



Maryland Crime Victims' Resource Center, Inc.

Continuing the Missions of the Stephanie Roper Committee and Foundation, Inc.

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RE: Unfavorable HB 190

Dear Chair Clippinger and Esteemed Committee Members,

Parole is a longstanding tradition, one that has been an integral part of Maryland's criminal justice system since the Civil War era. The first Advisory Board of Parole was established in 1914, and in 1922, the Parole Commissioner assumed responsibility for overseeing parole functions. Over the years, there have been several iterations of the parole system, with the current iteration, the Maryland Parole Commission, having been in place since 1976.

Having worked in the criminal justice system across multiple states, I can say that no other state exhibits the same level of confusion and disregard for crime victims as Maryland. I have been an attorney for over 17 years, serving as a prosecutor in Washington State, California, and Maryland. Additionally, I spent four and a half years as in-house counsel at the California Department of State Hospitals, which provides psychiatric care for individuals in the criminal justice system, including those deemed incompetent to stand trial and those identified as sexually violent predators.

For the past three years, I have served as a victim rights attorney at the Maryland Crime Victims Resource Center (MCVRC) and recently became the Deputy Director. This role has been the most rewarding of my career, allowing me to support crime victims during their most challenging times.

However, under the leadership of the current Secretary of the Department of Public Safety and Correctional Services (DPSCS), Carolyn Scruggs, there has been an increasing push to alter both the structure of the Parole Commission and the statutes governing parole. This push is primarily driven by the belief that more violent offenders should be released from prison, an approach that overlooks the critical importance of public safety. This latest legislative proposal is a continuation of that trend. While Maryland's prison population has significantly decreased, dropping over 20% from a high of more than 24,000 inmates in 2003 to just over 15,000 this year, this bill threatens to undermine the delicate balance between rehabilitation and public safety by opening the door wider to the release of violent offenders.

A key concern lies in the bill's definition of "chronically debilitated or incapacitated," which is overly broad. This definition applies to individuals with a diagnosable medical condition that impedes their ability to perform at least one of the following daily activities: eating, breathing, dressing, grooming, toileting, walking, or bathing, even if assistance is required. While it is important to address the medical needs of incarcerated individuals, such an expansive and vague criterion could easily be exploited, granting parole to offenders whose condition may not truly warrant it. The risk here is that medical diagnoses, which can vary greatly in terms of severity and impact, could be used as a justification for parole that does not sufficiently consider the danger posed by the individual to the broader community.

Additionally, the proposed bill significantly curtails the discretion of the Parole Commission, requiring that hearings be granted to certain individuals regardless of circumstances. More concerning is the bill's provision that mandates equal weight be given to doctors' reports, a decision that undermines the Commission's ability to make fully informed, nuanced decisions based on a variety of factors. It is well-established that expert opinions—particularly in medical and psychological fields—are often open to interpretation, with opposing experts frequently offering divergent views. Mandating that the Parole Commission prioritize one type of expert opinion over others reduces the complexity and integrity of the decision-making process.

Why is there a notion that if someone is sick enough, that entitles them to cut short their sentence and negate the Court orders that they serve a life sentence? What about the killer of Lt. Richard Collins who was stabbed and killed while standing at a bus stop on the University of Maryland College Park campus by a man who did not know Lt. Collins and decided that he did not like the color of his skin? That defendant (Sean Urbanski) was given a life sentence and should he be allowed out merely because he suffers a medical issue in the future? There are many other atrocious murderers and violent crimes like the one that took Lt. Richard Collins' life. Why do we as a society not say that some crimes are so egregious that the offender should serve the rest of their life in prison and die there? In fact, I would argue that the Judge did say so and the people of Maryland believe that is what life in prison means.

Moreover, the bill stipulates that individuals considered for parole under this section must automatically be reconsidered every two years. This includes some of the most dangerous offenders, such as those serving life sentences for particularly violent crimes. Such an approach could lead to the continual re-

evaluation of individuals who, despite their medical conditions, may still pose significant risks to public safety. The frequency of these reviews places an undue strain on the Commission's resources and raises concerns about the safety of Maryland residents if violent offenders are consistently released or given the opportunity for early release. The supposed argument that inmates currently released under medical parole die within a year of their release is the exact reason that medical parole was created and means that it working well.

In conclusion, while it is crucial to address the health and rehabilitation of incarcerated individuals, HB 190's broad and imprecise definitions, coupled with its attempts to minimize the discretion of parole authorities, present significant risks. By focusing too heavily on medical conditions and granting automatic reviews for violent offenders, this legislation could jeopardize the safety of the public in favor of an overly lenient approach to parole. The balance between rehabilitation and public safety must remain a priority, and careful, thoughtful consideration must guide any changes to Maryland's parole system.

I oppose HB 190 and would urge an unfavorable finding.

Sincerely,

A handwritten signature in black ink, reading "Joanna D. Mupanduki". The script is cursive and fluid, with the first letters of each word being capitalized and prominent.

Joanna D. Mupanduki
Deputy Director