

STATE OF SOUTH CAROLINA
In The Court of Appeals

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APPEAL FROM SPARTANBURG COUNTY
The Honorable J. Mark Hayes, II, Circuit Court Judge

SC Court of Appeals

Appellate Case No. 2025-000914

THE STATEAPPELLANT,

v.

CASEY DOUGLASRESPONDENT.

RECORD ON APPEAL
Volume 2 of 2

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ATTORNEYS FOR APPELLANT

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court date scheduled for 11/22/2024. The patient had another evaluation conducted by Donna Maddox performed on 09/05/2024. The patient is green band status. He gets along with his peers on the unit. He currently attends activities and groups on the unit when offered. When his mental health diagnosis, he responds, he is diagnosed with Schizophrenia.

The diagnoses are listed as Schizophrenia and "Stimulant, Cannabis and Hallucinogen Use Disorders." In the A/P (Assessment and Plan) section of the note, it states the following regarding his diagnosis of Schizophrenia:

Patient has persistent persecutory delusions about the index event, telling him to watch his back, and they are plotting against me, but he distracts himself by listening to music and talking to the staff. The patient attends activities. He does have improved insight into his AH being part of his mental illness. Will continue Aristada 882 mg q 4 weeks. Patient is a green band. The patient denies anxiety therefore, the Vistaril order has not been renewed.

Aristada® (aripiprazole) is a long-acting injectable antipsychotic medication typically administered once a month.

Forensic Interview

Clinical Presentation and Psychiatric History

Mr. Douglas provided the following information: Since his last evaluation he has "remained in the hospital." He believes he has been "under stimulated" and "worn down with things to do." He has been "finding it hard to have motivation in the morning" and "hard to get out of bed." He thinks he is "borderline a little depressed." He has taken a 10 week break from attending groups which will start back soon. The reason for the break is his treatment team agreed with him that he needed such a break after several years of attending the same groups. The group focuses largely on psychoeducation and developing appropriate coping skills for stress. He is currently receiving a monthly injection of Aristada® (aripiprazole) 882 mg which is not causing side effects. He believes the medicine helps him "think about one thing at a time." He has stayed out of trouble for the most part but did have an issue with another patient earlier this year. This other patient tried to take the phone from Mr. Douglas leading to a physical altercation. A second altercation occurred when the other patient was accusing other patients and staff of being actors ultimately leading to another physical altercation. Mr. Douglas, as a result, spent time on "red band status" for a couple weeks before being moved to "yellow band." He is currently back on "green band status," the least restrictive for an inpatient. The majority of his hospitalization was spent on this status. He believes he does "good" in the hospital overall and tries his "best [he] can to stay busy" and "do a good job avoiding conflict." He has been frustrated by his ongoing hospitalization. He has been accepted by multiple community care facilities and has been approved for discharge by the

Forensic Review Board. He believes he has been in the hospital the longest among patients seeking a discharge. A few of the patients are comfortable being in the hospital indefinitely, but he has seen several other patients discharged since the treatment team first put him up for a move to a less restrictive environment given his stability in the hospital.

Mr. Douglas stated that he has been accepted to multiple facilities and is hopeful to go to one in Aiken, SC. He was asked if this was to be closer to his family, and he said it was not. He added, "Away from where I'm from. I actually want to stay away from them. I can communicate with family but want to stay away." He stated he liked the Aiken area but wants "to be away from cities." He said that in cities there "is just too much activity going on and think[s] [he] would be on the radar with things in the past." He restated his persecutory and religious based delusions. He said, "This war between good and evil is more active in city limits." He said he believes if he were to be put in such a situation, he "would be targeted or feel the need to preach again and make [him]self a target." Due to this fear, he "want[s] to be where everyone is not ignorant but may be unaware of what's going on in the world." He described his learning of the "metaphysical warfare and spiritual warfare" when he came back from Florida and going to Georgia before returning to South Carolina. He added, "The good side's losing, and there is angels and demons." He said that "once you are aware of it, you have to choose a side." He said he believes others have chosen "the bad sad" and "started taking control of the city through dark magic and manipulation." He said that this "led to [him] being tricked off the street and witchcraft that led to me being attacked by people I love." He said that several people working in and for Spartanburg County are included in this group such as "police and community" putting pressure on him "from all sides." He said that he has felt safer while in the hospital and believes that the employees there "have good intentions." He was asked about the report that he continues to hear an auditory hallucination despite being on medication. He confirmed he hears a voice saying "watch your back" which used to occur "at least three or four days a week" which is down to "at least two days a week." He said, "It comes and goes and is not constant. More active when a lot is going on around me." He identified the voice as "the Holy Spirit." He said that others have told him it is a symptom of mental illness. However, he said he does not believe this. He stated that he believes the voice is genuine because it has not resolved with treatment. He said, "I think even more so that now because I'm on medicine that should stop it, but it hasn't." He added, "It's never wrong. When it tells me to watch for something or something with ill intentions, it's on point." He said the voice does not "give [him] prompts or directions - just warnings." He gave an example of such a warning being correct when there was a "guy [who] kept walking behind [Mr. Douglas] and it said, 'watch him, watch him,' and the very next day he threw a chair into the whole crowd" of patients.

During the interview, Mr. Douglas was calm throughout. He was casually dressed and had good hygiene. He was cooperative with the interview and answered questions appropriately. He had a linear and goal directed thought process. He was alert and oriented. He spoke in a monotone voice of regular rate and volume. He made good eye contact. He described his mood as "good" and was observed to have a blunted affect (i.e., observed sign of mood in a narrowed range of expression). He denied suicidal and

homicidal ideations. He denied current auditory and visual hallucinations. He stated he last heard the voice of *the Holy Spirit* four days earlier ("Last I heard it was Sunday."). He did not appear internally distracted. He voiced numerous of delusional beliefs as documented throughout this report.

Diagnostic Impression

There has been no change in diagnostic impression since the previous evaluation. In the previous evaluation report, the undersigned wrote:

It is opined to a reasonable degree of medical certainty that Mr. Douglas meets the diagnostic criteria for Schizophrenia. This diagnosis is based on the presence of psychotic symptoms (e.g., delusions, hallucinations, disorganized speech, disorganized behavior, etc.) for longer than six months. The diagnosis of *Delusional Disorder* was considered as an alternative due to the long-standing, persistent nature of his beliefs. Delusions associated with *Delusional Disorder* are typically far more resistant to treatment leading to its consideration. However, his other psychotic symptoms including auditory hallucinations (e.g., hearing the voice of the Holy Spirit) and ideas of reference (e.g., receiving messages from television commercials) are more typical of Schizophrenia.

Conclusion Regarding Capacity to Stand Trial

The S.C. Code Ann. §44-23-410 states a defendant lacks capacity to stand trial if that defendant "lacks the capacity to understand the proceedings against him or to assist in his own defense as a result of a lack of mental capacity."

Mr. Douglas stated that in the recent weeks he met with another examiner, "Dr. Maddox." He said, "She was nice." He said he was nervous meeting with her because "she said, 'I was hired by the prosecutor.'" He reported that the "conversation went well" and he was cooperative with the interview. He stated, "I was honest with her because what I got to tell is not anything that needs to be hid from anyone and that would make me on the dark side. Wouldn't make me an angel, it would make me a demon." He said, "I just didn't want to refuse to see her. Even though I didn't trust her and the Holy Spirit told me not to trust her." He added that "as long as she don't twist [his] words, [he's] fine with it."

Prior to the evaluation with Dr. Maddox, he had been told "she is the wife of a judge in Spartanburg County, and [he] do[esn't] trust that at all." He said he "asked her about it" because he "felt like [he was] being setup." He said Dr. Maddox invited his attorney who declined to attend the interview. He said that his suspicion of Dr. Maddox was worsened at the end of the interview. He said, "She said I shouldn't be out yet. She said I shouldn't be discharged yet." He reported asking her the reason and she cited the need for "more security." He said, "I'm scared that she obviously got influence in my circuit." He said,

"Dr. Maddox said the solicitor agrees that I'm mentally ill, but I'm not mentally ill. I'm not delusional. She said he agree I'm delusional, but wants me locked up, so it don't happen again." He added, "I told her this proves the point that he wants me locked up."

Mr. Douglas identified his attorney as "Robert Hall." He added, "Robert Hall thinks I'm crazy." He said, "I know he represents me, but he don't want me to tell my side of the story." He said his attorney "doesn't listen to [him]" and "it's like he almost not on my side anymore." He stated he is currently charged with "two Murder charges and Possession of Weapon During a Violent Crime." He said he is so charged because "they said [he] killed Stephanie and Craig with malicious intent or malice of forethought." He said the police say he "stabbed them."

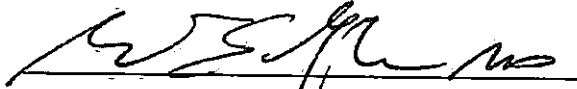
He said that he only wants the opportunity to tell the judge his version of events. He restated several of his delusional beliefs. He reported that "the dark side started talking about [him] and [he] was stuck in a web." He stated he wants to tell the judge that "everyone involved around me to the police and fire department [were] plotting on [him]. They turned my loved ones on me through witchcraft and black magic." He said he plans to tell the judge that "the dark side turned [him] into a reaper and put [him] in a situation where they would put [him] in the prison for the rest of [his] life." He went on to describe delusions previously documented involving "high ranking warlocks and witches" that have conspired against him. He said, "I feel like as long as when I go to trial my lawyer tell my full side of the story."

When asked how he thinks his attorney can help him in his case, he continued to discuss how his delusional beliefs play directly into the allegations and proceedings against him. He said, "He can ask all these gang members who have been arrested about it." He added, "Get the video of that night that it was all recorded." He referenced there being a recording of the alleged events multiple times throughout this and previous evaluations. He said, "They said to my face that the recording doesn't exist. I know it does. They are hiding it because they know it will free me." He said, "They don't want this to come out. They don't want the truth to be told. The more time they waste the more people – people move around or get arrested – they want me incarcerated."

He said that he believes "as long as [his] whole truth is told, then [he]'ll be freed." He stated, "If I am brought to court for this, I need to tell my whole side of the story. I need to get on the stand and tell the whole thing that happened. From 2017 to 18 with the whole trip to Florida and how it led to this." He said he has been frustrated that "nobody listened" to his concerns then and continue to ignore what he believes to be the truth of the events leading to his arrest and ongoing hospitalization. He stated he has read the undersigned's previous reports and disagrees with the opinion regarding capacity to stand trial. He stated he wants to tell his story. He added that if he is not convincing that *the Holy Spirit* will speak to the judge directly.

In summary, it is our opinion that Mr. Douglas continues to demonstrate a factual understanding of his charges and persistent delusional beliefs that interfere his rational appreciation for the proceedings against him and ability to work with an attorney in his

defense. He continues to want to pursue a non-reality-based defense asking his attorney to work toward proving Mr. Douglas' delusional beliefs to be true. Therefore, it is our opinion that Mr. Douglas continues to lack the capacity to stand trial pursuant to *State v. Blair*, 275 S.E. 529, 273 S.E. 2d 536 (1981) and S.C. Code Ann. §44-23-410 (1976).


Matthew E. Gaskins, MD

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CURRICULUM VITAE

ROBERT CHARLES NELSON PSY.D.
Licensed Clinical Psychologist SC-1210

Education

Doctor of Psychology Alliant University (formerly United States International University),
San Diego, California - Clinical Psychology
Master of Arts work United States International University, San Diego, California
Marriage and Family Therapy
Bachelor of Arts Whitworth University, Spokane, Washington
Major: Theology, Sociology & Psychology

Publications

Nelson, R. (2000). *Homicidal Adolescents – Understanding Kids Who Kill – A Critical Review*, Dissertation Abstracts, 2000, 25, (4)

Post Doctoral Studies/Licensure/Credentials

Licensed Clinical Psychologist – South Carolina 1210
South Carolina School Psychologist III Credential
California Registered Psychologist
California State School Psychologist Credential – National University, San Diego California
California State School Administrator Credential – Cal State University, San Marcos
California
South Carolina Advanced State Constable Credential – SC State Law Enforcement Division
California Reserve Police Officer Credential – San Diego County Sheriff's Department

Post Doctoral Internships

08/1999- Contract Psychologist – San Marcos High School, San Marcos, California
06/2001 Psychological Assessment and Intelligence Testing of Students Suspected of
Qualifying Disabilities for Special Education Including Mental Retardation,
Provision of Individual and Group Counseling Services for Elementary,
Middle and High School Students, Consultation to School Administrators,
School Psychologists, Teachers and Staff, Development of Threat and Risk
Assessment Protocols for District Staff

Pre Doctoral Internships

08/1998- Psychological Intern – San Marcos Unified School District, San Marcos High
06/1999 School, San Marcos, California
Psychological Assessment/Intelligence Testing for Students Suspected of
Qualifying Conditions for Special Education including Metal Retardation and
Learning Disabilities

08/1997- Adolescent Victims of Sexual Abuse and Non-Offending Parents
 01/1998 Adolescents/Parents Group Facilitator – Charter School – Horton Plaza via contract w/ ECS Counseling Services San Diego, California
 Assessment, Treatment Planning and Psychological Services Delivery

01/1996- Group Therapy Facilitator/Counselor – Domestic Violence Treatment Program
 06/1998 – ECS Counseling Center, San Diego, California
 Assessment, Treatment Planning and Psychological Services Delivery to Perpetrators of Domestic Violence Mandated for 26 Week Treatment Programs

06/1996- Perpetrators of Domestic Violence Mandated for 26 Week Treatment
 01/1998 Programs Group Therapy Facilitator/Counselor – ECS Counseling Center, San Diego, California
 Assessment, Treatment Planning and Psychological Services Delivery

Professional Background

03/23/23-Present Licensed Clinical Psychologist LifeStance Health

03/2020-03/23/23 Director of Field Operations and Growth for the Carolinas – CHE Behavioral Health Services

Responsible for all operational elements for behavioral health services in the Carolina to include: Contracting partner facilities, clinics and telehealth outpatient agreements; hiring, training and supervising regional clinicians; budget forecasting; and provision of psychological services such as - Clinical Assessment, Diagnosis, Treatment Planning, Treatment Administration, Outcome Assessment, Psychopharmacology Consultations, Coordination of Care, and Forensic Evaluation of Involuntary Psychiatric Commitments

01/2017-Present Federal Advocacy Coordinator for American Psychological Association representing South Carolina Psychological Association

01/2012-04/2020 Regional Clinical Director – LifeSource Health Management Services

Responsible for Clinical Assessment, Diagnosis, Treatment Planning, Treatment Administration, Outcome Assessment, Psychopharmacology Consultation, Coordination of Care, Supervision of Clinical Psychologists in South Carolina, Georgia and Alabama, Psychologist Training, Forensic Evaluation of Involuntary Psychiatric Commitments

01/2011-Present Adjunct Professor – University of the Rockies – Colorado Springs, Colorado

Doctoral level curriculum delivery to students in: Counseling Psychology, Industrial and Organizational Psychology and Forensic Psychology

06/2010-Present Staff Consulting Criminal Forensic Psychologist – State Law Enforcement Division Behavioral Science Unit

Forensic psychology liaison to Behavioral Sciences Criminal Profilers and Case Agents, Development and Management of statewide Unsolved Murder Case Data Mining Project, consultation on Threat Assessment, Homicide, Unsolved Homicide and Attempted Mass Murder cases, Forensic Analysis of Atkins Case Intellectual Disability Evaluations/Determinations, Forensic Case Consultations and Trial Preparation, Expert Witness Testimony.

06/2010-Present Advanced State Constable – State Law Enforcement Division Behavioral Science Unit

08//2006-Present Adjunct Professor – Webster University Counseling Psychology – Greenville

Metro Campus, Greenville, South Carolina

Master's level curriculum delivery to students in Counseling Psychology

Courses Taught: Psychological Assessment, Abnormal Psychology, Research, Theories of Counseling Psychology, Theories of Group Psychology, Foundations of Counseling, Multicultural Foundations of Counseling, Lifestyle and Career Development Counseling, History of Psychology, Psychopharmacology, Psychodiagnostics

01/2006-08/2011 Chief Psychologist/Assistant Director – South Carolina Department of Mental Health – Greenville Mental Health Center, Greenville, South Carolina

Responsible for development of Psychological Assessment and Testing Program for Children, Adolescents, and Adults, Design and Implementation of Staff training for Therapeutic Assistants, Clinical Counselors, Mental Health Counselors, Mental Health Chiefs, and Chief Psychologists, Supervision of Staff Psychologists, Treatment Team Planning, Psychological Assessment of Children, Adolescents and Adults, Individual and Group counseling services, Corporate Compliance Officer, Forensic Evaluation of Involuntary Psychiatric Commitments

09/2004-01/2006 Behavioral Specialist – Psychologist III – Greenville County School District, Greenville, South Carolina

District Wide Behavioral Specialist Consultation for Elementary, Middle and High School Administrators, Psychologists, Counselors, Staff and Classroom Teachers, District-wide training of twenty three School Psychologists on: Differentiation of Emotional Disturbance versus Behavioral Disturbance, Psychological Assessment and Intelligence Testing of Students Suspected of Qualifying Disabilities for Special Education Including Mental Retardation, Functional Behavioral Analyses, Behavioral Interventions, Positive Behavior Interventions and Supports, Forensic Evaluation of Involuntary Psychiatric Commitments, Providing Individual and Group Counseling Services for

	Elementary, Middle and High School Students, Development of Threat and Risk Assessment Protocols for District Staff
09/2002- 12/2007	<p>Core Faculty – National University – School of Education, School Psychology Department, San Diego, California</p> <p>Master's Level Curriculum Delivery to Students in School Psychology, School Psychologist Credential Program</p> <p>Courses Taught: Intelligence Testing, Personality Testing, Psychological Assessment, Lifecycle Developmental Psychology, Abnormal Psychology, Introduction to Behavioral Assessment and Intervention, Theories of Counseling, Research and Evaluation</p>
06/2001- 07/2004	<p>Acting Director Pupil Services, Behavioral Specialist, Member Superintendent's Advisory Council – Escondido Union School District, Escondido, California</p> <p>Management of District-wide Pupil Services Programs to include: Behavioral Intervention, Positive Behavioral Interventions and Supports, Threat and Risk Assessment, Department Budget management, Superintendents Advisory Council, Psychological Assessment and Intelligence Testing of Students Suspected of Qualifying Disabilities for Special Education Including Mental Retardation, Forensic Evaluation of Involuntary Psychiatric Committals, Individual and Group Counseling Services for Elementary, Middle and High School Students, Consultation to School Administrators, School Psychologists, Teachers and Staff</p>
01/1999- 05/2001	<p>Contract Psychologist – San Marcos High School, San Marcos, California</p> <p>Psychological Assessment and Intelligence Testing of Students Suspected of Qualifying Disabilities for Special Education Including Mental Retardation, Individual and Group Counseling Services for Elementary, Middle and High School Students, Consultation to School Administrators, School Psychologists, Teachers and Staff, Development of Threat and Risk Assessment Protocols for District Staff</p>
06/1996- 12/2004	<p>Reserve Deputy Sheriff – San Diego County Sheriff's Department</p> <p>Uniform Patrol Answering calls for service – AR-15 Qualified</p>
01/1996- 09/2004	<p>Executive Director – Dimensional Health Service, Inc. Community Based Mental Health Agency, San Diego, California</p> <p>Founder and Executive Director of Community Based Non-Profit Mental Health Agency, Supervision of Three Satellite Community Mental Health Clinics, Administration of Psychological Assessment of Children, Adolescents and Adults, Delivery of Individual, Couples, Family and Group Counseling Forensic Evaluation of Involuntary Psychiatric Committals</p>

06/1991- 01/1996	<p>Security & Safety Director – Scientific Atlanta, San Diego, California</p> <p>Development and Coordination of all DoD Security Programs, Government Security Clearance Processing and government Security Compliance, Training and Awareness, Classified Contract Negotiation and Compliance, Security Violation and Breech Investigation and Compliance Reporting</p>
10/1989- 05/1991	<p>Manager, Security & Contracts – SRS Technologies, San Diego, California</p> <p>Development and Coordination of all DoD Security Programs, Government Security Clearance Processing and government Security Compliance, Training and Awareness, Classified Contract Negotiation and Compliance Security Violation and Breech Investigation and Compliance Reporting</p>
07/1988- 09/1989	<p>Manager, Special Program Security – Hughes Aircraft, El Segundo, California</p> <p>Development and Coordination of all DoD Security Programs, Government Security Clearance Processing and Government Security Compliance, Training and Awareness, Classified Contract Negotiation and Compliance Security Violation and Breech Investigation and Compliance Reporting</p>
07/1986- 06/1988	<p>Manager, Special Programs Security – JANBEC Corporation, San Diego California</p> <p>Development, Implementation and Management of DoD Covert Operational Program Operations, Development and Coordination of all DoD Security Programs, Government Security Clearance Processing and government Security Compliance, Training and Awareness, Classified Contract Negotiation and Compliance, Security Violation and Breech Investigation and Compliance Reporting</p>
10/1985- 06/1986	<p>Security Representative – Lockheed Corporation, Sunnyvale, California</p> <p>Corporate Security Compliance, DoD Government Security Clearance Processing and Government Security Compliance, Training and Awareness</p>
06/1979- 09/1985	<p>Acting Sergeant/Detective/Police Officer Foster City Police Department, California</p> <p>Supervision of Law Enforcement Patrol Team, Homicide Investigation, Undercover Narcotics & Vice Investigation, Prosecution Case Preparation, Patrol Enforcement, Training and Development, Officer Safety</p>
07/1974- 05/1979	<p>Youth Minister Presbyterian Church, USA</p>

Organizational Memberships and Affiliations

American Psychological Association (South Carolina Federal Advocacy Coordinator)
South Carolina Psychological Association (Two Time President)
American Counseling Association (inactive)
Association for Counselor Education and Supervision (inactive)
South Carolina State Constable Association
Association of Threat Assessment Professionals

Training Courses and Presentations

- ADA and IDEA Special Education Evaluation and Assessment
- Intelligence Testing, Mental Retardation & Borderline Intellectual Functioning
- Professional Assault Response Training
- Threat Assessment & School Violence Response Team Training
- Event Driven Threats and the Mother Emanuel Church Shooting
- Positive Behavioral Interventions
- Basic Behavioral Interventions for Assaultive Children
- Anger Management
- Behavior Basics for Conduct Disordered and Emotionally Disturbed Children & Adolescents
- Functional Behavioral Analysis of Children, Adolescents & Adults
- Positive Behavioral Interventions and Supports
- Behavioral Interventions for Assaultive & Aggressive Mentally Ill Adults
- Psychological Differentiation of Emotional Disturbance versus Conduct Disorder
- Behavior Basics and Intervention Strategies for Inpatient Geriatric Populations
- Legal Aspects of Behavioral Interventions
- Attention Deficit/Hyperactivity Disorder: Assessment and Medical Intervention
- Assuring Staff Consistency in Applied Behavioral Analysis Settings
- Behavioral Assessment
- Non-aversive Behavioral Support
- Emergency Management of Behavioral Crises
- Accountability and Coordination in Behavior Support, Accommodation, and Mental Health Treatment Planning
- Psychopharmacology for Non-Physician Clinical Therapists
- Psychopharmacology and Special Considerations for Geriatric Populations
- Bipolar I Disorder, Severe, With Psychotic Features – Grand Rounds UCSD Medical Center, with Dr. Hagop S. Akiskal, M.D.
- Lessons Learned from School Shooting - Santana High School – La Mesa California
- Risk and Treat Assessment Protocol Development, Implementation and Management
- Preventing School Violence
- Facing Fear: Terrorism and Tragic Events
- Guidelines for Student Threat Assessment
- Crisis Response Planning
- Handling Disruptive Behavior
- Intervention Strategies for Violent-Prone Behavior
- Combating Bullying

- Gang Identification
- Domestic Violence Perpetrator Treatment and Interventions
- Critical Incident Stress Management
- Critical Incident Stress Debriefings
- Cognitive Assessment of Individuals
- Sexual Harassment in the Workplace
- Team Building Basics
- Communication Skills Training
- Security Management for Industrial Complexes
- Security Training for Campus Security Officers
- Security and Safety Site Assessments for DoD Contractors
- Organizational Development
- How to Build Effective Corporate Teams
- Dysfunctional Teams and How to Not Be One
- Understanding Individual Differences
- Myers-Briggs Personality Types and Team Building Essentials
- Child Abuse Identification & Reporting for Allied Health Professionals
- Stevens-Johnson Syndrome – A Clinical Case Study

STATE OF SOUTH CAROLINA)
)
COUNTY OF SPARTANBURG)
)
State of South Carolina)
)
vs.)
)
Casey Douglas,)
)
Defendant.)
_____)

IN THE COURT OF GENERAL SESSIONS
SEVENTH JUDICIAL CIRCUIT

2018A4210103245-47

NOTICE OF MOTION
MOTION FOR RECONSIDERATION

FILED
2024 DEC -3 PM 2:22
CLERK OF COURT
SPARTANBURG COUNTY
AMY L. COX

To: Barry Barnette, Solicitor, Seventh Judicial Circuit:
Robert Hall, Attorney for the Defendant

PLEASE TAKE NOTICE that the South Carolina Department of Mental Health (SCDMH) hereby moves for reconsideration of conditions 8, 11, and 12 of the Order issued by this court on November 26, 2024 allowing for the discharge of the above-referenced defendant from inpatient hospitalization.

Regarding condition #8, upon Mr. Douglas' discharge, the patient/ practitioner dynamic between Mr. Douglas and Dr. Alleyne will be severed. Thus, Dr. Alleyne would not have the ability to make any substantive changes to Mr. Douglas' medical regimen, nor would their communications be protected by the psychotherapy privilege codified at S.C. Code §44-22-90. While Dr. Alleyne will undoubtedly be a valuable resource for Mr. Douglas' continued treatment, SCDMH believes that consultation or inquiry for Dr. Alleyne should properly be utilized by Mr. Douglas' treating psychiatrist at Aiken-Barnwell Mental Health Center, his case worker at Aiken-Barnwell, or through social work staff at the Forensic Outreach Clinic.

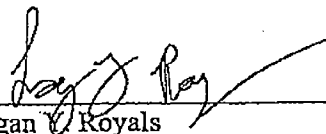
Regarding condition #11, SCDMH is statutorily obligated to provide a patient with "care and treatment that is suited to his needs and which is the least restrictive appropriate care and treatment" and to "ensure that restrictions on a residential patient's liberty are confined to those minimally necessary to establish the therapeutic objectives for the patient." S.C. Code §44-22-50(A),(B). While total accompaniment by staff might be initially appropriate for Mr. Douglas upon his admission to Generations of Monetta, independence will become a necessary part of his treatment as that treatment progresses. In particular, the job training referenced in the same order

would almost certainly require his presence in a setting separate from mental health professionals or residential facility staff. Moreover, such a requirement without a timeframe for potential independent movement would severely limit SCDMH in moving Mr. Douglas from an environment "segregated from the community to integrated into the community" and from "dependent to independent living." S.C. Code §§44-22-50(E)(5-6).

Finally, regarding condition #12, SCDMH does not operate any GPS monitoring technology, and does not have the means to provide Mr. Douglas with an electronic ankle monitor.

PLEASE TAKE NOTICE that the South Carolina Department of Mental Health will seek a hearing of its motions set forth below.

RESPECTFULLY SUBMITTED,



Logan V. Royals
Attorney for the South Carolina
Department of Mental Health
2414 Bull Street, Post Office Box 485
Columbia, South Carolina 29202
(803) 898-8557 phone
(803) 898-8453 facsimile
logan.royals@scdmh.org

Columbia, South Carolina
December 3, 2024

FILED
2024 DEC -3 PM 2:22
CLERK OF COURT
SPARTANBURG COUNTY
AMY M. COX

STATE OF SOUTH CAROLINA	)	IN THE COURT OF GENERAL SESSIONS
	)	SEVENTH JUDICIAL CIRCUIT
COUNTY OF SPARTANBURG	)	
	)	2018A4210103245-47
	)	
State of South Carolina	)	
	)	
vs.	)	
	)	NOTICE OF MOTION
Casey Douglas,	)	MOTION FOR RECONSIDERATION
	)	
Defendant.	)	

To: Barry Barnette, Solicitor, Seventh Judicial Circuit:
Robert Hall, Attorney for the Defendant

PLEASE TAKE NOTICE that the South Carolina Department of Mental Health (SCDMH) hereby moves for reconsideration of conditions 8, 11, and 12 of the Order issued by this court on November 26, 2024 allowing for the discharge of the above-referenced defendant from inpatient hospitalization.

Regarding condition #8, upon Mr. Douglas' discharge, the patient/ practitioner dynamic between Mr. Douglas and Dr. Alleyne will be severed. Thus, Dr. Alleyne would not have the ability to make any substantive changes to Mr. Douglas' medical regimen, nor would their communications be protected by the psychotherapy privilege codified at S.C. Code §44-22-90. While Dr. Alleyne will undoubtedly be a valuable resource for Mr. Douglas' continued treatment, SCDMH believes that consultation or inquiry for Dr. Alleyne should properly be utilized by Mr. Douglas' treating psychiatrist at Aiken-Barnwell Mental Health Center, his case worker at Aiken-Barnwell, or through social work staff at the Forensic Outreach Clinic.

Regarding condition #11, SCDMH is statutorily obligated to provide a patient with "care and treatment that is suited to his needs and which is the least restrictive appropriate care and treatment" and to "ensure that restrictions on a residential patient's liberty are confined to those minimally necessary to establish the therapeutic objectives for the patient." S.C. Code §44-22-50(A),(B). While total accompaniment by staff might be initially appropriate for Mr. Douglas upon his admission to Generations of Monetta, independence will become a necessary part of treatment as that treatment progresses. In particular, the job training referenced in the same order

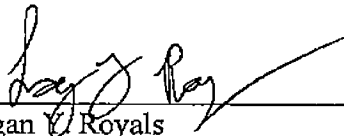
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CLERK OF COURT
SPARTANBURG, SC

would almost certainly require his presence in a setting separate from mental health professionals or residential facility staff. Moreover, such a requirement without a timeframe for potential independent movement would severely limit SCDMH in moving Mr. Douglas from an environment "segregated from the community to integrated into the community" and from "dependent to independent living." S.C. Code §§44-22-50(E)(5-6).

Finally, regarding condition #12, SCDMH does not operate any GPS monitoring technology, and does not have the means to provide Mr. Douglas with an electronic ankle monitor.

PLEASE TAKE NOTICE that the South Carolina Department of Mental Health will seek a hearing of its motions set forth below.

RESPECTFULLY SUBMITTED,



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Columbia, South Carolina
December 3, 2024

2024 DEC -6 AM 10:30
CLERK OF COURT
SPARTANBURG COUNTY
AMY W. COX

FILED

STATE OF SOUTH CAROLINA)
)
COUNTY OF SPARTANBURG)
)
The State of South Carolina,)
)
)
vs.)
)
Casey Douglas)
)
)
Defendant.)

IN THE COURT OF GENERAL SESSIONS
SEVENTH JUDICIAL CIRCUIT

**ORDER DENYING MOTIONS
FOR
RECONSIDERATION**

2018A4210103245
2018A4210103246
2018A4210103247

This matter came before the court on cross motions for reconsideration of this Court's order dated November 26, 2024. The prior order was issued pursuant to S.C. Code Section 44-23-460 granting the SC Department of Mental Health (DMH) request made pursuant to code section 44-23-430 and 460 that allows DMH to continue treatment of the defendant on an outpatient basis at a community residential care facility where his mental treatment will continue in a structured/supervised living environment with specific criteria imposed on the defendant. The court was also presented a Motion to Stay Order of November 26, 2024, pending the reconsideration hearing.

This Court appreciates the arguments offered by the parties and appreciates the patience by the parties while the arguments and records were once again reviewed.

After considering the arguments and reviewing the information available, the order previously issued by the Court will stand without alterations or modifications.

Broadly, the DMH is critical of this Court's imposition of collateral or supportive requirements/services which this Court finds are reasonable to allow the defendant's mental health



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SPARTANBURG COUNTY
JAN 20 2025

needs to be addressed in the least restrictive environment setting while also addressing the fears articulated by the state—providing mental health service to the defendant at the proposed community residential care facility may create a danger to others. As expressed during the hearing, these additional supportive requirements/services – such as the continued involvement of the certain present mental health service providers, and the gps monitoring device when he leaves the facility, are transitional—not permanent—services. They are not meant to interfere with the defendant’s mental health services but to assure the defendant’s placement and mental health needs are being properly addressed in the least restrictive environment, as determined by DMH, while also addressing the safety concerns articulated by the State. The additional supportive requirements/services are consistent with SC Code section 44-23-430(c). As stated in the prior Order, nothing in the Order is to be read as restricting or limiting DMH from administering whatever type of medication, treatment, supervision, or adding custodial restriction that may be found necessary to assure the defendant’s safety and the safety community.

Broadly, the State is critical because this Court did not accept the opinions of its witnesses, giving too much weight to the opinions of the DMH witnesses, and granting DMH’s request for the defendant’s transfer. As reflected in the prior order, this Court considered the testimony of all of the witnesses and, as the fact finder in the hearing, gave the testimony of the various witnesses the weight it deserved. Also, as expressed in the prior order, this Court, generally, agrees with DMH’s reading and position concerning the application of SC Code section 44-23-460 (1).

As stated above, the provision of the prior Order will remain unchanged

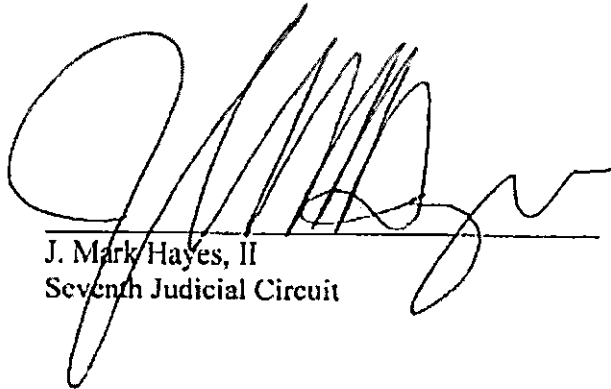
To the extent the Motion to Stay needs to be addressed, given the above ruling, the motion is denied.

2



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SPARTANBURG COUNTY
JAN W. COX

AND IT IS SO ORDERED this 2^d day of May, 2025 in Spartanburg, South
Carolina.



J. Mark Hayes, II
Seventh Judicial Circuit

State v. Douglas

2018A4210103245

2018A4210103246

2018A4210103247

FILED
2025 MAY -2 AM 11:10
CLERK OF COURT
SPARTANBURG COUNTY
ALAN W. COX

WITNESSES

Spartanburg County Sheriff's Office

Jimmy W. Powers

ARREST WARRANT NUMBER

2018A4210103245

ACTION OF GRAND JURY

True Bill

DEC 07 2018

Foreperson of Grand Jury
Date:

VERDICT

Foreperson of Petit Jury
Date:

DOCKET NO.

18-GS-42-6403

The State of South Carolina

County of Spartanburg

Barry J. Barnette, Solicitor

COURT OF GENERAL SESSIONS

DEC 16 2018

TERM

THE STATE

v.

CASEY ALLEN DOUGLAS

Indictment for

MURDER

SC Code 16-03-0010, 0020

CDR Code 116

Class FEL-EXM

CLERK OF COURT
2018 DEC 18 PM 4:05
CLERK BLAKLEY

STATE OF SOUTH CAROLINA)
)
COUNTY OF SPARTANBURG)

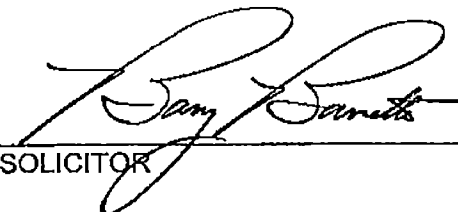
INDICTMENT

At a Court of General Sessions, convened on Oct 30 2018, the
Grand Jurors of Spartanburg County present upon their oath:

MURDER

That the Defendant, Casey Allen Douglas, did in Spartanburg County on or about
October 24, 2018, feloniously, willfully, and with malice aforethought, kill one Stephanie
Jenkins by stabbing her with a knife, and the victim died as a proximate result thereof, all
in violation of §16-3-0010, 0020, *The South Carolina Code of Laws*, (1976, as amended).

Against the peace and dignity of the State, and contrary to the statute in such
case made and provided.



SOLICITOR

WITNESSES

Spartanburg County Sheriff's Office

Jimmy G. Davis

ARREST WARRANT NUMBER

2018A4210103246

2018A4210103247

ACTION OF GRAND JURY

True Bill

DEC 07 2018

[Signature]
Foreperson of Grand Jury
Date:

VERDICT

Foreperson of Petit Jury
Date:

DOCKET NO.

18-GS-42-6404

The State of South Carolina

County of Spartanburg

Barry J. Barnette, Solicitor

COURT OF GENERAL SESSIONS

DEC 16 2018

TERM

THE STATE

v.

CASEY ALLEN DOUGLAS

Indictment for

MURDER (Count 1)

SC Code 16-03-0010, 0020

CDR Code 116

Class FEL-EXM

POSSESSION OF FIREARM

DURING COMMISSION OF A VIOLENT

CRIME (Count 2)

SC Code: 16-23-490

CDR Code: 549

Class FELF

CLERK OF COURT

2018 DEC 18 PM 4:05

SPARTANBURG COUNTY

STATE OF SOUTH CAROLINA)
)
COUNTY OF SPARTANBURG)

INDICTMENT

DEC 07 2018

At a Court of General Sessions, convened on _____, the
Grand Jurors of Spartanburg County present upon their oath:

COUNT ONE - MURDER

That the Defendant, Casey Allen Douglas, did in Spartanburg County on or about
October 24, 2018, feloniously, willfully, and with malice aforethought, kill one Craig
Jenkins, by stabbing him with a knife, and the victim died as a proximate result thereof,
all in violation of Section 16-3-0010, 0020, Code of Laws of South Carolina, (1976, as
amended).

**COUNT TWO - POSSESSION OF FIREARM DURING COMMISSION
OF A VIOLENT CRIME**

That the Defendant, Casey Allen Douglas, did in Spartanburg County on or about
October 24, 2018, visibly display a knife during the commission or attempted
commission of a violent crime, to-wit: Murder, in violation of Code §16-23-490, *CODE
OF LAWS OF SOUTH CAROLINA*, (1976), as amended

Against the peace and dignity of the State, and contrary to the statute in such
case made and provided.


SOLICITOR