

**Commission on Alternatives to Incarceration
Representative Joe Kroeber, Chairman
North Dakota State Hospital Sexual Offender and Tompkins
Rehabilitation and Corrections Center
March 22, 2006**

Mr. Chairman, members of the committee, for the record my name is Alex C. Schweitzer, the Superintendent of the North Dakota State Hospital. I appear before you today to provide the committee with information on the Sexual Offender and Tompkins Rehabilitation and Corrections Center programs at the North Dakota State Hospital.

Sexual Offender Program:

The North Dakota legislature passed NDCC 25-03.3, the civil commitment law for dangerous sexual predators in 1997. The statute dictates that if a respondent is found to be a sexually dangerous individual he/she is committed to the care, custody and control of the Executive Director of the Department of Human Services. Confinement, evaluation and treatment of dangerous sex offenders are provided at the North Dakota State Hospital.

The United States Supreme Court decision of Kansas v. Hendricks supported the civil commitment laws as long as specific requirements are followed. These requirements are as follows:

- Confinement at issue is civil, not criminal.**
- The civil law is not imposing confinement as punishment.**
- Sexually Violent Predators should be housed and segregated from the general prison population.**

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- The model should be the same as other involuntarily committed clients.
- As long as the State's ancillary purpose is to treat the sex offender the State may commit him for an indefinite period.

The treatment provided at the State Hospital must follow the umbrella guidelines of the Joint Commission for the Accreditation of Hospital Organizations (JCAHO), the State Hospital accrediting body. JCAHO requires:

- State of the art treatment, which is considered the standard of practice within the field.
- An acceptable national standard of treatment hours (31.5 at the State Hospital).
- Staffing levels adequate to meet the level of need.
- A safe environment.

Current Sex Offender Population:

The North Dakota State Hospital is currently budgeted to operate forty-two (42) beds for sex offenders in two units in the GM Building. The hospital at the time of this presentation has forty - eight (48) sex offenders in the two units. Thirty - Five (35) of the sex offenders are committed for treatment, seven (7) have been recommended to the district court for commitment and

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six (6) are scheduled for evaluation. The clinical staff at the hospital is also currently doing four (4) paper reviews for potential evaluations.

The hospital plans to expand to a third sex offender unit in the GM Building by April 15, 2006, because of the growing occupancy, crowding and security/safety issues on the two current units.

The hospital continues to track possible referrals to the sexual offender program through contacts with the Department of Corrections and states attorneys. To date, no individual has been discharged from the program.

Staffing:

The sex offender units at the hospital require staffing to manage the population effectively and meet the hospital's accreditation standards. An appropriate number of direct care staff is essential to providing a safe and secure environment that prevents injury to staff and patients. These challenging patients are involved in daily programming, so the hospital relies on ward structure, secure common areas and staffing to ensure safety and security. Thus, we need staff to supervise and manage patients in several different locations at one time, including ward activities, off ward recreational activities and therapy groups. In addition the hospital employs professional staff to provide medical, psychiatric, treatment and evaluation services.

Budget and Cost Analysis:

The hospital's 2005 – 2007 biennial budget for the two sex offender units is \$5,459,220. The total direct care cost per sex offender in the two operating

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units is \$178.06 per day or \$64,992 per year. The addition of a third unit if it reaches the full capacity of 25 patients would cost the hospital an additional \$1.2 million dollars over a 15-month period.

Security in the Sexual Offender Program:

The hospital is currently awaiting a cost analysis from an engineering/architectural firm to implement major security changes and upgrade the building to a minimum-security building. The hospital has implemented numerous risk reduction strategies as a result of an elopement from the facility in August of 2005. The majority of the changes will require very little cost. The big-ticket items include adapting the windows in the building for security and ventilation purposes, ventilation in the patient care areas, the securing of common areas in the basement and the installation of a fence around the building.

Thank you for the opportunity to present on the status of the sexual offender program at the State Hospital. I would be willing to answer any of your questions. Mr. Kerry Wicks, the hospital's clinical director for residential services and Steve Saum, the program director for the sexual offender program, are also available to respond to specific clinical and program questions.

Tompkins Rehabilitation and Corrections Center Program:

The Tompkins program is a collaborative effort between the Department of Corrections and Rehabilitation – Field Services Division and the North Dakota State Hospital.

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The program has been in operation since 1999. It is operated as a structured therapeutic community with cognitive behavioral addiction treatment approaches. The program is a residential facility with 24-hour a day, seven days a week service. Cognitive restructuring is offered to support the management of the milieu and to tie all components of treatment together in a unified approach. The Joint Commission Accreditation of Hospital Organizations (JCAHO) accredits the program and the Department of Human Services, Division of Mental Health and Substance Abuse, licenses the program through deemed status.

The Tompkins Rehabilitation and Corrections Center has 90 beds and stays virtually full at all times. The program serves thirty (30) women and sixty (60) men at any given time. The hospital is remodeling the vacant nurses building and moving the men's program in April of 2006, because of the sexual offender program expansion. The women's program continues to be operated out of the New Horizons building. (The old Child and Adolescent Building). The hospital has treated a total of 1500 individuals in the Tompkins Rehabilitation and Corrections Center since the program was implemented in 1999. Currently there is about a three-month waiting list.

It is extremely important clinically that the program offer service for an adequate length of time. Research from the National Institute of Drug Abuse (NIDA) has supported the need for long-term treatment for methamphetamine users. In the Tompkins programs, over 40% of the men and 80% of the women have a diagnosis of methamphetamine dependence, usually in combination with other alcohol/drug dependence.

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The majority of the offenders complete their treatment in the program within 120 days of admission. 80 days to one year is used to transition residents back to the community. The transition of offenders back to the community begins during their intensive residential stay at the Tompkins Center. Residents earn privileges that eventually give them the ability to attend community functions in Jamestown to prepare them for the transition back home.

The current outcome data we have shows that about 65% of the people treated in the program successfully reintegrate to the community. We also have in excess of 90% of the Tompkins Rehabilitation Center population who report satisfaction with treatment as indicated by approval scores of '3' or above on a 5 point scale.

The clinical director of the program is currently analyzing the results of a two-year post discharge research project. This research project will yield improvement outcomes for several variables including employment, alcohol/drug use, criminal justice involvement, support, psychological, family and medical.

The current daily cost for treatment of the offenders in the Tompkins program is \$144.82 per day.

Thank you for the opportunity to present on the Tompkins program. Kerry Wicks, clinical director for residential services and Rick Hoekstra, Field Services of the DOCR, and I would now be willing to take questions.

