

**S. C. MENTAL HEALTH COMMISSION MEETING**  
**SCDMH Administration**  
**2414 Bull Street, Columbia, South Carolina 29201**  
**August 7, 2020**

A Business Meeting of the S.C. Mental Health Commission was held in Room 320 at the S.C. Department of Mental Health Administration Building on Friday, August 7, 2020, at 10:30 a.m. Mr. Greg Pearce, Chair, was present in person. Other Commission members were present virtually via Zoom. The meeting notice and agenda were posted prior to the meeting and notice made to all individuals and news media who requested information in accordance with State law.

**CALL TO ORDER**

Chairman Pearce called the meeting to order at 10:30 a.m. Mr. Stewart Cooner provided the invocation.

**INTRODUCTION OF VISITORS**

Chairman Pearce welcomed everyone. Visitors present virtually via Zoom were Beth Franco, Protection & Advocacy for People with Disabilities, Inc.; Dr. Lawrence Kerr; Bill Lindsay, Executive Director, NAMI SC; Dr. Balbir Minhas; Jocelyn Piccone, Liberty Healthcare; and Janie Simpson, Chair, SC Mental Health State Planning Council

**APPROVAL OF AGENDA**

***On a motion by Dr. Alison Evans, seconded by Ms. Louise Haynes, the Commission approved the Agenda for today's Business Meeting.***

***All voted in favor to the above motion; the motion carried.***

**APPROVAL OF MINUTES**

***On a motion by Mr. Bob Hiott, and seconded by Ms. Haynes, the Commission approved the minutes from the Business Meeting of July 10, 2020***

***All voted in favor to the above motion; the motion carried.***

**MONTHLY/QUARTERLY INFORMATION REPORTS**

Ms. Elizabeth Hutto presented the items listed under Monthly/Quarterly Informational Reports, copies of which had been provided to the Commission.

Ms. Hutto reported for the month of July a total of three pending investigations by the Office of Public Safety.

Ms. Hutto reported that as of the end of July there were a total of 13 pending SLED investigations. Two cases had been assigned to SLED, of which the oldest is from May 2020; four cases were assigned to Long-term Care Ombudsman Office of which the oldest is from September 2019; three were assigned to local law enforcement, of which the oldest is from January 2019; and four were assigned to the Attorney General's Office (AGO). She noted that one of the cases assigned to the AGO goes back to August 2017. She explained the case will remain open until the defendant is located or until the AGO decides not to pursue any longer.

Ms. Hutto highlighted the following from the Patient Advocacy Report:

- 36 calls to patient advocacy in June 2020; a total of 272 year to date.
- 54 complaints were resolved in June 2020.
- 376 complaints have been resolved year-to-date.

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- The number of complaints by category resolved year to date is 467 (*complaints are broken out by category, a single patient complaint may have more than one category*).

***DEPARTMENTAL OVERVIEW AND UPDATE***

**Coronavirus Response**

**Administrative Services**

On behalf of Ms. Debbie Calcote, Mr. Mark Binkley presented the Administrative Services Report, copies of which had been provided to the Commission. Below are highlights from the report:

- Financial services continues to work diligently on the year-end closeout of FY2020.
- The Budget Office has provided preliminary budgets for all agency divisions and departments to finalize FY2021 State allocations.
- Work has begun on budget requests for FY2022. Budget plans are due to the Executive Budget Office by Friday, September 25, 2020.
- A major function of Public Safety is providing transportation for those patients who have to be in secure custody, i.e., forensic patients and sexually violent predator (SVP) patients, whenever they are being transported to medical appointments, hospitals, court, etc. Public Safety Officers must wear personal protective equipment (PPE) and must be knowledgeable on procedures for donning and doffing personal PPE. The Public Safety Officers are also tasked with cleaning and disinfecting their vehicles before and after all patient transports.
- Physical Plant Services continues to work in collaboration with the Division of Inpatient Services to establish space within the facilities in which to isolate patients with confirmed or suspected COVID-19.

Chairman Pearce asked about the newly formed Marketing/Social Media workgroup in the Public Information Office. Dr. Rogers explained the workgroup was formed to develop a plan to use social media platforms to help the public think about mental health issues in general and to address some of the negative mental health effects such as stress, anxiety, depression, etc., in light of the COVID-19 pandemic.

**Issue Action Paper (IAP)**

Mr. Binkley presented an Issue Action Paper requesting Commission approval for the expenditure of additional proceeds from the Bull Street property (campus of the South Carolina State Hospital) parcel sales of \$2 million for the Agency's supported housing program, as well as authorizing the expenditure of \$3.5 million from the proceeds of the Bull Street property parcel sales for the replacement of the DIS Nutritional Services cook-chill equipment. If both recommendations are approved, the balance of unallocated Bull Street parcel sale funds would be \$7.8 million. Under the terms of the Agreement, the Department is due an additional net amount of \$512,279 from the Buyer on or before September 30, 2021.

In 2015-2016, the Commission approved the use of the initial \$4.5 million of the Bull Street sales proceeds as one-time matching funds for housing development for DMH patients. Ms. Michelle Murff, Director of Housing and Homeless Programs, gave an update on the housing development initiative (a copy of the presentation is filed with the minutes in the Office of the State Director). Chairman Pearce expressed appreciation to Ms. Murff for her enthusiasm and work in the support of housing patients.

Dr. Evans commented that she remembers the passion that former Commissioner Buck Terry had for housing. She said Commissioner Terry fought diligently and tirelessly for the monies from the sale of the property to be earmarked for housing initiatives. Dr. Evans stated Commissioner Terry would be so pleased to hear this report and see the progress that is being made.

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Ms. Mary N. Jaskowski, Director of Nutritional Services, said DIS Nutritional Services feeds over 700 patients three times a day at five different Columbia area facilities using a “cook-chill” system. The equipment currently in use is 24 years old. Nutritional services has extended the life of the system through proactive food tray inventory management and equipment repair. She said the manufacturer of this equipment will soon no longer produce the parts to maintain the equipment. Approval of this recommendation will provide funds needed for meal tray replacement; replacement of meal carts delivering trays to patients; re-therm cart replacement; facility docking station replacement; upgrading electrical panels associated with docking stations; and modification of compressor for heat regulation, all of which are critically needed for providing safe food and meeting the nutritional needs of the patients.

*On a motion by Mr. Hiott, and seconded by Dr. Evans, the Commission approved the recommendations as presented.*

Community Mental Health Services

On behalf of Ms. Blalock, Mr. Christian Barnes-Young presented the Community Mental Health Services Trends and Transparency Monthly Indicators (TMI) spreadsheets, copies of which had been provided to the Commission. This was received as information.

Mr. Barnes-Young presented the community mental health centers (CMHC) volume indicators, copies of which had been provided to the Commission. He said the centers have made great efforts to reach the patients in the communities to provide the services in the patients’ plan of care. He noted family therapy and the number of contacts with children are higher than it has been in previous years, and he attributes this to access to telehealth services since COVID-19. He presented a graph depicting the percentage of patients seen on or before March 13, 2020 verses open cases. As of August 4, 2020, 1.44% of the patients in the community had not been seen, down from 2.5% in July 2020. (A copy of the CMHC volume indicators is filed with the minutes in the Office of the State Director).

Mr. Barnes-Young reported the Department is working with the SC Department of Education (DOE) in conjunction with other state agencies to reach students who have not received educational services since the pandemic. DOE has provided a report listing the names of students. The information will be sent to the CMHCs by next week to see if DMH patients are listed in the report.

On behalf of the Commission, Chairman Pearce commended the center directors and their staff for their hard work, dedication and commitment to the patients during these unprecedented and challenging times due to the of COVID-19 pandemic.

Division of Inpatient Services (DIS)

On behalf of Dr. Bellamy, Dr. Rudd presented the Division of Inpatient Services report, copies of which had been provided to the Commission. Dr. Rudd recognized Dr. Jennifer Alleyne, M.D., BPH Forensic Psychiatric Medical Chief, who was present via Zoom. Dr. Rudd announced Dr. Alleyne received the University of South Carolina School of Medicine’s Department of Neuropsychiatry Chairman’s Award for her ongoing collaboration with the University of South Carolina in support of the forensic residency training program. On behalf of the Commission, Chairman Pearce thanked Dr. Alleyne for her outstanding contributions and congratulated Dr. Alleyne on her award.

Dr. Rudd stated the following COVID-19 Mitigation Strategies which were put in place early in the pandemic and are in line with recommendations from the SCDHEC and CDC:

- A negative COVID-19 test is required for prospective patients prior to admission. The test is repeated following admission.
- All persons working in a facility must wear a mask and other appropriate Personal Protective Equipment (PPE) at all times.
- Plans and negotiations are ongoing for additional beds to establish an admission/observation unit for newly admitted Forensic patients and for the establishment of a Special Care Unit that would treat Bryan COVID-19 positive patients who do not require hospital level of care.

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- Continuing Point Prevalence Testing of residents, patients and staff to help identify those who are asymptomatic but are positive.

Dr. Rudd said every facility has experienced some degree of decrease in the average daily census over the past six months, and most notably since March 2020. The combined average daily census for June 2020 represents a 16% decrease compared to the combined average daily census for February 2020.

Dr. Rudd announced the following:

- Jeffrey Raynor, M.D. was appointed Medical Director of the Bryan Psychiatric Hospital effective July 16, 2020.
- Wendy Wang, M.D. was appointed Interim Medical Director of Morris Village effective July 2, 2020.
- Kathryn Hollins-Lizarribar, M.D. was recruited to serve as the Primary Medical Chief for the BPH Forensic Hospital effective July 20, 2020.

Dr. Rudd said the SCDMH-DIS Covid-19 Task Force continues efforts to keep patients and staff as safe as possible.

Forensic Waiting List Update

Dr. Gothard reported that as of July 28, 2020 there are 81 patients on the forensic waiting list and 10 patients on the referral waitlist. She reported that during the month of July the forensic program experienced increased impacts from COVID-19.

- Scheduled admissions had to be postponed due to active COVID-19 cases within the facility.
- A larger unit had to be quickly converted into the new quarantine/isolation unit for treatment of COVID-19 positive patients.
- Patients under investigation with possible symptoms or exposure to the virus were moved to the smaller quarantine/isolation unit for observation and separation.
- Four of five forensic units remain on quarantine status due to exposure to positive patients or staff.
- There was an increase in the number of forensic patients who required acute hospital level of care.
- There was an increase in the number of staff members who self-quarantined.

Dr. Gothard reported that contract negotiations are underway for a Forensic Alternate Care Site. The Alternate Care Site will be costly, but will allow for large cohorts of new admissions.

Financial Status Update

Ms. Noelle Wriston presented the monthly financial report. Ms. Wriston reported DMH is projected to end FY20 under budget. She announced the FY2022 budget request is due at the end of September. A draft of the FY2022 budget request will be presented to the Commission at the September 4, 2020 Commission Business Meeting.

Ms. Wriston gave a presentation on the SC CARES Grant Management Program, a statewide recovery program for the Coronavirus Relief Fund (CRF), a copy of which is filed with the minutes in the Office of the State Director. Below are highlights from the presentation:

- On June 25, 2020, the South Carolina General Assembly enacted, and the Governor signed, a Joint Resolution (Act 142) to authorize the expenditure of federal funds disbursed to the state in the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) and specified the manner in which the funds may be expended for the CRF.
- The Department of Administration has retained Guidehouse, Inc. to build and operationalize the state-wide recovery program for the CRF.
- \$1.9 billion CRT was included in the CARES Act for the reimbursement of South Carolina COVID-19 related expenses.
- This week DMH submitted a CRF reimbursement request for \$1.8 million eligible expenditures from March 1 through June 30, 2020. A second request will be submitted next week.

**Six month Report of Collections**

Ms. Hutto presented the items from the six month report of medical care accounts collections for January 1, 2020 through June 30, 2020, copies of which were provided to the Commission. These funds are collected through involuntary means from self-pay clients.

***PRESENTATION ON OVERVIEW OF SCDMH MEDICAL CARE***

Dr. Rogers gave a presentation on Medical Care Services at DMH. He expressed appreciation to Dr. Bellamy and her staff for their assistance, and to Ms. Algie Bryant and Ms. Irene Thornley for their help with creating the PowerPoint presentation (a copy of the presentation is filed with the minutes in the Office of the State Director). Below are highlights from the presentation.

- In 2007 the Centers for Medicare & Medicaid Services (CMS) and the Institute for Healthcare Improvement (IHI) developed the Triple Aim: improve patient care (quality of care), reduce healthcare costs (value), and improve population health.
- DMH applies a co-management model of health care delivery to its hospitalized patients; an integrated team approach that provides high quality medical and psychiatric care to patients.
- DIS delivers high quality health care services through treatment teams and core groups that includes every medical discipline. DIS contracts with locum agencies and contract providers to ensure an adequate number of physicians and nurse practitioners are in the facilities to provide the needed care to the patients.
- Medical support services are provided by pharmacy, infection control, diagnostic lab, nutrition & dietary services, and medical records. Licensed specialists are in each of those areas.
- Other services provided in the clinic settings at DIS include podiatry, cardiology, OBGYN, gastroenterology and ophthalmology.
- The oversight of health care facilities plays a critical role in quality of care and patient safety and DMH patients benefit from that oversight. The hospitals' Quality Care Review Board reviews cases and makes recommendations to improve quality of care; The Joint Commission periodically surveys Bryan and Harris Hospitals; and both hospitals engage in Peer Review by which health care professionals evaluate each other's performance to improve quality care and patient safety.
- Governance and accreditation ensures quality care and services are provided to patients in a safe manner. All DMH hospitals are licensed and accredited by applicable accreditation bodies.
- Key medical staff committees are staffed with both primary care and psychiatry members. Membership across those committees includes 31 medical staff members: 15 psychiatrists and 16 primary care providers of which 12 are physicians.
- In the fall of 2020 the Department will launch a Whole Care Pilot program with a focus on mental health center patients who have co-morbid and psychiatric illness. The patient referrals will be from G. Werber Bryan Psychiatric Hospital and are going to a mental health center in either Richland or Lexington County. There will be a record review, coordination of services (Federally Qualified Health Center (FQHC), PRISMA, or other providers), and initial examination and treatment for those patients without an identified care provider.
- Looking ahead: there will be an addition of a medical consultant to DIS, addition of consultant to the Integrated Medical Services Program, continued bedside primary care, continued clinic based specialty care, and an integration project between DIS and Community Health Services.

The Commissioners each expressed appreciation to Dr. Rogers for his work and for the comprehensive overview of the medical care services system.

**ANNOUNCEMENTS**

There were no announcements.

**OTHER BUSINESS/PUBLIC COMMENTS**

There were no public comments.

**ADJOURNMENT**

*At 12:37 p.m., on a motion by Dr. Evans, seconded by Ms. Haynes, the Commission adjourned the Business Meeting and entered into Executive Session to receive legal advice concerning potential litigation and the 6-month report of litigation. Upon convening in open session at 12:50 p.m., it was noted that only information was received; no votes or actions were taken.*

**ATTENDANCE**

**Commission Members**


L. Gregory Pearce, Jr. Chair (Commission members present virtually via Zoom)  
Dr. Louise Haynes, Vice Chair  
Dr. Alison Evans  
Robert Hiott

**Visitors/Staff**

|                    |                                   |                                   |                                   |
|--------------------|-----------------------------------|-----------------------------------|-----------------------------------|
| Dr. Robert Bank    | <u>present virtually via Zoom</u> | <u>present virtually via Zoom</u> | <u>present virtually via Zoom</u> |
| Mark Binkley       | Jennifer Alleyne                  | Dr. Lawrence Kerr                 | Tamara Smith                      |
| Doug Glover        | Robert Breen                      | Tracy LaPointe                    | Beverly Smith                     |
| Kelly Gothard      | Pat Bresnan                       | Bill Lindsay                      | Brett Williams                    |
| Elizabeth Hutto    | Leigh Ann Chmura                  | Sarah Main                        |                                   |
| Michele Murff      | Matthew Dorman                    | Dr. Balbir Minhas                 |                                   |
| Valarie Perkins    | Melanie Ferretti                  | Dr. Shalini Mittal                |                                   |
| Dr. Kenneth Rogers | Beth Franco                       | Robert Morgan                     |                                   |
| Dr. Kimberly Rudd  | Melanie Gambrell                  | Jocelyn Piccone                   |                                   |
| Noelle Wriston     | Patricia Handley                  | Lynelle Reavis                    |                                   |
|                    | Kevin Hoyle                       | Janie Simpson                     |                                   |

**APPROVALS**

  
L. Gregory Pearce, Jr.  
Chair

  
Kim Ballentine  
Recording Secretary