

**S.C. MENTAL HEALTH COMMISSION
S.C. Department of Mental Health
Charleston-Dorchester Mental Health Center
2100 Charlie Hall Blvd.
Charleston, SC 29414**

October 5, 2018

Center Presentation

ATTENDANCE:

Commission Members:

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

Staff/Visitors:

Jennifer Roberts
Dave Zoellner
Douglas Wurster
Sonya Jenkins
Dr. Robert Bank
Taryn Reed

Angel Smith
Brandon Lilienthal
Brian Musolf
Anthony Derhovanesian
Felecia Boyd
Valerie O'Neal

The S.C. Mental Health Commission met at the Charleston-Dorchester Mental Health Center, 2100 Charlie Hall Blvd., Charleston, S. C. 29414, 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 Ms. Jennifer Roberts, Executive Director.

PRESENTATION:

Ms. Angel Smith gave a presentation on First Episode Psychosis Programs (FEP Programs). Psychosis was described as conditions that affect the mind, where there has been some loss of contact with reality and typically begins in late teens to mid-twenties. It was stated that psychosis can be a symptom of mental illness or of a physical condition. Three (3) out of one hundred (100) people will experience psychosis at some times in their lives and approximately 100K adolescents and young adults in the United States experience 1st episode psychosis each year. Some of the warning signs that Ms. Smith identified are:

- ❖ Hallucinations
- ❖ Suspiciousness
- ❖ Unusual thoughts/beliefs
- ❖ Strong, inappropriate emotions or none at all
- ❖ Withdrawing from friends and family
- ❖ Decline in hygiene
- ❖ Inability to concentrate

It was noted that the most effective treatment for first-episode psychosis is coordinated specialty care and Charleston-Dorchester Mental Health Center uses a team-based approach with shared decision-making that focuses on working with individuals to reach their recovery goals. There are two (2) Coordinated Specialty Care Teams:

- ❖ **Navigate Team**
 - Serve patients from age 15 – 40, experiencing first episode of psychosis in the last 2 years
 - Patient diagnosis is on the Schizophrenia Spectrum
 - Actively experiencing psychosis and/or currently prescribed an anti-psychotic medication

- ❖ **New Directions Team**
 - Serve patients from age 15 – 40, experiencing first episode of psychosis in the last 2 years
 - Diagnosis must include psychosis
 - Actively experiencing psychosis and/or currently prescribed an anti-psychotic medication

Some clients shared their inspiring success stories via video, acknowledging gratitude for assistance in learning to manage areas of their lives.

Mr. Brandon Lilienthal and Ms. Sonya Jenkins presented information on the FARMACY Program, which engages with disadvantaged communities to provide healthcare services and provides an emphasis on good nutrition by providing nutritious food. The local Food Bank donates the food and offers demonstrations on the proper way to prepare some foods. There are also blood pressure checks offered and CPR instructions are provided periodically. Mr. Lilienthal stated that there is a “Just Ride” program that is funded by the City of Charleston which provides a bicycle to ride for up to two (2) hours per day at a cost of \$ 5.00/year. Mr. Lilienthal stated that there is a cost-free charter school to assist with obtaining high school diplomas.

A presentation on the Tri-County Crisis Stabilization Center (TCSC) was given by Ms. Jennifer Roberts. The TCSC is a 24/7, 10 bed, voluntary unit which serves to divert clients from the emergency department, hospital, and jail. The unit also provides triage and drop-off services for local law enforcement. Admission is voluntary and individuals must be medically stable, in psychiatric distress, not violent or intoxicated, and able to participate in a rigorous treatment regimen. Since the TCSC reopened in 2017, there have been seven hundred seventeen (717) admissions and one thousand, one hundred and thirty-eight (1138) referrals. The average length of stay is 3.9 days. Diversions since 2017 include six hundred ninety-seven (697) inpatient hospital stays, two hundred eighty-eight (288) ED visits, and fourteen (14) jail stays. Services that are provided include:

- ❖ Mental Health Assessment
- ❖ Physicians Medical Assessment
- ❖ Nursing Services
- ❖ Individual Therapy
- ❖ Group Therapy

- ❖ Psychosocial Rehabilitative Services (PRS)
- ❖ Crisis Intervention
- ❖ Certified Peer Support Services (CPSS)
- ❖ Care Coordination

In the absence of Ms. Delynn Morgan, Ms. Jennifer Roberts gave a presentation on the EMS-Mobile Crisis Telehealth Program, which began in May of 2017. The program follows the following steps:

- ❖ A 911 call is placed regarding a behavioral health concern
- ❖ EMS staff and law enforcement are dispatched to the scene
- ❖ The EMS supervisor takes control and discharges the ambulance from responsibility
- ❖ The Mobile Crisis Unit is contacted for a telehealth assessment
- ❖ Disposition is coordinated from the scene

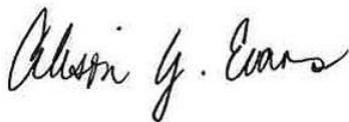
Ms. Roberts stated that since inception in 2017, there have been one thousand fifty-four (1054) calls and diversions as follows:

- ❖ Fifty-six percent (56%) from ED
- ❖ Forty-nine percent (49%) from hospitals
- ❖ Eight percent (8%) transported to ED by EMS

The estimated cost savings of ambulance and ED costs in the first twelve months of operation was \$ 1M.

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

There being no further discussion, the center presentation concluded at 10:00 a.m.



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



Terry Davis, Recording Secretary
SC Mental Health Commission