



COLORADO
 Department of Corrections
 Office of the Director of Prisons

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MEMORANDUM

DATE: September 13, 2017
TO: Christina Rosendahl
FROM: Travis Trani, Director
SUBJECT: Special Needs Parole

The Department's process for offenders to apply for special needs parole is guided by AR 550-13 and C.R.S. 17-1-102.

A special needs offender is defined specifically in statute.

1. An offender who is:

- a. Sixty years of age or older and/or;
- b. Has been diagnosed as suffering from a chronic infirmity, illness, condition, disease, or mental illness that requires costly care or treatment. Such diagnosis shall be confirmed by a licensed health care provider who is employed by or under contract with the DOC and;
- c. The DOC or the state board of parole determines that the person is incapacitated to the extent that he or she is not likely to pose a risk to public safety; or

2. An offender who:

- a. Suffers from a chronic, permanent, terminal, or irreversible physical or mental illness, condition, disease, or mental illness that requires costly care or treatment. Such diagnoses shall be confirmed by a licensed health care provider who is employed by or under contract with the DOC and;
- b. Is determined by the DOC or the state board of parole to be incapacitated to the extent that he or she is not likely to pose a risk to public safety.

3. In addition to the above;



- a. If the offender was convicted of a class 1 felony prior to July 1, 1990, the offender must have served at least twenty years in a DOC facility for the offense; or
- b. If the offender was convicted of a class 2 felony crime of violence as described in section C.R.S. 18-1.3-406 the offender must have served at least ten years in a DOC facility for the offense.

The offender, the case manager and/or clinical services may request consideration for special needs parole by completing the application attached to AR 550-13. If the offender meets the criteria of the statute, the completed special needs parole packet will be reviewed by case management, clinical services, and the appointing authority of the facility before being forwarded to the director of Prisons who will have the packet reviewed by the Special Needs Parole Committee comprised of representation from Prison Operations, Offender Services, Mental Health, Clinical and the Victim Services unit.

After the review by the Special Needs Parole Committee, the packet is forwarded to the Parole Board who determines whether to grant special needs parole.

2016: 39 applications received. 5 recommended to Parole Board. Parole Board decision: two granted parole, one self-revoked, two deceased pending approved parole plan.

2017: 9 applications received, 0 recommended to Parole Board, all denied or deferred by the Parole Board.

In reference to the age of the offender; since one of the criteria listed is 60 years of age or older, I assume the offenders who have applied are over the age of 60, however, I do not have that information readily available.





**Colorado
Legislative
Council
Staff**

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MEMORANDUM

September 19, 2017

TO: Representative Pete Lee
FROM: Kerry White, Principal Fiscal Analyst, 303-866-3469
SUBJECT: Special Needs Parole

Summary

This memorandum responds to your request for information about the special needs parole program. Specifically, you asked for the number of referrals and approval decisions made by the State Parole Board (Board) over the past few years. According to the Department of Corrections (DOC), between January 1, 2016, and September 13, 2017, 48 applications for a special needs parole release were completed and forwarded for consideration by the Board. Of the 48 applications, the DOC recommended approving five; the Board approved two, an offender self-revoked one application, and two offenders died while their cases were pending. The DOC indicates that the high rate of denials/deferrals relates to difficulty in finding placements for released offenders.

Special Needs Offenders

The special needs parole program is set in statute and DOC rule (hold the control button and click here to read the rule and view the application online or reference the attached PDF file).¹ The purpose of the program is to identify and refer eligible offenders for consideration of special needs parole.

Eligible offenders. A special needs offender is as an offender who is in the custody of the DOC and:²

- Is age 60 or older and has been diagnosed by a licensed health care provider who is employed by or under contract with the DOC as suffering from a chronic infirmity, illness, condition, disease, or behavioral or mental health disorder, and the DOC or the Board determines that the person is incapacitated to the extent that he or she is not likely to pose a risk to public safety; or

¹Section 17-22.5-403.5, C.R.S. and AR 550-13

²Section 17-1-102 (7.5)(a), C.R.S.

- Who, as determined by a licensed health care provider who is employed by or under contract with the DOC, suffers from chronic, permanent, terminal, or irreversible physical illness, condition, disease, or a behavioral or mental health disorder that requires costly care or treatment, and who is determined by the DOC or Board to be incapacitated to the extent that he or she is not likely to pose a risk to public safety.

Current law excludes a person who was convicted of a:

- Class 1 felony, unless the offense was committed before July 1, 1990, and the offender has served at least 20 years in a DOC facility for the offense; or
- Class 2 felony crime of violence and the offender has served fewer than 10 years in a DOC facility for the offense.

Special Needs Parole Process

According to the DOC, an offender, case manager, or clinical services staff may request consideration for special needs parole by completing the process set forth in AR 550-13. DOC staff ensure that eligibility criteria are met prior to forwarding application materials to the Special Needs Parole Committee for review. This committee consists of staff from several areas of DOC operations, such as prison operations, offender services, mental health, clinical, and victim services. After review by its special needs parole committee, the DOC must notify the victim and the relevant district attorney's office prior to referring applications to the Board. In making a referral to the Board, the DOC is required to include:



- information about the offender's medical or physical condition and the risk that he or she will reoffend if released;
- details of a special needs parole plan recommended by the DOC;
- a recommendation concerning the release of the offender; and
- a victim impact statement or response from the district attorney that prosecuted the offender.

Upon receiving a referral, the Board is required to make a determination concerning the risk that the offender poses if released, and must issue its decision within 30 days unless it requests that the DOC modify the special needs parole plan. The Board may deny a special needs parole application with a majority vote of the Board; it retains its discretion to make parole decisions based on other criteria.

Requests for Special Needs Parole

The DOC provided the following data concerning special needs parole requests. In 2017, 9 applications were completed, 0 were recommended by the DOC, and all were denied/deferred by the Board. In 2016, 39 applications were completed, 5 were recommended to the Board, 2 were granted parole, 1 was revoked by the applicant, and 2 offenders died pending approval of the special needs parole plan; the remaining 34 applications were denied/deferred. The DOC indicated that the difficulty in finding "suitable care facilities for convicted felons under active

supervision^o (such as those that might be required under a special needs parole plan) contributes significantly to the high rate of denials/deferrals.

<u>ADMINISTRATIVE REGULATION</u>		REGULATION NUMBER 550-13	PAGE NUMBER 1 OF 5
 COLORADO DEPARTMENT OF CORRECTIONS		CHAPTER: Offender Case Management	
		SUBJECT: Special Needs Parole	
RELATED STANDARDS: ACA Standards - 4-4304		EFFECTIVE DATE: November 1, 2016	
		SUPERSESION: 11/15/15	
OPR: DOP	REVIEW MONTH: August	 Rick Raemisch Executive Director	

I. POLICY

It is the policy of the Colorado Department of Corrections (DOC) to establish guidelines for the offender, together with case management and clinical services, to apply for discretionary "special needs" parole consideration with the Colorado State Board of Parole, in accordance with C.R.S. 17-1-102.

II. PURPOSE

The purpose of this administrative regulation (AR) is to set a standard and orderly process to prepare an offender's case for parole consideration and possible release in those situations when an offender is identified as a special needs offender, as defined in C.R.S. 17-1-102.

III. DEFINITIONS

- A. Case Manager: An individual employed by, or under contract with the DOC responsible for direct involvement with offenders and ensuring an ongoing process of case monitoring, case recording, counseling, and guidance. Direct involvement will also include field community parole officers working in liaison with community corrections' centers.
- B. Case Material: Information regarding the offender, collected in the department and working files, in the form of official reports generated by the Department of Corrections, Parole, or other official jurisdictions which are allowed to be shared between jurisdictions without an authorization for release of information from the offender (to include but not limited to: the ADS; DUS; PSIR; latest PAS).
- C. DOC Employee: Someone who occupies a classified, full or part-time, position in the State Personnel System (including management and non-classified positions) in which the Department has affect over pay, tenure, and status.
- D. Pre-Parole Investigation Report: The investigation and evaluation of information contained in the Pre-Parole Plan.
- E. Pre-Parole Plan: The electronic information identifying an offender's proposed parole destination and resources.
- F. Sensitive Case: A case deemed sensitive by one or more of the following factors:
 - 1. A career criminal currently serving a sentence(s) for a violent crime(s).

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2. An offender with a high potential for violence.
3. A case involving public notoriety.
4. For other good cause shown.

G. Special Needs Offender: As defined in C.R.S 17-1-102:

1. An offender who is:
 - a. Sixty years of age or older and/or;
 - b. Has been diagnosed as suffering from a chronic infirmity, illness, condition, disease, or mental illness that requires costly care or treatment. Such diagnosis shall be confirmed by a licensed health care provider who is employed by or under contract with the DOC and;
 - c. The DOC or the state board of parole determines that the person is incapacitated to the extent that he or she is not likely to pose a risk to public safety; or
2. An offender who:
 - a. Suffers from a chronic, permanent, terminal, or irreversible physical or mental illness, condition, disease, or mental illness that requires costly care or treatment. Such diagnoses shall be confirmed by a licensed health care provider who is employed by or under contract with the DOC and;
 - b. Is determined by the DOC or the state board of parole to be incapacitated to the extent that he or she is not likely to pose a risk to public safety.
3. In addition to the above;
 - a. If the offender was convicted of a class 1 felony prior to July 1, 1990, the offender must have served at least twenty years in a DOC facility for the offense; or
 - b. If the offender was convicted of a class 2 felony crime of violence as described in section C.R.S. 18-1.3-406 the offender must have served at least ten years in a DOC facility for the offense.

H. Special Needs Parole: a parole granted to a special needs offender prior to the offender's parole eligibility date.

I. Special Needs Parole Review Committee: A committee that is designated by the director of Prisons to review the special needs offender parole applications.

IV. PROCEDURES

A. General Information

1. In accordance with AR 550-08 *Pre-Parole Planning, Parole Board Presentation/Parole Release, the classification plan specifies that prior to a parole hearing a progress report is made available to the paroling authority. The report includes a current and complete history of the offender's activities in the institution and a proposed parole plan. [4-4304]*
2. Prior to any referral for special release consideration:

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- a. The DOC will provide notification to any victim, as required under section C.R.S. 24-4.1-302.5. A victim will have 30 days after receiving notification to submit a victim impact statement to the department. The department shall include any victim impact statement in the referral to the parole board.
 - 1) When the case manager receives a referral for special needs parole from clinical services or an application for special needs parole from an offender, an electronic notification will be sent to the Victims Services Unit.
 - 2) The Victims Services Unit will initiate victim notifications and acquire a victim impact statement to be included with the final referral packet to the parole board after the Special Needs Parole Review Committee review.
- b. If the offender is serving a sentence for a conviction of a crime of violence as describe in section C.R.S. 18-1.3-406 or a sex offender as listed in section C.R.S. 18-1.3-1004 the DOC will provide notification to the applicable district attorney's office. The district attorney will have 30 days after receiving notification to submit a response to the department. The department will include any district attorney response in the referral to the parole board.
 - 1) When the case manager receives a referral for special needs parole from clinical services or an application for special needs parole from an offender, the case manager will draft a letter to the district attorney using the format on AR Form 550-13C, District Attorney Notification Letter.
 - 2) The case manager will send the letter to the applicable district attorney's office.

B. Offender Referral Process

1. Offenders who believe they meet the criteria and want to be considered for special needs parole will complete AR Form 550-13A, Special Needs Parole Worksheet, a release of information for medical and mental health records, and prepare a letter to the parole board requesting consideration (one page only). The application and packet will be presented to the offender's case manager who will then forward the packet to Clinical Services for review.
 - a. A clinical provider will complete a memo using the format in AR form 550-13B, Supplemental Medical Data for Parole Board Consideration to describe the chronic condition(s) and the prognosis of the offender. The memorandum will become part of the packet to be included with the application.
 - b. Once the clinical assessment is completed, confirming the clinical criteria the case manager will be notified to complete the case management portion of the application. The original will be returned to the case manager with the medical information sealed.
 - c. The case manager will prepare and include a draft pre-release plan for the offender in the packet as well as an updated and current CTAP assessment, case plan, and CARAS.
 - d. Case Management will then finalize the packet according to AR Form 550-13D, Special Needs Parole Checklist for review by the administrative head before forwarding to the director of Prisons who will forward the packet to the Special Needs Parole Committee.

C. Case Management Referral Process

1. Case managers may refer offenders to Clinical Services for consideration of Special Needs Parole medical eligibility.

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- a. Once the clinical assessment is completed, confirming the clinical criteria the case manager will be notified to complete the case management portion of the application. The original will be returned to the case manager with the medical information sealed.
- b. When the case manager receives a referral for special needs parole from clinical services, confirming the offender meets the criteria for special needs parole from an offender, an electronic notification will be sent to the Victims Services Unit.
- c. The case manager will prepare and include a draft pre-release plan for the offender in the packet as well as an updated and current CTAP assessment, case plan and CARAS.
- d. The case manager will then finalize the packet according to AR Form 550-13D, Special Needs Parole Checklist for review by the administrative head before forwarding to the director of Prisons who will forward the packet to the Special Needs Parole Committee.

D. Clinical Services Referral Process

1. Clinical Services may initiate a referral based on identification that an offender meets the criteria. If Clinical Services identifies an offender who meets the criteria, they will contact the offender's case manager.
 - a. Clinical Services will review the case, sign the form, complete the clinical section of AR Form 550-13A, Special Needs Parole Worksheet indicating that the conditions (physical, medical, or psychological) are accurate, and prepare a packet of documentation to support the claim of incapacitation and/or extreme medical costs. The offender will be required to sign a release of medical information at this time. Clinical staff may initiate the process on behalf of the offender if the offender is unable to sign for release of information.
 - b. The provider will complete a memo using the format in AR form 550-13B, Supplemental Medical Data for Parole Board Consideration to describe the chronic condition and the prognosis. The memorandum will become part of the packet to be included with the application.
 - c. Clinical Services will return the completed application and packet to the case manager.
 - d. The case manager will prepare and include a draft pre-release plan for the offender in the packet as well as an updated and current CTAP assessment, case plan and CARAS.
 - e. The case manager will then finalize the packet according to AR Form 550-13D, Special Needs Parole Checklist for review by the administrative head before forwarding to the director of Prisons who will forward the packet to the Special Needs Parole Committee.

E. Processing Referral Requests

1. The parole board may schedule a hearing on the application for special needs parole with the offender present or the board may review the application and issue a decision without a hearing.
2. The parole board will make a determination of whether to grant special needs parole within thirty days after receiving the referral from the DOC. The parole board may delay the decision in order to request that the DOC modify the special needs parole plan.
3. If additional information is required by the parole board regarding the offender's medical condition, the information must be obtained directly from Clinical Services in order to ensure confidentiality.
4. The parole board will record the hearing outcome decision on the electronic Parole Hearing Application.

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5. If approved, once a parole hearing has been set, the case manager will prepare the appropriate forms for the parole hearing as normal and will also initiate the application process for SSA and Medicaid assistance in the same manner as noted in AR 550-07, *Assisting Offenders Applying for Disability Benefits*, as they would for offenders approaching a PED.
6. Upon notification of approval, the case manager will ensure that the application packet is available with the file at the hearing. If denied, the case manager will notify the offender of the decision and purge all medical documents, prior to filing the application packet in the electronic file.
7. A denial of special needs placement by the state board of parole will not affect an offender's eligibility for any other form or parole or release under applicable law.
8. If an offender-submitted application for special needs parole is denied, the offender may re-submit the application one year from the prior application date.
9. All special needs parole applications that were recommend by clinical services and denied will be periodically reviewed by clinical services. Applications may be resubmitted by Clinical Services if there are substantial changes in the offender's condition or a change that would enable the offender to meet the criteria. If there are no changes noted, the offender will not be re-considered until his/her regularly scheduled parole hearing.

V. RESPONSIBILITY

- A. It is the responsibility of the Division of Adult Parole to ensure completion of pre-parole field investigations as provided in this AR.
- B. It shall be the responsibility of the director of Prisons to review this AR annually and update as necessary.

VI. AUTHORITY

- A. C.R.S. 17-1-102(7.5) a. Definitions.
- B. C.R.S. 17-2-201. State board of parole.
- C. C.R.S. 17-22.5-102.5. Purpose of parole.
- D. C.R.S. 17-22.5-303. Parole.
- E. C.R.S. 17-22.5-403.5. Special needs parole.

VII. HISTORY

November 1, 2015
November 1, 2014
February 1, 2014

ATTACHMENTS:

- A. AR Form 550-13A, Special Needs Parole Worksheet
- B. AR Form 550-13B, Supplemental Medical Data for Parole Board Consideration
- C. AR Form 550-13C, District Attorney Notification Letter
- D. AR Form 550-13D, Special Needs Parole Checklist
- E. AR Form 100-01A, Administrative Regulation Implementation/Adjustments



COLORADO
Department of Corrections

Special Needs Parole Worksheet
Facility: _____

Offender Name:	DOC #	Age:	PED:
Case Manager:	Date of Application:		
Referred by:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Offender	Case Manager	Clinical Services

Offender Signature _____ Date _____

Clinical Services

I have reviewed this offender's medical records and the offender:
 Meets the medical eligibility criteria for this application. YES NO
 All relevant medical information has been included with this packet? YES NO
 Has the offender signed a release of information to the Parole Board and District Attorney for Mental Health and Medical Records? YES NO

Printed Name _____ Signature _____

Position _____ Date: _____

Case Manager

I have reviewed this offender's case and the offender:
 Meets the criteria of "Special Needs Offender" as defined by C.R.S. 17-1-102. YES NO
 The offender is sixty (60) years of age or older. YES NO
 If the offender is convicted of a Class I felony before 1990, has the offender served at least 20 years? YES NO
 If the offender is convicted of a Class II felony, has the offender serviced at least 10 years? YES NO
 The offender has a viable parole plan. YES NO
 Is the viable parole plan an out of state parole plan? YES NO
 Has Victim Service Unit been notified? YES NO
 Has letter to the District Attorney been sent? YES NO
 Has the offender signed a release of information to the Parole Board and District Attorney for Mental Health and Medical Records? YES NO
 Does offender's case involve public notoriety? YES NO

Case Manager Signature _____ Date _____

Administrative Head/Designer

I have reviewed this offender's case file.

Administrative Head Signature _____ Date _____

Special Needs Parole Committee

<input type="checkbox"/> Recommend to parole board	<input type="checkbox"/> Do not recommend to parole board	Date reviewed: _____
Comments:		

Signatures of committee members:

Supplemental Medical Data for Parole Board Consideration:

All Special Needs Release Packets must include a letter from a health care provider. The health care provider will use the following structure when composing a Special Needs Release Letter:

- To Whom It May Concern:
- Paragraph 1 will include an overview of the offender's medical and mental health status. Pertinent health information related to the primary diagnosis must be included.
- Paragraph 2 will include the current condition and prognosis of the patient.
- Paragraph 3 will include an evaluation of the patient's functional ability and disabilities with particular attention to the offender's ability to perform activities of daily living, mobility status and cognition.
- Signature Line/physician's signature.

Notification of Special Needs Parole Request

Special Needs Parole release packets for offenders serving a sentence for a conviction of a crime of violence as describe in section 18-1.3-406, C.R.S., or a sex offender as listed in section 18-1.3-1004, C.R.S., must include a letter to the district attorney who prosecuted the case. The district attorney has 30 days to provide a response and such response will be included in the Special Needs packet to the parole board. Please use the following structure when composing a Special Needs notification letter on facility letterhead and mail letter to the appropriate district attorney's office: **DO NOT CHANGE ANY PORTION OF THE HEADING**

DATE: _____

To Whom It May Concern: insert the appropriate district attorney's name

Offender _____ DOC# _____ has submitted an application for consideration for Special Needs Parole. Offender _____ was convicted of _____ in the year _____. The offender has served _____ years on this sentence. The offender believes his/her medical condition(s), as documented by licensed health care providers within the Department of Corrections, meet the criteria for special needs parole.

You have 30 days from the date of receipt of this notification letter to provide a response to the department which will be included in the Special Needs Parole Packet forwarded to the parole board.

Please send your response to: Director of Prisons 1250 Academy Park Loop, Colorado Springs, CO 80910

Case Manager Signature and Date

Case Management Special Needs Parole Packet Checklist

Offender Name:	DOC #			Facility:	
DOCUMENT	Yes	No	N/A	Comments:	Date completed
Offender Portal Profile and DCIS Profile					
SNP Worksheet (AR Form 550-13 A)					
Signed Release of Information					
Supplemental Medical Data for Parole Board Consideration: (AR Form 550-13B)					
Copy of Letter to DA (AR Form 550-13C)					
Letter From Offender to Committee/Parole Board					
Draft Parole Plan					
Last Classification Instrument					
CTAP Assessment					
Case Plan					
COPD history					
Notification of Victim Services					
Updated CARAS					
Other (describe if included)					

Case Manager _____ Facility _____
 (Print)

Case Manager Signature _____ Date _____

ADMINISTRATIVE REGULATION
IMPLEMENTATION/ADJUSTMENTS

AR Form 100-01A (04/15/08)

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(FACILITY/WORK UNIT NAME) _____

WILL ACCEPT AND IMPLEMENT THE PROVISIONS OF THE ABOVE ADMINISTRATIVE REGULATION:

AS WRITTEN NOT APPLICABLE WITH THE FOLLOWING PROCEDURES TO ACCOMPLISH THE INTENT
OF THE AR

(SIGNED) _____ (DATE) _____
Administrative Head