



Office of Forensic Mental Health Services (OFMHS)

COMMUNITY AND JAIL BASED COMPETENCY RESTORATION PILOT PROGRAM

ALABAMA RULES OF CRIMINAL PROCEDURE:

RULE 11. INCOMPETENCY AND MENTAL EXAMINATIONS

Rule 11 preserves the constitutional rights of people by ensuring that they understand criminal charges pending against them and that they can work with their attorney to assist in their own defense; also referred to as competent to proceed. In addition to defining incompetency, Rule 11 also establishes procedures for the court to consider when concerns about competency arise, which could include dismissing the charges against the person or pausing all proceedings until the person can be restored to competency.

ORDERS FOR COMPETENCY RESTORATION (CR)

Under Rule 11, a Circuit Court Judge may commit a defendant to the custody of the Department for CR Services¹ (see Rule 11.6). Upon the Department's receipt of such order, a person is added to ADMH's waitlist for inpatient restoration services. While on the waitlist, a defendant may remain in jail or may be released on bond. Persons who remain in jail are prioritized for admission.

EXPANSION OF SETTINGS FOR COMPETENCY RESTORATION (CR) – PILOT DEMONSTRATION PROJECT

ADMH currently maintains a male and female waitlist for CR. These services are only available in the inpatient setting, which has placed a strain on state and local resources. The Department is piloting a project to allow for restoration services to also be made available to people in jail and community settings, an empirically validated approach to addressing our current waitlists (see <https://mh.alabama.gov/wp-content/uploads/2022/08/Competency-Restoration-Model-Implementation-August-12-2022.pdf>)

¹ CR services are not synonymous to long term mental health or substance abuse treatment. CR services are focused to stabilize a defendant so that they can resume participation in their legal proceedings. See the OFMHS website for additional information- <https://mh.alabama.gov/wp-content/uploads/2023/02/At-a-glance-series-Court-Action-and-Forensic-Evaluation.pdf>

OUTCOMES FOR DEFENDENTS

1. CR models focus on offering treatment to stabilize symptoms as well as competency related legal education so that the legal proceedings can resume. The piloted Jail and Community Based models focus on only delivering legal education and therapeutic interventions but could entail consulting with existing jail or community providers who may prescribe psychotropic medication as and when appropriate.
2. Persons ordered into the custody of the Department for treatment and/or competency restoration services will continue to be added to the inpatient waitlist at the time the order is received and in accordance with current procedures. During the pilot phase, a person will remain on the inpatient waitlist until the court deems the person restored, regardless of whether they are receiving CR in jail or in the community. This practice will ensure that a person does not “lose their place in line” should the person not respond well to the jail or community CR.
3. The Clerk, Judge, Defense Attorney, and District Attorney assigned to the defendant’s case in Alacourt will be notified via e-mail when a person will be offered CR in either the jail or community setting.
4. Once a person has successfully completed the CR program or is believed to have been restored, they will be referred for an updated evaluation of their Competency to Stand Trial (CST) and the resulting report will be submitted to the court in accordance with Rule 11.5.
5. The goal of expanding the CR settings is to attempt to restore people to competency efficiently so that the court proceedings can resume as swiftly as possible. In addition, this model may reserve hospital beds for those people who require inpatient psychiatric treatment and who meet commitment criteria.

ANTICIPATED OUTCOMES FROM THE PILOT PROJECT

1. The project will allow for the collection of data regarding the efficacy of the program, which can be used to guide decision making regarding future program expansion across the state.
2. Findings from this project will allow the Department to develop tools and protocols that examiners and the court may use to guide future decision making regarding the most appropriate setting for CR to be delivered to a person.
3. Findings from this project will allow the Department to develop tools and protocols which can be used to identify participants (e.g., characteristics, charges, diagnoses, criticality levels) who are most likely to benefit from a jail or community-based restoration program.
4. Through project implementation, we hope to build upon existing partnerships so that participants can access medication management services when appropriate and necessary in the jail and/or community setting.
5. The participants’ response to the program and the court’s satisfaction with any identified outcomes can be used to develop strategies to sustain the model into the future.

Jail Based Competency Restoration (JBCR)	Community Based Restoration (CBCR)	Inpatient Competency Restoration
<ul style="list-style-type: none"> • Jefferson and Bessemer Pilot Program- Partnership between the University of Alabama and the ADMH. UA Doctoral students deliver the intervention under the supervision of a licensed psychologist. Project is funded through a Bureau of Justice Assistance grant. • Upon completion of phases of the pilot project, the program will be rolled out into other jails. • Services may be delivered in person or via online/ remote tele-platforms. • The program is managed by ADMH's OFMHS. 	<ul style="list-style-type: none"> • Pilot program available to Defendants who are released on bond. • Appropriate for Defendants who can be safely and appropriately served on an outpatient basis and who primarily need CR legal education. • A mental health clinician delivers the intervention overseen by the OFMHS. • Interventions are primarily delivered via on-line/ remote tele-platforms but may be delivered in-person in limited circumstances. • Program managed by the OFMHS. 	<ul style="list-style-type: none"> • Current model for delivering CR. • During the pilot, all defendants ordered for CR will be added to the inpatient waitlist. • Defendants who meet inpatient commitment criteria or who require inpatient observation and evaluation services will remain on the waitlist until admission. • Hospital staff deliver the interventions. • Interventions are delivered in-person and on site.

During our current pilot program, courts should continue to issue orders for CR as they do today. ADMH currently monitors the waitlists to determine who may be appropriate for CR services. Such decisions regarding the provision of CR outside of the hospital settings are made by ADMH on a case-by-case basis as staffing permits, are based on clinical and behavioral factors, and in accordance with draft program eligibility criteria. Forensic Examiners may include recommendations regarding the most appropriate CR setting for the defendant in their evaluation report.

FOR ADDITIONAL INFORMATION

Questions about this project may be directed to the ADMH Office of Forensic Mental Health Services:

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