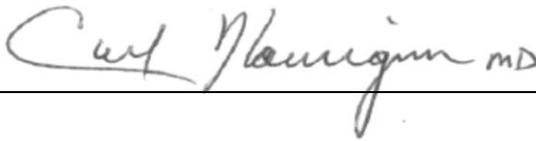


 <p>Corrections and Community Supervision</p> <p>DIRECTIVE</p>	TITLE Full Parole Board Case Review For Extraordinary Medical Circumstances		NO. 4044
			DATE 10/26/2015
SUPERSEDES DIR #4044 Dtd. 10/23/2015	DISTRIBUTION A	PAGES PAGE 1 OF 2	DATE LAST REVISED
REFERENCES (Include but are not limited to) Directive #4304	APPROVING AUTHORITY 		

- I. DESCRIPTION:** This directive defines the Department’s policy and procedures for processing requests for parole reconsideration based on changes in the inmate’s health status.
- II. ELIGIBILITY:** Eligibility is limited to inmates who have completed service of the court imposed minimum portion of their sentence, and for whom the Board of Parole has already denied release. This process constitutes an application to the Board of Parole for a Full Board Case Review based upon a rapid deterioration in medical condition.

In any case where an inmate has been certified as eligible for medical parole based on medical evaluation of his or her health status (see Directive #4304, “Medical Parole”), has passed his or her parole eligibility date, and has demonstrated deterioration of condition, the Deputy Commissioner/Chief Medical Officer shall refer that inmate for a Full Parole Board Case Review under the provisions of this directive.

Note: There are exclusionary crimes for discretionary release consideration by a panel of the Board of Parole.

III. PROCEDURE

A. Requests

1. Facility or Central Office staff may initiate a request for discretionary release consideration for an inmate based on extraordinary medical circumstances by writing to the Deputy Commissioner/Chief Medical Officer. A request for a Full Parole Board Case Review can also be initiated, on behalf of the inmate, by the family or other concerned parties.
2. This request, for a Full Parole Board Case Review, shall identify the inmate by name and DIN and be accompanied by an up-to-date medical status summary which includes verification of the seriousness of the illness and the extraordinary circumstances for which the request is being made.
3. The request must demonstrate how the inmate’s medical condition has deteriorated since he or she was last interviewed by the Board of Parole.
4. The request shall also be accompanied by a comprehensive medical summary, a Patient Review Instrument (PRI), NYS Screen, and information on registered victims from the Office of Victim Assistance.

B. Evaluation and Referrals

1. The Deputy Commissioner/Chief Medical Officer shall evaluate the inmate's medical condition, gather verifying documentation, and determine if the request represents an appropriate case for Board review.
2. With the approval of the Commissioner, the Deputy Commissioner/Chief Medical Officer may endorse appropriate requests to:

Secretary to the Board of Parole

NYS Board of Parole

97 Central Avenue, 4th Floor

Albany, N.Y. 12206

3. When a case is approved by both the Deputy Commissioner/Chief Medical Officer and the Commissioner, the Office of Victim Assistance will again be notified that the case is proceeding to the Board of Parole. Correspondence between the Office of Victim Assistance and Central Office Health Services will be included in the documentation forwarded to the Board of Parole for review.
4. In cases where an inmate has been certified as eligible for medical parole based on medical evaluation of his or her health status (see Directive #4304), has passed his or her parole eligibility date, and has demonstrated deterioration of condition, the Deputy Commissioner/Chief Medical Officer shall refer that inmate for a Full Parole Board Case Review under the provisions of this directive.

Note: There are no exclusionary crimes for discretionary release consideration by a panel of the Board of Parole. Health Services will provide a medical discharge plan collaborating with Community Supervision to identify the appropriate discharge placement, if approved.

- C. Follow-up Requests: Facility medical staff shall cooperate fully and promptly with requests by Community Supervision or Central Office staff for information and reports required by the Board to render a decision in response to the Department's request.
- D. Board Determination: Following the special consideration appearance before the panel of the Board of Parole and upon receipt of the decision, Community Supervision staff at the owning facility shall immediately notify the Superintendent, the ranking Health Services staff member at the facility, and the Inmate Records Coordinator of the panel's decision. Community Supervision staff shall provide a copy of the Parole Board Decision Notice (Form #9206) to each of the aforementioned staff members, as soon as practicable. The Superintendent or designee shall notify the Deputy Commissioner/Chief Medical Officer who will notify the Department's Medical Parole Coordinator.
- E. Health Services will provide a medical discharge plan collaborating with Community Supervision to identify the appropriate discharge placement, if approved.