IN THE SUPREME COURT

STATE (OF NORTH DAKOTA	GLERK OF SUPREME COLOT
In the Interest of Robert R. Hoff		SEP 2.6 2012
Pamela Ann Nesvig. Assistant State's Attorney.		STATE OF NORTH DAKOTA
)	
Petitioner-Appellee		
-vs-		
Robert R. Hoff,) Supreme Ct. No.	20120248
Respondent-Appellant,		

BRIEF OF PETITIONER-APPELLEE

APPEAL FROM THE SOUTH CENTRAL DISTRICT COURT'S ORDER FOR CONTINUED COMMITMENT OF A SEXUALLY DANGEROUS INDIVIDUAL FROM A DISCHARGE HEARING MARCH 26, 2012

Burleigh County District Court

South Central Judicial District

The Honorable Bruce A. Romanick, Presiding

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STATEMENT OF THE ISSUES I. Whether requiring Mr. Hoff to remain handcuffed during the annual review hearing violated his right of due process to a fair trial. II. Whether sufficient evidence was presented to determine Mr. Hoff met the criteria to remain committed as a sexually dangerous individual.

STATEMENT OF THE CASE Hoff's statement of the case is substantially accurate and the State joins in the same.

STATEMENT OF THE FACTS

Hoff's statement of the case is substantially accurate; however, the State believes additional facts are necessary for a complete understanding of the discharge hearing.

The State's expert, Dr. Lisota testified Mr. Hoff was initially determined to be a sexually dangerous individual in 2005. Tr. p. 15. After determining whether Mr. Hoff had engaged in sexually predatory conduct, Dr. Lisota testified as to whether Mr. Hoff suffered from a mental disease or defect. <u>Id</u>. at 12. Dr. Lisota testified that Mr. Hoff has a diagnosis of antisocial personality disorder. <u>Id</u>. at 13.

Dr. Lisota stated that generally, antisocial personality disorders are pervasive and include a pattern of disregard for the rights of others, and, since it is a personality disorder, it is not going to go away. Id. at 14-15. In order to diagnose antisocial personality disorder, an individual must meet three of seven different criteria, and Dr. Lisota testified that he believed Mr. Hoff met all seven of the criteria. Id. at 15. Further, Dr. Lisota testified that this diagnosis would be consistent with his score on the psychopathy checklist, and that every other evaluator, including state and independent, have found that Mr. Hoff has this diagnosis, with the exception of Dr. Riedel. Id. at 16. Evidence Mr. Hoff has this diagnosis, as stated by Dr. Lisota, include Mr. Hoff's struggle with authority figures, struggle complying with unit rules, and failing to conform with social norms with respect to lawful behaviors. Id. Specifically, Dr. Lisota testified that Mr. Hoff has had a total of 17 resident

behavior warnings, considered a high number, since his last review for Mr. Hoff's failure to follow unit directives. <u>Id</u>. at 17. Mr. Hoff also called a staff member a "cunt" and was written up for engaging in certain behaviors with female staff. <u>Id</u>.

Dr. Riedel disagreed with Dr. Lisota's diagnosis and had testified Mr. Hoff only met one or two of the seven requirements, but after questioning Dr. Riedel about his scoring for antisocial personality disorder, additional information was obtained. Id. at 93, 115-116. Dr. Riedel did not find that Mr. Hoff had met the requirement of deceitfulness even though he acknowledged he had scored Mr. Hoff high on psychopathy which makes Mr. Hoff a "better manipulator." Id. at 124. Further, Dr. Riedel acknowledged that he commented on Mr. Hoff's statements surrounding an insufficient fund case that Mr. Hoff's statements were consistent with what a psychopath would say. Id. at 124. After this acknowledgement, Dr. Riedel conceded that this would go towards deceitfulness in determining whether Mr. Hoff has antisocial personality disorder. Id. at 124-125.

Dr. Riedel testified initially that he did not find sufficient evidence to support the third component for antisocial personality disorder, which is impulsivity or failure to plan ahead. <u>Id</u>. at 125. However, Dr. Riedel testified he did not believe Mr. Hoff had planned out his GSI offenses and testified they would have been impulsive. <u>Id</u>. Dr. Riedel also testified he did not find any evidence Mr. Hoff met the fourth requirement for the disorder, irritability and aggressiveness. <u>Id</u>. However, Dr. Riedel testified he could not recall

 reviewing reports involving Mr. Hoff assaulting his siblings, engaging in disorderly conduct and vandalism. <u>Id.</u> at 126. Dr. Riedel then testified he did not find the fifth requirement for antisocial personality disorder, the reckless disregard for the safety as others, as he did not believe the underlying GSI involving force and Mr. Hoff's past cruelty to animals were a sufficient pattern of behavior to find the fifth requirement, however, Dr. Riedel did concede that he may be jaded from working with sexually dangerous individual cases too long. <u>Id.</u> at 126-127.

Dr. Lisota testified regarding Mr. Hoff's test scores to determine his risk level. Dr. Lisota stated he relied on the Static-99R of five which meant that Mr. Hoff was 2.7 more likely than the average or typical sex offender to re-engage and a 35.5 percent chance of reconviction for a sexual crime within ten years. Id. at 18-19. Dr. Lisota's score on the Static-99R compared to past evaluations did not drastically differ from Mr. Hoff's past scores and was consistent with past evaluators. Id. at 19.

Dr. Lisota found Mr. Hoff to have scored a plus thirteen on the MnSOST-R which places Mr. Hoff in the "referred for commitment bin" and places Mr. Hoff in a category where there is a "78 percent chance of re-arrest or a sex crime over an interval of six years." <u>Id</u>. at 19-20. Dr. Lisota testified he had looked at Mr. Hoff's past scores on this instrument and the lowest score he had ever received was an eleven, but the majority of the evaluators place Mr. Hoff at a score of thirteen. <u>Id</u>. at 20. Dr. Lisota stated that the

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actuarial tests placed Mr. Hoff at the moderate to quite high risk for sexual recidivism. Id. at 22.

Dr. Riedel testified Mr. Hoff scored a seven on the MnSOST-R. Id. at 107. When questioned why he had changed Mr. Hoff's score on this test from an eleven in 2009, Dr. Riedel could not cite the "new information" he based his changed scoring results upon. Id. at 129, 132. When questioned specifically as to his scoring results Dr. Riedel was questioned about his scoring of number five on the test, was force or threat of force ever used to achieve compliance in any sex offense. Id. Dr. Riedel acknowledged he gave that question a negative three response, no force used in any offense, even though Mr. Hoff pled guilty to a forced gross sexual imposition offense. Id. at 129-130. Further Dr. Riedel acknowledged that was different than the other evaluators who had scored Mr. Hoff. Id. at 130. Dr. Riedel further acknowledged that he was the lowest out of all of the evaluators on this test in Mr. Hoff's history. Id. at 132.

Dr. Lisota testified he reviewed Mr. Hoff's results on the Psychopathy Checklist Revised (PCL-R) and agreed with a score of thirty three. <u>Id</u>. at 22-23. Dr. Lisota stated that if an individual is deemed psychopathic, they are at increased risk for sexual re-offense. <u>Id</u>. Dr. Lisota testified that the PCL-R has a standard of error of measurement of plus or minus three points, and his score of thirty three would create a potential low of thirty, which is deemed the cut off for psychopathy. <u>Id</u>. at 23. Further, Dr. Lisota informed the court that past evaluators, including independent evaluators have all found Mr.

Hoff's PCL-R scores to range between thirty and thirty three. <u>Id</u>. Dr. Lisota testified that Mr. Hoff's score places him at greater risk for sexual re-offense and the combination of his psychopathy and his antisocial personality disorder indicates a high degree of risk. <u>Id</u>. at 24, 37.

Dr. Riedel scored Mr. Hoff in 2009 on the PCL-R at a thirty whereas at the hearing he testified he now found Mr. Hoff had a score of 27. <u>Id</u>. at 42, 112. Dr. Riedel based this change in scoring on a change of information, however, when presented with the question of what information deemed the change, Dr. Riedel was unable to specifically indicate to the court what information he relied upon in coming to this conclusion. <u>Id</u>. at 119-120.

Dr. Lisota also testified regarding dynamic risk factors to show what an individual's short term risk for sexual re-offense. <u>Id</u>. at 24-25. Dr. Lisota did not find anything in the dynamic risk factors that would lead him to conclude Mr. Hoff no longer was at a high risk for sexual re-offense. <u>Id</u>. at 25.

Dr. Lisota testified that Mr. Hoff would have serious difficulty controlling his behavior if he were discharged. <u>Id</u>. Dr. Lisota based his decision on Mr. Hoff's legal history, which he testified was quite extensive, and Mr. Hoff's lack of progress in treatment to date, including his excessive number of behavior warnings. <u>Id</u>. at 26. Specifically Dr. Lisota testified that Mr. Hoff has basically ended his year where he started in treatment as he went up one stage and then went down a stage. <u>Id</u>. Dr. Lisota found Mr. Hoff's use of sarcasm to be problematic and Mr. Hoff is defensive and tries to stay under

 the radar in group by remaining silent, however, Mr. Hoff does encounter difficulties as he is impulsive. <u>Id</u>. Further, Dr. Lisota cited altercations with peers or staff as Mr. Hoff does not receive feedback very well and Mr. Hoff has problems participating in group. <u>Id</u>. at 26-27. Dr. Lisota did state that he has made some progression in treatment, however, that progress was not substantive and would not mitigate his risk for sexual re-offense. Id. at 27.

Specific statements from Mr. Hoff that Dr. Lisota found concerning from group included "he'll probably re-offend sexually, or sarcastically, in 30 days post discharge. he is a sex addict. If I get a taste, I want more and more." Id. at 28. Dr. Lisota also testified that Mr. Hoff stated he doesn't like authority figures and he generally does not tell the truth. Id. Dr. Lisota testified that Mr. Hoff demonstrates serious difficulty controlling his behavior and it would be worse in a less restrictive environment than the State Hospital. Id. Dr. Lisota testified he recommended the court return Mr. Hoff to the care and custody of DHS as a sexually dangerous individual. Id. at 29.

Dr. Riedel testified in his direct exam that he was concerned that Mr. Hoff "relates to a rapist's profile" and Mr. Hoff's high relationship to "antisocial personality disorder profile and to borderline personality disorder profile." Id. at 86. Ultimately, Dr. Riedel testified that he did not find that Mr. Hoff met the criteria for commitment. Id. at 116. However, Dr. Riedel admitted that Mr. Hoff has not changed his ability to follow rules at the State Hospital and get through their programming. Id. at 134.

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ARGUMENT

I. REQUIRING MR. HOFF TO REMAIN HANDCUFFED DURING
THE ANNUAL REVIEW HEARING DID NOT VIOLATE HIS
RIGHT OF DUE PROCESS TO A FAIR TRIAL.

Mr. Hoff's right to due process was not violated when he was required to wear restraints during his annual review hearing. This court applies a modified clearly erroneous standard of review when analyzing a district court's decision for commitment of a sexually dangerous individual. In re-Maedche, 2010 ND 171, ¶ 9, 788 N.W.2d 331. "We will affirm a district court's commitment order unless the order is induced by an erroneous view of the law, or we are firmly convinced the order is not supported by clear and convincing evidence." Id., citing Matter of G.R.H., 2006 ND 56, ¶ 8, 711 N.W.2d 587. Mr. Hoff argues that sexually dangerous individuals should be considered under the same standard as a juvenile; however, this is not an appropriate classification. "Sexually dangerous individuals are distinctively dangerous due to the high probability that they will commit further acts of sexually predatory conduct if not confined in a secure facility." In re P.F., 2008 ND 37, ¶ 19, 744 N.W.2d 724. By virtue of their initial commitment. these individuals have already been determined to pose a danger to society, and because of this, there is justification to treat these individuals differently in order to protect the public. <u>Id.</u> at ¶ 20. Further, this Court has determined the State has a compelling interest that justifies treating sexually dangerous individuals differently. Id.

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Sexually dangerous individuals are treated by some courts to be considered a pretrial detainee as both remain in custody as they are believed to be a danger to society. Serna v. Goodno, 567 F.3d 944, 948-49 (8th Cir. 2009). Further it has been determined that the use of physical restraints is not in and of itself a violation of the Fourteenth Amendment to the Constitution during transport of sexually dangerous individuals. Thielman v. Leean, 282 F.3d 478, 482 (7th Cir. 2002). At the hearing in this case, Mr. Hoff was restrained due to the court's determination that Mr. Hoff was a danger and Mr. Hoff would not suffer any prejudice by remaining restrained during the hearing. Tr. pp. 5-6. The court's assessment of Mr. Hoff's status was appropriate under the circumstances and his right to due process was not violated.

Should the Court determine the due process analysis in cases involving sexually dangerous individuals should mirror that of a juvenile's right to be free of restraint, it should be determined that Mr. Hoff's due process right was not violated. An individual's right to due process is violated in a juvenile trial when the court does not exercise its discretion and defers to law enforcement whether an individual should be restrained during a trial. In re R.W.S., 2007 ND 37, ¶ 17, 728 N.W.2d 326. In this case, Mr. Hoff appeared for a hearing to determine whether he remained a sexually dangerous individual; a decision to be rendered by a judge, based upon the testimony of expert witnesses. Tr. pp. 3-6. The court did ask law enforcement present at the hearing their opinion whether Mr. Hoff was to remain restrained, however, it does not

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 appear from record that was the court's only factor in rendering its decision.

Id. Further, the court specifically stated "I'm the guy that makes the decision in this case." Id. at p. 5, ln. 25.

This Court has stated that the factors a juvenile court should consider in determining whether the accused should be restrained include "the accused's record, temperament, and the desperateness of his situation; the security situation at the courtroom and the courthouse; the accused's physical condition; and whether there was an adequate means of providing security that was less prejudicial." In re R.W.S., 2007 ND 37, ¶ 8, 728 N.W.2d 326. In Mr. Hoff's case the court stated, in response to his attorney's argument that no one said he was a danger, that he has been convicted of at least two felonies. Tr. p. 5. The court also referred to concerns that Mr. Hoff had been transported 90 miles for the hearing and the fact he was incarcerated and the sheriff's department wished for him to remain cuffed as he may be a danger. Id.

With respect to a juvenile proceeding, as they do not have the potential for jury prejudice, there must be a consideration of not inhibiting that individual's right to consult with their attorney during the proceeding. <u>In re R.W.S.</u>, 2007 ND 37, ¶ 15, 728 N.W.2d 326. In this case, the court ensured Mr. Hoff was able to communicate with his attorney during the proceeding. Tr. pp. 5-6. Mr. Hoff was able to communicate on paper and orally even though he remained restrained during the hearing. <u>Id</u>. at pp. 4-6. Further, the

potential he could not write was the sole basis for which the objection was made by Mr. Hoff's attorney at the hearing. <u>Id</u>. at p. 4.

Should the Court determine sexually dangerous individuals are subject to the same standards as a juvenile accused of a crime and Mr. Hoff's right to due process was violated, the violation of Mr. Hoff's right to due process was harmless. In re R.W.S., 2007 ND 37, ¶ 19, 728 N.W.2d 326. In this case, the error did not contribute to the court's finding that Mr. Hoff remained a sexually dangerous individual as the court's decision was based upon expert witness testimony, as outlined in the arguments to follow. Id. Therefore, any violation of due process in this case was harmless.

II. SUFFICIENT EVIDENCE WAS PRESENTED TO DETERMINE

MR. HOFF MET THE CRITERIA TO REMAIN COMMITTED

AS A SEXUALLY DANGEROUS INDIVIDUAL.

Sufficient evidence was presented to determine Mr. Hoff had met the criteria that he remains a sexually dangerous individual.

In reviewing the trial court's order, we give great deference to the court's credibility determinations of expert witnesses and the weight to be given their testimony. <u>Id</u>. The trial court is the best credibility evaluator in cases of conflicting testimony and we will not second-guess the court's credibility determinations. <u>Matter of Hanenberg</u>, 2010 ND 8, ¶ 9, 777 N.W.2d 62.

In re Wolff, 2011 ND 76, ¶ 5, 796 N.W.2d 644. In this case Mr. Hoff completed an application for discharge on September 21, 2011. Appellant App. p. 7. The State is required to prove at a discharge hearing the individual

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committed remains a sexually dangerous individual by clear and convincing evidence. Matter of Midgett, 2009 ND 106, ¶ 6, 766 N.W.2d 717.

A sexually dangerous individual is one who (1) has engaged in sexually predatory conduct; (2) has a sexual, personality, or other mental disorder; and (3) is likely to engage in further acts of sexually predatory conduct as a result of his disorder. N.D.C.C. § 25–03.3–01(8).

In re Wolff, 2011 ND 76, ¶ 6, 796 N.W.2d 644. Not only must the State show that the individual meets these three criteria, in order to comply with substantive due process, the State must also show the individual has serious difficulty controlling his behavior. <u>Id.</u> at ¶ 7; <u>Midgett</u>, 2009 ND 106, ¶ 6, 766 N.W.2d 717; <u>see also Kansas v. Crane</u>, 534 U.S. 407, 412–13 (2002).

We construe the definition of a sexually dangerous individual to mean that proof of a nexus between the requisite disorder and dangerousness encompasses proof that the disorder involves serious difficulty in controlling behavior and suffices to distinguish a dangerous sexual offender whose disorder subjects him to civil commitment from the dangerous but typical recidivist in the ordinary criminal case.

Interest of J.M., 2006 ND 96, ¶ 10, 713 N.W.2d 518.

A. Clear and convincing evidence was presented to the court to find Mr.

Hoff had engaged in sexually predatory conduct.

In this case, both experts agreed that Mr. Hoff had committed acts that would constitute sexually predatory conduct. The State's expert, Dr. Lisota, testified that the prior acts Mr. Hoff committed included a gross sexual imposition as a juvenile that involved Mr. Hoff having sexual contact with a ten year old girl and a gross sexual imposition as an adult that involved a "rape" with an intoxicated woman where Mr. Hoff was identified as the

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aggressor. Tr. pp. 11. Dr. Riedel, Mr. Hoff's expert witness, testified that the first component had been met as well. <u>Id</u>. at p. 115. Clear and convincing evidence was presented to support Mr. Hoff had engaged in sexually predatory conduct.

B. Clear and convincing evidence was presented to the court to find Mr. Hoff had a sexual, personality or other mental disorder.

The State proved by clear and convincing evidence that Mr. Hoff suffers from a sexual, personality or other mental disorder. At the discharge hearing, The State presented evidence that Mr. Hoff suffered from a mental disease or defect as Dr. Lisota testified that Mr. Hoff has a diagnosis of antisocial personality disorder. Tr. pp. 12-13. Dr. Lisota testified that he believed Mr. Hoff met all seven of the criteria listed to determine an individual has antisocial personality disorder, even though only three of the criteria are required for a diagnosis. Id. at 15. Dr. Lisota testified that this diagnosis is consistent with his score on the psychopathy checklist, and that every other evaluator, including state and independent, have found that Mr. Hoff has this diagnosis, with the exception of Dr. Riedel. Id. at 16.

Dr. Lisota cited some specific examples to illustrate Mr. Hoff suffers from antisocial personality disorder as he struggles with authority figures, struggles complying with unit rules, and fails to conform with social norms with respect to lawful behaviors. <u>Id</u>. Specifically, Dr. Lisota testified that Mr. Hoff has had a total of 17 resident behavior warnings, considered a high

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number, since his last review for Mr. Hoff's failure to follow unit directives, including name calling and his behavior toward female staff. <u>Id</u>. at 17.

Dr. Riedel disagreed with Dr. Lisota's diagnosis, however it was apparent to the court after questioning Dr. Riedel about his scoring for antisocial personality disorder he should have found at least three of the requirements had been met. <u>Id.</u> at 115-116. Dr. Riedel did not find that Mr. Hoff had met the requirement of deceitfulness even though he acknowledged he had scored Mr. Hoff high on psychopathy which makes Mr. Hoff a "better manipulator." <u>Id.</u> at 124. Dr. Riedel admitted Mr. Hoff's statements surrounding an insufficient fund case were consistent with what a psychopath would say. <u>Id.</u> at 124. After this acknowledgement, Dr. Riedel conceded that this would go towards deceitfulness in determining whether Mr. Hoff has antisocial personality disorder; therefore Dr. Riedel should have indicated this requirement was met. <u>Id.</u> at 124-125.

Dr. Riedel testified initially that he did not find sufficient evidence to support the third component for antisocial personality disorder, which is impulsivity or failure to plan ahead. <u>Id</u>. at 125. However, Dr. Riedel testified he did not believe Mr. Hoff had planned out his GSI offenses and testified they would have been impulsive; therefore Dr. Riedel should have found this component of the disorder had been met. <u>Id</u>. Dr. Riedel also testified he did not find any evidence Mr. Hoff met the fourth requirement for the disorder, irritability and aggressiveness, however, Dr. Riedel testified he could not recall reviewing reports involving Mr. Hoff assaulting his siblings, engaging

in disorderly conduct and vandalism, therefore Dr. Riedel should have testified this component had been met. <u>Id.</u> at 125-126. Dr. Riedel then testified he did not find the fifth requirement for antisocial personality disorder, the reckless disregard for the safety as others, as he did not believe the underlying GSI involving force and Mr. Hoff's past cruelty to animals were a sufficient pattern of behavior to find the fifth requirement, however, Dr. Riedel did concede that he may be jaded from working with sexually dangerous individual cases too long. <u>Id.</u> at 126-127. Clear and convincing evidence was presented to the court to find Mr. Hoff has a diagnosis of antisocial personality disorder.

C. Clear and convincing evidence was presented to the court to find Mr.

Hoff was likely to engage in further acts of sexually predatory conduct as a result of his disorder.

Through Dr. Lisota's testimony and statements made by Dr. Riedel at the hearing, clear and convincing evidence had been presented that Mr. Hoff was likely to engage in further acts of sexually predatory conduct as a result of his disorder. The actuarial test results that were testified to during the hearing indicated Mr. Hoff was likely to engage in sexually predatory conduct. Dr. Lisota scored Mr. Hoff on the Static-99R at a five which meant that Mr. Hoff was 2.7 more likely than the average or typical sex offender to re-engage and a 35.5 percent chance of reconviction for a sexual crime within ten years. <u>Id.</u> at 18-19. Dr. Lisota's score on the Static-99R compared to past evaluations

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did not drastically differ from Mr. Hoff's past scores and was consistent with past evaluators. Id. at 19.

Mr. Hoff's score on the MnSOST-R of thirteen as scored by Dr. Lisota deemed Mr. Hoff "referred for commitment bin" and placed Mr. Hoff in a category where there is a "78 percent chance of re-arrest or a sex crime over an interval of six years." Id. at 19-20. Dr. Lisota testified he had looked at Mr. Hoff's past scores on this instrument and the lowest score he had ever received was an eleven, but the majority of the evaluators place Mr. Hoff at a score of thirteen. Id. at 20. The actuarial tests place Mr. Hoff at the moderate to quite high risk for sexual recidivism. <u>Id.</u> at 22. Dr. Riedel's score of seven on the MnSOST-R is not reliable as he could not articulate what "new information" had come to light causing him to change Mr. Hoff's score on this test from an eleven in 2009. Id. at 107, 129, 132. Further, Dr. Riedel was questioned specifically as to his scoring results, his scoring of number five on the test, was force or threat of force ever used to achieve compliance in any sex offense. Id. Dr. Riedel acknowledged he gave that question a negative three response, no force used in any offense, even though Mr. Hoff pled guilty to a forced gross sexual imposition offense. Id. at 129-130. Dr. Riedel further acknowledged that he was the lowest out of all of the evaluators on this test in Mr. Hoff's history. Id. at 132.

Mr. Hoff's results on the PCL-R support clear and convincing evidence Mr. Hoff should remain committed. Dr. Lisota testified Mr. Hoff scored thirty three on the PCL-R. <u>Id</u>. at 22-23. Dr. Lisota stated that if an

individual is deemed psychopathic, they are at increased risk for sexual reoffense. <u>Id</u>. Dr. Lisota testified that the PCL-R has a standard of error of
measurement of plus or minus three points, and his score of thirty three would
create a potential low of thirty, which is deemed the cut off for psychopathy.
<u>Id</u>. at 23. Dr. Lisota testified that Mr. Hoff's score places him at greater risk
for sexual re-offense and the combination of his psychopathy and his
antisocial personality disorder indicates a high degree of risk. <u>Id</u>. at 24, 37.

Dr. Riedel's score on the PCL-R is not reliable in this case. Dr. Riedel previously scored Mr. Hoff in 2009 on the PCL-R at a thirty. However, in his current evaluation he testified he now found Mr. Hoff had a score of 27. <u>Id.</u> at 42, 112. Dr. Riedel based this change in scoring on a change of information, however, when presented with the question of what information deemed the change, Dr. Riedel was unable to specifically indicate to the court what information he relied upon in coming to this conclusion. <u>Id.</u> at 119-120.

Dr. Lisota also testified regarding dynamic risk factors to show what an individual's short term risk for sexual re-offense. <u>Id</u>. at 24-25. Dr. Lisota did not find anything in the dynamic risk factors that would lead him to conclude Mr. Hoff no longer was at a high risk for sexual re-offense. <u>Id</u>. at 25. Clear and convincing evidence had been presented to the court to find Mr. Hoff would likely engage in future acts of sexually predatory conduct.

D. Clear and convincing evidence was presented to the court to find Mr.
 Hoff has serious difficulty controlling his behavior.

Mr. Hoff has serious difficulty controlling his behavior and clear and

We have further explained that a diagnosis of antisocial personality disorder alone does not establish a nexus between the requisite disorder and future dangerousness. Interest of J.M., at ¶ 10. Rather, the evidence presented by the State must clearly show the antisocial personality disorder is likely to manifest itself in a serious difficulty in controlling one's behavior. Id. Neither Kansas v. Crane nor our case law, however, require the conduct evidencing the individual's serious difficulty in controlling his behavior to be sexual in nature. See Crane, 534 U.S. at 412–13, 122 S.Ct. 867 (holding the Constitution only requires proof of serious difficulty in controlling behavior); Matter of R.A.S., 2009 ND 101, ¶ 19, 766 N.W.2d 712 (explaining that in order to continue an individual's commitment, North Dakota's statute does not require proof of conduct sexual in nature after the individual's initial commitment).

convincing evidence was presented to support his continued commitment.

In re Wolff, 2011 ND 76, ¶ 7, 796 N.W.2d 644.

In this case, Dr. Lisota testified that Mr. Hoff would have serious difficulty controlling his behavior if he were discharged. Tr. p. 25. Dr. Lisota based his decision on Mr. Hoff's legal history, which he testified was quite extensive, and Mr. Hoff's lack of progress in treatment to date, including his excessive number of behavior warnings. <u>Id.</u> at 26. Specifically, Dr. Lisota testified that Mr. Hoff ended his year in treatment where he started as he went up one stage and then went down a stage. <u>Id.</u> Specifically, Dr. Lisota found Mr. Hoff's use of sarcasm to be problematic along with Mr. Hoff's defensiveness. <u>Id.</u> Mr. Hoff is defensive and tries to stay under the radar in group by remaining silent, and Mr. Hoff continues to show he is impulsive. <u>Id.</u> Further, Dr. Lisota cited altercations with peers or staff as Mr. Hoff does not receive feedback very well and Mr. Hoff has problems participating in

group. <u>Id</u>. at 26-27. Mr. Hoff has specifically stated "he'll probably re-offend sexually, or sarcastically, in 30 days post discharge. he is a sex addict. If I get a taste, I want more and more." <u>Id</u>. at 28. Dr. Riedel even testified in his direct exam that he was concerned that Mr. Hoff "relates to a rapist's profile" and Mr. Hoff's high relationship to "antisocial personality disorder profile and to borderline personality disorder profile." <u>Id</u>. at 86. Dr. Riedel admitted that Mr. Hoff has not changed his ability to follow rules at the State Hospital and get through their programming. <u>Id</u>. at 134.

Dr. Lisota testified that Mr. Hoff demonstrates serious difficulty controlling his behavior and it would be worse in a less restrictive environment than the State Hospital. <u>Id</u>. Dr. Lisota recommended the court return Mr. Hoff to the care and custody of DHS as a sexually dangerous individual. <u>Id</u>. at 29.

Where the experts disagree, the court's discretion in this case should be given deference by this Court. "We have further explained that a choice between two permissible views of the weight of the evidence is not clearly erroneous." In re Wolff, 2011 ND 76, ¶ 14, 796 N.W.2d 644; citing Matter of A.M., 2010 ND 163, ¶ 21, 787 N.W.2d 752. Dr. Lisota's testimony supports the court's finding that Mr. Hoff continues to have serious difficulty controlling his behavior and is likely to re-offend if he is released to the community, therefore the court's decision in this regard should be affirmed. Id.

CONCLUSION Based upon the foregoing, the State requests that the District Court's decision be affirmed. Dated this day of September, 2012. Pamela A. Nesvig Assistant, Burleigh County State's Attorney Courthouse, 514 East Thayer Avenue Bismarck, North Dakota 58501 Phone No: (701) 222-6672 BAR ID No: 05980 Attorney for Petitioner-Appellee

IN THE SUPREME COURT	
IN THE SOTILEME COCK!	
STATE OF NORTH DAKOTA	
In the Matter of Robert R. Hoff	
Pamela A. Nesvig) Assistant State's Attorney)	
Assistant State's Attorney	
Petitioner-Appellee,)	
-vs-)	
Robert R. Hoff, Supreme Ct. No. 20120248	
Respondent-Appellant,)	
······································	
STATE OF NORTH DAKOTA)) ss	
COUNTY OF BURLEIGH)	
Gwen Tardif, being first duly sworn, depose and say that I am a U	nited
States citizen over 21 years old, and on the Alethay of September, 2012,	, I
deposited in a sealed envelope a true copy of the attached:	
 Brief of Petitioner-Appellee Affidavit of Mailing 	
in the United States mail at Bismarck, North Dakota, postage prepaid,	
addressed to:	
GREGORY I. RUNGE	
ATTORNEY AT LAW	
1983 E CAPITOL AVE BISMARCK ND 58501	
which address is the last known address of the addressee.	
1/ -	
Gwen Tardif	_
Subscribed and sworn to before me this 24 day of September, 2	012.
1. La	
DENISE COUTTS Notary Public Notary Public Burleigh County, North Dakota	