

PATIENT RESTRICTED

Coalinga State Hospital

OPERATING MANUAL

SECTION - MEDICAL/NURSING SERVICES
ADMINISTRATIVE DIRECTIVE NO. 406
(Replaces AD 406 dated 12/15/2005)

Effective Date: November 9, 2006

SUBJECT: POLYGRAPHS

I. PURPOSE

To ensure reliability of sex offender information for the purpose of treatment.

II. AUTHORITY

By Order of the Deputy Director of Long Term Care Services, California Department of Mental Health, Special Order No. 331.

III. POLICY

NOTE: This policy addresses polygraphs administered to participants of the Sex Offender Commitment Program (SOCP) at Coalinga State Hospital (CSH) only; these persons are committed pursuant to the Sexually Violent Predator (SVP) statutes. Polygraphs are not administered to employees.

The use of polygraphs in the assessment of SVP commitments at CSH shall be limited to three types of examination:

- A. **Specific-Issues.** Because self-report among sex offenders is not always reliable, there are instances in Individual's SOCP-phase participation in which it is necessary to resolve discrepancies between the self-reported account of events and the accounts that exist in the official record. In these cases, specific issue polygraph examinations may be used as a means to reconcile these discrepancies in order to make appropriate clinical decisions.
- B. **Maintenance/Monitoring:** In long-term recovery of sex offenders, it is important to have external validation of the person's compliance with agreed upon recovery plans. Maintenance/monitoring polygraph examination may be used as a means to determine if the person is engaged in any high-risk behaviors.
- C. **Partial Disclosure:** A crucial aspect of the preparation of sex offenders for community placement is the establishment of an accurate and complete assessment of high-risk elements that many predispose them to re-offense. A partial disclosure polygraph examination may be used to help assure the preparation of a complete list of high-risk elements, victim types, and offending patterns in order that a comprehensive outpatient community safety plan may be developed.

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Polygraph examinations will not be conducted for the purposes of sexual history (full-disclosure examination) because of the judicial implications of self-incrimination, which carry requirements governing newly reported crimes. Informed consent of the patient will be required for all polygraph examinations (see Attachment A).

Polygraph examinations will only be conducted by a trained and licensed polygraph examiner following the American Polygraph Association guidelines for selecting and calibrating instrumentation, administering the examination, recording examinee responses, and interpreting the results. These examiners shall maintain a membership in appropriate professional organizations and participate in relevant continuing education activities.

Testing techniques and question construction will follow the guidelines established by the Association for the Treatment of Sexual Abusers (ATSA) in the Ethical Standards and Principles for the Management of Sexual Abusers (1997).

Polygraph examination will not be used to determine guilt or innocence related to any specific crime; nor will it be used as the sole criterion for release from the hospital.

IV. METHOD

A. Referrals

If the Team is considering a specific - issue examination, it will first exhaust all available alternatives in resolving discrepancies. On the referral, the Team will then articulate the rationale and unresolved question to be addressed in the examination. If the Team is considering maintenance and monitoring examination, it will articulate the clinical issues that are to be monitored. The referral from the Team, with the informed consent attached, shall be forwarded to the monitoring committee for their assessment of clinical appropriateness and approval. The monitoring committee shall obtain final approval from the Clinical Administrator and will then forward the referral to the Assessment Services (AS) staff for scheduling of the examination.

B. Examinations

Once the AS staff receives an approved referral, they will schedule and coordinate the examination.

1. The case clinician should work closely with the polygraph examiner in developing protocols for pre-examination interviews, question format formulation, reporting and use of results.
2. The polygraph examiner will conduct an interview prior to the examination to assure that the person understands the procedure and is not experiencing any anxiety that would deleteriously affect his responses to the examination questions.

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3. Persons will be screened by a physician or psychologist, immediately prior to the examination, for conditions (either physical or psychological) that would affect the accuracy of the test results.
4. Once completed, AS staff will forward the final report back to the Team.

V. DEFINITIONS

- A. Specific-Issue Examination – An examination regarding a specific behavior, allegation or event. This examination is conducted to clarify conflicting historical data and/or the person's current memory of events. This examination should be considered when conflicting information could not otherwise be clarified or resolved by the Wellness and Recovery (W&R) Team.
- B. Maintenance/Monitoring Examination – An examination of a person's compliance with treatment and/or conditions of parole. This examination serves to identify and/or deter the relapse of high-risk behaviors. This examination is usually administered every four-to-six months, but may be administered more frequently to those persons who are identified as being at high risk for sexual re-offense. These examinations are intended to assist the Team with ensuring compliance with the W&R Plan or community safety plan.
- C. Partial Disclosure Examination – An examination of a person's honesty in providing information about his past career of sexual deviance as determined by his responses to standardized assessment instruments while in the SOCP. These examinations are intended to assist the person and Team in tailoring effective relapse prevention strategies, and they are also intended to ensure that the person has addressed all high-risk elements prior to release to the community.

VI. DOCUMENTATION

- A. W&R Team: The team will complete the standardized referral form that shall describe the type of examination requested and the clinical rationale for that examination.
- B. Polygraph Examiner: The examiner will provide the final report that will include the responses and findings to the examination questions. The report should be available within 30 days. This report will be filed in the medical record under the consultation tab.



W. T. VOSS
Executive Director

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ATTACHMENT A

RELEASE AND CONSENT TO POLYGRAPH EXAMINATION

I, _____, understand that by signing this document, I agree to participate in a polygraph examination to assist in the treatment of behaviors which result in my pattern of sexual offending.

I understand that the polygraph examination will help treatment staff to focus on my specific treatment issues and will help staff give me more thorough and complete treatment. No one has promised me any reward for taking the examination other than the benefits to my treatment. No one has threatened me in order to obtain my consent to the polygraph examination. I understand that I may withdraw my consent at any time during the polygraph examination.

The polygraph examination has been explained to me. I understand that a qualified polygraph examiner will ask me questions, that the polygraph will record physiological data, and that the examiner will interpret the data to form an opinion about the truthfulness of my answers. The examiner will submit a report a written report summarizing his/her findings, and the report shall be made a permanent part of my medical record.

I understand that treatment staff, who review the result of my polygraph examination, are required by law to report suspected incidences of child or elder abuse (WIC 15631(a)(b)). I understand that, for that reason, if I disclose previously unreported offenses, the results of my polygraph examination may be the basis for a new investigation of child or elder abuse. I understand that the examiner will not specifically ask me about previous victims or of crimes that have not been previously investigated.

I do hereby release and forever hold harmless the State of California, its agents, and/or its employees from any claim arising out of my taking the polygraph examination.

My signature below indicates that I have read this form, or it has been read to me, and that all my questions about the polygraph examination have been answered to my satisfaction.

Signed _____ Date _____

Witness _____ Date _____