

S.C. MENTAL HEALTH COMMISSION
S.C. Department of Mental Health
Waccamaw Center for Mental Health
164 Waccamaw Medical Park Drive, Conway, SC 29526

June 7, 2019

Center Presentation

ATTENDANCE:

Commission Members:

Dr. Alison Evans, Chair
Ms. Louise Haynes
Mr. Bob Hiott
Mr. Greg Pearce

Staff/Visitors:

Dr. Robert Bank
Deborah Blalock
Ethel Bellamy
Jackie Brown
Carolyn Hickman-Williams
Joyce Phillips
Greg Kirk

William Polk
Corrie Farrar
Melba Arthur
Devora Harrelson
Kelly Kaminski
Naomi Kent
Tom Ryba

Jasmine Glover
Lakeide Exama
Winferd Pendergrass
Rupa Shetty
Betty F. Matthews
Dave Moen
LaShanda Nesmith

The S.C. Mental Health Commission met at the Waccamaw Center for Mental Health, 164 Waccamaw Medical Park Drive, Conway, SC 29526, at 9:00 a.m. Dr. Alison Evans expressed appreciation to the Center for the courtesies extended to the Commission during its visit. Dr. Evans turned the meeting over to the WCMH Director Ethel B. Bellamy.

PRESENTATION: Center and Community Working Together

Ms. Ethel B. Bellamy discussed the long history of collaboration with public agencies and private organizations WCMH has in each of the three counties it serves; Williamsburg, Georgetown, and Horry. WCMH has strong community relationships with school districts, probate courts, law enforcement, hospitals, primary healthcare facilities, other children's programs, and more.

WCMH followed the valuable advice of County Councilman James R. Frazier: first, get council members to understand the Center's needs, second, explain why your needs are different and greater than the needs of others, and third, get individual commitments from each member of the council member.

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Per Jackie Brown, in 2009, WCMH received \$30,000 in appropriations from Horry County. From 2010-2013, WCMH received zero county appropriations from Horry County. The WCMH board members and staff reached out to Horry County Council Members to communicate the importance of the services provided by WCMH, the impact the Center has on the County, and its needs. After a series of meetings and presentations Horry County Council renewed appropriations for the Center, and in 2014, WCMH received \$75,000 in appropriations from Horry County. In 2015, WCMH received \$70,000 to fund its Individual Placement and Support Services (IPS) program through the County's Community Development Block Grant. In 2016, WCMH received \$50,000 to fund its Individual Placement and Support (IPS) program. The County typically funds programs for three years, decreasing amounts yearly, with the hope that the program becomes self-sustaining.

In 2017, Horry County Council offered in-kind support by providing a building for \$1.00 a year to house a clinic. WCMH accepted the lease of the building and established the South Strand Clinic located in the South Strand Complex at 9630 Scipio Lane, Myrtle Beach, SC 29588.

B. Doris Smith, MA LPC/S, South Strand Clinic Director presented the following:




WACCAMAW CENTER FOR MENTAL HEALTH SOUTH STRAND CLINIC

B. DORIS SMITH, MA LPC/S

SOUTH STRAND CLINIC DIRECTOR

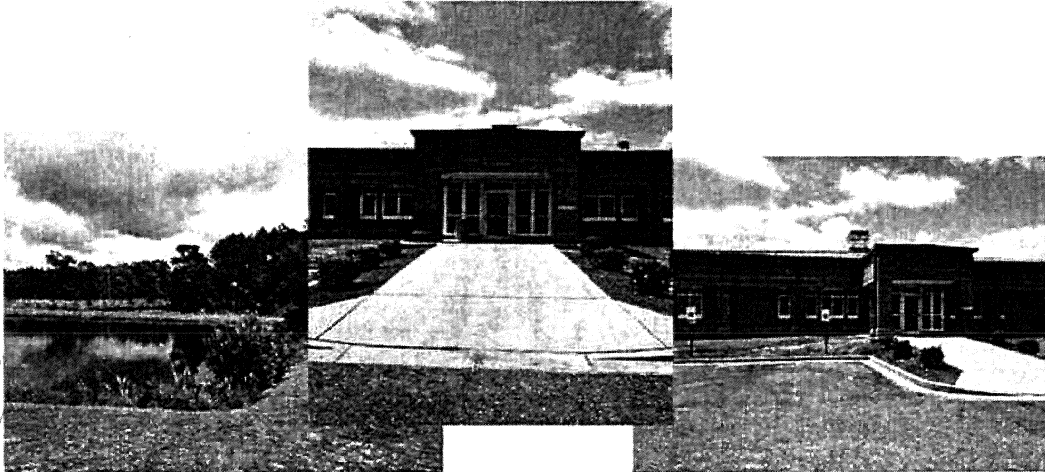
LOCATION



The South Strand Clinic is part of the Horry County: South Strand Complex located on 9630 Scipio Lane, Myrtle Beach SC 29588.

Our suite mates in the Complex are the Horry County Police Department (South Strand Precinct) , Horry County Magistrates Satellite Office, Horry County Treasurer and Auditor Satellite Office, Horry County Police Department Victims Advocate and DSS/HHS Satellite Office.

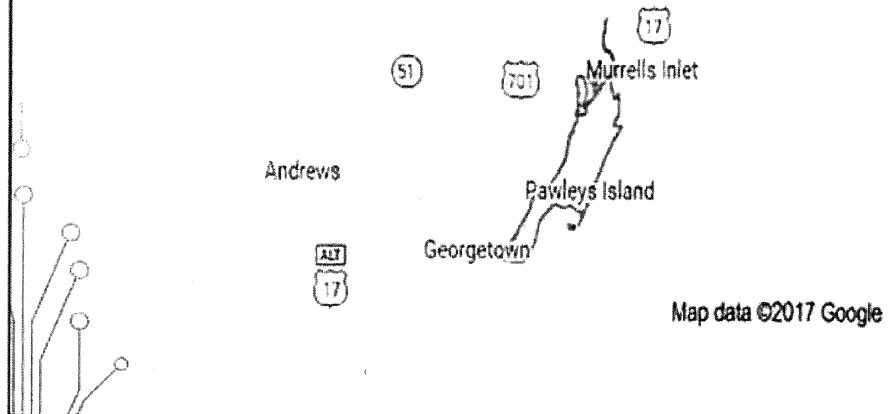
THE SOUTH STRAND CLINIC



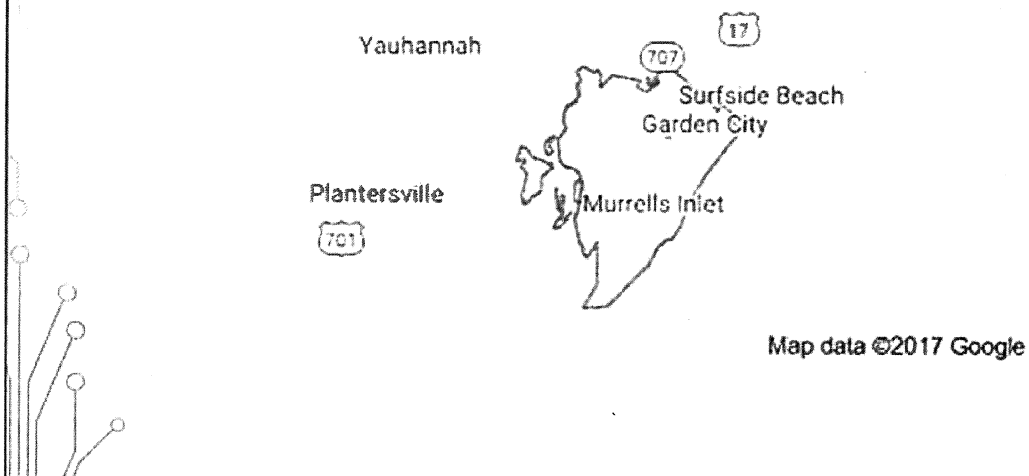
WHO DO WE SERVE?

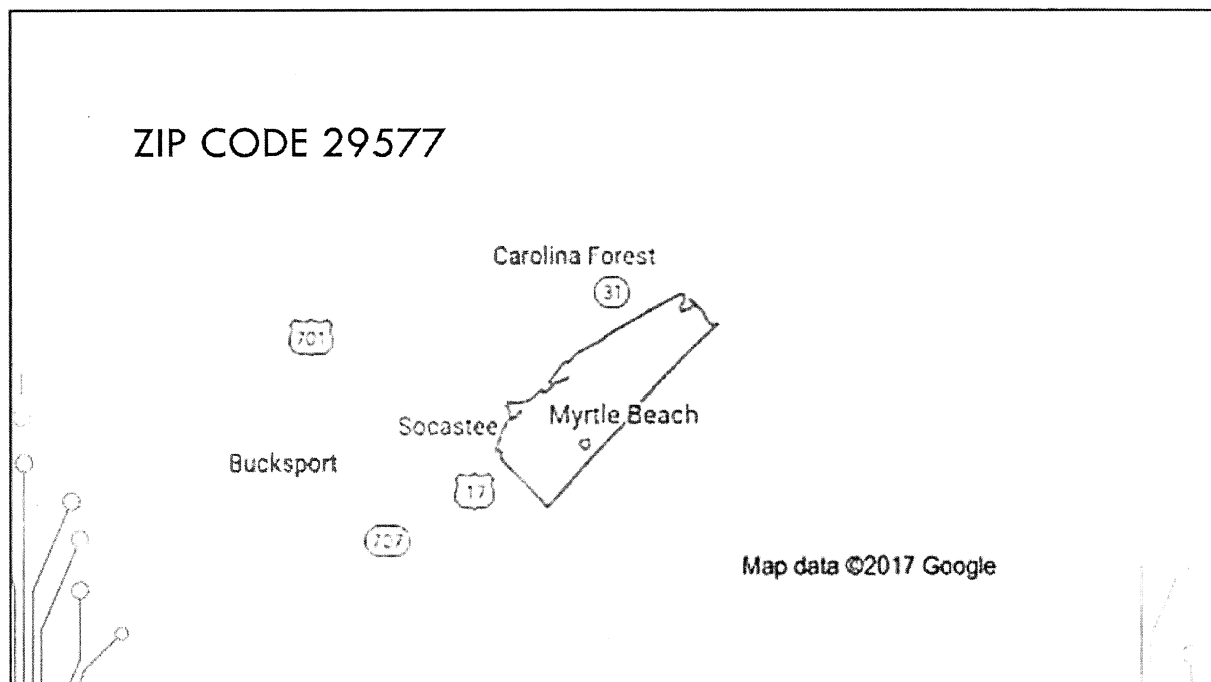
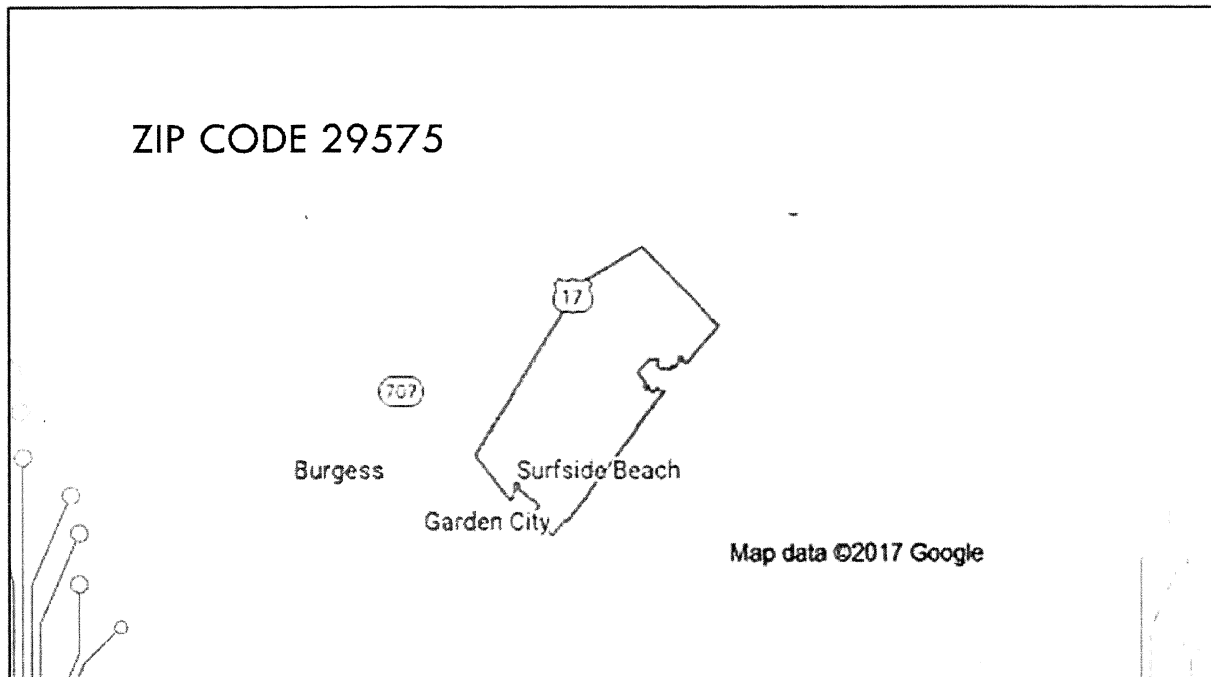
- The South Strand catchment area consist of the lower South-East end of Horry County.

PORTIONS OF ZIP CODE 29585

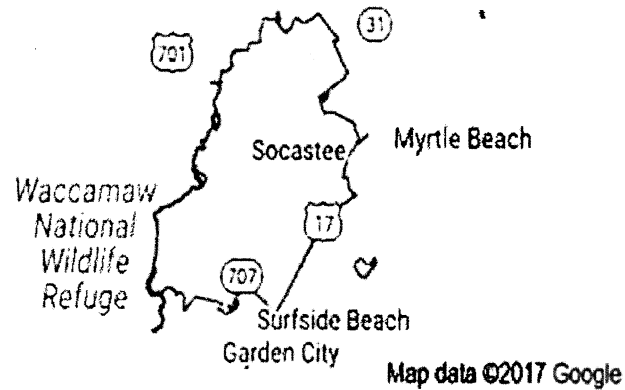


ZIP CODE 29576





ZIP CODE 29588



THE MYRTLE BEACH AREA IS THE SECOND FASTEST GROWING METROPOLITAN AREAS IN THE COUNTRY

By [Patrick Lloyd](#) | April 22, 2019 at 11:04 PM EDT - Updated April 23 at 9:32 AM

MYRTLE BEACH, SC (WMBF) - The Myrtle Beach metropolitan area is the second-fastest growing metropolitan area in the United States for the third year in a row, according to [new data from the U.S. Census Bureau](#).

The statistics show the Myrtle Beach area grew 3.8% last year.

More than 1,400 people per month are moving to the area.

In the last eight years, more than 104,000 people have moved to the area.

The only metro area growing faster than Myrtle Beach for 2018 was Midland, Texas at a 4.3% growth rate.

The Villages, Florida is the only area growing faster than Myrtle Beach over the last eight years.

Britni Gaddy with Real Living Home Realty Group believes the trend of people moving to the Grand Strand will continue in the future.

"I think it will continue going forward, because we're always going to have the nice weather," Gaddy said. "The taxes hopefully are going to remain the same."

Many people new to the area cite the lower property taxes as a reason for moving to the Grand Strand.

"Property taxes in Maryland were quite a bit higher," Mary Bair, who recently moved to Myrtle Beach from Maryland said. "Probably almost five times."

THE HISTORY OF SOUTH STRAND CLINIC

- October 3, 2017 the South Strand Clinic opened it's doors. We began with 1 Therapist, 1 Nurse, 2 days a week of Doctor time, 1 Administrative Assistant and the Clinic Director.
- December 2017 the MST (Multi-Systemic Therapy) Program began. We added two additional therapist for that program.
- June 1, 2018 the MST Program was discontinued due to loss of funding. The MST staff members were absorbed by the Clinic due to the fast growing caseload.

SOUTH STRAND TODAY

- Staff Composition: 5 Therapists, 1 Psychiatrist Nurse, 3 Administrative Staff, 2 days a week of Adult Psychiatry time and 2 days a month of Child and Adolescent Child Psychiatry Time and the Clinic Director.
- Current caseload: 324
 - Adults: 219
 - Children: 105

SOUTH STRAND STATISTICS OCTOBER 3, 2017 TO MAY 31, 2019

- Admissions: 531
- Discharges: 326
- Direct Service Hours: 5,938
- Patient Contacts: 7,537

PLANS FOR THE FUTURE

- Each Clinical staff member will be trained in at least one Evidenced Based Therapy.
- Add more clinical staff, administrative staff, another Nurse and increase Physician time as the Caseload grows.
- Begin to look for a larger facility. We are almost out of space to provide services. We only have one office space left.

CONCLUSION

- As the number of individuals seeking Mental Health Services increase the need and demand for services will increase. The Goal of the Waccamaw Center for Mental Health is to expand services in this area, strengthen already established community partnerships as well as build new community partnerships and continue to assess the mental health needs of this fast growing area.

QUESTIONS

- Questions?
- Thank you and have a great weekend!!!

PRESENTATION: Stomp Out Stigma - Recovery IS Real

Kisha Guess, Georgetown Clinic Director, presented Stomp Out Stigma: Recovery IS Real.

The WCMH Patient Advocacy Council, formed under the direction of Ethel Bellamy, has the mission to provide a forum for patients to review Center services, policies, procedures, and other issues that directly affect patients and allow them to make suggestions and recommendations and express their interests and concerns.

They voiced a need to have an Annual Recovery Conference to help educate patients and the community about mental illness. The first conference, held in 2012, was located in the WCMH conference room. After a few years of growth, and the need for space to have break-out sessions, they relocated to Georgetown County, a more central location. Seven years later WCMH is still having successful conferences spearheaded by the Patient Advisory Council.

The Saint Stephen AME Church allowed WCMH to use their Family Life Center when the conference first moved to Georgetown. Now the conference is held at St. Peter's Lutheran Church, Pawleys Island, SC. The Center was allowed to use both spaces for free.

Mr. William P., a patient at WCMH, shared his story of recovery.

PRESENTATION: Co-occurring Mental Health Court

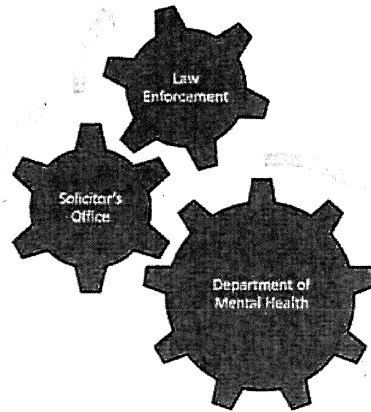
In 2009, the Horry County began a Drug Court program. They soon realized that about 10% of those who applied to Drug Court Program had co-occurring mental illness and were unable to participate in the Drug Court Program while taking medication for mental illness. So in 2011 they collaborated with law enforcement, the solicitor's office, and WCMH to address this problem.

March, 2015, Chief Justice Jean Toal signed Horry County's Co-occurring Mental Health Court into action. June 1, 2015 was the first day of the Horry County's Co-occurring Mental Health Court.

The nation's largest and busiest mental health facilities are jails, which is not the best place for those with mental illness.

Devora Harrelson, social worker, presented the following information:

MH Court: A Collaborative Approach



Law Enforcement: Costs more to incarcerate MI inmate than inmate who is not mentally ill; Higher recidivism rate.

Solicitor's Office: Few options other than prison for MI inmate. 10% of inmates rejected from Drug Court (2014) were due to MH related issues.

WCMH: Difficult to enforce compliance with medications & compliance with appointments.

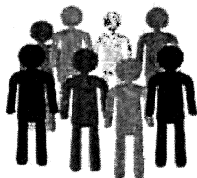
Mental Health Court Goals

- Improve Court System's ability to identify, assess, evaluate & monitor MI offenders
- Improve Public Safety by reducing the recidivism of MI offenders
- Use the Authority of the Court to:
 - Link MI offenders to MH services
 - Engage participants in treatment
 - Hold participants accountable for their actions



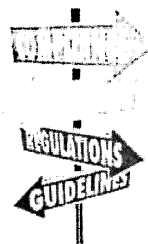
TARGET POPULATION

- Pending Criminal Charges (General Sessions offenses)
- Must be County resident
- Must have stable housing & reliable transportation
- Able to understand terms & conditions of the program
- Serious & persistent MI for which there is known treatment
 - Would include Bipolar D/O, Major Depression, Schizophrenia, etc.
 - May or may not include co-occurring disorder of substance abuse
 - NOT personality D/O only or MR/DD



Program Requirements

- Individualized Treatment Plan developed for each participant based on the MH assessment
- Program length 12-24 months based on participants progress
- Curfew, home visits, inspections
- Psychiatric appointments
- Compliance with medications
- Weekly fees



Program Requirements (AS APPROPRIATE)

- Vocational Rehabilitation Referral/Services
- Employment or Community Service
- Educational Courses
- Change Class
- Victim Impact Class
- Specialty Classes
 - Substance Abuse
 - Anger management
 - Parenting
 - Budgeting



FOUR PHASE PROGRAM

Phase One

[Adjustment to Treatment]

Meet with Counselor twice each week

Weekly court appearance

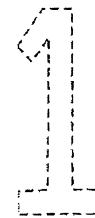
Attend 3 chosen support groups (12 step)

Attend Criminal Thinking Group

Medication Compliance

Attend Co-occurring group (if applicable)

Drug testing 1-4x/week



Four Phase Program

Phase Two

[Engagement in Treatment]

2

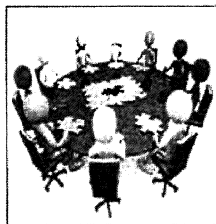
Meet with Counselor twice per week
Bi-Monthly court appearances
Attend chosen support group(s) (12 step)
Attend individualized group (parenting, anger management, etc.)
Medication Compliance
Attend Co-occurring group (if applicable)
Drug testing 1-4x/wk

Four Phase Program

Phase Three

3

Progress in Treatment



Phase Four

4



Ongoing Progress &
Preparing to Graduate

Continuing Recovery

- Graduates are encouraged to continue with community support services that will aid in meeting their specific needs.
- Services may include: Ongoing Mental Health; Ongoing 12-step programs; Primary Care Physicians; Veteran's Services; Vocational Rehabilitation; etc.
- Mental Health Professional will assist in referral process.



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Dr. Evans thanked the presenters for the excellent, informative presentations.

There being no further discussion, the center presentations concluded at 9:57 a.m.



Alison Y. Evans, PsyD, Chair
SC Mental Health Commission



Melanie Ferretti, Recording Secretary
SC Mental Health Commission

