CALIFORNIA DEPARTMENT OF STATE HOSPITALS FACT SHEET

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SEXUALLY VIOLENT PREDATOR CONDITIONAL RELEASE PROGRAM

Fast Facts

- The process of placing a Sexually Violent Predator in the community is strictly regulated by law.
- The court determines whether a patient is eligible for conditional release and where the patient will live.
- Community safety is the top priority.

<u>Overview</u>

The Forensic Conditional Release Program (CONREP) is the Department of State Hospitals' (Department) statewide system of community-based services for courtordered individuals. Mandated as a state responsibility by the Governor's Mental Health Initiative of 1984, CONREP began on January 1, 1986. It operates according to the law, Welfare and Institutions Code (WIC) section 4360, subdivisions (a) & (b).

In 1996 the Sexually Violent Predator (SVP) Act (WIC §§ 6600, et. seq.) went into effect. It is a civil, not criminal law, which means its purpose is treatment and rehabilitation, not punishment. It is applied after the person completes their prison sentence. The goal is safe re-entry to the community.

If the legal criteria are met, the court orders the transfer of the prisoner at the end of the prison term to the Department's state hospital system for sex offender treatment, although participation in the treatment program is voluntary.

The SVP law governs all SVP commitments and releases. Releases are either from the hospital directly to the community or to SVP CONREP, an intensive community-based treatment and 24 hours per day monitoring program. The Department contracts with Liberty Healthcare to provide SVP CONREP services across the state.

SVP CONREP is designed in accordance with best practice standards, called the Risk, Needs, and Responsivity Principles. Research shows that interventions with offenders that follow these principles have the greatest reduction in re-offense rates. Interventions are coordinated through the Collaboration Model of sex offender management that relies on cross agency teamwork and a broad range of services. This model of sex offender treatment holds patients accountable by the combined use of the patient's own internal controls, developed during inpatient treatment, and the use of external tools including polygraph, surveillance, and electronic monitoring. It is victim-centered focusing on community safety as the primary goal. It includes close collaboration and communication by all parties participating in the patient's community treatment and supervision.

Community Placement Process

The process of CONREP placement starts when the court determines the patient meets the legal criteria for CONREP (WIC § 6608) and the terms and conditions for the patient's participation are set. The court then orders CONREP to locate a residence for the SVP patient in the community in the county that was their domicile when they became an SVP. Placements to other counties are rare and must be court ordered only in extraordinary circumstances. The court orders what county or counties CONREP searches for housing. CONREP does not search in counties not ordered by the court. SVP CONREP screens housing sites pursuant to the court's orders and the individual patient's needs and known risk factors that have been identified in Coaling State Hospital (CSH) and CONREP. Housing assessments consider Jessica's Law (Penal Code § 3003.5(a)(b)(c)) and SVP residency restrictions (WIC § 6608.5(c)(f)), including proximity to schools and parks, if applicable. It considers clinical risk factors, treatment progress, protective factors, victim profiles and locations to ensure community and patient safety. The county designated housing agency assists SVP CONREP in identifying suitable housing.

After seeking input from designated county agencies, SVP CONREP then submits the potential residence to the Court for approval. Additionally, Court authorization is sought to hold a prospective residence for potential placement of the CONREPready SVP. After the court approves the hold of the residence, the court orders DSH to provide the official 30-day notice to the district attorney's office, the defense attorney's office, the county's housing designee, the sheriff's office or other designated safety task force (WIC § 6609.1), and/or local police department, depending on jurisdiction of the residence. The law provides a 30-day timeline for public notification with case specific information including name, address, date of commitment, county of commitment, county of residence, hearing date, time and location and other specifics if court ordered. After the 30-day period for public comment and a hearing, the court may order placement of the patient to the residence. From start to finish, the housing search and placement process can take up to one year or longer.

Community Safety Plan

As the statewide SVP CONREP provider, Liberty Healthcare has the responsibility to ensure that the patient ordered to SVP CONREP complies with the court-ordered community safety plan and terms and conditions of outpatient treatment. The court-approved terms and conditions of release form the core of the community safety plan. They list the conditions of outpatient treatment and supervision the individual must adhere to while in the community. They are extensive, detailed, and describe the intensive monitoring and supervision that SVP CONREP will provide the patient.

The terms and conditions are developed by SVP CONREP staff while the patient is at the hospital. The terms and conditions are tailored to the patient's individualized risk factors and treatment needs and include input from hospital treatment staff and others who will be involved in the patient's treatment and monitoring while in the community. Violations of the terms and conditions are reported to the court and result in consequences to the patient up to, and including, revocation of conditional release and a return to the hospital pursuant to Penal Code section 1610, et al.

How SVP CONREP Works

Use of a Community Safety Team (CST), a standard practice for providing community supervision and treatment, is the method by which the principles of Risks, Needs, and Responsivity and the Collaboration Model are applied for each patient. Members of the CST include the following:

- Regional Coordinator
- Clinical Program Director
- Treatment Providers
- Victim Advocate
- Polygraph Provider
- A representative of the local law enforcement agency
- Defense attorney and deputy district attorney
- Others as needed for support, accountability, and clinical or consultation needs

The SVP CONREP program utilizes the following supervision and monitoring tools that are carried out by the CST:

- Announced and unannounced face-toface visits at and away from home.
- Collateral contacts and chaperone training with significant people in the patient's life
- Covert surveillance
- GPS monitoring
- Monitoring of approved electronics (e.g. phone, computer)
- Random urine screens for illicit substances
- Unannounced residence, vehicle, and personal property searches
- Banking, receipt and expenditure reviews
- Approval of schedules, locations of outings and routes of travel for all time outside of residence. This is verified daily by review of GPS tracking. The GPS system also provides "real time" tracking with instant notification of any violations of the inclusion/exclusion zones developed for the patient.
- Life skills training, residential placement, and other services needed to support safe and successful community reintegration.

Monitoring tools used in conjunction with sex offender treatment professionals include:

- Polygraph, both sexual history (to obtain a reliable assessment of the patient's history of sexual behavior) and maintenance exams (to assess treatment progress and compliance with the terms and conditions of release).
- Physiological assessment of sexual arousal (Plethysmography)
- Assessment of sexual interest (e.g. Abel Assessments)

Service levels set minimum treatment and supervision activities for patients in SVP CONREP. Patients start at the intensive level, and as they progress, they achieve the supportive then transitional level up to the point of readiness to discharge from CONREP. Evaluations and assessments are ongoing during the period of state hospitalization, upon entry into the community and throughout SVP CONREP treatment and supervision.

For more information regarding CONREP, visit <u>www.dsh.ca.gov</u>.