



General Assembly

January Session, 2025

***Raised Bill No. 1543***

LCO No. 6728



Referred to Committee on JUDICIARY

Introduced by:  
(JUD)

***AN ACT CONCERNING THE DEPARTMENT OF CORRECTION.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 18-81pp of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective from passage*):

3 (a) As used in this section:

4 (1) "Advanced practice registered nurse" means an advanced practice  
5 registered nurse licensed under chapter 373;

6 (2) "Alcohol and drug counselor" means an alcohol and drug  
7 counselor licensed or certified under chapter 376b;

8 (3) "Commissioner" means the Commissioner of Correction;

9 (4) "Correctional institution" means a prison or jail under the  
10 jurisdiction of the commissioner;

11 (5) "Dental professional" means a (A) dentist, (B) dental hygienist  
12 licensed under chapter 379a, or (C) dental assistant, as defined in section  
13 20-112a;

14 (6) "Dentist" means a dentist licensed under chapter 379;

15 (7) "Department" means the Department of Correction;

16 (8) "Discharge planner" means a (A) registered nurse licensed under  
17 chapter 378, (B) practical nurse licensed under chapter 378, (C) clinical  
18 social worker or master social worker licensed under chapter 383b, or  
19 (D) professional counselor licensed under chapter 383c;

20 (9) "HIV test" means a test to determine human immunodeficiency  
21 virus infection or antibodies to human immunodeficiency virus;

22 [(10) "Inmate" means a person in the custody of the commissioner and  
23 confined in a correctional institution;]

24 [(11)] (10) "Medical professional" means (A) a physician, (B) an  
25 advanced practice registered nurse, (C) a physician assistant, (D) a  
26 registered nurse licensed under chapter 378, or (E) a practical nurse  
27 licensed under chapter 378;

28 [(12)] (11) "Mental health care provider" means (A) a physician who  
29 specializes in psychiatry, or (B) an advanced practice registered nurse  
30 who specializes in mental health;

31 [(13)] (12) "Mental health therapist" means (A) a physician who  
32 specializes in psychiatry, (B) a psychologist licensed under chapter 383,  
33 (C) an advanced practice registered nurse who specializes in mental  
34 health, (D) a clinical social worker or master social worker licensed  
35 under chapter 383b, or (E) a professional counselor licensed under  
36 chapter 383c;

37 [(14)] (13) "Physician" means a physician licensed under chapter 370;

38 [(15)] (14) "Physician assistant" means a physician assistant licensed  
39 under chapter 370; and

40 [(16)] (15) "Psychotropic medication" means a medication that is used

41 to treat a mental health disorder that affects behavior, mood, thoughts  
42 or perception.

43 (b) Not later than [~~January 1, 2023~~] October 1, 2025, the commissioner  
44 shall develop a plan for the provision of health care services, including,  
45 but not limited to, mental health care, substance use disorder and dental  
46 care services, to [~~inmates of correctional facilities~~] persons who are  
47 incarcerated under the jurisdiction of the department. Such plan shall  
48 [~~include, but not be limited to, guidelines for implementation of the~~  
49 ~~following requirements~~] ensure, at a minimum, that:

50 (1) (A) [A] There is a sufficient number of mental health therapists, as  
51 determined by the commissioner, [~~shall be placed~~] at each correctional  
52 institution to provide mental health care services to [~~inmates~~] persons  
53 who are incarcerated;

54 (B) [A] There is a mental health therapist placed at a correctional  
55 institution [~~shall~~] to provide mental health care services to any [~~inmate~~]  
56 person who is incarcerated who requests such services or has been  
57 referred for such services by correctional staff only after the therapist  
58 makes an assessment of the [~~inmate's~~] person's need for such services  
59 and determines that the [~~inmate~~] person requires such services;

60 (C) Each mental health therapist shall deliver such services in concert  
61 with the security needs of all [~~inmates~~] persons who are incarcerated  
62 and correctional staff and the overall operation of the correctional  
63 institution, as determined by the warden of the correctional institution;  
64 and

65 (D) No mental health therapist who is providing mental health care  
66 services pursuant to this subdivision and licensed to prescribe  
67 medication shall prescribe a psychotropic medication to [~~an inmate~~] a  
68 person who is incarcerated unless (i) the mental health therapist has  
69 reviewed the mental health history and medical history of the [~~inmate~~]  
70 person, including, but not limited to, the list of all medications the  
71 [~~inmate~~] person is taking, (ii) the mental health therapist determines,

72 based on a review of such history, that the benefits of prescribing such  
73 medication outweigh the risk of prescribing such medication, (iii) the  
74 mental health therapist diagnoses the [inmate] person with a mental  
75 health disorder, the [inmate] person has received a previous diagnosis  
76 of a mental health disorder by a licensed mental health care provider  
77 and such medication is used to treat such mental health disorder, or, in  
78 an emergency situation, the mental health therapist makes an  
79 assessment that the inmate's mental health is substantially impaired and  
80 requires psychotropic medication to treat, (iv) the mental health  
81 therapist approves the use of such medication by the [inmate] person as  
82 part of the [inmate's] person's mental health treatment plan, and (v) the  
83 mental health therapist keeps a record of each psychotropic medication  
84 such provider prescribes to the [inmate] person and all other  
85 medications the [inmate] person is taking.

86 (2) Each [inmate] person who is incarcerated shall receive an annual  
87 physical examination by a physician, physician assistant or advanced  
88 practice registered nurse when such examination is clinically indicated.  
89 Such examination may include, but not be limited to, a breast and  
90 gynecological examination or prostate examination, where appropriate,  
91 and the administration of any test the physician, physician assistant or  
92 advanced practice registered nurse deems appropriate.

93 (3) Each [inmate] person who is incarcerated shall receive an initial  
94 health assessment from a medical professional not later than fourteen  
95 days after the [inmate's] person's initial intake into a correctional  
96 institution.

97 (4) If a physician, physician assistant or advanced practice registered  
98 nurse recommends, based on the initial health assessment of [an inmate  
99 or] a person who is incarcerated or other person, that such [inmate or]  
100 person who is incarcerated or other person be placed in a medical or  
101 mental health housing unit, the department shall ensure that such  
102 [inmate or] person who is incarcerated or other person is placed in an  
103 appropriate medical or mental health housing unit unless there are

104 significant safety or security reasons for not making such placement.

105 (5) A medical professional shall perform health assessments of  
106 [inmates] persons who are incarcerated in a location at the correctional  
107 institution that the warden of the correctional institution designates as  
108 appropriate for performing such an examination, provided the analysis  
109 of any sample collected from the [inmate] person who is incarcerated  
110 during a health assessment may be performed at a laboratory that is  
111 located outside of the correctional institution.

112 (6) A discharge planner shall conduct an exit interview of each  
113 [inmate] person who is incarcerated who is being scheduled for  
114 discharge from a correctional institution prior to the date of discharge if  
115 such exit interview is clinically indicated, provided the lack of such exit  
116 interview shall not delay the scheduled discharge of [an inmate] a  
117 person who is incarcerated. Such exit interview shall include a  
118 discussion with the [inmate] person regarding a medical discharge plan  
119 for any continued medical care or treatment that is recommended by the  
120 physician, physician assistant or advanced practice registered nurse for  
121 the [inmate] person when the [inmate] person reenters the community.

122 (7) A physician shall be on call on weekends, holidays and outside  
123 regular work hours to provide medical care to [inmates] persons who  
124 are incarcerated as necessary.

125 (8) The commissioner shall ensure that each [inmate] person who is  
126 incarcerated has access to all vaccines licensed or authorized under an  
127 emergency use authorization by the federal Food and Drug  
128 Administration that are recommended by the National Centers for  
129 Disease Control and Prevention Advisory Committee on Immunization  
130 Practices, subject to availability of such vaccines, unless there are  
131 substantial security concerns with providing access to such vaccines.  
132 Subject to availability, a physician, physician assistant or advanced  
133 practice registered nurse shall prescribe to [an inmate] a person who is  
134 incarcerated any such vaccine that (A) the [inmate] person requests, and

135 (B) is recommended for such [inmate] person by said committee, as  
136 determined by the physician, physician assistant or advanced practice  
137 registered nurse, provided the prescribing of such vaccine does not  
138 impose significant safety concerns.

139 (9) Except in exigent circumstances, a dental professional shall  
140 perform a dental screening of each [inmate] person who is incarcerated  
141 not later than one year after the [inmate] person initially enters a  
142 correctional institution and at least once annually thereafter. At the time  
143 the dental professional performs the dental screening of [an inmate] a  
144 person who is incarcerated, the dental professional shall develop a  
145 dental care plan for the [inmate] person. A dental professional shall  
146 provide dental care in accordance with the [inmate's] person's dental  
147 care plan throughout the [inmate's] person's time at the correctional  
148 institution. The commissioner shall ensure, in consultation with a  
149 dentist, that each correctional institution has a dental examination room  
150 that is fully equipped with all of the dental equipment necessary to  
151 perform a dental examination.

152 (10) A medical professional shall administer an HIV test to each  
153 [inmate] person who is incarcerated who requests an HIV test, subject  
154 to the availability of such test. Except in exigent circumstances and  
155 subject to availability, a medical professional shall offer an HIV test to  
156 each [inmate] person who is incarcerated where it is clinically indicated  
157 (A) at the time such [inmate] person enters a correctional institution, or  
158 (B) during an annual physical assessment.

159 (11) A medical professional shall interview each [inmate] person who  
160 is incarcerated regarding [the inmate's] such person's drug and alcohol  
161 use and mental health history at the time the [inmate] person initially  
162 enters a correctional institution. If [an inmate] the person is exhibiting  
163 symptoms of withdrawal from a drug or alcohol or mental distress at  
164 such time, a medical professional shall perform a physical and mental  
165 health assessment of the [inmate] person and communicate the results  
166 of such assessment to a physician, physician assistant or advanced

167 practice registered nurse, and a mental health care provider or mental  
 168 health therapist, if applicable. Except in exigent circumstances, a drug  
 169 and alcohol counselor shall perform an evaluation of the [inmate]  
 170 person not later than five days after the [inmate] the person initially  
 171 enters the correctional institution. (A) The correctional institution shall  
 172 immediately transfer each [inmate] such person who is determined by a  
 173 physician, physician assistant or advanced practice registered nurse to  
 174 be experiencing withdrawal from a drug or alcohol to an appropriate  
 175 area at such correctional institution for medical treatment of such  
 176 withdrawal. A physician, a physician assistant or an advanced practice  
 177 registered nurse shall periodically evaluate each [inmate who] person  
 178 who is incarcerated and exhibits signs of or discloses an addiction to a  
 179 drug or alcohol or who experiences withdrawal from a drug or alcohol,  
 180 at a frequency deemed appropriate by the physician, physician assistant  
 181 or advanced practice registered nurse. (B) In the case of a person who is  
 182 determined at the time of such person's intake into a correctional  
 183 institution to be in need of mental health services, such person shall be  
 184 immediately provided evidence-based mental health interventions  
 185 delivered by an interdisciplinary team of mental health care providers  
 186 and mental health therapists. Such person shall be periodically  
 187 evaluated by a mental health care provider or mental health therapist  
 188 and provided such services, as needed.

189 (12) A physician, a physician assistant or an advanced practice  
 190 registered nurse with experience in substance use disorder diagnosis  
 191 and treatment shall oversee the medical treatment of [an inmate] a  
 192 person who is incarcerated experiencing withdrawal from a drug or  
 193 alcohol at each correctional institution. A medical professional shall be  
 194 present in the medical unit at each correctional facility at all times  
 195 during the provision of medical treatment to such [inmate] person.

196 (13) A drug and alcohol counselor shall offer appropriate substance  
 197 use disorder counseling services, including, but not limited to,  
 198 individual counseling sessions and group counseling sessions, to [an  
 199 inmate who] a person who is incarcerated and exhibits signs of or

200 discloses an addiction to a drug or alcohol and encourage such [inmate]  
201 person to participate in at least one counselling session. At the time of  
202 [an inmate's] discharge of a person who is incarcerated from the  
203 correctional institution, a discharge planner may refer [an inmate] any  
204 such person who has exhibited signs of or disclosed an addiction to a  
205 drug or alcohol while [an inmate] incarcerated at such correctional  
206 institution to a substance use disorder treatment program in the  
207 community that is deemed appropriate for the [inmate] person by such  
208 discharge planner.

209 (14) The York Correctional Institution shall provide each [inmate who  
210 is] pregnant woman who is incarcerated and drug or alcohol-  
211 dependent, with information regarding the dangers of undergoing  
212 withdrawal from the drug or alcohol without medical treatment, the  
213 importance of receiving medical treatment during the second trimester  
214 of pregnancy for withdrawal from the drug or alcohol and the effects of  
215 neonatal abstinence syndrome on a newborn.

216 (15) The York Correctional Institution shall provide each [inmate who  
217 is] pregnant woman who is incarcerated prenatal visits at a frequency  
218 determined by an obstetrician to be consistent with community  
219 standards for prenatal visits.

220 (16) The department shall issue a request for information to which a  
221 school of medicine may apply for purposes of providing practical  
222 training at correctional institutions as part of a medical residency  
223 program, through which residents participating in such program may  
224 provide health care services to [inmates] persons who are incarcerated.

225 (c) Not later than [February 1, 2023] October 1, 2025, the  
226 commissioner shall report, in accordance with the provisions of section  
227 11-4a, to the joint standing committees of the General Assembly having  
228 cognizance of matters relating to public health and the judiciary  
229 regarding the plan developed pursuant to subsection (b) of this section,  
230 recommendations for any legislation necessary to implement such plan



231 and the department's timeline for implementation of such plan,  
232 provided the commissioner implements the provisions of subparagraph  
233 (B) of subdivision (11) of subsection (b) of this section not later than  
234 January 1, 2026.

235       Sec. 2. (NEW) (*Effective October 1, 2025*) (a) The Commissioner of  
236 Correction shall provide palatable and nutritious meals to each person  
237 in the custody of the commissioner. Under no circumstances shall the  
238 commissioner permit such persons to be fed nutraloaf as a form of  
239 discipline or any other punitive diet.

240       (b) For purposes of this section, "nutraloaf" means a mixture of foods  
241 blended together and baked into a solid loaf and "punitive diet" means  
242 a diet that is used for punishment purposes.

243       Sec. 3. (NEW) (*Effective October 1, 2025*) The Commissioner of  
244 Correction shall ensure that each person in the custody of the  
245 commissioner is provided with a form enabling such person to  
246 authorize another person to access such person's medical records that  
247 are otherwise subject to nondisclosure under the federal Health  
248 Insurance Portability and Accountability Act of 1996, P.L. 104-191, as  
249 amended from time to time.

250       Sec. 4. (*Effective from passage*) (a) Not later than one year after the  
251 effective date of this section, the Commissioner of Correction, in  
252 consultation with the Correction Ombuds appointed pursuant to section  
253 18-81jj of the general statutes, shall publish on the Internet web site  
254 operated by the Department of Correction, the report commissioned by  
255 the department in 2017 under contract with an institute concerned with  
256 criminal justice, for the purpose of identifying and examining the most  
257 extreme cases of medical malpractice and neglect experienced by  
258 persons in the custody of the commissioner. Such published report shall  
259 include all addenda and have personal identifying information  
260 redacted.

261       (b) The commissioner shall notify any living person, or if deceased,

262 the next-of-kin of such person whose case is identified in the report  
 263 described pursuant to subsection (a) of this section of the publication of  
 264 such report. As part of such notification, the department shall include  
 265 all documentation concerning such person's case, including, but not  
 266 limited to, the entire medical file, security division investigation reports,  
 267 morbidity and mortality reports, documentation from the utilization  
 268 review committee and electronic mail related to the case.

269 (c) Not later than one year after the effective date of this section, the  
 270 Commissioner of Correction, in consultation with the Correction  
 271 Ombuds, shall report on actions taken to fulfill the requirements of this  
 272 section to the joint standing committee of the General Assembly having  
 273 cognizance of matters relating to the Department of Correction, in  
 274 accordance with the provisions of section 11-4a of the general statutes.

275 Sec. 5. (*Effective from passage*) (a) Notwithstanding the provisions of  
 276 section 4-148 of the general statutes concerning time limitations to file a  
 277 claim against the state and any other provision of the general statutes, a  
 278 person shall have one year after the date of notification pursuant to  
 279 subsection (b) of section 4 of this act to pursue a claim based on  
 280 information contained in the report described in subsection (a) of section  
 281 4 of this act. Upon filing of any such claim with the Office of the Claims  
 282 Commissioner, established pursuant to section 4-142 of the general  
 283 statutes, permission to sue the state shall be deemed granted for such  
 284 claim. Any such action shall be limited to medical malpractice or  
 285 negligence claims only and any such action shall be deemed a suit  
 286 otherwise authorized by law in accordance with subsection (a) of section  
 287 4-142 of the general statutes.

288 (b) Notwithstanding any provision of the general statutes concerning  
 289 any statute of limitations to bring an action in negligence or malpractice,  
 290 a claimant for whom permission to sue is deemed granted under  
 291 subsection (a) of this section for a particular claim may bring an action  
 292 on such claim in the Superior Court not later than one year after the date  
 293 of notification pursuant to subsection (b) of section 4 of this act.

294       Sec. 6. (*Effective from passage*) Upon publication of the report pursuant  
295 to subsection (a) of section 4 of this act, the Commissioner of Correction  
296 shall forward all documentation described in subsection (b) of said  
297 section for each case in such published report to the Commissioner of  
298 Public Health. Notwithstanding the provisions of section 20-13e of the  
299 general statutes, not later than one hundred eighty days after receipt of  
300 such documentation, the Commissioner of Public Health shall open an  
301 investigation into each such case. Such cases shall be investigated by  
302 independent medical examiners or peer-to-peer review specialists to  
303 investigate such cases. Not later than three hundred sixty-five days after  
304 receipt of such documentation, the Commissioner of Public Health shall  
305 identify what, if any, disciplinary action is to be taken against medical  
306 practitioners determined to have committed a violation subject to  
307 disciplinary action under chapter 370 of the general statutes.

308       Sec. 7. (*Effective from passage*) The Office of the Correction Ombuds,  
309 established pursuant to section 18-81qq of the general statutes, in  
310 consultation with the Office of the Attorney General, shall publish on  
311 said offices' Internet web sites a database that contains all cases filed  
312 against the Department of Correction defended by the division of the  
313 Office of the Attorney General concerning public safety during the  
314 period from January 1, 2000, to the effective date of this section. Said  
315 offices shall conduct and publish the results of targeted audits of such  
316 cases that were brought as medical neglect cases during the period from  
317 January 1, 2019, to the effective date of this section.

318       Sec. 8. (*Effective from passage*) The Commissioner of Administrative  
319 Services, in consultation with the Commissioner of Correction, shall  
320 study the feasibility of relocating the New Haven Correctional Center  
321 on Whalley Avenue and the Bridgeport Correctional Center, to locations  
322 that would create fewer impacts on neighborhoods. Such study shall  
323 include (1) an assessment of the practicality and potential impacts of  
324 each proposed relocation, and (2) a listing of potential sites for each  
325 proposed relocation, including a comparison of any advantages or  
326 disadvantages each proposed site may have when compared to the

327 current site for each such facility. Not later than February 1, 2026, the  
328 Commissioner of Administrative Services shall submit such study, in  
329 accordance with the provisions of section 11-4a of the general statutes,  
330 to the joint standing committee of the General Assembly having  
331 cognizance of matters relating to the Department of Correction.

332       Sec. 9. (NEW) (*Effective October 1, 2025*) (a) The Commissioner of  
333 Correction shall ensure that each correctional facility under the  
334 commissioner's jurisdiction is staffed at a level to ensure the safety of  
335 the staff who work at each such facility, visitors and contractors who  
336 enter each such facility and persons who are incarcerated at each such  
337 facility.

338       (b) Not later than January 1, 2026, the commissioner shall develop  
339 and actively employ a program for the recruitment and retention of  
340 correctional officers.

341       (c) Not later than January 1, 2027, and annually thereafter, the  
342 commissioner shall report, in accordance with the provisions of section  
343 11-4a of the general statutes, to the joint standing committee of the  
344 General Assembly having cognizance of matters relating to the  
345 Department of Correction on efforts to comply with subsections (a) and  
346 (b) of this section, including any shortcomings in such compliance. Such  
347 report may include recommendations for additional resources needed  
348 to achieve such compliance.

349       Sec. 10. (NEW) (*Effective October 1, 2025*) The Commissioner of  
350 Correction shall ensure that persons who are incarcerated have access  
351 to and engage in productive programming, including, but not limited  
352 to, employment opportunities, education courses and vocational  
353 training. Such programming shall be available for incarcerated persons  
354 to access during out-of-cell time. Access to such programming shall be  
355 prioritized for those incarcerated persons who are not sentenced to a  
356 term of life imprisonment without the possibility of release.

357       Sec. 11. (NEW) (*Effective from passage*) The Commissioner of

358 Correction shall develop a protocol for full documentation of any  
 359 assault by a person who is incarcerated on custodial staff. On and after  
 360 October 1, 2025, each such assault shall be documented in accordance  
 361 with such protocol.

362       Sec. 12. (*Effective from passage*) (a) Not later than December 31, 2025,  
 363 the Commissioner of Correction shall (1) purchase at least two body  
 364 scanner machines, and install at least one at the York Correctional  
 365 Institution and at least one at the John R. Manson Youth Institution,  
 366 Cheshire, and (2) establish a pilot program and directives that prioritize  
 367 using such machines to inspect persons who are incarcerated in said  
 368 institutions in lieu of correctional personnel conducting strip searches  
 369 or cavity searches when such searches are typically performed,  
 370 according to the existing directives. As part of such pilot program, the  
 371 commissioner shall train correctional personnel in the use of such  
 372 machines and collect data concerning such use.

373       (b) Not later than February 15, 2027, the Commissioner of Correction  
 374 shall submit a report, in accordance with the provisions of section 11-4a  
 375 of the general statutes, to the joint standing committees of the General  
 376 Assembly having cognizance of matters relating to the judiciary and  
 377 government oversight. Such report shall include, but need not be  
 378 limited to, (1) the total number of body scans performed by the body  
 379 scanning machines during the 2026 calendar year based upon the reason  
 380 for the scan, by month, (2) the number of strip or cavity searches  
 381 conducted during the 2026 calendar year, by month, (3) the total number  
 382 of such body scans that discovered contraband material, by month, (4)  
 383 the types and material of contraband discovered during such period,  
 384 differentiated by the type of search or scan performed, (5) the use of any  
 385 additional screening subsequent to the implementation of the body  
 386 scanner machines, including a strip search, placement on a dry cell  
 387 watch, urinalysis or medical assessment to confirm contraband was not  
 388 present, and (6) any recommendations for legislative changes based  
 389 upon the results of such pilot program.

390       Sec. 13. (*Effective from passage*) Not later than February 15, 2026, the  
391 Commissioner of Correction shall submit a report, in accordance with  
392 the provisions of section 11-4a of the general statutes, to the joint  
393 standing committees of the General Assembly having cognizance of  
394 matters relating to the judiciary and government oversight. Such report  
395 shall include an evaluation of current directives and procedures for strip  
396 searches and cavity searches in correctional institutions in the state  
397 compared to other states in the northeastern region and federal policies,  
398 based on the type of institution, and highlight any differences in such  
399 directives and procedures.

400       Sec. 14. (*Effective July 1, 2025*) (a) For the purposes described in  
401 subsection (b) of this section, the State Bond Commission shall have the  
402 power from time to time to authorize the issuance of bonds of the state  
403 in one or more series and in principal amounts not exceeding in the  
404 aggregate five hundred thousand dollars.

405       (b) The proceeds of the sale of such bonds, to the extent of the amount  
406 stated in subsection (a) of this section, shall be used by the Department  
407 of Correction for the purpose of purchasing two body scanning  
408 machines, installing such machines and training corrections staff on  
409 their use in accordance with the provisions of section 12 of this act.

410       (c) All provisions of section 3-20 of the general statutes, or the exercise  
411 of any right or power granted thereby, that are not inconsistent with the  
412 provisions of this section are hereby adopted and shall apply to all  
413 bonds authorized by the State Bond Commission pursuant to this  
414 section. Temporary notes in anticipation of the money to be derived  
415 from the sale of any such bonds so authorized may be issued in  
416 accordance with section 3-20 of the general statutes and from time to  
417 time renewed. Such bonds shall mature at such time or times not  
418 exceeding twenty years from their respective dates as may be provided  
419 in or pursuant to the resolution or resolutions of the State Bond  
420 Commission authorizing such bonds. None of such bonds shall be  
421 authorized except upon a finding by the State Bond Commission that

422 there has been filed with it a request for such authorization that is signed  
 423 by or on behalf of the Secretary of the Office of Policy and Management  
 424 and states such terms and conditions as said commission, in its  
 425 discretion, may require. Such bonds issued pursuant to this section shall  
 426 be general obligations of the state and the full faith and credit of the state  
 427 of Connecticut are pledged for the payment of the principal of and  
 428 interest on such bonds as the same become due, and accordingly and as  
 429 part of the contract of the state with the holders of such bonds,  
 430 appropriation of all amounts necessary for punctual payment of such  
 431 principal and interest is hereby made, and the State Treasurer shall pay  
 432 such principal and interest as the same become due.

433 Sec. 15. (NEW) (*Effective from passage*) On or before January 1, 2026,  
 434 and annually thereafter, the Commissioner of Correction shall submit a  
 435 report, in accordance with the provisions of section 11-4a of the general  
 436 statutes, to the joint standing committees of the General Assembly  
 437 having cognizance of matters relating to the judiciary and government  
 438 oversight, concerning the conduct of strip and cavity searches in such  
 439 facilities. Such report shall include, but need not be limited to: (1) The  
 440 number of strip searches and cavity searches of persons who are  
 441 incarcerated that have occurred during the prior calendar year, broken  
 442 out by correctional facility, (2) whether there have been any lawsuits  
 443 filed concerning such strip searches or cavity searches during the year  
 444 immediately preceding such report and, if so, the status or outcome of  
 445 such lawsuits, and (3) a copy of the current policy concerning the  
 446 conduct of such searches, including any training requirements for  
 447 correctional officers concerning the conduct of such searches.

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>from passage</i>	18-81pp
Sec. 2	<i>October 1, 2025</i>	New section
Sec. 3	<i>October 1, 2025</i>	New section
Sec. 4	<i>from passage</i>	New section
Sec. 5	<i>from passage</i>	New section

Sec. 6	<i>from passage</i>	New section
Sec. 7	<i>from passage</i>	New section
Sec. 8	<i>from passage</i>	New section
Sec. 9	<i>October 1, 2025</i>	New section
Sec. 10	<i>October 1, 2025</i>	New section
Sec. 11	<i>from passage</i>	New section
Sec. 12	<i>from passage</i>	New section
Sec. 13	<i>from passage</i>	New section
Sec. 14	<i>July 1, 2025</i>	New section
Sec. 15	<i>from passage</i>	New section

**Statement of Purpose:**

To (1) require that persons who are incarcerated be immediately provided evidence-based mental health interventions upon initial assessment and intake, (2) require that persons who are incarcerated be fed palatable and nutritious meals and not be served nutraloaf as punishment, (3) ensure that persons who are incarcerated are provided a form to authorize another person to access their medical records, (4) cause the publication of the Criminal Justice Institute's report concerning cases of medical neglect in Connecticut's correctional facilities and provide that claimants in such cases be granted permission to sue the state, (5) adopt measures to increase access to data concerning cases involving medical neglect by the Department of Correction, (6) require a study of relocating the New Haven Correctional Center on Whalley Avenue and the Bridgeport Correctional Center, (7) employ measures to increase staffing at correctional facilities, (8) increase productive time for out-of-cell time for persons who are incarcerated, (9) ensure incidents of violence against correctional officers are fully documented, and (10) establish a pilot program for body scans in lieu of body and cavity searches and bonding for such program.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*