

**IN THE SUPERIOR COURT OF RICHMOND COUNTY
STATE OF GEORGIA**

STATE OF GEORGIA

V.

**ROLAND SIMS,
Defendant.**

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INDICTMENT: 07-RCCR-80

NOVEMBER Term, 2006.

CLERK OF SUPERIOR COURT
RICHMOND COUNTY, GA.

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ORDER FOR COMMITTAL

On August 21, 2007, the Court ordered the Department of Human Resources to perform a pre-trial mental evaluation of the above-named Defendant to determine his competency to stand trial, as well as his mental status at the time of the alleged offense. On April 29, 2008, the Court held a competency hearing regarding this Defendant. At that time, the State was represented by Assistant District Attorney Adam King, and the Defendant was represented by Assistant Public Defender Jason Hasty. Dr. Elizabeth Donegan's report, which contained her conclusions concerning Defendant's competency to stand trial, was admitted as evidence and made part of the record by the State and counsel for the Defendant. A copy of said report is attached and labeled "Exhibit 1."

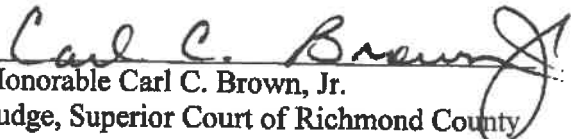
Upon review of the mental evaluation report, the Court finds that the Defendant is not currently competent to stand trial. He is not capable of assisting in his defense, nor is he capable of understanding the legal process and possible consequences.

Accordingly, pursuant to the provisions of the Official Code of Georgia Annotated Section 17-7-130, it is hereby ORDERED that the Defendant be remanded to the custody of the State Department of Human Resources for treatment of his psychiatric illness and restoration of competency. The Department shall take custody of the Defendant and hold the Defendant in the Department's facilities for a period of ninety (90) days, during which time the Department shall

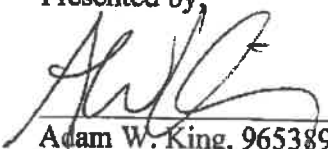
undertake further evaluation and diagnosis, in order to determine whether the Defendant remains incompetent to stand trial, and whether there is a substantial probability that the Defendant will attain mental competency to stand trial in the foreseeable future.

If the Defendant is found to be mentally competent to stand trial, the Department shall immediately report that finding and the reasons therefore to the Court. If the Defendant is found to remain incompetent, and there is no substantial probability that the Defendant will attain competency in the foreseeable future, the Department shall report that finding and the reasons therefore to the Court. It will then be necessary to determine whether the Defendant meets the criteria for civil commitment pursuant to Georgia law. While in the custody of the Department pursuant to this order, the Defendant will be detained in appropriate confinement and restricted accordingly. Under no circumstances will the Defendant be furloughed or released to anyone other than appropriate law enforcement officials.

This ~~29th~~ day of April, 2008.


Honorable Carl C. Brown, Jr.
Judge, Superior Court of Richmond County

Presented by:


Adam W. King, 965389
Assistant District Attorney
501 Greene Street
Augusta, GA 30901
(706) 821-1135

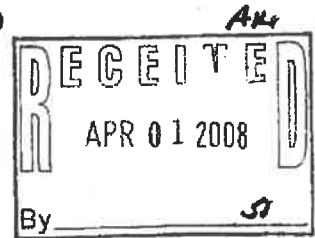


B.J. Walker, Commissioner
 Gwendolyn B. Skinner, Division Director
 Stephen T. Smith, Sr., Regional Hospital Administrator

Georgia Department of Human Resources · Division of Mental Health, Developmental Disabilities and Addictive Diseases
 East Central Regional Hospital

Augusta Campus · 3405 Mike Padgett Highway · Augusta, Georgia 30906 · 706-792-7000
 Gracewood Campus · 100 Myrtle Blvd · Gracewood, Georgia 30812 · 706-790-2011

FORENSIC SERVICES



March 28, 2008

Honorable Carl C. Brown, Jr.
 Judge of Superior Court
 Augusta Judicial Circuit
 530 Greene Street
 Augusta, GA 30911

RE: Court Ordered Evaluation
 Roland Simms
 Richmond County, Georgia
 Indictment Nos.: 2007-RCCR-0080
 Charge: Theft by Receiving Stolen Property

Dear Judge Brown:

Mr. Roland Simms (DOB: 02-04-1989) was evaluated February 5 & 27, 2008 per your Superior Court Order dated August 21, 2007 and received September 7, 2007. The order specified an opinion regarding Mr. Simms' Competency to Stand Trial and Mental State at the Time of the Alleged Offense be provided. Available court documents allege, on November 6, 2006, Mr. Simms along with another peer retained possession of a vehicle that had been reported stolen.

Attempts were initially made to evaluate Mr. Simms on November 6, 2007 and December 20, 2007; however, Mr. Simms failed to keep scheduled appointments and his file was closed with a letter, dated December 20, 2007, informing the court of same. No Indication to pursue further efforts to evaluate Mr. Simms was received; however, following Mr. Simms' recent admission to East Central Regional Hospital, January 31, 2008-February 4, 2008, arrangements were made with Mr. Simms and his mother to have them return to the hospital on February 5, 2008 to complete the current evaluation. Mr. Simms was seen on that date as well as on February 27, 2008 for completion of the evaluation.

SOURCES OF INFORMATION

Court documents including Indictment, Affidavit/Warrants, and Richmond County Sheriff's Office records (incident report with narrative, arrest/booking report, typed investigation summary including summaries of defendant/victim/witness interviews, interview worksheets, waivers of counsel, written statements, receipts for property, vehicle records, photos).

Letter authored by Daniel Neller, Psy.D., advising of failed attempts to meet with Mr. Simms November 6, 2007 & December 20, 2007.

Response from Richmond County Board of Education to a request for records.

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STATE'S EXHIBIT

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Medical College of Georgia records dated November 25-28, 2007, June 20, 2005, October 24, 2004, and September 6-7, 2004.

Central State Hospital (Milledgeville, Georgia) records from admissions dated September 7-10, 2004 & October 24-29, 2004.

Review of East Central Regional Hospital database information and records (Forensic Evaluation dated December 22, 2004 authored by Katrina Hallmark, Psy.D.; juvenile arrest records; Discharge Summary dated January 31 to February 4, 2008).

Clinical forensic interviews with Roland Simms February 5 & 27, 2008 at East Central Regional Hospital lasting approximately 1 hour 45 minutes and 1 hour 25 minutes, respectively.

Opinions are based on the above sources of information. If other information becomes available, and is believed relevant, although it may not alter the opinions reached regarding competency to stand trial and/or criminal responsibility, it can certainly be reviewed and considered.

NOTIFICATION OF RIGHTS

At the outset of the initial interview, a statement about the purpose of the evaluation and limits of confidentiality was reviewed with Mr. Simms. In addition to making Mr. Simms aware of the reason for the evaluation, he was told he did not have to answer any questions concerning his case and could terminate the evaluation at any time. He was also informed results of the evaluation were not confidential and anything he said or did may be communicated to the Court through the report and/or through courtroom testimony. He was advised a report would be sent to the judge and copies would be provided to his attorney and the district attorney as well. Following the review, Mr. Simms had some difficulty answering basic questions about the information provided. The information was reviewed further yet his understanding of the advisement appeared to remain limited. The evaluation was completed per the Court's order. At the outset of a subsequent interview, a verbal review of the advisement was again provided; however, Mr. Simms' understanding of the information again appeared limited.

RELEVANT BACKGROUND INFORMATION

Mr. Simms tended to offer inconsistent information about his background history and much of the following was gained from available records.

Records indicated Mr. Simms has lived with his mother and his stepfather throughout his history and has had little contact with his father. Mr. Simms related that he continues to reside with his mother and stepfather currently as well as two younger brothers. According to records, Mr. Simms' developmental history was uneventful and no indications of abuse, significant medical illnesses, or injuries were noted.

Educationally, Mr. Simms said he dropped out of high school in the 10th grade because he "wanted to put school to the side." He denied any history of special education services for learning or behavioral difficulties and the response from the Richmond County Board of Education, to a request for special education records, indicated there were no special education records for Mr. Simms. A previous forensic evaluation (dated December 2004) conducted per order of the juvenile court; however, noted that Mr. Simms was served through the emotional/behavioral disability program during 5th and 6th grades. It was unclear though whether this was based on information from school records or the report of others (e.g., Mr.

Simms, Mr. Simms' mother, juvenile probation officer). Results of intellectual testing completed as part of the December 2004 evaluation also estimated Mr. Simms' intellectual functioning to fall in the Borderline range of intelligence (IQ scores ranging from 70-79). It is noted, however, that Mr. Simms was not taking prescribed psychiatric medication at the time of testing and exhibited anxiety, expressive and receptive language difficulties, and slowed thought processing; symptoms that likely impacted results of testing and can be evidenced as part of various psychiatric disorders (e.g., as part of a cognitive, learning, or thought disorder such as Schizophrenia).

Mr. Simms denied any history of employment, consistent with information in available records, as well as any history of alcohol or drug use. Available records though revealed Mr. Simms' acknowledgements of use of marijuana and cocaine during early adolescence. Records also indicated Mr. Simms' involvement with the juvenile court for charges of simple battery, simple assault, criminal trespass, obstructing persons making emergency phone calls, and traffic violations. Mr. Simms was noted to have been detained in an area Regional Youth Development Center and to have participated in a short term program as part of a juvenile probation during adolescence as well.

Mental health treatment history appears to date to 2004 and includes Mr. Simms' presentation to the Medical College of Georgia on four occasions between September 2004 and November 2007. In September and October 2004, Mr. Simms was transferred from the Medical College of Georgia to Central State Hospital for psychiatric hospitalization. Between May 2007 and February 2008, Mr. Simms was also hospitalized at East Central Regional Hospital (ECRH) on four occasions. Psychiatric admissions were usually prompted by Mr. Simms' mother's report that Mr. Simms had been verbally or physically aggressive at home subsequent to a period of Mr. Simms failing to take prescribed psychiatric medication (his mother's inconsistency regarding his need for medication appeared to contribute to Mr. Simms' poor compliance) and, on some occasions, his use of drugs as well (i.e., cocaine or marijuana). Admissions lasted from a few hours to a few days. Most recently, Mr. Simms was hospitalized at ECRH January 31-February 4, 2008 following his mother's report of him failing to take prescribed psychiatric medication, "tearing things up at home," and being physically aggressive. At admission, Mr. Simms denied his mother's report as well as psychiatric symptoms. He was noted, however, to make odd gestures with his hand, to have poor attention and concentration, hyperverbal and intrusive speech, and a childlike demeanor. Medications were reinitiated and it was felt Mr. Simms was ready for transfer to the forensic unit of the hospital for completion of the present pretrial evaluation on February 1, 2008. At the request of his mother, Mr. Simms was though discharged on February 4, 2008 (his 19th birthday) prior to completion of the evaluation, as both Mr. Simms and his mother agreed to return the following day to meet with this examiner. Discharge diagnoses were Schizophrenia Undifferentiated Type, Cannabis Abuse, Cocaine Abuse, and Borderline Intellectual Functioning.

MENTAL STATUS AND BEHAVIORAL OBSERVATIONS

Mr. Simms was tall with a slender build and appeared approximately his stated age of "19." He was oriented to person, place, and generally time, but superficially to situation at the time of interviews.

When seen initially on February 5, 2008, Mr. Simms had difficulty following the course of the interview and appeared to be experiencing ongoing psychiatric symptoms (e.g., thought processing difficulties, very poor attention/concentration, psychomotor agitation). During the interview, he evidenced deficits in factual and rational understanding of court-related terms/concepts and his situation in relation to the proceedings. Mr. Simms also related that although he had taken psychiatric medication consistently during his recent admission, he had not been taking medication prior to admission and had not taken medication since his discharge the previous day due to waking up just prior to leaving the house for the scheduled appointment with this examiner. In subsequent contact with his mother and stepfather, they indicated intentions to encourage Mr. Simms' medication compliance as well as a willingness to review educational court-related material with Mr. Simms if provided to him. An appointment was made to meet with Mr. Simms a few weeks later to allow for further stabilization of his mental status with continued adherence to his medication regimen. Mr. Simms was also provided with court-related educational material to review on his own in the interim.

Mr. Simms was seen again on February 27, 2008. During the interview, he related that he had not taken psychiatric since meeting with the examiner and deterioration in his hygiene and grooming as well as his mental status was noted. Consistent with the initial interview, speech was generally coherent yet sometimes difficult to understand due to expressive and receptive language difficulties that resulted from thought processing deficits. Attention and concentration was poor and responses were often tangential and, at times, unrelated to the question. Responses became more disjointed as the interview progressed and Mr. Simms began to intermittently state "take it back" (e.g., after providing a response, after a pause, or after mumbling to himself) repeating the phrase with increasing frequency as if in response to some stimuli unseen by this examiner. In addition, Mr. Simms would intermittently set imaginary objects on the desk, attempting to cover such behavior when he noted this examiner looking at him doing such. He also focused on certain places in the room at times as if attending to something not apparent to this examiner. When questioned specifically about symptoms though, Mr. Simms denied experiencing any hallucinations and said his mind "thinks excellent" and his "life [is] excellent." Additionally, despite a flat affect, he described his mood as "good" and denied any problems with his mood as well as other symptoms of mood disorder (e.g., sleep or appetite disruption, thoughts or intentions of harming himself or others).

COMPETENCY TO STAND TRIAL

During the initial interview, Mr. Simms' responses to competency-related questions were at times tangential and rambling and suggested limited understanding of court terms/concepts and his current legal situation. A competency instrument designed to assess court-related abilities of individuals whose intellectual functioning falls in the range of mental retardation, below that of Mr. Simms' intellectual functioning based on results of prior testing, was also administered. Mr. Simms' overall score on items that assess basic understanding of legal terms was more consistent with individuals who have mild to moderate mental retardation and are considered to have the capacity to proceed to trial than those considered not to have the capacity to proceed. His overall score on items designed to assess ability to assist in one's case through responses to hypothetical court-related situations; however, was more consistent with those of individuals who have moderate to mild mental retardation and are considered not to have the capacity to proceed than those considered to have the capacity to proceed.

Results suggested decreased cognitive processing abilities likely resultant to mental health symptoms observed during the interview.

At the time of the most recent interview, February 27, 2008, Mr. Simms offered largely disjointed and inconsistent responses to competency-related questions. Although he demonstrated some factual understanding of court-related terms/concepts, his rational understanding appeared limited. For instance, Mr. Simms was able to state the name of his charge, "theft by receiving," and to offer a basic description of the alleged behavior. When asked about the potential penalty he could face, however, he repeatedly stated that he "could do probation," indicating, even when more significant consequences were suggested as potential penalties, that probation was the strongest potential penalty he could face because he "might not be guilty" and "might just say I'm guilty." Inquiry about the meaning of a not guilty plea yielded the following, "What I'm saying [unintelligible mumbling], oh, take that back, means I'm saying not do anything, oh, well not do it," which was followed by him putting his hand in his pocket, retrieving something not visible to this examiner, cupping his hands around the object, placing it on the desk, and then placing his hands back in his lap. Asked what he placed on the desk, he offered, "Oh, wait, nothing, nothing, oh, peppermints in my pockets." No peppermints visible to this examiner were retrieved from his pocket. To inquiry about the role of his attorney, Mr. Simms said his attorney's role was to "help with my court" yet subsequently, when asked about the role of the judge, he indicated that the judge acts as a referee between him and his lawyer suggesting his understanding of his attorney's role in his case to be superficial. The role of the district attorney he asserted was to "sit there and write everything down and send it to the judge and he decides what to do with me." This was followed by increasingly odd behaviors (e.g., Mr. Simms stating "yes" periodically as if in response to unseen others, unintelligible mumbling, imitating this examiner writing by moving his hand in a similar motion in the air). To questions about what he would do if certain circumstances arose during court proceedings, Mr. Simms responded, on more than one occasion, that he would "just sit there" and "hope everything go[es] good."

Based on available information and interviews, it did not appear that Mr. Simms had the capacity to proceed at the time of the present evaluation. While Mr. Simms demonstrated some factual knowledge of court-related terms/concepts, his knowledge tended to be inconsistent and his overall rational understanding appeared limited. He appeared to be experiencing symptoms of a thought disorder that impacted his ability to follow and engage in a coherent discussion about court-related terms/concepts as well as his ability to provide consistent responses to similar inquiries. It appeared likely Mr. Simms would encounter similar difficulties in discussions with his attorney as well, impacting his ability to assist in his defense and to participate meaningfully in the proceedings against him.

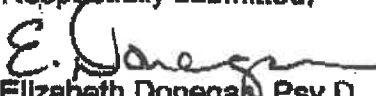
CRIMINAL RESPONSIBILITY

Due to Mr. Simms' presentation and concerns about his capacity to consent to an evaluation of his mental state at the time of the alleged offense, such an evaluation was not completed and no opinion was formed with respect to this issue. Once Mr. Simms attains the capacity to proceed and demonstrates awareness of the purpose of as well as consents to an evaluation of his mental state at the time of the alleged offense, one can be completed and an opinion provided to the Court.

SUMMARY AND RECOMMENDATIONS

At the time of the present evaluation, Mr. Simms did not appear to have the capacity to proceed. Available information indicates Mr. Simms to have a history of mental illness and symptoms of thought disorder were evident during interviews. Thought processing difficulties interfered with Mr. Simms' ability to engage in a relevant discussion about judicial proceedings and his current legal situation. It appeared unlikely he would be able to communicate effectively with his attorney to assist in his defense or participate meaningfully in proceedings against him. While Mr. Simms appears to have a history of poor adherence to his prescribed medication regimen when in the community, available information suggests Mr. Simms takes psychiatric medication as prescribed during hospitalizations with resultant improvement in functioning such that he is considered appropriate for discharge. Given such, it appears Mr. Simms could likely attain the capacity to proceed within a reasonable period following a finding of incompetence by the Court and commitment for competency restoration services (i.e., psychiatric treatment and competency restoration programming). Considering Mr. Simms' reluctance to take medications when in the community and reported history of aggressive behaviors when in the community and non-adherent to his medication regimen, a commitment for inpatient competency restoration is recommended. In an inpatient setting, Mr. Simms' cooperation with psychiatric medication and competency restoration programming would be closely monitored and any necessary adjustments in programming or medication could be readily made. Once Mr. Simms attains the capacity to proceed, an evaluation of his mental state at the time of the alleged offense could be conducted and an opinion provided to the Court.

Respectfully submitted,

 Psy.D.
Elizabeth Donegan, Psy.D.
Licensed Psychologist

CC: Jason Hasty, Assistant Public Defender
Adam King, Assistant District Attorney
Forensic File

IN THE SUPERIOR COURT OF RICHMOND COUNTY

STATE OF GEORGIA

CLERK OF SUPERIOR, STATE AND JUVENILE COURT FILED FOR RECORD

2018 JAN 16 AM 11:31

HAYLIE HOLMES SULLIVAN CLERK, RICHMOND CO., GA.

STATE OF GEORGIA

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v.

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INDICTMENT NO. 2011-RCCR 536

ROLAND SIMMS

*

Defendant

*

ORDER CONTINUING OUTPATIENT CIVIL COMMITMENT

On May 31, 2011, Defendant was found incompetent to stand trial. On July 20, 2012, the Court ordered Defendant to be civilly committed to East Central Regional Hospital (ECRH) upon finding him incompetent to stand trial and non-restorable. On January 4, 2016, the Court authorized and ordered Defendant to be transferred to the Community Integration Home (CIH) under the supervision of the Department of Behavioral Health and Developmental Disabilities (DBHDD). Defendant was discharged from ERCH to CIH and has remained at CIH since April 19, 2016.

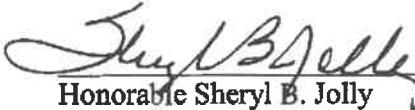
Per the opinion of the authorities at DBHDD in their correspondence dated October 31, 2017, Mr. Simms has made improvements and has reached the maximum benefit from his placement at CIH. Defendant complies with taking medications, with unit rules, and participates in treatment. Defendant also maintains regular visits to American Works for mental health treatment.

WHEREAS this Court finds Defendant has been compliant with the plan enacted in 2016 and has reached the maximum benefit from his placement.

IT IS HEREBY ORDERED AS FOLLOWS:

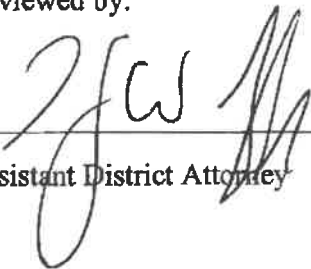
- (1) Defendant, Roland Simms, shall be discharged from the Community Integration Home and placed in the care of his mother, Barbara Walker. However, the Court shall retain supervision over Defendant for a period of one year and shall have a quarterly review of Defendant's progress.
- (2) Defendant shall continue his treatment at American Works and take his medication.

SO ORDERED this 12 day January, 2018.


Honorable Sheryl B. Jolly
Judge Superior Court Augusta Judicial Circuit

Presented by:
Iymaan Williams
Assistant Public Defender
GA Bar 659855

Reviewed by:


Assistant District Attorney

IN THE SUPERIOR COURT OF RICHMOND COUNTY
STATE OF GEORGIA

STATE OF GEORGIA

*

v.

* ACCUSATION NO.: 2011-RCCR-536

ROLAND SIMMS,

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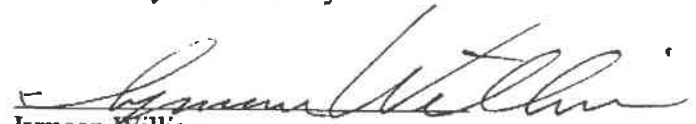
Defendant

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CERTIFICATE OF SERVICE

I do hereby certify that I have served a true and exact copy of the foregoing Order of Discharge from Civil Commitment upon counsel for the State by hand delivery.

Office of the Public Defender
902 Greene Street
Augusta, Georgia 30901



Iymaan Williams
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Telephone No.: 706-312-5105
Fax No.: 706-842-1332
Iwilliams2@augustaga.gov