### Phyllis Gilmore, Acting Secretary

### House Judiciary Committee

February 7, 2012

## HB-2530 Relating to the commitment procedure of sexually violent predators

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# HB-2530 – Relating to the commitment procedure of sexually violent predators

Chairman Owens and members of the Committee thank you for the opportunity to come before you today to discuss HB 2530, proposing changes to K.S.A. 59-29a07. Briefly, the current statute specifies that sexually violent predators "shall be segregated at all times from any other patient under the supervision of the secretary of the social and rehabilitation services...(and) kept in a facility or building separate from any other patient in a facility or building under the supervision of the secretary of social and rehabilitative services."

This bill provides clarification where sexually violent predators committed to the care and custody of the Secretary of SRS can be housed. Currently, the sexually violent predators must be housed in a <u>separate facility or building</u> from all other patients. This bill clarifies the predators can be housed in a secure setting such as State Security Hospital where other security patients are housed in the Isaac Ray building, so long as the sexually violent predators remain segregated at all times. The bill also allows for maximum utilization of limited security space.

The proposed change will continue to ensure that Sexual Predator Treatment Program (SPTP) residents remain segregated from all other patients at all times in a secure setting. The proposed modification to 59-29a07 will simply allow the maximum utilization of the remaining unoccupied units on the Isaac Ray Building. The security design of the Isaac Ray building is such that segregation of patients is currently accomplished for all units by a single-point security control center. Patients are only allowed outside of their secure units when large sliding doors (picture attached) are electronically released. Any movement into the main interior corridor of the building is redundantly controlled by a second secure sliding door and staff is always present.

There is long-standing precedent demonstrating the ability of LSH to successfully segregate patients within the same building, as the separation of civilly committed patients on the Security Behavior Unit (K.S.A. 76- 1307) has been successfully occurring since 1976. In sum, the ability to utilize the Isaac Ray security building for the housing of sexual predators will continue to ensure the segregation of sexually violent predators from all other patients, while maximizing the resources of the state of Kansas. That concludes my testimony and I would be glad to stand for any questions.