

**GENERAL DISTRIBUTION**

**WEST VIRGINIA  
DIVISION OF CORRECTIONS  
& REHABILITATION**

**NUMBER: 454.07**

**EFFECTIVE DATE: 21 February 2024**

**SUBJECT: ACCELERATED PAROLE  
PROGRAM**

# **POLICY DIRECTIVE**

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**PURPOSE:**

To provide policy and procedure that ensures appropriate and eligible inmates are provided the opportunity to participate in the Accelerated Parole Program.

**REFERENCE:**

WV Code §§62-12-13; 62-12-19(h); and 62-12-23.

**RESPONSIBILITY:**

No additional written instructions on this subject are required.

**CANCELLATION:**

Any previous written instruction on the subject, including DCR Policy Directive 454.07, dated 08 September 2020.

**APPLICABILITY:**

All adult facilities within the Division of Corrections and Rehabilitation (DCR). This Policy is available for general distribution and is to be made available for inmate review upon the effective date.

**DEFINITIONS:**

**Accelerated Parole Program:** The process by which a statutorily eligible inmate having completed the necessary rehabilitation and programming may be presented to the WV Parole Board for parole consideration aside from his or her ordinary parole hearing date and, if granted, supervision on parole.

**Case Supervisor:** The DCR staff member assigned by the Superintendent or Unit Manager to manage the caseload of a particular inmate or group of inmates (e.g.,

Corrections Case Manager, Reentry Coordinator, Corrections Program Specialist, or Correctional Counselor).

**POLICY:**

- I. Case Supervisors assigned to address the program needs of inmates shall determine based on available information, whether an inmate meets the criteria to be eligible to participate in an accelerated parole program.
  - A. Inmates who have previously been denied parole but meet the eligibility criteria for the accelerated parole program may still apply and participate.
  - B. An inmate can only have one (1) accelerated parole hearing per incarceration unless the WV Parole Board makes a special finding that specifically permits.
  - C. This program shall not be available to any inmate who:
    1. Is serving a Life with Mercy or Habitual Life sentence.
    2. Is serving a sentence for, or has a prior criminal conviction for, a felony crime of violence against a person. As used within this policy, this includes felony offenses set forth in Article 2, 3e, 8b, or 8d of Chapter 61 of WV Code.
    3. Is serving a sentence for, or has a prior felony conviction, involving the use, presentment, or brandishing of a firearm.
    4. Is serving a sentence for, or has a prior felony conviction, where the victim was a minor child. As used within this policy, this includes felony crimes of violence against a person and any felony conviction set forth in Articles 8a, 8c, or 8d of Chapter 61 of the WV Code wherein the victim was a minor child under the age of eighteen (18) at the time of the crime.
    5. Is serving a sentence for, or has a prior felony conviction, where the crime resulted in the victim's death.
    6. Is serving a sentence for more than one (1) felony conviction for a controlled substance offense for which the inmate is serving a consecutive sentence. This includes Conspiracy to Commit or Attempt to Commit charges.
    7. Is serving a sentence for which there is a mandatory notification period per state code. These offenses are murder, aggravated robbery, sexual assault in the first or second degree, kidnapping, child abuse resulting in injury, child neglect resulting in injury, arson, or a sexual offense against a minor.
    8. Is presently incarcerated due to a parole revocation for a new felony conviction.

9. Is presently incarcerated in another jurisdiction with a consecutive or concurrent WVDCR sentence. Provided, that an otherwise eligible inmate must be within three (3) months of his or her parole eligibility date (PED) prior to being accepted into the accelerated parole program by the Commissioner for submission to the WV Parole Board for consideration.
- II. Upon receiving an inmate that is eligible for accelerated parole, the Case Supervisor shall meet with the inmate within thirty (30) working days of the Order Received date. The Case Supervisor shall gather a Pre-Sentence Investigation and LS/CMI results.
    - A. If a Pre-Sentence Investigation is not available, the Case Supervisor will request a Post-Sentence Investigation from the appropriate Parole Services staff.
    - B. The Case Supervisor shall ensure a LS/CMI is completed on the inmate. A new LS/CMI will be completed for any LS/CMI older than six (6) months.
    - C. The Case Supervisor will develop a Case Management Plan based on the inmate's LS/CMI, available programs in the facility, and other available information.
    - D. Programs based on criminogenic needs, such as substance abuse and cognitive behavioral programs, must be completed prior to release on accelerated parole.
    - E. The Case Supervisor will explain the accelerated parole process to the inmate and assist the inmate in completing Part A of the Application for Accelerated Parole (**Attachment #1**).
      1. If the inmate declines participation, the process ends.
      2. Completed applications will be scanned to the Offender Information System (OIS) Documents Management.
    - F. The Case Supervisor will also submit a copy by email to the designated Central Office records staff, who shall review the application and verify the inmate meets the statutory requirements for accelerated parole within five (5) working days and return to the Case Supervisor.
  - III. For inmates in jails who are eligible for accelerated parole, the Case Supervisor will notify the Reentry Coordinator for that jail by email of any inmates applying for Accelerated Parole and any changes in an inmate's status, movement, and program completions. If an inmate is moved to another jail, the Reentry Coordinator must notify the Reentry Coordinator for the new jail of the inmate's participation in the Accelerated Parole program and the inmate's current progress.
  - IV. The Case Supervisor shall notify the Central Office Inmate Movement Coordinator by email when Part A of Application for Accelerated Parole has been received from the designated Central Office records staff indicating the inmate has been approved to enter the Accelerated Parole Program.

- A. If the inmate's original PED is at least seven (7) months or more from the date of application, the Case Supervisor will arrange for the required programming immediately.
  - B. If the inmate is in a jail and his or her original PED is less than seven (7) months from the date of application, the Central Office Inmate Movement Coordinator shall prioritize movement of the inmate into a prison. These inmates will not be placed in classes in the jail. Inmates who have already began programming in the jails required for accelerated parole should remain in the jail in order to complete.
  - C. Intake staff at the prison will expedite the completion of the intake process and will complete all necessary steps within two (2) weeks of intake.
  - D. Facilitators and programs staff in the prison will prioritize access to classes and programs. Once the inmate is enrolled, the facilitator will notify the Reentry Coordinator of the inmate's enrollment and expected completion date.
- V. Upon completion of the required classes, the Case Supervisor will complete Part B of the Application for Accelerated Parole and send Part A and Part B by email to the appropriate Reentry Coordinator who shall review and sign indicating the inmate has completed all necessary programming.
- A. Upon signing, the Reentry Coordinator will scan Part B into OIS Documents Management and work with the designated Central Office records staff to schedule the inmate for a parole hearing up to three (3) months prior to his or her original PED.
  - B. In determining what month to schedule the parole hearing, all required documents must be accepted twenty (20) working days prior to the date of the parole hearing. If unable to meet this deadline, the parole hearing will be scheduled for the following month.
  - C. The designated Central Office records staff will modify the hearing date in OIS upon this determination.
- VI. If an inmate becomes ineligible for accelerated parole or willfully withdraws or is removed due to conduct from classes or programs required for accelerated parole, he or she will be removed from the accelerated parole program and his or her parole hearing will be reset to the original PED. The Reentry Coordinator will communicate this information to the designated Central Office records staff.

**ATTACHMENT(S):**

#1 Application for Accelerated Parole

APPROVED SIGNATURE: William K. Marshall III Feb 21, 2024  
William K. Marshall III, Commissioner Date

# WEST VIRGINIA DIVISION OF CORRECTIONS & REHABILITATION

## Application for Accelerated Parole

### Part A

Application Date: \_\_\_\_\_

Inmate's Name & OID#: \_\_\_\_\_  
Last First Middle OID#

Current Facility: \_\_\_\_\_ Inmate's Original PED: \_\_\_\_\_

Inmate's Next Hearing Date: \_\_\_\_\_ Inmate's MDD: \_\_\_\_\_

Required Classes: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

DOES THE INMATE MEET THE MINIMUM ELIGIBILITY STANDARDS FOR THIS PROGRAM AS SET FORTH IN POLICY DIRECTIVE 454.07 ACCELERATED PAROLE PROGRAM? \_\_\_\_ Yes \_\_\_\_ No

I, (print inmate's full name) \_\_\_\_\_, am hereby submitting this request to the Division of Corrections and Rehabilitation for consideration for my acceptance into the Accelerated Parole Program. By virtue of this application, I acknowledge that I will successfully complete my program plan prior to my parole hearing if accepted into this program and granted accelerated parole. I also understand and agree to abide by any stipulations assigned by the Commissioner that may be required for my acceptance into this program. I further represent that I have read and reviewed the criteria for participation in the Accelerated Parole Program and that I affirmatively represent that my conduct, criminal history, and all other aspects of my background meet the requirements of this program. I further understand that if this statement is determined to be false, I am subject to discipline under the inmate discipline policy.

\_\_\_\_\_  
Signature of Inmate and OID#

date

\_\_\_\_\_  
Signature of Case Supervisor

date

Approved to enter Accelerated Parole Program

Does not meet qualifications for Accelerated Parole Program

\_\_\_\_\_  
Reviewing Central Office Records Department Staff Signature

date

**Part B**

Inmate's Name & OID#: \_\_\_\_\_  
Last First Middle OID#

Required Completed Classes:

Completion Date:

- |    |       |       |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |

\_\_\_\_\_  
Printed Name of Inmate and OID#

\_\_\_\_\_  
Printed Name of Case Supervisor

\_\_\_\_\_  
Signature of Inmate and OID#

date

\_\_\_\_\_  
Signature of Case Supervisor

date

The inmate has completed all necessary programming and is ready to be processed for Accelerated Parole.

\_\_\_\_\_  
Reentry Coordinator Signature

\_\_\_\_\_  
Date Submitted