

SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH

State Director John H. Magill

PEE DEE MENTAL HEALTH CENTER

Executive Director Stuart J. Shields

Fall 2011

DMH
OPERATES A
NETWORK OF
SEVENTEEN
COMMUNITY
MENTAL HEALTH
CENTERS,
42 CLINICS,
FOUR
HOSPITALS,
THREE
VETERANS'
NURSING
HOMES, AND
ONE
COMMUNITY
NURSING HOME.

**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 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. But 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'. This legislation made South Carolina the second state in the nation (after Virginia) to provide funds for the care and treatment of people with mental illnesses.

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. From 1828 through 2011, South Carolina state-run hospitals and nursing homes treated over 947,000 patients and provided over 148,500,000 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 discovery 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.

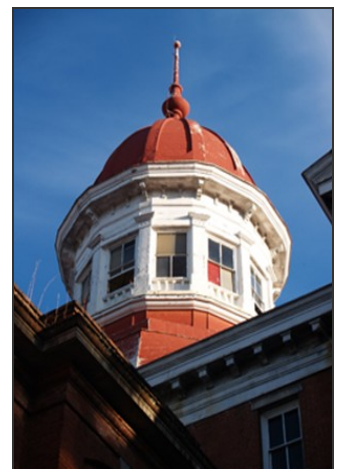
The South Carolina Department of Mental Health (DMH) was founded in 1964. In 1967, the first mental healthcare complex in the South, the Columbia Area Mental Health Center, was built.

Today, DMH operates a network of 17 community men-

tal health centers and 42 clinics to serve every county in the state. The centers and clinics have served over 2,800,000 patients, providing over 38,000,000 clinical contacts.

DMH is one of the largest hospital and community-based systems of care in South Carolina. In 2011, DMH outpatient clinics treated about 100,000 citizens, including approximately 30,000 children and adolescents, and provided nearly 530,000 bed days at DMH hospitals and nursing homes.

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



Babcock Building Cupola



Pee Dee Mental Health Center

125 East Cheves Street
 Florence, SC 29506
 (843) 317-4089

Counties Served: Florence, Darlington, Marion

PEE DEE MENTAL HEALTH CENTER

The mission of the Pee Dee Mental Health Center (PDMHC) is to provide effective mental health services to the people of Darlington, Florence, and Marion counties who are experiencing emotional or psychiatric distress. Emphasis is directed to individuals with serious mental illness and families with emotionally disturbed children. The Center aims to promote a quality of life that enhances the mental health of the people of the Pee Dee area, and works cooperatively with other organizations and individuals to develop additional resources and services to carry out this mission.

The Darlington-Florence Mental Health Center, the predecessor of the Pee Dee Mental Health Center, began operations in August 1956, through the combined efforts of the Florence County Association, the Darlington County Association, and the Florence County Medical Society. In 1964, Marion County joined the center and the name was changed to the Pee Dee Mental Health Center. PDMHC consists of the Center’s main clinic, which has been located at 125 East Cheves Street in Florence since 2001, and satellite clinics operating in Hartsville, Lake City, and Marion.

Since 1965, PDMHC has provided approximately 2,650,000 outpatient contacts/services. These contacts/services help families remain safely intact, keep children in their homes and schools, and help adults function in the community as safe and productive citizens.

PDMHC is accredited by the Commission on Accreditation of Rehabilitation Facilities.

Originally from Columbus, Ohio, Stuart J. Shields is an Ohio State University “Buckeye” fan, who moved to South Carolina in November 1988 to take a position at the South Carolina State Hospital



Executive Director
 Stuart J. Shields, MSW, MHA

(Continued on page 7)

<i>Numbers at a Glance for Fiscal Year 2011</i>		
	<i>Pee Dee Mental Health Center</i>	<i>DMH Statewide</i>
<i>Adult Outpatients Served</i>	2,861	59,427
<i>Child Outpatients Served</i>	1,680	30,058
<i>Total Outpatients Served</i>	4,541	89,485
<i>Population</i>	238,628	4,625,364
<i>Clinical Contacts Provided</i>	91,686	1,175,482
<i>School-Based Schools</i>	32	397
<i>Children Served by School-Based Programs</i>	641	11,916
<i>Supported Community Living Environments</i>	220	3,395

SINCE 1965, PDMHC HAS PROVIDED APPROXIMATELY 2,650,000 SERVICES/ OUTPATIENT CONTACTS TO ADULTS, CHILDREN, AND FAMILIES WHO ARE IMPACTED BY MENTAL ILLNESS.

AMANDA H. COLEBURN, DR. PH, PDMHC BOARD MEMBER



PDMHC Board Member
Amanda H. Coleburn, Dr. PH

WE SHOULD NOT
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OR TWO
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RATHER, WE NEED
A COLLABORATIVE
EFFORT
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LARGE.

Dr. Coleburn, a professional nurse for 47 years and a nurse practitioner for 32 years, is employed by McLeod Regional Medical Center Florence in the Department of Occupational Medicine. Her mother, a nurse who did a tremendous amount of mental health work, and Linda M. Summer, Chief Psychiatric Social Worker and a founding member of PDMHC, were the primary influences in drawing her to the mental health field. Additionally, like most people, Dr. Coleburn has a relative diagnosed with mental illness, so providing care for those with mental illness was something she grew up doing.

Dr. Coleburn's involvement

with the residency program at McLeod Regional Medical Center led to a symbiotic relationship with PDMHC. Because PDMHC allowed residents to train at its facility, she felt obligated to give something back, so she couldn't say no when asked by Linda Summer to serve as a member of the Toward Local Care (TLC) Task Force. Since then, for more than 20 years, Dr. Coleburn has generously dedicated her time and energy serving on the PDMHC Board, five of those terms as Chair.

Dr. Coleburn is concerned that the limited financial support from the counties PDMHC serves may soon

lead to further reduction or elimination of services.

Dr. Coleburn sees a great need for more collaborative efforts between the community of the Pee Dee area and PDMHC. According to Dr. Coleburn, we should not depend on one or two resources; rather, we need a collaborative effort involving the community at large. Dr. Coleburn feels such collaborations will lead to better understanding by the community that mental illness is treatable and that those in recovery can lead productive lives. Dr. Coleburn said, "The community receives great benefits from the amazing work that takes place at PDMHC."

PHILIP C. BOWMAN, MD, PHD, PDMHC MEDICAL DIRECTOR



Medical Director
Philip C. Bowman, MD, PhD

Dr. Bowman received his doctorate in Psychology from the Virginia Commonwealth University in Richmond, VA and his MD from the Medical College of Virginia. After serving in the Army and operating a private practice, he began his career with DMH in 1992, as a psychiatrist at the Lake City Clinic. Shortly thereafter, he became the medical director of the Center, and later served as the Center's executive director. Dedicated to remaining on the cutting edge, he was instrumental in the development of the Dialectical Behavior Therapy Program and the Co-Occurring Disorders Program at PDMHC. After carefully considering the Center's

need for psychiatrists, he decided to return to the position of full-time medical director.

PDMHC is a valuable educational environment for a variety of schools. For example, for many years physician assistant students from the Medical University of South Carolina have rotated through PDMHC. Students rotate for a specific number of weeks throughout the year, as assigned, following different physicians to observe a variety of cases and methods. Dr. Bowman is supportive of this program and has found the students to be well-prepared and hard-working.

According to Dr. Bowman,

patients in the McLeod Regional Medical Center emergency rooms (ER) frequently wait extended periods of time to receive diagnostic psychiatric consultations, treatment plans, or placement in psychiatric facilities. This results in over utilization of limited ER beds and resources. In collaboration with the Medical Center and PDMHC, to make the ER situation more manageable, steps are being taken to have Dr. Bowman join the Medical Center's consultation staff. Dr. Bowman stated that by working there an hour or two a day he hopes to help cut the problem down by half. Collaborations like this are necessary for future successful mental health care.

DENNIS SULLEN, DIRECTOR OF CRISIS AND EMERGENCY SERVICES

Dennis Sullen began his career in the late 1970's with the Alcohol and Drug Commission and received his Master's Degree from Francis Marion University in 1991. Since 1993, he has worked as director of the Lake City Clinic, director of the Community Support Program, and now director of Crisis and Emergency Services.

Last quarter, the on-call team handled over 40 after-hours, emergency crisis calls. Services can be provided over the phone or face-to-face. The answering service uses

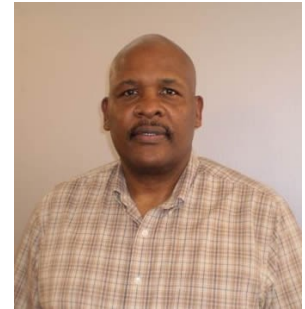
the "hold and connect" method, which brings response time down to zero minutes for return.

A client calls in, states his or her emergency, the answering service connects the caller to the on-call worker immediately. An on-call worker is always available. The emphasis is to restore clients to the highest possible functional state in the least restrictive environment, so that they can remain in the community with appropriate services.

Like Dr. Bowman, Sullen is

concerned about mental health patients waiting for prolonged periods in area ERs. To help alleviate this he has been working to gain access to more community residential care facility (CRCF) bed space. If an ER physician feels like a client needs additional monitoring, the CRCF may be able to provide an additional 72 hours of monitoring before release.

"Establishing crisis stabilization treatment in the community, with partnership from the hospitals, is my primary goal," said Sullen.



Director of Crisis and
Emergency Services
Dennis Sullen, MS

VICKIE REDDEN, DIRECTOR OF IPS AND THE ACT PROGRAM

Vickie Redden, originally from Kingstree, SC, is a graduate of Benedict College and Webster University, with an MA in Counseling. She has been an employee of PDMHC for 22 years. Redden realized at a young age that she has a talent for counseling and sharing advice with family and friends.

For 16 years, Redden has served as the Director of Individual Placement Services (IPS) and the last two years as the director of the Assertive Community Treatment (ACT) Program at PDMHC. Redden said, "The goal of the PDMHC IPS is to draw every advantage from the pool of talented clients that live in, and are a vital part of, the PDMHC catchment area. We are a team, and everyone on our team deserves the same chance at success and equal

opportunities without enduring judgment or stigma."

Redden works for integration in work and community settings so that individuals with mental illness are not separated, isolated, or affected by the stigma of others. Her desire is to ensure that individuals with disabilities enjoy equal opportunity in all aspects of employment within jobs in the community, including hiring, promotions, and reasonable accommodation.

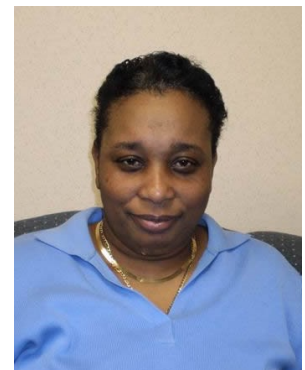
Redden explained that IPS helps some clients who have never previously been given the opportunity to work. With the help of a job coach, clients and employers learn to work together. Job coaches hold weekly follow-up meetings to ensure that clients and employers are satisfied with

working arrangements.

"Many youths between the ages of 15 to 22 years are underserved and 'falling through the cracks' of the system," said Redden. "Clients who age out of children's services frequently need additional help to earn high school diplomas and to keep them out of the judicial system. Assistance in these two areas fosters opportunities to become gainfully and meaningfully employed."

The program was recently recognized by the DMH Central Office for leading the state with the most employment placements. "I support Mr. Shield's goals for PDMHC, and will continue to work to see that those goals are met, doing whatever is needed to ensure the continued success of the Employment Program," said Redden.

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Director of Individual
Placement Services and
the ACT Program
Vickie Redden, MA



Director of Linda M. Summer Family Services Susan Carter, MS, LPC

FAMILY SERVICES PROVIDES QUALITY MENTAL HEALTH SERVICES TO CHILDREN UP TO AGE 18, AND THEIR FAMILIES.

SUSAN CARTER, DIRECTOR OF LINDA M. SUMMER FAMILY SERVICES

In 2000, Susan Carter began as an Intern with PDMHC Linda M. Summer Family Services. She's worked many positions in the Children, Adolescent & Family Services (CAF) department, and after completing the DMH Mentoring program she was promoted to director of Family and Children Services in 2008.

Family Services provides quality mental health services to children up to age 18 and their families. Services are extended to age 21 if the child is still in school. Services include:

- **Clinic-based services** - mental health status evaluations, clinical assessments, individual therapy, family therapy, group therapy, and multiple-family group therapy, all offered in the clinic setting.
- **School-based services** - individual, group, and family

therapy, case management services within the school environment, and psychiatric medical assessments at the mental health clinic. This allows the counselor, psychiatrist, teacher, and parent to collaborate as a team to optimize assistance to students experiencing difficulty functioning appropriately within the school setting.

- **Community outreach services** - essential in preventing out-of-home placements. Outreach counselors are accessible at all times to provide crisis intervention as needed. Service focuses on providing appropriate interventions to motivate behavioral changes necessary for the child and family to remain together and thus avoid out-of-home placement.
- **Head Start assessments**
- **Case management of out-of-home placements**

Carter is currently working to start PDMHC's school-based programs in Florence schools by collaborating with principals in Florence school districts One and Four. She is also working to increase CAF clients and their families' access to primary healthcare by developing a partnership with Hope Health, as part of the PDMHC Transformation Transfer Initiative grant.

Carter's vision for CAF services at PDMHC stresses accessibility, availability, and accountability. She is always looking for ways to improve services. Carter stated that the most enjoyable aspects of her job are helping clients and CAF team members develop skills to improve their effectiveness and meet challenging goals.

HOPE MOORE, SHELTER PLUS PROGRAM

Hope Moore, a mental health professional working in the Shelter Plus Program, has 6 years of experience at PDMHC. Helping others comes naturally to her, so coming to work at PDMHC was a logical choice.

At PDMHC she has worked with community residential treatment facilities and the Supervised Living Program. Her role with the Shelter Plus Program (S+C) involves the coordination of services for clients served. The program is designed to provide housing and supportive services on a long-term basis for homeless persons with disabilities, primarily those with serious mental illness, and their families who are living in places not intended for human

habitation (e.g. streets) or in emergency shelters.

S+C helps clients get back on their feet by assisting them in becoming gainfully employed, which allows clients to support themselves financially. Once clients obtain employment, they pay rent based on their income level. "Family inclusion and reestablishing ties, especially to the community, are a huge part of working with S+C clients, as most S+C clients are no longer connected with their families after years of burnout from symptoms of their illness, or other problems that led them into homelessness in the first place. At first, clients find it difficult to believe this program exists," said Moore.

Moore works with 11 housing units within the S+C program, an excellent resource that helps reduce the homeless population. "Working with this program has been quite an exciting challenge, but what I appreciate most is the impact it makes on the recovery of the clients we serve. I have been privileged to witness noticeable changes and quality of life improvements that exemplify the DMH mission to support the recovery of people with mental illness," she said. "I love my job because my duties change daily based on what clients need. My main goal is to see effective change and that is what I work toward every day."



Shelter Plus Program Mental Health Professional Hope Moore, MA

RANDY COLE CHIEF EXECUTIVE OFFICER OF CIRCLE PARK BEHAVIORAL HEALTH

Randy Cole, who has been working in the field of addictions since 1990, is an innovative director who thinks “outside of the box.” He brings a different level of energy to the table as well as extensive clinical and administrative experience, creativity, and problem solving skills.

The mission of Circle Park is to reduce the impact of alcohol, tobacco, and other drug abuse on the citizens of Florence County by providing high-quality and cost-effective behavioral health services. Circle Park provides a broad range of behavioral health services, with emphasis on educational programs, family therapy, and counseling related to alcohol, tobacco, and other drug abuse issues.

While addiction is preventable and treatable, it is not a simple problem with a simple

solution. It is a life-threatening disease that affects people of all ages, races, economic levels. Circle Park combines treatment, intervention, and prevention to deal not just with the symptoms of abuse and addiction, but also with their causes.

Circle Park operates two residential facilities: The Recovery Residence and The Chrysalis Center. The Recovery Residence is a treatment facility for men in early recovery from substance abuse who need safe, affordable housing while they work to reenter society. This facility improves outcomes for men who lack a supportive recovery environment, while reducing the strain on community resources of law enforcement, social service providers, and hospital emergency rooms. The Chrysalis Center is an extended-term residential treatment facility for chemically dependent women

and their children.

Cole first met PDMHC Director Shields in 1996 in Saluda, SC. He was excited to hear that Shields was appointed the new executive director of PDMHC, which provided another opportunity for them to continue a positive and collaborative relationship.

Circle Park receives many referrals from PDMHC and the local ERs. Mental illness and addiction often go together; it’s estimated that nearly half the people who seek help with addiction or mental health treatment have co-occurring disorders. Cole’s advice to others in the behavioral health industry is to establish strong, positive relationships with their local mental health center director and staff and utilize their resources to help strengthen community partnerships.



Chief Executive Officer
of Circle Park Behavioral
Health Services
Randy Cole

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PEE DEE MENTAL HEALTH CENTER (CONTINUED FROM PAGE 3) EXECUTIVE DIRECTOR STUART SHIELDS

as a social worker. Over the years, he’s held a variety of positions with DMH. 2010 was an excellent year for Shields; he earned his second Master’s Degree and became the executive director of PDMHC.

His vision for PDMHC is to make the Center more of a learning environment, nurture a positive climate, increase employee morale, and

reduce the stigma historically attached to mental illness. Mental health is an integral part of the healthcare system; those being treated for mental illness deserve the same attention and consideration as those suffering with diabetes or any other medical illness.

“In this economic environment, I’m doing all I can to ensure clients are receiving quality health care. I’m try-

ing my best to remove barriers faced by staff to allow them to progress and make connections with clients,” Shields said. “The staff at PDMHC are very dedicated to what they do, they do; not see their work as just a job, they care about the clients, treat them like family, and go above and beyond to get the job done.”

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TO SUPPORT THE RECOVERY OF
PEOPLE WITH MENTAL ILLNESSES.

**SC DEPARTMENT OF
MENTAL HEALTH**

2414 Bull Street
Columbia, South Carolina 29201

Phone: (803) 898 - 8581

WWW.SCDMH.ORG

Pee Dee Mental Health Center

125 East Cheves Street
Florence, SC 29506
(843) 317-4089

Darlington County Clinic

900 South Fourth Street
Hartsville, SC 29550
(843) 332-4141

Lake City Clinic

675 N. Matthews Road
Lake City, SC 29560
(843) 394-7600

Marion Clinic

1100 S. Main St.
Marion, SC 29571
(843) 431-1100

RECOVERY SPOTLIGHT – BY JOANN H.

Early in my life, because of circumstances beyond my control, I began to experience mental problems. Beginning when I was six years old, after the death of my father I became withdrawn and depressed. I was also distraught in my thinking, I believed in unreal and unnatural things.

While in college at the age of 21, I suffered a major nervous breakdown, where I dropped out of school; after many years of sitting idle at home my mother brought me to Pee

Dee Mental Health Center.

My first Doctor was Dr. Kiefer, who started me on medication and aftercare counseling. I stayed on the right path by taking my medication and attending regular groups for therapy.

With the help of God and all kinds of counseling I have recovered from depression. I have worked for the City of Lake City for almost 18 years. I'm doing well in my work.

I'm also a sophomore at Coker College and doing well in my studies.

I have learned that if I believe in myself and apply myself I can achieve anything, reach any goal, and do it with confidence.

My strengths are honesty with myself, integrity, and self-preservation. Pee Dee Mental Health Center has done a lot for me in giving me back my living skills, and helping me believe in myself.

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