



Conditional Release Program for Sexually Violent Predators

Program Participants Are Less Likely to Reoffend, While the State Has Difficulty Finding Suitable Housing

Background

California designates individuals who have been convicted of specific sexually violent crimes and who have significant mental health conditions as sexually violent predators (SVPs). When these individuals are nearing the end of their prison terms, a county Superior Court (court) may civilly commit them to a state hospital for mental health treatment under the care of the Department of State Hospitals (DSH). DSH also administers the SVP Conditional Release Program (program). The program provides a means of transitioning back into the community individuals (program participants) who have been committed to a state hospital as SVPs after the court has determined that they qualify for the program. Since the program's inception in 2003, it has placed 56 program participants into the community and provided services such as treatment and supervision. During this time, the State has contracted with a single vendor, Liberty Healthcare, to provide the program's services.

Key Findings

- Individuals who have participated in the program were convicted of new offenses less often than SVPs who were unconditionally released but did not participate in the program (nonparticipating SVPs).
 - » Of the 56 program participants, two were convicted of new offenses.
 - » Of the 125 nonparticipating SVPs, 24 were later convicted of 42 felonies. These felonies included two sexually violent offenses and five other sexual offenses.
- DSH has faced significant hurdles when locating suitable community housing for program participants. Such hurdles have included complex program requirements intended to ensure public safety and few property owners who have been willing to rent for use by program participants. As a result, placing program participants has typically taken the State 17 months.
- Although not required to do so by state law, DSH has taken steps to ensure that Liberty Healthcare effectively performs its contracted responsibilities, but it could do more.
 - » DSH has performed quarterly reviews of Liberty Healthcare, and it conducted a more thorough program review in 2019. However, DSH has not had an effective oversight process to monitor Liberty Healthcare's implementation of the recommendations from those reviews.
 - » DSH has allowed several known deficiencies to persist since at least 2019 without holding Liberty Healthcare accountable for implementing timely resolutions.

Key Recommendations

- To potentially reduce the time needed to place program participants in housing in communities, DSH should explore establishing state-owned transitional housing. Specifically, by September 2025, DSH should conduct an analysis of the benefits and feasibility of establishing transitional housing facilities for the program. To the extent it finds transitional housing beneficial to the program, it should seek necessary funding and legislative authority to implement such housing for the program.
- To ensure that Liberty Healthcare remedies program deficiencies in a timely manner, DSH should develop a process by December 2024 to track Liberty Healthcare's implementation of the recommendations resulting from its reviews. This process should include DSH identifying the recommendations Liberty Healthcare should prioritize, requiring Liberty Healthcare to provide updates on the key tasks it must accomplish to implement each recommendation, and requiring Liberty Healthcare to provide estimated completion dates for each key task and each recommendation.