



**2023**

**WACCAMAW CENTER FOR  
MENTAL HEALTH**

# **ANNUAL REPORT**

***A FACILITY OF THE SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH***

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## **EXECUTIVE DIRECTOR**

### **JACQUELINE BROWN**



**WACCAMAW CENTER FOR MENTAL HEALTH**, an outpatient facility of the Department of Mental Health, is one of 16 Community Mental Health Centers in the State of South Carolina. The Center was started in 1967 when a group of concerned citizens came together to form a Mental Health Board and hired its first employee. Over the years, the Center expanded to include two additional counties, Georgetown, and Williamsburg Counties. In 2017, in collaboration with the Horry County Council, Waccamaw opened the South Strand Clinic in Myrtle Beach serving residents in the south Myrtle Beach area. Community partnerships across the center have enabled the Center to reach persons who otherwise may not seek mental health services due to various reasons including stigma. Geographically, the Waccamaw Center catchment area is the largest in the State, encompassing a total of 2,901 square miles. It provides services to a population of over 400,000 citizens in the three counties.

The mission to serve persons with mental ill-ness, both adults and children, has been the Center's top priority. Traditional mental health services include crisis services, assessment, psychiatric evaluations, nursing services, individual, family, and Group therapies are provided in each of our clinics.

#### **Tele-psychiatry**

- Center to clinic tele-psych in all clinics
- Located in six (6) of the seven (7) hospitals.
- In 2015, Waccamaw started providing pediatric psychiatry to Little River Medical

#### **Peer Support Services**

- Offered in Horry and Georgetown Counties
- Liaison with Center's Client Advocacy Council
  - Host an Annual Client Recovery Conference
  - Member representative from each county
  - NAMI and MHA are participating Council Members

The Center proudly practices a philosophy of creating and developing programs which address the needs of patients served. In doing so, each county offers programs unique to the culture and needs of its community.

From the first Director who also provided direct patient care and one administrative support employee in 1967, the center has grown to include approximately 135 employees and four clinics in 2023. Staff include licensed and non-licensed professional counselors and social workers, psychiatric nurses, psychiatrists, other mental health professionals and administrative support staff. Under the leadership of four Center Directors over 51 years, center services have grown to include a full range of clinic-based services to community-based services and to tele-psychiatry.

The following pages will provide an overview of the Waccamaw Center and services to those whom we are privileged to serve.



Horry County  
164 Waccamaw Medical Park Dr.  
Conway, SC 29526  
843-347-4888



Horry County  
9630 Scipio Lane  
Myrtle Beach, SC 29588  
843-492-2795



Georgetown County  
525 Lafayette Circle  
Georgetown, SC 29440  
Phone: 843-546-6107



Williamsburg County  
501 Nelson Blvd.  
Kingstree, SC 29556  
843-354-5453

## **CONWAY CLINIC**

### **CHLOE DAVIS**

WCMH adheres to SCDMH's mission which is to support the recovery of people with chronic and persistent mental illnesses. Our goal is to provide quality care to patients and their families who are affected by serious mental illnesses and significant emotional disorders. The services and programs that are offered at WCMH include psychiatric Outpatient services for Children, Adolescents, and Adults. These services include therapy, emergency/crisis services, nursing, and physician/medical services. Additional support such as care coordination and outreach programs have proven to be beneficial for the growing population of Horry County. Collaborating with the community remains a high priority for the staff and is essential for connecting clients to needed resources.

The Conway Clinic Access / Crisis Team provides walk-in services for crisis counseling, screening services and Initial Clinical Assessments to new patients and hospital discharge patients. They provide Crisis services and when in the best interest of the patient they work to locate an inpatient facility to provide acute stabilization services to patients. When a patient is not in need of emergency services the Access / Crisis Team conducts an Individual Clinical Assessment and helps to engage the patient in treatment services with a clinic therapist, nurse, and physician. We strive to maintain positive working relationships with the hospital systems in Horry County and the Psychiatric Hospitals around the state. Most of the hospitals in Horry County currently have access to the SC Department of Mental Health Tele-Psychiatry Program, which allows access to a psychiatrist for assessment of a patient in the local hospital emergency room.

The Mobile Crisis Team is embedded in the Crisis / Access Department, and they respond to patients in the community together with local law enforcement. The Mobile Crisis team helps to bridge gaps for patients who are experiencing a mental health crisis, as well as to provide their families with resources to assist patients. Mobile Crisis Team members can provide crisis consultation and referral services out in the community for Horry, Georgetown, and Williamsburg Counties. Every Mobile Crisis call requires participation from Law Enforcement within that county/district, thus the Mobile Crisis team has also been working to establish positive working relationships with Law Enforcement offices throughout Horry, Georgetown, and Williamsburg Counties.

Adult Outpatient and Child & Adolescent Outpatient services continue to work with new and established patients. The Conway Office has seen growth in these program areas and has experienced an increase in the number of residents from the community requesting services. Currently, we are working to ensure that clinicians are meeting patient caseload assignment standards, as well as collaborative documentation standards. As patients are working towards recovery and incorporating coping skills into their daily activities to better manage symptoms, clinical staff continue to monitor patient progress. When appropriate, they will staff with the

medical team for transition to the Medication Management Program (MMO) or for other treatment recommendations as indicated appropriate for patients.

We will continue assessing the needs of the patients that we serve here at WCMH as we uphold the mission of DMH. The Conway Center shall aspire to be the provider of choice for mental health services for the residents of Horry County.

## **SOUTH STRAND CLINIC**

### **KATRINA PRESSLEY**

The South Strand Clinic was established approximately 7 years ago to expand on the availability of mental health services in Horry County. We have extended our reach and access to mental health services by decreasing geographic barriers that impact access to clinical supports for persons who struggle with Severe and Persistent Mental Illness (SPMI). Our patients participate in a wide array of services including outpatient individual therapy, family therapy, psychiatric evaluation, nursing services and medication management. We have developed community partnerships that help to streamline the referral process for both children and adults. WCMH Administration and Staff continue to invest into the quality of care and services as the mental health crisis in America continues to get worse. With the commitment of our gifted and talented staff, we continue to provide quality services in a caring environment.

#### **Children and Adolescent Services**

Presently this center provides outpatient clinic services to 100+ children, adolescents, and their families. Children and their families engage in therapeutic services with a focus on emotional and behavioral support. Our C&A enrollment continues to rise as we continue to see a spike in referrals primarily due to behavioral issues exhibited at home and in school. We have also seen symptoms related to depression and anxiety as our young people struggle with early addictions, self-esteem, and identity issues. Most of our C&A population is referred by parents/guardians, hospitals, local community clinics, Department of Social Services, and the Department of Juvenile Justice. We currently work closely with SC Continuum of Care for patients with severe and complex emotional and behavioral challenges that need supports in their homes.

#### **Adult Outpatient Services**

Staff currently provide outpatient clinic support to 275+ adults in Horry County. Our services include individual therapy, family therapy, psychiatric nursing services, psychiatric medical assessments, crisis counseling and mental health assessments. We also provide crisis support to patients who walk into our center. We have a great relationship with our neighboring community hospitals including South Strand Behavioral Health, Grand Strand Hospital, and the Lighthouse Care Center in Conway. We also receive referrals from local community clinics, Department of Social Services, and Horry County Probate Court; just to name a few. Center staff are trained in CBT (Cognitive Behavioral Therapy), CBT for PTSD (Cognitive Behavioral Therapy for Posttraumatic Stress Disorder), DBT (Dialectical Behavioral Therapy) and CAMS (Collaborative Assessment and Management of Suicidality).

### **Specialized Services**

Staff from the DMH Individualized Placement and Support (IPS) Teamwork with the South Strand Staff to offer supported employment opportunities for people who have a mental illness. These patients are placed in competitive employment and offered in-work support by the employer and the DMH IPS Team. The IPS Team works closely with the state's vocational rehabilitation services to help patients to find employment. In 2023 jobs were found for 7 patients who were placed with marketing firms, private companies, retail stores, and fast-food restaurants. Our staff also works closely with the Toward Local Care (TLC) Program to provide services to patients with a history of multiple hospitalizations who need mental health community-based supports to help sustain in the community and to prevent re-hospitalization. South Strand currently has 3 patients who are in receipt of this more intensive level of care.

### **Community Outreach**

As a provider of services to our community's most vulnerable members, we continue to work hard with our community members. Our staff currently attend the monthly Horry County Children's Recovery Center MDT Meetings and the Habitat for Humanity Coalition Board Meetings. This year staff have represented SCDMH at the Don't Hide Behind the Mask Ball (REACH Empowerment) on April 29, 2023; the REACH Empowerment Suicide Prevention Forum on September 11, 2023; Myrtle Beach Neighborhood Services Beach Side Chats "From Grief to Glory" Meetings on July 30, 2023 and September 10, 2023; and on October 7, 2023, our staff was very instrumental in bringing the NAMI Walk back to Horry County for the first time in approximately 10 years.

During May, our center celebrated Mental Health Awareness Month with in-person presentations that focused on health and wellness, families, addictions/recovery, access to medications, community forensics, victims' advocacy, physical fitness, and when mental health does not look like mental health. We also provided depression screenings and had outdoor wellness activities for our patients and other members of the community.

### **Team South Strand**

2023 was another successful year for Team South Strand. I want to acknowledge the South Strand Team who continues to reach even further, year after year. They are committed to being leaders in change by their behaviors that focus on education, stewardship, and connections with both patients and the community. For a small clinic, we have a large impact on Horry County. Each team member has been invaluable in their collaboration, support, and commitment. I express my deepest gratitude to everyone for going above and beyond.

## **KINGSTREE CLINIC**

### **WINFERD PENDERGRASS**

The Kingtree staff continues to strive to deliver quality services as we carry out the mission of the South Carolina Department of Mental Health to render care to persons with severe and persistent mental illness; and to support the recovery of persons with mental illness.



The Kingstree Clinic continues to have strong partnerships with the local hospital, the county school district, probate court, law enforcement and agencies in the county. These community collaborations have supported us in providing care to the mentally ill.

The Kingstree Clinic has specialty programs that provide outreach focusing on housing, living independently in the community and residential care. The Family Preservation Team works with children and families with a focus on children at risk of being removed from their homes. The mission of this program is to reduce out of home placement by working intensely with families. The Toward Local Care (TLC) Program continues to provide services to those individuals with a history of multiple psychiatric hospitalizations who need intense support to remain stable in the community. Porter Place Apartments located in the city limits of Kingstree have been in operation for several years. It is a community of individuals living independently in the community while coping with mental illness.

The IOT Program provides individual Psychosocial Rehabilitative Services and Family Support which is office and community based. The IOT Programs serves adult patients who need a more intense level of mental health care than the traditional outpatient service by providing a comprehensive approach to the delivery and coordination of services. A comprehensive approach to assessment, treatment, and rehabilitation is a feature of this program. The goals of the IOT Program are to improve a patient's level of functioning, improve quality of life, increase patient and family involvement in the treatment process, reduce after-hour emergency contacts, as well as reduce hospitalization. In addition, their treatment program may include patient assessment, goal planning activities, individual and group therapy, and family support.

Staff in our Adult Outpatient Services, Children/ Adolescent Outpatient Services and School-Based Program work collaboratively and diligently with families, agencies, the medical community, and the school district to provide innovative and optimal care to assist clients with their recovery. School Based Counseling provides services to children and adolescents in a school setting; and the access to mental health support has an enormous impact on school engagement. Partnerships that address the mental health and developmental needs of children are one of the key strategies for improving the learning environment and academic performance. We believe that our presence within the school and the communities allows children and their family greater access to therapeutic services while decreasing the stigmatizing image. This program consists of 5 master's level counselors in Williamsburg County School District. The school-based counselors carry the role of a therapist, mediator, and the advocate for each child on their caseload. They also provide play, cognitive, reality, psychosocial, behavioral, and therapeutic methods to reach each child and his or her family.

Medical and mental health professionals treat a wide range of mental health concerns including depression, anxiety, mood disorders, trauma, grief anger management, parents, families, and life adjustments. We address these concerns by providing services which include Individual Therapy, Family Therapy, Group Therapy, Psychiatric, and Rehabilitative Psychosocial Services and Crisis Intervention.



The Kingstree Clinic continues to function as a comprehensive community mental health center addressing the needs of the mentally ill in Williamsburg County.

## **GEORGETOWN CLINIC**

### **KISHA GUESS-BLACK**

In the year 2023, the Georgetown Clinic continues to focus on providing training on evidence-based practices and work on collaborative efforts with other providers, partners, and organizations to meet the community needs. The WCMH has made a commitment to train our Child and adolescent staff in Trauma Focused Cognitive Behavioral Therapy (TF-CBT) to work more effectively with those who have experienced trauma. Metal Health First Aid is a public education program that can help communities understand mental illnesses, seek timely intervention, and save lives. The Triple P – Positive Parenting Program gives parents simple and practical strategies to help them build strong, healthy relationships, confidently manage their children’s behavior, and prevent problems developing. The Adult Services staff have been trained to provide Cognitive Behavioral Therapy for Post-Traumatic Stress Disorder (CBT for PTSD) as well as Dialectical Behavior Therapy (DBT) which is a modified type of cognitive behavioral therapy (CBT). The Georgetown Clinic has maintained our partnerships with local agencies The Department of Juvenile Justice, The Department of Social Services, Georgetown County Alcohol and Drug Commission and South Carolina Vocational Rehabilitation, The Family Justice Center, and the Associated Marine Institutes. We continue to work with our community partners St. James Health and Wellness, Tidelands Community Care Network, Healthy Learners, Georgetown Probate Court and the Health Care Collaborative for Children and Youth to provide behavioral health services to Georgetown County.

The Child and Adolescent (C&A) Program provides an array of services that meet the treatment needs of children with emotional problems and their families. This program provides traditional therapy services on-site and telehealth as well as outreach services to the Associated Marine Institute and Head Start Center. Our School Based Program in partnership with the Georgetown County School District offers mental health services provided within a student’s school setting to minimize unnecessary academic disruption. The goals of this service include the reduction in acute symptoms, improvement in self-esteem, teaching new coping skills and assisting the student in assuming responsibility for their choices and actions.

The Adult Outpatient Program provides a variety of on-site and minimal telehealth services to adults with a chronic and persistent mental illness. These services include traditional outpatient services such as individual, family and group therapy, psychiatric nursing services, psychiatric medical assessments, crisis counseling and mental health assessments. We also have our Individual Placement and Support (IPS) program which is designed to help our patients find gainful employment in the community. IPS is an evidence-based program that proves that a working patient is a more productive and healthier patient physically and mentally.

The Georgetown Clinic has several specialty programs that focus on outreach services. The Toward Local Care (TLC) Program provides services to those individuals with a history of multiple

hospitalizations who need extra assistance to stay in the community and prevent recurrent psychiatric hospitalizations. The ICT-Like Team (Intensive Community Treatment) with individuals to reduce inpatient psychiatric hospitalizations, frequent stays in the local jail and visits to the local emergency rooms. They provide psychological rehabilitation and recovery for persons who have the most severe and persistent mental illnesses and have not benefited from traditional outpatient services. The Meadowlands Apartment Complex in Andrews has provided housing opportunities for our clients for seventeen years. The specialized housing program has kept a steady occupancy rate and continues to be a positive example of individuals with mental illness living independently. Lastly, we have collocated a Care Coordinator through DMH in our clinic to help patients with their case management needs such as food, housing, utilities etc.

The Georgetown Clinic continues the partnership with the Tideland Community Care Network Hospital (TCCN) to improve the overall wellness of an individual. TCCN is a program for the uninsured and underinsured patient that is a high utilizer of the Local Emergency Department. The goal of TCCN is to provide participants with a medical home that gives ongoing access to a primary care team to address preventive care, specialty care, dental and behavioral care, non-emergent hospital care, and medications. Our partnership with Tideland has also evolved into a shared contract that allows us to place a MHP in the local Emergency Department (ED) to assist the EDs with locating psychiatric beds for needed patients and a smooth transition to our local clinic for appointments.

In 2023 we partnered with Georgetown County Parks and Recreation to host 2 conferences in Georgetown County. Georgetown County Parks and Recreation supplied the facility and food, Omega Psi Phi Fraternity, Alpha Kappa Alpha Sorority, Incorporated, Delta Sigma Theta Sorority, Board member Debbie Heller and Doris Smith assisted with donating school supplies for a very successful Back to School event in July there were 263 attendees and gave away over 300 bags of school supplies. In May we held our annual Mental Health Awareness Conference. This conference provided information to 250 attendees.

Finally, I would like to thank the staff of the Georgetown Clinic for their dedication to serving the citizens of Georgetown County with mental illness as well as their families. Your hard work is greatly appreciated!

## **WHAT IS MDFT?**

### **MULTIDIMENSIONAL FAMILY THERAPY**

MDFT is an evidence based driven treatment for adolescents and their families. MDFT's approach is collaborative, comprehensive, family-centered, and scientifically proven to work. MDFT simultaneously addresses substance use, mental health symptoms and disorders, delinquency, violent and aggressive behaviors, and school problems. It improves parental and family functioning and prevents out-of-home placements.

#### **CASE ELIGIBILITY**

- Between the ages of 10 and 18
- Have at least one parent/guardian figure able to participate in treatment. Note that the parent or guardian can be another family member or adult. They may not always reside together, but the parental figure is a person of importance in the youth's life.
- Not actively suicidal (ideation and plan) requiring immediate stabilization.
- Not suffering from a psychotic disorder (unless temporary and due to drug use)

Individual MDFT programs can restrict program eligibility beyond these guidelines. For example, some programs are not able to serve young adults over the age of 18 and others do not have the capability to serve opiate users.

A team consists of at least 3 (2 therapists and 1 supervisor).

Supervisors must have a master's degree in a clinical field.

Supervisors must participate fully in the MDFT supervisor training and coaching program to become certified and maintain certification.

Only MDFT certified or in training supervisors can supervise MDFT therapists on clinical issues.

Supervisors **MUST** be certified as an MDFT therapist before being certified as a supervisor.

Supervisors must recertify annually.

#### **MDFT is proven to:**

##### **Decrease**

Substance use  
Crime and Delinquency  
Violence and Aggression  
Anxiety and Depression  
Out-of-home placement  
Sexual Health Risk

##### **Increase**

School Attendance  
Academic Grades  
Family Functioning  
Pro social functioning  
Effective Parenting Practices  
Positive Peer Affiliation

## **INTENSIVE COMMUNITY TREATMENT PROGRAM**

The WCMH Intensive Community Treatment (ICT) Program provides services to patients who have repeat short-term hospitalizations and frequent emergency room visits. These patients tend to over utilize the hospital's emergency rooms to treat their psychiatric illness and have not been successfully integrated into the Outpatient setting. The objective of the program is to aid patients in identifying ways to stabilize within the community to avoid long term hospitalizations and to decrease emergency room visits. The team collectively provided mental health treatment for 6 months to a year to the patients with hopes that with increased stability the patient can return to a less intensive model which is traditional therapy within the WCMH. This program originally started from the ACT-like program in Georgetown and has expanded into ICT now available to patients served in all four clinics.

## **TOWARD LOCAL CARE (TLC)** **CICELY GLASGOW-OBIDAH**

The goal of the Toward Local Care Program (TLC) is to help persons served reach and maintain recovery longer by implementing services within their community, close to family and their community resource support systems. Staff within the TLC program can work with patients where they are whether they are living independently, in a Care Facility or recently released from long term hospitalization. The team works collectively to provide services to help patients become better acclimated to their environments by helping to identify skills and treatment needed to be successful and refrain from re-hospitalization.

Due to the TLC model, many individuals who were once hospitalized for a long period of time (120 days or more), or had experienced many hospital admissions, are now living in their community with intensive community support and have remained hospital free. They receive Individual therapy, psychosocial rehabilitation, psychiatric and medical services as well as follow up as needed, medication education and monitoring, daily living skills training and development as well as employment assistance.

The TLC Program has the capacity for 77 TLC patients. All patients reside within the communities of Georgetown, Horry, and Williamsburg Counties. Some of them live in Homeshare, Community Residential Care Facilities, and Supported Apartments where clients live independently with the support of staff. We have 36 trained and certified Homeshare community providers and 12 TLC staff that are located within the Waccamaw catchment area. The Homeshare Providers provide a sense of stability and continuation of skills learned by treatment team and short-term respite care within a private family home environment.

The TLC program continues to strive to assist in helping individuals with serious mental illness reach their maximum level of independent living. WCMH staff, Homeshare providers, and various other providers who work with our patients collectively come together to aid our patients in understanding and reaching their highest level of recovery and concur false limitations.

## **HOMELESS PROJECT**

### **LANIECE AJAVON**

Housing Program Updates:

Community housing programs currently have 30 units leased for individuals and families in all three counties. There are 38 individuals housed in this program. Currently, there are 2 vacancies in housing.

PATH Homeless Team 4 quarter (6/1/2023-8/31/2023). The fourth quarter data will be entered into PATH PDX by August 31, 2023. The 1st quarter is (9/01/2023-11/30/2023) data. This data is to be entered into PDX by 11/30/2023. We are currently in the last quarter with 302 contacts and 155 enrollments.

The PATH Team participates as a member of TCHC's HMIS & Coordinated Entry Committee. The purpose of this committee will be to guide policy and procedure decisions, provide monitoring and evaluation oversight, and increase collaboration and transparency across the CoC, as it pertains to HMIS and CES.

PATH also participated in several webinar training courses such as work and work readiness for people experiencing homelessness, contingency management follow up, and diagnosis and document of SMI follow up.

## **SUPPORTED EMPLOYMENT PROGRAM & INDIVIDUAL PLACEMENT & SUPPORT**

### **KIMBERLY JACKSON**

The Supported Employment Program is designed to provide support and training to chronically mentally ill patients to provide the individuals in with needed on the job training. The program has a Mental Health Counselor that works alongside the patient during the identified training period. Supported Employment patients that participate in the program receive services that are tailored to helping them develop job readiness skills that prepare them for competitive employment in the community.

The Individual Placement and Support (IPS) Employment Program is an evidence-based practice in collaboration with South Carolina Vocational Rehabilitation (SCVRD) designed to place adult patients who have been diagnosed with a severe mental illness into competitive employment of their choice. Patients in the program express a strong desire to become employed in the community, however; require assistance about the employment process. Trained Employment Specialists assist patients with support, intensive training (i.e., interviewing skills, resume writing skills), and ongoing follow-up as they work towards obtaining and maintaining employment in the community.

## **ASSERTIVE COMMUNITY TREATMENT – LIKE PROGRAM (A.C.T. – L)**

The purpose of the ACT-Like Program is to serve clients who are not accessing the traditional Center Programs, by providing a comprehensive approach to the delivery of services.

Services are provided to psychiatrically disabled adults who because of their mental illness have difficulty functioning in the community. Clients in the ACT-L program have histories of long and frequent hospitalizations and limited success with independent living and finding and maintaining employment. They also over utilize the hospital's emergency rooms to treat their psychiatric illness. A host of supportive individually designed interventions are required to maintain these individuals in the community, which is what the ACT-L Team is designed to do. Currently the ACT-L is staffed with two master-level clinicians and a B.A. level clinician.

## **ACCESS / CRISIS / COMMUNITY CRISIS RESPONSE & INTERVENTION TEAM (CCRI)**

**MARY BETH PACE**

This program encompasses the Access / Crisis team and the Mobile Crisis Team members who are embedded in the clinic, to provide additional availability for patients.

The Access/Crisis Team accommodates people who call or walk into the clinic to engage in mental health services, or people who come into the clinic experiencing a mental health crisis. This program is designed to respond to acute needs of individuals requiring mental health intervention and provides immediate support to patients. This department evaluates treatment needs and identifies resources to help with treatment services. This team assists the Horry County Probate Court by completing Affidavit for Involuntary Emergency Hospitalization forms, for family and friends of persons experiencing a mental health crisis that are unwilling to come into the clinic. The Access / Crisis Team assists with finding placement for individuals placed on involuntary commitment by a clinic physician as well as individuals who come into the clinic requesting acute stabilization.

The Mobile Crisis Team provides 24-hour assistance to people in self-identified crises in Horry, Georgetown, and Williamsburg Counties. Mobile Crisis offers aftercare through the mental health clinics if the individual is appropriate for continued services, and short-term assistance if they are not appropriate for the mental health clinic. Crisis Intervention includes an array of services such as assessment, screening, referral, and treatment services for individuals who are experiencing an acute psychiatric crisis, or to their families when needed. The Mobile Crisis team works closely with law enforcement to offer crisis services to the population of the counties included in the Waccamaw Center. Law enforcement must always accompany the team of two clinicians when working with individuals out in the community. The focus of this service is to develop a crisis intervention plan for each person served to avoid hospitalization when that is in the best interest of the patient. When a patient is a danger to themselves or others and need immediate stabilization, we work towards emergent mental health treatment.

## **MENTAL HEALTH COURT PROGRAM**

The Mental Health Court (MHC) program is a collaborative program that was established with the 15<sup>th</sup> Judicial Circuit Solicitor (Horry & Georgetown Counties) which began on June 1, 2015. Other involved agencies include: The SC Department of Vocational Rehab (VR), both the J. Reuben Long (Horry) and Georgetown County Detention Centers, and The Horry County Sheriff's Office. The goals of MHC are to: Improve the Court System's ability to identify, assess, evaluate, and monitor mentally ill offenders; Improve Public Safety by reducing the recidivism of mentally ill offenders; and, to use the Authority of the Court to link mentally ill offenders to mental health services, engage participants in treatment, and hold participants accountable for their actions.

The MHC target population includes those with serious, persistent mental illness for which there is known treatment, including those dually diagnosed. MHC cannot serve those solely diagnosed with personality disorders, nor intellectual and/or developmental disabilities. Participants must have pending criminal charges (General Sessions offenses), must reside in Horry or Georgetown County, must have stable housing, reliable/public transportation, and be able to understand the terms and conditions of the program.

MHC program requirements include an individualized Plan of Care developed for each participant based on the mental health assessment. The program duration depends on the participant's court sentence: 9-month MHC (1-4 yr. sentence); 18-month MHC (5+ yr.). The MHC program is divided into four phases with benchmarks for each level requiring completion to advance to the next. Each phase includes a curfew time with curfew checks by a Sheriff's Deputy and the possibility of a random drug screen, home inspections, and pill counts. Each participant must be medication compliant and participate in all psychiatric appointments. Each participant has two required urine drug screens weekly and is randomly tested. Participants must complete 20 employment applications per week until hired. All receive services via VR and are eligible to participate in the VR Training Center until suitable employment is secured. Each participant is required to work a minimum of thirty hours per week. If employment is not secured within a reasonable time frame (3 weeks), then community service at the Solid Waste Authority is required. All MHC participants attend a minimum of two self-help group meetings each week, with proof of attendance. Participants also attend a CHANGE class, a Victim Impact Class, and watch a prison video tour. Participants complete workbooks/classes on Substance Abuse/Recovery, Anger Management, Parenting, Budgeting, etc. Participants can receive services via A Father's Place, which provides instruction/resources regarding Family Court issues including child support and visitation. Participants can also receive services through the Emergency Rental Assistance Program (ECHO), and many reside in area group homes.

MHC participants may be required to attend MHC/stand before the Judge on a weekly basis depending on compliance. All participants are required to attend MHC/stand before the Judge, monthly. Participants' progress is praised by the Judge, and the Judge orders Sanctions for any non-compliance, this can include Community Service Hours, GPS/Ankle monitoring, Extra classes &/or Drug testing, Earlier curfew, Weekend jail time, Palmetto Tx Center, etc.



**WCMH SERVICES** for each MHC Participant is provided by WCMH/MHC MH Professional:

**ASSESSMENT:** Assessments are either done at the detention centers or at Conway WCMH depending on whether they've been released/bonded out or remain incarcerated awaiting a plea date. Most Assessments are done at the jails and include brief psychoeducation regarding mental illness, substance use disorders, and availability of resources/services as the prospective participant may not advance to participate in the MHC program.

**GROUP THERAPY:** Each MHC Participant engages in weekly MH Group Therapy sessions (1.5 hrs.), for the duration of the MHC program. During group sessions participants address many MH topics including but not limited to: Mental Illnesses, Symptom Recognition and Management, Medication Hygiene, Substance Use Disorders and Sobriety, Developmental Arrest caused by SUD, Brain Structure and Functioning Changes, Brain Healing, Post-Acute Withdrawal Symptoms (PAWS), Sober Support Networks, Sleep and Nutrition Hygiene, Anger Management, Healthy Boundary Setting, Improving Self-Esteem, Co-Dependency, Personal Responsibility/Accountability, Effective Communication and Sober Social Skills, Grief and Loss, Parenting, etc.

**INDIVIDUAL THERAPY:** Each MHC Participant begins treatment with weekly IND THX sessions to address treatment goals/objectives in their individualized Plan of Care. Over time, the frequency of IND THX sessions are titrated according to progress. Once the participant advances to the Aftercare Phase of MHC, they are transferred to a WCMH Adult Services MH Professional. This transition during MHC participation is helpful in that there is reduced anxiety of meeting a new clinician while still having access to the MHC clinician, and the requirements of MHC participation are still in effect.

**CRISIS SERVICES:** The WCMH/MHC Clinician is voluntarily available to MHC participants 24/7/365, via telephone, and will facilitate ER visits/psychiatric hospitalization as needed.

**OTHER WCMH SERVICES:**

Initial & Follow-Up Psychiatric Medical Appointments via WCMH psychiatrist.

Nursing Services, as ordered by treating psychiatrist.

Case Management Services, as deemed appropriate.

## **CHILDREN, ADOLESCENT, AND FAMILY SERVICES**

The School Mental Health Program provides counseling and treatment services to elementary, middle, and high schools throughout Georgetown and Williamsburg Counties. We believe providing services within the school and the community allows children and their families greater access to therapeutic services while decreasing the stigma around mental health treatment. It is an efficient and effective way to address unmet mental health needs. All the School Mental Health Program clinicians have a master's degree and can provide assessment, individual therapy, family therapy, group therapy, and crisis intervention. Child psychiatrists and registered nurses are also on staff and available to see the children and their families. The program receives

financial support from all three county school districts. Additionally, the South Carolina Legislature provided funding to DMH for the expansion of School Mental Health services across the state. WCMH has benefited by receiving eleven positions from this effort.

Child, Adolescent, and Family (CAF) Services provides a continuum of treatment services to children and families throughout Georgetown, Horry, and Williamsburg Counties. CAF staff provide the highest quality services in schools, at homes, and in the community to serve the complex needs of their clients.

## **INTENSIVE FAMILY SERVICES**

The Intensive Family Services Program works with children and families where the level of dysfunction and the severity of the child(ren)'s difficulties are such that an out of home placement may be imminent. The services of IFS are primarily delivered in the child's home with a family focus. The services provided are based upon the identified needs of the child and will involve, depending on the child's age, the therapeutic intervention of Multidimensional Family Therapy which emphasizes an integrated, comprehensive, family-centered treatment for teens and young adults. MDFT simultaneously addresses substance use, delinquency, antisocial and aggressive behaviors, mental health disorders, and school problems. IFS Services are available and shall be provided for each client based on assessed needs. The purpose of IFS is to reinforce and enhance an individual client's ability to function within the family and to enhance the total family's level of functioning.

## **“SOAR” HOMELESS PROJECT**

### **APRIL COLLIER**

The SOAR Program has submitted several applications to Social Security Administration (SSA) for eligible adults who are experiencing or at-risk of homelessness and have a mental illness, medical impairment, and/or a co-occurring substance use disorder. The SOAR Program has a total of 4 submissions approved since December 2022.

## **HIGHWAY TO HOPE**

### **EDWARD ROBINSON, JR.**

WCMH Highway to Hope is a mobile unit that provides services to the most rural communities in Horry, Georgetown, and Williamsburg Counties. We are equipped with a Recreational Vehicle (RV) that has been retrofitted to allow for two offices for providing services.

The program is designed to provide Individual Therapy, Family Therapy, Nurse Services, and Psychiatric Services to adults and children. We provide therapy for patients experiencing symptoms related to Mood Disorders, Psychotic Disorders, Anxiety Disorders as well as

Personality Disorders. Many of our patients are seen by appointment, but we can see walk-ins and first-time patients as well.

We have partnered with churches and community entities in the rural areas for the purpose of utilizing their facilities to serve patients. We have been able to provide services inside the churches and community buildings as well as in the RV while parked at these same locations. We have established a great rapport as we continue to nurture these partnerships. We provide quality services.

## **QUALITY ASSURANCE**

### **PEARL CALHOUN**

The Quality Assurance Program ensures that the Center is providing appropriate quality services through training on issues related to quality assurance, auditing of charts to ensure quality of work proper execution, evaluation of staff credentials, investigating adverse incidents, and ensuring client rights and satisfaction through Satisfaction Surveys and Follow-up Surveys. The Quality Assurance Program also facilitates and tracks Prior Authorizations for provided services required for Medicaid – Managed Care Organizations.

The Quality Assurance Program provides initial and ongoing training for clinical staff. There are a variety of training opportunities available for staff. New staff receive Quality Assurance training as part of New Hire Orientation which provides an overview of clinical work with patients, billable services, and required documentation elements through the Electronic Medical Record (EMR) system, along with a 30-Day New Hire Orientation Follow Up. Training is provided to all clinical staff regarding any changes made within DMH as necessary. QA continues to update clinical staff on person centered care, collaborative documentation and the DLA-20 assessment tool through training or memos sent via email as appropriate.

Quality Assurance performs an audit on a representative sample of both active and closed cases that were provided care during selected audit period to ensure that proper documentation is followed each quarter. Audits are completed by the Quality Assurance Committee of the Waccamaw Center for Mental Health, made up of supervisors and a member from each clinical program. The results for fiscal year 2023 show an average of eighty-six (86.25%) percent compliance rate. Charts are returned to the appropriate clinician for feedback and corrections. A Quality Improvement Plan is developed based on the results of each audit, identifying a root cause for lower scores, actions steps to correct issues, an implementation date, and benchmarks scores to reach.

Any adverse incident within the Center is reported through an Adverse Incident Report. This form is forwarded to the Office of Risk Management in Columbia. A total of twenty-four (24) incidents were submitted for the fiscal year 2023. The Continuous Quality Improvement Committee meets every quarter to discuss trends in incidents, actions for improvement, training and education and prevention of reoccurrence.

The CQI Committee also discusses audit, Satisfaction Surveys and Follow-up Surveys results from the previous quarter.

## **2023 EXPENDITURE STATEMENT**

PERSONNEL	\$9,027,752
FRINGE BENEFITS	\$2,886,976
OPERATION	\$2,608,974
TOTAL	\$14,523,702

## **2023 REVENUE STATEMENT**

FEES	\$5,558,698
STATE	\$7,352,282
FEDERAL	\$1,126,143
COUNTY	\$68,308
OTHER	\$418,271
TOTAL	\$14,523,702

# **WACCAMAW CENTER FOR MENTAL HEALTH**

## **2023 OUTCOMES MANAGEMENT REPORT**

### **INTRODUCTION**

The Annual Outcomes Management Report represents a cumulative total of all statistical reports, surveys and evaluations completed in fiscal year 2023. This report will illustrate program compliance with outcomes over the past year to include efficiency, service access and follow-up reports and client satisfaction survey reports.

### **EFFICIENCY OUTCOME**

1. Target: Productivity standard of 810 monthly for clinicians.

Effectiveness: Average productivity for clinicians was 883.89 for 2023. This is a slight decrease from 886.88 last year.

Results: This outcome was met.

2. Target: Increase average monthly contacts over the previous year.

Effectiveness: Average monthly contracts for fiscal year 2023 were 5,383. This is a 9.7% decrease from the previous year.

Results: This outcome was not met.

### **SERVICE ACCESS**

At the end of fiscal 2023, the Center maintained a caseload of 3,084 clients. The total number of individuals served was 16,955. The admissions for the Center were 2,484. The Center has implemented access time frames for all non-urgent assessments with the Center.

1. Target: All non-urgent requests for services will be seen within 7 business days.

Effectiveness: Average monthly wait time for non-urgent initial assessments was 7 days.

Results: This outcome was met.

## **FOLLOW-UP SURVEY**

This Center conducts a direct service follow-up survey approximately one month after the case is closed. Results from the follow up study show that 558 follow up surveys were mailed during the Fiscal Year 2023. 5 surveys were returned completed indicating a return rate of 0.89%. 80% of the respondents felt Front Office Staff were professional and helpful; 60% of the respondents felt clinical staff (nurse and/or counselor) understood their problems; 80% of the respondents felt their doctor understood their problems; 40% felt their problem had either greatly improved or somewhat improved with treatment; 20% felt their problem was worse. 60% of the respondents would return to this Center for services if needed.

## **CLIENT SATISFACTION**

A client satisfaction survey is completed each quarter. A total of 3,088 questionnaires were completed for the year. Results show that the accessibility of our services to clients remains very high at 95% and 91% would recommend services to a friend or relative. There were no significant barriers identified by clients. 84% felt they would get better with the services they have received. Overall, 95% of the participants who completed the surveys stated they were satisfied with the atmosphere of the clinic. In conclusion, most clients who visit the Center were satisfied with the help they received for their problem and potential barriers were not a factor in receiving services at the Center.

## **CONCLUSION**

Waccamaw Center for Mental Health met goals for the fiscal year and the Center was able to hire more staff, including clinicians and psychiatrists, which allowed for more consistent care for our clients.



