The Commonwealth of Massachusetts
Executive Office of Public Safety and Security
One Ashburton Place, Room 2133
Boston, Massachusetts 02108
Tel: (617) 727-7775
TTY Tel: (617) 727-6618
Fax: (617) 727-4764
www.mass.gov/eopss

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lt. Governor

TERRENCE M. REIDY
Secretary

April 1, 2022

VIA EMAIL

Representative Michael S. Day, Chair
Joint Committee on the Judiciary
House of Representatives
State House, Room 136
Boston, MA 02133-1054

Dear Chair Day:

I write in response to your letter of March 10, 2022. I and the Administration share your commitment to full implementation of what is a groundbreaking reform effort to right long-standing wrongs and improve how a crucial function of government serves the people. I appreciate this opportunity to share more about the hard work of so many public servants working on this. I also welcome this opportunity to debunk some inaccurate claims and correct imprecise statements made about the Administration's track record on this effort. As the Executive Office of Public Safety and Security (EOPSS) made clear over the past nine months, both publicly and in conversations with you and your staff and in writing, this Administration is implementing all the requirements of "An act relative to criminal justice reform" (the CJRA) and "An act relative to justice, equity, and accountability in law enforcement in the Commonwealth" (police reform). The letter's insinuation that the Administration is intentionally subverting the measures adopted in those laws because of policy disagreements is not supported by the facts.

Indeed, the Administration has demonstrated its commitment to executing the CJRA and police reform by its consistent work to implement the provisions of those laws since enactment. I am therefore happy to respond to questions that provide another opportunity to highlight the work that has been, and continues to be, done by EOPSS and its agencies to implement these laws.

I offer the following in response to your specific requests.

EOPSS continues to advance the development of a cross-tracking data collection system encompassing executive department agencies and independent constitutional offices.

The CJRA required EOPSS to work together with the Executive Office of Technology Services and Security (EOTSS) and criminal justice agencies to develop a uniform cross-tracking data collection system. The Act required the participation of a broad range of agencies and independent offices, including the Trial Court and Massachusetts Probation Service, Massachusetts Parole Board, Department of Correction (DOC), 14 Sheriffs' offices, over 300 municipal police departments, the District Attorneys, and the Attorney General. The creation of such a system not only requires input from counties, municipalities, and two branches of state government, but also significant technology upgrades and unprecedented cooperation from so many independent government bodies. Notwithstanding the scope and complexity of the cross-tracking project, the diligent efforts and collaboration of all participants has led to significant accomplishments and substantial progress towards implementation.

First, you claim that the Administration has failed to promulgate regulations establishing common definitions of the data required to create a criminal justice agency cross-tracking system. This is simply not true. EOPSS promulgated those regulations on December 24, 2021.[1] As you are surely aware, publication by the Secretary of State marks the culmination of a lengthy process spanning months of effort and cooperation by relevant stakeholders including, but not limited to, EOTSS, the DOC, the Trial Court, the 14 Sheriffs' Offices, and the Justice Reinvestment Policy Oversight Board (JRPOB). That board's 16 members include 2 of your legislative colleagues, the Attorney General's Office, the American Civil Liberties Union, and the Committee for Public Counsel Services. On October 25, 2021, EOPPS held a public hearing on these regulations and members of the public had the opportunity to comment and submit testimony. The final regulations published by the Secretary of state incorporate feedback from that public hearing process.

In addition to managing the drafting, development, and publication of the regulations, EOPSS also created and leads a cross-tracking Executive Steering Committee (ESC) and working groups, all composed of key stakeholders. The ESC comprises executives from EOPSS, EOTSS, DOC, the Department of Criminal Justice Information Services (DCJIS), the Trial Courts and Probation Services, and the Sheriffs, and is charged with providing guidance, resources, and authorization to execute tasks essential for implementation of the cross-tracking system. In doing so, the ESC manages the immense complexity inherent in the development of new and consistent data collection standards and practices across criminal justice agencies. This EOPSS-led steering committee has produced organizational efficiency among the various contributors as evidenced by achievement of the following critical milestones:

[1] For your convenience, the regulations are codified at 501 CMR 18.00 and can be found online at: https://www.mass.gov/regulations/501-CMR-1800-data-collection-and-reporting-standards-for-criminal-justice-agencies.

(a) To address the separation of powers concern contained in G.L. c. 6A, § 18 ¾, which requires the executive branch to promulgate regulations to which the judicial branch is subject, EOPSS and the Trial Court collaborated to draft a Memorandum of Understanding (MOU) to facilitate the necessary access to, and transmission of, data elements between the cross-tracking system and the Trial Court. EOPSS and the Trial Court executed the MOU on February 16, 2022.

(b) An essential prerequisite for the cross-tracking system is a Data Use License Agreement (DULA) to enable the collection and receipt of data among all participating agencies. As the cross-tracking system requires Commonwealth-wide participation from several agencies over which EOPSS does not have authority, this DULA sets forth the standards and conditions for the use of the data submitted by all criminal justice agencies. The DULA establishes the obligations of agencies as contributors to the system and for EOPSS as the agency maintaining the system. Without the safeguards imposed by the DULA, those agencies outside of the purview of EOPSS could not effectively participate in data sharing. Prior to execution of the DULA, 20 agencies had to review, edit, and agree to shared terms and conditions. Signatories to the agreement include EOPSS, DOC, DCJIS, the Department of State Police, the Parole Board, the Trial Court and Probation Services, and the 14 Sheriffs' offices.

(c) EOPPS has also established in this effort a standardized process for custodial agencies to follow when booking offenders. A standardized process is essential because booking is the first time that individuals entering a custodial institution provide personal information to a criminal justice agency. The standardized booking practice includes processes for collecting all new statutorily required and uniformly defined data elements consistently across custodial agencies. The completion of this significant step in the project means that for the first time custodial agencies across the Commonwealth will collect and report the CJRA data elements in a uniform format, providing clarity and efficiency to the process while establishing the building blocks of the cross-tracking system. The standardized process is set forth in the Data Collection Policies and Procedures for Custodial Booking and Admission standard operating procedures. Notably, DOC booking officers and supervisors completed a comprehensive training on these policies and procedures earlier this year.

(d) DOC has implemented the standard booking process referenced above at all DOC facilities. We believe the Sheriffs offices' implementation will be complete by Summer 2022, pending the completion of significant upgrades to their respective data collection systems, but we encourage you to follow up with these independent agencies for more information about their actions.

(e) EOPSS hired Google to build the foundational architecture of the cross-tracking system. This foundational architecture involves the use of analytical software programmed to interact with the various record management systems utilized by all criminal justice agencies. The system will ingest the data from the upgraded record management systems, anonymize the data, and display the data to the public as required by the CJRA. Data collected by both the DOC and houses of correction will be publicly available in June 2022.

While EOPSS and the ESC have made progress in other areas as well, it is important to note that there are several challenges inherent in the development of such a cross-tracking system that EOPSS cannot act independently to resolve. Many of the criminal justice agencies whose participation in the cross-tracking system is crucial—the Trial Court, the District Attorney's Offices, and the 300 municipal police departments—do not report to and are not under the control of EOPSS. Successfully implementing the cross-tracking system therefore requires the collaborative engagement of those independent agencies, but EOPSS does not have the ability to command it.

A second challenge is that the criminal justice agencies, such as municipal police departments and District Attorneys' offices, have legacy data systems that do not currently collect the information required by G.L. c. 6A, § 18 ¾. These older data systems, which are geared toward supporting agency tasks and not public-facing data collection, are not readily upgraded to collect the required data and operate the required data systems.

In addition, the statute requires the use of a unique state identification number (SID) for each person who enters the criminal justice system. This is particularly challenging because SIDs are generated only from fingerprint submission, but CJRA did not make fingerprinting for all relevant offenses a statutory requirement, and criminal justice agencies do not uniformly fingerprint every person who enters the criminal justice system. Furthermore, some criminal justice agencies do not have the machines capable of fingerprinting and require assistance from other agencies.

Notwithstanding these ongoing challenges, EOPSS is optimistic about the next phase of the development of the uniform cross-tracking data collection system. EOPSS and the criminal justice agencies are in the process of improving the current fingerprint processes. The law enforcement agency working group at EOPSS is developing the Law Enforcement Data Collection Policy and Procedures, a policy and procedure analogous to the procedure for custodial agencies mandating collection of the statutorily required data elements. The Trial Court working group is working to bring MassCourts into full integration with the cross-tracking system.

You inquired whether additional resources are needed to fulfill the CJRA's cross-tracking requirement. As noted above, CJRA requires an SID for each offender but does not expressly require all offenders be fingerprinted. The implementation of standardized operating procedures is an attempt to address this challenge, but it is not a solution. You and your legislative colleagues can take an important step towards resolving the challenge and enhancing the collection and value of data for the cross-tracking system by enacting the Governor's bill, "An act to protect victims of crimes and the public." Sections 1 and 2 of that bill, which is currently pending before the Joint Committee on the Judiciary, contain fingerprinting provisions that help ensure that information about a person who is arrested or arraigned can be linked to a unique fingerprint identifier.

The Department of Correction restrictive housing policy is fully transparent and in compliance with the CJRA.

There is no factual support for your letter's assertion that the "DOC is skirting the intent of the CJRA" by instituting a "sub-22 hour" policy related to restrictive housing placements, and thereby "evading the protections, limits, and transparency required for inmates held for just 30 minutes longer." DOC's existing public reports account for all restrictive housing placements regardless of their length, rendering this assertion inaccurate.

The DOC has no "sub-22" hour policy and has never skirted its reporting responsibilities. As we have previously discussed with you and your office, DOC provides monthly, quarterly, and biannual reports to the RHOC on all individuals who are or had been placed on restrictive housing status.[2] DOC makes these reports irrespective of whether those individuals spent more or less than 22 hours in-cell. Differently put, while individuals in restrictive housing status in medium facilities are not in-cell more than 22 hours (they receive a minimum of 2.25 hours out of cell time), the DOC nonetheless includes all those individuals in its restrictive housing reporting, regardless of whether they spent less than 22 hours in restrictive housing. Furthermore, those individuals always receive the benefits afforded to them under section 93 of the CJRA, such as being allowed to keep their personal tablets, being issued a loaner radio, having access to canteen items, and the participating in programing. Moreover, the Restrictive Housing Oversight Committee (RHOC) toured each restrictive housing unit at DOC and DOC provided all requested reports and data on conditions of confinement. The RHOC, which includes representatives from both the Disability Law Center and Prisoners' Legal Services, expressed no concerns that DOC is manipulating its restrictive housing policies to evade reporting requirements.

Your letter's assertion that "a sub-22 hour" policy exists at DOC conflates the restrictive housing reporting practices at DOC with the practices at some houses of correction. As you are of course aware, those county facilities are under the control of the independently elected sheriffs and not DOC. In a January 20, 2022, letter to you, the RHOC expressed frustration with the restrictive housing practices of some county facilities, not DOC facilities.

You have requested that DOC provide you with the number of inmates held in-cell for more than 20 hours but less than 22 hours from December 2020 through the present. The number is 1,361. This number represents the following:

> (a) 1,024 individuals that are or were in restrictive housing status in medium security facilities (and are reported on accordingly). In June 2021, all such facilities made operational changes to ensure that individuals are not held in-cell "more than 22 hours."
>
> (b) 337 individuals who are held in units that receive a minimum of 3 hours of structured and unstructured daily out-of-cell time. These individuals are not reported under the CJRA restrictive housing reporting requirements because they are not on restrictive housing unit status and are not held in-cell more than 22 hours.

[2] Monthly reports are provided to the Restrictive Housing Oversight Committee. Quarterly and biannual reports are provided to the Legislature and are available online at: https://www.mass.gov/restrictive-housing-oversight-committee.

You also requested information concerning the DOC's response to the November 2020 report of the DOJ. As an initial matter, it is worth noting that the DOJ expressly stated that it did not have constitutional concerns about (a) DOC's care for individuals with a serious mental illness who are not in mental health crisis, or (b) DOC's restrictive housing practices more generally. Rather, the DOJ's specific finding concerned mental health care provided to individuals in mental health crisis, and those individuals on mental health watch. The DOC took the DOJ's report seriously and immediately entered productive discussions, still ongoing, to resolve the DOJ's concerns.

EOPSS is working together with District Attorneys' offices to process the testing of Sexual Assault Evidence Collection Kits as expeditiously as possible.

Your letter faults EOPSS for the failure to meet a statutory deadline established by the July 2021 amendment to Section 214 of the CJRA ("the amendment") requiring the testing of previously submitted untested investigatory sexual assault evidence collection kits (SAECKs). Contrary to the suggestion in your letter, however, EOPSS has consistently informed you and your legislative colleagues, both before and after the enactment of this amendment, that the deadlines imposed would be impossible to meet given the time, technology, and expertise needed to evaluate and test a SAECK in a scientifically rigorous manner.

Notwithstanding its well-documented concerns, EOPSS immediately went to work to implement the amendment's requirements upon enactment and provided you with biweekly updates (with data you specifically requested) throughout the fall of 2021 to keep you apprised of its progress. In August 2021, the Massachusetts State Police Crime Laboratory (MSPCL) identified 6,502 previously submitted untested SAECKs. Next, the MSPCL tackled the work of examining each of those SAECKs to determine whether it contained quantity limited (QLIM) evidence. Because testing of a QLIM SAECK destroys the sample, the amendment requires the MSPCL to notify the prosecuting attorney's office before such testing can take place. The prosecuting attorney's office—each under the control of an independent elected officer like the sheriff's offices discussed above—must then engage in a review of the case to determine whether to authorize testing, and if testing is authorized, then notify the survivor. Similarly, the amendment provides that MSPCL cannot test a SAECK without a review and verification by the prosecuting attorney's office that the kit either: (a) does not relate to a post-conviction case; or (b) does relate to a post-conviction case and the survivor has consented to the testing. These required reviews are vital to ensure the integrity of the testing process, but also add to the time it takes to test a SAECK and leave our agencies waiting for an independent body to complete its review before moving forward. The MSPCL devoted substantial resources to fulfilling the mandates of the amendment, and by December 13, 2021, had sent information on 5,947 SAECKs to the prosecuting attorney's offices for them to review.[3]

[3] As explained in the bimonthly updates you received this past fall and the quarterly reports, the MSPCL determined that certain previously submitted untested SAECKs do not in fact require testing.

As of April 1, 2022, the various prosecuting attorneys' offices have approved 1,159 kits for testing out of the total 5,947. As of April 1, 2022, the MSPCL organized and prepared to send to a private laboratory for testing a total of 636 of the 1,159 SAECKs approved by the prosecuting attorneys' offices. As previously explained to you, this preparation process is labor-intensive and time-consuming. Nonetheless, the MSPCL will continue to send approved SAECKs to the private laboratory for testing in monthly bulk batches (per the private laboratory's request).

The MSPCL and EOPSS are committed to continuing their collaborative work with the prosecuting attorney's offices and other stakeholders to satisfy the statute's mandate of reviewing all untested SAECKs. Information on the review and testing of these SAECKs is provided in publicly available quarterly reports, the first of which was published on December 30, 2021, and the second on April 1, 2022.

Bridgewater State Hospital is a safe and healthy environment, and Wellpath's policies governing the use of involuntary medication are lawful and represent a dramatic improvement in the care provided to Persons Served.

As you are likely aware, on March 23, 2022, the Commissioner of DOC responded a detailed written response to the Disability Law Center's (DLC) January 2022 report on Bridgewater State Hospital (BSH), in which she explained DOC's disagreement with DLC's assessment of the safety of the physical plant and the care provided to residents (referred to as Persons Served) by DOC's health care provider, Wellpath. To the extent that your questions rely upon DLC's assessment, attached is a copy of DOC's response as well as the relevant Wellpath policies.

1. *Wellpath's policy and practice when administering medication involuntarily is lawful, has been approved by the premier behavioral health accrediting body.*

I begin by noting that in July 2021, the Joint Commission on Accreditation of Healthcare Organizations (Joint Commission) conducted an extensive review of BSH, including 4 days on-site, and renewed BSH's Joint Commission accreditation as a behavioral health hospital. The Joint Commission is the nation's premiere standard setting and accreditation body in health care, and prior to accreditation the Joint Commission considers issues related to the physical plant, the institution's written policies and adherence to Joint Commission standards, as well as the hospital's actual practices pursuant to the written policies.

DLC's criticism of BSH's restraint and seclusion policy and practice rests in large part on DLC's mischaracterization of the use of Emergency Treatment Orders (ETOs) at BSH. An ETO is not, as DLC repeatedly states, a form of restraint. An ETO is used to treat a psychiatric condition in an emergency, and a restraint is used to control an individual where there has been an occurrence or serious threat of occurrence of "extreme violence, personal injury, or attempted suicide" for reasons unrelated to a mental illness. Wellpath Policy, Use of Seclusion and Restraint, § 2.1. Thus, the involuntary use of medication in these two circumstances serve a completely different purpose: one is for treatment, the other is for restraint.

These different purposes explain why providers at BSH order more ETOs than medical restraints. BSH is, after all, a behavioral health hospital where the Persons Served are there because they require strict security to ensure their safety and the safety of the community. Therefore, as DLC notes, emergencies at BSH will generally arise for reasons related to the psychiatric condition rather than for some unrelated reason that then requires restraint.

DLC's allegation that BSH practices are in violation of G.L. c. 123, § 21, and DMH regulation 104 CMR 27.12, is inaccurate. First, Wellpath's definition of medication restraint is consistent with the definition of restraint provided in G.L. c. 123, § 1. Medication restraints are used at BSH for the purpose of reducing the Person Served's "ability to engage in such behaviors." Wellpath Policy, Use of Involuntary Psychotropic Medication, § 5.3.1. Second, under G.L. c. 123, § 21, restraints may "only be used in cases of emergency, such as the occurrence of, or serious threat of, extreme violence, personal injury or attempted suicide." Similarly, Wellpath's policy, as noted above, prohibits the use of medication restraints if there has been an "occurrence or serious threat of, extreme violence, personal injury, or attempted suicide." While DMH regulation 104 CMR 27.12 does not apply to BSH, Wellpath's definition of medication restraint is not in conflict – the DMH regulation defines a medication restraint as "when a patient is given a medication or combination of medications to control the patient's behavior or restrict the patient's freedom of movement and which is not the standard treatment or dosage prescribed for the patient's condition."

While DOC and Wellpath continue to employ ETOs as treatment and not restraint, to ensure the highest degree of clarity, Wellpath will review current BSH policies governing involuntary medication and restraint and seclusion to ensure that the language of these policies fully and clearly reflects practice.

2. DOC has properly addressed the safety of the physical plant and mold remediation.

The recent DLC report alleges that there is "overwhelming evidence of persistent health and safety risks" in the BSH physical plant and that BSH has failed to address concerns with mold raised in DLC's 2019 report. This is inaccurate. As the Commissioner's letter explains at some length, these allegations overlook that there is no evidence of mold-related illnesses among Persons Served and ignore the $1.7 million in improvements that BSH has undertaken in recent years to remediate mold in the facility and to respond to issues identified in earlier DLC reports.

Since the onset of the COVID-19 pandemic, Wellpath has regularly monitored respiratory wellness to ensure the safety of Persons Served. This monitoring has identified no trends indicating illnesses related to mold. Wellpath has also received no complaints from Persons Served about illnesses consistent with exposure to mold or poor air quality since June of 2019. While the report from DLC alleges that Persons Served have complained about poor air quality, the report provides no information about the source of those complaints or the dates, leaving DOC unable to further investigate or respond. With respect to other complaints, OSHA notified Wellpath of a complaint on March 4, 2022, and Wellpath responded on March 11, 2022.

To ensure that conditions at BSH remain safe and healthy, DOC has begun reviewing the specific areas of concern highlighted in DLC's recent report. As a result of that review, work has

already begun to address those areas, to conduct additional air quality testing, and to improve air purification systems.

In sum, BSH has taken many measures since DLC's 2019 report first raised questions about air quality at BSH, measures that went unmentioned in the report. DOC is aware of the challenges of maintaining the BSH physical plant and will continue to pursue measures to ensure that the BSH facility remains a safe environment for Persons Served, employees, and visitors.

Finally, with respect to your inquiry into EOPSS's opinion on a complete replacement of the BSH physical plant and construction of a new facility, EOPSS recognizes that, as with other State hospitals, the age of the BSH facility presents challenges. To be clear, however, a project to build an entirely new BSH physical plant would require the investment of several hundred million dollars and extensive planning. As such, the project would require the agreement and support of a broad range of stakeholders and, even then, would need to be evaluated as one call for capital investment alongside many that are reviewed and prioritized in determining the Commonwealth's overall, multi-year capital plan.

The Municipal Police Training Committee (MPTC) continues to work cooperatively and successfully with the Peace Officer Standards and Training (POST) Commission to implement police reform.

In your letter, you asked several questions related to the work of the MPTC and the POST Commission. As you are aware, the police reform law makes clear that the Commission is an independent agency tasked with a variety of specific independent functions over which EOPSS has no control. In fact, the Administration proposed the agencies involved here be accountable to the Executive Branch while the Legislature ultimately moved to make them independent from EOPSS and the Administration. As such, questions about the POST Commission's actions are appropriately directed to the POST Commission.

Your letter also inquired whether any steps have been taken since our response to your January 3, 2022, letter to resolve a concern you have with the use-of-force regulations for law enforcement officers that were jointly promulgated by MPTC and the POST Commission. MPTC's use of force working group, in consultation with EOPSS, has carefully reviewed the regulation in question, 550 CMR 6.04(6), in the context of the use-of-force regulations as a whole and the police reform statutes, and disagrees with your interpretation that the regulatory provision is inconsistent with "the letter and the spirit" of police reform by undermining the statutory prohibition on use of a chokehold.

Both the statute and the regulations prohibit an officer from using a chokehold,[4] and the statutory and regulatory definitions of "chokehold" are identical.[5] Furthermore, section 6.04(7) makes clear that an officer "shall not obstruct the airway or limit the breathing of any individual, nor shall a law enforcement officer restrict oxygen or blood flow to an individual's head or neck."

Section 6.04(6) does not vitiate that prohibition by somehow permitting a chokehold; indeed, it could not do so as a matter of law, as a regulation cannot permit something that a statute precludes. Instead, section 6.04(6) is properly read as carving out an exceedingly narrow set of circumstances under which an officer is permitted to use force to "sit, kneel, or stand on an individual's chest, neck, or spine." That narrow set of circumstances exists only when the force: (a) is applied for the purpose of temporarily gaining or maintaining control of a person to apply restraints; (b) does not obstruct the person's breathing or restrict blood flow to the person's neck; and (c) does not meet the statutory and regulatory definition of a "chokehold."

MPTC and the POST Commission must work within their statutory frameworks which require deliberation and concordance on the use of force regulations. Whether your concern warrants some clarification in the language of those regulations is a decision that the statute requires be made jointly by MPTC and the POST Commission. Revision is not required simply because you disagree with the policy or the legal interpretation. MPTC and the POST Commission will continue to jointly evaluate your articulated concern and determine what course of action, if any, is appropriate.

Your letter also requested information on how many law enforcement officers failed to meet initial certification requirements because of training deficiencies. As we have explained in the past, under the police reform law enacted by the Legislature and signed by the Governor, MPTC's role is not to certify law enforcement officers but to set baseline training standards, verify compliance, and track and maintain training records. The POST Commission's independent role is to utilize that information to determine whether an officer has appropriate training, among other criteria, to be eligible for recertification, and therefore this request should be directed to that independent entity.

Section 102(a) of police reform initially certified all officers who previously completed either a full-time police academy or a part-time training program approved by the MPTC. However, going forward, all officers are required to have full-time academy training. The MPTC's training verification process has identified approximately 3,600 law enforcement officers, all of whom were initially certified under section 102(a), who have less-than-full-time

[4] The statutory prohibition on chokeholds is found in G.L. c. 6E, § 14, while the regulatory prohibition appears at 550 CMR 6.05(2).

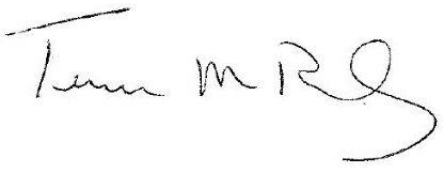
[5] Both G.L. c. 6E, § 1, and 550 CMR 6.03 define a chokehold as: "The use of a lateral vascular neck restraint, carotid restraint or other action that involves the placement of any part of a law enforcement officer's body on or around a person's neck in a manner that limits the person's breathing or blood flow with the intent of or with the result of causing bodily injury, unconsciousness, or death."

academy training and require the additional training offered by the Bridge Academy Training Program. Of those 3,600 officers, 1,500 are part of the first cohort of officers whose initial certifications expire on June 30, 2022. Currently, 863 of these 1,500 officers are enrolled in the Bridge Academy, while approximately 600 officers from this group have neither enrolled in nor opted out of the Bridge Academy.[6] A detailed breakdown of officer progress in the Bridge Academy is attached.

As stated above, your request for information about actions of the POST Commission should be directed to that agency. While EOPSS works closely with the POST Commission, the police reform law gives the Commission the sole authority to make certification decisions. EOPSS is unaware of any actions taken by the POST Commission concerning individuals who have declined to enroll in the Bridge Academy and the POST Commission has not informed EOPSS or MPTC of any action taken or planned because of the Commission's review of disciplinary records.

As always, my office is available to meet with you and other members of the Committee should you have follow-up questions or concerns. I have spent my career in improving how public safety, law enforcement, and criminal justice agencies serve the people they work for, and I share your commitment to implementing these groundbreaking laws to the fullest extent. Thank you for this opportunity to demonstrate how the dedicated public servants who go to work every day to do the same are following through on that commitment.

Sincerely,



Terrence R. Reidy, Secretary
Executive Office of Public Safety and Security

cc: Senator James Eldridge, Joint Committee on the Judiciary, Senate Chair
Senator William N. Brownsberger

[6] Any of these 1,500 officers are eligible to enroll in the Bridge Academy if they are sponsored by a law enforcement agency with which they are employed and meet administrative prerequisites.