASEE CONSENT
	CROSS REFERENCES: 8140.00 – Confidential Information	

PURPOSE:

Instruct Parole staff in obtaining *necessary information* from mental health providers without the consent of a releasee.

POLICY:

In order to enhance public safety and to aid in developing appropriate treatment programs for offenders returning to the community, Parole staff will, if a releasee refuses to give consent for mental health providers to release information, apply under the provisions of law to obtain the necessary information.

DEFINITION:

Necessary Information: Information that can be obtained without consent, may be limited to a summary of the record, including but not limited to: the basis for referral to the facility or mental health agency; the diagnosis upon admission and discharge; a diagnosis and description of current mental condition; the current course of treatment; medication and therapies; and the facility's or mental health providers recommendations for future mental hygiene services, if any.

NOTE: Mental health providers may provide this information to the Division without client consent only with respect to clients who have received active treatment from the mental health agency and for persons who are under the active supervision of the Division of Parole.


PROCEDURE:

I. Obtaining Mental Health Information

Parole Officer

1. The Officer will first ask the releasee to give consent for the mental health provider to release the necessary information to the Division of Parole.
2. If the releasee refuses to give consent, the Officer will then case conference with the supervisor and, if necessary, initiate appropriate action as follows:
 - a. make a written request to the provider(s) indicating that the request is being made pursuant to Mental Health Law 33.13 (c) (9);
 - b. include the releasee's name, social security number, date of release, special conditions of release, maximum expiration date, and date of birth.
 - c. include the name and telephone number of the Officer making the request and the name of the supervisor.
 - d. state if this is an emergency request.
 - e. state the information being requested and the specific safety or programmatic reasons for the request.
 - f. advise the mental health agency that the material will be kept in a safe and secure area accessible only to Parole staff authorized to request such information.

NOTE: In an emergency, the Officer may make a verbal request only if the releasee is believed, as a result of mental illness, to pose a threat of substantial harm to self or others. The mental health agency may provide information limited to that relating to the releasee's dangerousness, current course of treatment, and any clinical recommendations. When this information is requested and received verbally, it is the Officer's obligation to follow-up with a written letter documenting the verbal request and the reason for it. The mental health agency shall confirm the content of the request and response in writing within 10 days and will include a notice prohibiting any unauthorized re-disclosure.

<p>NEW YORK STATE DIVISION OF PAROLE</p>  <p>POLICY AND PROCEDURES MANUAL</p>	<p>MANUAL ITEM: 8341.00</p> <p>SUPERSEDES:</p> <p>October 2009 Manual Item</p>	<p>DATE: March 2010</p> <p>PAGE 1 of 6</p>
<p>APPROVING AUTHORITY</p> <p>ANDREA W. EVANS, CHAIRWOMAN & CEO</p>	<p>SOURCE:</p> <p>Drug Law Reform Act of 2009 (April 7, 2009)</p> <p>CROSS REFERENCES:</p> <p>Chapter 56 - Laws of 2009</p>	<p>SUBJECT:</p> <p>Consent to Release of Information Concerning Chemical Dependence Treatment For Criminal Justice Clients OASAS Form TRS-49 (09.09)</p>

PURPOSE:

To provide Facility Operations, Field Operations, and Reentry Services staff with instructions for obtaining consent for release of information concerning chemical dependence treatment and to provide instructions to staff regarding the requirement to confirm receipt of the consent document (Office of Alcoholism and Substance Abuse Services Form TRS – 49) by the provider (community based program). The OASAS consent to release information form (TRS – 49) is the New York State Criminal Justice Services source document for purposes of monitoring program referrals, admissions, treatment specifications, discharge data, and provider performance for services provided to the criminal justice population within the State of New York. OASAS Form TRS – 49 is defined as a universal consent form that will be utilized by the Division of Parole, probation departments, district attorneys, and the court system when making referrals to community based treatment providers. This formal consent permits OASAS to share client data with criminal justice agencies identified on the consent form and also provides for the exchange of client specific treatment information between the treatment program and the referring criminal justice agency, and other authorized agencies (or authorized practitioners).

Note: References to a “community based program”, “community based treatment” or “provider” will include outpatient, residential, and inpatient treatment programs.

POLICY:

The Division of Parole shall adhere to all laws, regulations, and rules pertaining to the confidentiality of records and the conditions under which assessment or evaluation information, intake summary, diagnosis, treatment recommendations, admission status, course and level of treatment, progress, compliance, and prior treatment history information may be obtained or

released. Commencing on October 7, 2009, the Division of Parole will exclusively utilize the New York State Office of Alcoholism and Substance Abuse Services (OASAS) consent form (Form TRS – 49) for all referrals for assessments by community based alcohol and substance abuse treatment programs and for monitoring program participation and treatment specifications. The Division will insure that the OASAS client consent form is utilized in connection with referrals made in preparation for release from a New York State Department of Correctional Services facility, release from a New York State Office of Children and Family Services facility, release from a New York State Office of Mental Health facility, while under parole or post-release supervision in the community, while being supervised under the provisions of Article 10 of the Mental Hygiene Law, and in preparation for re-release from a local (county) correctional facility.

The New York State Office of Alcoholism and Substance Abuse Services (OASAS) is responsible for the distribution of Form TRS – 49 to treatment providers across New York State and OASAS is also responsible for providing direction and guidance to providers with respect to utilization.

DEFINITIONS:

1. ***NYS Office of Alcoholism and Substance Abuse Services, Consent to Release of Information Concerning Chemical Dependence Treatment for Criminal Justice Clients (OASAS Form TRS – 49):*** the consent form to be utilized when referring inmates and releasees to community-based alcohol and substance abuse treatment programs.

Note: Facility, Field, and Reentry Services staff will download the OASAS TRS – 49 form via the *Lotus Notes Operation's Forms* database Appendix B. Staff is required to access the form in this manner in order to ensure the accuracy of data and to complete the Case Management System (CMS) record entry.

2. ***Referring Entity and Staff Member's Name (OASAS Form TRS – 49):*** the referring entity shall be defined as the New York State Division of Parole and the consent document will include the Bureau/Area Office of assignment and full address for staff assigned to the case at the time of the referral. The staff member's name will be the parole officer responsible for the supervision of the releasee. Assigned staff will enter the appropriate contact telephone number in the address section of the TRS – 49. During the community preparation phase this shall also be defined as the parole officer who will be responsible for the supervision of the releasee at time of release from a NYS Department of Correctional Services correctional facility, NYS Office of Children and Family Services facility, NYS Office of Mental Health facility, the Willard Drug Treatment Campus, or a local correctional facility (county jail).
3. ***NYSID - New York State Criminal History Identification (OASAS Form TRS – 49):*** Parole staff responsible for completing OASAS Form TRS – 49 must verify the accuracy of the NYSID number recorded on the form. The Operation's Forms database will pre-populate the NYSID number based on the current assignment record. The NYSID number will be utilized by the treatment (provider) program, OASAS, and the NYS Division of Criminal Justice Services (DCJS) for both individual and criminal justice population data monitoring.

4. ***Referring Entity Type (OASAS Form TRS - 49):*** referrals from the Division of Parole will be defined as follows:
 - a. ***Parole General*** – 1) the referral is made while the releasee is under supervision, 2) in the revocation process and under consideration for restoration to a community-based program, 3) will be re-released or restored from a local correctional facility, 4) will be released from a NYS Office of Children and Family Services facility, 5) will be released from a NYS Office of Mental Health facility, or 6) will be released from a NYS Department of Correctional Services facility other than the Willard Drug Treatment Campus or a Shock Incarceration facility.
 - b. ***Parole Shock Release*** – the referral is made after the releasee has completed the Shock Incarceration Program.
 - c. ***Parole Willard Release*** - the referral is made after the releasee has completed the Willard Drug Treatment Program.
 - d. ***Parole Re-Sentence Release*** - the referral is made following re-sentence and release under the provisions of Chapter 56 of the Laws of 2009. This release may occur at a general confinement facility under the jurisdiction of the NYS Department of Correctional Services or release may occur at a correctional facility under the jurisdiction of the New York City Department of Correction (Rikers Island).
5. ***Chemical Dependence Treatment Provider (OASAS Form TRS – 49):*** name and location of the treatment provider that is to be recorded on the consent form.
6. ***Consent Date (OASAS Form TRS – 49):*** the date the releasee signed the consent form is defined as the effective date of consent.
7. ***Title 42 of the Code of Federal Regulations, 42 CFR Part 2:*** under the statutory provisions of Part 2, the regulations impose restrictions upon the disclosure and use of alcohol and drug abuse patient records maintained in connection with the performance of any federally assisted alcohol and drug abuse program. Disclosure with consent is defined in the statute. Regulations specified in Part 2 prohibit the disclosure and use of patient records unless certain circumstances exist. The regulations are intended to insure that an alcohol or drug abuse patient in a federally assisted alcohol or drug abuse program is not made more vulnerable by reason of the availability of his or her patient record than any individual who has an alcohol or drug problem and who has not sought treatment.
8. ***Health Insurance Portability and Accountability Act of 1996 (HIPAA) 45 CFR Pts. 160 & 164:*** commonly referred to as the “Security Rule” or “Privacy Rule” and covers the electronic creation, transfer, storage, and receipt of Protected Health Information (PHI). PHI is defined as any electronic information that is created or received by a health care provider that relates to the past, present, or future physical or mental health of an individual and that identifies the individual. The rule requires appropriate safeguards to protect the privacy of personal health information and sets limits and conditions on use and disclosure.

9. **Chapter 56 of the Laws of 2009:** 2009 law revisions and drug law reform expansion enacted on April 7, 2009 including: a) new sentencing laws for drug crimes (first and second felony offender provisions), b) expanded eligibility and opportunity for participation in the shock incarceration program, c) Willard DTC eligibility expanded and District Attorney consent provision repealed, d) judicial diversion opportunities expanded for the chemically dependent, e) provision for conditional sealing of records upon successful completion of diversion program, f) re-sentencing opportunity for felony class B drug offenders, and g) new crimes established for sale of controlled substance by an adult to a minor and the “kingpin” statute with emphasis on large scale profiteering drug organizations.
10. **Chemical Dependence:** for purposes of this consent procedure, “chemical dependence” is defined as drug addiction, alcoholism, or the abuse of drugs and alcohol.

I. PROCEDURE:

- A. The Regional Directors, Deputy Regional Directors, Statewide Director of Reentry Services, Upstate Director of Reentry Services, Reentry Services Regional Managers, Director of the Sex Offender Management, Area Supervisors, and Senior Parole Officers will insure that assigned staff comply with the approved methodology for accessing and completing the consent form via the Operation’s Forms database;

Note: Use of photocopied (or reproduced) TRS – 49 consent forms is unacceptable and the Operations chain of command is to prohibit use of the form in this manner.

- B. The releasee will be informed of the need for consent to release information in a manner that assures understanding of the specific type of information requested and the benefits of releasing such information. Staff will define the purpose of the disclosure and emphasize the need to communicate with program staff in order to obtain information such as treatment need, case history, course and type of treatment, program participation, attendance, and toxicology/urinalysis findings and reports;
- C. The releasee will be informed that the need for treatment services is not contingent upon the releasee’s decision concerning authorization for the release of information;
- D. The releasee will be informed that the consent to release information will remain in effect and will not be revoked until there has been either a formal and effective termination of the sentence or period of post-release supervision, or there has been a revocation of parole, post-release supervision, or local conditional release;
- E. The consent shall be given on the **“Consent to Release of Information Concerning Chemical Dependence Treatment for Criminal Justice Clients”, Form NYS OASAS Form TRS – 49.** This form is to be downloaded from the Operation’s Forms database.

F. Staff will insure that the consent form (TRS - 49) is complete and accurate, and includes the following information:

1. ***Client's Last Name, First, and Middle Initial*** - the last name, first name, and middle initial of the releasee;
2. ***Referring Entity's Staff Member's Name*** – the assigned Parole Officer's name;
3. ***Referring Entity's Name and Address*** – the NYS Division of Parole, Bureau/Area Office of assignment, complete address, and telephone contact number for assigned staff;
4. ***Client's New York State Identification Number (NYSID)*** – staff will verify the accuracy of the pre-populated NYSID number ID;
5. ***Referring Entity Type*** – staff will select one of the following referring types:
 - 1) Parole-General, 2) Parole-Release Shock, 3) Parole-Release Willard, or
 - 4) Parole-Release Resentence (see definition section of this procedure);
6. ***Chemical Dependence Treatment Provider*** – staff will record the name and location of the treatment provider (program) and any additional authorizations such as other agencies or practitioners in the space provided; and
7. ***Name of Client and Signature of Client w/date*** – obtain the signature of the releasee and confirm the date of the consent.

G. Completion of the consent form and confirmation of receipt of the form by the treatment provider will be recorded in the Case Management System (CMS) record of the releasee. The following CMS contact will be created by completing the form:

OFP – OASAS Form TRS – 49 created and printed


H. Staff will send a copy of the completed consent form to the treatment provider and confirm receipt of the form by the provider. Form TRS – 49 will be personally delivered by staff or sent to the provider via fax transmission. Assigned staff is required to confirm receipt of the consent form by communicating directly with provider staff. The following CMS contact will be created:

OVR – OASAS Form TRS – 49 verification of receipt by provider

I. Staff will provide the releasee with a copy of the consent form and the original consent form will be placed in the releasee's case file.

II. PAROLE OPERATION STAFF RESPONSIBILITIES

- A. Effective October 7, 2009 and thereafter, the Regional Directors, Deputy Regional Directors, Statewide Director of Reentry Services, Upstate Director of Reentry Services, Reentry Services Regional Managers, Director of the Sex Offender Management Unit, Area Supervisors, and Senior Parole Officers will insure that all alcohol and substance abuse treatment referrals will be made via submission of a completed NYS OASAS "Consent to Release of Information Concerning Chemical Dependence Treatment for Criminal Justice Clients", Form TRS – 49.
- B. In the event of a self referral by a releasee or upon receipt of notification of a self referral, or in the event of a referral by another agency or practitioner, assigned staff will complete the TRS – 49 consent to release information and submit the form to the provider as soon as practicable. Operations staff will need to clearly indicate and detail the additional agency and practitioner authorizations, such as cases processed under the provisions of Article 10 of the Mental Hygiene Law where the NYS Office of Mental Health is responsible for making the actual treatment referral. Staff will obtain consent and confirm receipt of the form by the provider (Procedure - Section I, A – I).
- C. The Area Supervisors and Senior Parole Officers are responsible for implementation of this procedure and insuring that assigned staff remains in compliance with the consent requirement.

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APPROVING AUTHORITY ANDREA W. EVANS CHAIRWOMAN and CHIEF EXECUTIVE OFFICER	SOURCE: Executive Law CROSS REFERENCES: <u>8330.00 - Calendar Sheet</u>	SUBJECT: POSTPONEMENTS OF PAROLE BOARD RELEASE INTERVIEWS

PURPOSE:

To instruct Facility Parole staff and the Board of Parole in processing a Board appearance *postponement* and an inmate's refusal to appear for a regularly scheduled appearance before the Parole Board.

POLICY:

Where a postponement of an inmate's Parole Board appearance is warranted, Facility Parole staff will process the postponement pursuant to this procedure. When a panel of the Board of Parole determines that a request for a postponement is legitimate and warranted, staff will calculate any denial of discretionary release from the date of the originally scheduled appearance.

DEFINITIONS:

Postponements: Postponements are adjournments of a parole release interview granted by a panel of the Parole Board for reasons including, but not limited to; the unavailability of an inmate, completion of records or a request by the inmate's counsel that relates to pending litigation or an administrative appeal. A postponement may be rendered on an "or earlier basis"; wherein the postponement exceeds one month and the case can appear before the Board sooner if the purpose of the postponement has been resolved. "Or earlier" postponements are made for a specific number of months (e.g. "3 months or earlier, "6 months or earlier" etc.).

PROCEDURE:

I. Processing Postponements

A. Facility Parole Officer

1. When a facility parole officer is informed by an inmate prior to his or her appearance before the Parole Board that he or she intends to seek a postponement of their release interview, the facility parole officer shall prepare a memorandum to the Board informing the panel that a postponement will be sought by the inmate and state the reasons provided by the inmate for the postponement.
2. When an inmate intends to request a postponement of their scheduled appearance before the Parole Board, he or she shall inform their facility parole officer of such intention no less than seven (7) days prior to the regularly scheduled interview.
3. The inmate shall be produced and appear before the panel of the Parole Board at his or her regularly scheduled release interview for the purpose of making the formal request for the postponement and the Board's consideration of the same. The Board shall determine whether to grant or deny the request. If the request is granted, the Board shall set a next appearance date in terms of months and year. If the request is denied, the Board shall proceed with the interview.
4. If the inmate has not informed his or her facility parole officer of their intention to seek a postponement of his or her regularly scheduled Parole Board appearance, the inmate must make such request on the record before the Board and articulate the reasons for such request. The Board may grant or deny such request in accordance with paragraph I.3 *supra*.

II. Inmate Refusals to Appear Before the Parole Board

- A. If an inmate refuses to appear before a panel of the Parole Board at his or her regularly scheduled release interview, the Board shall conduct the release interview *in absentia*.
- B. Where an inmate refuses to appear before a panel of the Parole Board, the facility parole officer will interview the inmate and obtain the inmate's signature on *Refusal to Appear* form (Appendix A). If the inmate fails or refused to sign the document, such refusal shall be noted on the document by the facility parole officer.
- C. All activity regarding the inmate's signing of the Refusal to Appear form or his or her refusal to sign such form, shall be recorded in the inmate's case management system (CMS) record.

APPENDIX A

APPENDIX A

Refusal to Appear

TO: The Board of Parole

I _____ wish to inform you that I am
(Inmate's Name & DIN)

refusing to appear at my parole release interview scheduled for _____
(mm/dd/yyyy)

at the _____ Correctional Facility and understand that the Parole
Board will make a determination regarding my possible release to parole
supervision in my absence.

Signed: _____

Date: _____

Witness: _____
(Facility Parole Officer Signature)