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March 31, 2010

Mr. John Dziekan
New Haven Judicial District Court
235 Church Street
New Haven, CT 06510

RE: HAYES, STEVEN
DOB: 05/30/1963
DOCKET: CR07-241859

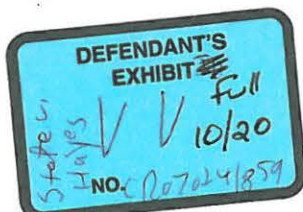
Dear Mr. Dziekan:

Pursuant to an order from Judge Blue for a Competence to Stand Trial Examination (CGS 54-56d) dated 03/18/2010, Mr. Steven Hayes was evaluated on 03/24/2010 for approximately four hours at the MacDougall Correctional Institution by a clinical team composed of Paul Amble, M.D., Fred Storey, Ph.D., and Mark Simoniello, LCSW. Attorney Patrick Culligan was present for the evaluation.

In preparation for this evaluation, Dr. Amble spoke with Thomas Ullmann, Esq., on 03/23/2010 for approximately 15 minutes. The team also spoke with Attorney Culligan on the day of the evaluation on 03/24/2010. In addition, Dr. Amble spoke with Dr. Suzanne Ducate, Director of Psychiatry from the Department of Correction on 03/29/2010 for fifteen minutes. Mr. Simoniello spoke with the defendant's brother, Mr. Matthew Hayes, on 03/25/2010 for approximately 15 minutes, and with the medical records clerks at the McCall Foundation and Blue Hills Hospital on 03/25/2010.

In addition, the following documents were reviewed:

1. An order for a Competence to Stand Trial Examination from the New Haven Judicial District Court dated 03/18/2010.
2. A motion for a Competency Evaluation dated 03/17/2010.
3. A narrative report from the State of Connecticut Department of Public Safety dated 01/07/2008.



4. A toxicology supplemental report from the State of Connecticut Department of Public Safety, narrative report, dated 09/05/2007.
5. A narrative report from the State of Connecticut Department of Public Safety from an interview of Mr. Hayes regarding the events of 07/23/2007, dated 07/23/2007.
6. Two supplemental investigative reports dated 02/18/2007.
7. A letter for Mr. Steven Hayes to Ms. Rosalie Bessette dated 09/29/2007.
8. Medical records from the Department of Correction, including records from the John Dempsey Hospital, dated July 2007 thru March 2010.
9. A review of the Department of Mental Health and Addiction Services treatment episode database.
10. An untitled arrest log pertaining to Mr. Hayes dated 08/03/2007.
11. Handwritten notes from an interview with Mr. Steven Hayes regarding events of 07/23/2007, undated with illegible signatures.
12. Notice and waiver of rights from the State of Connecticut Department of Public Safety Division of State Police dated 07/23/2007 at 13:10, and a second waiver dated 07/23/2007 at 14:50.
13. Investigation report from the State of Connecticut Department of Public Safety Division of Police regarding incidents between 09/01/1996 and 09/10/1996.
14. A handwritten arrest log pertaining to Mr. Steven Hayes from the Canton Police Department, undated and unsigned.
15. A CPS Report Narrative from the State of Connecticut Department of Children and Families dated 04/01/2003, including Running Narrative documents dated 04/02/2003 to 05/06/2004.
16. Booking reports from the Wethersfield Police Department dated 04/07/1997.
17. An incident report from the Wethersfield Police Department regarding incidents between 09/1996 and 04/1997.
18. An incident report from the Winsted Police Department dated 12/31/1985.
19. An application for arrest warrant from the State of Connecticut Superior Court, Winsted, dated 02/10/1986.
20. A list of arrest dates and charges pertaining to Mr. Hayes from the United State Department of Justice, Federal Bureau of Investigation, Criminal Justice Information Services Division in Clarksburg, West Virginia dated 09/09/1997.
21. State of Connecticut Department of Children and Families investigation protocol data collection reporting form dated 10/24/2003.

Attorney Ullmann, on 03/29/2010, personally delivered the following documents to the Office of Court Evaluation at the Connecticut Mental Health Center, with a letter describing that the release of these documents was only for the purpose of a competency evaluation and subject to both the attorney work product privilege and to the attorney/client privilege.

1. Psychiatric evaluation reports from Dr. Justin Schechter, M.D, F.A.P.A., dated 01/22/2008 and 12/10/2008. The Defendant's attorneys redacted a section from this report.

2. A psychosocial evaluation from Miriam Berkman, JD, LCSW dated 03/30/2009.

3. A letter from Eric Goldsmith, M.D., LLC, dated 03/01/2010 describing a psychiatric evaluation he conducted with Mr. Hayes.

LEGAL SITUATION

Mr. Hayes is before the court on docket CR07-241859 charged with Murder-multiple victims, Murder-victim less than 16 years old, three counts of Murder-victim of kidnapping, Murder-victim of sexual assault in the First Degree, Arson in the First Degree, Conspiracy to Commit Arson in the First Degree, Four Counts of Kidnapping in the First Degree, Larceny in the First Degree, Robbery in the First Degree with serious physical injury, Assault in the First Degree with serious physical injury, Sexual Assault in the First Degree- use or threat of force, Risk of Injury to a Child, and Burglary in the Third Degree. These charges stem from an incident on 07/23/2007 when it is alleged that Mr. Hayes and an accomplice entered the home of Dr. William Petit, assaulted and bound members of the Petit family, forcibly brought Mrs. Petit to the bank to make a large withdrawal, stole money and jewelry, and murdered members of the Petit family by dousing the house with gasoline and setting it on fire.

FINDINGS

It is the team's unanimous opinion, at the time of the current evaluation, that Mr. Hayes demonstrated the capacity to understand the proceedings against him and the ability to assist in his defense. This opinion is based on the following data.

CONFIDENTIALITY

At the beginning of the interview, Mr. Hayes was informed that he was being evaluated pursuant to a court order regarding his competency to a stand trial, that a report would be prepared for the court, that testimony may be required, and; therefore, what he said and the records he released would not be confidential. He indicated that he understood the non-confidential nature of this evaluation.

BACKGROUND INFORMATION

The information presented below was obtained from the sources cited above and from Mr. Hayes himself.

Mr. Steven Hayes was born at the Homestead Air Force Base in Homestead, Florida to James and Diana Hayes. The defendant is the oldest of three sons born to his parents who were divorced when he was 11 years old. He indicated that he moved from Florida to Torrington, Connecticut at the age of one, and added that his family frequently moved throughout Connecticut during his childhood. Mr. Hayes reported that he reached developmental milestones in an age appropriate manner and was unaware if his mother had difficulty with her pregnancy. He indicated that he suffered no significant illnesses as a child. Mr. Hayes stated that his mother recently died of cancer and that his father may reside in Maryland. He has not had contact with his father in several years. The defendant was residing with his mother and brother in Winsted in a one bedroom apartment around the time of the alleged offense. He stated that he experienced "a lot of stress" in his living situation and that his mother had asked him to move from the residence because of conflicts between him and his brother.

Mr. Hayes reported that he was employed part-time as a landscaper and painter, and also worked at the Meadows Music Theater during the time he lived with his mother. He added that he contributed up to \$200 a week to the household budget. The defendant has never married but was involved in several live-in relationships and one a long-term significant relationship which resulted in the birth of two children who are now 18 and 20 years old.

EDUCATIONAL HISTORY

Mr. Hayes was educated in the Torrington, Southington, Canton, New Hartford, and Winsted public school systems. He indicated that he began skipping school at approximately age 11 and ultimately left school in the eleventh grade. He added that he received poor grades throughout high school, although he never repeated a grade. Mr. Hayes stated that he "had a group of friends" when he was younger, that he was "picked on" by others, but denied that he engaged in frequent physical fights.

EMPLOYMENT HISTORY

Mr. Hayes maintained only intermittent employment and noted that his longest period of sustained employment was for one year. With regard to this episodic employment history, he stated, "I always end up in jail." Mr. Hayes reported that he has worked on a limited basis in restaurants and as a construction laborer when not incarcerated. He indicated that he obtained a "culinary certificate" while in jail approximately ten years ago. The defendant stated that because of his frequent incarcerations and episodic employment history he has never maintained his own residence, and added, "I never had the chance. I have been in jail most of the time." When not incarcerated, he lived with girlfriends and described how "they paid the rent and I supplied the drugs."

PSYCHIATRIC HISTORY

The following information was reported by the defendant during this examination or obtained from the collateral sources previously cited.

Mr. Hayes reported that he had experienced suicidal ideation on several occasions prior to his current incarceration. He said that on one occasion he cut his wrists while in a "lockup" but he could not recall the year this occurred. He also "ran my mother's car into a rock" at approximately age 39 saying this was an attempt to kill himself, but when emergency services arrived he told them it was an accident. He reported that on a third occasion, at age 44 and just prior to his arrest in July 2007, he tried to overdose on heroin. Mr. Hayes did not endorse seeking medical or psychiatric treatment on any of these occasions.

The defendant reported that upon his admission to the Department of Corrections (DOC) in July 2007 he "felt suicidal right away." He enumerated to the team that he first tried to end his life at the beginning the current incarceration when he was housed at the Northern Correctional Institution (NCI). He ingested medications that he had saved, including Inderal (an anti-hypertensive) and two others which he could not recall, and that he "passed out" as a result. He said that the correctional staff called a code but he reported to them that he was simply dizzy and was allowed to return to his cell. Mr. Hayes said that he hoarded ten pills a second time while at NCI, but the medication was discovered by correctional staff before he had a chance to take them. The defendant reported that his third suicide attempt occurred at the Walker Correctional Institution (WCI) on June 15, 2009 when he had saved a seven-day supply of Benadryl, Klonopin, and one other medication that he could not recall as well as multiple Tylenol pills he had obtained from the prison commissary. Mr. Hayes was found unresponsive in his cell with a contusion to the right side of his forehead from an apparent fall. He had also left a note stating that he had taken "an unknown quantity of medication." He was then transported to John Dempsey Hospital. Medical records from the DOC/John Dempsey Hospital indicate that the defendant, when interviewed, also stated he had ingested battery acid. Mr. Hayes was medically cleared and returned to corrections that same day.

Mr. Hayes stated that his most recent suicide attempt was made on 01/31/2010 when he stockpiled several days worth of Thorazine (an anti-psychotic medicine) and Klonopin (an anti-anxiety medicine), and although his medication was given to him crushed, he wrapped it in paper and concealed in it his mattress. He was found unresponsive in his cell and was transported to John Dempsey Hospital on 01/31/2010 where he was intubated on admission. According to hospital records he was extubated on 02/01/2010. The discharge summary from John Dempsey Hospital indicates, "There are no acute issues and we are currently treating this as a suicide attempt with medication hoarding." The discharge recommendation from the hospital directed that Mr. Hayes continue with psychiatric care at DOC and his discharge medications included Thorazine 300 mg at bedtime, Klonopin 0.5 mg in the morning and 2.0 mg in the evening, Prozac 20 mg in the morning, Naprosyn (a nonsteroidal anti-inflammatory) 500 mg twice a day, Prilosec 20 mg a day and Terazosin (an anti-hypertensive) 5 mg a day (which was consistent with medication orders prior to the overdose).

On March 29, 2010 Dr. Amble spoke with Suzanne Ducate, MD, Medical Director for Psychiatric Services for the Department of Corrections and also the treating psychiatrist for Mr. Hayes. Dr. Ducate acknowledged that Mr. Hayes has depressive symptoms which she considers to be the product of an Adjustment Disorder (depressive symptoms caused by an environmental stressor), with the stressor being the circumstances which resulted in his current incarceration and those involving his legal case which he continues to confront. She has never found Mr. Hayes to have suffered from psychotic symptoms. Dr. Ducate said that Mr. Hayes has been given successive trials of medications including Thorazine, for anxiety and to aid sleep; several antidepressants; and Klonopin, for anxiety. She finds that Mr. Hayes has had no significant response to his prescribed medication and does not believe that medication directed at improving his mood would be helpful.

Dr. Ducate indicated that Mr. Hayes has symptoms of hopelessness and helplessness that are related to his legal situation, and this has not changed from the time of his admission into DOC following the crime. She said Mr. Hayes finds his conditions of confinement distressing but that regardless of his placement between DOC facilities he has generally maintained the same demeanor and overall desire to expedite the trial process, and has no hope for ever being released from corrections and wants to have his life ended.

In addition to suicide attempts that are in his DOC record, Mr. Hayes said that he attempted suicide on two other occasions during the current incarceration that were unknown to DOC staff. While at Walker Correctional Institution he stockpiled Tylenol and an antihistamine obtained from the facility commissary and said he took over forty of each. He fell asleep as a result of ingesting the medication and "slept it off." Mr. Hayes added that on another occasion while at WCI, he tried to strangle himself with a sock around his neck, but had not secured the sock tight enough to cut off his circulation. He expressed disappointment with his lack of success at completing suicide and appeared resolved that he will no longer have an opportunity to end his life given the current constant observation and liquid medication dispensing by correctional staff. He indicated to the evaluation team that he has considered alternative ways to end his life such as "putting my head in the toilet and doing a back flip" to break his neck but has not attempted this because he is fearful that he may only injure or paralyze himself and not accomplish his goal of ending his life.

A review of the Department of Mental Health and Addiction Services (DMHAS) database indicates that Mr. Hayes has not received psychiatric or

substance abuse treatment from DMHAS or from any DMHAS funded facilities in the past.

Mr. Hayes has carried the diagnosis of Adjustment Disorder with depression and anxiety; a history of dependence on alcohol, marijuana, and cocaine; and Antisocial Personality Disorder during the current incarceration. He is currently prescribed Vistaril 50 mg liquid, five days per week.

ADDITIONAL COLLATERAL INFORMATION

The following is a summary of documents provided to the team by Attorney Ullmann on 03/29/2010.

Independent psychiatric evaluations by Dr. Schechter dated 01/22/2008 and 12/10/2008 indicate a diagnosis of Depressive Disorder not otherwise specified, Alcohol and Cannabis Abuse, and Cocaine Dependence. He noted that Mr. Hayes had a history of substance abuse treatment which was not effective in stopping his drug usage and that he received most of his psychiatric treatment within corrections.

A letter from Dr. Eric Goldsmith describing his independent psychiatric evaluation of Mr. Hayes, dated 03/01/2010, indicates a diagnosis of "a mood disorder consistent with an Adjustment Disorder condition."

SUBSTANCE ABUSE HISTORY

The defendant reported that he started drinking alcohol at age 10 or 11 although he added that he did not use it regularly. He also noted that he began smoking marijuana at age 10 or 11 and was using it regularly by age 15. In addition, he experimented with cocaine and LSD as a teenager. Mr. Hayes said his drug of choice in his early adulthood was marijuana but changed this to cocaine, primarily crack cocaine, by his early 30's. Mr. Hayes indicated that he received substance abuse treatment in the past at the McCall Foundation in Torrington, CT. Contact with the medical records clerk at the McCall Foundation indicates that there is no record of Mr. Hayes obtaining treatment there, and the clerk added that the facility destroys inactive records after nine years. The defendant also reported that he received substance abuse treatment at Blue Hills Hospital. Contact with the medical records office at Blue Hills Hospital indicates that there is no record of his admission to that facility.

MEDICAL HISTORY

The defendant denied any significant medical diagnoses but stated that he suffers from GERD (gastroesophageal reflux disease). He indicated that he injured his wrist in a motorcycle accident in the past and consequently has arthritis. The defendant reported that he experienced a seizure as a consequence of alcohol and drug abuse and was brought to Torrington Hospital in 2002. Records from Torrington Hospital (Charlotte Hungerford Hospital) were requested but not received prior to the completion of this report. He had mentioned to corrections staff that he had a history of syncopal episodes associated with shaking and urinary incontinence. On June 2, 2008 he was begun on the anti-seizure medication Keppra and an MRI and EEG were ordered. Both the MRI and EEG were completed on July 29, 2008 and found to be within normal limits.

Mr. Hayes reported that since his arrest he often becomes nauseous when eating food and has difficulty holding it down. He has lost approximately 80 pounds since his arrest. He attributes this to anxiety. The defendant added that he is prescribed Prilosec to help with his acid reflux, and that the medication helps him to retain food, but he said that he does not get this medication on a consistent basis. Medical records from DOC indicate that Mr. Hayes frequently expresses this complaint but often eats his entire meal.

LEGAL HISTORY

The defendant reported that the onset of his legal difficulties occurred at the age of 15. As an adult, Mr. Hayes has been arrested on approximately 20 occasions. He has had multiple incarcerations and his last episode of incarceration took place from 10/01/2003 to 05/03/2007. He has been arrested in the past for numerous different charges including Burglary, Larceny, Forgery, Breach of Peace, firearms theft and possession, and drug possession. He cited his desire to obtain money for drugs as the main motivation behind his crimes. In resolving his past legal cases, he said he typically relied on his attorneys to get him the best deal rather than go to trial.

MENTAL STATUS EXAMINATION

Mr. Steven Hayes presented for the evaluation appearing older than his chronological age. He is of short stature and slim build, had unkempt hair, and a few weeks of beard growth. He was dressed in correctional attire; including pajamas, a tee shirt and sandals. He exhibited occasional tic-like movements but otherwise showed normal psychomotor activity. The defendant was alert and cooperative throughout the approximately four hour interview and maintained good eye contact throughout the interview. Mr. Hayes appeared to be motivated to participate in the examination and maintained constant attention with the team throughout the entire evaluation.

Mr. Hayes described his mood as depressed. His affect (observed emotional response) was flat throughout the interview. Mr. Hayes acknowledged that he has had a desire to end his life since his admission to DOC in July 2007. The defendant stated that he has significant difficulty sleeping because the light in his cell is on at all hours and he added that he is only able to "catnap" for ten minute periods throughout the day. On nights when he receives the prescribed medication, Vistaril, he gets four hours per night and on other nights he reports getting less. Mr. Hayes did not appear to tire or fatigue at any point throughout the lengthy interview. He also reported decreased appetite with difficulty holding food in his stomach. Mr. Hayes added that he is unable to hold food down due to anxiety.

Mr. Hayes said that his mood was low and on a scale of 0 to 10 rated his mood as a zero. He gave the same rating for his ability to experience pleasure, although he said his spirits would lighten with a visit from his family or friend. However, Mr. Hayes said he is not currently allowed visitation. He reported feelings of hopelessness and helplessness and related these to his legal situation. He currently has suicidal ideation and reported this has not waivered since near the time of his arrest. He has no current plan to kill himself as his access to medication has been substantially limited and his current placement limits access to other means.

The defendant's speech was clear. His thought process was rational and goal directed with no evidence of loose associations or flight of ideas. He denied experiencing perceptual disturbances during the evaluation. There were no behavioral indications that the defendant was responding to internal stimuli. He indicated that he has anxiety that makes it difficult for him to digest food but he

denied experiencing panic attacks or obsessive/compulsive symptoms. He reported experiencing nightmares regarding the events related to his legal situation but did not further endorse avoidant or other related symptoms consistent with Posttraumatic Stress Disorder. He did not endorse experiencing paranoia.

Mr. Hayes was oriented to the year, but indicated that he did not know the month or the day. He correctly stated that the current season is spring and that the months of spring include March, April, and May. He knew that he is currently incarcerated at the MacDougall Correctional Institution and that he is housed in the "infirmary." He was able to provide a detailed, specific description of the conditions under which he is living.

Mr. Hayes' immediate memory was intact as evidenced by his ability to recite three words that were listed for him. He was asked to recite these words again after five minutes but only recalled one of three. He was reminded of the words again, and 15 minutes later, was able to recall all three without prompting. This suggests an intact short term memory but lapses in his concentration. Mr. Hayes made two errors while subtracting 7's from 100 in succession down to 23. His performance on digit span was slightly below average. He was able to restate six numbers forward and three in reverse (an average performance is six digits forward and four in reverse).

Mr. Hayes was able to perform simple mathematical calculations without error. His general fund knowledge was adequate in that he was able to identify that the function of the stomach as to "digest food," and that Martin Luther King, Jr. was a "civil rights leader." The defendant's knowledge of current events is limited, for example, he indicated that the current president is "Bush." He could not recall preceding presidents and was unaware that Barack Obama is the current the president. However, Mr. Hayes reported that his access to media is restricted and that he does not have an interest in reading. Mr. Hayes had an understanding of cardinal directions and indicated that one would travel west to go from Connecticut to California.

The defendant's abstract reasoning was intact as evidenced by his ability to identify the similarity between several paired objects. Additionally, Mr. Hayes was able to interpret simple proverbs and demonstrated adequate social awareness. Overall, Mr. Hayes appears to function in the average range of intelligence.

CURRENT LEVEL OF FUNCTIONING

Prior to the interview, the team viewed Mr. Hayes' cell in the medical unit at MacDougall Correctional Institution. Mr. Hayes was lying in his bunk with his blanket covering his head when the team initially approached the cell. He then sat on his bed when the team stood at his door. A fluorescent light fixture in the ceiling, which was turned on, had a film covering the lens to diffuse the light of the approximately 8 by 12 foot cell. Correctional staff in the medical unit indicated that Mr. Hayes' light is on 24 hours a day which is standard protocol on the medical unit.

As a result of suicide attempts, Mr. Hayes is housed on the medical unit. He is on constant observation via a window in his door and a camera inside his cell. He has restricted access to visitation, a restriction on items he can have in his possession, and the light fixture above his bed is constantly illuminated. Mr. Hayes expressed that because of these conditions of confinement he experiences difficulty sleeping, depressed mood, decreased appetite and anxiety. He said that he is not interested in reading books and added that he had read all the books at "Northern" when he was incarcerated there. Mr. Hayes stated that as a result of all of these factors he has nothing to do all day but think about the crime that he is accused of and, more recently, that he does not want to participate further in court proceedings.

Medical records from the DOC indicate that the defendant has consistently expressed his desire to end his life, and more recently, his desire to discontinue his participation in jury selection and impending trial. A note from the DOC clinical records by Dr. Ducate dated 02/05/2010 indicates that Mr. Hayes was feeling increasingly distressed and suicidal due to attending court and facing the victim's family. A note dated 03/03/2010 by Dr. Coleman indicates that the defendant no longer intends to take his own life and will "let the state do it." Mr. Hayes indicated to Dr. Coleman in a note dated 03/10/2010 that he wanted to waive his right to participate in the jury selection process and trial adding that it would be "too stressful and difficult" to participate. According to the note, the defendant's plan was to accept the state's death penalty. A note dated 03/12/2010 by Dr. Ducate indicates that Mr. Hayes plans to stop attending court despite his attorney's advice to attend. A note from Dr. Coleman dated 03/18/2010 indicates that Mr. Hayes indicated that his decision to choose suicide by state is his right and is not a question of competence, adding that feeling depressed is not contributing to this choice. He added he does not want

to live in isolation and exist on what the state gives to him, and that he finds himself at odds with his attorneys' trying to preserve his life. A note from Dr. Ducate dated 03/19/2010 indicates that Mr. Hayes is "choosing to remain the same- not get better" so he can receive the death penalty.

Although Mr. Hayes has been offered access to mental health staff on a regular basis to address all of these issues, DOC clinical records indicate that he has consistently declined mental health intervention.

CAPACITY TO UNDERSTAND PROCEEDINGS

Mr. Hayes was able to understand the purpose of the evaluation. He demonstrated a clear understanding of his current legal situation and stated that he is charged with "Murder, Arson, Robbery, Kidnapping, and Rape." The defendant also offered that he is facing "seven capital felonies." Mr. Hayes stated that the most severe sentence he could receive is "the death penalty," and he acknowledged that he faces multiple life sentences. Mr. Hayes demonstrated an understanding of the difference between a felony and a misdemeanor and acknowledged that all 18 of his charges are felonies. He also articulated that capital felonies "carry the death penalty." Mr. Hayes demonstrated an appreciation of the gravity of his legal situation.

The defendant acknowledged that he is represented by attorneys Thomas Ullmann and Patrick Culligan and that he "speaks with them an awful lot." Mr. Hayes defined his attorneys' role as, "It's their job to defend me, not to let me commit suicide." He stated that the role of the prosecutor is to "convict me." He indicated that the role of the judge is to, "Watch the court. In other cases he decides the outcome of the case, but in this case, he monitors the trial and the jury decides."

Mr. Hayes was knowledgeable about a defendant's option to plead guilty or not guilty, and demonstrated an understanding of a plea bargain. He described a plea bargain as, "To get a deal and get a lesser sentence." He understood that a defendant would have to plead guilty to utilize a plea bargain, and indicated that he has pled guilty in cases in the past. Mr. Hayes understood that a defendant would be "admitting" to a crime by pleading guilty. He understood that a plea of not guilty would result in a trial. The defendant did not demonstrate a clear understanding of the insanity defense, but stated, "I guess it's when you're crazy." He was educated about the insanity defense and stated, "It wasn't really

an option I guess. We talked a little about it in the beginning." Mr. Hayes indicated an understanding of the concept of Nolo Contendere when it was explained to him.

Mr. Hayes demonstrated an understanding of probation and said that he had been on probation in the past. He described elements of probation as, "Monitoring, reporting to a probation officer, and do what they say; give urines and keep a job."

The defendant demonstrated an understanding of the trial process and indicated that he was currently in the "jury selection" phase of his case. He understood that the jury decides the verdict as well as whether the death sentence will be imposed in capital cases. Attorney Culligan was present during the evaluation and verified for the team that this was accurate when the death penalty is being considered. Mr. Hayes reported that a witness "testifies to what goes on." He was able to identify who could be possible witnesses in his case and he acknowledged an understanding that witnesses "testify to what goes on." The defendant could not identify evidence in his case that would support a not guilty finding, but knew of evidence that incriminates him. Mr. Hayes was aware that "the lawyers and judge ask questions when witnesses take the stand." He understood the concept of perjury and that a penalty could result if he were found to have not told the truth while testifying. Mr. Hayes understood what constitutes proper courtroom behavior and acknowledged that one should "use manners" when in the courtroom, and indicated that if someone were to lie about him in court that he would "tell my attorneys." He also consistently demonstrated awareness that if he had questions he would seek the advice of his attorneys.

ABILITY TO ASSIST IN HIS DEFENSE

Mr. Hayes was aware of his legal circumstances and the gravity of his possible punishments if found guilty on the charges he is now facing. Additionally, he was aware that he can elect to work with his attorneys to secure a lifetime prison sentence without the possibility of parole rather than be sentenced to death, and that his attorneys are strongly encouraging him to work to secure a lifetime prison sentence.

Mr. Hayes reported that he has met with his attorneys for approximately 32 months. He has reviewed the police reports with them, discussed his defense,

discussed jury selection, and worked with them in an attempt to improve his conditions of confinement. During the present evaluation, he said he trusts his legal team and can be honest with them. He indicated that he understands that they now have divergent opinions on how to proceed with his case and stated, "I want to plead guilty to everything now because I just want it over with now."

Mr. Hayes expressed his desire for receiving a death sentence and then pursuing the execution of that sentence in an expeditious manner. He is unsure of how to achieve this, but appreciated he would likely have to either approach the judge or obtain separate counsel.

Mr. Hayes demonstrated an understanding of the nature of a trial and a plea bargain, as well as the consequences for both legal processes. He understood that he might have to testify and expressed a plan to "look like a monster" to the jury on the stand, expressing no remorse, so the jury would be more likely to sentence him to death.

The defendant understood what constitutes appropriate courtroom behavior and during the approximately four hour interview demonstrated the capacity to closely follow a line of questioning. During the current evaluation, he consistently understood and appreciated what was being discussed. He was able to clearly express his opinion and values. He further understood that if he were unsure about a legal matter that he could discuss it with one of his attorneys.

CONCLUSION

Mr. Steven Hayes is a 46-year-old single father of two who is before the court charged with Murder-multiple victims, Murder-victim less than 16 years old, three counts of Murder-victim of kidnapping, Murder-victim of sexual assault in the First Degree, Arson in the First Degree, Conspiracy to Commit Arson in the First Degree, Four Counts of Kidnapping in the First Degree, Larceny in the First Degree, Robbery in the First Degree with serious physical injury, Assault in the First Degree with serious physical injury, Sexual Assault in the First Degree-use or threat of force, Risk of Injury to a Child, and Burglary in the Third Degree. The allegations are that he and an accomplice entered the victims' home; assaulted, bound, sexually assaulted, stole, and then used gasoline to burn the house with three of the inhabitants inside, killing them.

Mr. Hayes' legal history is significant for multiple arrests and incarcerations as well as substance abuse beginning in his teenage years.

During the course of the nearly four hour interview on 03/24/2010, Mr. Hayes was able to demonstrate a clear understanding of his current legal situation, the facts of the allegations against him and stated that he is charged with "Murder, Arson, Robbery, Kidnapping, and Rape." He said he had read the police report and demonstrated a familiarity with its content. The defendant also offered that he is facing six capital felonies. He said that the most severe sentence he could receive is "the death penalty," which he knew to be a potential sentence if he were convicted of committing a capital felony.

Mr. Hayes was knowledgeable regarding his plea options, roles of courtroom personnel and potential witnesses who may be involved in his case. He understood the concept of a trial, that it was for deciding whether he had committed the offenses for which he was charged, and understood that, in his case, a jury would be deciding on whether he was guilty or not. He was able to describe appropriate courtroom behavior and that if he had any questions about the trial process or anything related to his charges that he could discuss this with his attorneys. He acknowledged that he has spent a substantial amount of time with his legal team.

In the process of assessing this defendant's ability to assist in his defense, he was questioned regarding his knowledge of the circumstances surrounding his arrest, potential witnesses, his working relationship with his attorney's and his preference regarding possible outcomes. During the course of this evaluation, Mr. Hayes, as previously described, has read the police report and has a reasonable and rational understanding of the charges against him and the weight of evidence favoring the police description of the events. He has developed a relationship with his legal team and indicates that he trusts that they are working diligently in his defense. He also said he felt comfortable discussing his case with them, would be honest with them and had no desire to change his representation at this time.

Mr. Hayes appears to be experiencing symptoms of a depressed mood, irritability, a loss of interest in some activities, and disturbances in his sleep, appetite, energy and concentration. He also has feelings of worthlessness, has expressed guilt, and has chronic suicidal ideation.

The above symptoms, when severe, can render an individual incapable of attending to important activities in their life, being unable to maintain adequate attention to follow a detailed dialogue, or not have the will to advocate for themselves. Over the past few weeks Attorney Ullmann and Attorney Culligan have noted that their client has not engaged with them in the jury selection process either during or outside court and Mr. Hayes has submitted a request not to be present in court during further jury selection, a request that was denied by the court. The evaluation team assessed Mr. Hayes to determine if his present degree of symptomatology is sufficiently severe to incapacitate him from being able to assist in his defense.

Concentration impairments that are a product of a depressive illness may range from an individual having minor deteriorations in their grooming, their mind may wander off topic more often than usual, and they may become more forgetful. An individual with severe concentration impairments may not be capable of tending to conversations or following dialogue between others. The person may become forgetful, even to the extent of appearing to have dementia or intellectual impairments. Severely diminished energy may render an individual nearly incapable of getting out bed and severe sleep disturbance may cause an individual to fall asleep, even while sitting and listening to matters of vital importance to them.

In Mr. Hayes' case he has disturbances in his sleep, appetite and concentration. This impairment disturbs his sleep at night, but not substantially so that he is falling asleep in court, during discussions with his attorneys, or during the course of this evaluation. Mr. Hayes said that he has diminished energy but does not say this is why he wishes to avoid going to court, rather he speaks of wanting to forgo the stressful experience of being confronted by his accusers and repeatedly hearing the allegations against him. He was able to participate in this extensive interview without demonstrating deficits in his ability to focus on questions throughout the examination.

Mr. Hayes has concentration problems that are likely linked to or at least exacerbated by his depressive illness. He reports having difficulty reading and demonstrated problems in concentration during the mental status examination in this evaluation including his ability recall one out of three items after five minutes and only recalling three digits in reverse when assessing his immediate memory. Although he does evidence some deficits in concentration, the findings as a whole by this evaluation team was that Mr. Hayes does not have sufficient impairments in his concentration to impair his capacity to attend to

his legal proceedings. The rationale for this includes that this defendant was able to attend to an approximately four hour evaluation of his competence, not once losing track of the topic, not once complaining of fatigue or saying that he could not tolerate further questioning. His responses during the evaluation were goal directed, logical and precise. His ability to attend to the interview did not waver as we discussed more emotionally charged issues such the details alleged by police for the instant offense.

A person with severe depression may also develop a degree of guilt, hopelessness and helplessness such that they cannot imagine surviving in the world; they lack any motivation to change the current circumstance and allow any negative consequences that comes their way to happen. Mr. Hayes has been forthright with his attorneys and frequently engages with them, complaining of his cell conditions including the intensity of the light in his room, the number of bulbs illuminating his cell, being on frequent watch, and not having a television. He speaks about the noise in adjacent cells, lights from the staff area and his lack of interactions with others. In addition to his concerns over his conditions of confinement, Mr. Hayes also complains about his psychiatric treatment. Though Mr. Hayes does report feelings of hopelessness, helplessness and guilt, he attributes this to his current difficult legal situation and an appreciation for the weight of evidence against him and the lack of evidence to the contrary. These feelings appear to be situationally based and have not risen to a level of severity that the decisions he is making are irrational.

The defendant's attorneys have assisted Mr. Hayes in his defense throughout the past two and one-half years. The defendant's description of his current legal strategy is different from that of his legal team. Mr. Hayes understood this divergence. The defendant's current legal strategy does not appear irrational or the product of a mental illness, rather a difference in ideas regarding what he believes is in his best interests.


While Mr. Hayes has expressed chronic ideation to kill himself, throughout the course of his confinement, mental health treaters and evaluators have not observed symptoms that indicate that his reality testing is impaired, or that his thoughts are irrational, paranoid or delusional.


Based on his history of interaction with mental health professionals, on the available collateral information provided to the team, and on his functioning


and presentation during the current examination, it is the team's unanimous opinion that Mr. Hayes demonstrated the capacity to understanding the proceedings against him and to assist in his own defense at this time.

Sincerely,

NEW HAVEN OFFICE OF COURT EVALUATIONS


Mark Simoniello, LCSW


Fred Storey, PhD


Paul Amble, MD

On behalf of Patricia Rehmer, MSN
Commissioner of Mental Health and Addiction Services