

Restoration Game Proposal: Contextual Information

Broughton Hospital, Forensic Services Department

Point of Contact: Jenna Seward-Hatfield, Psy.D.
Email: jenna.seward-hatfield@dhhs.nc.gov
Office Phone: 828-608-4813

Introduction

North Carolina, like many other states across the country, is currently facing pressure to admit more patients to psychiatric hospitals who have been found Incapable to Proceed (ITP). The State is currently implementing new programs to mitigate demand on the psychiatric hospital system through jail-based and outpatient restoration programs (e.g., RISE program, Alliance Health's community-based programs). However, these programs are still new and have their own limitations. It is noted that on average, those who have been found Incapable to Proceed in North Carolina wait approximately 173 days¹, or around 6 months, to be admitted to a hospital bed. In part, the extended wait time is due to an increase in referrals to the hospital for ITP admissions. During the 2016 fiscal year, approximately 10% of the hospital admissions were ITPs, while in 2024 fiscal ITPs accounted for 28% of admissions.¹ For a more in-depth investigation of the struggle ITPs face, please refer to the Fractured special² or the associated article.³

In 2024, the ACLU of North Carolina Legal Foundation, along with Disability Rights North Carolina and the law firm of Arnold and Porter filed a lawsuit against the North Carolina Department of Health and Human Services (NCDHHS) asserting that the rights of pre-trial detainees were being violated as NCDHHS was failing to ensure timely evaluations and treatment.⁴⁵ Despite this apparent crisis within North Carolina, as well as across the country, little research continues to focus on the methods of restoring someone to capacity. There are meta-analyses and studies that look at the impact of diagnoses, IQ, etc. on length of restoration and likelihood of restoration, but few studies look at what services are being provided. While most restoration programs involve psycholegal education, there is no established or recommended framework for providing capacity restoration.

¹ [NC defendants with mental illness wait months in jail for court-ordered treatment](https://www.northcarolinahealthnews.org/2025/02/27/incapable-to-proceed-defendants-wait-months-in-jail-for-treatment-capacity-restoration/)

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² [Fractured | FRONTLINE | PBS | Official Site | Documentary Series](http://www.pbs.org/wgbh/frontline/documentary/fractured/)

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³ [Part 1: The wait inmates with mental illness endure because they're too sick for trial | WFAE 90.7 - Charlotte's NPR News Source](https://www.wfae.org/health/2023-04-18/the-wait-inmates-with-mental-illness-endure-because-theyre-too-sick-for-trial)

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⁴ [Lawsuit Alleges Illegal Prolonged Jailing of People with Mental Health Disabilities - DRNC](https://disabilityrightsn.org/news/lawsuit-alleges-illegal-prolonged-jailing-of-people-with-mental-health-disabilities/)

<https://disabilityrightsn.org/news/lawsuit-alleges-illegal-prolonged-jailing-of-people-with-mental-health-disabilities/>

⁵ [Disability Rights NC v. NC DHHS - ACLU of North Carolina](http://www.acluofnorthcarolina.org/cases/disability-right-nc-v-nc-dhhs/)

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Project Relevance

The timely and effective treatment of defendants deemed ITP directly impacts and intersects with the legal system. This is a population that largely goes unrecognized, and research related to treatment for the Severe and Persistent Mental Illness (SPMI) population tends to be minimal compared to those with other disorders. With the passing of Iryna's Law (H.B. 307) in North Carolina, the push to expand and enhance the IVC and ITP processes are being felt at a micro and macro level. With this push comes the need for new, updated research and resources for those providing services in State psychiatric hospitals. At Broughton Hospital, we pride ourselves on staying up to date on the current literature in the field and are always seeking to connect with others to expand the resources we have. Collaborating with Broughton Hospital to develop materials related to capacity restoration could address a current need for ITPs and providers.

Brief Literature Review

It should be noted that in the below review, competency is used as opposed to the word capacity. This is because most states refer to someone as Incompetent to Stand Trial (IST), while North Carolina uses Incapable to Proceed (ITP).

- General Review of Restoration
 - Heilbrun et al. (2019) attempted to look at the varying approaches to competency restoration that currently exist. The authors noted that in addition to restoration being offered in the hospital setting, there was an increased number of outpatient competence restoration programs and jail-based restoration programs. In terms of treatment efficacy with the SPMI population, Heilbrun et al. (2019) referenced the importance of medication in stabilizing psychiatric symptoms. Education being a form of treatment was referenced and was noted as being beneficial, but no information about variations in the forms of education were provided. The article referenced two specific education-related studies. One study focused on remediating the deficits displayed by the patient, which showed an improvement in outcomes. The second was related to a Fitness Game developed in Hawaii, that ultimately showed minimal impact on restoration outcomes. When discussing treatment with the IDD population, the Slater Method was referenced (a more detailed review of this is below). Cognitive remediation was recommended for those with cognitive deficits, but again, there was limited reference to any specific protocols.
- The Slater Method:
 - The Slater Method is a program that was developed within the Rhode Island Department of Mental Health specifically for use with the intellectually disabled population. In the initial study published on the Slater Method, 15 defendants were noted to have received restoration services including the Slater Method, five of whom were ultimately opined competent to stand trial (Wall, Krupp, & Guilmette, 2003). A follow-up, retrospective study found that 11 out of 18 in the Slater Method group were found competent to stand trial, while 2 of 12 in the traditional restoration group were (Wall & Christopher, 2012). One of the barriers of the Slater Method is that it requires 1:1 work, as opposed to being designed to be administered to a group. While 1:1 work can occur, with staffing shortages within the State system this is not always a viable option.

- Functional Rehabilitation and Education Experience: Court Competency Skills Building (FREE CCSB):
 - FREE CCSB is a program from the California Department of State Hospitals. The program looks at the implementation of cognitive remediation strategies through twice a week groups, use of a computer application, and homework as part of competency restoration. An initial study found that those with full access to the FREE CCSB program “made stronger gains in most areas of competency progress and were more likely to be restored to competence and have a shorter length of stay in the hospital” when compared to those with limited access (King & Aguilar, 2025, p. 221). The area of rational understanding of the patient’s own case was the one area that did not significantly differ between the groups.
 - While the specifics of the programming are not readily available, as they are the property of the state of California, I was able to speak with one of the principal investigators and creators, Loren King, Ph.D. Dr. King explained that during COVID, he used some of his work hours to teach himself to code through MIT’s “Scratch” program. Through this, he was able to create a computer game that has been integrated into their cognitive remediation curriculum. The game is used to reinforce the content that is being reviewed in group. An example Dr. King gave, was having patients tap (on a touchscreen Chromebook) where different people in the courtroom should sit. He noted that the game provided feedback based on responses, and that patients were unable to move forward until the correct answer was achieved. The game also helps track treatment progress, as each time the game is played, the patient receives a percentage score based on their correct answers.
 - *Dr. King and I also discussed that there is limited ability for those who are working on creating restoration materials to collaborate with one another. We are often all working within our own facilities, and with the limited research in the area it makes it difficult to know who to reach out to for potential collaboration efforts.*
- Cognitive Behavior Therapy for Psychosis (CBT-p) and Restoration:
 - Arguments have been made for the introduction of techniques in CBT-p for competency restoration, particularly when psychotic symptoms have been an identified restoration barrier. Grossi, Cabeldue, and Brereton (2021) note that CBT-p is a treatment protocol that is empirically based and can be administered in a group setting. Another benefit noted by the authors is that CBT-p can address residual symptoms that may not respond to medications.
 - Broughton Hospital has an established CBT-p group curriculum, and also has a thought-exercise game that can accompany is called Albert’s Game.

References

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