

SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
STATE DIRECTOR JOHN H. MAGILL

SANTEE-WATEREE MENTAL HEALTH CENTER
EXECUTIVE DIRECTOR RICHARD B. GUESS

Fall 2015

DMH OPERATES A NETWORK OF 17 COMMUNITY MENTAL HEALTH CENTERS, 43 CLINICS, FOUR HOSPITALS, THREE VETERANS' NURSING HOMES, ONE COMMUNITY NURSING HOME, A FORENSIC PROGRAM, AND A SVPTP.

DMH HISTORY AND DEMOGRAPHICS

South Carolina has a long history of caring for those suffering from mental illness. In 1694, the Lords Proprietors of South Carolina established that the destitute mentally ill should be cared for by local governments. The concept of "Outdoor Relief," based upon Elizabethan Poor Laws, affirmed that the poor, sick and/or disabled should be taken in or boarded at public expense. In 1762, the Fellowship Society of Charleston established an infirmary for the mentally ill. It was not until the 1800's that the mental health movement received legislative attention at the state level.

Championing the mentally ill, South Carolina Legislators Colonel Samuel Farrow and Major William Crafts worked zealously to sensitize their fellow lawmakers to the needs of the mentally ill, and on December 20, 1821, the South Carolina State Legislature passed a statute-at-large approving \$30,000 to build the South Carolina Lunatic Asylum and a school for the 'deaf and dumb'.

The Mills Building, designed by renowned architect Robert Mills, was completed and operational in 1828 as the South Carolina Lunatic Asylum. The facilities grew through the decades to meet demand, until inpatient occupancy peaked in the 1960's at well

over 6,000 patients on any given day. Since the 1820's, South Carolina state-run hospitals and nursing homes have treated approximately one million patients and provided over 150 million bed days.

In the 1920's, treatment of the mentally ill began to include outpatient care as well as institutional care. The first outpatient center in South Carolina was established in Columbia in 1923.

The 1950's saw the use of phenothiazines, "miracle drugs" that controlled many severe symptoms of mental illness, making it possible to "unlock" wards. These drugs enabled many patients to function in society and work towards recovery, reducing the need for prolonged hospitalization. Government support and spending increased in the 1960's. The South Carolina Community Mental Health Services Act (1961) and the Federal Community Health Centers Act (1963) provided more funds for local mental health care.

The South Carolina Department of Mental Health (DMH) was founded in 1964. In 1967, the first mental healthcare complex in the South, the Columbia Area Mental Health Center, was built. Since then, the Centers and clinics have served more than three million patients, and provided more than 42 million clinical contacts.

Today, DMH operates a network of 17 community mental health centers, 43 clinics, four hospitals, three veterans' nursing homes, one community nursing home, a Forensic Program, and a Sexually Violent Predator Treatment Program (SVPTP). DMH is one of the largest hospital and community-based systems of care in South Carolina.

In response to community needs, DMH has developed multiple innovative blue-ribbon programs, two of which are its School-based program and its Telepsychiatry program. As of August, 2015, DMH's School-based program has mental health professionals embedded in approximately 500 public schools and serves 13,000 children per year. The Telepsychiatry program, which utilizes state of the art equipment that allows doctors to see, speak with, and evaluate patients from remote locations, is currently located in 21 emergency departments and has provided almost 25,000 consults.

DMH HOSPITALS AND NURSING HOMES	
Columbia, SC	
G. Werber Bryan Psychiatric Hospital	
William S. Hall Psychiatric Institute (Child & Adolescents)	
Morris Village Alcohol & Drug Addiction Treatment Center	
C.M. Tucker, Jr. Nursing Care Center - Stone Pavilion (Veterans Nursing Home)	
C.M. Tucker, Jr. Nursing Care Center - Roddey Pavilion	
Anderson, SC	
Patrick B. Harris Psychiatric Hospital	
Richard M. Campbell Veterans Nursing Home	
Walterboro, SC	
Veterans Victory House (Veterans Nursing Home)	

DMH MISSION:
TO SUPPORT THE RECOVERY OF PEOPLE WITH MENTAL ILLNESSES.



SANTEE-WATEREE MENTAL HEALTH CENTER
 215 North Magnolia Street
 Sumter, SC 29151
 (803) 775-9364

Counties Served: Clarendon, Kershaw, Lee, and Sumter

SANTEE-WATEREE MENTAL HEALTH CENTER

The Santee-Wateree Mental Health Center (SWMHC) is the face of public mental health in the local community. Outpatient mental health services are provided in clinics in its four-county catchment area: a clinic in Camden serves Kershaw County; one in Bishopville serves Lee County; one in Sumter serves Sumter County; and one in Manning serves Clarendon County.

Each clinic offers a full and flexible array of outpatient services, including individual, group, and family therapy, psychiatric services, emergency services, and case management. With the exception of the Sumter Clinic, the clinics provide services for children, families, and adults. In Sumter, due to space limi-

tations, Child, Adolescent, and Family Services are provided in a separate location.

Unique programs are also available to serve specific populations within the local community. Sumter has the Elder Services program, which provides individualized treatment to persons 65 and older suffering from mental illness, as well as to persons of all ages diagnosed with dementia.

Assertive Community Treatment (ACT) is also provided in Sumter, for those diagnosed with serious and persistent mental illness. A multidisciplinary team works together to treat patients whenever and wherever needed, reducing the episodes of hospitalization and increasing patients' quality of life.

The Kershaw clinic director serves on a Community Coalition that receives an Access Health Grant. With the Kershaw Clinic as their base, five school-based counselors provide mental health services in Kershaw schools. The Kershaw Clinic also has a Federally Qualified Health Care Provider (FQHC) based in Kershaw County, Sandhills Medical Foundation, co-located in the Mental Health Clinic who sees patients two days a week for their primary health care needs.

SWMHC's clinics also work with other local community partners, an advisory board, and other mental health professionals throughout the state to fulfill the Center's mission: to help patients recover from mental illness and lead fulfilling lives.



ALL DMH FACILITIES ARE LICENSED OR ACCREDITED; SWMHC IS NATIONALLY ACCREDITED BY THE COMMISSION ON ACCREDITATION OF REHABILITATION FACILITIES (CARF).

<i>Numbers at a Glance FY15</i>	
	<i>Santee-Wateree Mental Health Center</i>
<i>Outpatients Served</i>	5,500
Contacts/Services Provided	56,550
<i>School-Based Schools</i>	27
<i>Children Served by School-Based Programs</i>	1,210

MARY ALICE IPOCK, BOARD CHAIR



Mary Alice Ipock,
Board Chair

Board Chair Mary Alice Ipock (Mary Alice) is a retired high school math teacher. Two years after the death of her husband, Mary Alice decided to accept the position he had held on the SWMHC board. During the many years he served, Mary Alice had worked with him in supporting the vision and work of the Board, so it was natural for her to continue to represent Clarendon County.

Mary Alice has been involved in the work of the clinic in Manning, she's served in several capacities on the Mental Health America board, and is an active member of the board of "Ipock Place", a residential housing community for those with mental illness in Manning. She also serves on the board of the Logan Foundation.

In 2014, she assumed the role of chair of the SWMHC board.

Mary Alice believes her primary responsibility as chair is to motivate the other board members to advocate for SWMHC. "We must educate the public and fight to remove the stigma of mental illness if we are to treat those who suffer from this disease," she said. "Never has the need been more obvious than now, after all the adverse publicity for those with mental illness as a result of the suicides and murders of late."

Ultimately, Mary Alice's goal is for others to recognize that mental illness is a medical condition like any other illness. She is especially concerned about veterans, many of whom are hesitant to seek

help due to the "John Wayne complex". There is no shame in having a mental illness, and people should not be afraid to seek help. With proper treatment recovery is possible.

The Board constantly reaches out to elected officials to stimulate interest in and improve support of mental health care.

"Our greatest accomplishment is the wonderful care we give our patients. I thank God for the dedicated staff who work day and night to see that this happens," she said.

Currently, SWMHC is preparing to break ground on a new facility in Sumter, which will house all branches of the Sumter Clinic as well as its administrative headquarters.



Richard B. Guess,
Executive Director

RICHARD B. GUESS, EXECUTIVE DIRECTOR

Richard B. Guess, M.Ed., likes perfecting things. Whether it's organizing a beekeeping association to share knowledge, providing multi-cultural training to celebrate his Native American heritage, or transforming the way services are delivered to mental health patients, he continuously strives for the best. So, when SWMHC needed a new executive director 10 years ago, he accepted and found tremendous potential at SWMHC.

"We have the talent here locally to do something for ourselves, and the generosity to share it with others. We see ourselves as part of a bigger picture that contributes here

and contributes to others," said Guess. For instance, SWMHC staff developed the first electronic medical record (EMR) in the Agency, which later served as the template for a statewide EMR now implemented in all DMH centers. "We have loyal, innovative staff. I consider them our greatest resource," he said.

Guess always knew he wanted to touch individual lives and chose Psychology as his college major, later graduating with a Master of Education degree from the University of South Carolina.

Like many at DMH, he has been personally affected by mental illness. "I married into

a family with a secret, one they had never dealt with," he said.

The first time his former mother-in-law called in the middle of the night telling him to check on his children, it didn't seem alarming. But the calls kept coming. Eventually, he came to understand that "the voices were telling her terrible things had happened to the children." While she was able to keep it hidden from the outside world, it was painful for her family. These experiences have given Guess a strong desire to educate the public about mental illness in an effort to eliminate any associated stigma.

MARIAN DEHLINGER, MD, MEDICAL DIRECTOR

From Athens, Greece, Medical Director Dr. Marian Dehlinger graduated from Temple Medical School and completed her residency at the Temple Psychiatry Residency Program in Philadelphia, PA.

She decided to specialize in Psychiatry during her residency because she realized she is more drawn to healing mental illness than physical disease. She brings to the table extensive psychiatric experience in the public and private sectors and has been Board certified in Psychiatry/Neurology since 1994.

Dr. Dehlinger derives satisfaction from both her clinical

and administrative duties as medical director. She said, “On the clinical side you affect the patient you see, but on the administrative side you can affect even those you don’t personally see. You influence a much wider scope. I want to make changes to give the best possible care to our patients.”

Dr. Dehlinger is concerned with all aspects of the Center, including how patients are greeted at the front desk. It is her goal that every patient has a positive experience at SWMHC. She meets with staff and community partners, reviews surveys and comments, and tries to address

and resolve all issues quickly.

“I think it’s important to increase communication with all agencies in the healthcare system. We are only as strong as our weakest link,” she said.

She hopes to recruit psychiatrists from the Medical University of South Carolina and the University of South Carolina residency programs, who will stay at SWMHC long term.

When asked what drives her she said, “My father raised me to do the best I can, no matter what I do or where I work. He gave great advice.”



Dr. Marian Dehlinger,
Medical Director

LANALLE DARDEN, CHILDREN, ADOLESCENTS, AND FAMILIES (CAF) DIRECTOR

Born and raised in Yonkers, NY, Lanalle Darden obtained her undergraduate degree and master’s degrees in Education and Social Work at Fordham University.

The challenges Darden faced as a young mother of a daughter diagnosed with Autism gave her the desire to improve social services and help others with similar issues.

Headquartered in Camden, CAF Director Darden oversees CAF operations in all four counties of the SWMHC catchment area. CAF services provide therapeutic services, which include individual, family, and group counseling, school-based services, psychiatric medical services, case management and crisis management, based on need.

Located in 27 public schools, SWMHC’s school-based program is an integral part of CAF services. Notably in 2011, SWMHC sustained a partnership with Clarendon School District 2 that was initially established through funding from the Blue Cross Blue Shield Rural Initiative Grant. Likewise, the partnership with Kershaw County School District initially established in 2011 under the federal Safe School Healthy Students Grant, was sustained in 2014 with over 1,000 students being served through prevention/intervention and targeted mental health services. The program continues to promote safe and healthy environments in which children can learn and develop.

Darden and her staff work collaboratively with other community partners from the entire catchment area, including the Department of Juvenile Justice, the Department of Social Services, The Alpha Center, United Way, the Continuum of Care, Federation of Families, and more, to offer a ‘no wrong door approach’ to accessing mental health services for children and youth.

“We’ve developed a system of care that strengthens our services and our community,” said Darden. She attributes much of her success to following her grandmother’s adage, that “you catch more flies with honey than with vinegar.”



Lanalle Darden,
Children, Adolescents, and
Families (CAF) Director

“WE’VE
DEVELOPED A
SYSTEM OF
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DARDEN



Roslyn Sanders,
RPS, IPS, and QI Director

SERVICES MAY
INCLUDE THERAPY,
CRISIS
INTERVENTION,
TRANSPORTATION,
SKILL-BUILDING,
SUPPORTED
EMPLOYMENT, AND
SUPPORTED
HOUSING,
DEPENDING ON
PATIENT NEEDS.



Michele Reeder,
Kershaw County Clinic Director

ROSLYN SANDERS, RPS, IPS, AND QI DIRECTOR

Roslyn Sanders is a Sumter native with more than 21 years of experience in the behavioral health field and six years consulting for human service agencies throughout the United States. In 2004, she received her Master’s Degree in Rehabilitation Counseling from the University of South Carolina School of Medicine. In 2008, she successfully completed the Southeast Addictive Technology Transfer Center Network (ATTC) Leadership Institute. The program is devoted to cultivating evidence-based research and practices that improve treatment access and outcomes. In 2009, she be-

came a Commission on Accreditation for Rehabilitation Facilities (CARF) surveyor. She now serves as Santee Watteree Mental Health CARF Coordinator. She received special acknowledgment from Sumter County Adult Education for promotion of education for persons living with severe and persistent mental illness. “Healing starts with seeing everyone as a human being first,” she said.

The main goals of the Psychosocial Rehabilitation Program (PRS) and the Individual Placement and Supported Employment Program (IPS) program are to provide great-

er access to quality services for everyone and to reconnect a person to his or her environment, community, and culture. The programs address strategies in dealing with feelings and images about mental illness, teaches new methods of setting goals and developing strategies to compensate for cognitive deficits, and improves communication with family members and caregivers.

Roslyn has worked to enhance awareness and education around psycho-social and employment issues and reducing stigma.

MICHELE REEDER, KERSHAW COUNTY CLINIC DIRECTOR

Michele Reeder, M.Ed., came to South Carolina when she was 18. After studying Anthropology so she could work with gorillas, she decided to change her path after learning she would have to spend six months in Africa. Then, after studying pre-Med, Reeder found her way to counseling. “Helping others figure out how to make changes for the better and find their own strengths and how to use them gives me a purpose filled life,” she said.

Now in her 15th year as the clinic director for Kershaw County Mental Health, Reeder manages a busy clinic with approximately 950 open cases. In addition to this, she is the Training Coordinator for

the Center. Most case managers have a case load of 100 to 130 patients. The clinical staff includes physicians, nurse practitioner, nurses, two peer support specialists, a Care Coordinator, and 10 mental health professionals.

The main goal of the Kershaw Clinic is to promote recovery and provide comprehensive multidimensional services aimed at helping a patient make significant gains in functioning and quality of life. These services include case management, skills groups, group therapy, individual therapy, medication management, nursing services, psychiatric assessment services and collaboration with community agencies to develop

comprehensive and forward-moving plans of care.

Kershaw County is mostly rural, and many patients lack health insurance coverage to pay for the services needed to attain and sustain recovery. Currently, the clinic uses a medication voucher system to assist indigent patients with medications partially funded by County-donated monies. The Clinic has also partnered with Sandhills Medical Foundation, a local FQHC, to collocate primary healthcare services in the clinic two days a week to assist patients who have transportation issues and stream line the referral process.

LYNN MELTON, ELDER SERVICES & ACT DIRECTOR

Since interning with DMH in 1985, Lynn Melton, LMSW, has devoted the majority of her career to Geriatrics in both the private and public sectors. “I was gifted with a very deep and very loud voice. My presence is generally known, which makes it easy for the patients to hear me,” she said.

In 2006, Melton became the Elder Service program coordinator for the Sumter Adult Clinic. The program provides individualized treatment to persons 65 and older suffering

from mental illness, as well as to persons of all ages diagnosed with dementia. It currently serves approximately 200 patients.

In 2014, she accepted the position of program coordinator for the first Assertive Community Treatment (ACT) team in Sumter County. ACT is based on a nationwide model aimed at helping patients with serious and persistent mental illness lead independent lives within their communities. A team, rather than multiple service provid-

ers, cares for those who have not had success with the traditional outpatient model. The goal is to reduce or eliminate debilitating acute episodes that require institutionalization, thereby reducing the economic and societal costs of hospitalization, incarceration, unemployment, and homelessness, and increasing patients’ quality of life.

The ACT team provides individualized support to more than 60 patients.



Lynn Melton,
Elder Services
& ACT Director

CATHERINE F. HARRIS, LEE COUNTY PROBATE JUDGE

As an advocate for the mentally ill, Lee County Probate Judge Catherine Harris believes more people need to be educated about mental illness and recovery. “People just don’t understand, unless they have had a loved one stricken with it. It usually robs young people of the most precious years of their lives. It will rob their careers, their hopes, their dreams,” she said.

Judge Harris’ brother Wendall was one of those robbed of a promising life by mental illness. “On a scale of one to ten, Wendall was a perfect ten,” Judge Harris said. “He was tall, dark, and handsome, gifted, and talented. He pitched Major League baseball, had a fiancée, and was planning to finish college.” Everything was going well in her 20-year-old brother’s life. But a hidden trigger was

pulled when his former fiancée married his friend and Wendall attempted suicide.

Judge Harris and her family were devastated. They never suspected Wendall had an illness that had been there all along. More stressors, such as a demanding boss, exacerbated his underlying illness. Voices continuously told him to kill his family and himself. In the 1980s, Wendall was diagnosed with schizophrenia and eventually had to be institutionalized in the South Carolina State Hospital.

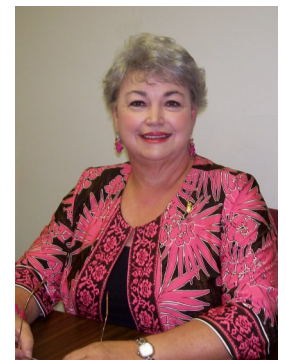
Wendall’s illness prompted Judge Harris to begin a new career. In 1993, she became a Probate Judge for Lee County in Bishopville.

When the small county hospital closed, it made SWMHC more important than ever. “Many times, when those

with mental illness are in crisis, a mental health counselor can recognize the crisis and work to avoid an inpatient stay. That is the goal,” Judge Harris said.

Judge Harris usually presides over 15 to 20 commitment hearings a week in her 12-county district. She sees many “revolving door patients” who don’t take their medicine because of the side effects or because they don’t believe they need them. “I tell them it’s no different than my diabetes. If I don’t take my medicine, I get deathly sick. You will too. It’s something that you’ve just got to make your mind up that you have to do.”

Judge Harris believes more funding is a necessity to help the chronically mentally ill with everything from medicine to housing.



Catherine F. Harris,
Lee County Probate Judge



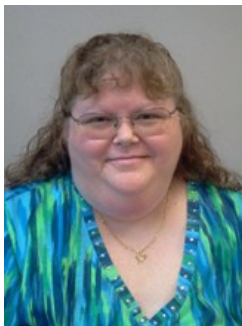
TO SUPPORT THE RECOVERY OF PEOPLE WITH MENTAL ILLNESSES.

SC DEPARTMENT OF MENTAL HEALTH

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WWW.SCDMH.ORG



Ivy
Peer Support
Specialist

SANTEE-WATEREE MENTAL HEALTH CENTER

215 North Magnolia Street—Sumter, SC 29151
(803) 775-9364

Office Hours: Monday-Friday 8:30 a.m. to 5:00 p.m.

Satellite Clinics:

Sumter Child, Adolescent, & Family Services

1175 N. Guignard Drive—Sumter, SC 29151
(803) 775-7898

Sumter Medical Services Annex

215 North Salem Ave—Sumter, SC 29150
(803) 775-9364

Clarendon County Clinic

215 Commerce Street—Manning, SC 29102
(803) 435-2124

Kershaw County Clinic

2611 Liberty Hill Road—Camden, SC 29020
(803) 432-5323

Lee County Clinic

817 Brown Street—Bishopville, SC 29010
(803) 484-9414

RECOVERY SPOTLIGHT – IVY

My name is Ivy. After suffering with depression for as long back as I can remember, I attempted suicide in 2008 and promptly found myself committed to a mental health hospital. When I was ready to be discharged I was told that I needed to follow-up at Kershaw County Mental Health. I was assigned a psychiatrist and a mental health counselor. I was properly diagnosed for the first time with Bipolar II disorder and generalized anxiety disorder and put on the appropriate medication. The counselor I was given turned out to be a wonderful woman who gave

me unconditional caring and support. She and I began the process of helping me deal with my life-long depression. Slowly, I changed, even though my living circumstances didn't. When they became available, she referred me to group services. What I learned there was truly life altering. In Cognitive Behavioral Therapy, I learned to change my thinking and take control of my mental illness. The classes taught me how powerful a group experience could be. I learned many techniques to deal with the stresses of everyday life and began to

thrive. After a few years I was encouraged by my group leader to apply for a new position at the center. Becoming a Certified Peer Support Specialist (CPSS) was perhaps one of the scariest prospects of my life. So many of my old insecurities reared their ugly heads. Slowly, I grew to love the new responsibility of using the lessons I had learned to help other patients along their own mental health journey. It is a dream come true to be able to help others improve their lives. The process also helps keep me on my toes about my own

mental health. I've been a CPSS now for four years and have never regretted taking that risk. Throughout all this time, I have certainly had my own share of ups and downs. I've had bouts of depression and gone through numerous medication changes. During this time I have managed to remain stable. I have not had a return trip to a mental health hospital and have not missed a single day of work due to my mental illness. Finally, I can honestly say that I look forward to tomorrow and know that I can face the future without my mental illness getting in the way.