



PRISONERS' LEGAL SERVICES OF MASSACHUSETTS

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March 17, 2023

VIA ELECTRONIC MAIL

Superintendent Nelson Alves
MCI-Norfolk
2 Clark St., PO Box 43
Norfolk, MA 02056
nelson.alves@state.ma.us

Commissioner Carol Mici
DOC Headquarters
50 Maple Street
Milford, MA 01757
carol.mici@state.ma.us

Re: Medical Parole Petition of [REDACTED]

Dear Commissioner Mici and Superintendent Alves:

Pursuant to M.G.L. c. 127, §119A, I write seeking Mr. [REDACTED] release on medical parole. Mr. [REDACTED] is a 66-year-old man currently incarcerated at MCI-Norfolk who was recently diagnosed with metastatic liver cancer. It is our understanding that he has served the entirety of a sentence of 21-23 years for armed robbery and is now serving additional time for a parole violation from the late 1990s. Mr. [REDACTED] will need the assistance of the Department of Correction to sign the medical parole releases necessary for this petition.

In February of 2023, Mr. [REDACTED] was taken from MCI-Norfolk to the emergency room at [REDACTED] Hospital due to gastrointestinal bleeding. He was then transferred to [REDACTED] for care, where he was diagnosed with metastatic hepatocellular carcinoma (a primary liver cancer). He was later seen by an oncologist at Lemuel Shattuck Hospital, who informed him that he likely had only six months to twelve months left to live.

His cancer has already metastasized to other parts of his body, including invading his portal vein, which is the main vessel that drains blood from the liver and the surrounding organs. Portal vein involvement increases the risk of tumor spread into the bloodstream and other organs. Additionally, when the portal vein is obstructed, pressure builds up in other blood vessels, including those in the esophagus. These blood vessels become stretched and weakened, and are

at high risk of bleeding. Mr. █████ cancer and liver disease place him at risk of recurrent life-threatening gastrointestinal bleeding events like the one that resulted in his admission to █████

Mr. █████ terminal cancer has already impacted his ability to engage in activities of daily living and will continue to do so. He has had increasing difficulty with walking, and tires easily. In the coming weeks and months, it is expected that he will experience more of the symptoms common in patients with advanced hepatocellular cancer and liver disease: increased abdominal pain, build-up of fluid in the abdomen, gastrointestinal bleeding, loss of appetite, weakness, fatigue, drowsiness, and confusion (due to inability of the liver to clear toxins. Given the debilitating and fast-moving nature of his cancer, Mr. █████ is extremely unlikely to pose any risk to public safety.

Mr. █████ began chemotherapy treatments at █████ on March 10, 2023 to slow the spread of his cancer, but it is our understanding that this measure is palliative and not curative in nature. As stated, his cancer is end-stage and likely to cause his death within months.

Mr. █████ positive institutional history also indicates that he will not pose a risk to public safety. He reports that he has only received one disciplinary report in the last two decades. Mr. █████ also received his GED while incarcerated and has taken college level classes at Bunker Hill Community College. He has completed numerous other classes and has been an active participant in prison fellowship groups and sports. DOC staff have also selected Mr. █████ to serve as a House Man in three different units over the years, an indication of their trust in him and his ability to work well with others. Mr. █████ has had a long and positive employment history; he has worked in the foundry, metal shop, butcher shop, and kitchen in several DOC facilities, and ran the laundry shop at Concord Farm. He has also worked on the Norfolk quad and in the visitation room.

Mr. █████ is also 66 years old. Research shows that aging is correlated with a sharp decline in recidivism risk. As stated in a Massachusetts DOC 2020 research report, formerly incarcerated people “55 and older, both male and female, recidivated at the lowest rates, consistent with research on age and recidivism.”¹ A 2017 Vera Institute of Justice report also noted that “early-release policies are also supported by recidivism research, which demonstrates that age is a significant predictor of re-offending: arrest rates drop to just more than 2 percent in people ages 50 to 65 years old and to almost zero percent for those older than 65.”² At age 66, Mr. █████ is part of this latter category. Along with his statistical unlikelihood of recidivism, Mr. █████ limited mobility, the rapid physical decline that is common in patients with end-stage liver cancer of this type, and his positive institutional history all demonstrate that he would pose no risk to public safety if released.

Mr. █████ would need the assistance of the DOC to create a suitable medical parole plan, and would need to be placed in a facility equipped to care for his cancer and meet his hospice or

¹ MA Executive Office of Public Safety and Security DOC, MA DOC THREE-YEAR RECIDIVISM RATES: 2015 RELEASE COHORT 9 (2020).

² *Aging Out: Using Compassionate Release to Address the Growth of Aging and Infirm Prison Populations* 3, VERA INSTITUTE OF JUSTICE (2017), <https://www.vera.org/downloads/publications/Using-Compassionate-Release-to-Address-the-Growth-of-Aging-and-Infirm-Prison-Populations%E2%80%94Full-Report.pdf>.

palliative care needs, whether that be a nursing facility or a DPH hospital. Mr. [REDACTED] does not have financial assets and would be eligible for public health insurance and Social Security benefits if released.

In conclusion, Mr. [REDACTED] terminal metastatic liver cancer, difficulty with ambulation, and expected continued physical decline preclude him from harming anyone or posing a risk to the public. His release is compatible with the welfare of society, and congruous with the spirit and letter of the law. He should thus be granted medical parole in accordance with M.G.L. c. 127, § 119A. Please do not hesitate to contact us about Mr. [REDACTED] petition at ahamilton@plsma.org and alin@plsma.org.

Sincerely,

/s/ Aundré Hamilton

Aundré Hamilton
Paralegal

/s/ Ada Lin

Ada Lin
Legal Fellow

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