PC 1370: Incompetent to Stand Trial (IST)

IST defendants are determined by the court to be unable to participate in their trial because they are not able to understand the nature of the criminal proceedings or assist counsel in the conduct of their defense. When the court finds a defendant incompetent to stand trial, he/she can be committed to DSH to provide clinical and medical services with the goal of restoring their competency and enabling them to return to court to resume their criminal proceedings. Per Assembly Bill (AB) 133, as of July 27, 2021, only defendants with felony charges may be committed to DSH. Defendants with misdemeanor charges (1370.01) can no longer be committed to DSH.

Treatment:

The focus of treatment for the IST population is on restoration of trial competency in the most expeditious manner. Once specific mental health issues and medication needs are addressed, patients are immersed in groups or individualized sessions that train them in various aspects of court proceedings. Each patient receives instruction as to what they are charged with, the pleas available, the elements of a plea bargain, the roles of the officers of the court, the role of evidence in a trial, how to work with their counsel, and their constitutional protections. At any point during the treatment program, the patient may be evaluated to confirm they are competent to stand trial. After evaluation, if there is concurrence that the patient is competent, a forensic report is sent to the court, identifying that the patient is competent and ready to stand trial.

Conditional Release and Direct Referral Admissions

The forensic conditional release program, also known as CONREP, allows individuals who have been committed to a state hospital as part of a criminal proceeding to receive treatment in the community under supervision.

You can be placed on CONREP if you have been found:

- Not Guilty By Reason of Insanity (NGI)
- Incompetent to Stand Trial (IST)
- Mentally Disordered Offender (MDO)
- Mentally Disordered Sex Offender (MDSO)

The state budget provides 100% of the funding for CONREP's intensive level of assessment, treatment, and supervision. DSH contracts with county mental health programs and private agencies to provide services.

Additional Information

National Alliance On Mental Illness (NAMI) www.nami.org

Department of State Hospitals -Patton www.dsh.ca.gov

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Information in this brochure was adapted from DSH-Patton, NAMI and DSM-5 TR. Updated 2025.



Commitment Codes



Department of State Hospitals-Patton 3102 E. Highland Ave. Patton, CA 92369 www.dsh.ca.gov





PC 1026: Not Guilty by Reason of Insanity (NGI)

Patients judged by the court to be not guilty because they were insane at the time of the felony crime are committed to a state hospital for treatment for a period equal to the maximum sentence of their most serious offense. However, if the court finds that the sanity of the patient has been restored, the court may release the patient prior to reaching the maximum sentence. The term "insanity" connotes a legal definition, not a clinical diagnosis. Individuals may not be deemed insane unless they meet the strict legal test for insanity, which is set by case law and legislation.

Treatment:

The focus of treatment for the Not Guilty by Reason of Insanity (NGI) population emphasizes the potential for each patient to learn new skills and adaptive coping mechanisms to enhance the quality of the patient's life at the hospital and prepare them for eventual transfer to Community Outpatient Treatment (C.O.T.). Other goals are to motivate patients for treatment, develop greater self-autonomy and independence, and the mastery of Activities of Daily Living (ADL) skills and self-discipline.

Did you know: Insanity can be extremely difficult to prove. In fact, less than 1% of defendants in criminal cases plead insanity as their defense in the United States, and only about .26% of those who plead insanity are successful in their plea.

WIC 5000: Lanterman Petris Short (LPS) and Murphy Conservatorships

The Lanterman-Petris-Short program provides treatment for civilly committed patients who suffer from severe mental illness, and engage in the behaviors that are dangerous to themselves or others or are gravelly disabled by their mental illness and thereby unable to formulate a viable plan for self-care. A Murphy Conservatorship is designed to address the situation where a criminal defendant is found incompetent to stand trial (meaning they cannot understand the charges against them or assist in their defense) and poses a danger to themselves or others due to a mental disorder.

Treatment:

Programs provide a highly structured treatment environment for re-socialization in preparation for community placement. When someone is admitted under LPS, they are often placed under a conservatorship, meaning a court-appointed guardian makes decisions about their treatment and care.



How Can I Support a Loved One

It can be hard knowing how to support a loved one in a state hospital. Below are a few ideas to help your loved one.

- Maintain contact through calls and visits
- Send money for them to purchase personal items with approved vendors
- Become involved with DSH-Patton treatment team or NAMI
- · Avoid judgement or criticizing.

"Be kind, for everyone you meet is fighting a hard battle you know nothing about."

— Plato

PC 2962/2972: Offenders with a Mental Disorder (OMD)

Parolees who committed one of a specified list of crimes and who were treated for a severe mental disorder connected to their original crime can be committed to a state hospital as a condition of parole for a period not to exceed the length of their parole term. If the person still requires treatment at the end of their parole term, they can be civilly committed under P.C. 2972 if it is determined that they are a substantial danger to themselves or others. These commitments last for one year and may be renewed annually by the court

Treatment:

When the hospital treatment team believes a patient can be safely and effectively treated on an outpatient basis, the Department will recommend transfer to outpatient treatment in the Conditional Release Program. The patient's parole and treatment by the hospital will be reviewed by the Board of Parole Hearings every year. The patient may remain in the treatment program, either in the hospital or in outpatient treatment, throughout his time on parole, depending on his or her progress.

