

ELECTRONIC MONITORING PROGRAM

The Electronic Monitoring Program is designed as a tool to assist an individual while navigating the Vermont judicial system with the ability to reside in a home environment while maintaining the ultimate goal of restricting movement and protecting the public.

Electronic supervision technology alone does not comprise a program. The program needs to include a strategy for end results, public safety, case management, and operational staffing needs. The decisions should be made also on the needs on the county's judicial system including the sheriff's office through a well-trained staff to implement and utilize the equipment and perform case management.

The Electronic Monitoring Program is designed to restrict the movements of pre-trial individuals within the State of Vermont judicial system through a global positioning system (GPS) applied to the individual's ankle. The anklet obtains data by satellite signal triangulation which then transfers the data through cellular phone systems to a monitoring structure on a "real-time" basis. Known as an "active" system, the signals are monitored consistently through a central monitoring center associated with the device vendor, the Windham County Sheriff's Office dispatch center, and the Electronic Monitoring Program staff. Movement is limited to the assigned residence 24/7 with preapproved exceptions by the court or program staff. Deviation from rules of the program may result in immediate response from a law enforcement official or program staff leading to disciplinary actions. Specific violations of the program will result in the individual's immediate return to a correctional facility.

Most electronic monitoring devices communicate through cellular telephone technology. One drawback to the use of such system is "dead spots". In these areas the individual's data will momentarily not be displayed in "real-time" status although data is being collected. When the individual leaves the "dead spot" the data will download and be displayed on the software program. Equipment should be tested in the user's area to ensure the proper cellular carrier is selected for the individual user. This may involve the use of more than one monitoring system. Additional concerns to be evaluated include building construction, weather, and geographical interference.

Electronic monitoring may provide a cost savings to the State of Vermont Department of Corrections budget, eventually impacting the tax payers. The increase of open bed space within the Vermont jail system may lead to the possibility of returning out of state inmates, reducing housing costs per inmate, per day. The impact to the community would include allowing the individual to return to the workforce, thus stimulating the local economy and/or obtaining further educational benefits leading to local employment and economic growth. The opportunity exists to maintain and/or enhance family relationships while continuing or starting medical related treatments if needed.

Pre-trial monitoring allows an individual charged with an offence, and unable to make bail, the opportunity to be released from a correctional facility on conditions of release and electronic monitoring program rules until such time bail is met or the case is adjudicated. Pre-trial monitoring provides strict supervision while allowing family contact, employment, education, and the ability to seek treatment for medical, mental health, or addiction issues that may not be available in a corrections setting. All of these situations will present opportunities for increase in personal, family, and community growth and involvement.

The following manual is developed to assist in establishing and maintaining an electronic monitoring program within Windham County.

ELECTRONIC MONITORING PROGRAM



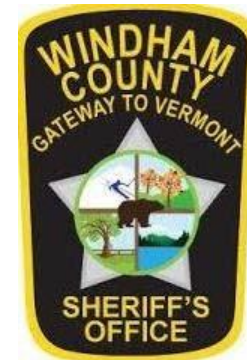
The Windham County Sheriff's Office offers an Electronic Monitoring Program providing risk control through comprehensive tracking and monitoring equipment. The Electronic Monitoring Program is a cost effective alternative to incarceration while allowing the alleged offender to maximize their contribution to the community and their family.

Electronic Monitoring Program

WINDHAM COUNTY SHERIFF'S OFFICE

11 Jail Street
Newfane, VT 05345
Tel: 802-365-4942
Fax: 802-365-4945

ELECTRONIC MONITORING PROGRAM



Windham County
Sheriff's Office

PROGRAM PARTICIPATION INFORMATION

The Electronic Monitoring Program is a pre-trial or post adjudication judicial alternative. It is an excellent opportunity for eligible participants to adhere to their legal obligations while remaining in the community and their families. It is expected that, barring unusual circumstances, the participants will exhibit a stable and productive community life. By allowing an individual to remain in (or re-enter) the community as a productive citizen, he/she can continue to contribute to the welfare of his/her family and society as a whole, as well as receive any needed treatment. Since participants are selected into the EMP there is no tolerance for manipulation or failure to comply with the program regulations. Those who fail to adhere to the conditions of the EMP will face termination from the program, possible incarceration. It is fully expected that those participants who are chosen to participate will be serious and complete the program.

PRELIMINARY REQUIREMENTS

- The participant must pass an assessment determining the level of supervision to be provided.
- The participant must be willing and able to agree to abide by all conditions of the program.
- The participant must be able to provide cellular/telephone service connection for the tracking device.
- The participant must have a suitable residence.

APPLICATION PROCESS OVERVIEW


- File application for admittance to program.
- Application data reviewed by Electronic Monitoring Program staff..
- Determination of acceptance or denial into program.
- Upon acceptance, meet with program staff to review additional information to include, but not limited to:
 - Participant responsibilities
 - Completion/Termination Process
 - Overview of Participant Handbook
 - Placement on tracking device

Additional information about the Electronic Monitoring Program may be obtained by contacting:

Electronic Monitoring Program Coordinator

Windham County Sheriff's Office

11 Jail Street
Newfane, VT 05345
Tel: 802-365-4942
Fax: 802-365-4945


	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 001
		Effective Date	
	<u>Title:</u> Eligibility and Court Process	Revision Date	
		Page 1 of 2	

Policy


The Electronic Monitoring Program of Windham County shall establish a procedure for determining eligibility for admission to the Electronic Monitoring Program and the process of receiving applications for placement of individuals onto the Electronic Monitoring Program.

Procedures

1. If the judicial officer determines that conditions of release imposed to ensure appearance will not reasonably protect the public, the judicial officer may impose, in accordance with Title 13 VSA § 7554d, a defendant in an Electronic Monitoring Program as a community-based electronic monitoring program of this title if:
 - a. The monitoring program is available in the jurisdictional county,
 - b. The monitoring program agrees to supervise him/her,
 - c. The defendant is charged with an offense that is not a nonviolent misdemeanor or nonviolent felony as defined in 28 V.S.A. § 301:
2. The Court shall use the following criteria in section 7554b for determining whether home detention electronic monitoring is appropriate;
 - a. the nature of the offense with which the defendant is charged;
 - b. the defendant's prior convictions, history of violence, medical and mental health needs, history of supervision, risk of flight;
 - c. any risk or undue burden to other persons who reside at the proposed residence or risk to third parties or to public safety that may result from the placement.
3. The Court may:
 - a. Place restrictions on the travel,
 - b. association,
 - c. place of abode of the defendant during the period electronic monitoring,
 - d. require the defendant to participate in an alcohol or drug treatment program. The judicial officer shall take into consideration the defendant's ability to comply with an order of treatment and the availability of treatment resources.
4. Any applicant presenting a potential conflict of interest with a staff member of the jurisdictional Sheriff's Office will be transferred to the closest county in which the monitoring program is in use in which a conflict does not occur.
5. Participants of the Electronic Monitor Program are required to abide by the rules of the Electronic Monitoring Program to include, but not limited to, adhering to inclusion zones, exclusion zones, schedules, time restrictions, home visits (announced and unannounced) care and charging of the electronic device(s). Failure to comply with any of these conditions may result in a violation being filed with the Court and removal from the Electronic Monitoring Program.

	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 001
		Effective Date	
	<u>Title:</u> Eligibility and Court Process	Revision Date	
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6. The Electronic Monitoring Program or Sheriff's staff will provide the potential participant with initial information and application regarding the Electronic Monitoring Program.


	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP-002
		Effective Date	
	<u>Title:</u> Housing Requirements	Revision Date	
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Policy

The Electronic Monitoring Program shall establish a procedure for identifying housing requirements for participants entering the Electronic Monitoring Program.

Procedure

1. Participants are required to provide a residence in which cellular service may be maintained matching one of the companies used by the monitoring program.
2. The participant must provide, at his or her cost, a land-line telephone service if he/she resides in a location in which no cellular/GPS service is available,
3. A check of the proposed domicile of the participant will be conducted for the following, but not limited, reasons:
 - a. Agreement for the participant to reside in the domicile by other occupants,
 - b. Agreement by housing director if government housing facility,
 - c. Removal of unauthorized items per court sanctions and/or program rules specific to the participant.
4. If the participant is not the sole occupant of the residence, all occupants over the age of 18 shall willingly agree to an Occupation of Home Agreement indicating willingness to have participant reside in the domicile.
5. Participant housing will be determined to at least the minimum restriction in relation to the victim(s) as set forth in any court sanctions.

	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 003
		Effective Date	
	<u>Title:</u> Installation and Removal of Monitoring Device	Revision Date	
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Policy

The Electronic Monitoring Program shall establish a procedure for the installation and removal of the electronic monitoring device upon a participant of the Electronic Monitoring Program.

Procedure


Installation of the monitoring device

1. Cell coverage
 - a. Each brand of monitoring device operates on a separate cellular service provider.
 - b. During the course of the participant's domicile inspection, a cellular service check shall be conducted to determine which cellular service provides the appropriate service.
2. Address for device attachment
 - a. The participant will be transported to the Vermont District Court for attachment and activation of the monitoring device.
 - b. Transportation of participant shall occur through the court transport request system.
 - c. The Electronic Monitoring Program staff, or designee, may determine an alternate location for the attachment and application.
3. Physical installation of the monitoring device
 - a. Each participant remains in custody of a deputy of the Sheriff's Office until full activation of monitoring program device.
 - b. Installation and activation process will be based on vendor installation documentation.
4. Connection to software
 - a. Upon device activation, finalization of current data input occurs.
 - b. Electronic Monitoring Program staff reviews data with participant to ensure accuracy.
5. Release of individual to domicile
 - a. Prior to release participant will sign all court and monitoring program documentation.
 - b. Upon completion of activation and signing of any documentation, participant shall be released to an approved individual for transportation to the participant's domicile.
 - c. If a participant is unable to arrange his/her own transportation, a deputy may, with approval of a patrol sergeant or higher, transport the participant to his/her approved domicile.


	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 003
		Effective Date	
	<u>Title:</u> Installation and Removal of Monitoring Device	Revision Date	
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Removal of device

1. Transport to/removal at a correctional facility
 - a. The Electronic Monitoring Program staff will be contacted when the need occurs to return a detainee to a Department of Corrections facility, or if the detainee has already arrived at a Department of Corrections facility.
 - b. Upon notification from a dispatcher, patrol supervisor, or on-duty employee of a Department of Corrections facility, an Electronic Monitoring Program staff member or designee will deactivate the monitoring device in the corresponding software program.
 - c. Upon deactivation, the device will be removed and the participant entered into the Department of Corrections housing facility.
 - d. The monitoring device will be removed from the participant as appropriate.
 - e. Upon removal the victim(s) will be notified immediately by means identified by victim(s) (i.e.; telephone, email, etc.) of the removal of the participant from the program.
 - f. The monitoring device will be returned to the Electronic Monitoring Program staff where it will be properly cleaned and stored.
2. Release from program by court proceedings
 - a. Upon determination that a participant is to be released from the Electronic Monitoring Program due to completion of court sanctions, the defense counsel or court system is to notify the monitoring program staff.
 - b. An Electronic Monitoring Program staff member and deputy will meet with the participant at the Vermont District Court for the removal of the monitoring device.
 - c. Once deactivation is completed and the monitoring device removed as appropriate, the participant is considered officially removed from the Electronic Monitoring Program.
 - d. Upon removal the victim(s) will be notified immediately by means identified by victim(s) (i.e.; defense attorney, telephone, email, etc.) of the removal of the participant from the program.
 - e. The device and associated equipment will be returned to Electronic Monitoring Program staff where it will be properly cleaned and stored.
3. Medical Response
 - a. The dispatcher will be notified of an emergency care providers need for removal, or the actual removal of a monitoring device for medical treatment either by telephone on alert through the monitoring company. The dispatcher will notify the Electronic Monitoring Program staff, supervisor on-call, and Sheriff of removal alert.

	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 003
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	<u>Title:</u> Installation and Removal of Monitoring Device	Revision Date	
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- b. If time allows, arrangements will be made for the custodial control by a deputy of the participant's needs while the monitoring device is removed.
- c. A deputy will be assigned for custodial control of detainee while being treated during which time the device is removed.
- d. As soon as possible, the monitoring device will be deactivated within the software system.
- e. Upon completion of medical attention, a monitoring device will be reinstalled.
- f. If the custodial deputy is unable to attach and activate the monitoring device, an Electronic Monitoring Program staff member, or designee, will respond to attach and activate a monitoring device.
- g. The removed device will be retrieved from the treating medical personal or facility.
- h. Upon activation of the new monitoring device, the participant will be returned to his/her required program schedule.

	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 004
		Effective Date	
	<u>Title:</u> Restrictions and Scheduling	Revision Date	
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Policy

The Electronic Monitoring Program shall establish a procedure for restrictions and scheduling for participants of the Electronic Monitoring Program.


Procedure

Restrictions

1. The participant will be confined to his/her domicile continuously, 24/7, as ordered through court sanctions, or under Electronic Monitoring Program approved obligations.
2. Notification will be provided to the State's Attorney, defense council, victim's advocate, and victim regarding inclusion and exclusion zones, and scheduling.

Scheduling

1. When a participant is placed on the Electronic Monitoring Program all mandated obligations will be reviewed and scheduled including,
 - a. Date
 - b. Time
 - c. Location
 - d. Reason
2. On the first Monday following initial placement on the program a monitoring program staff member and detainee will confirm on-going mandated court sanctions.
3. Once a week a monitoring program staff member and participant shall review the following weeks schedule to determine if allowable exceptions are to be scheduled.
4. Any changes to the participant's schedule will be documented and appropriate notifications indicated in the scheduling software.
5. Changes to the schedule are to be reported within 72 hours of the requested change to the State's Attorney, defense attorney, victim's advocate (if applicable), and victims (if requested).
6. Notification of emergency changes will be sent as soon as possible through the most appropriate means in relation to the situation (i.e.: email, phone call, on-call attorney).

	<i>Windham County Sheriff's Office</i>		Procedure Number	EMP - 005
	Electronic Monitoring Program		Effective Date	
	<u>Title:</u>		Revision Date	
	Program Termination		Page 1 of 1	

Policy

The Electronic Monitoring Program shall establish a procedure for termination of participants from the Electronic Monitoring Program.


Procedure

Successful Completion

1. The successful completion of the Electronic Monitoring Program is determined when the participant is released from the monitoring program at the request of the court not due to a violation of court ordered sanction or violation of the rules of the monitoring program.
2. The Electronic Monitoring Program staff will be notified by the defense counsel, or legal representative, of the pending monitoring program completion with proposed release date and/or when bail status has been met.
3. The participant is not formally removed from the Electronic Monitoring Program until monitoring program staff has been officially released from judicial sanctions, the monitoring device is removed, and all associated equipment has been returned to the Sheriff's Office.

Unsuccessful Completion

1. The completion of the monitoring program will be deemed unsuccessful if the participant is removed from the program due to violation(s) of court ordered sanctions and/or rules of the monitoring program.
2. The court, State's Attorney's Office, and defense counsel will be notified within 1 (one) business day of the participants change in program status.
3. The participant will not be eligible to reenter in the monitoring program for at least 12 months after removal.
4. The participant shall be returned to a pre-Electronic Monitoring Program judicial status.
5. Upon removal the victim(s) will be notified immediately by means identified by victim(s) (i.e.; telephone, email, etc.) of the removal of the participant from the program.
6. The participant is responsible for the return of all Electronic Monitoring Program equipment. Missing or damaged equipment may result in fees and/or criminal charges.


	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 006
		Effective Date	
	<u>Title:</u> Confinement Time Calculation	Revision Date	
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Policy

The Electronic Monitoring Program shall establish a procedure for determination of time an individual is detained on the monitoring program.

Procedure

1. The Electronic Monitoring Program does not guarantee the time a participant is confined to an electronic monitoring device will count as "time served" in judicial proceedings.
2. The Electronic Monitoring Program confinement time calculations may be used by judicial agencies/personnel as they deem appropriate in judicial proceedings.
3. The Electronic Monitoring Program confinement time starts and ends on the day when the monitoring device is applied and removed, regardless of the time of day.
4. EMP start date, end date, and duration of time on the Electronic Monitoring Program shall be documented on the defendant's monitoring program's release document.

	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 007
		Effective Date	
	<u>Title:</u> Coordinator Responsibility	Revision Date	
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Policy

The Electronic Monitoring Program shall establish a procedure for the performance of duties of the Electronic Monitoring Program Coordinator.

Procedure

Application Process

1. The Electronic Monitoring Program Coordinator is responsible to coordinate with judicial personal to obtain applications from potential participants for placement on the monitoring program.
2. Upon determination of an individual's eligibility status the Electronic Monitoring Coordinator will file an Acceptance-Denial Status Notification Form with the defense attorney, State's Attorney, and court.
3. A mittimus for judge signature and transport order request will be submitted to the court clerk for signature and return.


Device

1. Once date of installation of monitoring device has been determined, an identified individual will be contacted to meet at the Vermont District Court for retrieval of the individual being monitored.
2. The monitoring device will be applied per established policy.
3. Upon conclusion of participant's confinement on the monitoring program the monitoring device will be removed from the participant
4. The device shall be inspected for defects and damages, and cleansed per manufactures instructions for placement back in circulation.

Communication

Participant

1. Per program agreement, the participant will maintain either physical or verbal contact with the Electronic Monitoring Coordinator, or staff, at a random or designated time and/or location schedule
2. Variations to movements are to be requested once per week with approval provided by the program coordinator before movement can occur.
3. Emergency changes are to be requested with a minimum of 72 hours notice. Exceptions are made for medical emergencies of self, children, or parents.
4. Notes shall be maintained in the participant's case file throughout the participant's confinement on the monitoring program.


	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 007
		Effective Date	
	<u>Title:</u> Coordinator Responsibility	Revision Date	
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State's Attorney

1. Upon receipt of an application, the prosecuting attorney will be notified via email of the individuals request for placement on the Electronic Monitoring Program.
2. Request of information from prosecuting attorney will be made for recommendation of acceptance or denial into the program with reasoning for such decision.
3. Information provided by prosecuting attorney shall not be deciding factor in acceptance into the monitoring program.
4. The prosecuting attorney will be notified via an Acceptance-Denial Status Notification Form of results of monitoring program placement.
5. Electronic Monitoring Program Coordinator shall provide the prosecuting attorney with the detainee's movement schedule including date, time, location, and purpose of movement.
6. Any changes from the weekly movement schedule shall be provided at a minimum of 72 business hours prior to movement, unless in the case of emergency needs, which will be documented as soon as possible.
7. Prosecuting attorney may provide input into movement changes within 24 business hours of receipt of movement changes.
8. Input on movement changes does not guarantee changes will/will not occur.
9. Any verbal communications with members of the State's Attorney office will be followed up with email correspondence.

Defense Attorney


1. Upon receipt of an application, the defense attorney will be notified via email of the individuals request for placement on the Electronic Monitoring Program.
2. Request of information from the defense attorney will be made for recommendation of acceptance or denial into the program with reasoning for such decision.
3. Information provided by defense attorney will not be deciding factor in acceptance into the monitoring program.
4. The defense attorney will be notified via an Acceptance-Denial Status Notification Form of results of monitoring program placement.
5. Electronic Monitoring Program Coordinator will provide the defense attorney with copies of all documents provided to the prosecuting attorney.

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		Effective Date	
	<u>Title:</u> Coordinator Responsibility	Revision Date	
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6. The defense attorney shall be provided with the participant's movement schedule including date, time, location, and purpose of movement.
7. Any changes to the movement schedule shall be provided at a minimum of 72 business hours prior to movement, unless in the case of emergency needs, which will be documented as soon as possible.
8. The defense attorney may provide input into movement changes within 24 business hours of receipt of movement changes.
9. Input on movement changes does not guarantee changes will/will not occur.
10. Any verbal communications with members of the defense counsel's office will be followed up with email correspondence.
11. The defense counsel is responsible for notifying the monitoring program staff for changes in counsel representation.
12. The defense counsel is responsible for notifying the monitoring program staff of changes in the participant's judicial status, i.e.; bails has been posted.

Victim

1. To ensure re-victimization does not occur, initial communication is conducted through the victim's advocate and victim.
2. The victim's advocate is notified of the application of an individual in which there is a known victim
3. The victim's advocate provides an overview of course of action and program process to the victim(s) for understanding and input
4. Victim input does not guarantee acceptance or denial into the Electronic Monitoring Program.
5. The victim will notify, and in turn notification made to the monitoring program staff, the Victim's Advocate the victims preferred method of contact (i.e.: through victim's advocate, directly from program staff).
6. Upon the defendant's approval into the Electronic Monitoring Program the Program Coordinator and or Sheriff's Office will notify the victim of the approval.
7. Minimally the information to be provided to the victim includes:
 - a. Date of release into the EMP,
 - b. location of residence,
 - c. approved absences from home,
 - d. work and treatment program locations, and
 - e. established safety measures.

	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 007
		Effective Date	
	<u>Title:</u> Coordinator Responsibility	Revision Date	
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8. Any changes to the defendant's status, place of residence, place of employment, treatment programs will be provided to the victim by and through their appointed victim's advocate.
9. Notification will be made to the victim directly in incidents in which the participant's location cannot be verified.


	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP - 008
		Effective Date	
	<u>Title:</u> Dispatch Responsibilities	Revision Date	
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Policy

The Electronic Monitoring Program shall establish dispatching responsibilities for the monitoring of participants on the Electronic Monitoring Program.

Procedure

1. The dispatcher will sign into the Electronic Monitoring software program(s) at the beginning of shift to consistently monitor and/or track the participants(s).
2. When an alert/violation is received, the dispatcher will visually confirm the alert/violation through locating the participant on the Electronic Monitoring Program software in relation to the detainee's authorized schedule and designated location.
3. If visual confirmation cannot be obtained, the participant will be alerted through the monitoring device to call in to dispatch to verify location.
4. If the dispatcher is unable to verify the alert/violation, than notification will be made to the deputy on-duty for the community of the participant's last known location to respond to the participant's last known location.
5. If there is no deputy on-duty in the community of the participants last known location, than the closest available deputy on-duty will be contacted to respond.
6. If there is no deputy available for response, the on-call patrol supervisor will be notified for response.
7. The dispatcher will notify the Electronic Monitoring Program staff of the need for response, including reason for response.
8. **If the violation is for entering an exclusion zone the closest law enforcement agency(ies), which may include the Vermont State Police and municipal police in addition to the Sheriff's Office, will be notified of the status of the participant and there is a high likelihood the participant has entered an exclusion zone for the purpose of harassing or injuring a victim or witness of a criminal offense.**
9. Notification of exclusion zone violation response will be made to the Electronic Monitoring Program staff, patrol supervisor of a rank of sergeant or higher, and the Sheriff.
10. The following offenses will require immediate response from a deputy or patrol supervisor:
 - a. Detainee has left the inclusion zone for an unscheduled event or unknown reason,
 - b. Detainee has entered a buffer or exclusion zone,
 - c. Detainee's whereabouts are unknown for 3 hours or more,
 - d. Detainee has cut, removed, and/or tampered with the monitoring device,
 - e. Detainee has violated court ordered conditions of release against the victim.

	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP-009
		Effective Date	
	<u>Title:</u> Deputy Responsibilities	Revision Date	
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Policy

The Electronic Monitoring Program shall establish deputy responsibilities when interacting with participants of the Electronic Monitoring Program.


Procedure

Compliance Checks

1. The deputies shall conduct compliance checks of participants of the Electronic Monitoring Program on a regular basis to ensure adherence to judicial sanctions and monitoring program rules.
2. All compliance checks and interactions with participants(s) will be documented in the dispatch log and reported to the monitoring program coordinator.
3. During compliance checks the deputy shall inspect the monitoring device and strap to:
 - a. Determine if the device or strap is damaged
 - b. Determine if the device or strap has been tampered with
 - c. Determine if the device or strap is properly fitted
 - d. Determine if there is skin irritation requiring the device to be placed on the other ankle
 - e. Determine if the device is in need of cleaning. Removal for cleaning should occur every 30 days. Cleaning should be in accordance with manufacturer's guidance.

Alert/Violation Response

1. Upon notification, the deputy will respond to confirm or dismiss the received alert/violation.
2. The deputy will explain to the participant the type of alert/violation and the needed action to rectify the alert/violation, and/or, obtain custody of the participant for return to a Department of Corrections facility.
3. The following offenses shall require immediate response which may result in the detainee being returned to a Department of Corrections facility on a mittimus.
 - a. Detainee has left the inclusion zone during an unscheduled time,
 - b. Detainee has entered a buffer or exclusion zone,
 - c. Detainee's whereabouts are unknown for 3 hours or more,
 - d. Detainee has cut, removed, and/or tampered with the monitoring device or device strap,
 - e. Detainee has violated court ordered sanction (i.e., relief from abuse order, condition of release, plea agreement) against the victim.
4. Notification will be made to the victim directly in incidents in which the participant's location cannot be verified.
5. Violations of conditions of release are to be investigated as such, but in an expedited manner. Results of violations of conditions of release are grounds for participants to be returned to pre-program status.

	<i>Windham County Sheriff's Office</i> Electronic Monitoring Program	Procedure Number	EMP – 010
		Effective Date	
	<u>Title:</u> Data and Records Retention	Revision Date	
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Policy

The Electronic Monitoring Program shall establish and maintain a procedure for records management and data retention and use.

Procedures

1. The Windham County Sheriff's Office and participating Sheriffs shall maintain and store records of Electronic Monitoring Program participants in accordance with guidance provided by the Secretary of State.
2. All records and documents shall be considered public record unless exempt under the provisions of Title 1 VSA § 317.
3. The WCSO shall maintain a database which shall contain at a minimum the following:
 - a. Name of participant with contact information
 - b. Offense(s) charged
 - c. Date of Acceptance into program
 - d. Date of Rejection and Reason for Rejection
 - e. Date of Release from program and reason for release
 - f. Date and Times of Site Visit(s)
 - g. Court of Jurisdiction
 - h. Sheriff Office providing electronic monitoring
 - i. If there is a victim(s)
4. Victim information will be maintained confidential within the monitoring program database pursuant to Title 13 V.S.A. § 5310.



ELECTRONIC MONITORING PROGRAM

WINDHAM COUNTY SHERIFF'S OFFICE

11 Jail Street, Newfane Vermont 05345

Tel: (802) 365-4942

Fax: (802) 365-4945



Notification of Approval/Denial for the Electronic Monitoring Program

DATE:

DOCKET #

The following individual has been approved/denied for the Electronic Monitoring Program:

- ☐ **Approved**
☐ **Denied**

<u>NAME:</u>	<u>DOB:</u>
<u>ADDRESS:</u>	
<u>TELEPHONE NUMBER:</u>	

JUDGE
STATE'S ATTORNEY
DEFENSE ATTORNEY

The above reference individual has been declined from participation in the Electronic Monitoring for the following reason(s):

- ☐ Charge/conviction of felony offense(s)
☐ Consideration of Criminal History
☐ Sexual criminal charges or convictions
☐ Violent criminal charges or convictions
☐ Length of sentence
☐ Violation of court order(s)
☐ Previous escape from any judicial program
☐ The offender has a history of habitual offenses
☐ Consideration of application facts
☐ Resides outside Windham County
☐ Other:

EMP Coordinator Signature

Date

STATE OF VERMONT

SUPERIOR COURT

_____ Windham _____ Unit

CRIMINAL DIVISION

Docket No.

STATE of VERMONT	v.	Defendant's Name	DOB
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Docket No.	Offense

MITTIMUS TO ELECTRONIC MONITORING PROGRAM

TO ANY LAW ENFORCEMENT OFFICER OF THE STATE OF VERMONT: You are ORDERED to take and commit the person named above to the custody of the Commissioner of Corrections or an authorized representative, who is ordered to detain the above named person so that he or she may appear before this court for further proceedings, or until he or she has posted bail as set forth below, or is otherwise discharged by law.

1. Bail Status

On _____, Defendant was ordered:

Held pending payment of \$ _____ in cash on an Appearance Bond in the amount of \$ _____.

Held pending payment of \$ _____ cash or Bail Bond with solvent securities.

Held without bail.

2. Program Conditions: Pending the posting of bail as set forth above, further order of the court, or revocation of electronic monitoring status, the defendant shall be detained in the ELECTRONIC MONITORING PROGRAM, providing the following conditions are met:

a. **Supervision:** Supervised under electronic monitoring by Windham County Sheriff's Office in accordance to 13 V.S.A. § 7554d.

b. **Approved Residence:** Defendant shall reside at the following address:

Town/City	
State	Zip code
Telephone: Defendant MUST have a cellular/ landline to qualify for program	
Cellular/Landline Phone, if any	

- c. **Approved Absences:** Defendant may be absent from the residence for the following purposes:

Court appearances - for these proceedings (no transport required)
Employment – if approved by the Windham County Sheriff's Office
Treatment Appointments
Medical Appointments
Attorney Appointments w/notice
Educational Services
Other Absences - Only as Approved by the Windham County Sheriff's Office

3. **Revocation of Home Detention Status:** The Windham County Sheriff may revoke the defendant's electronic monitoring program status for failure to comply with the conditions of the program or conditions of release as ordered by the Court. Upon revocation of the electronic monitoring program status, the defendant shall be returned to a correctional facility until further order of the court.
4. **Electronic Monitoring Equipment:** Defendant will be financially responsible for any damaged or lost electronic monitoring equipment that is assigned to him or her by the Windham County Sheriff's Office.

Judicial Officer	Date
------------------	------

OFFICER'S RETURN

By authority of this mittimus, I committed the above named defendant to the:

Location/Corr Facility	Date	Time
------------------------	------	------

and left the supervising officer of the facility with a copy of this Mittimus with my return.

Date	Officer's Signature
------	---------------------



ELECTRONIC MONITORING PROGRAM

WINDHAM COUNTY SHERIFF'S OFFICE

11 Jail Street, Newfane Vermont 05345

Tel: (802) 365-4942

Fax: (802) 365-4945



DOCKET #:	
Case Start Date	
Case End Date	

NAME	
Program Address	Primary Phone
	Secondary Phone
Emergency Contact Name	
Address	Phone

RESIDENCE CONTACT INFORMATION	
Name	Phone
Relationship	
Name	Phone
Relationship	
Name	Phone
Relationship	
Name	Phone
Relationship	

Offense		
Misdemeanor	Felony	Charge:
Judge		
Court Contact	Phone	
	E-Mail	
SA Contact	Phone	
	E-Mail	
Defense Contact	Phone	
	E-Mail	

COMMENTS ~ SPECIAL CONDITIONS:



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Enrollment Application

Applications Instructions:

1. **Type** or **Print** the information requested in all areas. The application must be neat.
2. Return this application to the Electronic Monitoring Program Coordinator
3. Do not write in the shaded areas.

Applicant Information:

Applicant name (Last, First, MI)

Current Address:

City:			State:	Zip Code:	Apt Number:
City:			State:	Zip Code:	Applicant Phone:

Proposed Address:

City:			State:	Zip:	Apt Number:
Contact Name			Contact phone:		

Weight:	Height:	Hair color:	Eye color:	Driver's license # & state issued:
Race:	Sex:	Birth date:	State of birth:	Soc. Sec #:

Attorney Information:

Defense Attorney:	Phone Number:	Email:	Agency:
State's Attorney:	Phone Number	Email:	Judge:

Offense Information, Including Felony or Misdemeanor: (continue on a separate page if needed)

Offense:	Title:	Court:	Date of Offense:
Offense:	Title:	Court:	Date of Offense

Residence Information:

Have you been charged with assault or domestic violence?

If so does the victim currently live with you? Yes No

Yes No If yes list name of victim:

List all other persons at the residence where you proposing to live:

Name	Sex	Date of Birth	Relationship

Electronic Monitoring Program Verification of commitment and residence: (To be completed by program staff only)

Proposed Housemate/Person Contacted/Contact Phone:	Contacted By:	Date and Time:

Date Received:

Docket #



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Emergency Contact Information:

Name (Last, First, MI)			Relationship:
Address:	State:	Zip:	Phone:

Court Ordered Meeting Schedule (For example: AA, Anger Management, etc.):

Provide written verification of any counseling dates when you return this application

Type of meeting:	Day of the week:	Meeting address:	Beginning Time:	End Time:

Electronic Monitoring Program Verification of meeting schedule: (To be completed by program staff only)

Person contacted:	Contacted by:	Date and Time:

Applicant Employment/Education Information:

Employer/Education:		
Address:	City:	State:
Phone Number:	Job Title/Education Process:	
Supervisor's Name:	Length Employed/Education Program:	Rate of Pay per Hour:
When are you paid:	How: (Cash, check, direct deposit)	
Job/Education site location if other than address listed above:		

Is your employer related to you? Yes No If yes how?

Electronic Monitoring Program Verification of employment/education: (To be completed by program staff only)

Person contacted:	Contacted by:	Date and Time:

Transportation Information:

How will you commute to work/education program?		How far is your commute?		How long does it take one way?	
Driver's License Number and state issued:		If you do not have a license, who will be driving you?			
Vehicle License #:	State:	Make:	Model:	Year:	Color:
Auto Insurance Company Name: (Provide copy of proof of insurance with application)				Agents name:	
Policy number:		Agents Phone number:		Agents Fax number:	

Date Received:

Docket # _____



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Medical Information:

What prescribed medication are you currently taking?

Have you ever attempted suicide? Yes No

Do you have mental health problems?

How often do you drink alcohol?

Electronic Monitoring Program Verification of Medical Information: (To be completed by program staff only)

Person contacted:	Contacted by:	Date and Time:

Arrest History:

Have you ever been rejected or revoked from a home detention or work release program? Yes No

Have you ever been charged or convicted of escape? Yes No

Have you ever been on EMP before? Yes No

If yes where?

Electronic Monitoring Program contact with other EMP or work release programs: (To be completed by program staff only)

Person contacted:	Contacted by:	Date and Time:

Charges or Cases Pending:

Arrest Date:	Arresting Agency:	Charge:	Court:

Are there any active restraining orders or no contact orders against you? Yes No

If yes, with whom?

Probation or Parole:

Are you on probation or parole? Yes No

If yes, what county?

Enter current and past probation and / or parole information below:

Start date:	End date:	Probation Agent:	Phone:	Charges:

Have you ever had your probation or parole revoked? Yes No

If yes where?

Electronic Monitoring Program criminal history verification information: (To be completed by program staff only)

Person contacted:	Contacted by:	Date and Time:

Date Received:

Docket # _____



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Occupation of Home Agreement

(To be signed by all residents over the age of 18)

I/We the undersigned, being co-residents with _____, have been advised of the following restrictions necessary for his/her placement on the Electronic Monitoring Program.

1. I/We must obey all federal, state, and local laws and ordinances.
2. I/We will maintain no deadly weapons on the premises, (i.e., firearms, hunting devices, martial arts weapons, explosives).
3. I/We agree to allow electronic monitoring program staff and/or criminal justice officials to enter my home or telephone my residence at any time of day or night for the purpose of supervising the person on the electronic monitoring program and/or inspection of the electronic monitoring program equipment.
4. If a landline telephone system is used, I/We understand there will be some disruption of the telephone service due to the operation of the electronic monitoring equipment while the equipment utilizes the telephone line to transmit data. I agree to discontinue any phone call to allow the equipment to operate as needed for this function.
5. I/We understand that the participant is solely responsible for his/her individual actions and we are not considered custodians of the participant.

I/We agree to the above restrictions on my/our actions and/or rights for the benefit of allowing the applicant to participate in Electronic Monitoring Program.

Signature

Date

Signature

Date

Signature

Date

Electronic Monitoring Program

Participant Handbook

Pre-Intake Instructions

This manual is a description of the rules that apply for participation in the Electronic Monitoring Program hereinafter referred to EMP. It is considered a contractual agreement for participation in the EMP.

I am required to:

1. Read the entire manual.
2. Sign the Handbook acknowledging agreement of terms.

NAME: _____ Docket # _____

BEGINNING DATE: _____

INITIAL APPOINTMENT

DATE: _____

TIME: _____

LOCATION: _____

I, _____, agree to comply with the rules stated in this handbook in addition to the court ordered sanctions imposed upon me through the judicial system. I am signing this handbook with the understanding that failure to comply with any of these conditions may result in a violation being filed with the court and the potential of being placed on pre-program status.

Participant Signature

Date

General Rules

Rules of Conduct

1. I understand that any of the following violations may result in my discharge from the EMP:
 - a. Possession or use of any weapon or instrument of violence,
 - b. Threatening, verbally or physically, any EMP staff, or law enforcement officer,
 - c. Possession of illegally controlled substances or paraphernalia,
 - d. Failure or refusal to appear for a scheduled court or disciplinary hearing,
 - e. Being inside a buffer or exclusion zone,
 - f. Being outside an inclusion zone during a non-scheduled time,
 - g. Contact with a victim, including in person, in writing, by telephone, by e-mail, or through a third person, and/or as court ordered,
 - h. Tampering with, attempting to fix, or removing the electronic monitoring device,
 - i. Violation of any court ordered conditions of release, court ordered programs, or EMP rules.
2. I shall be required to be confined at my residence at all times except when pre-approved for:
 - a. Working at employment approved by the court or EMP staff,
 - b. Traveling to/from approved work under scheduled time constraints,
 - c. Unemployed and seeking employment after permission is granted by the court or EMP staff,
 - d. Traveling to/from approved employment interviews under scheduled time constraints
 - e. Attending medical or treatment programs approved by the court or EMP staff,
 - f. Attending an educational institution or program approved by the court or EMP staff
 - g. Traveling to/from approved educational institution or program under time constraints approved by EMP staff,
 - h. Attending court or EMP related events approved by the court or EMP staff,
 - i. Traveling to/from approved court or EMP related events under time constraints approved by EMP staff,
 - j. Attending other activities or programs approved by the court or EMP staff.
3. I shall not commit any new crime(s) during the period of my participation on the EMP.
4. I shall obtain approval before changing my residence and submit proof of an ownership/lease agreement.
5. I shall pay all fees assessed by the EMP staff.
6. I shall allow any EMP staff, or their designee, to visit my residence or place of employment, to make reasonable inquiries into my activities and/or condition of program equipment.

7. I shall not drive a motor vehicle unless I have a valid driver's license and show proof of valid registration and insurance. If my license has been suspended, I must show proof of reinstatement prior to resuming driving privileges.
8. I shall notify EMP immediately if I have contact with any criminal justice agency.
9. I shall not knowingly provide any law enforcement officer or EMP staff member with false or misleading information.
10. I shall live with any victims or co-defendants of previous or currently alleged crime(s) while under EMP supervision with approval from the Sheriff.
11. It is my sole obligation, as the participant in the EMP, to ensure all adults sharing the residence, whether before or after I sign the Participant Handbook, agree to the Occupation of Home Agreement.
12. I shall abide by an approved schedule, which will be submitted to the EMP staff at a minimum of 72 hours in advance.
13. I shall maintain a working telephone if there is no available GPS/cellular coverage or other means of monitoring connection at my residence.

Controlled Substances

1. I shall not possess and/or use controlled substances. If controlled substances are found in my residence or on my person they shall be confiscated.
2. Prescription drugs that are not issued in my name will be considered a controlled substance.
3. I shall take medication(s) as prescribed by a certified physician.
4. The members of my residence shall not use or possess controlled substances while in my residence.
5. I shall not use alcoholic beverages or intoxicants while on the EMP.

Electronic Monitoring

1. I will be required to wear a global positioning system "ankle transmitter" at all times.
2. I understand that I must have pre-approved permission to leave my residence and must return by the approved time. If I fail to return to my residence within the approved time or leave my residence at any unapproved time, such action will be recorded on the electronic monitoring equipment.
3. I understand the loss of a receiver signal or the receipt of a tamper signal by the monitoring device is enough to constitute a violation.
4. I understand if there are any problems with the transmitter or other equipment, telephone service, or power, I will contact the EMP staff immediately.
5. I shall notify EMP staff immediately if there is an unavoidable condition that causes interruption in my telephone or power service.
6. I understand that any electronic monitoring printout or violation may be used as evidence in a court of law.
7. I may be immediately removed from the EMP for attempting to remove and/or removing the ankle transmitter.

8. I shall not tamper with, attempt to fix, or allow anyone else to tamper with any of the electronic monitoring equipment.
9. I will be charged for equipment to be repaired or replaced for excessive damage and may be prosecuted if I fail to maintain the equipment in good condition.

Medical Emergencies

1. I shall notify the EMP staff immediately, or as soon as possible, of medical emergencies in which I have to go to the emergency room which will result me being outside my inclusion zone during non-scheduled times.
2. I shall only respond to the emergency room or hospital if the medical crisis is for myself, spouse, or my child.
3. Upon arrival at the hospital I will notify the emergency room staff that the monitoring device cannot be removed unless it interferes in MRI's, CAT scans or other similar testing as determined by hospital staff.
4. I possible, shall have the emergency room staff notify the sheriff's office to provide custodial supervision.
5. I shall provide EMP staff with documentation supporting the emergency medical needs within 24 hours of end of care.

Financial Responsibilities

1. There are no weekly, monthly, or yearly fees associated with the use of the EMP.
2. Upon return of electronic monitoring equipment evaluation of equipment will be conducted to determine normal wear and tear vs. abuse and neglect.
3. I shall be held financially responsible for damaged, lost, and/or destroyed equipment beyond normal use.
4. Cost of such replacement will be at current vendor rate.
5. I shall make payment/payment arrangements to the sheriff's office.
6. Failure to make payment for the damaged, lost, and/or missing equipment may result in criminal charges.

Check-in Procedures

1. I may be required to report with an EMP staff member on a regular basis.
2. I will be provided with the date and time of the check-in by the EMP staff at least one week prior to the check-in time.
3. If an emergency occurs in which I will be late or unable to make a check-in, I will notify the EMP staff member immediately, explaining the reason for late/missed appointment.
4. I will provide proof of reason for late/missed appointment.
5. I will be allowed only two (2) legitimate late/missed appointments for the duration of being on the EMP.
6. Unexcused, unreported, or more than two (2) late/missed appointments may result in being removed from the EMP.

Release Process

1. I shall meet with the EMP staff to validate release from court sanctions or violation proceedings for removal of the program.
2. I shall return all monitoring equipment to the Sheriff's Office once approval has been finalized by the judicial system and/or the EMP staff.
3. In the case of failure or termination, I shall have the EMP equipment removed upon transfer to a sheriff's deputy custody.

Disciplinary

I understand the following listing is for reference of offences to be considered violations of the EMP. Other offenses may be included at the discretion of the EMP staff, Sheriff, or judicial system.

- Violation of any established conditions of release and/or court ordered sanctions,
- Possession or use of any weapon or instruments of violence,
- Threatening, verbally or physically, of any EMP staff, or law enforcement officers called to assist EMP,
- Possession of illegal controlled substances or paraphernalia,
- Failure to appear for a scheduled court or disciplinary hearing,
- Refusal to participate or cooperate with the program rules,

Immediate Removal

The following violations are considered immediately removable and may result in the participant being immediately transferred to Department of Corrections pre-program status.

- Being inside an exclusion zone,
- Being outside an inclusion zone at a non-schedule time,
- Contact with the victim(s), including in person, in writing, by telephone, by e-mail or through a third person,
- Cut/Tamper/Remove a strap or device.

Frequently Asked Questions

1. WHAT DOES THIS EQUIPMENT DO?

The electronic monitoring equipment monitors you 24 hours a day 7 days a week so you will have the ability to live in your own home instead of jail.

2. HOW DOES IT WORK?

You will wear an ankle transmitter which sends data to the EMP staff notifying them of your location.

3. WHAT IF I LEAVE MY HOUSE?

If you do not have permission to be outside your inclusion zone for the specified time you may be returned to jail.

4. HOW FAR CAN I GO FROM MY HOUSE?

You are only allowed to go as far as the approved inclusion zone which is determined by your court ordered conditions of release and/or EMP rules.

5. WHAT IF I TRY TO TAKE THE ANKLE TRANSMITTER OFF?

You will be charged with a violation and may be removed from the EMP. You will also be held financially responsible for any damage to the equipment.

6. CAN I STILL USE MY TELEPHONE?

Yes, but if you have a telephone data transfer device you cannot use the phone while the data is being transferred.

7. CAN I TAKE A SHOWER OR BATH?

Yes, you can submerge the device in water but you cannot use a hot tub.

8. DO I HAVE TO WEAR THE TRANSMITTER ALL THE TIME?

Yes, the transmitter must be worn the whole time you are on EMP.

9. WHO DO I CALL IF I HAVE QUESTIONS?

You can call the EMP staff at 802-365-4942.

10. CAN I MOVE THE EQUIPMENT WITHIN MY RESIDENCE?

The device charger can be plugged into any regular wall outlet. The telephone data transfer device cannot be moved from where it was installed.

11. WHAT IF I NEED TO CHANGE THE TIMES ON MY SCHEDULE?

You must call the EMP staff at least 72 hours in advance to receive approval prior to any deviation from the submitted schedule.

12. WHAT IF I HAVE A MEDICAL EMERGENCY?

Contact the EMP immediately. Only medical emergencies to yourself, spouse, or children will be considered as exceptions and must be followed with valid verification documentation within 24 hours of completion of medical treatment.

13. WILL SOMEONE COME TO MY HOUSE, PLACE OF EMPLOYMENT, OR EDUCATIONAL FACILITY?

Yes. EMP staff or law enforcement officers assisting EMP staff may appear at any location listed on your schedule to verify your adherence to the conditions of the EMP.

14. WHAT IF I LOOSE POWER?

You should contact EMP staff immediately or as soon as possible providing date and time of power loss. You should provide documentation of power service provider and reason for power loss.

15. WHAT IF MY TELEPHONE SERVICE IS DISCONNECTED?

You are responsible for maintaining a working communication system. If you fail to provide this service you will be charged with a violation and may be removed from the EMP.

16. WHAT IF I WANT TO MOVE?

As soon as you know you want to move you need to notify the EMP staff of the location in which you would like to move. A check of the new residence will be conducted to ensure conformity to EMP guidelines prior to moving.



ELECTRONIC MONITORING PROGRAM

WINDHAM COUNTY SHERIFF'S OFFICE

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Electronic Monitoring Program Participant Removal

Date: _____ Docket # _____

Detainee Name: _____

☐ COMPLETION

☐ TEMPORARY

Has been temporarily removed from the Electronic Monitoring Program due to _____ and will resume program status upon rectification of this situation.

☐ TERMINATION

Is being terminated from the Electronic Monitoring Program due to the following reason(s), and returned to the custody of the Department of Corrections on a pre-program status.

Equipment Tampering / Destruction

Violation of Inclusion / Exclusion Zone

Failure to Comply with Program Rules

Failure to Comply with Court Ordered Conditions of Release

Other: _____

Program Start Date: _____

Program End Date: _____

EMP Coordinator

Date

