



Request for Inclusion or Revision to an Administrative Directive Connecticut Department of Correction

CN 1301
REV 02/06/15

Administrative Directive Number: **2.10** Title: **Employee-Centered Programs**

I recommend the following inclusion or revision to the above referenced Administrative Directive (provide detailed explanation):

The following definition and eligibility for the Military Peer Support Program (MPSP) are being recommended for inclusion to A.D. 2.10:

8. Military Peer Support Program (MPSP). The Employee Centered Programs Administrator shall oversee the MPSP. The MPSP provides support and appreciation to all Department of Correction, Connecticut Managed Health Care (CMHC) and Board of Pardons and Parole (BOPP) veteran military service members, active military service members and their families during all phases of deployment, homecoming and transition back to work.

A. Eligibility. All Department of Correction and Connecticut Managed Health Care (CMHC) veteran military service members, active military service members and their families.

9. Exceptions. Any exceptions to the procedures in this Administrative Directive shall require prior written approval from the Commissioner.

See attached documents

ORIGINATOR

Name: [Redacted] Title: [Redacted] Date: 10.7.2015

Signature: [Redacted] Facility/Unit: [Redacted]

UNIT/DISTRICT/DIVISION RECOMMENDATIONS

Approved Denied

Unit Administrator's signature: *Power* Date: 10/7/15

District Administrator's signature: (only needed if originating from facility) Date:

Division Administrator's signature: *Kenya Z. Repelak* Date: 10/8/15

COMMISSIONER'S DECISION

This request is: **APPROVED** **DENIED** Effective date of request: _____

The language/provisions of this inclusion/revision shall be effective as of: 10/16/15
and subsequently added to the Administrative Directive at the next update.

This inclusion/revision shall be added to the Administrative Directive prior to: _____

This inclusion/revision shall be added immediately to the Administrative Directive.

Commissioner's signature: *Michael A. Komarow* Date: 10/16/15