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S.C. SUPREME COURT

STATE OF SOUTH CAROLINA
IN THE SUPREME COURT

APPEAL FROM GREENVILLE COUNTY
Court of Common Pleas
Honorable Grace G. Knie, Circuit Court Judge

Appellate Case No. 2026-001205

JOHN RICHARD WOOD,..... RESPONDENT,

v.

STATE OF SOUTH CAROLINA,..... PETITIONER.

APPENDIX

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INDEX

ORDER GRANTING RELIEF DATED APRIL 27, 2026	1
TRANSCRIPT OF RECORD DATED MARCH 24, 2026	13
POST-CONVICTION RELIEF APPLICATION.....	122
RETURN TO POST-CONVICTION RELIEF APPLICATION	130
ORDER FOR COMPETENCY TO BE EXECUTED EVALUATION PURSUANT TO <i>SINGLETON V. STATE</i> DATED MARCH 10, 2025	143
MOTION FOR ADDITIONAL INTERVIEW DATED SEPTEMBER 9, 2025	148
ORDER DENYING MOTION FOR ADDITIONAL INTERVIEW DATED OCTOBER 1, 2025	157
RESPONDENT’S PRE-TRIAL BRIEF DATED MARCH 20, 2026	162
APPLICANT’S PRE-TRIAL BRIEF	168
STATE’S <i>PROPOSED</i> ORDER FINDING APPLICANT NOT COMPETENT TO BE EXECUTED, AND PROVIDING PROCEDURES FOR LITIGATION	178
APPLICANT’S <i>PROPOSED</i> ORDER GRANTING RELIEF.....	190

The following exhibits were received at the evidentiary hearing. The Clerk of Court has marked All the listed exhibits as sealed by the lower court. Therefore, these exhibits will be transported For the Court’s consideration:

APPLICANT'S EXHIBITS

Dr. Salas's CV
Dr. Salas's report
Dr. Knight's CV
Dr. Knight's report

RESPONDENT'S EXHIBITS

Dr. Gaskins's CV
Dr. Gaskins's report

STATE OF SOUTH CAROLINA	)	IN THE COURT OF COMMON PLEAS
COUNTY OF GREENVILLE	)	FOR THE THIRTEENTH JUDICIAL CIRCUIT
	)	
John Richard Wood,	)	Case No. 2022-CP-23-06219
Applicant,	)	
	)	ORDER GRANTING RELIEF
vs.	)	
	)	
State of South Carolina,	)	ENTERED COMPUTER
Respondent.	)	

This matter comes before the Court on the capital post-conviction relief (hereinafter “PCR”) action of the Applicant, John Richard Wood, which challenges his competency to be executed pursuant to state and federal law. *See* U.S. Const. amend. VIII; S.C. Const. art. I, § 15; *Ford v. Wainwright*, 477 U.S. 399 (1986); *Panetti v. Quarterman*, 551 U.S. 930 (2007); *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993). Present representing Applicant were Emily C. Paavola, Esq., and Allison Franz, Esq. Present representing the Respondent were Melody J. Brown, Esq., and R. Brandon Larrabee, Esq. Also present was L. Brie Rust, Esq., in her capacity as court appointed Guardian *ad litem* for Applicant. The hearing was conducted in person at the Spartanburg County Courthouse. Applicant’s presence was waived through Counsel for Applicant by his Guardian *ad litem*, L. Brie Rust, Esq. The Court Reporter was Alice M. Adler. At this evidentiary hearing on the merits the parties presented testimony and evidence for the Court’s consideration as follows: The testimony of Amanda B. Salas, M.D., of the Palmetto Center of Psychiatry, LLC; Susan C. Knight, Ph.D., ABPP, of Applied Psychological Services, LLC; and Matthew E. Gaskins, M.D., of Gaskins Psychiatry, LLC. Applicant presented Exhibits 1-4, the Curricula Vitae and Competency to Be Executed Evaluations of Dr. Salas and Dr. Knight. The Respondent presented Exhibits 1 and 2, the Curriculum Vitae and Competency to Be Executed Evaluation of Dr. Gaskins.

The Court hereby makes the following findings of fact and conclusions of law.

PROCEDURAL HISTORY

A. Pre-Hearing Procedural History

John Richard Wood (hereinafter “Wood”) was sentenced to death by a jury in the Greenville County Court of General Sessions for the murder of Trooper Eric Nicholson, a State Highway Patrol officer. He was tried and convicted in February of 2002. Wood’s convictions and death sentence were affirmed on direct review by the South Carolina Supreme Court. *State v. Wood*, 362 S.C. 135, 607 S.E.2d 57 (2004), *cert. denied*, 545 U.S. 1132 (2005). His applications for state post-conviction and federal habeas relief were denied. *See Wood v. Stirling*, 27 F.4th 269, 275, 280 (4th Cir. 2022). Having exhausted all avenues for collateral review, the question of Wood’s competency to be executed is now ripe. *See Stewart v. Martinez-Villareal*, 523 U.S. 637, 645 (1998) (stating a claim of incompetency to be executed is ripe when the defendant becomes eligible for an execution warrant); *Panetti v. Quarterman*, 551 U.S. at 946 (same); *Singleton v. State*, 313 S.C. at 87, 437 S.E.2d at 60 (same).

Since the date of his conviction, Wood has resided on death row within the South Carolina Department of Corrections (hereinafter “SCDC”). As noted by all three expert examiners, over the course of his now twenty-four-year incarceration, Wood’s SCDC records document a pervasive history of psychological deterioration. *See, e.g.*, Report of Dr. Salas (hereinafter “Applicant’s Ex. 2”) at 4 (noting “a chronic, persisting and active course of schizophrenia that has been present and progressively worsening over time.”); Report of Dr. Knight (hereinafter “Applicant’s Ex. 4”) at 1 (describing “a worsening of psychosis,” “repeated diagnoses of Schizophrenia,” and well-documented symptoms that “greatly impair rational and factual case comprehension, and preclude rational communication with his attorneys.”); Report of Dr. Gaskins (hereinafter “Respondent’s Ex. 2”) at 11 (“The records and his presentation confirm these symptoms have been present for

multiple decades.”); Id. at 13 (noting the “ample evidence to the genuineness of Mr. Wood’s mental health condition”).

Wood has been involuntarily committed to the Gilliam Psychiatric Hospital on four occasions over the past decade, following determinations by the Probate Court that he suffers from mental illness by clear and convincing evidence. S.C. Code Ann. § 44-17-580 (Supp. 2025). The probate court ultimately appointed L. Brie Rust, Esq., to act as Wood’s permanent legal guardian, finding by clear and convincing evidence that Wood is “incapacitated” within the meaning of S.C. Code Ann. § 62-5-101(13) (2022), because “his diagnosis impairs him such that he cannot meet the essential requirements for his physical health, safety, or self-care, or manage his property or financial affairs, or provide support.” Order Appointing Permanent Guardian (March 4, 2025). Counsel for Wood filed a PCR application raising a competency-to-be-executed claim on October 31, 2022.

On November 11, 2022, the South Carolina Supreme Court assigned this matter to this Court for a determination on the merits. In its Return, the State asserted that “this Court should order the S.C. Department of Mental Health (hereinafter “DMH”) to conduct a *Singleton* competency evaluation.” Return at 10. After a brief stay pending the outcome of litigation regarding South Carolina’s methods of execution in *Owens v. Stirling*, 443 S.C. 246, 904 S.E.2d 580 (2024), *reh’g denied* (Aug. 16, 2024), this Court ultimately granted the State’s request and entered an order directing that such an evaluation be scheduled at any time after disclosure of Wood’s expert reports on May 1, 2025. Order For Competency to Be Executed Evaluation (March 10, 2025).

Wood produced his expert reports on the prescribed date. The DMH evaluation by Dr. Matthew E. Gaskins took place on June 18, 2025, and the parties received a copy of Dr. Gaskins’

report on July 7, 2025, which was forwarded to the Court. This Court denied the State's request for an order requiring Dr. Gaskins to conduct a second interview after 180 days of forced medication. *See* Order Denying Motion for Additional Interview (Sept. 23, 2025) at 2.

B. Post-Conviction Relief Evidentiary Hearing

This Court subsequently convened an evidentiary hearing in Spartanburg County on March 24–25, 2026. Both parties waived any venue requirements. A transport order was issued for Wood; however, Wood's permanent guardian, Attorney Rust, testified under oath that Wood did not understand the purpose of the proceedings and did not wish to be transported. Attorney Rust, in her capacity as Wood's Guardian *ad litem*, waived Wood's right to be present at the hearing.

The parties stipulated to the admission of reports from three forensic examiners: Dr. Amanda B. Salas, a forensic psychiatrist (Applicant's Exhibit 2), Dr. Susan C. Knight, a forensic psychologist (Applicant's Exhibit 4), and Dr. Matthew E. Gaskins, the DMH psychiatrist (Respondent's Exhibit 2). All three experts found that Wood was not competent to be executed.

APPLICABLE LAW

A. Competency Standard

The standard this Court must apply in determining Wood's competency claim is:

- (1) Whether he lacks the capacity to rationally and factually understand the nature of the proceedings, what he was tried for, the reasons for the punishment, or the nature of the punishment; and
- (2) Whether he lacks sufficient capacity or ability to rationally communicate with counsel.

Ford v. Wainwright, 477 U.S. 399 (1986); *Panetti v. Quarterman*, 551 U.S. 930, 946 (2007); *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993). Failure of either prong renders an individual incompetent to be executed. *Ford*, *Singleton*, and their progeny illuminate several additional principles that this Court must apply.

1. *A prisoner who possesses a delusional belief that he cannot be executed is not competent.*

In *Ford v. Wainwright*, the United States Supreme Court held that the Eighth Amendment forbids the execution of an incompetent prisoner. 477 U.S. 399 (1986). Alvin Bernard Ford was convicted of murder in 1974 and sentenced to death. At the time of his trial, there was “no suggestion that he was incompetent at the time of his offense, at trial, or at sentencing.” *Id.* at 401. However, after Ford went to prison, he began exhibiting “gradual changes in behavior,” eventually resulting in bizarre, persecutory delusions. For example, Ford believed people were tormenting him in prison and that his family members had been taken hostage. He also exhibited grandiose delusions that he had special powers, such as the authority to fire prison officials and the belief that he had appointed nine new justices to the Florida Supreme Court. *Id.* at 402. An expert examiner concluded that Ford “sincerely believed that he would not be executed because he owned the prisons and could control the Governor through mind waves.” *Id.* at 403.

The South Carolina Supreme Court addressed a similar situation in the case of Freddie Singleton, who had a delusional belief that he could not die because he possessed special powers. *Singleton v. State*, 313 S.C. at 84, 437 S.E.2d at 58. The Court concluded that Singleton was “incapable of meeting even a modicum of competency” because he was “completely unaware that he is capable of dying in the electric chair [due to] his reliance on protective ‘genes.’” *Id.*

2. *A prisoner who cannot rationally communicate with counsel is not competent.*

A “pivotal issue” in *Singleton* was whether the lower court erred in adopting the American Bar Association’s standard of incompetency, which included an “assistance prong” aimed at the ability to communicate with counsel. *Id.* at 79, 437 S.E.2d at 56. The South Carolina Supreme Court affirmed the PCR court’s decision to adopt a two-pronged test but concluded that the test should be “tempered with the rational communication element for the assistance prong.” *Id.* at 84,

437 S.E.2d at 58. The Court adopted a “slightly modified standard in South Carolina, which satisfies the mandates of federal due process, the common law, and the South Carolina Constitution.” *Id.* Thus, *Singleton* held that South Carolina’s two-pronged test for competency to be executed includes an “assistance prong,” defined as “whether the convicted defendant possesses sufficient capacity or ability to rationally communicate with counsel.” *Id.* Failure of either prong is sufficient for a finding of incompetency. *Id.* As *Singleton* was “incapable of rational communication” with his counsel, he did not meet the assistance prong. *Id.* at 90, 437 S.E. 2d at 61.

3. *Mere factual understanding is not enough for competency.*

In *Panetti v. Quarterman*, the Supreme Court held that *Ford* requires an inquiry into whether a prisoner possesses a *rational understanding* of the crime, the punishment, and the reason for the punishment (not mere awareness of those facts). 551 U.S. at 959. (“A prisoner’s awareness of the State’s rationale for an execution is not the same as a rational understanding of it.”). A prisoner’s mental state may become “so distorted by mental illness that his awareness of the crime and punishment has little or no relation to the understanding of those concepts shared by the community as a whole.” *Id.* Scott Panetti factually understood that he had been found guilty of murder, that he was facing execution, and that he would die if executed. However, he possessed a delusional belief that the stated reason for his execution was a “sham.” Panetti believed the State’s true motivation for his execution was to prevent him from preaching the Gospel. *Id.* at 955.

Panetti was ultimately found incompetent by the District Court for the Western District of Texas because he “lack[ed] a rational understanding of the connection between his offense and his sentence of death. His execution would therefore violate the Eighth Amendment’s prohibition on

cruel and unusual punishment.” *Panetti v. Lumpkin*, 2023 WL 6348877 (W.D. Texas Sept. 27, 2023).

The United States Supreme Court reiterated the importance of a rational understanding in *Madison v. Alabama*, which addressed the question of whether a prisoner could be incompetent to be executed because he suffered from dementia. 586 U.S. 265 (2019). The Court concluded that a rational understanding is what matters, explaining:

The standard has no interest in establishing any precise *cause*: Psychosis or dementia, delusions or overall cognitive decline are all the same under *Panetti*, so long as they produce the requisite lack of comprehension. . . . The *Panetti* standard concerns, once again, not the diagnosis of such illness, but a consequence—to wit, the prisoner’s inability to rationally understand his punishment.

Id. at 728.

B. Burden of Proof

Pursuant to *Singleton*, as in all post-conviction proceedings, the applicant bears the burden of proving his allegations by a preponderance of the evidence. 313 S.C. at 87, 437 S.E.2d at 60. A preponderance of the evidence means “‘proof which leads the trier of fact to find that the existence of the contested fact is more probable than its nonexistence.’” *State v. Grooms*, 343 S.C. 248, 254, n.5, 540 S.E.2d 99, 102, n.5 (2000) (quoting 2 McCormick on Evidence § 339, 5th ed. 1999)).

C. Remedy

Upon a finding by this Court that Wood is incompetent, *Singleton* specifies that “the appropriate remedy is to issue a temporary stay of execution pending a mandatory review by [the South Carolina Supreme Court]”. 313 S.C. at 87, 437 S.E.2d at 60. After the stay is affirmed by the South Carolina Supreme Court, the burden will shift to the State to move for a hearing if the

State believes it can show, by a preponderance of the evidence, that Wood is no longer incompetent. *Id.*

FINDINGS OF FACT AND CONCLUSIONS OF LAW

After consideration of the testimony and other evidence offered at the evidentiary hearing, this Court finds that Applicant is not competent to be executed. All three testifying experts concluded that Wood lacks competency to be executed and does not satisfy either prong of *Singleton*. Respondent's Ex. 2 (Report of Dr. Matthew E. Gaskins) at 11–12; Applicant's Ex. 4 (Report of Dr. Susan C. Knight) at 61–63; Applicant's Ex. 2 (Report of Dr. Amanda B. Salas) at 4. All three experts testified to Wood's longstanding history of schizophrenia and delusional beliefs, his belief that he will not die if he is executed, and his inability to rationally communicate with counsel.

A. Prong 1: Rational and Factual Understanding of the Nature of the Proceedings

All three experts found that Wood lacks both a rational and factual understanding of the nature of the proceedings of his case, what he was tried for, and the nature of his punishment. While Wood "is able to identify the charged capital offense, cite the correct date and county, and provide some factual case details," he expressed delusions surrounding his offense, including his belief that police officers were "trying to frame him for a brutal rape" and "shot him to prevent him from testifying to their alleged perjury," and that the trial judge and other courtroom personnel were agents of a delusional deity ("Kevin") and worked against him. Applicant's Ex. 4 at 61. He does not rationally understand that his death sentence is connected to his crime and instead believes that the State seeks to execute him "because Kevin is heavily involved in government." Applicant's Ex. 2 at 3.

Further, Wood's "beliefs pertain directly to understanding the nature of his punishment," Respondent's Ex. 2 at 11, of which he lacks a factual and rational understanding. "Mr. Wood does not believe there is any scenario in which he could be executed or die." Applicant's Ex. 4 at 62; *see also* Applicant's Ex. 2 at 3 ("Mr. Wood does not believe he can die."); Respondent's Ex. 2 at 11 (referencing Wood's belief that he is immortal and has "died three times on death row"). "Mr. Wood believes he has experienced many deaths from which he has been able to rise himself up before," and that he will be similarly resurrected if the State executes him. Applicant's Ex. 2 at 4. "In speaking of execution, he is able to identify a possible method as "lethal injection" but believes he is 'immune to all poisons,' which is a longstanding delusion noted repeatedly throughout his records." Applicant's Ex. 4 at 62. Dr. Gaskins further noted that "[i]n addition to citing his immortality . . . [Wood] made statements indicating that he believes his execution would not be attempted," including his belief that he had received a pardon from the Governor. Respondent's Ex. 2 at 12. Wood's delusions were consistent across multiple competency interviews, Applicant's Ex. 4 at 61, and Dr. Salas further testified that, in her professional opinion, it is unlikely that Wood can be restored to competency. Applicant's Ex. 2 at 4. "He appears to have an irrational understanding of his original conviction and does not appreciate the finality of his assigned punishment." Respondent's Ex. 2 at 12.

B. Prong 2: Capacity to Rationally Communicate with Counsel

All three experts found that Wood lacks the ability to rationally communicate with counsel. "[H]e is unable to rationally assist his attorneys, or rationally utilize their assistance, due to active psychosis. His delusional beliefs prevent accurate factual and rational consideration of his case, and prevent him from providing rational or potentially useful information to his attorneys which may aid their efforts." Wood "cannot rationally communicate" due to his "significantly

disorganized speech and grossly delusional state.” Applicant’s Ex. 4 at 63. Dr. Salas further noted that Wood’s “pronounced disorganization of thought and inability to rationally process information presented to him renders him unable to assist in rational communication with his legal team.” Applicant’s Ex. 2 at 4. “[H]e does not have the ability to engage in meaningful conversation[,] which impairs his ability to work with his counsel in a reality-based manner.” Respondent’s Ex. 2 at 12.

The Court finds all three experts credible and consequently finds that Wood (a) lacks both a rational and factual understanding of the nature of the proceedings, what he was tried for, the reasons for his punishment, and the nature of his punishment; and (b) lacks the capacity to rationally communicate with his counsel. *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993).

C. Respondent’s Request for Order Mandating Release of Wood’s Future Medical Records

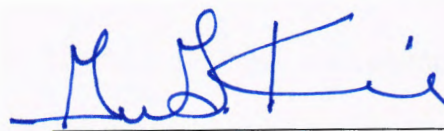
At the conclusion of the evidentiary hearing, Respondent requested that this Court order the SCDC to release Wood’s medical records to the State every six months and order GAL Rust to provide the State with copies of the mandatory guardian reports that she submits to the Probate Court regarding Wood’s plan of care. The Court finds no legal basis on which to grant these requests. However, GAL Rust informed the Court at the hearing that she will comply with any requests from the State in the future as to periodic updates on Wood’s mental status, which apparently is the procedure that has been followed in other South Carolina competency-to-be-executed proceedings.

For these reasons, this Court finds that Applicant is not competent to be executed, grants Applicant’s petition for post-conviction relief, and issues a temporary stay of execution pending review by the South Carolina Supreme Court.

IT IS THEREFORE ORDERED THAT:

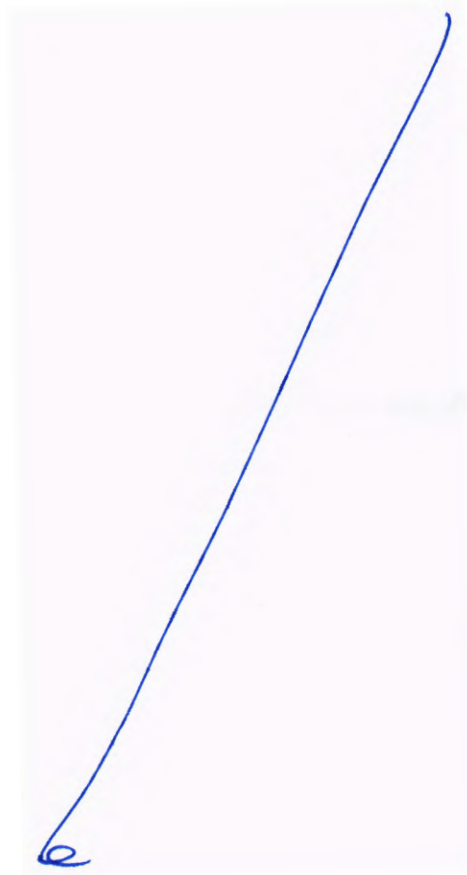
- (1) Applicant's petition for post-conviction relief is granted; and
- (2) Applicant's execution is temporarily stayed pending review by the South Carolina Supreme Court, for as long as Applicant is not competent to be executed.

IT IS SO ORDERED.



The Honorable Grace Gilchrist Knie
Presiding Judge

Date: April 22, 2026
Spartanburg, South Carolina





State of South Carolina
The Circuit Court of the Seventh Judicial Circuit

Grace Gilchrist Knie
Judge

180 Magnolia Street
Spartanburg, SC 29306
Phone: (864) 596-2285
Fax: (864) 562-4234
gkniej@sccourts.org

April 22, 2026
Via USPS

Greenville County Clerk of Court
Attn: Jan White
305 E. North St.
Greenville, SC 29601

Dear Madam Clerk:

Please see the attached Order on John Richard Wood v. State, 2022-CP-23-6219. Once you receive this Order and have clocked it in, please email me a copy for our records at gkniesc@sccourts.org.

Sincerely,

Ashley B. Searcy
Administrative Assistant to
The Honorable Grace G. Knie
S.C. Circuit Court Judge
7th Judicial Circuit

FILED: 26APR27PM12:09
COC JAY GRESHAM GUL SC

-----*

John Richard Wood Applicant *

 vs. *

State of South Carolina Respondent *

-----*

03\24\2026

BEFORE THE HONORABLE GRACE GILCHRIST KNIE, PRESIDING JUDGE

Emily C. Paavola, ESQ
Allison Franz, ESQ
Applicant

R. Brandon Larrabee,
Melody Jane Brown, ESQ
Respondent

Brie Rust, ESQ
Guardian for Mr. Wood

Alice M. Adler, CVR
Court Reporter

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5
6
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11
12
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22
23
24
25

INDEX

<u>WITNESSES</u>	Direct	Cross	Redirect	Recross
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FOR THE APPLICANT:

Amanda B. Salas, MD	15	38		
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Susan Knight	45	61		
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WITNESSES FOR THE RESPONDENT:

Matthew Gaskins	72	89	92	
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<u>EXHIBITS:</u>		Marked	Received
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APPLICANT'S EXHIBITS

Dr. Salas's CV			17
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Dr. Salas's report			21
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Dr. Knight's CV			46
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Dr. Knight's report			50
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RESPONDENT'S EXHIBITS

Dr. Gaskins's CV			77
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Dr. Gaskins's report			80
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1 (Exhibits were premarked prior to start of the
2 record.)

3 THE COURT: Okay. We are on the record in the
4 matter of John Richard Wood, applicant, versus the state of
5 South Carolina, respondent. This is civil action number
6 22-CP-23-6219. This is a capital PCR matter. I will ask
7 first for counsel to identify themselves for the record
8 beginning with counsel for the applicant.

9 MS. PAAVOLA: Good morning, Your Honor. I'm Emily
10 Paavola. I'm here on behalf of the applicant John Wood.

11 MS. FRANZ: And I'm Allison Franz, also
12 representing Mr. Wood.

13 THE COURT: Thank you.

14 MS. RUST: Good morning, I'm Brie Rust, Mr. Wood's
15 guardian.

16 THE COURT: Welcome, Ms. Rust.

17 MR. LARRABEE: Good morning, Judge. Brandon
18 Larrabee with the assistant attorney general.

19 MS. BROWN: Melody Brown for the State, Your
20 Honor.

21 THE COURT: Okay. Thank you. It's nice to see
22 you all in person. It's been a while in person and Mr.
23 Larrabee is now with us which is nice to see you. You've
24 moved from the Court of Appeals to this. Okay. So, I want
25 to take up some of the preliminary matters first and then I

1 will welcome y'all's comments about how we should proceed.
2 All right. Now we do have a court reporter here but we are
3 recording via WebEx which means that, of course, you all can
4 rise like you would normally but just remember that if we
5 can't hear you might have to direct your voice towards those
6 microphones.

7 Venue, of course, is proper in Greenville County.
8 I was appointed by the Supreme Court in 2022 to hear this
9 matter and at that time we were at a different courthouse on
10 this property and now we are in our new courthouse. So, I
11 need to make sure first that the applicant agrees for this
12 to be heard in Spartanburg today, waiving, because I think
13 the statute may even say that he has the right to be heard
14 in the county where he was convicted.

15 MS. PAAVOLA: Yes, Your Honor we have no problem
16 with the venue here today. My reading of the statute is
17 that the proceeding has to be filed in Greenville County but
18 you are welcome to hold court wherever you wish and that
19 happens quite often and we have no objection to appearing
20 here today.

21 THE COURT: Okay. Thank you and I just wanted to
22 make sure I didn't mess up right out of the box. Okay. Any
23 objections from the State?

24 MR. LARRABEE: No, your Honor.

25 THE COURT: Okay. And so the next matter, I know

1 that Mr. Wood was supposed to be with us and we corresponded
2 back and forth or communicated back and forth regarding
3 whether or not an order for transport or a letter would
4 suffice and I have been informed that he is not here and so
5 let me hear from counsel regarding that. Okay?

6 MS. PAAVOLA: Yes, Your Honor we received word
7 this morning from SCDC that Mr. Wood is refusing to leave
8 the cell. He doesn't wish to be here. That is a fairly
9 common occurrence with him in particular. I am not aware of
10 any rule in the statute that requires him to be present if
11 he doesn't wish to be and I believe his guardian, Ms. Rust,
12 is willing to waive any right that he might have to be
13 present here in person on the record today.

14 THE COURT: Okay. Before I direct questions to
15 you, Ms. Rust, let me hear from the State on their position
16 of proceeding without the applicant present.

17 MR. LARRABEE: Your Honor, we don't really have an
18 issue with that as long as the applicant is willing to
19 waive. We have sort of the same understanding, it's a civil
20 matter and his presence is not necessarily required if he
21 waives it, so.

22 THE COURT: Right and I know the statute provides
23 in a normal post-conviction relief hearing, and I know this
24 is the capital hearing but, that an applicant may be
25 required by the Court to appear. Of course, I have welcomed

1 Mr. Wood's presence at every aspect of the case but I
2 understood that just some of this was procedural,
3 administrative. I've communicated a lot with you all via
4 WebEx and via e-mail which I sincerely appreciate. It makes
5 it very efficient for me as well. But, so, I'm happy to
6 proceed without him if that is what you all believe is the
7 right thing for me to do. Right? Okay. So let me hear
8 from Ms. Rust and so I will ask our deputy clerk of court to
9 swear you in, ma'am, but you can stay where you are. Okay?

10 BRIE RUST, ESQUIRE, SWORN

11 THE COURT: Okay. And it may be my deputy may have
12 to move that mic a little closer for her.

13 MS. RUST: Okay. I can get around.

14 THE COURT: Okay. I don't want you to hurt
15 yourself. So, yes if you'd state your full name.

16 MS. RUST: Yes, Brie Rust. B-R-I-E R-U-S-T.

17 THE COURT: And Ms. Rust, you have been appointed
18 by the probate court to serve in the capacity of guardian ad
19 litem for Mr. Wood during the pendency of this action. Is
20 that correct?

21 MS. RUST: Yes, I have. It's a permanent order.

22 THE COURT: Okay. And if you will just if you can
23 respond to what we've already stated in the courtroom
24 regarding his appearance here today and whether or not you
25 are prepared to represent his interest as his guardian. I

1 know he has legal counsel present that can make legal
2 arguments on his behalf but are you prepared to go forward
3 in your capacity as guardian ad litem?

4 MS. RUST: Yes, ma'am. He does not wish to
5 appear. He does not have the capacity to really participate
6 in these actions so there's no reason to delay. He
7 frequently does not come out of his cell for any reason
8 other than to take a shower and I waive his rights to be
9 here and will appear on his behalf.

10 THE COURT: Where is he housed?

11 MS. RUST: Death row, Broad River.

12 THE COURT: At Broad River.

13 MS. RUST: Yes, ma'am.

14 THE COURT: And when would be the last time that
15 you attempted to communicate with him?

16 MS. RUST: Yesterday.

17 THE COURT: Okay. And was that successful?

18 MS. RUST: No, ma'am.

19 THE COURT: All right. Any other questions of Ms.
20 Rust with regard to that?

21 MR. LARRABEE: No, Your Honor.

22 MS. PAAVOLA: I don't have any questions for Ms.
23 Rust. I might add for Your Honor's information that SCDC
24 also tried to offer Mr. Wood the opportunity to participate
25 via WebEx. We did think there was maybe a greater

1 possibility that he would be willing to do that if he didn't
2 have to go very far and he has declined that request as well
3 or that opportunity.

4 THE COURT: Okay. All right. Well, thank you.
5 Thank you, Ms. Rust. And of course our witness stand is
6 here if there is going to be testimony from Ms. Rust later
7 in the proceeding, if y'all anticipate that. And then are
8 all other witnesses going to be appearing via WebEx?

9 MS. PAAVOLA: Yes. We intend to call two witnesses
10 today by WebEx and that's my understanding that will be all
11 of the testimony today.

12 THE COURT: Okay. All right. And I want to thank
13 y'all for your pretrial briefs. Y'all know that I welcome,
14 as I say, all the help I can get and so y'all are experts in
15 what you do and I sincerely appreciate your knowledge and
16 experience in helping me get ready. This has been a long
17 few years and I know that this is not the only matter that
18 you all are handling. I know y'all are very, very busy and
19 statewide.

20 So, I am happy for you all to first present an
21 opening statement if you want to. You're not required to
22 and I don't want to make you nervous by saying that and
23 don't feel that you are compelled to just because lawyers
24 always seem to never turn down an invitation to speak.
25 There's no jury here, it's just me and I'm very familiar

1 with the file. Okay. But if y'all want to give me just a
2 very brief overview of the experts. Y'all have already told
3 me who they are and told me what they're going to say but
4 the experts for the applicant and then tomorrow we're going
5 to have the expert, is it Dr. Gaskins, for the respondent.

6 MR. LARRABEE: Yes, Your Honor. Dr. Gaskins.

7 THE COURT: Okay. And so I am happy just to hear
8 very briefly that if y'all want to say that. Okay.

9 MS. PAAVOLA: Sure. As you know, Your Honor, this
10 is a competency to be executed proceeding. You will hear
11 testimony today from two expert witnesses. We intend to
12 call Dr. Amanda Salas. She is a psychiatrist and then we
13 will call Dr. Susan Knight. She is a psychologist. They
14 have both evaluated Mr. Wood many times. You'll hear about
15 their assessments of him. They are both going to testify
16 that their opinion is that he lacks capacity to be executed
17 under both of the Singleton prongs and then tomorrow I
18 believe you will hear testimony from Dr. Gaskins. According
19 to his report, he agrees with their opinion and that is the
20 only question for this Court to resolve.

21 THE COURT: Okay. Thank you. Yes.

22 MR. LARRABEE: Your Honor, as defense counsel or
23 as PCR counsel has said, there's not a great deal of dispute
24 over the competency of Mr. Wood; however, we did want to put
25 some things on the record for your consideration. Some of

1 that will be something we can discuss after Mr. Gaskins's
2 testimony tomorrow if you would like but he will largely
3 testify along the same lines as the applicant's experts.

4 THE COURT: Okay. And so just to put, I guess, a
5 fine point on it and you can be seated but you all both in
6 your pretrial briefs have laid out for me the law on this
7 issue. If I say anything you all disagree with, you let me
8 know but everyone that has evaluated Mr. Wood has said that
9 he is not competent to be executed. All right. Right?
10 That's so far. And that would be of course for the
11 applicant but also for the State. The law currently is that
12 this applicant cannot be medicated to make him competent to
13 be executed. Am I saying that correctly? I mean. Okay. And
14 so I just want to make sure that I'm saying it in y'all's
15 language. I understand that the law may be different for
16 someone that is not up for execution on death row, that
17 inmates can be medicated if they are a threat to themselves
18 or to others but in this instance because it would be to
19 make him competent to be executed, it is not in his best
20 medical interests. Right?

21 MS. PAAVOLA: Yes, Your Honor. We agree.

22 THE COURT: Okay. And right now as I understand it
23 in the Department of Corrections where he is housed, he is
24 not forcibly medicated and he is given the option to take
25 his medication?

1 MS. PAAVOLA: Yes.

2 THE COURT: And he takes it and doesn't take it, I
3 guess? Yeah. Okay. And so I understand that there have
4 been some requests made by the State that we're going to get
5 to a little later about being kept informed because this --
6 to be clear this would not be a hearing to change his
7 sentence. He has been sentenced to death but this can be
8 ongoing. This is an ongoing process that can continue to be
9 reevaluated. Right?

10 MS. PAAVOLA: I would not agree with that. I think
11 that's the topic that Mr. Larrabee is saying we will argue
12 after Dr. Gaskins's testimony but just by way of preview, I
13 think Singleton is clear that the remedy that this Court
14 should impose is a temporary stay of execution and then
15 Singleton provides that must be automatically reviewed by
16 the South Carolina Supreme Court and when that is affirmed,
17 then the burden will shift to the State to move for a
18 hearing if they later believe they can prove by a
19 preponderance of the evidence that Mr. Wood has been
20 restored to competency.

21 THE COURT: And you're stating, I think, basically
22 the last paragraph of your pretrial brief which I again so
23 appreciate and so I'm not trying to steal anyone's thunder,
24 I'm just trying to figure out where we're headed because
25 again I want to be as prepared as possible. So, yes

1 Mr. Larrabee.

2 MR. LARRABEE: Your Honor, first of all just to
3 clarify we do believe that Mr. Wood can be medicated if he
4 becomes a danger to himself or others or under those
5 standards. We concede he cannot be medicated to restore him
6 to competency so I just wanted to clarify that.

7 As far as the remedy, we do not disagree that it
8 is our responsibility to move for a hearing if we believe
9 that that is necessary later to reassess his competency.
10 All we are saying is that because of that and because of
11 SCDC's policy of not sharing medical records, it's going to
12 be necessary for us to periodically review those medical
13 records to see if there's a grounds for a hearing.

14 THE COURT: Okay.

15 MR. LARRABEE: And we don't think that that is
16 outside of the range of --

17 THE COURT: I saw that request in the brief.
18 Okay. So we'll just take that up as it comes. Okay. Okay.
19 And so the other question is, is it anticipated that there
20 would be testimony from the guardian ad item?

21 MS. PAAVOLA: We do not intend to offer any
22 testimony from Ms. Rust.

23 MR. LARRABEE: No, Your Honor.

24 THE COURT: Okay, well Ms. Rust I do appreciate
25 your being here.

1 MS. RUST: Yes, ma'am.

2 THE COURT: Okay. All right and so I do see that
3 the representative from the clerk of court for Greenville
4 County, Ms. White, is on as well which I appreciate and so I
5 see that Dr. Salas is on and so I'm happy for you all to
6 take this up if you're ready.

7 MS. PAAVOLA: Yes, ma'am.

8 THE COURT: If you all have anything you want to
9 go ahead and mark, then we could go ahead and have our court
10 reporter do that. It might make it a little easier for you.

11 MS. PAAVOLA: Yes, we've done that. Thank you.

12 THE COURT: All right. Y'all are way ahead of me.
13 Okay.

14 MS. FRANZ: Yes, ma'am. The applicant calls Dr.
15 Amanda Salas.

16 THE COURT: Okay. Dr. Salas can you hear us?

17 DR. SALAS: I can. Hold on, I thought y'all had
18 control of the video but apparently I do.

19 THE COURT: Okay. Good morning.

20 DR. SALAS: Good morning. Can you see me and hear
21 me?

22 THE COURT: Yes. Yes. Thank you and so Dr. Salas,
23 let me go ahead. I'm going to have our deputy clerk of
24 court place you under oath. All right.

25 DR. AMANDA SALAS, APPLICANT'S WITNESS, SWORN

1 THE COURT: Do y'all have a way of turning that
2 monitor on as well? It's not working. So if anyone is
3 trying to see and you can't, that monitor is on on the wall
4 over here as well. Okay. And are the monitors on on your
5 desktop, on your desk? Counsel? Okay. Everybody can see
6 and hear? Okay. All right and what about right in front of
7 you, ma'am?

8 MS. FRANZ: It looks like it's on. Dr. Salas can
9 you hear me?

10 THE WITNESS: I can. The screen is split. I need
11 a second to orient myself.

12 THE COURT: Let me see if I can change the layout,
13 maybe.

14 THE WITNESS: Okay.

15 THE COURT: I don't know if that will help. And
16 Counsel if at any point we lose Dr. Salas or she loses us, I
17 don't object to you all having your phones on to take that
18 call. Okay. All right. And so, you are Dr. Amanda Salas?

19 THE WITNESS: Yes.

20 THE COURT: And can you spell your last name for
21 the record please?

22 THE WITNESS: S-A-L-A-S.

23 THE COURT: And where are you currently? If you
24 can just tell me the city? Please.

25 THE WITNESS: Aiken, South Carolina at Aurora

1 Pavilion.

2 THE COURT: Okay thank you. Yes, ma'am.

3 DIRECT EXAMINATION

4 BY MS. FRANZ:

5 Q. Good morning, Dr. Salas.

6 A. Good morning.

7 Q. How are you currently employed?

8 A. I'm here today through employment with my private
9 company which is Palmetto Center Psychiatry but I have
10 numerous other jobs. Do you want me to outline those?

11 Q. If you could describe the education that you have
12 starting with college?

13 A. I went to Presbyterian College for my undergraduate
14 degree, then I went to USC School of Medicine for my medical
15 degree. I did three residency/fellowships which would have
16 been general psychiatry, child and adolescent psychiatry and
17 forensic psychiatry, and then achieved board certification
18 in each of those specialties; so I'm triple board certified
19 in general psychiatry, child and adolescent psychiatry and
20 forensic psychiatry.

21 Q. Okay. And what has your work experience been since you
22 received your MD?

23 A. I work a lot. I have done and do currently inpatient
24 care for children, adults, and geriatrics. I have done
25 inpatient care at a wide variety of facilities throughout

1 South Carolina and some in Georgia. I have done outpatient
2 treatment of children, adolescents, and adults as well as
3 outpatient consultations and then I've been doing forensic
4 psychiatry independent of what I would have done in my
5 training program since 2011, 2012, somewhere around there.

6 Q. And have you held any academic positions?

7 A. I have with MUSC at one point in time but I don't do
8 that anymore. It was a clinical academic position but that
9 has not been the focus but I have done it. Yes.

10 Q. And you may have said this already but do you hold any
11 professional licenses?

12 A. I do. I have a license to practice medicine in the
13 states of South Carolina and in Georgia.

14 Q. And are you a member of any professional societies?

15 A. Yes. American Medical Association, American
16 Psychiatric Association, the American Academy of Child and
17 Adolescent Psychiatry, the American Academy of Psychiatry
18 and the Law.

19 Q. Have you previously been qualified as an expert in
20 forensic psychiatry?

21 A. Yes.

22 Q. And I sent you some exhibits the other day over e-mail.
23 Would you be able to take a look at the one that's marked
24 applicant's Exhibit 1?

25 A. I think I saw that one last night but I don't have it

1 pulled up right now. That's my CV that I had looked at.

2 Q. Okay. And is that a current copy of your CV?

3 A. Yes.

4 Q. Okay.

5 MS. FRANZ: I have a pre-marked copy of this
6 marked as applicant's Exhibit 1 for the record and Judge
7 would you like a copy of that as well?

8 THE COURT: Yes, please. Counsel have you seen
9 this?

10 MR. LARRABEE: Yes.

11 THE COURT: Okay.

12 BY MS. FRANZ:

13 A. I have it up now.

14 Q. Okay. Thank you and does that appear to be an accurate
15 copy of your current CV?

16 A. Yes. That one I think most recently was generated the
17 end of last year, December.

18 Q. And, Your Honor, at this time we'd move applicant's
19 Exhibit 1 into evidence and we would ask that Dr. Salas be
20 qualified as an expert in forensic psychiatry.

21 THE COURT: First, any objection to applicant's
22 Exhibit 1 which is the CV for Amanda B Salas, MD?

23 MR. LARRABEE: No, Your Honor. No objection.

24 (Applicant's Exhibit 1 received in evidence)

25 THE COURT: Okay. And so applicant's Exhibit 1 is

1 in without objection. Now any objection to Dr. Salas being
2 qualified as an expert in the area of, you said, forensic
3 psychiatry?

4 MS. FRANZ: Yes, ma'am.

5 MR. LARRABEE: No, Your Honor.

6 THE COURT: Okay. And so is the State waiving
7 voir dire on that issue?

8 MR. LARRABEE: Yes, Your Honor. We don't need
9 voir dire.

10 THE COURT: Okay. Thank you. And so Dr. Amanda
11 Salas will be qualified as an expert in the area of forensic
12 psychiatry. Please continue.

13 BY MS. FRANZ:

14 Q. Dr. Salas, could you explain what you were asked to do
15 in Mr. Wood's case?

16 A. Yes. I was asked to evaluate his competence to be
17 executed.

18 Q. And when were you first retained in the case, do you
19 remember?

20 A. August 2022.

21 Q. Can you explain what a competency evaluation is and the
22 legal standard that you use to assess competency?

23 A. So it's a specific competency in terms of - I'm not
24 looking at someone's competence to stand trial or competence
25 to generate a will or anything like that. It's just

1 specific to: Do they have the understanding and can they
2 work with their attorneys on the process of the proceedings
3 related to a competence to be executed? So, there are two
4 different prongs. There's a cognitive prong and you need to
5 have not just a factual understanding of why you are
6 sentenced to execution and what the State is trying to do to
7 execute you - like what the State said you did, etc; the
8 factual details as to why you ended up in that situation but
9 you also have to have a rational understanding in order to
10 meet that cognitive prong so you have to be able to make
11 sense and logical reasoning as to why you're in the
12 situation that you're in. And then an assistance prong is
13 your ability to work with your attorneys to aid in your
14 process to represent your case at hearings such as this
15 today.

16 Q. Okay. And you mentioned the rationality aspect of the
17 cognitive prong. Does that include whether the inmate
18 understands that he will die if his execution is carried
19 out?

20 A. Correct.

21 Q. And what information did you rely on to conduct this
22 evaluation of Mr. Wood?

23 A. So, it was a sufficient, voluminous, if you will,
24 amount of information that's included on pages one, I think
25 yeah I was able to contain it to just that front page, but

1 separate from the records which included medical records
2 that have been produced in his SCDC file. Also there was
3 information that had been gathered by Dr. Knight that was
4 reviewed, conversation with ballistics, he wasn't ballistics
5 what was he, a neurologist who understood more about the
6 impact of lead and high lead volumes in the body and then
7 interviews -- an attempted interview with Mr. Wood himself
8 as well as participation in a probate hearing that was in
9 August of 2024.

10 Q. And how many times did you interview Mr. Wood?

11 A. Four times that he would speak to me, five times if you
12 count an attempted interview in which he refused to speak in
13 an interview.

14 Q. How much time would you estimate you've spent with Mr.
15 Wood over the course of conducting your evaluation?

16 A. Face-to-face with him it was at least six hours in
17 interviews and additional time in the probate court hearing.

18 Q. And did you diagnose Mr. Wood with any mental
19 illnesses?

20 A. Yes. He has schizophrenia.

21 Q. And did you reach a conclusion to a reasonable degree
22 of scientific certainty about Mr. Wood's competency to be
23 executed?

24 A. Yes.

25 Q. And what is that conclusion?

1 A. It's my professional medical opinion given a reasonable
2 degree of medical certainty that he is not competent to be
3 executed.

4 Q. And did you prepare a report summarizing your
5 conclusions in this case?

6 A. Yes.

7 Q. And if I could ask you to take a look at what's been
8 marked as applicant's Exhibit 2 in the e-mail that I sent
9 you?

10 A. Yes, I have that.

11 Q. And does that appear to be a copy of your report?

12 A. Yes, four pages total dated April 30, 2025.

13 Q. Thank you. Your Honor we have agreed with Counsel for
14 the State that the expert reports will be admitted so I
15 would move Dr. Salas' report into evidence based on
16 stipulation.

17 THE COURT: Okay. Any objection, Counsel?

18 MR. LARRABEE: No objection.

19 (Applicant's Exhibit 2 received into evidence)

20 THE COURT: So applicant's Exhibit No. 2 which is
21 the report or evaluation of Dr. Amanda B. Salas and it is
22 dated April 30, 2025. It is four pages in length, will come
23 in without objection. Has this already been marked?

24 MS. FRANZ: Yes, Your Honor.

25 THE COURT: Okay. Thank you. So this is my copy

1 to write on?

2 MS. FRANZ: Yes, ma'am.

3 THE COURT: Okay. Thank you very much.

4 BY MS. FRANZ:

5 Q. All right, Dr. Salas if we could get a bit more into
6 the specifics of Mr. Wood's case. You testified that you
7 diagnosed Mr. Wood with schizophrenia. Are there diagnostic
8 criteria for schizophrenia?

9 A. Yes.

10 Q. And what are those?

11 A. The DSM-5 outlines it but basically you have persisting
12 symptoms for over six months -- I'm sorry over one month
13 into six months, otherwise that one month, six month
14 criteria puts you in a different category of basically being
15 prodromal. He has over a decade of years of symptoms where
16 he has both positive symptoms which are delusions,
17 hallucinations, and negative symptoms which is his inability
18 to care for himself, his loss of engagement with others, not
19 having a lot of motivation, not having the organized speech.
20 He has symptoms that fit across-the-board that he clearly
21 meets diagnostic criteria even though it's been an evolution
22 over time in the SCDC records to see him through several
23 different diagnoses before he's consistently had this one
24 that has been with him for at least seven or eight years and
25 maybe even longer.

1 Q. Okay. And did you rely on the DSM-5 in making your
2 diagnosis?

3 A. Yes. DSM-5-TR and I have it with me today if we need
4 to reference it.

5 Q. Okay. Thank you and your report on page four
6 references neologisms. Could you explain what those are?

7 A. These are just made up words that nobody else would
8 understand and it's unique to psychosis that you just make
9 up some random word, you use it as if it has meaning but it
10 has meaning to nobody and nobody would really understand
11 what you're saying.

12 Q. And is that a symptom that you saw in Mr. Wood?

13 A. Yes.

14 Q. And if you could, would you be able to elaborate just a
15 bit more on the symptoms of schizophrenia that you observed
16 in Mr. Wood throughout your evaluation?

17 A. I will and for me to try to not be disorganized myself,
18 I will try to reference my report and supplement with some
19 of the notes that I have before me as well. And I'm looking
20 at page three. So Mr. Wood is very difficult to talk to in
21 any coherent sense because he doesn't have coherent
22 conversation. He uses words that he's made up. He has what
23 we call word salad where you think he's talking in a normal
24 sentence structure but he's not. He's putting real words
25 together that make no sense and then he's also got a very

1 elaborate delusional system that touches on delusions of
2 persecution, delusions of grandiosity. He's got a lot of
3 prophetic themes in what he's talking about and what's
4 interesting is that as elaborate and as disorganized of a
5 delusional system it is, he maintains the same thread of
6 disorganization, the same content of the delusional material
7 throughout the multiple times that I've interviewed him and
8 in reviewing both Dr. Knight and Dr. Gaskin's reports, he's
9 been consistent with the delusional material and the level
10 of disorganization present. And some of those same themes,
11 same ideas are present in the SCDC records that tell me this
12 is very real, very legitimate, not malingered system because
13 this is in his brain perseverating on it over and over and
14 over again.

15 Some of the things that Mr. Wood believes he has
16 shared with me is that he is 300-years-old and he cannot be
17 killed because he has immortality that was given to him when
18 he had something happen at age 15 and so he kind of
19 describes his age and experiences of immortality as he can
20 transform across time, almost like a time travel although
21 that's not what he said but it was how he related what he
22 was doing in ways that we are not capable of doing. It's
23 just not real and so that was really odd in terms of some of
24 the stuff that he explained.

25 He also believes that he has this very special

1 birthright. There is a battle that is going on. It
2 involves Beloved, Kevin, Rudolph. There are some other
3 people that sound like they are characters in this battle
4 and it's penetrated into the South Carolina Supreme Court
5 with Judge Kittredge who he has identified as part of this
6 battle of rights and legal things that are going on, that
7 have nothing to do with him and sometimes have something to
8 do with him but it all comes back to who's going to hold a
9 crown to rule the planet. And he can understand that Judge
10 Kittredge was the judge who was over his trial and he's
11 aware of like Judge Kittredge now having a position with the
12 State Supreme Court but he believes that Judge Kittredge is
13 there because of the character Kevin and the delusional
14 system and Kevin being lawless and putting Judge Kittredge
15 there to further the battle that is going on that Mr. Wood
16 is trying to win through his immortality and help Beloved
17 rule the planet. It is very elaborate. It is very
18 confusing. It's really hard to make sense of what he is
19 saying because none of it makes sense and that's just the
20 persistence and the well-developed nature of his delusional
21 systems that he has.

22 Let me see if -- oh this was, so one of the things
23 that would relate directly to his ability to be executed is
24 that Mr. Wood doesn't think he can be killed; he can't die.
25 He thinks that that he's been on death row several times.

1 He believes that he has a son that was on death row and that
2 he went over while in the Department of Corrections
3 custody -- Mr. Wood went over to Atlanta to get his son out
4 of death row which he did successfully because he has the
5 ability to pull a nuclei in his heart. When he does this
6 gesture and he can access that nuclei, he gets these wings
7 that come forth and then he can go back and forth to
8 different places and you and I wouldn't know it because he's
9 doing this as the superpower that he has.

10 He believes that there have been times that
11 current today while within the Department of South Carolina,
12 in their custody, that he has pulled on his nuclei, made his
13 wings come forth, believes that he has faced execution, used
14 these wings and survived execution. He believes things that
15 you can see and find in the record and he shared this with
16 me as well but he has an uncle who has planted bombs all
17 throughout Columbia. Many times when you talk with him
18 he'll reference these bombs and that they're getting ready
19 to go off by 5 o'clock tonight on whatever the night is that
20 you're interviewing him and of course it's not happening
21 because it's not real. But it's all part of this prophetic
22 event that Behold and Kevin have going on and the
23 immortality that Mr. Wood has been given in order to be able
24 to win the crown and rule the planet. And the more I talk,
25 the more crazy I feel in saying these things but these are

1 not my thoughts, these are the thoughts that he has and it's
2 just really hard to articulate the insanity of his
3 presentation because it's that disorganized.

4 Q. So do all of those symptoms and the delusions that you
5 discussed impact Mr. Wood's capacity under the cognitive
6 prong of Singleton?

7 A. Absolutely. They significantly interfere with whatever
8 rational -- I'm sorry whatever factual component you might
9 get out of him. There is no rational explanation for how it
10 is applied.

11 Q. And does Mr. Wood have a rational understanding of the
12 reason for his punishment as well?

13 A. No. He does not.

14 Q. And to the second prong of Singleton, you testified
15 that the second prong relates to the inmate's ability to
16 consult with counsel. Does Mr. Wood satisfy this prong?

17 A. No. Not at all. He doesn't see a need for counsel.
18 He doesn't know what you would be able to do to assist him.
19 He has everything figured out in his delusional system and
20 there is no attorney representation that he needs because he
21 has Behold on his side and he's getting these prophecies
22 fulfilled through avenues that are just not real. And so
23 when you try to interact with him, he's very dismissive and
24 he can't give any rational information because he's
25 articulating more about what is going on with this realm

1 that has nothing to do about nothing.

2 Q. And just to be clear you testified, were his delusional
3 symptoms consistent between your interviews?

4 A. They were.

5 Q. And can you explain Mr. Wood's prognosis? Do symptoms
6 of schizophrenia typically improve over time?

7 A. They don't. There are certain times where they can but
8 the general pattern of schizophrenia when you're talking
9 about the decades of records that we have, there are at
10 least two decades of records for him just within SCDC. It's
11 almost like someone's had a stroke and each time you have
12 another stroke, which would be another exacerbation of your
13 illness, there's a harder and harder time that you go
14 through trying to recover your previous baseline level of
15 functioning so if you had identified schizophrenia and
16 treated him and maintained him on medications 20 years ago,
17 then maybe if he had continued on that treatment and didn't
18 have other factors that come into play for him such as the
19 elevated blood levels, you might have been able to maintain
20 some level of cognitive abilities and rational thinking that
21 he has lost over time as he's become worse and worse in his
22 illness. This for him has just become a progressive decline
23 that follows a steady course that is typical of
24 schizophrenia. His case is further complicated by the
25 amount of lead that he has in his system that is a poison.

1 It really is -- like lead in your system in your blood is
2 not a good thing.

3 MR. LARRABEE: Objection, Your Honor. The lead
4 issue has not really been something that's come up in this
5 litigation. It's not really the claim as far as the basis
6 of Mr. Wood's incompetency to be executed so we would object
7 to evidence about the lead.

8 THE COURT: Counsel.

9 MS. FRANZ: I think it's something that Dr. Salas
10 reviewed from Mr. Wood's SCDC records and something that she
11 relied on in forming her opinion.

12 THE COURT: And is this mentioned in her report?

13 BY MS. FRANZ:

14 Q. Dr. Salas, is the lead mentioned in your report?

15 A. I don't know if I mentioned it in here or not. Let me
16 look and see. I don't think I did mention it.

17 THE COURT: Is it something that the State had
18 knowledge of?

19 MR. LARRABEE: We are aware that it has been
20 reported that yes, that there's lead issues.

21 THE COURT: Okay. I will allow her to go into it
22 but if it's not in the report it's not part of this Exhibit.
23 Okay. And I will allow you to question her at length about
24 it if you feel it necessary as well. That would be
25 overruled at this time. Please continue.

1 BY MS. FRANZ:

2 Q. Dr. Salas, is there anything further you would like to
3 say about Mr. Wood's prognosis and the progression of his
4 mental illness?

5 A. He has a very poor prognosis and--

6 MR. LARRABEE: Objection again, Your Honor. This
7 is not really relevant. The issue here is what his
8 competence is at the current moment but not what it's going
9 to be in the future.

10 THE COURT: Okay and I understand that this might
11 be speculative but she's an expert and I'm going to hear her
12 position on it. That would be overruled at this time.
13 Please continue.

14 BY MS. FRANZ:

15 A. He has a very poor prognosis in terms of we don't have
16 sufficient medications or treatment options that are
17 expected to restore his ability to eliminate or target this
18 delusional system to reduce it to a level that it's not
19 going to impact his ability to think rational. Delusional
20 systems are very, very difficult, whether you have lead in
21 your system or not. They are very difficult to treat and
22 often times they persist so like in the inpatient setting,
23 now granted I'm not hospitalizing someone for 20 years and
24 treating them for 20 years, it's a much shorter duration of
25 7 to 10 or maybe 14 days. Delusions persist. Now that

1 patient with the delusional system still gets discharged,
2 they go out into the community. If they have an
3 exacerbation, the same patient comes back. The delusion is
4 more pronounced and it's impairing them on a different
5 level. That's the point that I would make with Mr. Wood, is
6 that this is a very pronounced very severe delusional
7 system. It touches directly on his rational capacity that
8 in my professional medical opinion renders him to lack the
9 capacity to fulfill the first prong that we're talking about
10 as well as the second prong.

11 Q. Now, do people with schizophrenia always know that they
12 are mentally ill?

13 A. No. Oftentimes they lack insight or flat out deny
14 their illness.

15 Q. And is that also a symptom that you saw in Mr. Wood?

16 A. Yes.

17 Q. Dr. Salas, did you review information about Mr. Wood's
18 medication status in his SCDC records?

19 A. Yes.

20 Q. And is Mr. Wood's sometimes not medicated and on other
21 occasions he is medicated?

22 A. That is correct.

23 Q. Can you explain?

24 A. That is typical of someone with schizophrenia to go
25 through and what he has had experience. He's been admitted

1 to inpatient treatment while in SCDC. They have provided
2 medications over his objections, treated him such that like
3 I was describing earlier he is discharged from the
4 psychiatric hospital with the delusional system persisting
5 but the level of agitation and aggression that comes out
6 when he is floridly psychotic diminished so that he can be
7 maintained safer on death row without being as aggressive
8 towards others. But the delusions still persist. And that
9 happens whether he is on medication they persist; when he's
10 off medication it doesn't take as much effort to get him to
11 talk about the delusions and the delusions are much more
12 prominent, prevalent, probably equally well-developed and
13 they're unchanged in their content in terms of what he's
14 delusional about doesn't shift or change. It's the same
15 narrative over and over again, whether he's medicated or
16 whether he's not.

17 Q. And to be clear you testified you interviewed Mr. Wood
18 four times. Is that correct?

19 A. Yes, four times that he spoke to me.

20 Q. And he was medicated on certain occasions for those
21 interviews. Is that right?

22 A. Yes.

23 Q. Would you be able to explain your understanding of
24 Mr. Wood's medication status at each of the times that you
25 interviewed him?

1 A. So he was -- I'm sorry did someone say something?

2 Q. No, ma'am.

3 A. Okay. He was on no medication when I had my first
4 interview with him in February of 2023. Now, he wasn't
5 taking medicine but the most recent injection because he's
6 had long-acting injections that are designed to stay in his
7 system for several months at a time. I think it had been
8 like that previous June 2022 and so the Invega Trinza that
9 he was on is a three-month injection so there might have
10 been very low levels of medication that was still in his
11 system when I first met him.

12 And then March of 2023, his level of antipsychotic
13 would have been much less and then by October of 2023, I
14 would have expected him to be on no medications.

15 Then in July, August of 2024 he had a lot of
16 agitation. He had been aggressive with at least one of the
17 guards and that's when he refused to come and participate in
18 an interview. And then he went into Gilliam for treatment
19 again and improved with Risperdal which he was still taking
20 at least twice a day when I interviewed him in February of
21 2025.

22 Q. And did you reach any conclusions regarding whether
23 Mr. Wood's medication status has any impact on his ability
24 to meet the requirements of Singleton?

25 A. It's my professional medical opinion that even with the

1 treatment that has targeted his schizophrenia and lead to
2 improvements such that he can be discharged from Gilliam and
3 reintegrate into death-row, regardless of whether he's been
4 off of the medication or the times that I have seen him on
5 the medication receiving treatment, he's still not meeting
6 criteria according to the Singleton prongs.

7 Q. Okay. So was Mr. Wood competent under Singleton at any
8 point in which you evaluated him?

9 A. No. He was not.

10 Q. Did you consider whether Mr. Wood might be malingering
11 symptoms of mental illness?

12 A. Absolutely. I considered it and I do not find that his
13 symptoms attributed to schizophrenia are malingered.

14 Q. And can you just elaborate a bit on why you came to
15 that conclusion?

16 A. So, he has people that are observing him and charting
17 on him, writing documents consistently across the board and
18 in different avenues whether it's, you know, the SCDC record
19 itself or if it's his medical record and first off the word
20 salad and his complexity of the subtle symptoms that experts
21 look towards, he hits on that he has no basis to know that
22 these would be symptoms of mental illness. And he has those
23 very subtle symptoms. The complexity of his delusional
24 system is consistent over time, meaning the same thoughts
25 that he was having when he was off medication, the same

1 content that he's having when he's on medication, at
2 different points in time, this very elaborate delusional
3 system that I have a hard time replicating even with my
4 notes in front of me, is something that he just rattles off
5 because it's very real in his brain. He does it with me,
6 he's done it with the other experts that are scheduled to
7 testify and the content of those delusions as bizarre as it
8 is, is stable over time. He does get better when treatment
9 is provided. The delusions still persist but he gets calmer
10 and he's not as quick to talk about his delusions and he's
11 more likely to take a shower or attend to some level of his
12 personal hygiene which he will not do when he is off of the
13 medication the same way that he will when he's on it.

14 So what we see symptom wise is a very classic
15 pattern of what we would expect that even myself as an
16 expert, I don't think that I could sustain this ruse as a
17 ruse that would be malingered. This is something that
18 appears to be very genuine and unfeigned for the duration,
19 the nuance symptoms that he has, the pattern of response to
20 medication and exacerbations when off of medications and he
21 doesn't want to be mentally ill. He doesn't want anyone to
22 look at him as if he's mentally ill so although I get it
23 that you could feign mental illness so that you can get off
24 on a charge or not be executed, this is not the basis for
25 what he has going on. He thinks he's been executed. He

1 embraces execution. He looks forward to the times that he
2 can engage in these battles because he's immortal and when
3 you apply that immortality line of thinking you begin to
4 understand in his very distorted way why execution would be
5 something that he is not even afraid of.

6 Q. And in your professional opinion is it likely that Mr.
7 Wood can be restored to competency?

8 MR. LARRABEE: Objection, Your Honor. It's the
9 same thing. We don't believe it's relevant to his
10 current--the question is whether he's currently competent to
11 be executed.

12 THE COURT: Right, I understand that and I also
13 understand that this issue can be reevaluated in the future
14 and so I will allow it and I know that this is actually part
15 of the report at page four, I think it's the last sentence
16 so I'm happy for her to state that opinion on the record.
17 That would be overruled. Thank you.

18 BY MS. FRANZ:

19 Q. Dr. Salas, is it likely in your professional opinion
20 that Mr. Wood can be restored to competency?

21 A. No. I don't think that we have medications and
22 treatment interventions that would reduce his symptoms of
23 schizophrenia so that he could be competent.

24 MS. FRANZ: The Court's indulgence just a moment,
25 Your Honor?

1 THE COURT: Yes, ma'am. Take your time.

2 BY MS. FRANZ:

3 Q. Dr. Salas, just briefly can you explain whether Mr.
4 Wood has any delusions that relate to his crime?

5 A. He does. He believes that there was a pursuit because
6 somebody was trying to tag him with a rape charge that he
7 had nothing to do with and it had something to do with
8 having blue eyes, and blue eyes being of significance in his
9 delusional systems and he has blue eyes and that held some
10 level of significance to him as to what happened the day
11 that the officer was killed and he was charged with murder.

12 Q. And earlier you mentioned delusions of persecution,
13 would that be an example of one of those?

14 A. Yes.

15 Q. Okay. And does that also have an impact on his
16 capacity under the cognitive prong of Singleton?

17 A. It does. It is an impact in that that there is no
18 rational explanation for his understanding as to why he's
19 been convicted to death.

20 Q. Nothing further. Thank you, Dr. Salas.

21 THE COURT: Thank you. Cross-examination.

22 MR. LARRABEE: Yes, Your Honor.

23 CROSS-EXAMINATION

24 Q. Good morning, Dr. Salas.

25 A. Good morning.

1 Q. So when was the last time you spoke to Mr. Wood?

2 A. February 24th of 2025.

3 Q. Okay. And when we're talking about competency, that's
4 a current assessment. Right? I mean it can go up, it can
5 go down?

6 A. Yes. Competency can fluctuate in terms of the symptoms
7 but at the end of the day we talk about capacity, competency
8 would be the determination that the Court makes and it can
9 shift and change, yes. The terms of do you meet a threshold
10 or do you not meet a threshold.

11 Q. And there have been times that Mr. Wood has improved
12 according to the medical records. Is that correct?

13 A. Yes, there have been times where he's had less problems
14 created by his schizophrenia. Yes.

15 Q. Okay. When you were assessing him, you spoke about this
16 earlier, he was sometimes medicated. Correct?

17 A. Correct.

18 Q. And you were still able to find him incompetent.
19 Right?

20 A. Yes. It's my opinion that he lacks the capacity to be
21 executed.

22 Q. So, it's possible to -- is it possible for someone in
23 your field to compensate for the fact that they are
24 medicated when making the evaluation of competency?

25

1 A. Can you ask me that one more time? Can they
2 compensate--

3 Q. Would you be able to tell, for example does the
4 presence of medication make it impossible for you to
5 evaluate his competency or is that something that you're
6 able to take into account when you evaluate that?

7 A. So, for Mr. Wood there were times when I assessed him
8 and he was on medication and there have been times where
9 he's either had dropping levels of medication or been just
10 off of medication and regardless of the impact of medicine
11 in his system for the times that I have assessed him, it's
12 my opinion that he does not have the capacity to be
13 executed.

14 Q. Okay. You were involved in the guardianship
15 proceedings in this issue -- in this matter. Correct?

16 A. I did testify at the probate hearing. Yes.

17 Q. Yes. What is your understanding of why that
18 guardianship was pursued? Do you have any knowledge of
19 that?

20 A. That he was not able to make decisions for himself and
21 having a petition before the Court for him to be able to
22 make medical decisions on his behalf.

23 Q. How long -- he's been struggling with that before,
24 though. Hasn't he?

25 A. Yes.

1 Q. Do you have a timeframe -- I know you're working off
2 records but do you have a timeframe for how long he had been
3 in a state where maybe he couldn't handle his own affairs?

4 A. I can't narrow that down for you but I would expect
5 it's been a long time. There had been times before that
6 hearing that he had had forced medications administered to
7 him over his objection with multiple physicians having
8 evaluated him and giving opinions that he needed forced
9 medications.

10 Q. Okay but a guardianship was not pursued until 2024 from
11 your understanding?

12 A. That's my understanding. Yes.

13 Q. Okay. You talked about the importance of maintaining
14 medications and that's something that you need to do with a
15 patient who has schizophrenia to try to ease their symptoms.
16 Is that correct?

17 A. Yes. We encourage patients that are diagnosed with
18 schizophrenia to adhere with their treatment regimen so that
19 they have less risk of having a decompensation and getting
20 sick again.

21 Q. In your opinion is it medically appropriate to take a
22 patient off his/her treatments to see how bad their symptoms
23 are?

24 A. I would not recommend coming off of the medications
25 just to see how bad someone's symptoms are.

1 Q. In fact, it can have long-term negative consequences
2 can't it?

3 A. It's possible. Yes.

4 Q. Is that one of those events you were talking about,
5 sort of like a stroke that can, you know, exacerbate the
6 problem?

7 A. Correct.

8 Q. Okay. And when you spoke about Mr. Wood's
9 understanding of his crime and his punishment, I just wanted
10 to make sure I'm seeing something right on page three of
11 your report. It says "Mr. Wood believes South Carolina" --
12 about halfway through, "Mr. Wood believes South Carolina is
13 trying to kill him for shooting a police officer." Correct?

14 A. Correct.

15 Q. Okay. And when you were talking about his prognosis,
16 that's under current science. Is that correct?

17 A. Correct.

18 Q. So if future treatments were to come up that might
19 alter whether or not he was able to recover?

20 A. Right, like if we have a new medication that does
21 something that I wouldn't know about for today, then yes
22 there would be a possibility that we could improve. I'm not
23 aware of anything that we have in the pipelines but I'm open
24 to us being able to improve the treatments of schizophrenia.

25 Q. Okay. Court's indulgence for a moment, Your Honor?

1 THE COURT: Yes, take your time.

2 MR. LARRABEE: Nothing further, Your Honor. Thank
3 you.

4 Thank you, Dr Salas.

5 THE COURT: Thank you, Mr. Larrabee. Any
6 redirect--

7 MS. FRANZ: No, your Honor.

8 THE COURT -- for the applicant? And so all
9 exhibits that you all wish to have presented through this
10 witness, Dr. Amanda B. Salas, MD have been placed into
11 evidence before we let her go?

12 MS. FRANZ: Yes, ma'am.

13 THE COURT: Okay. Any objection to releasing Dr.
14 Salas?

15 MR. LARRABEE: Not from the State, Your Honor.

16 MS. PAAVOLA: No, Your Honor.

17 THE COURT: Okay and you all don't anticipate
18 needing her in reply tomorrow?

19 THE COURT: All right, thank you very much Dr.
20 Salas.

21 THE WITNESS: Am I excused officially?

22 THE COURT: Yes, ma'am.

23 THE WITNESS: Thank you.

24 THE COURT: Okay, all right, and so why don't we
25 do this? Let's take ten minutes and then we'll see if we're

1 ready for our next witness. All right? Okay. We'll be in
2 recess for ten minutes.

3 (Recess at 10:38 AM)

4 AFTER RECESS

5 THE COURT: Thank you all. Please be seated.
6 Okay. We are back on the record with the matter of John
7 Richard Wood versus the state of South Carolina. This is
8 civil action number 22-23-6219. This is the merits hearing
9 and we are still in the applicant's case. We have had
10 opening summations by counsel and one witness, Dr. Amanda
11 Salas. I will now again turn my attention to Counsel for
12 applicant. Yes.

13 MS. PAAVOLA: Your Honor, the applicant calls
14 Dr.Susan Knight.

15 THE COURT: Okay. Dr. Susan Knight. Dr. Knight,
16 can you hear me?

17 SUSAN KNIGHT: I can, yes Your Honor.

18 THE COURT: Okay. Good morning.

19 SUSAN KNIGHT: Good morning.

20 THE COURT: Let me have you sworn in by our deputy
21 clerk of court. Okay?

22 SUSAN KNIGHT: Yes.

23 SUSAN KNIGHT, APPLICANT'S WITNESS, SWORN

24 THE COURT: And again, if you will please state
25 your full name, spelling your last for the record?

1 THE WITNESS: Susan Knight, K-N-I-G-H-T.

2 THE COURT: And Dr. Knight, where are you
3 physically? What town are you in?

4 THE WITNESS: I'm in Charleston.

5 THE COURT: Okay, all right. Well, welcome and I
6 am going to turn it over now to Ms. Paavola. Okay. Thank
7 you.

8 DIRECT EXAMINATION

9 BY MS. PAAVOLA:

10 Q. Yes, thank you. Good morning Dr. Knight.

11 A. Good morning.

12 Q. Can you see me?

13 A. I cannot see you but you are loud and clear.

14 THE COURT: I don't know how to fix that.

15 THE WITNESS: I can see the courtroom but you're
16 just small.

17 THE COURT: Would it be easier for you to do this
18 from counsel table?

19 MS. PAAVOLA: No, it's fine. I was just curious.
20 I wondered if she could hear and see me okay. It sounds like
21 you can hear me.

22 THE COURT: And I will, as I stated, with regard
23 to our first witness who was also appearing via WebEx, I'm
24 allowing counsel to have their cell phones on in the
25 courtroom and if you cannot see or hear Dr. Knight you can

1 call them and we will get that remedied as quickly as
2 possible. Okay?

3 THE WITNESS: Yes, Your Honor. Thank you.

4 THE COURT: Okay. All right. Yes, ma'am. Please
5 continue. This would be direct examination.

6 DIRECT EXAMINATION

7 BY MS. PAAVOLA:

8 Q. Dr. Knight, what is your current occupation?

9 A. I'm a clinical forensic psychologist.

10 Q. And earlier we sent to you via e-mail two exhibits
11 marked Exhibit 3 and 4. Are you able to access those and
12 open them on your computer?

13 A. I did access and open them when they were sent to me
14 yesterday. Yes.

15 Q. So, if you could take a look at what has been marked as
16 applicant's Exhibit No.3. Can you let us know if you
17 recognize that document?

18 A. Is that my CV?

19 Q. It is.

20 A. Yes and I looked at that yesterday. That is the most
21 current copy of my CV.

22 MS. PAAVOLA: And Your Honor I previously provided
23 a copy of this Exhibit to counsel for the State.

24 BY MS. PAAVOLA:

25 Q. Dr. Knight, does this copy of your CV describe your

1 educational history, your prior experience, and your board
2 certification among other things?

3 A. Yes, it does.

4 MS. PAAVOLA: Your Honor, we would move to admit
5 Exhibit 3 please.

6 THE COURT: Any objection?

7 MR. LARRABEE: No objection, Your Honor.

8 THE COURT: Okay. And so applicant's Exhibit No.
9 3 which is the educational history and professional
10 experience, licensure, and certification of Dr. Susan C.
11 Knight is going to be admitted without objection. Thank
12 you.

13 (Applicant's Exhibit 3 received into evidence)
14 BY MS. PAAVOLA:

15 Q. Dr. Knight have you previously been qualified as an
16 expert witness in court?

17 A. Yes.

18 Q. Could you tell the Court what prior experience you have
19 with competency evaluations and specifically the topic of
20 competency to be executed?

21 A. Yes. Since 2011 I've taught a competency to be executed
22 class at the Charleston School of Law where I've been
23 adjunct faculty since 2011. It's part of a broader
24 psychiatry and law seminar that I teach. Since 2015 I have
25 served as adjunct faculty at Cornell Law School in the

1 Capital Case Clinic, so all kinds of capital issues come up
2 including capacity to be executed. I have conducted
3 hundreds of competency to stand trial evaluations which
4 evaluate similar legal prongs and I have been involved in a
5 prior case of evaluating an individual's capacity to be
6 executed.

7 MS. PAAVOLA: Your Honor, we would ask that Dr.
8 Knight be qualified as an expert in forensic psychology.

9 THE COURT: Any objection?

10 MR. LARRABEE: No objections, Your Honor and no
11 voir dire.

12 THE COURT: Okay, all right. Thank you and so Dr.
13 Susan C. Knight is qualified as an expert witness to testify
14 in the area of forensic psychology that is without objection
15 and voir dire on that issue is waived. Thank you. Please
16 continue.

17 BY MS. PAAVOLA:

18 Q. Dr. Knight what were you asked to do in this case?

19 A. I was asked to evaluate Mr. Wood's capacity to be
20 executed.

21 Q. And what legal standard did you use for that
22 assessment?

23 A. I used the Singleton standard from Singleton v State
24 looking at the cognitive prong - does Mr. Wood understand
25 the nature of the proceedings, what he was tried for, the

1 nature of the punishment, the reason for the punishment -
2 and then also the assistance prong, evaluating whether
3 Mr. Wood has the sufficient capacity to rationally
4 communicate with his counsel.

5 Q. And does the cognitive prong require that the defendant
6 have a rational and factual understanding of his conviction
7 and sentence?

8 A. Yes. Singleton was later informed by Panetti which the
9 holding in Panetti requires a rational understanding not
10 just a factual understanding.

11 Q. I know you relied on a lot of information to conduct
12 your assessment. Could you list for us just the general,
13 the broad categories of information that you relied on?

14 A. Sure. I evaluated -- clinically evaluated Mr. Wood
15 multiple times from 2013 to 2017. I conducted two formal
16 competency to stand -- I'm sorry capacity to be executed
17 evaluations with Mr. Wood in 2025. I reviewed as, Dr. Salas
18 said, voluminous records in this case: psychiatric records,
19 medical records from over 24 years in SCDC, as well as legal
20 records and psychosocial records. I conducted collateral
21 interviews and I conducted professional consultations in
22 this case.

23 Q. And you mentioned clinical evaluations prior to 2025,
24 what was your role in Mr. Wood's case at that time?

25 A. I was approached by Mr. Wood's counsel maybe 2012, 2013

1 to assist in assessing his mental state during federal
2 habeas proceedings. Once I saw Mr. Wood, that quickly
3 turned to issues of case comprehension and comprehension of
4 the penalty in his case given his expressed delusions at
5 that time.

6 Q. And ultimately did you recommend that Mr. Wood be
7 formally evaluated for capacity to be executed?

8 A. Yes.

9 Q. And that was based on your observations or assessment
10 during those previous clinical evaluations?

11 A. Yes.

12 Q. You listed general categories of information that you
13 relied on. Are the specifics of those listed in detail in
14 your written report?

15 A. Yes.

16 Q. If you could take a look at what we e-mailed to you and
17 marked as applicant's Exhibit No. 4 and let us know if you
18 recognize that please?

19 A. Yes, that is my capacity to be executed report.

20 MS. PAAVOLA: Your Honor, we would move that Dr.
21 Knight's report be admitted as applicant's Exhibit No. 4?

22 THE COURT: Any objection?

23 MR. LARRABEE: No objection, Your Honor.

24 THE COURT: Okay. Bear with me just one moment.

25 I have a document, it has been marked now for identification

1 and Exhibit without objection from respondent. This is the
2 competency to be evaluated or I'm sorry competency to be
3 executed evaluation by Dr. Knight. It is 71 pages in
4 length. I cannot tell from immediately looking at this
5 document the date that it was completed but I do see that
6 the last interview was April 15, 2025 and so this document
7 is in without objection. And this is my copy, Counsel?

8 (Applicant's Exhibit No. 4 received in evidence)

9 MS. PAAVOLA: Yes, Your Honor that copy is for
10 you.

11 THE COURT: Okay. And madam court reporter has
12 marked and it is in with her as well. Right?

13 MS. PAAVOLA: Yes.

14 THE COURT: Okay. Thank you.

15 BY MS. PAAVOLA:

16 Q. Dr. Knight since you prepared this report are there any
17 additional things that you've reviewed that are relevant to
18 your opinions in this case?

19 A. Yes. I've reviewed updated medical and psychiatric
20 records from SCDC, so that would have been from February of
21 '25 to February of '26. I reviewed Dr. Gaskins's capacity
22 to be executed report. I reviewed Dr. Salas's letter
23 addressing same and I reviewed some medical records where
24 Mr. Wood was taken to an outside hospital last year for a
25 medical issue and then yesterday I attempted an updated

1 clinical interview with Mr. Wood and capacity interview. I
2 was at death row yesterday attempting that; however, he
3 declined to leave his cell for that contact.

4 Q. Okay. And did you come to an opinion within a
5 reasonable degree of psychological certainty as to whether
6 Mr. Wood has capacity to be executed?

7 A. Yes. It's my opinion that he lacks capacity to be
8 executed. He fails both prongs of Singleton.

9 Q. And did you diagnose Mr. Wood with any mental illness
10 to a reasonable degree of psychological certainty?

11 A. Yes. He has schizophrenia.

12 Q. And I saw you were here earlier during Dr. Salas's
13 testimony so I don't want to belabor these points but you
14 heard her description of schizophrenia, its diagnostic
15 criteria, and the symptoms?

16 A. Correct. I did hear that.

17 Q. Was her description of Mr. Wood's presentation similar
18 to your experience in your clinical evaluations of him?

19 A. Yes.

20 Q. I'd like to talk now about the number of times that
21 you've evaluated Mr. Wood. Could you give us the specific
22 dates on which you evaluated him and also explain his
23 medication status at those times?

24 A. So I first saw Mr. Wood on June 17, 2013. The best I
25 can tell from the SCDC medical records is that he was likely

1 not medicated at that time. Medications had stopped in
2 2007. They were not restarted until February of 2014. So
3 in 2013 he was almost certainly not medicated. I attempted
4 to see him on July 5, 2013. The same logic would apply to
5 that interview. He was likely not medicated. I attempted
6 again on October 17, 2014. He did decline that interview.
7 His medication had been restarted in February of 2014 but
8 then records indicate he started refusing in June of 2014 so
9 he was likely not medicated during that attempt. I saw him
10 on October 29, 2014. He was likely not medicated for the
11 same reasons. I next saw Mr. Wood on January 13, 2016. He
12 was likely not medicated because the next month in February
13 of 2016 he was committed to Gilliam where medications were
14 restarted in February so he was likely not medicated in
15 January.

16 I saw him on December 6, 2017. SCDC records
17 indicate his Risperdal was no longer active so he was likely
18 not medicated during that interview. I next saw Mr. Wood on
19 February 11, 2025. At that interview he did self-report
20 that he was taking his Risperdal, his antipsychotic
21 medication, and SCDC medical records from that time do
22 support that he was medicated so he was likely medicated
23 during the February 11, 2025 interview. I saw him again on
24 April 15, 2025. He did report taking medication during that
25 interview and SCDC records support that he was likely on

1 medication for the April 2025 interview. During my attempt
2 yesterday, so that would be March 23, 2026, he was almost
3 certainly not medicated. Medications had stopped in May of
4 '25 according to his SCDC records.

5 Q. Okay. So to recap, including yesterday, you have
6 attempted to meet with Mr. Wood on three occasions when he
7 did not come out. Is that correct?

8 A. That's correct.

9 Q. And you have evaluated Mr. Wood in person six times?

10 A. That's correct.

11 Q. And of those six times that you have evaluated
12 Mr. Wood, as far as you can tell he was most likely
13 medicated the two times in 2025 that you saw him?

14 A. Yes.

15 Q. And both of those evaluations were formal competency
16 evaluations?

17 A. Correct.

18 Q. Was Mr. Wood's presentation consistent from 2013 to
19 2025 regardless of his medication status?

20 A. Yes, in the sense that he presents with the same set of
21 delusions. He exhibits and expresses the same delusional
22 system, whether he's medicated or not.

23 Q. And did you reach any conclusions regarding whether
24 Mr. Wood's medication status has any impact on his ability
25 to meet the requirements of Singleton?

1 A. Looking at his SCDC records, there is documentation
2 specifically from Dr. Ellis, who is his treating
3 psychologist on death row, that despite whether he's
4 medicated or not, Dr. Ellis does document that he is still
5 delusional. He remains delusional despite his medication
6 status and that was my experience with Mr. Wood during my
7 interviews. Whether he was medicated or not, he expresses
8 the same case related delusions and those are the delusions
9 that interfere with his capacity to be executed.

10 Q. And you looked at Mr. Wood's medical records from SCDC
11 from 2002 to present, can you tell us what you found most
12 significant about your review of that duration of the
13 record?

14 A. One would be the long-standing nature of the symptoms.
15 So Mr. Wood was admitted to SCDC in February of 2002,
16 several months later there is documentation on his
17 psychosis. Antipsychotic medication begins to be prescribed
18 around that time in 2002. He's noted to be deteriorating
19 from his psychosis and then that continues throughout the
20 record through to 2026. And so the long-standing nature of
21 his psychosis was important to me. This is not something
22 that just started. There's also a consistency of
23 documentation from providers over decades in the sense of
24 the psychosis and then the schizophrenia as a diagnosis has
25 been very consistent since 2016 to present, so for ten

1 years. And I think the other thing about his records, they
2 reflect four admissions to Gilliam Psychiatric Hospital.
3 These are involuntary admissions and they tell me about the
4 severity of his psychosis at the time that he requires
5 hospitalization at Gilliam.

6 Q. And you mentioned that there have been many times when
7 Mr. Wood is unmedicated. From your review of the record can
8 you determine, in general, the reason Mr. Wood has
9 historically not been medicated?

10 A. He will refuse medication or sometimes he will accept
11 medication but flush it down the toilet or something like
12 that and so there are various reasons but usually it
13 revolves around his refusal. In his earlier years, he was
14 taken off the mental health caseload for periods of time
15 before the symptoms became too severe and he was placed back
16 on the mental health caseload and medications were attempted
17 again. So it's been a back-and-forth throughout the records
18 with regards to his medication.

19 Q. And did you consult with any of the professionals
20 referenced in the SCDC records?

21 A. Yes.

22 Q. Can you tell us who you spoke to?

23 A. Sure. I spoke to two of his former clinical case
24 counselors from death row. One individual, Bruce Oberman,
25 had worked with Mr. Wood for years and then I spoke to a

1 more recent former counselor, Sarah Habersberger. I spoke
2 with his former treating psychiatrist at Gilliam Psychiatric
3 Hospital, Dr. Joshi, and then I spoke to his long-time
4 treating psychiatrist who is his treating psychiatrist now
5 on death row, Dr. Ellis. I attempted to speak with another
6 former treating psychiatrist from Gilliam, Dr. Mobley Bryant
7 but she declined the interview.

8 Q. And what, if any significance, did you draw from those
9 professional consultations?

10 A. Those individuals had had a lot of contact with
11 Mr. Wood over years and they were all very consistent in how
12 they described his symptoms and his presentation. That was
13 important to me and none of the four that I spoke with had
14 any concerns that his symptoms were not genuine.

15 Q. And did you consider whether Mr. Wood may be
16 malingered symptoms of mental illness?

17 A. Sure. That's important in any kind of forensic
18 evaluation to consider malingering.

19 Q. And did you reach an opinion within a reasonable degree
20 of psychological certainty regarding the issue of
21 malingering?

22 A. Yes, it's my opinion that Mr. Wood is not malingering
23 his symptoms. We have hundreds of pages of SCDC medical and
24 psychiatric records. There is no documentation that I've
25 seen in those many hundreds of pages about any sort of

1 malingering or exaggeration or fabrication or a suspicion of
2 and that was significant to me. He's been hospitalized four
3 times at Gilliam for months at a time. It's very difficult
4 to malingering in that kind of environment where someone is
5 being observed 24 hours a day by medical staff. It's very
6 difficult to keep it up if somebody is malingering. In
7 addition, forced medication orders have been sought for Mr.
8 Wood. Clinicians would not do that if they thought he was
9 malingering and then Mr. Wood himself will deny symptoms of
10 mental illness. He does not think he's mentally ill. He
11 does not think he needs psychiatric treatment. He may go
12 along with it at times but he doesn't report his symptoms as
13 consistent with mental illness. He doesn't believe that he's
14 mentally ill and that's the antithesis of malingering.
15 Malingering usually presents as exaggeration of symptoms and
16 Mr. Wood is doing the opposite.

17 And I think the last point on this is that he has
18 a particular kind of symptom that would be very difficult to
19 fabricate and that's disorganized speech. That's the
20 manifestation of the disorganized thought process in his
21 head so it'd be very, very difficult to fabricate your own
22 disorganized thought process and then have that manifest in
23 what we would be used to be hearing from people with
24 schizophrenia with this symptom. It would be nearly
25 impossible to do that and that's a prominent symptom that

1 Mr. Wood displays.

2 Q. Okay. Could you, just to summarize, could you explain
3 the basis for your opinion that Mr. Wood does not meet the
4 cognitive prong of the Singleton standard? Why does he not
5 meet that prong?

6 A. Sure. Mr. Wood can say that he was charged with murder
7 and convicted of murder and sentenced to death. He can say
8 that. He knows that that's what happened but he has this
9 highly complex intricate detailed long-standing delusional
10 system that sweeps away any reality from those facts for him
11 as applied to him. He believes his case originated when he
12 was charged with a rape. That the officers involved in this
13 case then committed perjury which instigated the set of
14 events of the murder case. None of that is true. Mr. Wood
15 has never been charged with a sexual offense. He believes
16 that his case also originated because of a bet or an
17 agreement between himself and a certain deity. There are
18 lots of deities in Mr. Wood's delusional system. He believes
19 the trial judge, the trial solicitor, the trial attorney are
20 all part of this system of deities working against him, not
21 only at the trial but they still conspire against him and
22 their sons and daughters which is quite extensive are also
23 conspiring against him.

24 So, he in other words, his case is much larger
25 than a murder case. It involves a cosmic battle of biblical

1 proportions essentially that he's in this battle with the
2 universe and with these deities that give him certain powers
3 and he believes his case will bring forth the judgment of
4 all judgments, the Passover, and when that occurs he will be
5 in his words "unleashed from SCDC or released" and this has
6 happened before with Mr. Wood because he believes he is
7 immortal and that's the most pertinent and salient delusion
8 when we evaluate his capacity to be executed is Mr. Wood has
9 the delusion of immortality so he cannot be executed because
10 he cannot die. He was given this immortality through a
11 covenant with a certain deity and he mentioned that in my
12 interview with him in 2013. That's a very long-standing
13 delusion that he has but it means that he cannot die. He
14 does not think he can die; he's hundreds of years old; he's
15 been killed before; he's resurrected; he's totally
16 unconcerned with his situation even when confronted with the
17 fact that several inmates on South Carolina's death row have
18 been executed in rapid succession over the last year or so.
19 Even when confronted with that information Mr. Wood is
20 totally unconcerned. He explains that by stating that these
21 inmates, these other inmates, did not have the same covenant
22 of immortality that he does so he's not worried about his
23 situation at all.

24 Q. And so does that relate to why does he not meet the
25 assistance prong?

1 A. With the assistance prong, Mr. Wood knows who his
2 attorneys are. He knows their role in what they're trying
3 to accomplish but it's inconsequential to him. He doesn't
4 need a legal team in his mind. He cannot be executed. He
5 often refuses to see his legal team because there's nothing
6 really to talk about. When he does meet with them he's
7 consumed by these case related delusions and that makes
8 rational conversation very difficult and then he has this
9 disorganized speech where you really cannot understand what
10 he's trying to say. Dr. Salas mentioned the neologisms that
11 come through during that speech and these are made up words.
12 They have no meaning for you or I. They do mean something
13 to Mr. Wood but we don't know what they mean so he's really
14 incapable of rational communication with counsel.

15 Q. And when you attempted to see Mr. Wood yesterday, was I
16 there and Ms. Franz as well?

17 A. Correct.

18 Q. And it was your understanding that Mr. Wood was told
19 his attorneys were there to meet with him about this
20 hearing?

21 A. Yes.

22 Q. And he didn't agree to speak with anybody. Is that
23 right?

24 A. He was not interested in leaving his cell to meet with
25 his attorneys, to meet with me to discuss this hearing.

1 This all does not really matter to him because he cannot be
2 executed.

3 Q. One moment, Your Honor.

4 THE COURT: Yes, ma'am. Take your time.

5 MS. PAAVOLA: I have no further questions. Thank
6 you.

7 THE COURT: Cross examination.

8 CROSS-EXAMINATION

9 BY MR. LARRABEE:

10 Q. May it please the Court? Good morning, Dr. Knight.

11 A. Good morning.

12 Q. When was the last time, just to reestablish this, that
13 you spoke to Mr. Wood?

14 A. April 15, 2025.

15 Q. Okay and competency or capacity, whichever word you
16 use, that tends to be a current assessment. Right?

17 A. Correct.

18 Q. It can go up and it can go down?

19 A. Correct. It's a present state issue.

20 Q. Has Mr. Wood, to your knowledge, ever seen his symptoms
21 improve without medication?

22 A. I don't think I would be able to answer that. I don't
23 think he has improved spontaneously. He may go through
24 periods of being quiet but I don't think that means he's
25 getting better.

1 Q. Well, because I was looking at I guess it's page 14 of
2 your report?

3 A. Let me get there with you.

4 Q. That top paragraph there.

5 A. Yes.

6 Q. It said that he was refusing his medication, that he
7 was somewhat improved.

8 A. Yeah. That was in September of 2002 so that was in the
9 earlier stages of his illness so it's possible at that time,
10 24 years ago, that he was able to have some periods of
11 improvement without medication but again that's early into
12 his illness.

13 Q. Hmm-hmm. And is medication the only thing that can
14 cause an improvement in symptoms for somebody with
15 schizophrenia?

16 A. Medication is the first line treatment for
17 schizophrenia. Yes.

18 Q. But are there other factors, I guess, outside of
19 whether someone is medicated, stressors, things like that,
20 that can impact whether their symptoms are worsening.

21 A. Medication is really the only treatment for
22 schizophrenia.

23 Q. Okay. And you mentioned that at least a couple times
24 Mr. Wood was receiving medication when you evaluated him?

25 A. Yes.

1 Q. And you were still able at that point to determine that
2 he was competent even though he was taking medications.

3 Correct?

4 A. Well, I've never made the determination that he's
5 competent.

6 Q. Hmm-hmm. I'm sorry you were able to determine that he
7 was mentally incompetent even though he was taking his
8 medications at that time. You didn't see something that
9 made you think he was mentally competent. Correct?

10 A. Correct. During the two interviews where he was
11 medicated, it was my opinion that he still lacked capacity
12 to be executed. Yes.

13 Q. Okay. Is it a medically accepted practice to stop a
14 patient's prescriptions to get a better understanding of
15 what his or her symptoms might be?

16 MS. PAAVOLA: Your Honor I object to this. Dr.
17 Knight is not a psychiatrist. She is a psychologist and
18 this is outside the scope of her expertise.

19 THE COURT: I will allow it if she knows. Okay.
20 Please continue. That would be overruled.

21 BY MR. LARRABEE:

22 A. So I am not a psychiatrist. I do not treat
23 schizophrenia and I would not be able to answer that
24 question. I would leave that question to the medical
25 doctors on the case.

1 Q. Okay. You spoke earlier about whether Mr. Wood is
2 malingering. Correct?

3 A. Yes.

4 Q. Did you review anything in the course of your
5 investigation or looking into this about whether or not he
6 had said before that he was faking?

7 A. I believe pretrial there is a note in the records that
8 during his State evaluation, again this is pretrial so
9 before 2002, that he was faking symptoms because Jesus told
10 him to.

11 Q. Okay. So he has said before at least that he has faked
12 some of his symptoms?

13 A. That's a quote in the records, yes.

14 Q. Okay. You also have a series of quotes at the end of
15 your report. Those are the ones that you thought were
16 significant. Correct?

17 A. You're referring to the appendix?

18 Q. Yes.

19 A. These are the things that I pulled from the records and
20 from the interviews that I believed had a nexus to the
21 capacity to be executed question.

22 Q. Hmm-hmm but I mean those are voluminous records.
23 Correct? There are a lot of reports including ones that
24 some you don't cite there. Correct? From like SCDC medical
25 records.

1 A. Correct. It's comprehensive but it's not exhaustive.

2 Q. Okay.

3 MR. LARRABEE: Court's indulgence for a moment.

4 THE COURT: Yes, sir. Take your time.

5 MR. LARRABEE: Thank you, Your Honor. Nothing
6 further at this time.

7 THE COURT: Okay. Thank you. Any redirect?

8 MS. PAAVOLA: Your Honor, we have no further
9 questions for Dr. Knight.

10 THE COURT: Okay. Is there any objection to the
11 Court releasing Dr. Susan Knight?

12 MR. LARRABEE: Not from the State, Your Honor.

13 THE COURT: And just to confirm she would not be
14 needed in reply?

15 MS. PAAVOLA: That's correct.

16 THE COURT: All right. Thank you Dr. Knight.

17 THE WITNESS: Thank you, Your Honor.

18 THE COURT: Okay. Anything else at this time,
19 Counsel?

20 MS. PAAVOLA: No, Your Honor. The applicant
21 rests.

22 THE COURT: Any motions? I always ask. You're
23 not required to make them, just want to make sure. Okay.
24 None?

25 MR. LARRABEE: No, Your Honor.

1 THE COURT: Okay. And so the next witness is Dr.
2 Gaskins and as I understand it, that witness will be
3 available tomorrow?

4 MR. LARRABEE: Tomorrow afternoon. Yes, Your
5 Honor.

6 THE COURT: Okay. All right. Is there anything
7 else that we can take up at this time?

8 MS. PAAVOLA: Nothing further.

9 MR. LARRABEE: No.

10 THE COURT: Okay. All right and so -- yes, Ms.
11 Brown.

12 MS. BROWN: Your Honor, may I please just throw
13 out there the transportation request that we made still goes
14 through tomorrow too. Do I have permission to cancel that
15 request through SCDC so they do not attempt transportation
16 tomorrow?

17 THE COURT: Counsel has waived his presence and
18 the guardian ad litem, of course, did testify regarding that
19 but I'll leave it within counsel's discretion. If you would
20 like for the invitation to be extended to Mr. Wood tomorrow
21 or this evening I can have that occur through Ms. Brown's
22 request.

23 MS. PAAVOLA: We have no objection to canceling
24 the transportation request.

25 THE COURT: Okay. All right and so again Mr.

1 Wood's presence has been waived but earlier as we commenced
2 this morning it was stated that he refused to attend. Would
3 that be the proper language?

4 MS. PAAVOLA: Yes, I think that's fair. He's
5 refusing to come out so he is refusing to attend.

6 THE COURT: Okay. All right. And so we will then
7 be adjourned until tomorrow being March the 25th. Thank you
8 all very much for your excellent presentations and again
9 it's nice to see you all. All right.

10 (Proceedings commenced at 11:27 AM)

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STATE OF SOUTH CAROLINA COMMON PLEAS COURT
COUNTY OF GREENVILLE

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John Richard Wood	
	Applicant
vs.	
State of South Carolina	
	Respondent

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TRANSCRIPT OF RECORD
CASE NO. 22-CP-23-6219

03\25\2026

DAY TWO TRANSCRIPT OF CAPITAL POST-CONVICTION RELIEF
BEFORE THE HONORABLE GRACE GILCHRIST KNIE, PRESIDING JUDGE

A P P E A R A N C E S:

Emily C. Paavola, ESQ

Allison Franz, ESQ
Applicant

R. Brandon Larrabee,
Melody Jane Brown, ESQ
Respondent

Brie Rust, ESQ
Guardian for Mr. Wood

Alice M. Adler, CVR
Court Reporter

1 (Proceedings started at 2:28 PM)

2 THE COURT: We are back on the record in the
3 matter of John Richard Wood versus the state of South
4 Carolina, Mr. Wood being the applicant, the state of South
5 Carolina the respondent and this is civil action number
6 22-CP-23-6219. It is pending in Greenville County and
7 counsel has waived venue on behalf of applicant and State
8 for this hearing to be conducted in Spartanburg as I was
9 assigned this matter by the Supreme Court. This is a
10 capital post conviction relief matter. The issue before the
11 Court concerns Mr. Wood's competency to be executed and
12 yesterday we heard from Counsel for the applicant and the
13 applicant rested. Present though, I do want everyone to
14 identify themselves on the record again and we will again
15 address the issue of Mr. Wood's presence in the court, just
16 to make sure the record is clean and if there's nothing
17 additional from the applicant we will then move to the
18 respondent's case. So let me have counsel first identify
19 themselves on the record please.

20 MS. PAAVOLA: Good afternoon, Your Honor. I am
21 Ms. Emily Paavola. I'm here on behalf of the applicant,
22 Mr. Wood.

23 THE COURT: Thank you.

24 MS. FRANZ: Allison Franz, also for Mr. Wood.

25 THE COURT: Thank you.

1 MS. RUST: I am Brie Rust, the guardian for Mr.
2 Wood.

3 THE COURT: And Ms. Rust, are you also an
4 attorney?

5 MS. RUST: Yes, ma'am.

6 THE COURT: Okay. Thank you.

7 MS. RUST: Yes, ma'am.

8 MR. LARRABEE: Brandon Larrabee, assistant
9 attorney general for the State, respondent.

10 MS. BROWN: Melody Brown for the State, Your
11 Honor.

12 THE COURT: Okay. Again thank you all and I know
13 how busy you all are and I do appreciate y'all being here in
14 person. I just cannot imagine where you all travel in a
15 month's time around the state. Okay and we also have a live
16 court reporter here with us and we also are on WebEx.
17 Counsel has stipulated that the experts may appear via
18 Webex and so but before we hear any of the respondent's
19 matter, or matters from the respondent, let's put on the
20 record again all statements regarding Mr. Wood's presence
21 today. Okay.

22 MS. PAAVOLA: Yes, Your Honor Mr. Wood is not
23 here. As we talked about yesterday I don't believe that the
24 PCR statute requires Mr. Wood to be here to the extent that
25 he may have a right to be here today. We do waive any right

1 that he may have as to counsel and I believe Ms. Rust as his
2 guardian will do so as well.

3 THE COURT: Okay. Ms. Rust.

4 MS. RUST: Yes, Your Honor. Mr. Wood does not
5 believe that these proceedings are affecting him in anyway
6 and he does not wish to participate and I waive his right to
7 be present.

8 THE COURT: Okay. And you were placed under oath
9 yesterday and I will just say that you continue to be.
10 Okay?

11 MS. RUST: Yes, ma'am.

12 THE COURT: All right. And thank you for serving
13 as the guardian ad litem in this matter. Okay. Anything
14 else that we need to take up before I turn it over to the
15 respondent?

16 MS. PAAVOLA: Nothing further, Your Honor.

17 THE COURT: Okay. So we got all of y'all's
18 exhibits, all of the applicant's exhibits in yesterday
19 through the testimony of the applicant's experts, Susan C.
20 Knight and Amanda B. Salas.

21 MS. PAAVOLA: That's correct.

22 THE COURT: Okay and so far then the exhibits that
23 are in it would be applicants four, four exhibits in which
24 are the reports of the two experts and then their CVs as
25 well. Right?

1 MS. PAAVOLA: Yes.

2 THE COURT: Okay and they were qualified as
3 experts and testified regarding forensic psychology. Okay.
4 All right. So now we will move to the respondent's case.
5 I'm happy to hear from the Counsel for the State.

6 MR. LARRABEE: The State calls Matthew Gaskins.

7 THE COURT: Okay. Mr. Gaskins. It's Dr. Gaskins?

8 MR. GASKINS: Yes, ma'am, it is.

9 THE COURT: Okay. Dr. Gaskins, good afternoon
10 sir. I'm going to have our deputy clerk of court place you
11 under oath. Okay?

12 MR. GASKINS: Yes, ma'am.

13 MATTHEW GASKINS, RESPONDENT'S WITNESS, SWORN

14 THE COURT: Okay. Thank you, sir. If you will
15 please state your full name, spelling your last for the
16 record.

17 THE WITNESS: Yes, my name is Matthew English
18 Gaskins, G-A-S-K-I-N-S.

19 THE COURT: Okay and sir, what city are you
20 located in right now?

21 THE WITNESS: I'm in Columbia.

22 THE COURT: Okay. South Carolina. Okay. All
23 right. Thank you. Yes, sir, Mr. Larrabee.

24 DIRECT EXAMINATION

25 BY MR. LARRABEE:

1 Q. May it please the Court? Dr. Gaskins could you start
2 off by telling us where you work and a little bit about what
3 you do?

4 A. Current employment, so I am a founding partner of a
5 practice in Columbia, South Carolina called Southern
6 Psychiatry. Through that practice I provide clinical
7 treatment for patients that are classified as adults, so
8 that would be anything from about 16 to 17 all the way up to
9 about 75 to 80 although I do have a couple that are a little
10 bit older than that. I provide clinical treatment through
11 that practice. I take private forensic psychiatry cases
12 through that as well. I have a contract with the South
13 Carolina Office of Mental Health which is how I became
14 involved with this case. What I do: I do forensic
15 evaluations, mostly competency to stand trial, criminal
16 responsibility, some other cases such as competency to be
17 executed, violence risk assessments. I also have teaching
18 responsibilities at the University of South Carolina School
19 of Medicine and Prisma Health to educate medical students,
20 general psychiatry residents, and forensic psychiatric
21 fellows.

22 Q. Okay. And would you give us your educational
23 background?

24 A. I obtained my Bachelors of Science in exercise science
25 from the University of South Carolina in 2005. I then

1 enrolled in the Medical School at the University of South
2 Carolina completing my Doctor of Medicine in 2010. I then
3 enrolled in the four year residency program which at the
4 time was run by Palmetto Health, now known as Prisma Health
5 and the University of South Carolina, the last year of which
6 I served as the chief resident in general psychiatry. That
7 was completed in 2014. I then did an additional year of
8 forensic psychiatry at the same program from 2014 to 2015.
9 I'm currently board-certified by the American Board of
10 Psychiatry and Neurology in both general psychiatry and
11 forensic psychiatry. I'm licensed to practice medicine in
12 the states of South Carolina, New York, and Vermont.

13 Q. Okay. And is there any part of your career you haven't
14 touched on yet before you were at your current location or
15 your current employment?

16 A. Previous employment?

17 Q. Yes. Previous employment. Yeah.

18 A. There are a few. I ran what's called the Ryan White
19 clinic, the HIV clinic at Prisma Health for about seven
20 years as a psychiatrist in charge of that clinic. I worked
21 what we refer to as moonlighting or kind of working on the
22 weekends mostly at South Carolina Department of Corrections
23 for a time, Three Rivers Medical or Three Rivers Behavioral
24 Health, I think is their official name. I did some coverage
25 for them and I think -- when I first graduated from

1 fellowship I joined a practice called Midland Psychiatry
2 before leaving with a few of those members to form Southern
3 Psychiatry.

4 Q. Okay. You mentioned it a little bit. What is forensic
5 psychiatry?

6 A. Forensic psychiatry is simply a specialty within
7 psychiatry that specializes in the interface between the law
8 and mental health. So any question that could come up
9 regarding mental health that has any type of legal concern
10 are what we're asked to participate in. I mentioned the
11 evals that I do through the Department of Mental Health or
12 excuse me the Office of Mental Health, they're now referred
13 to as, but also any question regarding parental capacity,
14 testamentary capacity, restoration of gun rights after being
15 civilly committed, basically any question that the courts
16 may have about mental health or psychiatry, we get involved
17 in.

18 Q. Okay. And as part of that you conduct certain reviews
19 related to criminal defendants and inmates?

20 A. Yes.

21 Q. As you were mentioning. What kind of training do you
22 have for conducting those assessments?

23 A. The majority of that training was done in that one-year
24 fellowship with forensic psychiatry where I worked under the
25 department head which was Richard Frierson where we

1 essentially did evaluations. The standard we used was that
2 we observed three, we had three observed, and then we just
3 kept doing them, averaging about three a week during that
4 whole year where we were able to get feedback from our
5 supervising attendings and speak to legal counsel as well as
6 part of that training.

7 Q. Okay. And how many of those evaluations, particularly
8 this kind of evaluation competency to be executed, have you
9 conducted?

10 A. Competency to be executed, I participated in one
11 previously but I was not the lead examiner. That was Dr.
12 Frierson. This is my first one that I'm doing independently
13 by myself as far as that goes.

14 Q. Okay. Sorry.

15 A. I was just going to finish that. The total number of
16 evaluations I have done for the Department of Mental Health,
17 though, in my career is completed reports is 1447.

18 Q. Okay. Have you ever been qualified to testify as an
19 expert in court?

20 A. Yes.

21 Q. Sorry?

22 A. Yes.

23 Q. Okay. How often would you estimate?

24 A. I can tell you. Let me pull up my cheat sheet if you
25 don't mind. I will apologize for not having this in advance.

1 I wasn't sure we were going to talk about that. So it looks
2 like I have entries of 69 times where I've testified and it
3 looks like about three-fourths of those were in court where
4 I was qualified in the field of being an expert in either
5 forensic psychiatry or general psychiatry or both.

6 Q. Okay. So I've e-mailed you a copy of what's been
7 marked as respondent's Exhibit 1. Do you recognize that
8 document?

9 A. It's my CV.

10 Q. That's your CV. And is that a true and accurate
11 reflection of your current CV?

12 A. Yes, from the most recent time I updated it and I don't
13 think anything substantially has changed since then. I last
14 updated, I believe in, January.

15 Q. Okay.

16 MR. LARRABEE: Your Honor, we would move into
17 evidence what's been marked as respondent's Exhibit 1 which
18 is Dr. Gaskins's CV.

19 THE COURT: Any objection?

20 MS. PAAVOLA: No objection.

21 THE COURT: Okay. And so respondent's Exhibit 1
22 is in without objection. Thank you.

23 (Respondent's Exhibit 1 received into evidence)

24 MR. LARRABEE: Okay. Your Honor would you like a
25 courtesy copy?

1 THE COURT: Yes, thank you.

2 MR. LARRABEE: And Your Honor, we would offer Dr.
3 Gaskins as an expert in the field of forensic psychiatry.

4 THE COURT: Any objection?

5 MS. PAAVOLA: No objection.

6 THE COURT: Does counsel waive voir dire on that
7 issue?

8 MS. PAAVOLA: Yes.

9 THE COURT: All right. Thank you and so Dr.
10 Matthew E. Gaskins is qualified to testify in this hearing
11 as an expert witness in the area of forensic psychology.
12 Thank you. Please continue.

13 MR. LARRABEE: Psychiatry, Your Honor. Just to be
14 clear for the record.

15 THE COURT: Psychiatry, yes.

16 BY MR. LARRABEE:

17 Q. Now Dr. Gaskins, how did you come to be involved in
18 Mr. Wood's case?

19 A. As I mentioned earlier I've got a contract with the
20 South Carolina Office of Mental Health to do forensic
21 evaluations and when this one came through it was assigned
22 to me.

23 Q. Okay. Is that the typical way those things come to
24 you?

25 A. Yes. The Office of Mental Health they typically assign

1 them. They're supposed to be more or less random among the
2 examiners; however, whenever a bigger profile case comes
3 through it tends to go to one of the physicians so it's
4 either myself, Dr. Frierson, or the other physician that
5 does these which is Kaustubh Joshi.

6 Q. Okay. And in regard to this matter were you retained
7 by the office of the attorney general?

8 A. No.

9 Q. Okay. And what about the applicant, where you retained
10 by Mr. Wood or his counsel?

11 A. No. My position working for the Office of Mental Health
12 is that I'm a friend of the court. I'm not on either side
13 of the case.

14 Q. Okay. So you were appointed to be a neutral examiner
15 in this case?

16 A. Correct.

17 Q. Okay. And did you prepare a report?

18 A. I did.

19 Q. Would you look at what I have e-mailed to you and
20 that's been marked for identification as Exhibit 2?

21 A. Yes. I have it.

22 Q. Okay. And can you identify that document?

23 A. That is my report. The date of the report is July 5,
24 2025.

25 Q. Okay. And is that a true and accurate copy of that

1 report?

2 A. Yes. It appears to be. Yes.

3 MR. LARRABEE: Your Honor, at this time we would
4 offer respondent's Exhibit 2 into evidence.

5 THE COURT: Okay. Any objection?

6 MS. PAAVOLA: No objection.

7 THE COURT: All right. Thank you. So respondent's
8 Exhibit No. 2 the report of Dr. Matthew E. Gaskins, that was
9 dated July 5, 2025 is in without objection as respondent's
10 Exhibit 2. Thank you.

11 (Respondent's Exhibit 2 received into evidence)
12 BY MR. LARRABEE:

13 Q. Okay. Dr. Gaskins how did you go about conducting an
14 evaluation of Mr. Wood?

15 A. When we're assigned to these cases, we simply follow
16 the same procedure regardless of what the Court is asking of
17 us which includes reviewing all the records that we have
18 available before meeting with the defendant or the person
19 that we're evaluating. Then we conduct an in-person
20 evaluation and if we need any additional records we request
21 those. If not, then we go ahead and complete the report
22 based on the records we reviewed beforehand and the
23 interview itself. For Mr. Wood, that included information
24 about the crime for which he was convicted, some legal
25 filings that are all kind of outlined in my report under

1 sources of information, the reports of the privately
2 retained experts from Mr. Wood's attorneys and some medical
3 records including those from the Department of Corrections.

4 Q. Okay. And that's pretty much the records you relied on
5 in this report?

6 A. Yes. Again I have them enumerated a little bit more
7 clearly in my report itself under sources of information on
8 page two.

9 Q. Okay. And did you have an opportunity to speak with
10 Mr. Wood?

11 A. I did. I met with him on June 18, 2025.

12 Q. Okay. How long did that conversation last, do you
13 recall?

14 A. I don't recall exactly. It was under an hour, though.

15 Q. Okay. What standard did you use to determine in your
16 report whether Mr. Wood has the capacity to be executed or
17 the competency to be executed?

18 A. So in the information we have for this case we use the
19 standard set out in Singleton v State that has the two
20 prongs and their short version is the cognitive prong. Do
21 they know what they were convicted of, what the punishment
22 is expected to be and the nature of the punishment? Then
23 the second prong is referred to as the assistance prong.
24 Basically, can they work with an attorney throughout the
25 process?

1 Q. Okay. And by using that standard were you able to come
2 to an opinion with a reasonable degree of medical certainty
3 about whether Mr. Wood currently has the capacity to be
4 executed?

5 A. Yes, I did.

6 Q. And what was that conclusion?

7 A. Well and just to be clear not currently but --

8 Q. Yes, at the time you spoke to him, yeah.

9 A. Correct, June 18, 2025 my opinion was that he lacked
10 the capacity to stand trial -- excuse me lacked the capacity
11 to be executed because he had neither prong.

12 Q. Okay. Were there any caveats to your opinion?

13 A. I don't know if they would be a caveat to them, I would
14 say that I noted that he was taken off of all of his
15 medicine right before the evaluation and so I know that he
16 was not on what his medical providers believe was his
17 optimal treatment at that time.

18 Q. Okay. What brought you to your overall opinion of
19 Mr. Wood's competency?

20 A. Well, it was his presentation. Whenever I met with him
21 he was pretty quickly demonstrating delusional beliefs. He
22 referred to himself as a gen which he spelled G-E-N which I
23 took to mean short for a genie or what we would refer to as
24 a genie. He referred to a Kevin, is how he kept referring to
25 it and anyone that essentially went against him he referred

1 to as son of Kevin which included his provider at the time
2 who is Robert Ellis who is a forensic psychiatrist and also
3 an attorney who is providing his treatment while he is on
4 death row. He made several other delusional statements that
5 again I outline in the report more concisely but essentially
6 he didn't appreciate the fact that he was being sentenced to
7 be executed. He, one, thought that his sentence had been
8 vacated by the Lieutenant Governor who had planned to
9 basically usurp Governor McMaster's position and sign a
10 pardon or relief for everyone that was on death row. He also
11 said that he had been already killed multiple times and
12 wasn't worried about any potential death penalty because he
13 could be resurrected so he didn't have a rational
14 understanding that the sentence that he's been given would
15 result in the end of his life.

16 Q. Okay. And you mentioned that as you were working on
17 your evaluation you became aware that Mr. Wood was no longer
18 taking Risperdal?

19 A. Yes, that was my understanding.

20 Q. And what is your understanding of why he was not taking
21 that medication anymore?

22 A. From my understanding, this is coming from the medical
23 records from South Carolina Department of Corrections. I
24 actually quote a pretty good paragraph from Dr. Ellis about
25 it kind of describing exactly what happened. From my

1 understanding, Ms. Rust who is his guardian ad item,
2 reached out and was concerned that Mr. Wood needed to be
3 without any medications on board at all for the basis of
4 this evaluation such that you couldn't access his competency
5 to be executed or in my case capacity to be executed if he
6 was taking medications at the time because that was not his
7 baseline functioning. So that's why she asked that he be
8 taken off his medicines. Dr. Ellis noted that was against
9 medical advice that it was likely to cause more symptoms at
10 the time including interfering with his ability to
11 participate in activities of daily living so he noted that
12 it was against medical advice but since Ms. Rust is his
13 guardian ad litem they did take him off the medicines before
14 I met with him.

15 Q. Okay. How, if at all, did that affect your evaluation?

16 Q. Well, the biggest way it affected my evaluation is that
17 I don't know how he is when he's on optimal medicines. I
18 know that he traditionally gets prescribed up to 6 mg of
19 Risperdal and by all accounts when he's on that dose, he's
20 still symptomatic. He still has symptoms. He still voices
21 delusions but he's able to function better. He is able to
22 participate in conversations more. He is able to take care
23 of his activities of daily living a little bit better. He
24 is less likely to be aggressive toward himself or other
25 people so he does better at that dose.

1 Seeing him whenever he's on no medicine, I'm kind
2 of seeing him at his absolute worst so all I can give an
3 opinion on is that he didn't have capacity to be executed at
4 that time. Had he been on, what I would consider, his
5 optimal or appropriate medication based on his treatment
6 with Dr. Ellis then I could have maybe even given a further
7 opinion, which is do I think he's likely to get better than
8 this and if he was, for example if I saw him at 6 mg of
9 Risperdal and he was still showing signs that he lacked
10 either the cognitive prong or the assistive prong. Then I
11 would probably add something to the opinion and say that
12 this appears to be the best he's going to get, which means
13 that he's unlikely to improve to the point where he would
14 ever reach capacity to be executed.

15 Q. Okay. Now from a psychiatric point of view, what would
16 be the potential consequences of reducing and then
17 eliminating medications for a patient like Mr. Wood?

18 A. Well, Mr. Wood specifically again, his providers note
19 that when he goes off a medicine he is hard to manage. He is
20 more likely to act out and be assaultive toward officers and
21 be harmful to himself. He doesn't take care of himself as
22 well as far as he is not getting regular showers, eating
23 regular or regular sleep hygiene and just in general
24 whenever someone is psychotic, the longer their psychosis is
25 untreated the more likely they are to be psychotic again and

1 the harder it is to treat. So taking him off of medicines,
2 serves him medical harm as far as it makes it hard to treat
3 him in the future. I mean I understand why it was done in
4 this case but that's the consequence of taking someone off
5 of medications that they need.

6 Q. And, when you take a patient off of psychiatric
7 medication and then put him back on, is it necessarily going
8 to be as effective the next time or does that affect the
9 symptomology some?

10 A. It certainly can affect symptomology. You know it is
11 case to case so I can't say that Mr. Wood wouldn't respond
12 if he got put back on 6 mg of Risperdal but it certainly has
13 been documented that when people go off their medicines they
14 are harder to treat a second time.

15 Q. Okay. And in your expert opinion is it a medically
16 appropriate thing to do to take a patient off of their
17 medication in order to do an evaluation like this?

18 A. Okay. I'm going to split that up if I can. So, I'm not
19 Mr. Wood's provider so I am not going to say specifically
20 about Mr. Wood needing to take medicines or not, that needs
21 to be deferred to Dr. Ellis, his treating provider. I would
22 say that Dr. Ellis's objections in the medical record are
23 something that I would probably agree with, that you know
24 taking him off of medicines for the sake of a competency to
25 be executed evaluation may be in Mr. Wood's overall

1 interests as far as, you know, potentially delaying
2 execution or even avoiding execution but as far as just the
3 medical perspective of it, the psychiatric benefit of
4 staying on the medicines far outweigh the risk of taking him
5 -- the harm that it can do when you take him off the
6 medicine. So, from a purely medical psychiatric
7 perspective, it's likely that Dr. Ellis is right that he
8 probably should be staying on a higher dose of medicine.

9 Q. Okay. Based on your knowledge and experience is it
10 generally easier or harder to get someone with a condition
11 like schizophrenia back on medication after they've been
12 taken off of it? Voluntarily. Does it have any effect?

13 A. Well, yeah and that last word probably makes a big
14 difference. You know when people go off their medicines,
15 one of the key symptoms of schizophrenia, even though it's
16 not in any of the diagnostic criteria you find in the DSM,
17 is lack of insight and so often times when people are ill
18 they don't think they need the medicine and so that's why we
19 have so many people that end up getting involuntarily
20 hospitalized and receiving involuntary medications. Once
21 they get the medicine back on board, then they improve
22 insight and they see why they might need to keep taking it.
23 So when someone is unmedicated and disconnected from reality
24 it is harder to convince them and give them essentially
25 informed consent of why you need this medicine and why we

1 think that it's in your best interest.

2 Q. Okay. Now if Mr. Wood had been medicated would you
3 have been able to take that into account in your report?

4 A. Well, I would have noted it. I would have certainly
5 said that, you know, according to medical records he appears
6 to be compliant. I would have certainly asked him, you know,
7 are you taking the medicines that are prescribed by Dr.
8 Ellis or whoever his provider is at that time which I
9 presume he would say yes if he was taking it. He did say
10 specifically that he wasn't taking it at this time which is
11 reflected in the records so I would have noted it and it
12 would have been in the report.

13 Q. Okay. Now is medication the only thing that can affect
14 the outcomes of a person with schizophrenia or are there
15 other stressors that can make the symptoms worse or could
16 help to improve the situation if the stressors let up a
17 little bit?

18 A. Just like with any condition, especially mental health
19 condition, stress makes everything worse and so when you're
20 in a stressful situation and stressful environment whether
21 your diagnosis is generalized anxiety disorder or
22 schizophrenia, the stressful environment is going to make it
23 worse.

24 Q. Okay. But the bottom line is you found that Mr. Wood
25 did not, at the time you did the assessment, currently have

1 the capacity to be executed. Correct?

2 A. That's correct.

3 Q. But you can't really tell whether he might be competent
4 if properly medicated or if he was allowed to take advantage
5 of treatment for a period of time?

6 A. No, I don't know the answer to that. I do know that he
7 does improve clinically better but just because someone is
8 clinically a little bit better whenever they're on medicine
9 it doesn't mean they would reach the thresholds of having
10 capacity to be executed so I can't really say to that. All
11 I did note is that he was taken off the medicines for that.

12 Q. Okay. If I could have the Court's indulgence for a
13 moment?

14 THE COURT: Yes, sir. Take your time.

15 BY MR. LARRABEE:

16 Q. Dr. Gaskins, I believe that's all the questions I have
17 for you. Please answer any questions from the applicant's
18 counsel that they ask.

19 MR. LARRABEE: Thank you, Your Honor.

20 THE COURT: Yes. Cross examination.

21 CROSS EXAMINATION.

22 BY MS. PAAVOLA:

23 Q. Good afternoon Dr. Gaskins. I'll be very brief. I
24 think I understood you to say on direct, that in general
25 there are three individuals who might be assigned a

1 competency to be executed evaluation and that includes
2 yourself, Dr. Frierson, and Dr. Joshi. Is that right?

3 A. That's my understanding but so they are officially
4 decided by the medical director of the forensic evaluation
5 service who is Kelly Gauthier, she's a psychologist that's
6 there and then she gives those to the scheduler who then
7 assigns then. My understanding is that for competency to be
8 executed they traditionally will go to Dr. Frierson or now
9 they started coming to me.

10 Q. And Dr. Frierson and Dr. Joshi would not be assigned to
11 Mr. Wood's case because they have both treated him when he
12 was involuntarily committed at the psychiatric hospital. Is
13 that right?

14 A. That's what I was told. Yes.

15 Q. And I understand your opinion is that Mr. Wood's lacked
16 capacity to be executed when you evaluated him and that is
17 because he does not meet either of the Singleton prongs. Is
18 that right?

19 A. Yes.

20 Q. And your opinion that he does not meet the cognitive
21 prong is based on the fact that he has a number of
22 delusional beliefs that pertain directly to his
23 understanding of the nature of his punishment. Is that
24 correct?

25 A. Yes, ma'am. Again he believes that he's already been

1 killed so therefore the death penalty doesn't carry much
2 weight on him. He also believes that he'd already been
3 pardoned and believed that he could be resurrected so all
4 three of those, each of those three frankly kind of violates
5 or would prevent him from meeting the cognitive prong
6 because he doesn't appreciate the fact that should his
7 sentence be carried out he would no longer be alive.

8 Q. And according to the lengthy medical records that you
9 reviewed, Mr. Wood has had those beliefs for a very long
10 time?

11 A. Yes, I understand he has voiced those for a while.
12 Yes, ma'am.

13 Q. And your opinion is that he does not meet the
14 assistance prong because he cannot communicate rationally
15 with his counsel?

16 A. I'm not sure he can communicate rationally with anyone
17 when he wasn't on medicine.

18 Q. Right and that was readily apparent to you according to
19 your report. It was very obvious from within minutes, you
20 would say, that Mr. Wood cannot communicate rationally?

21 A. Yes. The line that you're referring to, whenever you
22 write so many reports you have to put things in there to
23 kind of remind yourself of what happened and what was going
24 on. Whenever I used that phrase at the very beginning of
25 that under forensic interview at the top of page ten where I

Gaskins-Redirect

1 state "at the outset of the evaluation, column A, it was
2 readily apparent Mr. Wood was experiencing symptoms of an
3 active thought disorder," that means it was readily
4 apparent. That means within the first few minutes it was
5 already clear that he was showing signs of psychotic
6 disorder.

7 Q. Thank you. I have no further questions.

8 THE COURT: Okay. Thank you. Any redirect?

9 MR. LARRABEE: Very briefly, Your Honor.

10 REDIRECT EXAMINATION.

11 BY MR. LARRABEE:

12 Q. All the observations that you just discussed with the
13 applicant's counsel, those were with the applicant being
14 unmedicated. Is that correct?

15 A. My understanding is that he wasn't on any medicine at
16 the time.

17 Q. Okay.

18 MR. LARRABEE: Nothing further, Your Honor.

19 THE COURT: Okay. All right. Anything else of
20 Dr. Gaskins?

21 MS. PAAVOLA: Nothing further.

22 THE COURT: Okay. Any objection to me allowing
23 him to leave? No? Okay. Thank you, sir.

24 THE WITNESS: Thank you, Your Honor.

25 THE COURT: Okay. That concludes Dr. Gaskins's

1 testimony. Anything else on behalf of the respondent?

2 MR. LARRABEE: Not in reference to our case. No,
3 Your Honor. The respondent rests.

4 THE COURT: Okay. Anything in reply?

5 MS. PAAVOLA: Nothing in reply and Your Honor I
6 apologize I had forgotten to turn on the microphone at the
7 table. I'm sorry for the inconvenience to everyone if you
8 can't hear what I've said.

9 THE COURT: I'm sure that the court reporter got
10 it down or she would have raised her hand. Okay. All right.
11 Thank you. And so do you all want to make a summation for
12 the Court? Do you need a moment to do that to get your
13 thoughts together or are y'all ready with that at this time?

14 MS. PAAVOLA: I would propose, if Your Honor is
15 willing to consider a proposal, that there's very little to
16 say on the question of the actual competency decision;
17 however, the State's pretrial brief makes a request that I
18 think is more fairly characterized as a motion and I would
19 suggest that perhaps they should argue that motion and we
20 would respond to it.

21 THE COURT: Okay. Well, that's fine with me but
22 if y'all want to make a summation I'm happy for you to do it
23 but I have reviewed your briefs. Again I do appreciate them
24 and so I'm happy to hear your argument. I have the brief in
25 front of me and I can follow along if you would like to do

1 it that way. I'm aware-- I, yesterday, raised that I guess
2 in my initial comment to you all that I was aware that the
3 State was making some request for me to issue an order so
4 again however you all want to handle it.

5 MR. LARRABEE: Your Honor, would you prefer for me
6 to argue from there or from the podium?

7 THE COURT: However you're comfortable doing it.

8 MR. LARRABEE: Okay. Yes, we have two requests,
9 two motions if you will. One is that there be an order
10 entered to allow us to get periodic access to the
11 applicant's medical records through the South Carolina
12 Department of Corrections and the second would be that the
13 applicant or his Counsel be required to file a guardian's
14 report with this Court whenever it is filed with the probate
15 court. As far as the access to the medical records, I think
16 first we would look at Ford versus Wainwright and State v
17 Singleton and does Your Honor need a courtesy copy of either
18 of those?

19 THE COURT: I'm happy to have them, yes. I'm
20 familiar with them, though, of course. I know that you all
21 can probably recite the citations in your sleep.

22 MR. LARRABEE: I will start with Ford versus
23 Wainwright because we think there's a point here that's
24 significant in cases like this. It's at the bottom --
25 starts at the bottom of page 11 of the hand out. It's

1 actually page 425 in the Reporter. It's from Justice
2 Powell's concurring opinion and Justice Powell's concurring
3 opinion is generally where most of the legal principles
4 guiding Ford versus Wainwright is pulled out of. It was a
5 badly splintered decision but Justice Powell's concurring
6 opinion is what most authorities look at as laying out some
7 of the law in this standard, how the courts are supposed to
8 weigh the law and he says "thus in this case the State has a
9 substantial and legitimate interest in taking petitioner's
10 life as punishment for his crime. That interest is not
11 called into question by petitioner's claim. Rather the only
12 question raised is not whether but when his execution may
13 take place." That's one of the things that we think is
14 important to keep in mind in this case. This is not a
15 question about whether or not the punishment that the State
16 has obtained from Mr. Wood is itself permissible or
17 constitutional. It is about whether he can be subjected to
18 that punishment while he is mentally incompetent.

19 And we see the same thing is Singleton where the
20 Court there talks about the process for these kinds of cases
21 being to have a stay of execution entered and that again the
22 State can come back at a later point and ask the court for a
23 hearing to reevaluate the competency of the inmate. We
24 could every six months, every year, file a motion to
25 potentially have that sort of hearing, to ask for that sort

1 of hearing. That would be a waste of judicial resources, it
2 would be a waste of litigation resources. Instead, by
3 allowing access to the medical records it allows the State
4 to see whether there is any ground to ask for that hearing,
5 whether there is any reason to further investigate whether
6 or not competency may have returned. But as far as the time
7 period, the time period comes from South Carolina code
8 44-23-450 and that is about competency to be tried but it
9 notes that if less than six months has passed, then it will
10 be summarily dismissed and so the standard there is every
11 six months, there's a potential for looking back and seeing
12 if the inmate is competent. We think that's roughly
13 analogous to where we are now, not a complete analogy but
14 roughly analogous to where we are now and so the State would
15 request first of all to be allowed to access Mr. Wood's
16 medical records every six months to see if there is any
17 reason to request a hearing.

18 As far as the guardian's report, the guardian
19 actually, we would submit, has become inextricably bound up
20 in this litigation as well. The issue of the guardianship
21 and the guardian's instructions are affecting this
22 litigation and the guardian was not sought until 2004,
23 excuse me 2024, excuse me. It was sought with an eye towards
24 litigation and it seems to have been sought with an eye
25 towards driving litigation strategy in considerations of

1 Mr. Wood's medical care. So, for that reason we would also
2 ask for you to issue an order that would require counsel to
3 file a guardian's report with this court whenever it is
4 filed with the probate court in order to make sure that this
5 court is aware of what's taking place with Mr. Wood. That
6 would mark our requests.

7 THE COURT: Thank you. You did very well without
8 much notice. Okay. Thank you. All right. Yes, ma'am.

9 MS. PAAVOLA: Your Honor, may it please the Court?
10 I'm going to stand here if that's okay.

11 THE COURT: Yes, ma'am.

12 MS. PAAVOLA: I'd like to begin with the matter of
13 the guardianship because I do not think that the State's
14 characterization of the guardianship process is accurate.
15 It is true that I requested, as Mr. Wood's counsel, I
16 requested the probate court appoint a guardian for him but
17 there is nothing improper or suspicious about the fact that
18 I did that. That request was made primarily for two reasons:
19 First, as you've heard in testimony yesterday and today,
20 Mr. Wood has been involuntarily committed and forcibly
21 medicated on four occasions and you've heard us refer to
22 this line from Singleton about the standard for forced
23 medication and that involves you have to have a mental
24 illness, you have to be a danger to yourself or others and
25 the forced medication has to be in the individual's best

1 interests. But that is not the entirety of the rules that
2 apply in the case of forced medication. There is a much
3 larger body of law which we have not discussed before you
4 because the question, of course, that you have been
5 appointed to answer is not whether Mr. Wood should be
6 forcibly medicated for some other purpose. The only
7 question this Court is asked to answer is: Is he competent
8 to be executed? But just generally there is-- there are a
9 number of rules that apply when you're going to have someone
10 medicated against their will and those include things like
11 the constitutional right to privacy, the right of due
12 process, and a number of different rights that are set out
13 by the statutes that apply in probate court. And those
14 include things like when a prison medicates someone, it
15 can't be just because it's more convenient for them to
16 medicate him. It has to be done in a way that upholds the
17 individual's dignity. It has to be individually tailored to
18 that person. You have to consider, you know, their medical
19 history, their circumstances and it has to be the least
20 restrictive option to address the behavior at issue.

21 And so Mr. Wood was forcibly medicated many times
22 and I believed or at least I had concerns that not all of
23 his rights were being upheld in that process and so I asked
24 the probate court to appoint a guardian because Mr. Wood, of
25 course, does not have the ability to speak up for himself on

1 these matters because he isn't able to communicate
2 rationally. So that was one of the reasons that we asked
3 for a guardian to be appointed.

4 The second reason is I think also obvious from the
5 testimony. Mr. Wood -- it was very clear to me that Mr. Wood
6 could not have a normal attorney-client relationship with me
7 to make decisions about this hearing, his evaluations, or
8 anything else as you've heard and I don't think that the law
9 allows me ethically to just say, well if my client lacks
10 capacity to make his own decisions, I'll just make decisions
11 for him. I think there are a number of ethical rules that
12 prevent me from just doing what I think is in his best
13 interests if I'm not able to communicate, to confer with him
14 in a normal attorney-client relationship decision-making
15 process that I would typically have with a client who does
16 have capacity. And so by the same -- in that same vein the
17 law is clear that the prison cannot just say well Mr. Wood
18 is mentally ill, he can't make his own decisions we're going
19 to make the decisions for him. Right? Neither of those
20 options are legally sanctioned. The solution when you have
21 this problem is the guardianship appointment process and so
22 that is why we asked for a guardian to be appointed for him
23 because I did not think that he had the ability to make his
24 own decisions and when you don't have that ability you need
25 a guardian.

1 And there's nothing unusual -- excuse me --
2 there's nothing unusual about the fact that Mr. Wood has a
3 guardian. Mr. Singleton had a guardian. Donald Jones had a
4 guardian. Jamie Wilson had a guardian and has a guardian, a
5 permanent guardian today.

6 THE COURT: And the gentlemen you are referring to
7 are other death row inmates at this time that have been
8 found to be incompetent. Right?

9 MS. PAAVOLA: Yes, those three individuals have
10 had the same type of hearing that Mr. Wood is having here
11 with you and the fact that Mr. Singleton had a guardian is
12 referred to in Singleton itself. The Singleton opinion says
13 if there's a concern that a prisoner lacks capacity to be
14 executed, either his lawyer or his guardian can move the
15 court for a determination so there's nothing improper about
16 this and in fact I don't think there was anything else that
17 could have been done that would be proper in this situation
18 and that is why Mr. Wood has a guardian to make all
19 decisions on his behalf. She is not responsible for only
20 considering his medical interests, she has to consider all
21 of his interests and she makes decisions on not only his
22 mental health treatment but other decisions as well that
23 involve a wide variety of information or topics. So that is
24 what I have to say about the guardian.

25 I'd like to move now to their request. My

1 understanding is the State is asking for an order from you
2 allowing them to receive Mr. Wood's medical records every
3 six months which they say would allow him to be evaluated as
4 often as every year and we object to that request and we do
5 not think that there is any legal support for either of
6 those requests. Singleton does not say anything at all
7 about additional evaluations. All it says is, if the State
8 -- once this court's decision is affirmed by the South
9 Carolina Supreme Court as it will be because there is no
10 contrary evidence, once they've affirmed your decision, then
11 the burden will shift back to the State and if they later
12 believe they can prove by a preponderance that competency
13 has been restored to Mr. Wood, then they can move for a
14 hearing. And the way that you move for a hearing is to do
15 what we did to initiate this action. You file, you initiate
16 an action and you request a hearing as we did and then the
17 court will assign it to a judge or the court won't but
18 that's all that Singleton says. It certainly does not say
19 that this is a rolling continual process. And so I think it
20 would be a problem, not only is there no legal support for
21 this, but I think it would be a practical problem for you to
22 do anything other than what Singleton says which is that you
23 should enter a temporary stay of execution and that order
24 must be automatically reviewed by the South Carolina Supreme
25 Court. That is very clear what Singleton instructs you to

1 do and then once that review process begins, of course, this
2 Court will not have jurisdiction over this matter so this
3 idea that you should monitor things or enter an order that
4 would need to be enforced or overseen in the future, I don't
5 think that would practically work because you're not going
6 to have jurisdiction once it goes up to the South Carolina
7 Supreme Court as it is required to do.

8 What the State is really saying is, okay the
9 burden will then be on us and if we have to bear that burden
10 how will we know if we should move for a hearing if we don't
11 have access to any information and I do understand that but
12 I have an alternative proposal that does not require any
13 order from this Court. It's the same process that has been
14 followed in the other cases in which individuals have been
15 determined to be incompetent to be executed and that is the
16 State should ask Ms. Rust as his guardian for periodic
17 updates on his status. That is what occurs in Mr. Wilson's
18 case, that is my understanding of what has occurred in
19 Mr. Singleton's case. I do not think that they should have
20 unfettered access to all of Mr. Wood's medical records
21 because there's a lot of stuff in there that doesn't have
22 anything to do with his mental health and that information
23 is still protected. If he has a heart condition, for
24 example, he should not be required to waive any rights to
25 privacy that he has over that information just because he's

1 mentally ill. I think the appropriate thing to do is as I
2 said what has occurred in other cases, they should ask Ms.
3 Rust for that information. I'm sure she would be willing to
4 give them what is relevant and that process works just fine
5 in all other cases that I'm aware of.

6 So our request is simply that you enter the
7 temporary stay of execution according to the instructions in
8 Singleton. We do not see any need for you to do anything
9 other than that. Thank you.

10 THE COURT: Thank you. Also very well done, to
11 the point. Anything else, sir?

12 MR. LARRABEE: Just briefly, Your Honor. First of
13 all no one is talking about forced medication. The State
14 has conceded that there can be no forced medication with the
15 objective of restoring Mr. Wood to competency.

16 THE COURT: Yes, sir.

17 MR. LARRABEE: That is what the Court said in
18 Singleton is disallowed and so we're not talking about
19 forced medication for him to be executed.

20 Second of all, as far as the guardianship issues
21 go, the guardian did make a decision for Mr. Wood here that
22 was contrary to the decision that Mr. Wood was already
23 making which was to voluntarily take his medicine. Whether
24 or not that's really something that the guardian can do, it
25 has to be for medical reasons we would submit, not for

1 litigation advantage and we're not saying that he shouldn't
2 have a guardian, just that because of what has happened in
3 this particular case this Court needs transparency and other
4 courts that may review it needs transparency into what's
5 going on in the guardianship matter.

6 As far as additional evaluations, additional
7 evaluations are implied in Singleton. Singleton provides a
8 process for there to be future hearings which of course
9 would lead to potentially future evaluations. All of the
10 relief we are asking is linked to this litigation. This
11 court's jurisdiction does not turn into a pumpkin after
12 today. There will be some of its jurisdiction that passes
13 up to the Supreme Court but there is still some residual
14 jurisdiction often in circuit courts when something goes to
15 the Supreme Court. That does not end forever all matters
16 implicated in the litigation.

17 And finally as far as confidentiality we would be,
18 you know, willing to agree to whatever confidentiality
19 arrangements that Mr. Wood and his counsel would like.
20 We're not trying to, you know, just go on an open expedition
21 every six months, we're just trying to determine what's
22 happening as far as his mental care. We don't intend to
23 spread it or let anyone else know about it so that would be
24 everything we would say. We would reiterate our request
25 that this Court enter those orders to have his medical

1 records shared with the State every six months and that the
2 guardian report also be filed with this court.

3 THE COURT: Thank you, sir. Anything else?

4 MS. PAAVOLA: Your Honor, the only thing I would
5 add is that as far as I'm aware no inmate who has been
6 determined to be incompetent to be executed has ever been
7 reevaluated after the hearing concluded. I would acknowledge
8 that Singleton says they can move for a hearing but that
9 certainly doesn't mean that they are automatically entitled
10 to repeat evaluations on a regular basis.

11 THE COURT: Okay. Okay. And so I just really am
12 saying this to make sure that I understand the process
13 moving forward. The guardian ad litem has been appointed by
14 the probate court. It is not just for the pendency of this
15 action. Correct? Normally when I have a guardian before me
16 in a court, the person may be appointed for a minor or an
17 incapacitated adult for the purposes of the proceeding
18 before the court but in this instance the guardian ad item
19 will continue based on another court's order. Correct?

20 MS. PAAVOLA: Yes, Your Honor. That's correct.
21 Ms. Rust is not a guardian ad litem. She is a permanent
22 guardian.

23 THE COURT: So her capacity as guardian will
24 continue?

25 MS. PAAVOLA: Yes.

1 THE COURT: Okay. My other question, again I just
2 want to make sure I understand, has this request for the
3 guardian ad litem reports and the medical reports, were
4 these requests made in the other cases that you all have
5 referred to and Singleton I know was some time ago and
6 Wilson also, what the hearing may have been what 15 years
7 ago or something. Right? If I'm just and I know that our
8 local historian Ms. Brown is with us and might know the
9 answer. If y'all don't know, it's fine I just wondered if
10 the request had been made and denied or not made.

11 MS. BROWN: My understanding, Your Honor, and
12 thank you for letting me speak in the hearing. I know it's
13 a little unusual for this but to my knowledge no request has
14 been made and one of the biggest reasons from our point of
15 view is HIPAA and the confidentiality. Without an order,
16 SCDC does not release medical records to the attorney
17 general's office at all. That presents a problem because we
18 need to have cause to request any reevaluation. That is the
19 reason that we are looking now to try to fulfill our
20 responsibility under Singleton by getting the information to
21 know whether we have the right or should have a basis to
22 move for a hearing. That is something that has been denied
23 to us by just the operation of the privacy laws in general.
24 I will clarify Mr. Wilson does not have an order yet on
25 competency to be executed, so I mean it would be something

1 that of course we would ask for that one as well.
2 Mr. Singleton also had a history that was far beyond
3 competency as well that we were privy to. There is another
4 inmate, Mr. Hughes, if we are able to clarify this which we
5 believe is the correct process under the advent of HIPAA and
6 to satisfy Singleton, we will move for that additional
7 information in Mr. Hughes's case although he's a bit
8 different as well. Mr. Hughes asked to withdraw or to waive
9 all of his PCR and any other collateral actions and we were
10 on that in the Supreme Court when he was found not competent
11 to waive so procedurally he's in a slightly different
12 posture as well so that leaves us with Mr. Singleton who did
13 pass away last October in SCDC.

14 THE COURT: All right. Thank you.

15 MS. BROWN: Thank you.

16 THE COURT: Thank you very much. Okay. Anything
17 else folks?

18 MS. PAAVOLA: Nothing further.

19 THE COURT: Okay. Anything else?

20 MR. LARRABEE: Nothing.

21 THE COURT: All right and so I want to say again
22 how much I appreciate your professionalism, your efficiency,
23 your knowledge of the subject matter, this very difficult
24 subject matter and you all handled this very well. It's a
25 very difficult topic and I do appreciate your efforts. So,

1 pursuant to the statute I am requesting proposed orders from
2 you both and you all tell me, I know this is a busy time of
3 year for folks, so y'all tell me is 20 days enough time, 30
4 days? Y'all tell me. I just don't want y'all to feel
5 pushed and I know y'all are very busy with your other cases
6 as well.

7 MR. LARRABEE: Your Honor, 20 or 30 is fine with
8 us. Obviously we'll take as much time as you give us but 20
9 or 30 is fine with us.

10 THE COURT: Okay. What about Counsel for the
11 applicant?

12 MS. PAAVOLA: Twenty is fine with us, Your Honor.

13 THE COURT: Okay, so we'll leave it then at 20
14 days and if I have any questions we can always have a WebEx
15 meeting or a conference call if I need to speak with you all
16 again. Okay. Thank you very much.

17 (Proceedings commenced at 3:30 PM)

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1 CERTIFICATE OF REPORTER

2 I, ALICE M. ADLER, official Court Reporter for the
3 7th Judicial Circuit of the State of South Carolina, do
4 hereby certify that the foregoing transcript is a true and
5 correct record of the recorded proceedings; that said
6 proceedings were transcribed to the best of my ability from
7 the audio recording and supporting information, and that I
8 am neither counsel for, related to, nor employed by any of
9 the parties to this case, and I have no interest, financial,
10 or other, in its outcome.

11
12
13 ALICE M. ADLER, CER, CVR

14 Date Submitted, 04\20\2026
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STATE OF SOUTH CAROLINA
COUNTY OF GREENVILLE

JOHN RICHARD WOOD
Applicant,

v.

THE STATE OF SOUTH CAROLINA.
Respondent.

IN THE COURT OF COMMON PLEAS

~~2022~~-CP-23-06219

APPLICATION
FOR POST-CONVICTION RELIEF

ENTERED COMPUTER

22 NOV 14 AM 10:26
Paul Wickensimer CDC BVL SC

1. Place of Detention: Broad River Correctional Institution – Secure Facility, Columbia, South Carolina.
2. Sentencing court: Greenville County Court of General Sessions located in Greenville, S.C.
3. Names of co-defendants (if any): Karen McCall.
4. The indictment number or numbers upon which and the offense or offenses for which sentence was imposed:

2001-GS-23-3106: murder; possession of a weapon during the commission of or attempted commission of a violent crime.
5. The date upon which sentence was imposed and the terms of the sentence:

A death sentence was imposed on February 16, 2002.
6. A finding of guilty was made after a plea of not guilty.
7. The applicant did appeal from judgment of conviction and sentence.
8. Applicant appealed to the South Carolina Supreme Court, which affirmed.
State v. Wood, 362 S.C. 135, 607 S.E.2d 57 (2004). Applicant filed a petition for writ of certiorari to the United States Supreme Court, which was denied. 125 S. Ct. 2942 (June 20, 2005).
9. Not applicable.

10 & 11. GROUND FOR RELIEF WITH SUPPORTING FACTS

- 10 & 11(a) Applicant's death sentence violates the Eighth Amendment to the United States Constitution and the corresponding provisions of the South Carolina Constitution because: (1) he is unable to rationally and/or factually understand the nature of the proceedings, what he was tried for, the reason for his punishment, or the nature of the punishment; and, (2) he lacks sufficient capacity or ability to rationally communicate with counsel. *Singleton v. State*, 313 S.C. 75, 84, 437 S.E.2d 53, 58 (1993). Applicant has significant and persistent serious mental illness, delusions and psychosis. He has been involuntarily hospitalized at Gilliam Psychiatric Hospital on multiple occasions, where he was diagnosed with schizophrenia. Dr. Susan Knight, a forensic psychologist, evaluated Applicant on four occasions from June 2013 to January 2016, and found his mental state "significantly decompensated" over this period of time. See September 19, 2022 letter from Dr. Knight, attached as Exhibit A. Dr. Knight concluded:

Although a full competency evaluation has not been conducted to date, Mr. Woods exhibits symptoms concerning competency. He has been unable to engage in rational case discussion due to significant thought disorganization; and his psychosis (e.g., delusions) have merged with case material, legal procedure and penalty. Thus, at the time of my contacts, he did not appear to have a rational or factual understanding of his present legal circumstance; nor the ability to rationally communicate with counsel. Given my observations, I recommend that his legal team pursue a comprehensive competency to be executed evaluation.

Id. Multiple mental health professionals employed by the South Carolina Department of Corrections and the Gilliam Psychiatric Hospital (including psychiatrists, psychologists and therapists) have documented similar observations about Applicant's mental state over the years. For example, the following represents merely a small sampling of staff notations:

- Applicant "stated that the Supreme Court of the U.S. overturned his case and he is waiting to be released."
- "He said the Supreme Court said he was supposed to be released from prison back in December."
- "He said he will get a shave and a haircut when he is released from SCDC. His room is disorganized and there is some trash on the floor. Inmate talks a lot about the court system and the Constitution. He said he has been found innocent and should be released from death row and prison fairly soon. He said U.S. Marshalls will release him and arrest most SCDC staff in the next week or two. Inmate is delusional."
- "Basically he states the U.S. Supreme Court ruled him innocent of this death

penalty conviction 10 months ago. He states the State of SC does not recognize the power of the U.S. Supreme Court. He believes he is being poisoned because he was able to prove the S.C. Supreme Court Justices and S.C. Attorney General Alan Wilson have committed treason and had been sentenced to death.”

- “He is grandiose, claims to be a U.S Ranger and a 300 year old immortal who ‘walks the spiritual realm.’ As an immortal, he has been given two glands, ‘melanoma and methanoma’ which are near his thyroid and make him immune to poisons. He also believes spells are being put on him.”
- “He continues to be delusional, believes his death sentence penalty has been overturned. . . . Says it would make little sense for him to try to kill himself because he was pardoned by the Supreme Court. He lacks insight into his illness in that he does not believe he is ill or that he needs medication. Psychotic symptoms are significant.”
- “He stated that he did not need medications as he was about to be released from prison. He indicated that the U.S. Marshals are coming this week to get him and that he will be free. He insists this to be true.”
- “He states he did not want to come see me because he does not want to be labeled insane because he should be released from SCDC. This is a chronic delusion.”
- “He stated that he was waiting for the U.S. Marshals to come pick him up as his case has been overturned by the USSC (this is one of his delusions).”
- “He stated, ‘I am only here for a couple of days and then I will be going home.’”
- “Mr. Wood has a clear history of serious and persistent mental illness (psychotic disorder).”
- “He said his appeals are complete and he ‘won, but the State is refusing to release me.’ He said he successfully sued the State for a million dollars and he hopes to collect that money soon. . . . He is delusional and believes he has been released from prison.”

As of this date, Applicant has been involuntarily committed to the psychiatric hospital on at least three occasions – a step that requires a probate court finding of serious mental illness by clear and convincing evidence. Applicant continues to experience delusions and psychosis, he is often out of touch with reality, and he is unable to rationally communicate with his counsel. He is therefore not competent to be executed. U.S. Const. amnd. VIII; S.C. Const. art. I, § 15; *Ford v. Wainwright*, 477 U.S. 399 (1986); *Panetti v. Quarterman*, 551 U.S. 930 (2007); *Singleton v. State*, 313 S.C. 75, 84, 437 S.E.2d 53, 58 (1993).

12. Applicant has filed a mandatory appeal to the State Supreme Court, an application for post-conviction relief to the Greenville County Court of General Sessions, and an appeal of the denial of his application for post-conviction relief to the State Supreme Court. Applicant has filed a petition for a writ of habeas corpus in federal court. He has also filed a second-

in-time application for post-conviction relief in the Greenville County Court of General Sessions, which was dismissed on procedural grounds.

13. All prior requested relief has been denied.
14. The ground set forth above has not been previously presented to this or any other court, state or federal.
15. Not Applicable.
16. This ground has not been previously presented because it was not ripe until Applicant's execution became imminent. *See Singleton*, 313 S.C. at 87; 437 S.E.2d at 60 ("Upon the issuance of an Order for Execution by this Court, the defendant or his/her guardian may apply for subsequent Post Conviction Relief on the basis of competency, pursuant to S.C Code Ann. § 17-27-20(a)(6) (1985). At the evidentiary hearing, the applicant, through competent evidence or expert testimony, must show by a preponderance of the evidence that he or she lacks the requisite competency for execution.").
17. Applicant was previously represented by counsel.
18. Applicant was represented at trial by John Mauldin, Jim Bannister and Rodney Richey. He was represented on direct appeal by Robert Dudek. Applicant was represented in his initial PCR proceeding by Bill Godfrey and Jim Brown. He was represented in federal habeas proceedings and in a second-in-time state PCR proceeding by Elizabeth Franklin-Best and Emily C. Paavola.
19. Applicant seeks an order from this Court finding him incompetent to be executed.
20. Applicant is under other sentences.

Respectfully submitted,

Emily C. Paavola

Lindsey S. Vann

Justice 360

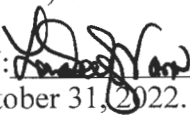
900 Elmwood Ave., Suite 200

Columbia, SC 29201

Emily@justice360sc.org

Lindsey@justice360sc.org

(803) 765-1044

BY: 

October 31, 2022.

Exhibit A

Susan C. Knight, Ph.D., ABPP
Licensed Clinical Psychologist
Board-Certified Forensic Psychologist
knight@apsforensic.com

Applied Psychological Services, LLC
1941 Savage Rd., Ste. 100A-606
Charleston, South Carolina, 29407
(843) 637-5729- Phone; (843) 410-2802-Fax

September 19, 2022

Emily Paavola, Esq.
Justice 360
900 Elmwood Ave #200
Columbia, SC 29201

Examinee: WOOD, John

DOB: April 8, 1967

Case: *State of South Carolina vs. John Richard Wood*

Dates of Evaluation: June 17, 2013; July 5, 2013 [Attempted]; October 7, 2014 [Attempted];
October 29, 2014; and January 13, 2016

Re: Competency Concerns

Dear Ms. Paavola:

Please find this letter regarding my concerns regarding Mr. Wood's competency to be executed pursuant to *Singleton v. State*, 437 S.E. 2d 53 (1993). I have evaluated Mr. Wood on four occasions, and two attempted occasions, beginning in June 2013, to January 2016. Evaluations were conducted to assess present mental state. During Mr. Wood's initial evaluation on June 17, 2013, he was evaluated at Lieber Correctional Institution. He presented as cooperative, but significantly disorganized in thought and speech. He perseverated on bizarre conspiracies involving his lineage and the government's role in his life. Rational communication was not possible, due to repeated injection of delusional material into case discussion. He was also significantly underweight due to beliefs others were poisoning him, and thus, restricting his food intake.

For the next two evaluation appointments, on July 5, 2013, and October 7, 2014, Mr. Wood refused to leave his cell for the visit. By all available data, he believed others were poisoning him, including his attorneys and other visitors, and therefore, declined to meet.

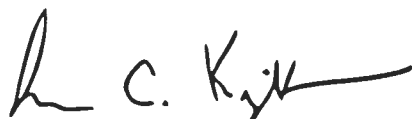
Due to his refusals, he was next seen at the Spartanburg County Courthouse, on October 29, 2014. He presented in much the same manner as in 2013, with rambling, disorganized speech, odd affect, and espousing bizarre content. He was unable to describe the nature or purpose of the immediate preceding hearing, responding with disjointed statements in a 'word salad' fashion. Rational or, even coherent, communication was not possible. My last contact with Mr. Wood occurred on January 13, 2016, at the Lexington County Courthouse. He was thin, malodorous, agitated, loud, and completely disorganized. He perseverated on being poisoned by multiple individuals and agencies. Meetings with him prior to, and immediately after, the court hearing were held. He was unable to engage in rational discussion regarding his case, the hearing, or any other topic. His verbalizations had deteriorated to random utterances, with words that were bizarre and disjointed, and again displaying 'word salad.' Thus, from my first contact in 2013, to the last contact in 2016, Mr. Wood had significantly decompensated with regard to mental state.

In reviewing his correctional records through October 2017, Mr. Wood was psychiatrically hospitalized at Gilliam Psychiatric Hospital in March 2016 and returned to Lieber in July 2016. He was diagnosed with Schizophrenia. It is my understanding from our communication that he has had multiple, subsequent admissions to Gilliam post July 2016.

Although a full competency evaluation has not been conducted to date, Mr. Woods exhibits symptoms concerning for competency. He has been unable to engage in rational case discussion due to significant thought disorganization; and his psychosis (e.g., delusions) have merged with case material, legal procedure and penalty. Thus, at the time of my contacts, he did not appear to have a rational or factual understanding of his present legal circumstance; nor the ability to rationally communicate with counsel. Given my observations, I recommend that his legal team pursue a comprehensive competency to be executed evaluation.

Please do not hesitate to contact me with any further questions or concerns regarding Mr. Wood's case. I can be reached at (843) 637-5729 or via email at knight@apsforensic.com.

Sincerely,

A handwritten signature in black ink, appearing to read "S. C. Knight", with a stylized flourish at the end.

Susan C. Knight, Ph.D., ABPP
Licensed Clinical Psychologist
Board-Certified Forensic Psychologist

STATE OF SOUTH CAROLINA
COUNTY OF GREENVILLE

JOHN RICHARD WOOD
Applicant,

v.

THE STATE OF SOUTH CAROLINA.
Respondent.

IN THE COURT OF COMMON PLEAS

Case No.:

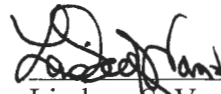
2022-CP-23-06219

22 NOV 14 AM 10:26
Paul Wickensimer COC GUL SC

CERTIFICATE OF SERVICE

The undersigned certifies that a copy of the Application for Post-Conviction Relief was served on counsel at the Office of the Attorney General by email to the AIS email addresses, pursuant to Section (b) of the Supreme Court of South Carolina's May 6, 2022 Order, this 31st day of October, 2022, upon the following:

Don Zelenka, dzelenka@scag.gov
Melody Brown, mbrown@scag.gov


Lindsey S. Vann

STATE OF SOUTH CAROLINA	)	
	)	IN THE COURT OF COMMON PLEAS
COUNTY OF GREENVILLE	)	
JOHN RICHARD WOOD,	)	
	)	C/A 2022-CP-23-06219
Applicant	)	*CAPITAL CASE*
	)	
vs	)	RETURN AND MOTION FOR ORDER
	)	FOR COMPETENCY EVALUATION
STATE OF SOUTH CAROLINA,	)	PURSUANT TO <i>SINGLETON V. STATE</i>
	)	
Respondent.	)	
	)	

Applicant, John Richard Wood (“Wood”), filed the captioned post-conviction relief (PCR) action on November 14, 2022. In the action, Wood challenges only his competency to be executed. Respondent acknowledges that “[t]he Eighth Amendment prohibits the State from executing an incompetent individual.” *State v. Motts*, 391 S.C. 635, 651, 707 S.E.2d 804, 812 (2011). Respondent further acknowledges that the issue may be raised in a PCR action. *Id.*, at 653, 707 S.E.2d at 813 (“In the event an inmate alleges he is incompetent after an order of execution is issued by this Court, the inmate may apply for PCR on the basis of competency, pursuant to section 17–27–20(a)(6) of the South Carolina Code.”).¹ Respondent submits, though, that Wood, relying solely on stale information, has not shown a sufficient basis to properly challenge his present competency to be executed. Even so, given the nature of the allegation, and review of information on past psychiatric treatment, Respondent submits that this Court should order an

¹ Further, the issue also appears ripe for disposition. Wood has exhausted his regularly available state and federal court remedies, and, but for the stay issued to allow this action to go forward, the Clerk of the Supreme Court of South Carolina would issue the notice of execution. *See generally Singleton v. State*, 313 S.C. 75, 77, 437 S.E.2d 53, 55 (1993) (PCR action challenging competency to be executed after exhaustion of ordinary remedies and issuance of a notice of execution); *see also Stewart v. Martinez-Villareal*, 523 U.S. 637, 643 (1998) (recognizing allegation of competency to be executed is “unquestionably ripe” following issuance of a notice of execution); Order, Supreme Court of South Carolina, November 17, 2022 (allowing a stay in this case in order for Wood to litigate the claim in this PCR action).

evaluation. In making the return² and moving for an evaluation under the *Singleton* standard, Respondent would respectfully show the Court:

FACTS OF THE CRIME

Wood is under a sentence of death for the murder of Trooper Eric Nicholson. At the time of his murder, Trooper Nicholson was a two-year veteran of the State Highway Patrol with a young wife, Misty. Around noon on December 5, 2000, Wood was on a moped near the Greenville area in the upstate of South Carolina when Trooper Nicholson saw him. The Supreme Court of South Carolina generally summarized the facts in the direct appeal opinion:

Trooper Eric Nicholson, while patrolling I-85 in the Greenville area, called to inform the dispatcher that he was going to stop a moped. After Nicholson activated his lights and siren, appellant, who was riding the moped, did not immediately stop. Two other troopers subsequently heard Nicholson scream on the radio and they rushed to the scene whereupon they found Nicholson had been shot five times. The driver's side window of Nicholson's car was completely shattered. Both of his pistols were secured in their holsters. Eight shell casings were found at the scene.

There were several eyewitnesses to Nicholson's murder. Witnesses recalled seeing a moped being followed by a trooper with activated lights and siren. The moped took the off-ramp to leave I-85 and then took a right down a frontage road. As the two vehicles got on the frontage road, the trooper sped up to get beside the moped and then veered to the left to stop at an angle against a raised median in order to block the moped's progress. The moped came to a stop close to the driver's side window.

Immediately upon stopping, appellant stood up over the moped and raised his arm towards the driver's side window of Trooper Nicholson's car. Some witnesses saw a weapon in appellant's hand and heard gunshots. After firing several shots in the driver's side window of Nicholson's car, appellant backed the moped up, turned it around, and fled at a high rate of speed.

² The referenced November 17, 2022 Order also assigned this matter to the Honorable Grace Gilchrist Knie. *See generally* S.C. Code Ann § 17-27-160 (providing special proceedings in capital PCR actions). Respondent previously requested an extension for making the return and opposing counsel had no objection. Judge Knie granted an extension and ordered the return would be due within 30 days of the receipt of copies of certain medical records. *See* Scheduling Order dated December 21, 2022. Those copies having been received, this return follows.

After the shooting, some concerned citizens (the Wheelers) chased appellant. Appellant entered a parking lot and then jumped into the passenger's seat of a Jeep, driven by a woman. The Wheelers subsequently called in the tag number to police.

Once law enforcement officers began chasing the Jeep, appellant opened fire on the pursuing officers. One officer was struck in the face by a bullet fragment. He survived the injury. After subsequently hijacking a truck, appellant was eventually stopped and taken into custody.

State v. Wood, 362 S.C. 135, 137-38, 607 S.E.2d 57, 58 (2004).

The trial record, as would be expected, shows a great deal more. Of the multiple shots Wood fired at Trooper Nicholson, the trooper was hit five times. One round cut a deep graze across the trooper's face from left to right. Another two went through his left upper arm. One of those bullets exited the arm and lodged itself in the front panel of the trooper's kevlar vest, while the other went into his side, where it passed through both lungs and the heart – the fatal gunshot wound. The fourth bullet entered the left upper back just below the shoulder, before it passed through the left lung and severed Trooper Nicholson's spinal column. The final round struck him in the left mid back, and passed through the left lung before damaging the vertebral column – a shot that could have been fatal on its own. Further, his body also showed small dot abrasions most certainly caused by glass particles from the bullets passing through the Crown Victoria's driver side window. (ECF # 42-2 at 114-135; 3 and 11).³ The gearshift lever in his cruiser was in neutral, probably indicating that he was shot before he could even finish putting the car in park. (ECF # 42-2 at 11-12; 44).

Wood escaped with the aid of his girlfriend Karen McCall.⁴ A chase ensued as news of the shooting went out over law enforcement communications. Anderson Sheriff Deputies Robert

³ The "ECF" reference is to the sequential header from the district court litigation as shown on the copies of the record provided in this matter.

⁴ Karen McCall was tried for multiple crimes associated with the shoot out and found guilty

Appell and Mike Jones reasoned Wood and McCall were heading to the Anderson address on the Jeep registration so they surmised a likely escape route and set up a watch in their respective cars. (ECF #42-5 at 33-35; 48-49; 68-69). Around 2:00 to 2:15 that afternoon, Appell saw the jeep. He moved behind it with lights and siren activated. Deputy Jones joined the chase. (ECF # 42-5 at 35-37; 49). Suddenly, the rear window of the Jeep came down as the passenger twisted his body around to face the rear and then opened fire. (ECF #42-5 at 37-38; 50). As Appell and Jones took evasive action, the Jeep was slowed by a tractor-trailer carrying a bulldozer, but Jones's car hit Appell's car. (ECF #42-5 at 38-40; 50-51).

Another deputy, Mike Grant, took over as the lead car. The gunman continued to fire, and suddenly Grant's car veered to the right as the back window shattered. Appell and Jones could see Grant slumped over in the driver's seat. Appell stopped to assist as Jones took over as lead car. Deputy Mike Grant was struck in the face by a bullet fragment, but survived. (ECF #42-5 at 40-41; 51-53). The tractor-trailer went in another direction, the Jeep went on, and Wood continued to fire wildly at the officers, striking the windshield and hood of Jones's cruiser. (ECF #42-5 at 52-55). Jones could see that the front right tire of the Jeep was flaming up, and the Jeep started trying to pull out in the opposite lane in a clear attempt to stop another vehicle. The Jeep ran a few cars off the road, and struck a van which was forced into a ditch. (ECF # 42-5 at 54).

Finally, the Jeep stopped at an angle in front of a Blue Ridge Electric service truck. The shooter got out of the passenger seat, and ran to the driver's side of the service truck and tried to get in, but his hand slipped off the handle. He then took a stance and fired off a number of rounds at the patrol cars. The shooter then got the door open, the employee got out, the shooter took the wheel of the truck, and the female driver of the Jeep got in on the passenger side. (ECF # 42-5 at

in Anderson County. She was sentenced to 25 years imprisonment. *See generally McCall v. Kendall*, 506 F. App'x 199, 200 (4th Cir. 2013).

54-56). The truck then took off south on Highway 187 at speeds of 100 mph or more with officers in pursuit. (ECF #42-5 at 56; 72).

As the truck continued, it eventually came to a police roadblock. Wood tried to avoid it, and turned finally going into a field being plowed by a farmer. The chase went through the field and to a dead end road. As Wood left the field, gunfire was exchanged between Wood and Anderson Chief Deputy Vick Wooten, who had tried to cut him off. (ECF # 42-5 at 57-58; 70-74).

The air unit involved advised Jones that the truck was headed down a dead end, and Jones came over a rise to see the truck making a three-point turn about a hundred yards ahead. Jones pulled to the side of the road, jumped out of his car with a shotgun, and stood in the middle of the road. (ECF #42-5 at 58-59). The truck came at Deputy Jones, who fired seven blasts with the shotgun before diving into his patrol car and shutting the door. (ECF #42-5 at 59-60). Sgt. Hamby had parked behind Jones and also fired at the truck. (ECF #42-5 at 60). A little farther back, Wooten placed his vehicle at an angle across the road, got behind it, and fired at the truck as it bore down on him. Suddenly, the truck's speed slowed and it coasted to a stop before Wooten's car. Wooten could see that the driver had blood on his face. (ECF #42-5 at 74-75). McCall testified that during this time she heard Wood inhale and slump over. (ECF #42-4 at 84).

Wooten and other officers ordered the female out of the passenger side and onto the ground behind the truck. Wooten ordered the shooter to raise his hands, but he only motioned a little bit. After a SWAT team arrived, Wood finally raised his hands and was taken into custody. (ECF #42-5 at 75-76). During his subsequent hospital stay, Wood volunteered his opinion to his guard that being shot was "the coolest feeling in the world. It's like being turned off like a light." (ECF # 42-8 at 38). In the utility truck, police found a Glock 9mm pistol, loaded and ready to fire, an empty magazine, and seven 9mm casings. (ECF #42-5 at 138-39). The weapon was matched to

casings and projectiles found at the frontage road scene, scenes during the subsequent chase, and in Trooper Nicholson's kevlar vest by comparison testing. (ECF #42-6 at 28-36).

PROCEDURAL HISTORY

In May 2001, a Greenville County Grand Jury indicted Wood for murder and possession of a weapon during the commission of a violent crime. The state gave notice of intent to seek the death penalty. Public Defender John I. Mauldin, with James Bannister, Esq., and Rodney Richey, Esq., represented Wood. Solicitor Robert M. Arial, Deputy Solicitor Betty C. Strom, and Assistant Solicitor Mindy Hervey were the prosecutors at trial. (ECF #41-1 at 23).

Voir dire began before the Honorable John W. Kittredge on February 4, 2002, after which a jury was qualified, selected and seated. On February 11, 2002, the jury convicted as charged. (ECF #42-7 at 20). The sentencing phase began on February 13, 2002. Judge Kittredge submitted the following statutory aggravating circumstance to the jury:

...the murder of a federal, state, or local law enforcement officer ... peace officer, former peace officer, corrections employee, former corrections employee, fireman or former fireman... during or because of the performance of his official duties.

(ECF #43-2 at 118-119).

The following statutory mitigating circumstances were submitted to the jury:

- (1) The defendant has no significant history of prior criminal conviction involving the use of violence against another person.
- (2) The murder was committed while the defendant was under the influence of mental or emotional disturbance.
- (3) The capacity of the defendant to appreciate the criminality of his conduct or to conform his conduct to the requirements of the law was substantially impaired.
- (4) The age or mentality of the defendant at the time of the crime.

(ECF #43-2 at 120).

On February 16, 2002, the jury returned a “unanimous finding ... beyond a reasonable doubt” of the “statutory aggravating circumstance: the murder of a federal, state or local law enforcement officer, peace officer or former peace officer, corrections employee or former corrections employee, or fireman or former fireman during or because of the performance of his official duties.” (ECF #43-3 at 25). The jury also returned a sentence of death, which the judge imposed that same day. (ECF #43-3 at 26; 30). Wood timely appealed.

Assistant Appellate Defender Robert M. Dudek, of the South Carolina Office of Appellate Defense, represented Wood on appeal. On December 6, 2004, after full briefing and oral argument, the Supreme Court of South Carolina issued an opinion affirming the convictions and death sentence on December 6, 2004. *State v. Wood, supra*. A timely petition for rehearing was denied on January 20, 2005. Wood also sought review by the Supreme Court of the United States but his petition was denied on June 20, 2005. Having concluded the direct appeal process, Wood next turned to post-conviction relief proceedings.

Post-Conviction Relief Proceedings

The Supreme Court of South Carolina appointed the Honorable Larry R. Patterson to hear Wood’s PCR action. Judge Patterson appointed James A. Brown, Esq., and Symmes Culbertson, Esq., to represent Wood. (See C/A 2005-CP-23-04737). Mr. Culbertson was subsequently replaced by Bill Godfrey, Esq. PCR counsel filed a final amended application on January 8, 2007 – the day the hearing on the application was originally to be held; however, that hearing was not held because Wood requested to drop his appeals. The proceedings were suspended for a competency evaluation, but eventually, Wood changed his mind and the collateral action continued (though the evaluation was still completed with no mental issues noted). (See ECF #45-2 at 98).

On February 9, 2007, counsel filed a second amendment to the PCR application, adding additional claims. The PCR judge held an evidentiary hearing on the claims from March 6th through March 8th, 2007. Following briefing from both sides, the judge filed an order denying relief on December 19, 2007. (ECF #45-2 at 92 through ECF#45-3 at 73). After the judge denied his timely motion to reconsider, (ECF #45-4 at 55-66), Wood appealed the denial of relief.

On November 5, 2010, appellate counsel filed a petition for a writ of certiorari in the Supreme Court of South Carolina. On October 31, 2012, the South Carolina Supreme Court denied the petition for writ of certiorari.

Filing of 28 U.S.C. 2254 Federal Habeas Corpus Action and Stay

On September 19, 2013, Wood filed his Petition for Writ of Habeas Corpus and also moved to stay the habeas proceedings so that he could litigate a successive state post-conviction relief action. On October 23, 2013, over opposition, the magistrate stayed the federal habeas proceedings. (C/A No. 0:12-cv-03532).

Successive State Post-Conviction Relief Action

Wood filed another action on September 26, 2013. The State moved to dismiss as improperly successive and time barred. The Honorable J. Mark Hayes, II, heard the State's motion to dismiss on January 13, 2016, then, on July 19, 2016, granted the motion, finding the action improperly successive and untimely. (C/A 2013-CP-23-5190).

28 U.S.C. 2254 Action District Court Disposition and Appeal

On November 2, 2017, after the magistrate lifted the stay, Respondents moved for summary judgment. The magistrate issued a report on October 1, 2018, and recommended granting the motion for summary judgment. On September 9, 2019, the Honorable David C. Norton, United States District Court Judge, issued an order adopting the magistrate's report and

recommendation. (C/A No. 0:12-cv-03532). After denial of his motion to alter or amend, Wood appealed to the Fourth Circuit Court of Appeals.

After review of Wood's initial brief, the Fourth Circuit granted a limited certificate of appealability on April 16, 2021. Ultimately, after briefing and argument, the Fourth Circuit affirmed the denial of relief. *Wood v. Stirling*, 27 F.4th 269 (4th Cir. 2022). The Supreme Court denied certiorari review on October 31, 2022.

ATTACHMENTS

Respondent attaches and incorporates by reference the following documents:

- (1) Appendix from 2005 PCR Appeal;
- (2) Supplemental Appendix from 2005 PCR Appeal;
- (3) October 31, 2012 Order, Supreme Court of South Carolina (denying petition, PCR appeal);
- (4) July 19, 2016 Order, Circuit Court Order (denying second PCR as successive and untimely);
- (5) September 9, 2019 Order, District Court of South Carolina (denying federal habeas relief);
- (6) March 2, 2022 Opinion, Fourth Circuit Court of Appeals (affirming denial of federal habeas relief);
- (7) October 31, 2022 Letter, Clerk Supreme Court of the United States (advising petition for review of the Fourth Circuit opinion was denied).

A copy of these documents were previously provided to the Court and opposing counsel at the appointment of counsel hearing held on December 16, 2022.

RESPONSE TO ALLEGATION

As stated above, "[t]he Eighth Amendment prohibits the State from executing an incompetent individual." *Motts*, 391 S.C. at 651, 707 S.E.2d at 812. Consequently, there is little

doubt that a claim an inmate is incompetent to be executed may be pressed in PCR. *Id.* However, Wood has only offered stale information (primarily from 2016 and 2017), and a letter from a psychologist expressing a “concern” based on prior interaction with Wood and a review of records going only through October 2017. This is insufficient. The mere assertion of a psychiatric/mental health condition, even if true, does not, standing alone, support a competency concern. *See Madison v. Alabama*, 586 U.S. ___, 139 S. Ct. 718, 728 (2019) (proper inquiry is limited “not [to] the diagnosis of such illness, but a consequence—to wit, the prisoner’s inability to rationally understand his punishment”). Wood has not offered any recent evaluation or contact by mental health professionals that would express a concern at this time. In sum, his present allegation based upon stale information appears insufficient to survive summary dismissal. *See generally Panetti v. Quarterman*, 551 U.S. 930, 934–35 (2007) (“Under *Ford [v. Wainwright]*, 477 U.S. 399, 409–410 (1986)], once a prisoner makes *the requisite preliminary showing* that his *current mental state* would bar his execution, the Eighth Amendment ... entitles him to an adjudication to determine his condition”) (emphasis added). Further, Wood appeared at the appointment of counsel hearing and interacted with the Court without issue.⁵ However, given the nature of the allegation, the stage of the litigation, and after review of additional mental health notes recently disclosed by the S.C. Department of Corrections, Respondent submits that this Court should order the S.C. Department of Mental Health (DMH) to conduct a *Singleton* competency evaluation.

⁵ Wood’s counsel advised that Wood was at that time receiving medication. However, medical records show in or around that time that Wood had actually stopped psychiatric medication. (SCDC Notes, 12/24/2022 encounter). It is unclear if the former medications are known to affect competency. An inmate cannot be forcibly medicated to *bring him to competency* for the purpose of execution. *Singleton*, 313 S.C. at 90, 437 S.E.2d at 62. However, if he is receiving medication voluntarily at the time of evaluation, Wood should be afforded the opportunity to weigh in on whether he would agree, for purpose of an evaluation, to be taken off the medication. As his privacy interest may be involved if the medication allegedly affects competency, *see id.*, at 89, 437 S.E.2d at 61, it is only logical that Wood should have input on this very personal decision.

Respondent further asserts the importance of showing the “current” mental state indicates the necessity of expediting proceedings. *See Hughes v. State*, 367 S.C. 389, 407, 626 S.E.2d 805, 814–15 (2006) (“the issue of ... mental competence is not immutable. A determination of mental competence may change from one period of time to another...”); *see also Motts*, 391 S.C. at 651, 707 S.E.2d at 812 (rejecting request for additional evaluation “immediately prior to his execution to assure that he has remained competent”). Respondent respectfully request this Court, in ordering the evaluation, set strict time lines for presentation of information and for the presentation of the report. This will work to make certain that our Supreme Court also has current information and may act on that information in order to guarantee ““basic fairness is observed.”” *Motts*, 391 S.C. at 655, 707 S.E.2d at 814 (“Whether the competency determination is made in the week or the month before the prisoner’s scheduled execution, the state is entitled to exercise discretion in creating its own procedures ‘[a]s long as basic fairness is observed.’ *Ford*, 477 U.S. at 427, 106 S.Ct. 2595 (Powell, J., concurring).”) (quoting *Coe v. Bell*, 209 F.3d 815, 824-25 (6th Cir. 2000).

MOTION FOR SCDMH EVALUATION UNDER SINGLETON STANDARD

Based on the foregoing, the State moves the Court for the appointment of independent designated DMH examiners to evaluate Wood’s present competency to be executed. The two-prong South Carolina test to determine competency to be executed is as follows:

[1] The first prong is the cognitive prong which can be defined as: whether a convicted defendant can understand the nature of the proceedings, what he or she was tried for, the reason for the punishment, or the nature of the punishment.

[2] The second prong is the assistance prong which can be defined as: whether the convicted defendant possesses sufficient capacity or ability to rationally communicate with counsel.

Singleton, 313 S.C. at 84, 437 S.E.2d at 58.

Following an evaluation, “an evidentiary hearing w[ill] be held at which the inmate w[ill]

be required to show by a preponderance of the evidence that he lacks the requisite competency for execution.” *Motts*, 391 S.C. at 653, 707 S.E.2d at 813.

Respondent respectfully requests the Court expedite both the evaluation and presentation of the report to this Court to ensure that the most current information may be considered and acted upon. *Motts, supra*.

STATUS CONFERENCE

This Court has ordered that a status conference be convened 30 days from the return in this matter. *See* Scheduling Order dated December 21, 2022.

CONCLUSION

WHEREFORE, having made its return, the State respectfully moves for an order directing DMH to conduct a *Singleton* evaluation, and order other such matters as would be necessary to accomplish the evaluation in a timely fashion after hearing from the parties at the February 2023 status conference.

Respectfully Submitted,

ALAN WILSON
Attorney General of South Carolina

DONALD J. ZELENKA
Deputy Attorney General

MELODY J. BROWN
Senior Assistant Deputy Attorney General

s/Melody J. Brown

By: _____
Post Office Box 11549
Columbia, South Carolina 29211
(803) 734-6305

January 30, 2023

ATTORNEYS FOR RESPONDENT

20 FEB 9 PM 3:56
Paul Wickensmer-000674.50

STATE OF SOUTH CAROLINA)	IN THE COURT OF COMMON PLEAS
COUNTY OF GREENVILLE)	
)	
)	
John Richard Wood,)	2022-CP-23-06219
)	*Capital PCR Action*
Applicant,)	
)	
v.)	AFFIDVAIT OF SERVICE
)	
State of South Carolina,)	
)	
Respondent.)	
_____)	

1. I am counsel for Respondent in the above-captioned action.
2. Regular communication by mail exists throughout the State of South Carolina and that this is a proper circumstance of service by mail.
3. I have this day served a copy of the **Return**¹, in the above-captioned matter on the following attorney via email and by depositing same in the United States mail, postage prepaid:

Emily C. Paavola, Esquire
Lindsey S. Vann, Esquire
JUSTICE 360
900 Elmwood Avenue, Suite 200
Columbia, South Carolina 29201
Emily@justice360sc.org
Lindsey@justice360sc.org

DATED this 30th day of January, 2023.

s/Melody J. Brown

Melody J. Brown
Senior Assistant Deputy Attorney General

¹ The attachments were hand-delivered to counsel and the Court at the appointment of counsel hearing on December 16, 2022 in the Spartanburg County Courthouse.

STATE OF SOUTH CAROLINA	)	
	)	IN THE COURT OF GENERAL SESSIONS
COUNTY OF GREENVILLE	)	
JOHN RICHARD WOOD,	)	
	)	C/A 2022-CP-23-06219
Applicant	)	*CAPITAL CASE*
	)	
vs	)	ORDER FOR COMPETENCY TO BE
	)	EXECUTED EVALUATION
STATE OF SOUTH CAROLINA,	)	PURSUANT TO <i>SINGLETON v. STATE</i>
	)	
Respondent.	)	
_____	)	

'25 MAR 10 AM 10:55
 JAY GRESHAM CDC CIVL SC

This matter comes before the Court by way of an Order of the Supreme Court of South Carolina dated November 17, 2022, that assigned the captioned capital post-conviction relief (PCR) action to the undersigned. In the action, Applicant challenges only his competency to be executed. At the appointment of counsel hearing held on December 16, 2022, and in its January 30, 2023 return, the State made a request for the appointment of independent designated examiners from the South Carolina Department of Mental Health (DMH) to evaluate Applicant's present competency to be executed. This action, however, had been by consent held in abeyance pending completion of the separate civil action regarding methods of execution given that the separate action effectively stayed notices of execution from being issued. *See Owens v. Stirling*, 443 S.C. 246, 904 S.E.2d 580 (2024), *reh'g denied* (Aug. 16, 2024). Therefore, as execution is now possible, the matter appears to be ripe for consideration. As such, this Court finds that a competency examination is appropriate at this time.

Standard for Competency to be Executed

The Supreme Court of the United States has held that the Eighth Amendment bars the execution of an incompetent defendant. *Ford v. Wainwright*, 477 U.S. 399 (1986). In *Panetti v.*

Quarterman, the Court addressed the federal standard for determining competency to be executed and concluded that *Ford* requires an inquiry into whether a prisoner possesses a *rational understanding* of the crime, the punishment, and the reason for the punishment (not mere awareness of those facts). 551 U.S. 930, 959 (2007) (“A prisoner’s awareness of the State’s rationale for an execution is not the same as a rational understanding of it.”). A prisoner’s mental state may become “so distorted by mental illness that his awareness of the crime and punishment has little or no relation to the understanding of those concepts shared by the community as a whole.” *Id.* The Court reiterated these principles in *Madison v. Alabama*, which instructed “[w]hat matters is whether a person has the ‘rational understanding’ *Panetti* requires – not whether he has any particular memory or any particular mental illness.” 586 U.S. 265, 275 (2019).

South Carolina law likewise bars the execution of an incompetent prisoner. The South Carolina test to determine competency to be executed is found in *Singleton v State*, 313 S.C. 75, 437 S.E.2d 53(1993). The two-prong test is as follows:

[1] The first prong is the cognitive prong which can be defined as: whether a convicted defendant can understand the nature of the proceedings, what he or she was tried for, the reason for the punishment, or the nature of the punishment.

[2] The second prong is the assistance prong which can be defined as: whether the convicted defendant possesses sufficient capacity or ability to rationally communicate with counsel.

Singleton, 313 S.C. at 84, 437 S.E.2d at 58. Failure of either prong is sufficient for a finding of incompetency. *Id.*

Taken together, the federal and state standards require this Court to determine:

- (1) whether Mr. Wood has a *rational understanding* of the nature of the proceedings, what he was tried for, the reasons for the punishment, or the nature of the punishment; and,
- (2) whether Mr. Wood can rationally communicate with counsel.

Following an evaluation, “an evidentiary hearing w[ill] be held at which the inmate w[ill] be required to show by a preponderance of the evidence that he lacks the requisite competency for execution.” *State v. Motts*, 391 S.C. 635, 653, 707 S.E.2d 804, 813 (2011).

THEREFORE, for this Court to assess Applicant’s claim,

IT IS ORDERED that:

A. Applicant shall be examined by two qualified examiners as designated by DMH. The examiners shall determine whether Applicant is competent under the standards set out in *Panetti v. Quarterman*, 551 U.S. 930 (2007), and its progeny, as well as *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993).

B. Counsel for the Applicant will provide their expert reports to the designated DMH examiners by May 1, 2025.

C. The designated examiners will require medical records, including specifically mental health records, in evaluating Applicant. The South Carolina Department of Corrections shall provide copies of Applicant’s medical and mental health records to the DMH designated examiners, counsel for Applicant, and counsel for the State, no later than May 1, 2025.

D. The parties are referred to the listing of material generally required for a competency evaluation in general sessions matters as reflected the SCCA 221 form. (Attachment 1). At a minimum, counsel for the State shall provide the following to the designated DMH examiners no later than May 1, 2025:

1. Indictment;
2. Pre-trial DMH evaluation;
3. Trial Transcript Guilt and Sentencing Phases, February 2002;
4. *State v. Wood*, Opinion, Supreme Court of South Carolina,

December 6, 2004;

5. PCR Transcript, March 2007;
6. PCR Order of Dismissal, December 2007;
7. *Wood v. Stirling*, Opinion and Order, District Court of South Carolina, September 9, 2019;
8. *Wood v. Stirling*, Opinion, Fourth Circuit Court of Appeals, March 2, 2022;
9. 2022 PCR application (with attachment).

Counsel for Applicant may submit additional materials by the same May 1, 2025 deadline and must also provide copies of those additional materials to counsel for the State.

The designated examiners may request from either counsel for Applicant or counsel for the State any additional records as may be necessary for completion of their evaluation and report. However, all parties must be copied on the requests, and counsel for both parties must receive copies of the requested materials so that each party has access to all the materials to be considered.

E. Following receipt of the relevant materials, including Applicant's expert reports, on May 1, 2025, the DMH examination may be scheduled. Prior notice to Applicant's appointed counsel, Applicant's guardian, and counsel for the State is required. DMH may contact counsel for Respondent to aid in arranging transportation if necessary. The Applicant's counsel and Applicant's court-appointed guardian may be present at the facility for the DMH evaluation but Applicant's counsel and Applicant's court-appointed guardian do not have the right to attend any clinical interview scheduled pursuant to this Order, nor does defendant have a constitutional right to compel counsel's attendance. State v. Hardy, 283 S.C. 590, 325 S.E.2d 320 (1985). The Court recognizes, however, that circumstances may arise through which the examining agency may request counsel's and/or guardian's attendance to facilitate the examination. The examining

agency may request counsel's and/or guardian's attendance in writing, and their level of participation shall be prescribed by the examining agency's written evaluation protocol.

F. The examination should be conducted as soon as practicable, but no later than 60 days from receipt of all materials. The written reports from the designated examiners shall be provided to the Court, Applicant's counsel, and the State's counsel, as soon as practicable after the evaluations are completed, but no later than 30 days thereafter. A modification of this timeline must be sought by DMH prior to its expiration and will be considered upon a showing of good cause.

IT IS SO ORDERED this 10 day of March, 2025.

Spartanburg, South Carolina

Grace Gilchrist Knie

Grace Gilchrist Knie
Circuit Court Judge by Special Assignment

Copy mailed to Attorneys Vann +
Parrish
Attorney General (MB) Judge Knie
on 3 / 10 / 2025.

STATE OF SOUTH CAROLINA)

COUNTY OF GREENVILLE)

John Richard Wood)

Plaintiff,)

vs.)

STATE OF SOUTH CAROLINA)

Defendant.)

IN THE COURT OF COMMON PLEAS

THIRTEENTH JUDICIAL CIRCUIT

CASE NO.: 2022-CP-23-06219

**MOTION AND ORDER INFORMATION
FORM AND COVERSHEET**

25 SEP 9 AM 9:39
JAN ORESMAN CJC CIVL SC

Plaintiff's Attorney:

R. Brandon Larrabee, Bar No. 104865

Address:

Office of the Attorney General

State of SC - P.O. Box 11549

Columbia, SC 29211-1549

Phone: (803) 734-6305 Fax _____

E-mail: brandonlarrabee@scag.gov Other: _____

Defendant's Attorney:

Emily C. Paavola, Bar No. 77855

Address:

900 Elmwood Ave., Suite 200

Columbia, SC 29201

Lindsey S. Vann, Esq. - Bar No. 101408

900 Elmwood Ave., Suite 200

Columbia, SC 29201

Phone: (803) 765-1044 Fax _____

E-mail: lindsey@justice360sc.org Other: _____

emily@justice360sc.org

☐ **MOTION HEARING REQUESTED** (attach written motion and complete SECTIONS I and III)

☒ **FORM MOTION, NO HEARING REQUESTED** (complete SECTIONS II and III)

☐ **PROPOSED ORDER/CONSENT ORDER** (complete SECTIONS II and III)

SECTION I: Hearing Information

Nature of Motion: _____

Estimated Time Needed: _____

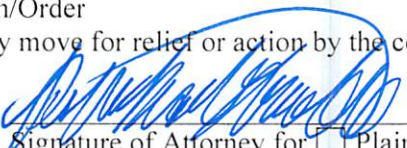
Court Reporter Needed: ☐ YES/☒ NO

SECTION II: Motion/Order Type

☒ Written motion attached

☐ Form Motion/Order

I hereby move for relief or action by the court as set forth in the attached proposed order.


Signature of Attorney for ☐ Plaintiff/☒ Defendant

9-5-25

Date submitted

SECTION III: Motion Fee

☐ PAID - AMOUNT: \$ _____

☐ EXEMPT:

(check reason)

☐ Rule to Show Cause in Child or Spousal Support

☐ Domestic Abuse or Abuse and Neglect

☐ Indigent Status ☐ State Agency v. Indigent Party

☐ Sexually Violent Predator Act ☒ Post-Conviction Relief

☐ Motion for Stay in Bankruptcy

☐ Motion for Publication ☐ Motion for Execution (Rule 69, SCRCP)

☐ Proposed order submitted at request of the court; or,
reduced to writing from motion made in open court per judge's instructions

Name of Court Reporter: _____

☐ Other: _____

JUDGE'S SECTION

☐ Motion Fee to be paid upon filing of the attached order.

☐ Other: _____

JUDGE CODE _____

Date: _____

CLERK'S VERIFICATION

Collected by: _____ Date Filed: _____

☐ MOTION FEE COLLECTED: \$ _____

☐ CONTESTED - AMOUNT DUE: \$ _____

SCCA 233 (11/2003)

STATE OF SOUTH CAROLINA

COUNTY OF GREENVILLE

John Richard Wood,
Applicant,

vs.

State of South Carolina,
Respondent.

IN THE COURT OF COMMON PLEAS

Case No. 2022-CP-23-06219

**MOTION FOR ADDITIONAL
INTERVIEW**

25 SEP 9 AM 9:38
JAY GRESHAM CDC GVL SC

The State does not dispute that, at the moment, all forensic evaluations have found John Richard Wood (Applicant) is not competent to be executed.¹ The effects of his condition seem to appear—at least according to some accounts—even when he is properly medicated.

However, in preparation for an interview by an expert for the South Carolina Department of Behavioral Health and Developmental Disabilities' Office of Mental Health, ordered as part of this action, Applicant's medication was stopped. According to records from the South Carolina Department of Corrections, the request to do so came from Applicant's guardian, Brie Rust (Guardian), who explained her decision against medical advice in reference to the pending interview.

To be clear, this motion is not about the State forcing Applicant to be medicated against his will. Instead, the State requests that the Court's expert be allowed to provide a reliable assessment regarding the severity of Applicant's condition that is on equal footing with those produced by Applicant's experts—one that gives a complete and accurate picture of Applicant's functioning when he is being provided medically appropriate treatment.

¹ Applicant suffers from schizophrenia. He speaks of beings named "Kevin" and "Behold," discusses his own immortality, and sometimes rambles incoherently.

RELEVANT MEDICAL BACKGROUND

In the summer of 2024, Applicant was admitted to Gillam Psychiatric Hospital. (SCDC Records, p. 144).² He was returned to Broad River Secure Facility on August 15, according to his inmate report on the SCDC website.³ Applicant was prescribed Risperdal for his schizophrenia.

Not long after Applicant returned to Broad River, Guardian began requesting reductions in his medication. On September 26, 2024, according to the records, Applicant's prescription was reduced. At that point, Applicant appears to have been taking 4 mg of Risperdal twice a day; afterwards, Applicant took a 2 mg tablet in the morning and a 4 mg tablet in the evening. The SCDC records indicate Applicant was agreeable to the change. (SCDC Records, pp. 60–61).

On February 11, 2025, Dr. Susan Knight did an interview with Applicant—her fifth, according to her report. (Report of Dr. Knight, p. 1).⁴ On February 24, 2025, Dr. Amanda Salas did an interview with Applicant—her fourth. (Report of Dr. Salas, p. 2).⁵

By March 23, 2025, Applicant was down to taking one 2 mg tablet of Risperdal every morning, something that Guardian agreed to. (SCDC Records, p. 45). A little more than two weeks later—on April 9—Applicant raised concerns about whether he was getting the correct number of

² In lieu of depositing Applicant's voluminous medical records from SCDC into the court's docket *en masse*, the State will summarize the relevant points about those records. The State will provide copies of these records to the Court upon request at a hearing and is willing to discuss appropriate safeguards for the use of those records with this Court and Applicant's counsel.

³ Available at <https://public.doc.state.sc.us/scdc-public/inmateDetails.do?id=%2000006005> (last visited Sept. 5, 2025).

⁴ Dr. Knight had previously interviewed Applicant on June 17, 2013; October 29, 2014; January 13, 2016; and December 6, 2017. She subsequently interviewed Applicant on April 15, 2025. (Report of Dr. Knight, p. 1).

⁵ Dr. Salas had previously interviewed Applicant on February 8, 2023; March 20, 2023; and October 11, 2023. She unsuccessfully attempted to interview Applicant by Zoom on July 22, 2024. (Report of Dr. Salas, p. 2).

doses of Risperdal. (SCDC Records, p. 39). The doctor increased Applicant's prescription to 2 mg tablets twice a day. (SCDC Records, p. 40).

However, on May 12, 2025, the Guardian again requested that Applicant's prescription be reduced to 2 mg a day. (SCDC Records, pp. 16–17). Three days later, the Guardian had another request.

Good afternoon, Mr. Wood's evaluation will be 6/18 with Dr. Matthew Gaskin[]s. He needs to be unmedicated for them to truly evaluate him and firmly[] understand his delusional beliefs about his execution. We can reassess after he is returned from DMH to ensure his comfort and everyone's safety.

(Report of Dr. Gaskins, p. 6).⁶ On May 27, after discussions among SCDC officials, Applicant's medication was removed against the medical advice of health-care professionals (SCDC Records, p. 14).

On June 18, 2025, Dr. Matthew Gaskins interviewed Applicant. (Report of Dr. Gaskins, p. 1). On July 5, on behalf of the South Carolina Department of Behavioral Health and Developmental Disabilities, Office of Mental Health, Dr. Matthew Gaskins issued an evaluation of Applicant finding that he currently lacks the capacity to be executed. However, Dr. Gaskins also noted his concerns about the decision to discontinue Applicant's medication.

We are unaware of any factual basis for this position by statute, case law, or SCDC policy. Treatment decisions by medical providers are done with the best medical interest of the patient and are not based on the legal standing of the patient. Intentionally keeping a person in a psychotic state worsens their mental health condition in terms of severity and making the condition harder to treat during subsequent episodes. This is in addition to putting them at risk for harming themselves and others. . . . While the records indicate that [Applicant] has a history of symptoms including delusions persisting while at higher doses of antipsychotic medications (i.e., the symptoms do not full resolve), it is unclear if he would have the capacity to be executed if his symptoms were appropriately

⁶ This message is also reproduced in the SCDC records.

addressed. Because we are unaware of a mechanism, policy, or legal precedent of forced medications in order to restore capacity to be executed, no opinion regarding restorability is offered at this time.

(Report of Dr. Gaskins, p. 13). Dr. Gaskins has informed the State that his opinion is that Applicant lacks the capacity to be executed when Applicant's effective dose of Risperdal is zero. Unlike Applicant's experts, Dr. Gaskins has no way of assessing the effects of medically appropriate treatment on Applicant's condition. Without such a comparison, the State is unable to challenge or test the reports of Applicant's experts. *See generally* Rule 705, SCRE.

DISCUSSION

In *Singleton v. State*, our supreme court laid out the process for handling an action for post-conviction relief based on the applicant's incompetency to be executed based on mental illness. *See generally Singleton*, 313 S.C. 75, 437 S.E.2d 53 (1993). There, the court held that "[i]f the PCR court finds the applicant incompetent in accordance with the standard adopted in this opinion, then the appropriate remedy is to issue a temporary stay of execution pending a mandatory review by this Court." *Singleton*, 313 S.C. at 87, 437 S.E.2d at 60. After the temporary stay is ordered, the State is required to establish the applicant to be competent before the stay can be lifted and an execution can proceed. *See id.*

Singleton also discusses the forced medication of inmates. It prohibits "forced medication solely to facilitate execution." *Id.* at 89, 437 S.E.2d at 61 (emphasis added). The *Singleton* Court held that forced medication can be required "where the inmate is dangerous to himself or to others, and then only when it is in the inmate's best medical interest." *Id.*

Singleton, though, does not contemplate the situation in this case. Here, Applicant was not forcibly medicated to facilitate his execution. He was already being medicated to treat a well-documented psychological condition. *Singleton* does not squarely address a situation where the

applicant's experts can evaluate the applicant under medically appropriate care and without, while denying the court's expert the same ability to compare.

In this action, the Court's expert has completed his evaluation while Applicant was not receiving medically appropriate care. A subsequent interview would allow the Court's expert to assess Applicant's condition when he is receiving medical care—with the results of that interview being whatever they are.

The State contends that three things need to be done: (1) the Court's expert should be allowed an additional interview while appropriate care is being provided; (2) the Court should receive an amended report from the expert; and (3) if the expert's opinion remains the same, the Court should set up a mechanism enabling the State to comply with its requirements under *Singleton*.

To effect that, the State asks this Court to issue an order allowing the South Carolina Department of Corrections to provide medically appropriate care to Applicant, as determined by the department's physicians, and allowing Dr. Gaskins to conduct a second interview with Applicant 180 days after the resumption of medical treatment. This would provide an appropriate baseline for future evaluations of Applicant.

Additionally, if the assessment of the expert remains the same—that Applicant is not competent to be executed—the State will request that the Court authorize the South Carolina Department of Corrections to permit an annual review of Applicant's medical records by the State so that the State may consider whether to make a new motion under *Singleton*.

CONCLUSION

For the reasons above, the State seeks an order from this Court:

1. Authorizing SCDC to provide medically appropriate medical care for Applicant, and allowing Dr. Gaskins to perform a second interview in 180 days' time;
2. Receiving an amended report from Dr. Gaskins within 30 days of his second interview;
3. Providing that the Court will schedule a hearing at the appropriate time to determine further action.

Respectfully Submitted,

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Attorney General

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By: s/R. Brandon Larrabee
R. BRANDON LARRABEE
ATTORNEYS FOR RESPONDENT

September 5, 2025.

STATE OF SOUTH CAROLINA)
COUNTY OF GREENVILLE)

IN THE COURT OF GENERAL SESSIONS

JOHN RICHARD WOOD,)
Applicant)
vs)
STATE OF SOUTH CAROLINA,)
Respondent.)
_____)

C/A 2022-CP-23-06219
CAPITAL CASE

PROOF OF SERVICE

25 SEP 9 AM 9:39
JAY GRESHAM COC GVL SC

I, **R. Brandon Larrabee**, of counsel for the Respondent, certify that I have served the within Motion for Additional Interview, by depositing a copy of the same via U.S. mail, first class, postage prepaid to his attorneys of record, Lindsey S. Vann, Esq. and Emily C. Paavola, Esq., Justice 360, 900 Elmwood Avenue, Suite 200, Columbia, South Carolina 29201.

I further certify that all parties required by Rule to be served have been served.

This 5th day of September, 2025.

s/ R. Brandon Larrabee

R. Brandon Larrabee
Assistant Attorney General

STATE OF SOUTH CAROLINA

COUNTY OF GREENVILLE

John Richard Wood,

Applicant,

vs.

State of South Carolina,

Respondent.

IN THE COURT OF COMMON PLEAS

Case No. 2022-CP-23-06219

**Order Denying Motion
for Additional Interview**

This matter is before the Court on the State's Motion for Additional Interview ("Motion") in this capital post-conviction relief proceeding related to Applicant's competency to be executed. This Court held a hearing on September 10, 2025, and heard arguments from each of the parties on the Motion. Present representing the State were Melody J. Brown, Esq., and R. Brandon Larrabee, Esq., and present representing Applicant were Emily C. Paavola, Esq., and Lindsey S. Vann, Esq. The hearing was conducted via WebEx by the consent of all parties. Applicant's presence was waived through Counsel for Applicant by his guardian Brie Rust. The hearing was on the record with Court Reporter Shannon E. McGilberry.

Relevant Procedural History:

Applicant, through legal counsel, filed a Post-Conviction Relief ("PCR") Application, alleging he is incompetent to be executed under *Ford v. Wainwright*, 477 U.S. 399 (1986), *Panetti v. Quarterman*, 551 U.S. 930 (2007), and *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993). Following some preliminary motions and proceedings, this Court ordered the Department of Mental Health ("DMH") to conduct an evaluation of Applicant's competency to be executed. Pursuant to this Court's order, the parties provided DMH with additional records in advance of the evaluation. These records included evaluation reports by Applicant's retained experts, Dr. Susan

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Knight and Dr. Amanda Salas, who both opined that Applicant is not competent to be executed.¹ On July 7, 2025, Dr. Matthew Gaskins of the South Carolina Department of Behavioral Health and Developmental Disabilities (“SCDBHDD” formerly “DMH”) issued a report on the evaluation conducted pursuant to this Court’s order.² Dr. Gaskins opined in his report that “Mr. Wood currently lacks the capacity to be executed”. Relevant to the Motion before the Court, Dr. Gaskins noted that Applicant was not taking antipsychotic medication at the time of his evaluation, and he offered “no opinion regarding restorability” of competency.

Following receipt of Dr. Gaskins’s report, the State requested additional time before this Court adjudicated the questions of Applicant’s competency to be executed to allow the State an opportunity to file a motion related to the evaluation. On September 5, 2025, the State filed a Motion for Additional Interview, requesting this Court “issue an order allowing the South Carolina Department of Corrections to provide medically appropriate care to Applicant, as determined by the department’s physicians, and allowing Dr. Gaskins to conduct a second interview with Applicant 180 days after the resumption of medical treatment.” Motion at 5. Following a hearing on the matter, the Court makes the following findings of fact and conclusions of law.

Findings of Fact and Conclusions of Law:

The Supreme Court of South Carolina has held “that the South Carolina constitutional right of privacy would be violated if the State were to sanction forced medication solely to facilitate execution.” *Singleton*, 313 S.C. at 89, 437 S.E.2d at 61. Although the State argues it is not seeking forced medication to facilitate Applicant’s execution, their request for appropriate medical

¹ The reports of Drs. Knight and Salas were provided to counsel for the State and this Court on May 1, 2025, at the same time they were provided to DMH.

² The report was provided to this Court on July 23, 2025, by Counsel for Applicant .

treatment to allow for an additional interview with Dr. Gaskins is exactly that. The State styles its request as "resumption of medical treatment," Motion at 5, but the hearing made clear that the State does not request resumption of any treatment aside from the antipsychotic medication Applicant previously received. This would require this Court to order (i.e. force) Applicant to be medicated for a reevaluation of his competency to be executed. *Singleton* explicitly held this type of forced medication would violate the constitutional right to privacy, and the Court is without authority to enter such an order.

Further, Applicant has been appointed a guardian by the Richland County Probate Court. According to the Probate Court's Order, The Honorable Judge Alexander S. Imgrund found by clear and convincing evidence that Applicant is incapacitated as defined by the South Carolina Probate Code. Accordingly, Judge Imgrund appointed Brie Rust as Applicant's permanent guardian with authority to make decisions about his medical and psychiatric care. Ms. Rust has found it to be in Applicant's best interest to not be medicated with antipsychotic medications. As a result, if this Court were to order Applicant medicated, it would have to override the order of the Probate Court, which this Court declines to do.

Finally, the State has argued that Applicant's own experts evaluated him while he was on antipsychotic medications, so Dr. Gaskins's evaluation is somehow incomplete without an interview "on equal footing." Motion at 1. This argument fails on three grounds. First, nothing in Dr. Gaskins's evaluation report indicates it is incomplete. Dr. Gaskins noted there is evidence in the medical records that Applicant may not be competent even when medicated, but he declined to offer his own opinion on that question under the circumstances of his evaluation. Dr. Gaskins, however, went on to explain that he was unaware of any legal basis to order medication to restore Applicant's competency to be executed. This aligns with *Singleton*, which does not allow for

forced medication to restore competency and does not require an evaluation of restorability. Second, no provision of the law allows for forced medication for the purposes of an interview "on equal footing." As *Singleton* recognizes: "Federal due process and our own South Carolina Constitution require that an inmate can only receive forced medication where the inmate is dangerous to himself or others, and then only when it is in the inmate's best medical interest." *Singleton*, 313 S.C. at 89, 437 S.E.2d at 61. There has been no suggestion that Applicant is a danger to himself or others, and the Court cannot determine what is in his best medical interest at this time. Third, both experts retained by Counsel for Applicant also saw him in an unmedicated state. Counsel for Applicant reported that the majority of their interviews with Applicant were conducted when he was not medicated on antipsychotic medications. Accordingly, there is no legal or factual justification for the request of the State.

Conclusion:

The Court acknowledges and appreciates the amount of research and preparation for the hearing by Counsel, as well as the professionalism of Counsel in their presentations to the Court. After consideration of the record, arguments made, and the applicable law, the State's Motion for Additional Interview filed with the Court on September 5, 2025, is respectfully denied. The Court will communicate with the parties in order to proceed with adjudication of Applicant's competency to be executed.

It is so ordered.

A handwritten signature in black ink, appearing to read "Grace Gilchrist Knie", written over a horizontal line.

Grace Gilchrist Knie
Circuit Court Judge
7th Judicial Circuit

Date: 9/23/25



State of South Carolina
The Circuit Court of the Seventh Judicial Circuit

Grace Gilchrist Knie
Judge

180 Magnolia Street
Spartanburg, SC 29306
Phone: (864) 596-2285
Fax: (864) 562-4234
gkniej@sccourts.org

September 23, 2025
Via USPS

Greenville County Clerk of Court
Attn: Common Pleas Division, Jan White
305 E. North Street
Greenville, SC 29601

Dear Clerk:

Please see the attached Order on John Richard Wood v. State 2022-CP-23-06219. Once you receive this Order and have clocked it in please email or mail me a copy for our records at gkniesc@sccourts.org.

Sincerely,

A handwritten signature in cursive script, reading "Ashley B. Searcy".

Ashley B. Searcy
Administrative Assistant to
The Honorable Grace G. Knie
S.C. Circuit Court Judge
7th Judicial Circuit

25 OCT 1 AM 9:14
IN GREENVILLE SC

STATE OF SOUTH CAROLINA	)	
	)	IN THE COURT OF COMMON PLEAS
	)	
COUNTY OF GREENVILLE	)	
	)	Case No. 2022-CP-23-06219
John Richard Wood,	)	*CAPITAL CASE*
Applicant,	)	
	)	
vs.	)	RESPONDENT’S PRE-TRIAL BRIEF
	)	
State of South Carolina,	)	
	)	
Respondent.	)	
_____	)	

This Court has scheduled a hearing regarding the competency of John Richard Wood for Tuesday, March 24, and Wednesday, March 25, 2026. At this point, all examinations of Wood for the purposes of this hearing have found that he is not competent be executed. The State does not argue that Wood can be executed at the current time. Nor does the State argue that he should be forcibly medicated solely in order to facilitate his execution. However, because the State still has an interest in carrying out Wood’s legally-imposed punishment, the State sets out legal authorities that it believes will be relevant to the hearing.

I. Under South Carolina and federal law, an inmate who is initially found incompetent to be executed can be re-evaluated. The remedy fashioned by this Court should accommodate that.

Based on the existing evaluations of Wood, the State concedes that Wood is not currently competent to be executed. But the State would emphasize that he is not *currently* competent to be executed. That is not the end of the inquiry for all time. The United States Supreme Court and our supreme court have both contemplated the possibility that an inmate who is currently incompetent to be executed may be re-evaluated and found competent.

For example, in his influential concurrence in *Ford v. Wainwright*, Justice Powell observed that in the case before the court—where the petitioner had been validly sentenced to death—“the

State has a substantial and legitimate interest in taking petitioner's life as punishment for his crime." 477 U.S. 399, 425, 106 S. Ct. 2595, 2610, 91 L. Ed. 2d 335 (1986) (Powell, J., concurring). Justice Powell emphasized that "the only question raised is not *whether*, but *when*, his execution may take place." *Id.* See also *id.* at 425 n.5, 106 S. Ct. at 2610 n.5 ("It is of course true that some defendants may lose their mental faculties once and never regain them, and thus avoid execution altogether. My point is only that if petitioner is cured of his disease, the State is free to execute him.").

Similarly, in *Singleton*, our supreme court reversed the PCR's courts decision to vacate a death sentence—even if, in that case, it seemed unlikely that the defendant could be cured through existing science. See *Singleton v. State*, 313 S.C. 75, 86, 437 S.E.2d 53, 59 (1993). One reason the court gave for that is the "potential for change" in scientific knowledge. *Id.* "To carve out a remedy which ignores the ebb and flow of medical science is to create a rule which potentially could be impossible to live with in years to come." *Id.*

Our supreme court also made it clear what the State would need to do to show that its interest in carrying out a petitioner's sentence is once again valid—to demonstrate that Justice Powell's "when" has arrived. If the petitioner is to be found competent on re-evaluation, the State will have the burden of showing that competency by the preponderance of the evidence. See *Singleton*, 313 S.C. at 87, 437 S.E.2d at 60. Further, while the State concedes that a petitioner cannot be forced to take psychiatric medications to restore competency for execution, the State would continue to take exception to any suggestion that *Singleton* allows medically appropriate care for an inmate to be turned on and off simply to forestall the possibility that the inmate will be found competent.

To allow the State to know whether Wood’s competency needs to be further explored, the State would request that it be authorized to review Wood’s medical records every six months. This timeframe is not conjured out of nothingness; it is provided for in a related matter in our state’s law. When a court finds a defendant unfit to stand trial in the first place, the State (as well as the defendant, his legal guardian, his counsel, or the court itself) can ask the court to consider the issue again. *See* S.C. Code Ann. § 44-23-450 (West). There are limits, though; “any petition that is filed within six months after the initial finding of unfitness or within six months after the filing of a previous petition under this section shall be dismissed by the court without a hearing.” *Id.* In other words, in a similar circumstance—though not exactly analogous—the General Assembly has found that six months is an appropriate amount of time to wait before once again checking for competency. In any event, such a review would likely lead to Wood being examined at most once a year, if that often.¹

However, the South Carolina Department of Corrections has informed the State that it is unwilling to provide Wood’s records to the Attorney General’s Office absent a court order. As a result, the State would request that this Court enter an ongoing order allowing for the State to receive Wood’s medical records—under set standards for confidentiality—every six months.

Further, it has come to light that a guardian has been appointed to Wood as a result of a petition by counsel in these proceedings. Accordingly, given the intertwined nature of the guardian appointment and this matter, the State also request the Court order a copy of the guardian’s mandatory reports to the Probate Court be provided to counsel for the State and the South Carolina

¹ In its previous motion requesting an additional interview for this Court’s expert, the State noted that it would request an annual review if the expert’s opinion did not change. The standard offered here is grounded in state law.

Department of Corrections psychiatric caregivers to facilitate full disclosure of all facts that may affect future evaluations of Wood's mental state.

II. While South Carolina law clearly prohibits the forced medication of an inmate to facilitate his execution, *Singleton* is not an absolute prohibition on medically restored competency from being taken into consideration.

This will also help to avoid one of the issues that has already arisen in this litigation—that of forced medication. *Singleton* says what it says, but it also does not say what it does not say. *Singleton* does not require that an inmate not ever be medicated, or that his state of mind while medicated cannot be taken into account in determining his competency; it does prohibit state officials from forcibly medicating an inmate with the purpose of rendering him competent to be executed.

In *Singleton*, our supreme court made clear what issue it was considering, at least in reference to the medication of prisoners: “whether the State can administer, by force, medication to treat Singleton's incompetence in preparation for execution” *Singleton*, 313 S.C. at 87, 437 S.E.2d at 60. And its holding on this issue was just as clear. “We hold that the South Carolina Constitutional right of privacy would be violated if the State were to sanction forced medication *solely to facilitate execution*.” *Id.* at 89, 437 S.E.2d at 61 (emphasis added). *See also id.* at 90, 437 S.E.2d at 61 (“On these facts, the medical ethical position reinforces the mandates of our constitutional law, which dictate that we prohibit the State's use of antipsychotic drugs solely to facilitate an execution.”).

The reason for the medication—whether it is being administered to prepare the inmate for execution—matters. And we know this because *Singleton* itself allows for an inmate to be forcibly medicated under certain circumstances. *See id.* at 89, 437 S.E.2d at 61 (“Federal due process and our own South Carolina Constitution require that an inmate can only receive forced medication

where the inmate is dangerous to himself or to others, and then only when it is in the inmate's best medical interest.”). As noted above, *Singleton* also provides that an inmate may be executed when he is found competent after re-evaluation.

The simplest interpretation of the holding of *Singleton*, then, is that it has two elements. An inmate cannot be executed when his competency returns because (1) he is involuntarily medicated; and (2) he is medicated with the purpose of restoring his competency. If he is voluntarily medicated for treatment, or involuntarily medicated for permissible purposes, and as a function of that regains competency, that renewed competency² can be a factor to consider in whether the inmate can be executed. *See id.* at 90, 437 S.E.2d at 62 (“[W]e find that justice can never be served by forcing medication on an incompetent inmate *for the sole purpose* of getting him well enough to execute.” (emphasis added)).

Respectfully Submitted,

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Attorney General

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² For example, if the inmate regains competency while receiving medication, and then maintains competency after the medication is removed or is no longer administered involuntarily, the fact that medication for a permissible purpose helped facilitate that should not prevent his sentence from being carried out.

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March 20, 2026.

By: s/R. Brandon Larrabee
R. BRANDON LARRABEE
ATTORNEYS FOR RESPONDENT

STATE OF SOUTH CAROLINA	)	
	)	IN THE COURT OF COMMON PLEAS
COUNTY OF GREENVILLE	)	
	)	Case No.: 2022-CP-23-06219
JOHN RICHARD WOOD	)	
<i>Applicant</i>	)	APPLICANT'S PRE-TRIAL BRIEF
	)	
v.	)	
	)	ENTERED COMPUTER
STATE OF SOUTH CAROLINA	)	
<i>Respondent</i>	)	
_____	)	

This Court is assigned to the capital post-conviction action of the above Applicant, John Richard Wood, which challenges his competency to be executed pursuant to state and federal law. See U.S. Const. amend. VIII; S.C. Const. art. I, § 15; *Ford v. Wainwright*, 477 U.S. 399 (1986); *Panetti v. Quarterman*, 551 U.S. 930 (2007); *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993).

Applicant is represented by Emily C. Paavola and Allison Franz of Justice 360. The State is represented by Melody Brown and Brandon Larrabee of the South Carolina Attorney General's Office. At his counsel's request, Mr. Wood was evaluated by two separate examiners: Dr. Amanda Salas, a forensic psychiatrist; and Dr. Susan Knight, a forensic psychologist. At the State's request, this Court ordered a third examination to be conducted by the Department of Mental Health. Pursuant to that order, Dr. Matthew Gaskins, a psychiatrist, completed an evaluation of Mr. Wood on behalf of DMH. All three examiners independently evaluated Mr. Wood and determined that he is not competent to be executed. Their written reports have been distributed, and the parties have stipulated that they should be admitted into the record before this Court. An evidentiary hearing is scheduled to take place by WebEx on March 24, 2026.

Applicant, by and through undersigned counsel, hereby submits his Pre-trial Brief pursuant

to South Carolina Rules of Civil Procedure 16(c).

I. STATEMENT OF FACTS

A. *Pre-hearing Procedural History*

Wood was sentenced to death by a jury in the Greenville County Court of General Sessions for the murder of Trooper Eric Nicholson, a State Highway Patrol officer. He was tried and convicted in February of 2002. Wood's convictions and death sentence were affirmed on direct review by the South Carolina Supreme Court. *State v. Wood*, 362 S.C. 135, 607 S.E.2d 57 (2004), *cert. denied*, 545 U.S. 1132 (2005). His applications for state post-conviction and federal habeas relief were denied. *See Wood v. Stirling*, 27 F.4th 269, 275, 280 (4th Cir. 2022). Having exhausted all avenues for collateral review, the question of Wood's competency to be executed is now ripe. *See Stewart v. Martinez-Villareal*, 523 U.S. 637, 645 (1998) (stating a claim of incompetency to be executed is ripe when the defendant becomes eligible for an execution warrant); *Panetti v. Quarterman*, 551 U.S. 930, 946 (2007) (same); *Singleton v. State*, 313 S.C. 75, 87, 437 S.E.2d 53, 60 (1993) (same).

Since the date of his conviction, Wood has resided on death row within the South Carolina Department of Corrections (SCDC). As noted by all three expert examiners, over the course of his now twenty-four-year incarceration, Wood's SCDC records document a pervasive history of psychological deterioration. *See, e.g.*, Report of Dr. Salas at 4 (noting "a chronic, persisting and active course of schizophrenia that has been present and progressively worsening over time."); Report of Dr. Knight at 1 (describing "a worsening of psychosis," "repeated diagnoses of Schizophrenia," and well-documented symptoms that "greatly impair rational and factual case comprehension, and preclude rational communication with his attorneys."); Report of Dr. Gaskins

at 11 (“The records and his presentation confirm these symptoms have been present for multiple decades.”); *id.* at 13 (noting the “ample evidence to the genuineness of Mr. Wood’s mental health condition”).

Wood has been involuntarily committed to the Gilliam Psychiatric Hospital on four occasions over the past decade, following determinations by the probate court that he suffers from mental illness by clear and convincing evidence. S.C. Code § 44-17-580. The probate court ultimately appointed Ms. Brie Rust to act as Wood’s permanent legal guardian, finding by clear and convincing evidence that Wood is “incapacitated” within the meaning of S.C. Code § 62-5-101(13), because “his diagnosis impairs him such that he cannot meet the essential requirements for his physical health, safety, or self-care, or manage his property or financial affairs, or provide support.” Order Appointing Permanent Guardian (March 4, 2025).

Given the overwhelming nature of the documented evidence and based on undersigned counsel’s own observations of Wood’s symptoms of psychosis and inability to communicate rationally about the circumstances of his case and the nature of his punishment, counsel for Wood filed a PCR application raising a competency-to-be-executed claim on October 31, 2022.

B. *Competency Proceedings*

On November 11, 2022, the South Carolina Supreme Court assigned this matter to this Court for a determination on the merits. In its Return, the State asserted that “this Court should order the S.C. Department of Mental Health (DMH) to conduct a *Singleton* competency evaluation.” Return at 10. After a brief stay pending the outcome of litigation regarding South Carolina’s methods of execution in *Owens v. Stirling*, this Court ultimately granted the State’s request and entered an order directing that such an evaluation be scheduled at any time after

disclosure of Wood's expert reports on May 1, 2025. Order For Competency to Be Executed Evaluation (March 10, 2025).

Pursuant to the Court's instructions, Wood produced his expert reports on the prescribed date. The DMH evaluation took place on June 18, 2025, and the parties received a copy of Dr. Gaskin's report on July 7, 2025, which was forwarded to the Court. This Court denied the State's request for an order requiring Dr. Gaskins to conduct a second interview after 180 days of forced medication. *See Order Denying Motion for Additional Interview* (Sept. 23, 2025) at 2.

II. RELEVANT LEGAL PRINCIPLES

A. Competency Standard.

As this Court has previously noted, the standard this Court must apply in determining Mr. Wood's competency claim is:

(1) whether he lacks the capacity to rationally and factually understand the nature of the proceedings, what he was tried for, the reasons for the punishment, or the nature of the punishment; and

(2) whether he lacks sufficient capacity or ability to rationally communicate with counsel.

Ford v. Wainwright, 477 U.S. 399 (1986); *Panetti v. Quarterman*, 551 U.S. 930, 946 (2007); *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993). Failure of either prong renders an individual incompetent to be executed. *Ford*, *Singleton*, and their progeny illuminate several additional principles that this Court must apply.

1. *A prisoner who possesses a delusional belief that he cannot be executed is not competent.*

In *Ford*, the United States Supreme Court held that the Eighth Amendment forbids the execution of an incompetent prisoner. 477 U.S. 399 (1986). Alvin Bernard Ford was convicted of

murder in 1974 and sentenced to death. At the time of his trial, there was "no suggestion that he was incompetent at the time of his offense, at trial, or at sentencing." *Id.* at 401. However, after Ford went to prison, he began exhibiting "gradual changes in behavior," eventually resulting in bizarre, persecutory delusions. For example, Ford believed people were tormenting him in prison and that his family members had been taken hostage. He also exhibited grandiose delusions that he had special powers, such as the authority to fire prison officials and the belief that he had appointed nine new justices to the Florida Supreme Court. *Id.* at 402. An expert examiner concluded that Ford "sincerely believed that he would not be executed because he owned the prisons and could control the Governor through mind waves." *Id.* at 403.

The South Carolina Supreme Court addressed a similar situation in the case of Freddie Singleton, who had a delusional belief that he could not die because he possessed special powers. 313 S.C. 75, 84, 437 S.E.2d 53, 58. The Court concluded that Singleton was "incapable of meeting even a modicum of competency" because he was "completely unaware that he is capable of dying in the electric chair [due to] his reliance on protective 'genes.'" *Id.*

2. *A prisoner who cannot rationally communicate with counsel is not competent.*

A "pivotal issue" in *Singleton* was whether the lower court erred in adopting the American Bar Association's standard of incompetency, which included an "assistance prong" aimed at the ability to communicate with counsel. 313 S.C. at 79, 437 S.E.2d at 56. The South Carolina Supreme Court affirmed the PCR court's decision to adopt a two-pronged test but concluded that the test should be "tempered with the rational communication element for the assistance prong." *Id.* at 84, 437 S.E.2d at 58. The Court adopted a "slightly modified standard in South Carolina, which satisfies the mandates of federal due process, the common law, and the South Carolina

Constitution.” *Id.* Thus, *Singleton* held that South Carolina’s two-pronged test for competency to be executed includes an “assistance prong,” defined as “whether the convicted defendant possesses sufficient capacity or ability to rationally communicate with counsel.” *Id.* Failure of either prong is sufficient for a finding of incompetency. As *Singleton* was “incapable of rational communication” with his counsel, he did not meet the assistance prong.

3. *Mere factual understanding is not enough for competency.*

In *Panetti v. Quarterman*, the Supreme Court held that *Ford* requires an inquiry into whether a prisoner possesses a *rational understanding* of the crime, the punishment, and the reason for the punishment (not mere awareness of those facts). 551 U.S. 930, 959 (2007) (“A prisoner’s awareness of the State’s rationale for an execution is not the same as a rational understanding of it.”). A prisoner’s mental state may become “so distorted by mental illness that his awareness of the crime and punishment has little or no relation to the understanding of those concepts shared by the community as a whole.” *Id.* Scott Panetti factually understood that he had been found guilty of murder, that he was facing execution, and that he would die if executed. However, he possessed a delusional belief that the stated reason for his execution was a “sham.” Panetti believed the State’s true motivation for his execution was to prevent him from preaching the Gospel. *Id.* at 955.

Panetti was ultimately found incompetent by the District Court for the Western District of Texas because he “lack[ed] a rational understanding of the connection between his offense and his sentence of death. His execution would therefore violate the Eighth Amendment’s prohibition on cruel and unusual punishment.” *Panetti v. Lumpkin*, 2023 WL 6348877 (W.D. Texas Sept. 27, 2023).

The United States Supreme Court reiterated the importance of a rational understanding in *Madison v. Alabama*, which addressed the question of whether a prisoner could be incompetent to be executed because he suffered from dementia. 586 U.S. 265 (2019). The Court concluded that a rational understanding is what matters, explaining:

The standard has no interest in establishing any precise *cause*: Psychosis or dementia, delusions or overall cognitive decline are all the same under *Panetti*, so long as they produce the requisite lack of comprehension. . . . The *Panetti* standard concerns, once again, not the diagnosis of such illness, but a consequence—to wit, the prisoner’s inability to rationally understand his punishment.

Id. at 728.

4. Forced medication is not permitted.

State and federal law are clear that inmates may not be forcibly medicated for the purpose of making them competent to be executed. Relying on *Washington v. Harper*, 494 U.S. 210 (1990), the *Singleton* Court explained that “the Due Process clause permits forced treatment with antipsychotic drugs only where the inmate is dangerous to himself, or to others, and the treatment is in his medical interest.” 313 S.C. 75, 87, 437 S.E.2d 53, 60 (1993). In addition, as a matter of state constitutional law, *Singleton* held that “the South Carolina Constitutional right of privacy would be violated if the State were to sanction forced medication solely to facilitate execution.” *Id.* at 88, 437 S.E.2d at 61. In sum, “[f]ederal due process and our own South Carolina Constitution require that an inmate can only receive forced medication where the inmate is dangerous to himself or to others, and then only when it is in the inmate’s best medical interest.” *Id.* Forced medication for the purpose of assessing competency to be executed is legally barred.

B. Burden of Proof

Pursuant to *Singleton*, as in all post-conviction proceedings, the applicant bears the burden of proving his allegations by a preponderance of the evidence. 313 S.C. at 87, 437 S.E.2d at 60. A preponderance of the evidence means “proof which leads the trier of fact to find that the existence of the contested fact is more probable than its nonexistence.” *State v. Grooms*, 343 S.C. 248, 254, n.5, 540 S.E.2d 99, 102, n.5 (2000) (quoting 2 McCormick on Evidence § 339, 5th ed. (1999)).

C. Remedy

Upon a finding by this Court that Mr. Wood is incompetent, *Singleton* specifies that “the appropriate remedy is to issue a temporary stay of execution pending a mandatory review by [the South Carolina Supreme Court]. 313 S.C. at 87, 437 S.E.2d at 60. After the stay is affirmed by the South Carolina Supreme Court, the burden will shift to the State to move for a hearing if the State believes it can show, by a preponderance of the evidence, that Mr. Wood is no longer incompetent. *Id.*

Respectfully submitted,

s/Emily C. Paavola

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STATE OF SOUTH CAROLINA)
COUNTY OF GREENVILLE)

IN THE COURT OF COMMON PLEAS
FOR THE THIRTEENTH JUDICIAL CIRCUIT

John Richard Wood,)
Applicant,)

Case No. 2022-CP-23-06219

vs.)

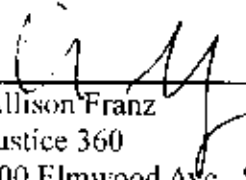
CERTIFICATE OF SERVICE

State of South Carolina,)
Respondent.)

The undersigned hereby certifies that a copy of Applicant's Pretrial Brief was served via email, this 16th day of March 2026, upon the following at the email addresses provided in the Attorney Information System:

Melody Brown, Esq.
S.C. Attorney General's Office
mbrown@scag.gov

Brandon Larrabee, Esq.
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Allison Franz
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March 16, 2026

The Honorable Jay Gresham
Greenville County Clerk of Court
305 E. North St # 202
Greenville, SC 29601

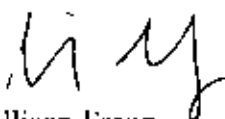
Re: John Richard Wood v. State, No. 2022-CP-23-06219

Dear Mr. Gresham:

Enclosed for filing, along with proof of service, please find the original and one copy of Applicant's Pretrial Brief in the above-captioned matter. Please clock-in the extra copy and return to our office in the enclosed self-addressed stamped envelope.

Thank you for your attention to this matter. If you have any questions, please feel free to contact our office.

Sincerely,



Allison Franz
Counsel for Applicant

Enclosure

STATE OF SOUTH CAROLINA	)	
	)	IN THE COURT OF COMMON PLEAS
COUNTY OF GREENVILLE	)	
	)	Case No. 2022-CP-23-06219
John Richard Wood,	)	*CAPITAL CASE*
Applicant,	)	
	)	
vs.	)	[PROPOSED] ORDER FINDING
	)	APPLICANT NOT COMPETENT TO
State of South Carolina,	)	BE EXECUTED, AND PROVIDING
	)	PROCEDURES FOR LITIGATION
Respondent.	)	
_____	)	

This case is before this Court following the South Carolina Supreme Court’s order on November 17, 2022, assigning John Richard Wood’s PCR application to the undersigned. Wood’s Application for Post-Conviction Relief argued that carrying out his sentence would violate the Eight Amendment’s ban on cruel and unusual punishment because Wood is mentally incompetent to be executed.

This case is in an unusual posture, as Wood and the State agree—and this Court, in turn, agrees—that he is not currently competent to be executed. However, Wood and the State diverge on what comes next. The State argues that, because it has the burden to return to court if it believes Wood regains competence to be executed, it should have access to Wood’s medical records and that Wood or his counsel should be ordered to provide the reports of Wood’s guardian to the probate court overseeing that guardian. Wood objects to this, arguing that his privacy would be violated by the State’s proposal on his medical records and the guardianship was sought to pursue Wood’s best interests.

This Court agrees with the State. Taking into account the background of these proceedings and the State’s burden to demonstrate that Wood has regained competence if he has done so, this Court will order that the South Carolina Department of Corrections allow the State to review

Wood's medical records once every six months. Additionally, the Court orders Wood—or his counsel—to provide the State with the guardian reports no later than one month after they are filed with the probate court.

PROCEDURAL HISTORY

In its ruling affirming Wood's conviction, the South Carolina Supreme Court recounted Wood's crime with as much detail as will be necessary for these proceedings.

Trooper Eric Nicholson, while patrolling I-85 in the Greenville area, called to inform the dispatcher that he was going to stop a moped. After Nicholson activated his lights and siren, appellant, who was riding the moped, did not immediately stop. Two other troopers subsequently heard Nicholson scream on the radio and they rushed to the scene whereupon they found Nicholson had been shot five times. The driver's side window of Nicholson's car was completely shattered. Both of his pistols were secured in their holsters. Eight shell casings were found at the scene.

There were several eyewitnesses to Nicholson's murder. Witnesses recalled seeing a moped being followed by a trooper with activated lights and siren. The moped took the off-ramp to leave I-85 and then took a right down a frontage road. As the two vehicles got on the frontage road, the trooper sped up to get beside the moped and then veered to the left to stop at an angle against a raised median in order to block the moped's progress. The moped came to a stop close to the driver's side window.

Immediately upon stopping, appellant stood up over the moped and raised his arm towards the driver's side window of Trooper Nicholson's car. Some witnesses saw a weapon in appellant's hand and heard gunshots. After firing several shots in the driver's side window of Nicholson's car, appellant backed the moped up, turned it around, and fled at a high rate of speed.

After the shooting, some concerned citizens (the Wheelers) chased appellant. Appellant entered a parking lot and then jumped into the passenger's seat of a Jeep, driven by a woman. The Wheelers subsequently called in the tag number to police.

Once law enforcement officers began chasing the Jeep, appellant opened fire on the pursuing officers. One officer was struck in the face by a bullet fragment. He survived the injury. After subsequently

hijacking a truck, appellant was eventually stopped and taken into custody.

The jury convicted appellant of murder and possession of a weapon during the commission of a violent crime and sentenced him to death.

State v. Wood, 362 S.C. 135, 137–38, 607 S.E.2d 57, 58 (2004).

On December 6, 2004, the South Carolina Supreme Court affirmed Wood’s conviction on direct appeal. *See Wood, supra*. The United States Supreme Court denied Wood’s petition for a writ of certiorari six-and-a-half months later. *See Wood v. South Carolina*, 545 U.S. 1132 (2005). Wood then pursued his first state post-conviction action, which ultimately concluded when the South Carolina Supreme Court denied Wood’s petition for writ of certiorari on October 31, 2012.

Wood next moved to federal habeas. The United States District Court for the District of South Carolina issuing an order on December 14, 2012, to stay Wood’s execution while his federal claims were litigated. The District Court, the Honorable David C. Norton presiding, adopted a report and recommendation granting a motion for summary judgment to the Commissioner of the South Carolina Department of Corrections and other respondents and denying Wood’s habeas petition. *Wood v. Stirling*, No. 0:12-CV-3532-DCN, 2019 WL 4257167 (D.S.C. Sept. 9, 2019). The United States Court of Appeals for the Fourth Circuit affirmed in a published opinion issued March 2, 2022. *See* 27 F.4th 269 (4th Cir. 2022). On October 31, 2022, the United States Supreme Court denied Wood’s petition for writ of certiorari on that decision. *See* 143 S. Ct. 382 (Mem).

At that point, Wood’s counsel asked the South Carolina Supreme Court for a stay of execution to allow for the issue of Wood’s competency to be considered and to account for the ongoing litigation challenging the state’s methods of execution.¹ On November 17, 2022, the South

¹ The South Carolina Supreme Court would hold the methods to be constitutional permissible in *Owens v. Stirling*, 443 S.C. 246, 904 S.E.2d 580 (2024).

Carolina Supreme Court issued an order staying Wood’s execution and, as noted above, assigning this Court to consider Wood’s claim regarding his competency. *See Ford v. Wainwright*, 477 U.S. 399, 410 (1986).

Of course, that does not call for this Court to reconsider Wood’s guilt or the propriety of his conviction. Rather, the question is whether Wood is still competent to be subjected to the sentence that a jury of his peers prescribed. With that understanding, this Court’s work began.

In the course of that consideration, this Court has benefited from the expert reports of Dr. Susan Knight, Dr. Amanda Salas, and Dr. Matthew Gaskins, who assessed Wood on behalf of the South Carolina Department of Behavioral Health and Developmental Disabilities.

The Court also held an evidentiary hearing over parts of two days on March 24–25, 2026. The experts testified about their findings and counsel made relevant arguments before the Court.² Generally speaking, all three expert witnesses testified that they believed Wood is not currently competent to be executed.

However, the State drew attention to a request by Wood’s court-appointed guardian, Brie Rust,³ to completely discontinue the psychiatric medications that had been prescribed to Wood for the purposes of Dr. Gaskins’ review. Dr. Gaskins’ report included a May 27, 2025 note from Dr. Robert Ellis, the psychiatric director of death row:

As per inmate’s guardian, MS. Brie Rust, ‘Good afternoon, Mr. Wood’s evaluation will be 6/18 with Dr. Matthew Gaskin’s [sic]. He needs to be unmedicated for them to truly evaluate him and firmly [sic] understand his delusional beliefs about his execution. We can reassess after he is returned from DMH to ensure his comfort and everyone’s safety.’ Dated May 15, 2025.

² Wood waived his presence at the hearing through his guardian.

³ Records show counsel for Wood in the current action sought the guardian’s appointment.

As per discussion with Dr. Kunkle, Dr. Hedgepath, and Ms. Christina Bigelow via email, it is SCDC position from a medical/psychiatric perspective, given inmate's dx and history, we recommend continuing the Risperdal medication. However, his legal guardian, Ms. Brie Rust, is declining his Risperdal on Mr. Wood's behalf. On review of the guardianship agreement, I will stop his Risperdal at this time. With emphasis, this is against medical advice, but will follow Mr. [sic] Rust's request at this time.

Inmate will remain on restricted side (as per discussion with Ms. Rust, Ms. Bigelow, Dr. Kunkle, and Dr. Hedgepath). Will monitor for further decompensation and the need for involuntary hospitalization. Inmate has not had incident since last hospitalization, is eating and showering on a regular basis.

I will alert head nurse Massey of death row to stop Risperdal at this time. I attempted to see inmate but he has refused telepsych appointment. Will see inmate in person to alert him that the medication has stopped.

(Dr. Gaskins Report, at 6–7). Dr. Gaskins later agreed with those who expressed concern about discontinuing Wood's medicinal treatment.

It is noted that his antipsychotic medications were intentionally reduced and ultimately discontinued against medical advice at the request of his newly appointed guardian ad litem⁴ for the purpose of this evaluation. The records state that the guardian ad litem informed providers that Mr. Wood needed to be unmedicated for this evaluation. We are unaware of any factual basis for this position by statute, case law, or SCDC policy. Treatment decisions by medical providers are done with the best medical interest of the patient and are not based on the legal standing of the patient. Intentionally keeping a person in a psychotic state worsens their mental health condition in terms of severity and making the condition harder to treat during subsequent episodes. This is in addition to putting them at risk for harming themselves and others.

(Dr. Gaskins Report, at 13). Dr. Gaskins further indicated that he was not able to make a determination about the potential for restoring Wood to competence if his treatment were restarted.

⁴ Any designations here of the guardian as a guardian "ad litem" appear in Dr. Gaskins' report.

The Court notes that Dr. Knight and Dr. Salas, who were retained by Wood, were able to interview Wood multiple times, in various stages of medication and treatment, before his medications were discontinued at the guardian's request.

FINDINGS OF FACT AND CONCLUSIONS OF LAW

First, the Court would note that all of the experts who issued reports and testified before this Court were qualified and competent, and all have some degree of credibility. The Court finds that Dr. Gaskins might have a higher degree of credibility—as he should, given that he is the Court's expert and not likely to be biased in either party's favor—but that there are no indications of a lack of credibility on the part of Dr. Knight and Dr. Salas.

The Competency Question

That credibility is assisted, of course, by the fact that all three experts essentially found the same thing: Wood is not currently competent to be executed. This Court agrees with that, and so finds.

The seminal case on this topic in South Carolina is *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993). There, our supreme court articulated a two-prong test that is used to determine whether a condemned inmate is competent to be executed. *See id.* at 84, 437 S.E.2d at 58.

The first prong is the cognitive prong which can be defined as: whether a convicted defendant can understand the nature of the proceedings, what he or she was tried for, the reason for the punishment, or the nature of the punishment. The second prong is the assistance prong which can be defined as: whether the convicted defendant possesses sufficient capacity or ability to rationally communicate with counsel.

Id.

Applying this test is remarkably straightforward in the current litigation. All three experts found that Wood's delusions make him unable to fulfill either prong of the test. The fact that his

delusions make it difficult to comprehend why he is being punished—or that this punishment is legitimate—is self-evident. That his condition makes him unable to rationally communicate with counsel is supported by the fact that counsel could not persuade Wood to attend a hearing of great legal importance.

This Court has no reason to doubt the conclusions of the experts on this point. Wood is not currently competent to be executed. Under *Singleton*, the decision of this Court is clear—Wood’s execution is temporarily stayed, pending a review of this decision by the South Carolina Supreme Court. *See Singleton*, 313 S.C. at 87, 437 S.E.2d at 60.

The State’s Requests

Wood’s Medical Records

If affirmed by the South Carolina Supreme Court, this decision has one particularly noteworthy effect on any future proceedings regarding whether the State may carry out Wood’s sentence. The State will be required to show by the preponderance of the evidence that Wood has regained competency. *See id.* As the State concedes, this cannot be done by forcibly medicating Wood. *See id.* at 87–90, 432 S.E.2d at 60–62.

But protecting Wood’s constitutional rights when he is incompetent does not require the courts of this state to don a blindfold and pretend that Wood’s condition might not change in the future. Indeed, our supreme court warned against an inflexible approach in *Singleton* itself. The South Carolina Supreme Court in that case reversed the PCR court’s decision to vacate the death sentence at issue, in part for that reason: the “potential for change” in scientific knowledge. *Id.* at 86, 432 S.E.2d at 59. “To carve out a remedy which ignores the ebb and flow of medical science is to create a rule which potentially could be impossible to live with in years to come.” *Id.*

Unsurprisingly, our courts were not acting alone in this regard. They were following the lead of at least one United States Supreme Court justice. In his influential concurrence in *Ford v. Wainwright*, Justice Powell observed that in the case before the court—where the petitioner had been validly sentenced to death—“the State has a substantial and legitimate interest in taking petitioner’s life as punishment for his crime.” 477 U.S. 399, 425, 106 S. Ct. 2595, 2610, 91 L. Ed. 2d 335 (1986) (Powell, J., concurring). Justice Powell emphasized that “the only question raised is not *whether*, but *when*, his execution may take place.” *Id.* See also *id.* at 425 n.5, 106 S. Ct. at 2610 n.5 (“It is of course true that some defendants may lose their mental faculties once and never regain them, and thus avoid execution altogether. My point is only that if petitioner is cured of his disease, the State is free to execute him.”).

The State still has an interest in determining if the “when” Justice Powell spoke of has arrived. And even if the State could in good faith file repeated motions to determine whether Wood’s condition has improved, this would not be a wise use of either counsel’s time or the court’s time.

The State has proposed a solution: To know whether Wood’s competency needs to be further explored, the State says, this Court should authorize it to review Wood’s medical records every six months.

As an initial matter, Wood questions whether this Court has the jurisdiction to issue any orders outside of the temporary stay that is then to be reviewed by our supreme court. This Court finds that it does.

True enough, the South Carolina Appellate Court Rules note that generally, “the service of a notice of appeal in a civil matter”—and a PCR proceeding is a civil matter—“acts to automatically stay matters decided in the order, judgment, decree or decision on appeal, and to

automatically stay the relief ordered in the appealed order, judgment, or decree or decision.” Rule 241(a), SCACR. But just because the effect of this Court’s orders might be stayed does not mean this Court does not have the authority to issue them. And this Court is still empowered to handle “matters not affected by the appeal.” Rule 205, SCACR. The order vesting this Court with jurisdiction in the matter does not identify a date certain for the end of this Court’s jurisdiction, or even a point certain at which this Court’s authority is revoked. An appeal in this case would obviously stay this Court’s ruling if that ruling were affected by the appeal. But nothing in the order assigning the case to this Court or in *Singleton* stands for the idea that this Court’s jurisdiction dissolves forever and for all purposes once its order is issued.

As a result, the Court believes it has jurisdiction over this issue and can order the parties to take certain steps to enforce and further its ruling, even if those steps are also stayed by any appeal.

Moving forward, the interim the State requests for these reviews is likewise rooted in an approximate counterpart in state law. When a court finds a defendant unfit to stand trial in the first place, the State (as well as the defendant, his legal guardian, his counsel, or the court itself) can ask the court to consider the issue again. *See* S.C. Code Ann. § 44-23-450 (West). There are limits, though; “any petition that is filed within six months after the initial finding of unfitness or within six months after the filing of a previous petition under this section shall be dismissed by the court without a hearing.” *Id.* In other words, in a similar circumstance—though not exactly analogous—the General Assembly has found that six months is an appropriate amount of time to wait before once again checking for competency.

Any invasion of Wood’s privacy rights would be minimal. It is true that *Singleton* grounded its refusal to allow inmates to be forcibly medicated solely to facilitate executions in the state’s constitutional privacy rights. *See Singleton*, 313 S.C. at 88–89, 437 S.E.2d at 60–61. But even

there, the court found that “an inmate in South Carolina has a very limited privacy interest when weighed against the State's penological interest[.]” *Id.* at 89, 437 S.E.2d at 61. The review of medical records already in the hands of other state officials is hardly an invasion of Wood’s privacy on the same level as forcing him to accept medication, and this Court finds it comports with the state’s constitution. *See* S.C. Const. art. I, § 10 (protecting individuals against “*unreasonable* invasions of privacy” (emphasis added)).

Given all these considerations, this Court will grant the state’s request and orders the South Carolina Department of Corrections to allow the State to review Wood’s medical records upon request every six months.

The Guardianship Proceedings

More delicate is the issue of whether this Court should require the State to be made aware of developments in the guardianship proceedings, which have now become intertwined with the matter this Court is considering. However, based on its understanding of the limited dimensions of the State’s request, this Court will grant it.

These proceedings have provided insight into the appointment of the guardian in this matter and her role in directing Wood’s health care. To be clear, there is nothing nefarious in a guardian making decisions on behalf of the person on whose behalf she is appointed. However, this Court is faced with indications that decisions made under the authority of that guardianship are being driven at least in part with the goal of advancing Wood’s litigation strategy. To the extent that continues, this matter and the guardianship have become intertwined.

At the same time, this Court does not wish to overstep and interfere with the jurisdiction of the guardianship court. *See* S.C. Code Ann. § 62-1-302 (providing for the probate court’s exclusive jurisdiction over guardianship matters); S.C. Code Ann. § 62-5-701 (“Notwithstanding

another provision of law, this part provides the exclusive jurisdictional basis for a court of this State to appoint a guardian or issue a protective order for an adult.”); *see also* S.C. Code Ann. § 62-5-201 (“Exclusive jurisdiction of the court is set forth in Sections 62-1-302 and 62-5-701 as to appointment of a guardian or issuance of a protective order.”).

In light of that, the State at the evidentiary hearing made clear that it was requesting that Wood or his counsel—and given his current condition, it will likely be his counsel—provide copies of the guardian’s mandatory reports to counsel for the State and the South Carolina Department of Corrections psychiatric caregivers. This strikes the Court as a reasonable arrangement, given that it places no burden on the probate court, and the records belong to Wood, but are increasingly relevant to the proceedings here. The Court orders Wood and his counsel to ensure that the guardianship reports are produced to counsel for the State and to the South Carolina Department of Corrections no later than one month after they have been presented to the guardianship court.

CONCLUSION

This Court finds that all experts agree that Wood is not currently mentally competent to be executed. It also finds that, because the State has an ongoing interest in ensuring that Wood’s sentence is carried out if he becomes competent, the State should have access to records critical to determining whether his condition has changed. Here, that would include a review of Wood’s medical records every six months and the production of the guardian reports.

IT IS THEREFORE ORDERED:

1. The application for Post-Conviction Relief is granted, and Wood’s execution is temporarily stayed, subject to review by the South Carolina Supreme Court, for as long as Wood is not competent to be executed;
2. The State’s request to be allowed to review Wood’s medical records every six months is granted, and the South Carolina Department of Corrections is ordered to make those records available at that interim upon request; and

3. Wood and counsel are required to ensure that copies of any guardianship reports are provided to counsel for the State and to the South Carolina Department of Corrections psychiatric caregivers no later than one month after those reports are filed with the probate court.

IT IS SO ORDERED this _____ day of _____, 2026

The Honorable Grace Gilchrist Knie
Circuit Court Judge by Special Assignment

_____, South Carolina

STATE OF SOUTH CAROLINA	)	IN THE COURT OF COMMON PLEAS
COUNTY OF GREENVILLE	)	FOR THE THIRTEENTH JUDICIAL CIRCUIT
	)	
John Richard Wood,	)	Case No. 2022-CP-23-06219
Applicant,	)	
	)	[Proposed] ORDER GRANTING RELIEF
vs.	)	
	)	
State of South Carolina,	)	
Respondent.	)	

This matter comes before the Court on the capital post-conviction relief action of the Applicant, John Richard Wood, which challenges his competency to be executed pursuant to state and federal law. *See* U.S. Const. amend. VIII; S.C. Const. art. I, § 15; *Ford v. Wainwright*, 477 U.S. 399 (1986); *Panetti v. Quarterman*, 551 U.S. 930 (2007); *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993). Wood was independently evaluated by three separate examiners, who all agreed that Wood is not competent to be executed. The Court hereby makes the following findings of fact and conclusions of law.

PROCEDURAL HISTORY

A. Pre-Hearing Procedural History

Wood was sentenced to death by a jury in the Greenville County Court of General Sessions for the murder of Trooper Eric Nicholson, a State Highway Patrol officer. He was tried and convicted in February of 2002. Wood's convictions and death sentence were affirmed on direct review by the South Carolina Supreme Court. *State v. Wood*, 362 S.C. 135, 607 S.E.2d 57 (2004), *cert. denied*, 545 U.S. 1132 (2005). His applications for state post-conviction and federal habeas relief were denied. *See Wood v. Stirling*, 27 F.4th 269, 275, 280 (4th Cir. 2022). Having exhausted all avenues for collateral review, the question of Wood's competency to be executed is now ripe. *See Stewart v. Martinez-Villareal*, 523 U.S. 637, 645 (1998) (stating a claim of incompetency to be executed is ripe when the defendant becomes eligible for an execution warrant); *Panetti v.*

Quarterman, 551 U.S. 930, 946 (2007) (same); *Singleton v. State*, 313 S.C. 75, 87, 437 S.E.2d 53, 60 (1993) (same).

Since the date of his conviction, Wood has resided on death row within the South Carolina Department of Corrections (SCDC). As noted by all three expert examiners, over the course of his now twenty-four-year incarceration, Wood's SCDC records document a pervasive history of psychological deterioration. *See, e.g.*, Report of Dr. Salas at 4 (noting "a chronic, persisting and active course of schizophrenia that has been present and progressively worsening over time."); Report of Dr. Knight at 1 (describing "a worsening of psychosis," "repeated diagnoses of Schizophrenia," and well-documented symptoms that "greatly impair rational and factual case comprehension, and preclude rational communication with his attorneys."); Report of Dr. Gaskins at 11 ("The records and his presentation confirm these symptoms have been present for multiple decades."); *id.* at 13 (noting the "ample evidence to the genuineness of Mr. Wood's mental health condition").

Wood has been involuntarily committed to the Gilliam Psychiatric Hospital on four occasions over the past decade, following determinations by the probate court that he suffers from mental illness by clear and convincing evidence. S.C. Code § 44-17-580. The probate court ultimately appointed Ms. Brie Rust to act as Wood's permanent legal guardian, finding by clear and convincing evidence that Wood is "incapacitated" within the meaning of S.C. Code § 62-5-101(13), because "his diagnosis impairs him such that he cannot meet the essential requirements for his physical health, safety, or self-care, or manage his property or financial affairs, or provide support." Order Appointing Permanent Guardian (March 4, 2025). Counsel for Wood filed a PCR application raising a competency-to-be-executed claim on October 31, 2022.

On November 11, 2022, the South Carolina Supreme Court assigned this matter to this Court for a determination on the merits. In its Return, the State asserted that “this Court should order the S.C. Department of Mental Health (DMH) to conduct a *Singleton* competency evaluation.” Return at 10. After a brief stay pending the outcome of litigation regarding South Carolina’s methods of execution in *Owens v. Stirling*, this Court ultimately granted the State’s request and entered an order directing that such an evaluation be scheduled at any time after disclosure of Wood’s expert reports on May 1, 2025. Order For Competency to Be Executed Evaluation (March 10, 2025).

Wood produced his expert reports on the prescribed date. The DMH evaluation by Dr. Matthew Gaskins took place on June 18, 2025, and the parties received a copy of Dr. Gaskins’ report on July 7, 2025, which was forwarded to the Court. This Court denied the State’s request for an order requiring Dr. Gaskins to conduct a second interview after 180 days of forced medication. *See* Order Denying Motion for Additional Interview (Sept. 23, 2025) at 2.

B. Post-Conviction Relief Evidentiary Hearing

This Court subsequently convened an evidentiary hearing in Spartanburg County on March 24–25, 2026. Both parties waived any venue requirements. A transport order was issued for Wood; however, Wood’s permanent guardian, Ms. Rust, testified under oath that Wood did not understand the purpose of the proceedings and did not wish to be transported. Ms. Rust, in her capacity as Wood’s guardian, waived Wood’s right to be present at the hearing.

The parties stipulated to the admission of reports from three forensic examiners: Dr. Amanda Salas, a forensic psychiatrist (Applicant’s Exhibit 2), Dr. Susan Knight, a forensic psychologist (Applicant’s Exhibit 4), and Dr. Matthew Gaskins, the DMH psychiatrist (Court’s Exhibit 2). All three experts found that Wood was not competent to be executed.

APPLICABLE LAW

A. Competency Standard

The standard this Court must apply in determining Wood’s competency claim is:

- (1) whether he lacks the capacity to rationally and factually understand the nature of the proceedings, what he was tried for, the reasons for the punishment, or the nature of the punishment; and
- (2) whether he lacks sufficient capacity or ability to rationally communicate with counsel.

Ford v. Wainwright, 477 U.S. 399 (1986); *Panetti v. Quarterman*, 551 U.S. 930, 946 (2007); *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993). Failure of either prong renders an individual incompetent to be executed. *Ford*, *Singleton*, and their progeny illuminate several additional principles that this Court must apply.

1. *A prisoner who possesses a delusional belief that he cannot be executed is not competent.*

In *Ford*, the United States Supreme Court held that the Eighth Amendment forbids the execution of an incompetent prisoner. 477 U.S. 399 (1986). Alvin Bernard Ford was convicted of murder in 1974 and sentenced to death. At the time of his trial, there was “no suggestion that he was incompetent at the time of his offense, at trial, or at sentencing.” *Id.* at 401. However, after Ford went to prison, he began exhibiting “gradual changes in behavior,” eventually resulting in bizarre, persecutory delusions. For example, Ford believed people were tormenting him in prison and that his family members had been taken hostage. He also exhibited grandiose delusions that he had special powers, such as the authority to fire prison officials and the belief that he had appointed nine new justices to the Florida Supreme Court. *Id.* at 402. An expert examiner concluded that Ford “sincerely believed that he would not be executed because he owned the prisons and could control the Governor through mind waves.” *Id.* at 403.

The South Carolina Supreme Court addressed a similar situation in the case of Freddie Singleton, who had a delusional belief that he could not die because he possessed special powers. 313 S.C. 75, 84, 437 S.E.2d 53, 58. The Court concluded that Singleton was “incapable of meeting even a modicum of competency” because he was “completely unaware that he is capable of dying in the electric chair [due to] his reliance on protective ‘genes.’” *Id.*

2. *A prisoner who cannot rationally communicate with counsel is not competent.*

A “pivotal issue” in *Singleton* was whether the lower court erred in adopting the American Bar Association’s standard of incompetency, which included an “assistance prong” aimed at the ability to communicate with counsel. 313 S.C. at 79, 437 S.E.2d at 56. The South Carolina Supreme Court affirmed the PCR court’s decision to adopt a two-pronged test but concluded that the test should be “tempered with the rational communication element for the assistance prong.” *Id.* at 84, 437 S.E.2d at 58. The Court adopted a “slightly modified standard in South Carolina, which satisfies the mandates of federal due process, the common law, and the South Carolina Constitution.” *Id.* Thus, *Singleton* held that South Carolina’s two-pronged test for competency to be executed includes an “assistance prong,” defined as “whether the convicted defendant possesses sufficient capacity or ability to rationally communicate with counsel.” *Id.* Failure of either prong is sufficient for a finding of incompetency. As Singleton was “incapable of rational communication” with his counsel, he did not meet the assistance prong.

3. *Mere factual understanding is not enough for competency.*

In *Panetti v. Quarterman*, the Supreme Court held that *Ford* requires an inquiry into whether a prisoner possesses a *rational understanding* of the crime, the punishment, and the reason for the punishment (not mere awareness of those facts). 551 U.S. 930, 959 (2007) (“A prisoner’s awareness of the State’s rationale for an execution is not the same as a rational understanding of

it.”). A prisoner’s mental state may become “so distorted by mental illness that his awareness of the crime and punishment has little or no relation to the understanding of those concepts shared by the community as a whole.” *Id.* Scott Panetti factually understood that he had been found guilty of murder, that he was facing execution, and that he would die if executed. However, he possessed a delusional belief that the stated reason for his execution was a “sham.” Panetti believed the State’s true motivation for his execution was to prevent him from preaching the Gospel. *Id.* at 955.

Panetti was ultimately found incompetent by the District Court for the Western District of Texas because he “lack[ed] a rational understanding of the connection between his offense and his sentence of death. His execution would therefore violate the Eighth Amendment’s prohibition on cruel and unusual punishment.” *Panetti v. Lumpkin*, 2023 WL 6348877 (W.D. Texas Sept. 27, 2023).

The United States Supreme Court reiterated the importance of a rational understanding in *Madison v. Alabama*, which addressed the question of whether a prisoner could be incompetent to be executed because he suffered from dementia. 586 U.S. 265 (2019). The Court concluded that a rational understanding is what matters, explaining:

The standard has no interest in establishing any precise *cause*: Psychosis or dementia, delusions or overall cognitive decline are all the same under *Panetti*, so long as they produce the requisite lack of comprehension. . . . The *Panetti* standard concerns, once again, not the diagnosis of such illness, but a consequence—to wit, the prisoner’s inability to rationally understand his punishment.

Id. at 728.

B. Burden of Proof

Pursuant to *Singleton*, as in all post-conviction proceedings, the applicant bears the burden of proving his allegations by a preponderance of the evidence. 313 S.C. at 87, 437 S.E.2d at 60. A preponderance of the evidence means “proof which leads the trier of fact to find that the

existence of the contested fact is more probable than its nonexistence.” *State v. Grooms*, 343 S.C. 248, 254, n.5, 540 S.E.2d 99, 102, n.5 (2000) (quoting 2 McCormick on Evidence § 339, 5th ed. 1999)).

C. Remedy

Upon a finding by this Court that Wood is incompetent, *Singleton* specifies that “the appropriate remedy is to issue a temporary stay of execution pending a mandatory review by [the South Carolina Supreme Court]. 313 S.C. at 87, 437 S.E.2d at 60. After the stay is affirmed by the South Carolina Supreme Court, the burden will shift to the State to move for a hearing if the State believes it can show, by a preponderance of the evidence, that Wood is no longer incompetent. *Id.*

FINDINGS OF FACT AND CONCLUSIONS OF LAW

After consideration of the testimony and other evidence offered at the evidentiary hearing, this Court finds that Applicant is not competent to be executed. All three testifying experts concluded that Wood lacks competency to be executed and does not satisfy either prong of *Singleton*. Court’s Exhibit 2 (Report of Dr. Matthew Gaskins) pp. 11–12; Applicant’s Exhibit 4 (Report of Dr. Susan Knight) pp. 61–63; Applicant’s Exhibit 2 (Report of Dr. Amanda Salas) p. 4. All three experts testified to Wood’s longstanding history of schizophrenia and delusional beliefs, his belief that he will not die if he is executed, and his inability to rationally communicate with counsel.

A. Prong 1: Rational and Factual Understanding of the Nature of the Proceedings

All three experts found that Wood lacks both a rational and factual understanding of the nature of the proceedings of his case, what he was tried for, and the nature of his punishment. While Wood “is able to identify the charged capital offense, cite the correct date and county, and provide some factual case details,” he expressed delusions surrounding his offense, including his

belief that police officers were “trying to frame him for a brutal rape” and “shot him to prevent him from testifying to their alleged perjury,” and that the trial judge and other courtroom personnel were agents of a delusional deity (“Kevin”) and worked against him. App. Ex. 4 p. 61. He does not rationally understand that his death sentence is connected to his crime and instead believes that the State seeks to execute him “because Kevin is heavily involved in government.” App. Ex. 2 p. 3.

Further, Wood’s “beliefs pertain directly to understanding the nature of his punishment,” Court Ex. 2 p. 11, of which he lacks a factual and rational understanding. “Mr. Wood does not believe there is any scenario in which he could be executed, or die.” App. Ex. 4 p. 62; *see also* App. Ex. 2 p. 3 (“Mr. Wood does not believe he can die.”); Court Ex. 2 p. 11 (referencing Wood’s belief that he is immortal and has “died three times on death row”). “Mr. Wood believes he has experienced many deaths from which he has been able to rise himself up before,” and that he will be similarly resurrected if the State executes him. App. Ex. 2 p. 4. “In speaking of execution, he is able to identify a possible method as “lethal injection” but believes he is ‘immune to all poisons,’ which is a longstanding delusion noted repeatedly throughout his records.” App. Ex. 4 p. 62. Dr. Gaskins further noted that “[i]n addition to citing his immortality . . . [Wood] made statements indicating that he believes his execution would not be attempted,” including his belief that he had received a pardon from the Governor. Court Ex. 2 p. 12. Wood’s delusions were consistent across multiple competency interviews, App. Ex. 4 p. 61, and Dr. Salas further testified that, in her professional opinion, it is unlikely that Wood can be restored to competency. App. Ex. 2 p. 4. “He appears to have an irrational understanding of his original conviction and does not appreciate the finality of his assigned punishment.” Court Ex. 2 p. 12.

B. Prong 2: Capacity to Rationally Communicate with Counsel

All three experts found that Wood lacks the ability to rationally communicate with counsel. “[H]e is unable to rationally assist his attorneys, or rationally utilize their assistance, due to active psychosis. His delusional beliefs prevent accurate factual and rational consideration of his case, and prevent him from providing rational or potentially useful information to his attorneys which may aid their efforts.” App. Ex. 4 p. 63. Wood “cannot rationally communicate” due to his “significantly disorganized speech and grossly delusional state.” App. Ex. 4 p. 63. Dr. Salas further noted that Wood’s “pronounced disorganization of thought and inability to rationally process information presented to him renders him unable to assist in rational communication with his legal team.” App. Ex. 2 p. 4. “[H]e does not have the ability to engage in meaningful conversation[,] which impairs his ability to work with his counsel in a reality-based manner.” Court Ex. 2 p. 12.

The Court finds all three experts credible and consequently finds that Wood (a) lacks both a rational and factual understanding of the nature of the proceedings, what he was tried for, the reasons for his punishment, and the nature of his punishment; and (b) lacks the capacity to rationally communicate with his counsel. *Singleton v. State*, 313 S.C. 75, 437 S.E.2d 53 (1993).

C. Respondent’s Request for Order Mandating Release of Wood’s Medical Records

At the conclusion of the evidentiary hearing, Respondent requested that this Court order the South Carolina Department of Corrections (SCDC) to release Wood’s medical records to the State every six months and order Ms. Rust to provide the State with copies of the mandatory guardian reports that she submits to the Probate Court regarding Wood’s plan of care. The Court finds no legal basis on which to grant these requests. However, the State is free to ask Ms. Rust for periodic updates on Wood’s mental status, and Ms. Rust stated at the hearing that she is happy

to comply with any such requests, which is the procedure that has been followed in other South Carolina competency-to-be-executed proceedings.

For these reasons, this Court finds that Applicant is not competent to be executed, grants Applicant's petition for post-conviction relief, and issues a temporary stay of execution pending mandatory review by the South Carolina Supreme Court.

IT IS THEREFORE ORDERED THAT:

- (1) Applicant's petition for post-conviction relief is GRANTED; and
- (2) Applicant's execution is stayed pending mandatory review by the South Carolina Supreme Court.

IT IS SO ORDERED.

The Honorable Grace Knie
Presiding Judge

Date: _____

_____, South Carolina