

# HOUSE RESEARCH

## Bill Summary

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### Section

#### Article 1: Sexual Violence Prevention

##### Overview

This article creates a sexual violence prevention working group and creates demonstration grants for community sexual violence prevention.

**1 Title.** Provides the title for the act.

**2 Prevention of sexual violence working group.**

**Subd. 1. Creation; duties; recommendations.** Paragraph (a) instructs the commissioner of health to convene a prevention of sexual violence working group. Lists the responsibilities of the working group.

Paragraph (b) requires the working group to consider evidence-informed research and best practices, consult with various professional organizations, and to consider the health department's Five-Year Sexual Violence Prevention Program.

Paragraph (c) requires the commissioner to convene the working group by August 1, 2013.

**Subd. 2. Membership.** Lists the composition of the working group.

**Subd. 3. Consultation.** Allows the working group to consult with various professional organizations and experts.

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**Subd. 4. Reports.** Paragraph (a) requires the working group to submit an initial report by February 1, 2014.

Paragraph (b) allows the working group to make recommendations to the governor for new state policies, programs, or services and to provide feedback to the governor on proposals for new state initiatives related to prevention of sexual violence.

**Subd. 5. Expiration.** States that the working group expires June 30, 2016.

### **3 Sexual violence prevention demonstration partnership grants.**

**Subd. 1. Definition.** Defines “community sexual violence prevention partnership” for purposes of this section.

**Subd. 2. Community sexual violence prevention partnership demonstration grants.** Paragraph (a) instructs the commissioner of health to award competitive grants to community health boards to fund partnerships.

Paragraph (b) lists the purposes for which the grants may be used.

Paragraph (c) lists the requirements that must be met by community health boards and tribal governments in order to receive a grant.

Paragraph (d) allows the commissioner to award grants to a community health board or tribal government for up to 60 consecutive months.

**Subd. 3. Technical assistance.** Requires the commissioner to provide technical assistance through contracts with private or nonprofit providers.

### **4 Appropriations.** Paragraph (a) appropriates \$100,000 per year to the commissioner of health for working group administration and activities.

Paragraph (b) appropriates \$750,000 each year to the commissioner of health to fund the grants.

## **Article 2: Strict and Intensive Supervision and Treatment and Public Education Campaign**

### **Overview**

This article instructs the commissioner to ensure there is adequate capacity to provide strict and intensive supervision and treatment. It requires the commissioner to develop education programs for the public and for professionals.

### **1 Strict and intensive supervision and treatment.** Requires the commissioner of human services to ensure that there are adequate facilities to provide strict and intensive supervision and treatment for individuals who are civilly committed with a sexual psychopathic personality or as a sexually dangerous person.

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- 2 **Education relating to sex offender civil commitment procedural changes.** Requires the commissioner of human services to develop and provide education on specified topics related to sex offender civil commitment to legal professionals and court-appointed examiners.
- 3 **Public education campaign.** Instructs the commissioner of human services to develop a public education campaign to inform the public about the 2012 MSOP class action lawsuit, the advisory task force, and the legislative response.

### Article 3: Civil Commitment Modifications

#### Overview

This article makes changes to commitment statutes for those individuals who are committed to strict and intensive supervision and treatment. It requires annual reviews of a committed person's placement and treatment progress.

- 1 **Commitment generally.** Amends § 253B.185, subd. 1. Provides an individual shall be committed and placed in a secure treatment facility for evaluation and proposed disposition when the court finds by clear and convincing evidence that the individual is a sexually dangerous person or a person with a sexual psychopathic personality. Requires completion of an evaluation and disposition report within 60 days. Requires the disposition report to recommend whether the person should be placed on strict and intensive supervision and treatment or in a secure treatment facility.
- 2 **Strict and intensive supervision and treatment.** Amends § 253B.185, by adding subd. 1c. Paragraph (a) provides that if a plan for strict and intensive supervision and treatment is proposed, the court shall commit the person to strict and intensive supervision and treatment unless the petitioner proves by a preponderance of the evidence that the plan is not sufficient to meet the person's treatment needs or public safety requirements.

Paragraph (b) requires the MSOP to prepare a plan for strict and intensive supervision and treatment when an individual is committed for this form of treatment. Requires the plan to be submitted for court approval within 60 days.

Paragraph (c) provides that an individual is committed for this form of treatment, the individual is committed to the commissioner, and is subject to conditions set by the court and the program.

Paragraph (d) establishes the criteria needed in order for the court to issue an order for the individual to be taken into custody by law enforcement and transported to a correctional facility or secure treatment program.

Paragraph (e) provides that this subdivision does not affect or replace registration or notice requirements.

## **Section**

**3**      **Annual review of placement level.** Amends § 253B.185, by adding subd. 9a. Paragraph (a) instructs the commissioner to appoint an examiner to conduct a reexamination of each committed person within 12 months after the date of initial commitment and at least each 12 months thereafter.

Paragraph (b) requires the report to be completed within 30 days of the reexamination.

Paragraph (c) allows the court to request a reexamination at any time.

Paragraph (d) requires the treating professional to prepare a treatment progress report at the time of the reexamination. Lists the factors to be addressed in the progress report.

Paragraph (e) provides that examiners and treating professionals have reasonable access to the person for purposes of reexamination and to the person's treatment and health care records.

Paragraph (f) instructs the commissioner to submit an annual report consisting of the reexamination report and treatment progress report to the judicial appeal panel. Lists the individuals who must receive a copy of the annual report.

Paragraph (g) waives the report requirements during a period of incarceration if a committed person is incarcerated for a new criminal charge or conviction.

Paragraph (h) provides that failure to complete or file any required report does not affect the validity of the person's continued commitment.