

South Carolina

UNIFORM APPLICATION

FY 2020/2021 Community Mental Health Services Block Grant Plan

COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

OMB - Approved 04/19/2019 - Expires 04/30/2022
(generated on 09/25/2020 9.12.47 AM)

Center for Mental Health Services
Division of State and Community Systems Development

State Information

State Information

Plan Year

Start Year 2021

End Year 2022

State DUNS Number

Number 043980093

Expiration Date

I. State Agency to be the Grantee for the Block Grant

Agency Name South Carolina Department of Mental Health

Organizational Unit Office of the State Director

Mailing Address 2414 Bull Street/P. O. Box 485

City Columbia

Zip Code 29202

II. Contact Person for the Grantee of the Block Grant

First Name Kenneth M.

Last Name Rogers, MD

Agency Name South Carolina Department of Mental Health

Mailing Address 2414 Bull Street/P. O. Box 485

City Columbia

Zip Code 29202

Telephone 803-898-8319

Fax 803-898-1383

Email Address kenneth.rogers@scdmh.org

III. Third Party Administrator of Mental Health Services

Do you have a third party administrator? Yes No

First Name

Last Name

Agency Name

Mailing Address

City

Zip Code

Telephone

Fax

Email Address

IV. State Expenditure Period (Most recent State expenditure period that is closed out)

From

To

V. Date Submitted

Submission Date 9/1/2020 9:53:48 AM

Revision Date 9/1/2020 9:53:53 AM

VI. Contact Person Responsible for Application Submission

First Name D. Stewart

Last Name Cooner, MHA

Telephone 803-898-8632

Fax 803-898-2206

Email Address stewart.cooner@scdmh.org

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

State Information

Chief Executive Officer's Funding Agreement - Certifications and Assurances / Letter Designating Signatory Authority

Fiscal Year 2021

U.S. Department of Health and Human Services
 Substance Abuse and Mental Health Services Administrations
 Funding Agreements
 as required by
 Community Mental Health Services Block Grant Program
 as authorized by
 Title XIX, Part B, Subpart II and Subpart III of the Public Health Service Act
 and
 Title 42, Chapter 6A, Subchapter XVII of the United States Code

Title XIX, Part B, Subpart II of the Public Health Service Act		
Section	Title	Chapter
Section 1911	Formula Grants to States	42 USC § 300x
Section 1912	State Plan for Comprehensive Community Mental Health Services for Certain Individuals	42 USC § 300x-1
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ASSURANCES - NON-CONSTRUCTION PROGRAMS

Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standard for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §§794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to

State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

LIST of CERTIFICATIONS

1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 2 CFR part 180, and its principals:

- a. Agrees to comply with 2 CFR Part 180, Subpart C by administering each lower tier subaward or contract that exceeds \$25,000 as a "covered transaction" and verify each lower tier participant of a "covered transaction" under the award is not presently debarred or otherwise disqualified from participation in this federally assisted project by:
 - a. Checking the Exclusion Extract located on the System for Award Management (SAM) at <http://sam.gov>
 - b. Collecting a certification statement similar to paragraph (a)
 - c. Inserting a clause or condition in the covered transaction with the lower tier contract

2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free work-place in accordance with 2 CFR Part 182by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing an ongoing drug-free awareness program to inform employees about--
 1. The dangers of drug abuse in the workplace;
 2. The grantee's policy of maintaining a drug-free workplace;
 3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
 1. Abide by the terms of the statement; and
 2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted?
 1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

3. Certifications Regarding Lobbying

Per 45 CFR §75.215, Recipients are subject to the restrictions on lobbying as set forth in 45 CFR part 93. Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions,"

generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs.

The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA) (31 U.S.C § 3801- 3812)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

5. Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, daycare, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

HHS Assurances of Compliance (HHS 690)

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE DISCRIMINATION ACT OF 1975, AND SECTION 1557 OF THE AFFORDABLE CARE ACT

The Applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts, property, discounts or other Federal financial assistance from the U.S. Department of Health and Human Services.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified individual with a disability in the United States shall, solely by reason of her or his disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
3. Title IX of the Education Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
5. Section 1557 of the Affordable Care Act (Pub. L. 111-148), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or activity for which the Applicant receives Federal financial assistance from the Department.

The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients in accordance with 45 CFR §§ 75.351-75.352, Subrecipient monitoring and management.

I hereby certify that the state or territory will comply with Title XIX, Part B, Subpart II and Subpart III of the Public Health Service (PHS) Act, as amended, and summarized above, except for those sections in the PHS Act that do not apply or for which a waiver has been granted or may be granted by the Secretary for the period covered by this agreement.

I also certify that the state or territory will comply with the Assurances Non-Construction Programs and Certifications summarized above.

Name of Chief Executive Officer (CEO) or Designee: Kenneth M. Rogers, MD

Signature of CEO or Designee¹: _____

Title: State Director of Mental Health

Date Signed: _____

mm/dd/yyyy

¹If the agreement is signed by an authorized designee, a copy of the designation must be attached.

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:



HENRY McMASTER
GOVERNOR

July 21, 2020

Ms. Odessa Crocker
Grants Management Officer
Division of Grants Management, Office of Financial Resources
Substance Abuse and Mental Health Services Administration
5600 Fishers Lane
Rockville, Maryland 20857

Dear Ms. Crocker:

I delegate authority to Kenneth Rogers, MD, State Director of the South Carolina Department of Mental Health, for all transactions required to administer the Substance Abuse and Mental Health Services Administration's (SAMHSA) Mental Health Block Grant (MHBG).

Yours very truly,

A handwritten signature in blue ink that reads "Henry McMaster".

Henry McMaster

HDM/ss



*State of South Carolina
Department of Mental Health*

MENTAL HEALTH COMMISSION:

L. Gregory Pearce, Jr., Chair
Louise Haynes, Vice Chair
Alison Y. Evans, PsyD
Bob Hiott

2414 Bull Street • P.O. Box 485
Columbia, SC 29202
Information: (803) 898-8581

July 23, 2020

Kenneth M. Rogers, MD
State Director

Ms. Odessa Crocker
Grants Management Officer
Division of Grants Management, Office of Financial Resources
Substance Abuse and Mental Health Services Administration
5600 Fishers Lane
Rockville, Maryland 20857

Dear Ms. Crocker:

Please find attached with this letter the following documents as required by the FY2020-2021 Substance Abuse and Mental Health Services Administration, Community Mental Health Services, Mental Health Block Grant Application due September 1, 2020. The documents conform to the requirements set forth in the WebBGAS application system as of July 1, 2020.

State Information
Chief Executive Officer's Funding Agreement
Disclosure of Lobbying Activities

Please note that while the Disclosure of Lobbying Activities is not applicable to the South Carolina Department of Mental Health, it is being submitted in its blank form in order to remain consistent with prior years' block grant applications.

The Department looks forward to submitting this Mental Health Block Grant Application and appreciates the opportunities the associated funding affords those citizens of the State of South Carolina who are affected by mental illnesses.

Sincerely,

Kenneth M. Rogers, MD
State Director of Mental Health

MISSION STATEMENT

To support the recovery of people with mental illnesses.



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Last Name Rogers, MD

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Mailing Address 2414 Bull Street/P. O. Box 485

City Columbia

Zip Code 29202

Telephone 803-898-8319

Fax 803-898-1383

Email Address kenneth.rogers@scdmh.org

III. Third Party Administrator of Mental Health Services

Do you have a third party administrator? Yes No

First Name

Last Name

Agency Name

Mailing Address

City

Zip Code

Telephone

Fax

Email Address

IV. State Expenditure Period (Most recent State expenditure period that is closed out)

From

To

V. Date Submitted

Submission Date

Revision Date 7/23/2020 10:01:19 AM

VI. Contact Person Responsible for Application Submission

First Name D. Stewart

Last Name Cooner, MHA

Telephone 803-898-8632

Fax 803-898-2206

Email Address stewart.cooner@scdmh.org

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Footnotes:

NOT FINAL

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As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standard or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
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6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §§794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetland pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to

- State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. §57401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.
 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

LIST of CERTIFICATIONS

1. Certification Regarding Debarment and Suspension

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 2 CFR part 180, and its principals:

- a. Agrees to comply with 2 CFR Part 180, Subpart C by administering each lower tier subaward or contract that exceeds \$25,000 as a "covered transaction" and verify each lower tier participant of a "covered transaction" under the award is not presently debarred or otherwise disqualified from participation in this federally assisted project by:
 - a. Checking the Exclusion Extract located on the System for Award Management (SAM) at <http://sam.gov>
 - b. Collecting a certification statement similar to paragraph (a)
 - c. Inserting a clause or condition in the covered transaction with the lower tier contract

2. Certification Regarding Drug-Free Workplace Requirements

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free work-place in accordance with 2 CFR Part 182by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing an ongoing drug-free awareness program to inform employees about--
 1. The dangers of drug abuse in the workplace;
 2. The grantee's policy of maintaining a drug-free workplace;
 3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d. Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
 1. Abide by the terms of the statement; and
 2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- e. Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- f. Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted?
 1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

3. Certifications Regarding Lobbying

Per 45 CFR §75.215, Recipients are subject to the restrictions on lobbying as set forth in 45 CFR part 93. Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions,"

generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non- appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs.

The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. Certification Regarding Program Fraud Civil Remedies Act (PFCRA) (31 U.S.C § 3801- 3812)

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

5. Certification Regarding Environmental Tobacco Smoke

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, daycare, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

HHS Assurances of Compliance (HHS 690)

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE DISCRIMINATION ACT OF 1975, AND SECTION 1557 OF THE AFFORDABLE CARE ACT

The Applicant provides this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts, property, discounts or other Federal financial assistance from the U.S. Department of Health and Human Services.

THE APPLICANT HEREBY AGREES THAT IT WILL COMPLY WITH:

1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80), to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified individual with a disability in the United States shall, solely by reason of her or his disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
3. Title IX of the Education Amendments of 1972 (Pub. L. 92-318), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86), to the end that, in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives Federal financial assistance from the Department.
4. The Age Discrimination Act of 1975 (Pub. L. 94-135), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91), to the end that, in accordance with the Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department.
5. Section 1557 of the Affordable Care Act (Pub. L. 111-148), as amended, and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or activity for which the Applicant receives Federal financial assistance from the Department.

The Applicant agrees that compliance with this assurance constitutes a condition of continued receipt of Federal financial assistance, and that it is binding upon the Applicant, its successors, transferees and assignees for the period during which such assistance is provided. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. The Applicant further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients in accordance with 45 CFR §§ 75.351-75.352, Subrecipient monitoring and management.

I hereby certify that the state or territory will comply with Title XIX, Part B, Subpart II and Subpart III of the Public Health Service (PHS) Act, as amended, and summarized above, except for those sections in the PHS Act that do not apply or for which a waiver has been granted or may be granted by the Secretary for the period covered by this agreement.

I also certify that the state or territory will comply with the Assurances Non-Construction Programs and Certifications summarized above.

Name of Chief Executive Officer (CEO) or Designee: Kenneth M. Rogers, MD

Signature of CEO or Designee¹:  _____

Title: State Director of Mental Health

Date Signed: 07/23/2020
mm/dd/yyyy

¹If the agreement is signed by an authorized designee, a copy of the designation must be attached.

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

State Information

Disclosure of Lobbying Activities

To View Standard Form LLL, Click the link below (This form is OPTIONAL)

Standard Form LLL (click here)

Name

Title

Organization

Signature:

Date:

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

Not Applicable

State Information

Disclosure of Lobbying Activities

To View Standard Form LLL, Click the link below (This form is OPTIONAL)

[Standard Form LLL \(click here\)](#)

Name

Title

Organization

Signature:

Date:

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

Not Applicable

Planning Tables

Table 2 State Agency Planned Expenditures

States must project how the SMHA will use available funds to provide authorized services for the planning period for state fiscal years 2020/2021.

Planning Period Start Date: 7/1/2020 Planning Period End Date: 6/30/2021

Activity (See instructions for using Row 1.)	A. Substance Abuse Block Grant	B. Mental Health Block Grant	C. Medicaid (Federal, State, and Local)	D. Other Federal Funds (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	E. State Funds	F. Local Funds (excluding local Medicaid)	G. Other
1. Substance Abuse Prevention and Treatment							
a. Pregnant Women and Women with Dependent Children							
b. All Other							
2. Primary Prevention							
a. Substance Abuse Primary Prevention							
b. Mental Health Primary Prevention*		\$0	\$0	\$0	\$0	\$0	\$0
3. Evidence-Based Practices for Early Serious Mental Illness including First Episode Psychosis (10 percent of total award MHBG)**		\$1,028,612	\$0	\$0	\$0	\$0	\$0
4. Tuberculosis Services							
5. Early Intervention Services for HIV							
6. State Hospital			\$47,240,412	\$0	\$96,277,410	\$1,254,705	\$7,607,823
7. Other 24 Hour Care		\$0	\$16,894,554	\$27,183,762	\$27,742,481	\$0	\$5,378,364
8. Ambulatory/Community Non-24 Hour Care		\$9,858,600	\$61,072,425	\$7,654,635	\$104,885,418	\$3,191,485	\$32,217,750
9. Administration (Excluding Program and Provider Level)***		\$71,260	\$0	\$141,274	\$45,354,126	\$0	\$1,895,420
10. Total	\$0	\$10,958,472	\$125,207,391	\$34,979,671	\$274,259,435	\$4,446,190	\$47,099,357

* While the state may use state or other funding for these services, the MHBG funds must be directed toward adults with SMI or children with SED

** Column 3B should include Early Serious Mental Illness programs funded through MHBG set aside

*** Per statute, Administrative expenditures cannot exceed 5% of the fiscal year award.

Footnotes:

1 – ESTIMATES ONLY: The information presented above represents a 12-month period (July 1, 2020 – June 30, 2021). Note that SCDMH only budgets for a 12-month period based on the prevailing Appropriations Act for the applicable fiscal year.

2 – Note that as in previous Uniform Applications, estimates are based on Allocations and Revenues from SCDMH's Financial Reports. Allocations and Revenues approximate Total Expenditures and are more easily cross-referenced with SCDMH's program areas in its Financial Reports. This update includes consideration for Supplemental Funding.

3 – Note that Allocations, Revenues, Expenditures, and Supplemental Funding – as represented in SCDMH's Financial Reports – are based on forecasts for the applicable fiscal year with the expectation that as changes occur to the operations of SCDMH said changes may be reflected in changes to forecasts; therefore, amounts provided at the beginning of a fiscal year may not be the actual result presented at the end of the fiscal year. Consequently, this 12-month budget is subject to variations, especially based on the date of reporting.

4 – Related to the total amount reported for the Mental Health Block Grant (MHBG), due to having three (3) MHBGs active during any given state fiscal year for SCDMH - July 1 through June 30 - it is possible that the amount associated with MHBG expenditures may vary from the actual amount of a single year award.

5 – As per SAMHSA's instruction, SCDMH used the "FY2020 Mental Health Block Grant Final Allotments" file for purposes of completing the FY2020-2021 MHBG planned expenditures (Table 2) and related planned expenditures.

6 – Note that the information presented above is based upon a continuing resolution passed by the South Carolina General Assembly to fund State Government operations at FY2020 levels, until such time as an Appropriations Act is passed for FY2021, and the associated implications for the South Carolina Department of Mental Health.

Planning Tables

Table 6 Non-Direct Services/System Development

MHBG Planning Period Start Date: 07/01/2020 MHBG Planning Period End Date: 06/30/2021

Activity	FFY 2020 Block Grant	FFY 2021 Block Grant
1. Information Systems	\$0	
2. Infrastructure Support	\$140,522	\$70,260
3. Partnerships, community outreach, and needs assessment	\$0	
4. Planning Council Activities (MHBG required, SABG optional)	\$2,000	\$1,000
5. Quality Assurance and Improvement	\$0	
6. Research and Evaluation	\$0	
7. Training and Education	\$0	
8. Total	\$142,522	\$71,260

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Footnotes:

ESTIMATES ONLY: The information presented above represents a 12-month period (July 1, 2020 – June 30, 2021). Note that SCDMH only budgets for a 12-month period based on the prevailing Appropriations Act for the applicable fiscal year.

Environmental Factors and Plan

21. State Planning/Advisory Council and Input on the Mental Health/Substance Abuse Block Grant Application- Required for MHBG

Narrative Question

Each state is required to establish and maintain a state Mental Health Planning/Advisory Council to carry out the statutory functions as described in 42 U.S. C. 300x-3 for adults with SMI and children with SED. To meet the needs of states that are integrating services supported by MHBG and SABG, SAMHSA is recommending that states expand their Mental Health Advisory Council to include substance misuse prevention, SUD treatment, and recovery representation, referred to here as an Advisory/Planning Council (PC). SAMHSA encourages states to expand their required Council's comprehensive approach by designing and implementing regularly scheduled collaborations with an existing substance misuse prevention, SUD treatment, and recovery advisory council to ensure that the council reviews issues and services for persons with, or at risk, for substance misuse and SUDs. To assist with implementing a PC, SAMHSA has created [Best Practices for State Behavioral Health Planning Councils: The Road to Planning Council Integration](https://www.samhsa.gov/sites/default/files/manual-planning-council-best-practices-2014.pdf).⁶⁹

Planning Councils are required by statute to review state plans and implementation reports; and submit any recommended modifications to the state. Planning councils monitor, review, and evaluate, not less than once each year, the allocation and adequacy of mental health services within the state. They also serve as an advocate for individuals with M/SUD problems. SAMHSA requests that any recommendations for modifications to the application or comments to the implementation report that were received from the Planning Council be submitted to SAMHSA, regardless of whether the state has accepted the recommendations. The documentation, preferably a letter signed by the Chair of the Planning Council, should state that the Planning Council reviewed the application and implementation report and should be transmitted as attachments by the state.

⁶⁹<https://www.samhsa.gov/sites/default/files/manual-planning-council-best-practices-2014.pdf>

Please consider the following items as a guide when preparing the description of the state's system:

1. How was the Council involved in the development and review of the state plan and report? Please attach supporting documentation (meeting minutes, letters of support, etc.) using the upload option at the bottom of this page.
 - a) What mechanism does the state use to plan and implement substance misuse prevention, SUD treatment and recovery services?

The South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS) is responsible for the mechanisms to plan and implement substance misuse prevention, SUD treatment, and recovery services related thereto.
 - b) Has the Council successfully integrated substance misuse prevention and treatment or co-occurring disorder issues, concerns, and activities into its work? Yes No
2. Is the membership representative of the service area population (e.g. ethnic, cultural, linguistic, rural, suburban, urban, older adults, families of young children)? Yes No
3. Please describe the duties and responsibilities of the Council, including how it gathers meaningful input from people in recovery, families, and other important stakeholders, and how it has advocated for individuals with SMI or SED.

Please see Letter from South Carolina Mental Health State Planning Council Chairperson.

Please see the attached South Carolina Mental Health State Planning Council Bylaws; specifically, Article II.

As a function of the South Carolina Mental Health State Planning Council's classification as a body politic, it publishes each year and places on the SCDMH website (<https://scdmh.net/public-information/my-calendar/>) Events Calendar. a Notification of Meeting Schedule (see attached) which provides an opportunity for the public to interface with the Planning Council and SCDMH.

Please indicate areas of technical assistance needed related to this section.

Not Applicable

*Additionally, please complete the Advisory Council Members and Advisory Council Composition by Member Type forms.*⁷⁰

⁷⁰There are strict state Council membership guidelines. States must demonstrate: (1) the involvement of people in recovery and their family members; (2) the ratio of parents of children with SED to other Council members is sufficient to provide adequate representation of that constituency in deliberations on the Council; and (3) no less than 50 percent of the members of the Council are individuals who are not state employees or providers of mental health services.

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

In addition to the comments included in the letter from the Chairperson of the South Carolina Mental Health State Planning Council (Council), it should also be noted that the Council participated in the development of the FY2020-2021 Mental Health Block Grant Uniform

July 22, 2020

Ms. Odessa Crocker
Grants Management Officer
Division of Grants Management, Office of Financial Resources
Substance Abuse and Mental Health Services Administration
5600 Fishers Lane
Rockville, Maryland 20857

Dear Ms. Crocker:

With all the unrest and challenges we are facing as a country, we, the Council, are pleased with all the initiatives DMH has been taking.

DMH has social workers available for law enforcement mental health crises. DMH also established CCRI - Community Crisis Response and Intervention - services in all 46 counties in SC. There are RVs going into the community to help people receive services - instead of having to go into the mental health centers. This is especially helpful in rural areas. These mobile units are parked in random parking lots - like Family Dollar - so people see there are services available for anyone who needs them.

Telepsychiatry has become especially important during this pandemic. Patients can easily access services without the risks of being exposed to COVID-19, and throughout, the mental health stressors that are making everyday people suffer psychiatric distress during this pandemic, DMH has a helpline for all citizens of SC called SC Hopes. There are billboards and commercials ensuring citizens are aware of the needed help DMH is eager to offer. Plus, DMH has also established an Office of Suicide Prevention dedicated to zero suicide in South Carolina.

DMH is also creating a new position - the Chief Diversity and Inclusion Officer - who will ensure all patients and employees are treated with dignity and respect.

The leadership of SCDMH, to include the SC Mental Health Commission, State Director, and Senior Leadership, released a statement to the public condemning racism in our country.

It is a very powerful statement, so, we as a Council, are choosing to share the statement, in full, with this letter.

**A Statement by the South Carolina Mental Health Commission and the State Director and Senior Management of the South Carolina Department of Mental Health
June 15, 2020**

The leadership of the South Carolina Department of Mental Health writes to express our utter condemnation of and profound sadness about the senseless killing of George Floyd and to denounce all acts of racial violence and hate. We also write to express our support of all those calling for an end to racism and injustice.

The effect of racism and racial trauma on mental health is real. When we say “Black Lives Matter” we are not saying other lives do not. Rather, we are acknowledging that throughout our nation’s history, people of color have experienced life in America differently from white Americans. Still today African Americans experience overt racism and bigotry far too often. They

shoulder a mental health burden that is greater simply by virtue of their skin color. Most black Americans live their lives with the added anxiety that they or their family members may be threatened or marginalized based only on their race.

The video of the murder of George Floyd while in police custody is traumatic to see for all of us, and the trauma is magnified by mass media. But it is a mistake to think that we all experience the horror of his death in the same way. For African Americans, the manner of George Floyd's death represents new trauma on top of past trauma. And we in mental health know that trauma is a major contributor to serious mental health conditions.

The events and discussions which have taken place following the death of George Floyd have made it abundantly clear that the leadership of SCDMH must continue to ensure equity and fairness in the manner in which the agency's services are delivered and the manner in which the agency's employees are valued. We commit to being part of the solution.

To that end, we have already discussed the hiring of a full-time chief diversity officer (CDO) whose sole job will be to assist the management of the Department's many different components in identifying and implementing needed change. As clinicians, we often tell patients that they are only as healthy as their secrets. We are following our own counsel, and we believe the CDO will bring fresh eyes to our agency to help us identify and eliminate instances of disparate treatment of staff and patients.

As the State's public mental health authority:

- SCDMH must be an agency which represents all citizens equally, those it serves and those it employs;
- SCDMH must continually ensure its environment is a safe environment for all, and which promotes open, honest and civil dialogue between people with differing perspectives; and
- SCDMH must be an agency that supports, encourages, and celebrates diversity.

Only when we achieve this level of equality can we reach our vision of being the mental health employer of choice and the mental health provider of choice in South Carolina. Only when we achieve this vision can we fully meet our mission of supporting the recovery of people living with mental illnesses. We cannot help patients live their best lives and be their best selves unless we as an agency strive continuously to do the same.

We also hope that this will be a time for all SCDMH employees, not just those in leadership roles, to reflect on actions they can take to demonstrate empathy, compassion, and kindness to those with whom they work, and in their communities.

As a Council, we have become more and more impressed with DMH's leadership in providing the most effective services possible.

As a Council, we monitor these services closely and ask for information to evaluate the effectiveness of services. We are invested in knowing as much as possible about quality of services being provided to the citizens of our state. We have reviewed the state budget and the specific services being offered.

As a Council, we encourage ALL members, especially individuals in recovery, to speak up as dedicated advocates. As Chair, and person who lives with severe mental illness myself, I'm pleased to see others, just like me, dedicated to asking the hard questions of DMH leadership and giving much needed feedback about the services we all receive from this Agency.

Due to the pandemic, our last two meetings have been via conference call. Members are committed not only to attending in-person meetings, but are participating in conference calls. Always, members ask question after question of the State Director and Deputy Directors.

At our July meeting, we were given an inspiring presentation by the Patient Affairs Coordinator for DMH. Her role is to advocate, with senior leadership, for people with mental illness. She gives presentations, does research to evaluate services and establishes advisory councils.

At the July meeting, she shared her recovery story, and all who heard her were moved by her passion to be a beacon of hope - not just to people with mental illness - but to all the senior management of DMH, reminding them that they are not looking at "numbers" but actual people.

As a Council, we are pleased by DMH's efforts to provide excellent services to the people of our state. We support the Block Grant application and are grateful for SAMHSA funding. DMH makes excellent use of Federal funding and all other resources they have and work to secure.

We, as a Council, applaud DMH's commitment to providing the best services possible and we are grateful for our role in supporting and advocating for innovations and demand for quality.

We have an excellent partnership with DMH. There is NO question our voices are heard and valued.

We truly believe that all members of our Council, DMH employees and patients receiving services are teamed together, to ensure the best recovery outcomes for people with mental illness.

As a Council, we stand together, advocating for the best services possible. We are committed to continually monitoring, reviewing and evaluating how DMH uses their funding to support the recovery of individuals with mental illness.

Sincerely, -

A handwritten signature in black ink that reads "Janie Simpson". The signature is written in a cursive, flowing style.

Janie Simpson
Chairperson
SC Mental Health State Planning Council

SOUTH CAROLINA MENTAL HEALTH STATE PLANNING COUNCIL BYLAWS

ARTICLE I. NAME

The name of this organization shall be the South Carolina Mental Health State Planning Council. The South Carolina Mental Health State Planning Council may also be informally referred to as the “Council,” the “Planning Council” or the “State Planning Council.”

ARTICLE II. PURPOSE

As required under the Public Health Services Act, 42 U.S.C. 300x-3, the purpose of the Council is to:

- a. Review the Community Mental Health Services Block Grant Uniform Application and Behavioral Health Report and make recommendations.
- b. Serve as an advocate for adults with a serious mental illness, children with a severe emotional disturbance, and other individuals with mental illnesses.
- c. Monitor, review, and evaluate – not less than once a year – the allocation and adequacy of mental health services within the state.

ARTICLE III. MEMBERSHIP

Section 1. Qualifications

- a. Council membership composition shall reflect the mental health stakeholder community.
- b. Council members shall include adults with serious mental illness who are receiving or have received mental health services, family members of such adults or families of children with emotional disturbance, public and private community-based providers, advocacy organizations, and state agency representatives from mental health, education, vocational rehabilitation, criminal justice, housing, social services, alcohol and drug, and health and human services Medicaid division.
- c. The ratio of parents of children with a serious emotional disturbance to other members of the Council must be sufficient to provide adequate representation of such children in the deliberations of the Council.
- d. At least fifty-one percent (51%) of the Council shall be comprised of adults with serious mental illness who are receiving or have received mental health services or who are family members of such adults or families of children with emotional disturbance.

- e. The Council, upon recommendation of the Nominating/Membership Committee, shall determine status as a "provider" of mental health services. Such determination shall be made upon recommendation of election by the Council and may be changed upon receipt of new or changed information. In order to facilitate such determination, applicants for and members of the Council shall be required to disclose to the Nominating/Membership Committee any work regularly performed for pay as, or for, a provider of mental health services.
- f. Volunteers, advisory, and governing board members shall not be considered as providers solely based on such status.
- g. Under general ethical principles, members of the Council shall recuse themselves when they have a direct financial stake in the outcome of a Council decision, independent of their status as a provider.

Section 2. Election

- a. Prospective members and returning members shall be elected by a majority vote of current members present and voting.
- b. Elections should be held at the last regular meeting of the fiscal year, no later than June 30. However, upon approval by a majority vote of current members present and voting, elections may be held out-of-cycle.
- c. Current members may recommend prospective members to the Nominating/Membership Committee.
- d. Prospective members must complete the Application for Election to the South Carolina Mental Health State Planning Council and submit said application, and any other supplemental information requested and related thereto, within reason, to the Nominating/Membership Committee.
- e. Upon review and proper vetting of the application of a prospective member by the Nominating/Membership Committee, the names of those prospective members deemed qualified to serve on the Council, along with the respective applications, will be submitted to the State Director of the South Carolina Department of Mental Health for review and recommendation(s). Said recommendation(s) will then be submitted to the Chair of the Nominating/Membership Committee for presentation to the Council on which the Council will then vote according to Article III, Section 2, Items a and b,

Section 3. Terms

- a. The terms of the Council members shall be three (3) years and staggered.
- b. A member may serve multiple terms subject to Article III, Section 5.
- c. A term is established by and follows the state fiscal year – July 1 to June 30.

Section 4. Vacancies

- a. Any member appointed to fill a vacancy for an unexpired term, subject to Article III, Section 2, Items d and e, shall serve for the remainder of such term. Upon

completion of said unexpired term, said member may be re-elected to the Council for a full-term.

Section 5. Resignation and Removal

- a. A Council member may resign at any time by giving written notice to the Chair, which will take effect upon receipt of the notice.
- b. A Council member may be removed at any time upon a majority vote of those members of the Council present at the meeting during which the vote is scheduled to be taken.
 - a. Causes for removal include one or more of the following:
 - i. Absence from three (3) consecutive Council meetings without a justifiable medical, business, or personal excuse;
 - ii. When the member is no longer a resident of the state; or
 - iii. When a conflict of interest renders an individual unqualified to serve on the Council pursuant to Article III. Section 1.

ARTICLE IV. FISCAL YEAR

The fiscal year of the Council shall be July 1 through the following June 30.

ARTICLE V. MEETINGS

Section 1. Schedule

- a. The Council shall meet at least four (4) times per fiscal year.
- b. The purpose of these meetings shall comport with the duties of the Council as defined by PL 102-321 and Article II above.

Section 2. Quorum

- a. For the purpose of conducting the business of the Council, the members present shall constitute a quorum.
- b. Any member of the Council who has been absent from two consecutive meetings will forfeit their voting privileges. Voting privileges will be reinstated at the next attended meeting.

Section 3. Compensation

- a. The members of the Council shall serve without pay.
- b. The Council may authorize or recommend the timely payment of reasonable and necessary expenses incurred by members in the performance of their duties. Such payment is subject to the availability of Community Mental Health Services

Block Grant Funds appropriated for said purposes and the approval of the South Carolina Department of Mental Health.

- a. Members of the Council whose participation is not being rendered in the course of a job function, or as the result of an affiliation with any organization, are eligible for mileage reimbursement at the maximum mileage reimbursement rate for state employees when a state vehicle is not available as set forth in the Appropriations Act of the General Assembly of the State of South Carolina under the proviso entitled "Travel – Subsistence Expenses & Mileage."
 - i. Members whose participation in Council activities are rendered on a volunteer basis, generally those whose Type of Membership as described in Article III, Section 1 is designated as either "Individuals in Recovery (from Mental Illness and Addictions)" and "Family Members of Individuals in Recovery (from Mental Illness and Addictions)" according to the prevailing definitions by the Substance Abuse and Mental Health Services Administration (SAMHSA) at the time of request for reimbursement qualify for mileage reimbursement.
 - ii. The value per mile for mileage reimbursement shall be calculated according to the prevailing rate utilized by the South Carolina Department of Mental Health at the time at which the request for reimbursement is initially received.

Section 4. Open Meetings

- a. All meetings of the Council shall be open to the public.
- b. A reasonable period of time shall be set aside at all meetings of the Council for members of the public to address the Council.
- c. Members of the public shall be permitted to propose "new business" for the next meeting of the Council. Subject to veto by the Council, such new business shall be placed on the next Council meeting agenda.

ARTICLE VI. ELECTION OF OFFICERS

The officers of the Council shall be Chair, Vice Chair, and Secretary.

Section 1. Election and Terms

- a. Officers should be elected for a two (2) year term by a majority vote of Council during the last regular meeting of the fiscal year. However, upon approval by a majority vote of current members present and voting, elections may be held out-of-cycle.
- b. Officers shall be elected either upon the expiration of the term of the respective office as defined by Article VI, Section 1, Item a, or upon the resignation of the member of the Council holding said office. A member of the Council filling a

vacancy shall serve for the remainder of such term. Upon completion of said unexpired term, said member may be re-elected to the office for a full-term, but not to exceed two (2) full terms as described in Article VI, Section 1, Item d.

- c. Officers shall assume their official duties beginning July 1.
- d. A member of the Council shall not be eligible to serve more than two (2) full consecutive terms in the same office.
- e. Only a member of the Council who has served for at least one (1) year shall be eligible to hold office.
- f. Only those persons who have signified their consent to serve, if elected, shall be nominated for, or elected to, such office.

Section 2. Role of the Nominating/Membership Committee and Council in the Election of Officers for the South Carolina Mental Health State Planning Council

- a. The Nominating/Membership Committee shall solicit from the Council names of eligible members of the Council for specific officer positions.
 - 1. No member serving on the Nominating/Membership Committee, nor any member of the Council who has served on the Nominating/Membership Committee within one (1) year of the current election of officers, may be nominated for an officer position until such time as one (1) year has elapsed between said service and the election of officers.
- b. The Nominating/Membership Committee shall report the slate of prospective officers to the Council fourteen (14) days prior to the last regular Council meeting of the fiscal year. Nominations for said officer positions may also be accepted from the floor.
 - 1. If more than one candidate is presented for a specific officer position, then a separate vote must be held for said position. The candidate receiving the majority of the votes of quorum will be awarded the office.
- c. Upon acceptance of the slate of prospective officers by the Council, the slate shall be elected by a majority vote of the quorum, or, if no alternate candidates are proposed, by acclamation.

Section 3. Vacancies

- a. Upon vacancy of an office, the Nominating/Membership Committee shall recommend an eligible member to the Council with a fourteen (14) day notice before the next regular Council meeting.
- b. A vacancy occurring in any office shall be filled for the unexpired term by a qualified member elected by a majority vote of the remaining members of the Council.

ARTICLE VII. DUTIES OF OFFICERS

Section 1. The Chair shall:

- a. Oversee all regular and called meetings of the Council;
- b. Serve as ex-officio member of all committees;
- c. Work in partnership with the state planner to ensure Council resolutions are carried out;
- d. Call special meetings of the Council, or its respective standing, or ad hoc committees, if necessary;
- e. Appoint, with approval by the Council, all committee members and committee chairs, excluding the Nominating/Membership Committee, in consult with the planner;
- f. Assist in preparing the agenda for Council meetings;
- g. Assist in conducting new member orientation;
- h. Work with the Nominating/Membership Committee to recruit new Council members;
- i. Act as a spokesperson for the Council;
- j. Periodically consult with members on their roles and help them assess their performance.

Section 2. The Vice Chair shall:

- a. Attend all Council meetings;
- b. Understand the responsibilities of the Chair and be able to perform these duties in the absence of the Chair;
- c. Participate in Council leadership.

Section 3. The Secretary shall:

- a. Attend all Council meetings;
- b. Review meeting minutes;
- c. Assist the Chair with attendance, quorum and action of the Council;
- d. Assume responsibilities of the Chair in the absence, or inability, of both the Chair and Vice Chair.

ARTICLE VIII. COMMITTEES

Section 1. The following committee(s) of the Council is provided for by reference in these Bylaws in Article VI, Section 2.

- a. The Nominating/Membership Committee

Section 2. Nominating/Membership Committee

- a. At a regular meeting of the Council in the month of January a Nominating/Membership Committee and Chair consisting of an uneven number - not less than three (3) – of members of the Council shall be elected by the Council to serve a one (1) year term.
- b. The role of the Nominating/Membership Committee is designated within the respective Articles of these Bylaws.

Section 3. Ad Hoc Committees

The Chairperson may appoint special or standing committees as may be deemed advisable. Each such committee shall have such powers and authority as shall be specified by the Council. The Chairperson shall appoint members of committees and shall designate the chairperson of each committee.

Section 4. Removal

The chair or any member of any committee may be removed for willful misconduct by a majority of a quorum of the Council at any time at a properly called meeting of the Council.

ARTICLE IX. ANTI-DISCRIMINATION

The Council shall not discriminate in any regard with respect to race, creed, color, sex, sexual orientation, marital status, religion, national origin, ancestry, pregnancy, parenthood, custody of a minor child or physical or mental disability.

ARTICLE X. PARLIAMENTARY AUTHORITY

The rules contained in the current edition of Robert's Rules of Order. Newly Revised shall govern the Council in all cases to which they are applicable and in which they are not in conflict with these bylaws and any special rules of order that the Council may adopt.

ARTICLE XI. PROCEDURES

Section 1. Quorum

See Article V, Section 2.

Section 2. Voting

- a. Council decisions should be made by consensus.
- b. If voting becomes necessary, a simple majority of the members present at the meeting will be sufficient for a vote on any issue.
 - 1. Types of Voting
 - i. By Voice – The Chairperson may ask the members of the Council to indicate in the affirmative those members in favor of a motion, and to indicate an objection those members not in favor of a motion. Any member may move for an exact count.
 - ii. By General Consent – The Chairperson may present all members with the opportunity to object, which by their silence will indicate agreement with the motion. If a member indicates an objection, the motion must be put to a vote.
 - iii. By Ballot – Any member may request that a ballot vote be conducted regardless of the subject matter.

ARTICLE XII. AMENDMENT OF BYLAWS

The bylaws may be amended at any regular meeting of the Council by a two-thirds vote of all members listed on the Membership Roster of the Council provided that the proposed amendment has been submitted in writing to all members fourteen (14) days in advance of the meeting. The bylaws may be reviewed every two (2) years and any amendments and revisions shall be in accordance with PL 102-321.

Adopted the 21st day of March 2018.

Chair Jane B. Simpson
Signature

Notification of 2020 Meeting Schedule
South Carolina Mental Health State Planning Council

Notice is hereby given that at the November 20, 2019 meeting of the South Carolina Mental Health State Planning Council (Council), the Council approved the dates and times upon which it will convene its meetings in 2020.

The meetings will be held from 10:00AM to 12:00PM on the following dates in Room 323 of the South Carolina Department of Mental Health Administration Building, located at 2414 Bull Street, Columbia, SC.

January 15, 2020
July 15, 2020

March 18, 2020
September 16, 2020

May 20, 2020
November 18, 2020

Please note that the Council may also convene subcommittee meetings on the same dates. Additional information will follow. Please refer to the published agenda for each respective date to determine if subcommittee meetings are intended.

For additional information, please contact Stewart Cooner, Director of Special Programs, at 803-898-8632, or via email at stewart.cooner@scdmh.org, or via postal mail at 2414 Bull Street, Suite 302, Columbia, SC 29201.

Environmental Factors and Plan

Advisory Council Members

For the Mental Health Block Grant, there are specific agency representation requirements for the State representatives. States MUST identify the individuals who are representing these state agencies.

State Education Agency
 State Vocational Rehabilitation Agency
 State Criminal Justice Agency
 State Housing Agency
 State Social Services Agency
 State Health (MH) Agency.

Start Year: 2021 End Year: 2022

Name	Type of Membership*	Agency or Organization Represented	Address,Phone, and Fax	Email(if available)
Chris Allen	Others (Advocates who are not State employees or providers)	South Carolina National Guard Suicide Prevention		
Brian Ambrose	Others (Advocates who are not State employees or providers)	Charleston Police Department		
Jack Balling	Family Members of Individuals in Recovery (to include family members of adults with SMI)			
Versie Bellamy	State Employees	SC Department of Mental Health		
Deborah Blalock	State Employees	SC Department of Mental Health		
Hannah Bonsu	State Employees	SC Department of Alcohol and Other Drug Abuse Services		
Zee Brown	Family Members of Individuals in Recovery (to include family members of adults with SMI)			
Debbie Calcote	State Employees	SC Department of Mental Health		
Jenah Cason	Family Members of Individuals in Recovery (to include family members of adults with SMI)			
Marilla Copeland	Parents of children with SED/SUD			
Becky Davis	State Employees	SC Department of Education		
Raj Gavurla	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)			
Lloyd Hale	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)	SC SHARE		
Marcy Hayden	State Employees	SC Commission for Minority Affairs		
Joan Herbert	Others (Advocates who are not State employees or providers)			
Joy Jay	Others (Advocates who are not State employees or providers)	Mental Health America of South Carolina		

Louise Johnson	State Employees	SC Department of Mental Health		
Amy Jolly	Providers	Work-In-Progress		
Pete Liggett	State Employees	SC Dept of Health and Human Services		
Bill Lindsey	Family Members of Individuals in Recovery (to include family members of adults with SMI)			
Renaye Long	State Employees	SC State Housing Finance and Development Authority		
Brett Macgargle	State Employees	SC Department of Juvenile Justice		
Pheobe Malloy	Parents of children with SED/SUD			
Mandy Medlock	Family Members of Individuals in Recovery (to include family members of adults with SMI)			
Elizabeth Morris	State Employees	Clemson University		
Timothy Nix	State Employees	SC Department of Social Services		
Melissa Reitmeier	Family Members of Individuals in Recovery (to include family members of adults with SMI)			
Kenneth Rogers	State Employees	SC Department of Mental Health		
Carol Rudder	Family Members of Individuals in Recovery (to include family members of adults with SMI)			
Janie Simpson	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)			
Maria Beth Smith	Parents of children with SED/SUD			
Tray Stone	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)			
Janet Upthegrove	Others (Advocates who are not State employees or providers)			
Steven Von Hollen	State Employees	SC Department of Disabilities and Special Needs		
Sissy Weaver	Individuals in Recovery (to include adults with SMI who are receiving, or have received, mental health services)			
Ramona Williams Carr	State Employees	SC Department of Vocational Rehabilitation		

*Council members should be listed only once by type of membership and Agency/organization represented.

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

Environmental Factors and Plan

Advisory Council Composition by Member Type

Start Year: 2021 End Year: 2022

Type of Membership	Number	Percentage of Total Membership
Total Membership	45	
Individuals in Recovery* (to include adults with SMI who are receiving, or have received, mental health services)	5	
Family Members of Individuals in Recovery* (to include family members of adults with SMI)	7	
Parents of children with SED/SUD*	3	
Vacancies (Individuals and Family Members)	5	
Others (Advocates who are not State employees or providers)	5	
Persons in recovery from or providing treatment for or advocating for SUD services	0	
Representatives from Federally Recognized Tribes	0	
Total Individuals in Recovery, Family Members & Others	25	55.56%
State Employees	15	
Providers	1	
Vacancies	4	
Total State Employees & Providers	20	44.44%
Individuals/Family Members from Diverse Racial, Ethnic, and LGBTQ Populations	13	
Providers from Diverse Racial, Ethnic, and LGBTQ Populations	0	
Total Individuals and Providers from Diverse Racial, Ethnic, and LGBTQ Populations	13	
Youth/adolescent representative (or member from an organization serving young people)	0	

* States are encouraged to select these representatives from state Family/Consumer organizations or include individuals with substance misuse prevention, SUD treatment, and recovery expertise in their Councils.

OMB No. 0930-0168 Approved: 04/19/2019 Expires: 04/30/2022

Footnotes:

Steps to Request Public Comment on the FY2020-2021 Mental Health Block Grant Application

Regarding steps the State took to make the public aware of the plan and allow for public comment:

- On August 1, 2019, members of the South Carolina Mental Health Commission were notified via email of the availability of the draft FY2020-2021 Mental Health Block Grant Application.
- On August 1, 2019, members of the South Carolina Mental Health State Planning Council were notified via email of the availability of the draft FY2020-2021 Mental Health Block Grant Application.
- On August 1, 2019, specific South Carolina mental health advocate organizations were notified via email of the availability of the draft FY2020-2021 Mental Health Block Grant Application.
- On August 1, 2019, members of the general public were notified of the availability of the draft FY2020-2021 Mental Health Block Grant Application via SCDMH's standard procedure to provide statewide public notice by sending a 'media alert' notification to all daily and non-daily newspapers in the state.
 - 17 daily newspaper contacts were notified.
 - 41 non-daily newspaper contacts were notified.
- On August 1, 2019, members of the general public were notified of the availability of the draft FY2020-2021 Mental Health Block Grant Application via creation of an event on SCDMH's 22 Facebook pages.
- On August 1, 2019, members of the general public were notified of the availability of the draft FY2020-2021 Mental Health Block Grant Application via SCDMH's internet and intranet home pages on which were placed banners of announcement.
- A paid Notice of Availability of Mental Health Block Grant Application and Report was placed in the three largest newspapers in South Carolina, representing the Upstate, Midlands, and Lowcountry regions: The Greenville News (July 2018, December 2018, July 2019); The State Newspaper (July 2018, March 2019, July 2019); and, The Post and Courier (July 2018, December 2018, July 2019), respectively. Public comment was requested via letter, email, and telephone.
 - Please note that while the notices prior to July 2019 specifically cited the previous Uniform Application – State Behavioral Health Assessment and Plan and the then current Behavioral Health Report, each also stated: "Both documents are posted at this URL at all times; information is available and there is no deadline for feedback."
- As of August 30, 2019, no recommendations for modifications to the FY2020-2021 Mental Health Block Grant Application were offered during the public comment period by the South Carolina Mental Health State Planning Council.

- A Notice of Availability of Mental Health Block Grant Application and Report was placed in three newspapers representing the Upstate, Midlands, and Lowcountry regions of South Carolina: The Greenville News (December 2019, July 2020); The State Newspaper (December 2019, July 2020); and, The Post and Courier (December 2019, July 2020), respectively. Public comment was requested via letter, email, and telephone.
- On August 3, 2020, members of the South Carolina Mental Health State Planning Council were notified via email of the availability of the final draft FY2020-2021 Mental Health Block Grant Mini-Application. Council members were also provided via email with a copy of the final draft FY2020-2021 Mental Health Block Grant Mini-Application.
- As of August 31, 2020, one (1) recommendation for modification to the final draft FY2020-2021 Mental Health Block Grant Mini-Application was offered by the South Carolina Mental Health State Planning Council.
 - The number of *Individuals/Family Members from Diverse Racial, Ethnic, and LGBTQ Populations* was changed from 0 to 13 to accurately reflect the diversification of the members of the South Carolina Mental Health State Planning Council. [End]