

South Carolina's Systems of Care

Jessica Barnes, MS

Program Director
SCDMH Office of Suicide Prevention

A Look at Our State

- ▶ In 2020, 868 South Carolinians died by suicide
 - ▶ Every 22 minutes a South Carolinian is treated for Suicidal Ideation in the Emergency Department
- ▶ For people between the ages of 10-24 and 25-24 it is the 3rd leading cause of death
 - ▶ People between 15-19 have the highest rates of suicidal ideations and attempts in the Emergency Department
- ▶ EMS Self Harm Call Volume
 - ▶ Increased by 74% (2020-2022)
 - ▶ Increased by 12% (2021-2022)

Impact

- ▶ For each suicide death, **135** people are exposed
 - ▶ For 2020, this was **6.2 million people**
- ▶ For those who are exposed to a suicide death, **6** people experience a *major* life disruption
 - ▶ There are **over 275,000** loss survivors a year
- ▶ There is a suicide every **11.5 minutes**
 - ▶ There are more than 6 new loss survivors every 11.5 minutes as well

There is Hope

- ▶ People are reaching out!
- ▶ 22,383 call to Lifeline from Jan-August 2022.
- ▶ In 2021, SCDMH Mobile Crisis:
 - ▶ In FY '22 23,280 total calls with **over 7,000** being crisis calls.
- ▶ 2,340 have participated in the Interactive Screening Program



988 Crisis Care Continuum

- ▶ Allows individuals experiencing a mental health crisis to be supported by those trained in mental health.
- ▶ More than a number you call. Involves an entire system of care from:
 - ▶ Someone to answer the phone;
 - ▶ Someone to respond;
 - ▶ A safe place for the person to go.

Be the lifeline.



988 Funding in South Carolina

- ▶ SAMHSA 988 Cooperative Agreement Grant
 - ▶ Awarded on April 15th
 - ▶ Awarded \$1,390,817 over two years
 - ▶ To enhance workforce and improve instate response
 - ▶ To increase state infrastructure to meet the needs of those in a mental health/suicide crisis
 - ▶ Funding will be provided to both SC Lifeline call centers
 - ▶ Amount Awarded was based on the total Lifeline call volume in each state
 - ▶ It did not include data from other crisis point lines that would be anticipated to be routed through 988 after implementation, such as 911, Mobile Crisis, or other state crisis lines
- ▶ 1.3 million was given to the SCDMH 988 Call center as one time funds from the State Legislature

Crisis Continuum: Who Do You Call?

- ▶ ~~1-800-273-TALK National Suicide Hotline~~ → **988 Suicide & Crisis Lifeline**
- ▶ **988 Call Centers in South Carolina**
 - ▶ Mental Health America of Greenville County is the primary call center answering calls for the whole state.
 - ▶ SCDMH is developing a second call center located in Charleston, SC expected to be running in 2023.
- ▶ There are national backup call centers that will answer calls not able to be answered in SC.



When would you Call 988?

- ▶ A person who is experiencing a suicidal crisis.
 - ▶ These make up 27% of the total calls.
- ▶ Any emotional distress which includes, but is not limited to:
 - ▶ Substance Use
 - ▶ Relationships
 - ▶ Domestic Violence
 - ▶ Abuse
 - ▶ Mental Health and Mental Illness concerns
- ▶ Someone who is worried about a loved one who is experiencing a Mental Health Crisis.



What to Expect When from 988 When You Call, Text, or Chat

- ▶ When you call you will hear a prompt to:
 - ▶ Press 2 if you speak Spanish
 - ▶ Press 1 if you are a Veteran
 - ▶ Press 3 for LGBTQ+ under the age of 25
- ▶ Calls will then be routed to the closest call center to the *area code* of the caller.
- ▶ The person answering the call, text, or chat will:
 - ▶ Listen
 - ▶ Assess for homicide & suicide
 - ▶ Collaborate on ways to cope or navigate emotions and/or situation
 - ▶ Connect to resources: mobile crisis and other community resources
 - ▶ Collaborate on a safety plan
 - ▶ Offer Follow-Up services

Crisis Continuum: Where Do You Go?

Crisis Stabilization Units (CSU)

- ▶ Wide range of short term services short of psychiatric hospitalization; may identify additional treatment needs.
- ▶ Provides a “warm” handoff to follow-up care (outpatient MHC, peer support services, or more intensive services such as hospitalization).
- ▶ Designed to divert people to short-term psychiatric services, freeing up inpatient and Emergency Room beds to those who need them.
- ▶ SCDMH has a CSU located in Charleston, SC.
 - ▶ There are plans to add 7 additional CSUs across SC modeled after the Charleston, SC location.
- ▶ Not everyone in a MH crisis will need a CSU. Some people can be stabilized at a Crisis Receiving Unit (CRU), which will be located at each CSU.
 - ▶ CRUs operate with the same staff but on a lower level of care model.

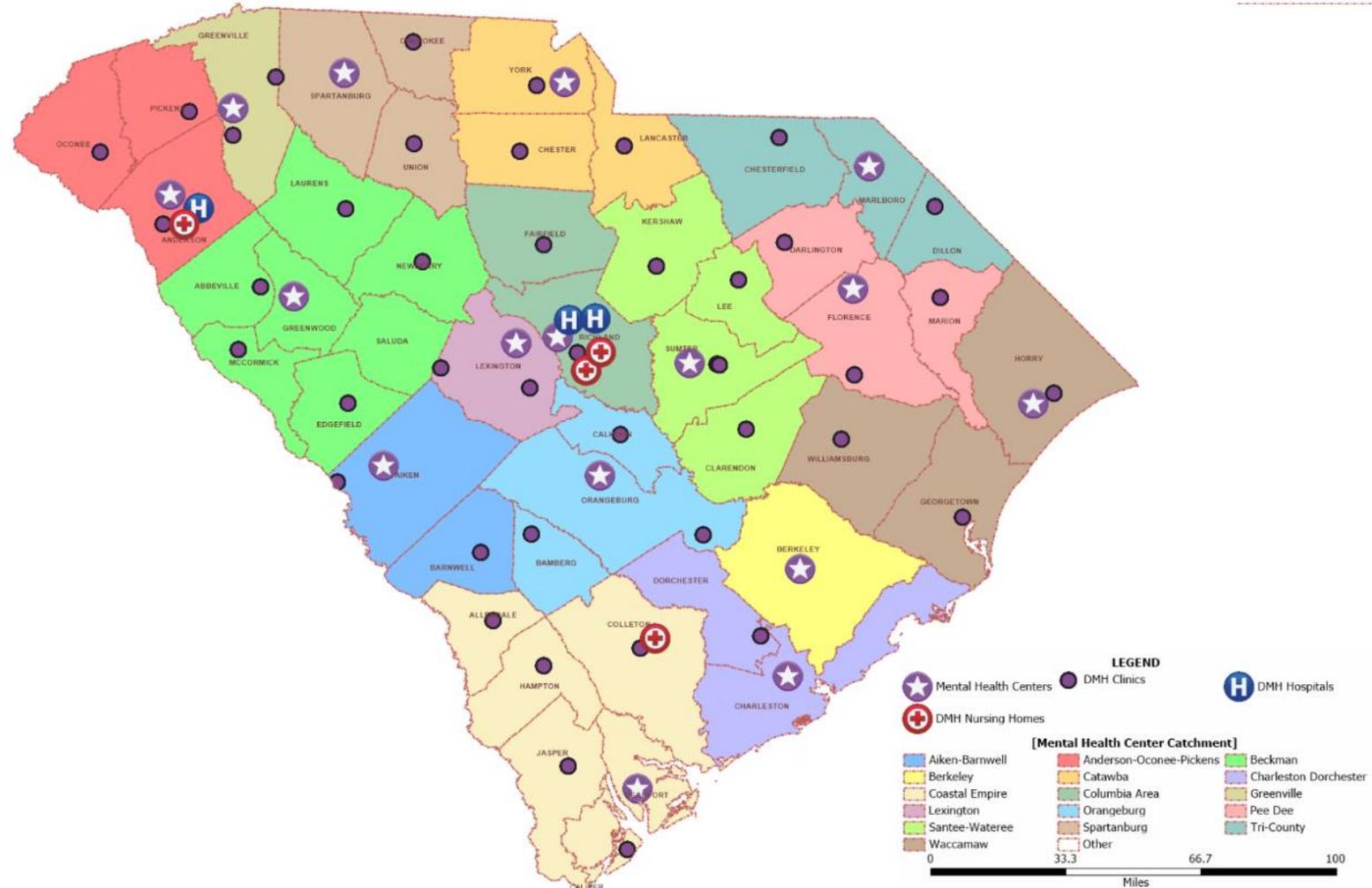
Crisis Continuum: Who Responds?

Mobile Crisis

- ❖ Mobile Crisis is program created through a contract with South Carolina Department of Mental Health (SCDMH) and South Carolina Department of Health and Human Services (SCDHHS).
- ❖ Purpose: To enhance the crisis services array to include statewide community crisis on-site emergency psychiatric screening and assessment
 - ❖ Provide services 24/7/365 within 60 minutes of contact with the mobile crisis team to meet the mental health needs of residents of SC
 - ❖ Available statewide since mid-2019.
- ❖ Goals: To provide access and link clients to appropriate levels of care, reduce hospitalizations, and reduce ED visits
 - ❖ Build partnerships with local law enforcement, hospitals, judges, community providers, and other mental health providers.

SCDMH Regional Map

- ❖ 18 Mobile Crisis Teams across the State
 - ❖ One for each MHC; Dorchester County has an additional team during business hours.
 - ❖ One Deaf Services Team.
- ❖ Internal DMH Call Center to answer hotline
- ❖ Co-respond with Law Enforcement in teams of two.
 - ❖ Minimum one Masters clinician, second responder may be BA or a peer.



How are Mobile Crisis services provided?

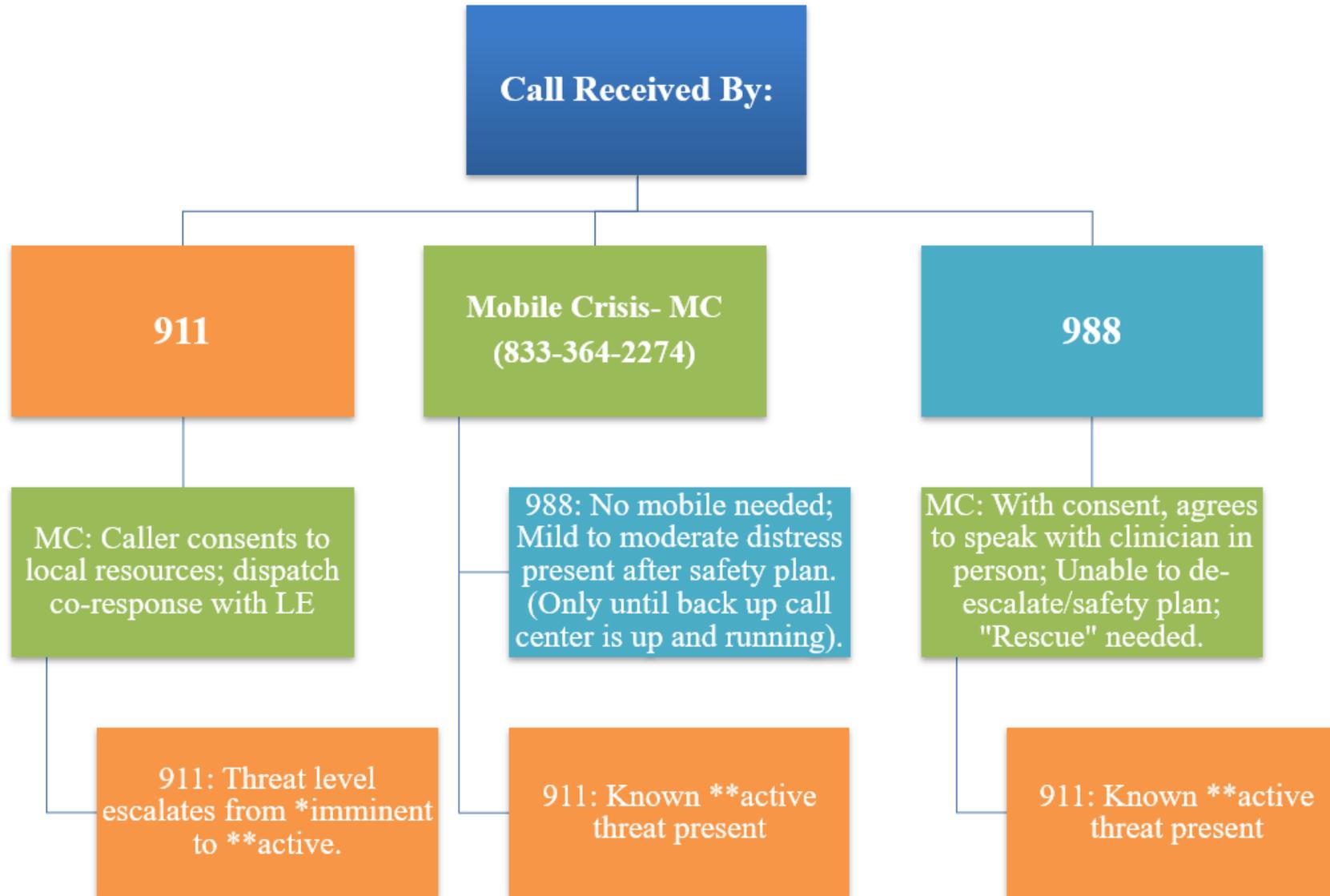
- ❖ Clinical screenings for **adults and children**:
 - ❖ In person at the location of the crisis
 - ❖ In person at a CMHC clinic
 - ❖ Via Telephone Assessment
 - ❖ Via Telehealth Assessment (service varies by location, and appropriateness)
- ❖ Referrals to connect individuals with the most appropriate level of care in the least restrictive environment, for example:
 - ❖ Development of a safety plan with family for person to follow up with provider in the morning
 - ❖ Facilitate direct transfer to inpatient hospital if necessary, diverting the Emergency Department
 - ❖ Emergency Department as a last resort when no bed is available or medical clearance is needed

How is Mobile Crisis Contacted?

- ❖ ANYONE CAN MAKE THE CALL- Self-referral, Law Enforcement, Family, Friend, Community Provider...
- ❖ 988 MAY transfer to Mobile Crisis, but not always. IF caller wants a team to respond, calling Mobile Crisis directly would be best.

MOBILE CRISIS HOTLINE:

(833) 364-2274



*Imminent Threat: Threat to self/others probable in 24 hours if no intervention

**Active Threat: Threat to self/others is occurring now; actively attempting to harm self/others OR already acted on threats

***Rescue: Further assessment

Mobile Crisis Expansion SAMHSA Cooperative Agreement for Innovative Community Crisis Response

- ▶ Four-year Grant (September 2022-September 2026)
 - ▶ Awarded \$3 Million (\$750,000 per grant year)
- ▶ Funding provided to hire and train:
 - ▶ 12 Peer Support Staff
 - ▶ 8 PTE (2 per Center)
 - ▶ 4 FTE (1 per Center)
 - ▶ Peer Support Training
 - ▶ Provide iPads to 1-2 LE agencies in each of the 10 counties
- ▶ Counties Participating:
 - ▶ Aiken, Anderson, Chesterfield, and all of Beckman Mental Health Center catchment area

Questions?

Jessica.barnes@scdmh.org

803-898-7406