

September 15, 2020

The Office of Public Safety and Security One Ashburton Place, Room 2133 Boston, MA 02108

RE: Public Hearing September 16, 2020 501 CMR 17.00 Medical Parole

I am the victim's son-in-law and family representative in regards to the case of Benjamin LaGuer (W40280). In light of our recent experience as the victim's family in the medical parole case of Benjamin LaGuer, I would like to share some of our experiences and concerns regarding the current medical parole regulations.

Mr. LaGuer has requested medical parole multiple times, so we have become quite familiar with the process. Mr. LaGuer first applied for a medical parole release in June, 2018 claiming he had only six months to live. I was contacted by the Victims Services Unit and voiced our opposition to Mr. LaGuer's request in a letter to the commissioner. His parole was denied at that time. He again requested medical release in March, 2019 and September, 2019. We were contacted and voiced our opposition to both petitions, and he was denied. It appears he again applied later in 2019 or early 2020; however, we did not receive any notification of this petition until Friday, January 31, 2020 when we were blindsided that he would be released as soon as Wednesday, February 5, 2020. Mr. LaGuer was indeed released on February 5, and in less than a month, on March 3, 2020, was returned to custody for violating his parole conditions. Prior to any hearing regarding those violations, we were informed Mr. LaGuer applied again for medical parole in May, 2020. We again voiced our opposition, and the case was not heard pending his parole revocation hearing. Our family was notified June 8, 2020 that the Parole Board voted to affirm the revocation and conduct a full board review hearing. We are awaiting the decision of the Parole Board.

As we have navigated the medical parole process with the help of the Victims Services Unit, we found ourselves with many questions and concerns.

- 1) Why is a victim's family notified just days before an inmate's release with no prior knowledge of the status of the medical parole request?
- 2) Why was no consideration given to our family regarding a restraining order or conditions of release? Upon release, Mr. LaGuer's restrictions permitted him to be quite close to us. After many discussions with the victims advocate, we were able to put conditions in place to restrict

Mr. Laguer to three counties based on his current living quarters and his doctors' visits, but this all took place after his release meaning he could have had closer access to us.

- 3) Why is it the responsibility of the correctional superintendent to create a plan for the inmate's release? It did not make any sense to us why the parolee did not have to submit a plan for the superintendent's approval.
- 4) Why aren't there stricter reviews in place for determining if an inmate is a candidate for medical parole? We were told that Mr. LaGuer had months to live and was bed-ridden, but he walked into the parole office and was capable of violating his parole conditions. It seems to us that a more in depth review is needed before any decision is made to ensure the candidate is eligible. This in depth assessment should include psychological factors, a review of an inmate's history while incarcerated, a statement from the Parole Board, and a victim's statement, as well as a medical statement regarding physical limitations and life expectancy. In our case, the Sex Offender Registry Board classified Mr. LaGuer upon release as posing "a high risk to reoffend." While Mr. LaGuer may not have been capable of re-offending in the physical sense, his history of intimidation of the victim and the victim's family is well documented in his records and it should have been part of the medical parole review prior to any decision.
- 5) How are hosts vetted and trained prior to an inmate's release? Mr. LaGuer was released to a home in Danvers for his medical parole. I understand that this home is a large property that has been rented for functions in the town of Danvers. While there, he violated conditions of his release which raises concerns of hosts enabling inmates in their care. There should be a more thorough investigation in regards to the host's home, the host, and the location of the home as it may impact the victim's family. Further, we were very concerned that when Mr. LaGuer reapplied for medical parole after returning to jail, his plan was to return to the same host despite the violations that occurred.
- 6) Why are medical parolees able to challenge their sex offender classification? Mr. LaGuer was immediately classified upon release as a Level 3 sex offender because the Sex Offender Registry Board stated, "the offender currently poses a high risk to re-offend." His lawyer quickly tried to have this classification reduced to a Level 2 seemingly to avoid having his place of residence on the public record. The Sex Offender Registry Board's decisions should be final in order to inform and protect the community.

Our family has been forced to relive the horrors experienced by the victim of this crime repeatedly as a result of the medical parole process. I would request that any amendments being considered keep the victim's family involved in the decision process. While we have great sympathy for those who are ill and dying, our experience shows the flaws in the process and how inmates can use it to their advantage.

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