COURT OF APPEALS
DECISION
DATED AND FILED

September 2, 2026

Samuel A. Christensen
Clerk of Court of Appeals

Appeal Nos. 2025AP1309-CR
2025AP1310-CR

Cir. Ct. Nos. 2016CF1602
2016CF1038

STATE OF WISCONSIN **IN COURT OF APPEALS**
DISTRICT II

STATE OF WISCONSIN,

PLAINTIFF-RESPONDENT,

V.

DEONTE D. ANDERSON,

DEFENDANT-APPELLANT.

APPEALS from an order of the circuit court for Racine County: FAYE M. FLANCHER, Judge. *Affirmed*.

Before Lazar, P.J., Grogan, and LoCoco, JJ.

¶1 LOCOCO, J. We review the order denying Deonte D. Anderson's petition for conditional release from the Mendota Mental Health Institute. Though

Anderson has committed no violence in years, the circuit court thought him still too dangerous to the public. We uphold the order.

¶2 No one disputes Anderson's past brutality. At 17 he robbed a local at gunpoint, then while incarcerated cracked a correctional officer across the jaw. An examination indicating psychosis, mania, bipolar disorder, and schizophrenia meant the psychiatric hospital rather than prison for Anderson, for a term of 13 years.

¶3 A number of years—not yet 13—have passed. Treatment providers at Mendota conclude Anderson does not suffer from mental illness; he takes no medication and his behavior has markedly improved. So Anderson wants out. And by law, a court must grant that request—unless the court finds, by clear and convincing evidence, that Anderson "would pose a significant risk of bodily harm to himself ... or to others or of serious property damage if conditionally released." WIS. STAT. § 971.17(4)(d) (2023-24).[1]

¶4 The circuit court made this finding and denied Anderson's petition. The court relied in part on the professional judgment of a psychiatrist, who in turn noted that while Anderson has not engaged in any violence of late, he continues to break the rules at Mendota, argue with staff, and interact poorly with others. This doctor, Craig Schoenecker, suggested Anderson suffers from an antisocial personality disorder that, together with Anderson's own "volitional choices," drove Anderson's previous, more dangerous behaviors. Schoenecker opined that

[1] All references to the Wisconsin Statutes are to the 2023-24 version.

Anderson must better demonstrate an ability and willingness to behave at Mendota before release can occur.

¶5 On this appeal—an appeal limited to our assessment of whether sufficient evidence supports the circuit court's ruling, ***State v. Randall***, 2011 WI App 102, ¶13, 336 Wis. 2d 399, 802 N.W.2d 194—Anderson says the denial cannot be correct. For four years and counting at Mendota, Anderson has not harmed himself or others or damaged any property. How then could he pose a significant risk of doing so if conditionally released?

¶6 Anderson's argument ignores the necessarily predictive nature of the statutory risk assessment. WISCONSIN STAT. § 971.17(4)(d) does not ask about Anderson's dangerousness in the tightly controlled setting of a psychiatric hospital but, rather, out in the community, where potential triggers for violent behavior abound ("*would* pose ... *if* conditionally released"). Anderson's current behavioral instability at Mendota—his psychiatric assessment references "poor interpersonal boundaries," "provoking behaviors," "planful aggression," and a tendency to "push[ ] limits"—may well manifest itself more grievously, and with more grievous results, outside facility walls.

¶7 Or so Schoenecker determined. We are not medical doctors; we examine only for credible evidence supporting the circuit court's decision. The medical testimony in the record is credible. Indeed, aside from contending that Schoenecker's ultimate conclusion is illogical on its face—which contention we reject—Anderson identifies no reason for treating Schoenecker's medical testimony as incredible. He does not challenge Schoenecker's qualifications (board certification as a psychiatrist), experience (several hundreds of conditional release evaluations), or methods (review of Anderson's treatment records and

prior conditional release evaluations plus a personal interview of Anderson). Schoenecker even hinted that his assessment might change should Anderson secure transfer to a minimum-security treatment unit, which, Schoenecker says, more closely approximates release into the community. Anderson's misbehavior has kept him in medium or higher, so we need not inquire into this possibility.

¶8 That principal question settled, Anderson's appeal of the circuit court's decision must fail. Anderson offers some limited spin on how non-exhaustive factors enumerated in WIS. STAT. § 971.17(4)(d), which the circuit court "may" consider, favor his release. He argues, for instance, that "his index offenses were aberrant behavior committed by an impulsive juvenile." But all this is (and was) argument for the circuit court. The circuit court heard from Anderson and his psychiatric evaluator directly. It holds the prerogative to assess their credibility and choose among competing views of the evidence. Our review, in contrast, ends once we locate sufficient record evidence supporting the circuit court's ruling that Anderson posed too great a risk to the public to permit his release. *See* ***Randall***, 336 Wis. 2d 399, ¶¶13-14. The evidence in this case more than suffices, including Anderson's violent history, which continued into his commitment; his current behavioral problems in a medium-security unit; his ongoing mental health issues, which have contributed to his misconduct; and a board-certified psychiatrist's professional opinion as to Anderson's treatment needs and the danger Anderson presents to the community.

¶9 Anderson has one final complaint. At the hearing on Anderson's release Schoenecker expressed his opinion that Anderson would "potentially pose a risk for harm to himself or others or of property damage." This does not track the terms of WIS. STAT. § 971.17(4)(d), which speak of an actual, significant risk and serious property damage. But the poor phrasing does not doom the circuit

court's order. Schoenecker testified as to his intent to share the opinion in his report, which properly stated the standard. He again demonstrated his understanding of the statutory test when Anderson questioned him about it on cross-examination. This evidence justifies the circuit court's inference that Schoenecker knew what he was talking about.

By the Court.—Order affirmed.

Not recommended for publication in the official reports.