

S.C. MENTAL HEALTH COMMISSION
S.C. Department of Mental Health
Orangeburg Area Mental Health Center
2319 St. Matthews Rd., Orangeburg, SC 29118

August 3, 2018

Center Presentation

ATTENDANCE:

Commission Members:

Dr. Alison Evans, Chair
Ms. Sharon Wilson, Co-Chair
Ms. Louise Haynes
Mr. Bob Hiott

Staff/Visitors:

Debbie Calcote	Celia Hezekiah	George Greene, Jr.
Yvonne Crum	Vermell Sistrunk	Lauren Phillips
George Manigo	Blaire Foutz	Dr. Robert Bank
Dr. James Harvey	Jim Harvey	Dr. Versie Bellamy
Melba Arthur	Alan Powell	John Magill
Willie Priester	Noelle Wriston	Thornwell Simmons
Nancy Harrison	Mary Gunter	

The S.C. Mental Health Commission met at the Orangeburg Area Mental Health Center, 2319 St. Matthews Road, Orangeburg, SC, at 9:00 a.m. Dr. Alison Evans expressed appreciation to the Center for the courtesies extended to the Commission during its visit. Dr. Evans turned the meeting over to Mr. Willie Priester, Executive Director.

PRESENTATION:

Ms. Vermell Sistrunk gave a presentation on the Orangeburg Crisis Program. Ms. Sistrunk defined a crisis as a person that is an immediate danger to themselves or others. Patients enter the program as walk-ins, through pick-up orders from law enforcement, with the assistance of the family or caregiver, and through referrals from agencies, neighbors, etc. Intervention methods that are used are:

- Assessment with the clinician and psychiatrist
- Referrals to inpatient care
- Referrals to outpatient care
- Address medication needs
- Educate caregiver or family regarding illness
- Provide psychotherapy
- Link to community resources (if needed)

It was noted that one (1) in every five (5) individuals will experience mental illness and that some of the community activities in the Orangeburg area that increase awareness are health fairs, conferences, mental health awareness forums, the distribution of flyers about mental illness to local churches, and surveys. Ms. Sistrunk stated that the Center's Multi-Disciplinary Team consists of mental health professionals and licensed counselors, a psychiatrist and nurse, and an Engagement Specialist. She stated that the Engagement Specialist assists patients with reminders for appointments, rescheduling appointments, and follows up with patients that drop out of the program. Social media, the economy, environmental fears, hereditary mental illness, drugs and alcohol, weather unpredictability, peer influence, physical illness, and a change in family structure can increase stress and contribute to crisis situations. Ms. Sistrunk identified the following as symptoms of a crisis:

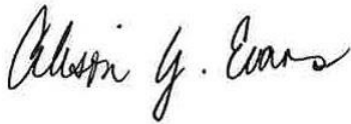
- Rapid mood swings
- Extreme energy or lack of it, sleeping all the time, or being unable to sleep
- Severe agitation, pacing
- Talking very rapidly or non-stop
- Confused thinking or irrational thoughts
- Thinking everyone is out to get them or appearing to lose touch with reality
- Experiencing hallucinations or delusions
- Making threats to others or themselves
- Isolating themselves from friends and family, not coming out of their room
- Not eating or eating all the time, rapid weight loss or gain
- Suicidal thoughts and statements

Sources that are available to clients include contacting 911 or local law enforcement officials, local mental health facilities, emergency departments, primary care physicians, court clerks for involuntary commitment processes to be initiated, and family/caregivers. Ms. Sistrunk noted that intervention methods for the crisis situations include psychoeducation, addressing and changing one's mindset of coping skills, social skills adjustment, emotional/behavioral and cognitive processing, safe environments in counseling sessions, medication needs, and support systems. The Orangeburg Area Mental Health Center sees approximately 3 thousand patients per year (not including school mental health patients).

The Center has contracts for beds with Three Rivers, Rebound (Lancaster), Aurora Pavilion, and Palmetto Lowcountry. Between July, 2017 and June, 2018, fifty-six (56) patients were referred to the Orangeburg Area Mental Health Center from The Regional Medical Center. The Liaison between The Regional Medical Center and the Center assesses, evaluates, and recommends/secures appropriate disposition for crisis/emergent psychiatric patients and upon the psychiatrist's approval, a disposition is initiated. Possible outcomes include inpatient admission for treatment, outpatient following (appointments), referral to county law enforcement and social worker for DSS investigation, overnight monitoring (reassess after rest), homeless shelters, and being discharged to home.

Dr. Evans thanked Ms. Sistrunk for the excellent, informative presentation.

There being no further discussion, the center presentation concluded at 9:45 a.m.



Alison Y. Evans, Psy.D, Chair
SC Mental Health Commission



Terry Davis, Recording Secretary
SC Mental Health Commission