

The California State Auditor released the following report today:

## California Department of State Hospitals

*It Could Increase the Consistency of Its Evaluations of Sex Offenders by Improving Its Assessment Protocol and Training*

### BACKGROUND

Because they present a continuing threat to society, sexually violent predators (SVP)—a small but extremely dangerous subset of sex offenders (offenders)—may be committed to a treatment facility. State law calls for two evaluators from the California Department of State Hospitals (State Hospitals) to independently evaluate whether certain offenders, which the California Department of Corrections and Rehabilitation (Corrections) refers to it, meet the SVP criteria set forth in law and, if so, request their commitment as an SVP for a court or jury to determine. If a court finds that an offender is an SVP, it commits the offender to a secure facility—generally Coalinga State Hospital (Coalinga)—for an indeterminate time period.

### KEY FINDINGS

During our review of State Hospitals' Sex Offender Commitment Program (program), we noted the following:

- Based on our review of 23 evaluations, we found that State Hospitals' evaluations of current and potential SVP's are inconsistent and evaluators did not demonstrate that they considered all relevant information, which increases the risk of incorrectly concluding whether offenders meet SVP criteria.
  - ✓ Four did not indicate that the evaluator considered the psychosexual history of the offenders as required by law and eight did not indicate they considered a report from Corrections that identifies communication barriers or disabilities the offender may have.
  - ✓ In one instance, the evaluator listed reviewing certain mental health records and noted that the offender experienced suicidal thoughts, while the other evaluator stated that the offender did not have mental health issues based on other records.
  - ✓ Some evaluators stopped an evaluation once they determined that the offender did not meet one of the SVP criteria and other evaluators completed the evaluation of all criteria even though failure to meet one of the SVP criteria would prevent commitment as an SVP.
- The standardized assessment protocol that State Hospitals established does not provide evaluators with adequate detail and direction in performing evaluations.
- State Hospitals' headquarters currently lacks the supervisory structure necessary to perform clinical reviews of evaluations—45 employees report to the chief psychologist, who holds the only supervisory position.
- State Hospitals has not analyzed court outcomes to identify areas where it could strengthen its evaluations. It had not tracked the disposition of its court cases or determined the frequency with which courts agree or disagree with evaluators.
- For nearly two years, State Hospitals did not provide any training to its SVP evaluators and has not fully implemented the comprehensive training plans it began almost a year ago.
- Coalinga has a significant backlog of annual SVP evaluations it has not completed—it had 261 that were due to courts as of December 2014.

### KEY RECOMMENDATIONS

To promote efficiency, we recommended that the Legislature allow State Hospitals the flexibility to stop an evaluation once it has determined that the offender does not meet one of the SVP criteria.

To improve the consistency of its evaluations, we made recommendations to State Hospitals including the following:

- Create a written policy requiring evaluators to include details describing the documents reviewed in their evaluations.
- Update its assessment protocol to include specific instructions on conducting evaluations.
- Develop a plan for formal supervisory reviews of evaluations from a clinical perspective.
- Use information on the outcomes of past trials to identify training and supervision needs and develop training programs to ensure evaluators conduct evaluations effectively and consistently.