ANNUAL REPORT OF THE MASSACHUSETTS TREATMENT CENTER FOR SEXUALLY DANGEROUS PERSONS

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I. INTRODUCTION

Section 12 of AN ACT IMPROVING THE SEX OFFENDER REGISTRY AND ESTABLISHING CIVIL COMMITMENT AND COMMUNITY PAROLE FOR LIFE FOR SEX OFFENDERS, enacted as an emergency law on September 10, 1999, and as appearing in G.L. c. 123A, § 16, provides:

The department of correction . . . shall annually prepare reports describing the treatment offered to each person who has been committed to the treatment center . . . as a sexually dangerous person and, without disclosing the identity of such persons, describe the treatment provided. The annual reports shall be submitted, on or before January 1, 2000 and every November 1 thereafter, to the clerk of the house of representatives and the clerk of the senate, who shall forward the same to the house and senate committees on ways and means and to the joint committee on criminal justice.

In addition, G.L. c. 123A, § 16 further provides:

The treatment center shall submit on or before December 12, 1999-its plan for the administration and management of the treatment center to the clerk of the house of representatives and the clerk of the senate, who shall forward the same to the house and senate committees on ways and means and to the joint committee on criminal justice. The treatment center shall promptly notify said committees of any modifications to said plan.

On December 10, 1999, the Department of Correction ("the Department" or "DOC") filed its Plan for the Administration and Management of the Massachusetts Treatment Center for Sexually Dangerous Persons ("the 1999 Plan"), which described in detail the treatment offered to the civilly committed sexually dangerous persons ("SDPs") confined at the Massachusetts Treatment Center for Sexually Dangerous Persons ("Treatment Center"), as well as the Department's plan for operating the Treatment Center. The Department has filed Annual Reports updating the 1999 Plan and reporting relevant developments.

Accordingly, this report includes (a) the accomplishments of the Treatment Center in the year 2013; (b) modifications to the 1999 Plan; (c) the manner in which the Treatment Center satisfied its obligations under G.L. c. 123A during the year; and (d) the treatment and rehabilitative services delivered to the civilly committed SDPs confined to the Treatment Center over the past year.¹

The Treatment Center has traditionally referred to its civilly committed population as "residents" and to state prison inmates, who are not civilly committed, as "inmates." Inmates who are sex offenders as that term is defined in 103 DOC 446, Sex Offender Management, may voluntarily participate in the Department's sex offender treatment program at the Treatment Center, MCI-Norfolk, North Central Correctional Institution at Gardner ("NCCI-Gardner"), or MCI-Framingham (female offenders). At the

II. TREATMENT CENTER'S CIVILLY COMMITTED POPULATION

As of October 1, 2013, 237 individuals were civilly committed as SDPs to the Department's custody. All of the data that follows in this section is as of October 1, 2013.

Of these 237 SDPs, 64 individuals remain committed under the pre-1990 version of G. L. c. 123A. Of these 64 individuals, eight have been transferred to other DOC facilities pursuant to the provisions of G.L. c. 123A, § 2A.²

In addition, 173 SDPs committed under the 1999 amendments to G.L. c. 123A remain civilly committed.

Also, 38 individuals were temporarily committed to the Treatment Center pending resolution of civil commitment proceedings.

No juvenile was committed to the Treatment Center during the year. G.L. c. 123A, § 14(d). Likewise, no person deemed incompetent to stand trial in the underlying criminal case was civilly committed to the Treatment Center during the year. G.L. c. 123A, § 15.

Treatment Center, inmates are housed in the Modular Unit. The Department also offers sex offender treatment to male inmates confined in special housing at Old Colony Correctional Center.

General Laws c. 123A, § 2A provides, in pertinent part, that an individual "who has been committed as sexually dangerous and who has also been sentenced for a criminal offense and said sentence has not expired may be transferred from the treatment center to another correctional institution designated by the commissioner of correction. In determining whether a transfer to a correctional institution is appropriate the commissioner of correction may consider the following factors: (1) the person's unamenability to treatment; (2) the person's unwillingness or failure to follow treatment recommendations; (3) the person's lack of progress in treatment at the center or branch thereof; (4) the danger posed by the person to other residents or staff at the Treatment Center or branch thereof; [and] (5) the degree of security necessary to protect the public." As required by G.L. c. 123A, § 2A, the Department has promulgated regulations establishing a transfer board and procedures governing the transfer process. See 103 CMR 460, Transfer Procedures for the Massachusetts Treatment Center. The statute also requires that individuals transferred pursuant to this statutory provision be offered a program of voluntary treatment services and be evaluated annually and a report be prepared which report shall be admissible in any hearing conducted pursuant to G.L. c. 123A, § 9. A transfer does not vacate the SDP commitment. The statute mandates that the individual be returned to the Treatment Center upon completion of the criminal sentence.

III. THE DEPARTMENT'S OBLIGATIONS UNDER G.L. C. 123A

A. Initial Commitment Proceedings Pursuant to G.L. c. 123A, §§ 12(e), 13(a) and 14(d)

As described in detail in the 1999 Plan, the Department and the Treatment Center remain committed to the successful implementation of G.L. c. 123A. The Department has established an effective and timely process to notify the Attorney General's office and the various District Attorneys' offices of the impending release of inmates subject to potential commitment as sexually dangerous persons. Pursuant to G.L. c. 123A, § 12(a), the Department reviews the records of all inmates in its custody and identifies those convicted of the sexual offenses listed in G.L. c. 123A, § 1. The Department then provides the Attorney-General's office and the District Attorneys' offices with written notice of the inmate's discharge date and other documentation so that the District Attorneys can decide whether to file a petition for civil commitment pursuant to G.L. c. 123A, § 12(a).

Pursuant to G.L. c. 123A, §§-12 and 13, the Department provides the District Attorneys' offices with all records, files, and information that it_can lawfully provide.

When the Superior Court orders that an inmate be temporarily committed to the Treatment Center pending a probable cause determination pursuant to G.L. c. 123A, § 12(e), or orders that the inmate be committed to the facility for a 60-day observation period pursuant to G.L. c. 123A, § 13(a), the temporarily committed individual is oriented to the operation of the facility and educated as to its rules and regulations. The Treatment Center administration remains committed to responding in a proactive and efficient manner to developments arising during the implementation of c. 123A. Temporarily committed individuals have been and continue to be effectively managed in accordance with the 1999 Plan and subsequent Annual Reports. These individuals receive access to facility programs, services, and treatment, as well as visitation with family members and legal representatives. The administration and staff of the Treatment Center continue to strive towards the appropriate management and treatment of those persons identified as possibly sexually dangerous as well as those committed under G.L. c. 123A.

After persons are found sexually dangerous and civilly committed to the Treatment Center, they are scheduled to meet with a therapist within two business days. They are offered the opportunity to enroll in treatment.

Through its contract for the delivery of psychological forensic services with Forensic Health Services ("FHS"), the Department coordinates the statutorily mandated evaluations of sex offenders for initial commitment and discharge proceedings. Chapter 123A requires that two Qualified Examiners evaluate the sex offender in connection with the initial commitment petition pursuant to G.L. c. 123A, § 13(a), and any petition for discharge pursuant to G.L. c. 123A, § 9. The Community Access Board

FHS is now a wholly-owned subsidiary of MHM Correctional Services, Inc. ("MHM").

("CAB") is required to evaluate those sex offenders who have been adjudicated as sexually dangerous and committed to the Treatment Center annually. G.L. c. 123A, § 6A. The CAB sometimes evaluates an SDP more than once annually if the SDP has filed a petition for discharge pursuant to G.L. c. 123A, § 9.

B. Discharge Proceedings - G.L. c. 123A, § 9 Petitions

The Department's Legal Division continued to represent the Commonwealth in G.L. c. 123A, § 9 proceedings during 2013. As of October 11, 2013, the Treatment Center Legal Office received 37 new G.L. c. 123A, § 9 petitions for discharge in 2013.

The Unified Session at Suffolk Superior Court scheduled 56 petitions for trial in 2013. The Unified Session continues to be managed in the Suffolk Superior Court. Section 9 jury trials were held in the Suffolk Superior Court. The data that follows in this section is as of October 11, 2013.

Twenty-six of the 59 petitions have been heard by juries as of October 11, 2013. In fourteen cases, the jury concluded that the petitioner remained sexually dangerous. In nine cases, the jury concluded that the petitioner was no longer sexually dangerous. Four cases resulted in mistrials. One of these cases was retried and the jury concluded that the petitioner was no longer an SDP. The other three cases have not yet been retried. Thus, there were 27 jury trials on 26 petitions.

Eleven of the petitioners withdrew their § 9 petitions before trial. In three instances, the trials were continued and these cases were not tried before October 11, 2013, two of which have been rescheduled to be tried later in 2013. Eight additional petitions are scheduled to be tried between October 28 and December 31, 2013, for a total of ten trials to be held later in 2013.

In ten other instances, the Commonwealth lacked sufficient expert evidence to proceed to trial. In these cases, the judge determined that the petitioner was no longer sexually dangerous as required by the Supreme Judicial Court's decision in *Johnstone*, petitioner, 453 Mass. 544 (2009). In *Johnstone*, the Court concluded that, in order to proceed to trial, the Commonwealth must have the opinion of at least one of the two qualified examiners that the petitioner is a sexually dangerous person. *Johnstone*, 453 Mass. at 553. This ruling applies to both initial commitment petitions managed by the District Attorneys' offices and Section 9 trials managed by Department attorneys based at the Treatment Center. *Id.*

In addition to representing the Commonwealth in these § 9 cases, the Treatment Center Legal Division provides in-house legal advice to the Department and the Treatment Center administration. The Treatment Center Legal Division also represents Treatment Center and other DOC employees in civil rights litigation brought by SDPs, temporarily committed individuals and inmates in the state and federal courts.

IV. ACCOMPLISHMENTS AND CHANGES SINCE NOVEMBER, 2012

In addition, the Treatment Center achieved the following accomplishments and significant events since the filing of the 2012 Annual Report:

- As noted in the 2011 and 2012 Annual Reports, on May 26, 2011, following a competitive public bidding process, the Department awarded the sex offender treatment contract to MHM. During the term of the previous sex offender treatment contract, FHS became a wholly-owned subsidiary of MHM and currently operates as a service division of MHM. The new contract has an initial duration of three years with three options to renew for two years each. The contract includes treatment programming for SDPs, individuals temporarily committed to the Department's custody who are awaiting SDP commitment proceedings and inmates. As part of its treatment program, FHS has incorporated aspects of the Good Lives Model and is delivering the treatment via a therapeutic community model. This model was implemented with the civilly committed population in November and December 2011 and with the state inmate population in June 2012. As a result, housing assignments are based on level of tracture of level of treatment involvement in addition to security and other considerations. Additional behavioral incentives are awarded to those individuals who are the most involved in sex offender treatment while fewer behavioral incentives are awarded to those individuals who are the least involved in sex offender treatment. As noted in the 2012 Annual Report, treatment participation by SDPs has increased approximately 30% since the implementation of the new model. Among the state inmates housed at the Treatment Center, treatment participation has increased from 75% to 90% since the implementation of the new model. State inmates housed at the Treatment Center who refuse to participate in the sex offender treatment program are subject to reclassification to other facilities so that treatment opportunities are made available to those inmates who wish to participate.
- Under the Department's contract for the provision of comprehensive medical and mental health services with the Massachusetts Partnership for Correctional Health ("MPCH"), protocols were developed for the provision of psychopharmacological treatment to SDPs who suffer from paraphilic disorders and meet clinical criteria for the provision of such treatment while inside the accure confines of the Treatment Center. MPCH staff and SOTP staff consult as part of the assessment process. SDPs were notified of these protocols through unit meetings and postings.
- In February 2013, a severe snowstorm caused significant damage to a fence inside the Treatment Center's secure perimeter. This fence separates the main facility from the Community Transition House (CTH), which serves as lower security housing at the Treatment Center for those SDPs who are deemed to be appropriate for such placement from both a clinical and security perspective. As

a result, the CTH was temporarily closed for security reasons. The four SDPs then housed at the CTH were temporarily relocated inside the main facility while sufficient interim repairs were made. The TC is awaiting funding to complete permanent repairs.

- Treatment Center staff members continue to participate in training about the Treatment Center's mission, the therapeutic model, re-entry issues and Department policies and procedures.
- Treatment Center and Department staff have continued to work cooperatively
 with other agencies including the Department of Mental Health, the Department
 of Developmental Services and Probation Departments to facilitate re-entry
 planning and appropriate placements for releasing inmates and civilly committed
 individuals.
- The Department and the Sex Offender Registry Board continue to collaborate to provide sex offender registration hearings.

V. CONCLUSION

The Department of Correction continues to operate the Treatment Center as a facility geared to deliver state-of-the-art sex offender services to its unique population, whether they are civilly committed sexually dangerous persons or state prison inmates. During the year 2013, the Department received new temporarily committed individuals and new SDPs and provided them with services in a safe and secure setting conducive to providing treatment and protecting the public.