CALL TO ORDER

The December 1, 2011, meeting of the South Carolina Mental Health Commission was called to order at 10:15 a.m., by Alison Y. Evans, PsyD, Chair, at the Lexington County Mental Health Center, 301 Palmetto Park Blvd., Lexington, SC. Dr. Evans express appreciation to the center for the presentation this morning and for all the courtesies extended to the Commission during its visit.

INTRODUCTION OF GUESTS

Karl Boston, Administrator of Lexington County Mental Health Center, delivered the invocation.

APPROVAL OF MINUTES

There were no guests acknowledged at this time.

MONTHLY/QUARTERLY INFORMATIONAL REPORTS

On a motion by Buck Terry, seconded by Joan Moore, the Commission approved the minutes of the November 3, 2011, business meeting. All voted in favor; motion carried.

Mr. Magill presented those items listed under the Monthly/Quarterly Informational Reports section.

DEPARTMENTAL OVERVIEW/UPDATE

Mr. Binkley said that there was nothing of significance to call to the attention of the Commission in the reports this month. He said that on the Patient Protection Report containing State Law Enforcement Division (SLED) reports, of the 28 cases of alleged abuse that are pending, nine are being investigated by SLED, 15 have been referred to the Long-Term Care Ombudsman, and four cases were referred to local law enforcement.

Mr. Magill presented those items listed under Departmental Overview & Update.
Mr. Magill said that Dave Schaefer will be attending the Commission meetings as an assist to Mr. Binkley.

Mr. Binkley said that one item to be highlighted is on the first page of the report under Medicaid Reimbursement. As discussed last month, the Medicaid reimbursement is falling below projections; however, it has since been confirmed that this is more than likely due to identified problems between DMH’s billing system and the claims system at the Department of Health & Human Services (HHS). HHS made some changes to their automated claims system and, in so doing, inadvertently prevented DMH claims from getting through. Some of the agency’s bills have now gone through to HHS. The Department is in the process of trying to resolve this with HHS as this has affected the agency’s cash flow. The Department is confident this will be resolved sometime this month. Because of the back up in the bills that could not be processed electronically, it could be two months before accurate numbers can be obtained concerning Medicaid revenue.

Mr. Binkley said the other figures are within projection. Expenditures and revenues are where they should be for the first third of the year. Mr. Binkley said that Geoff Mason and Dave Schaefer have been visiting each of the centers in order to review the budget and compare the numbers they have against the agency’s numbers. Mr. Mason feels that the agency will now be providing numbers to the centers that are reliable and fairly accurate. Mr. Magill said that the centers have been very complimentary of what Mr. Schaefer and Mr. Mason have been doing.

Mr. Binkley said that all indications are that Hughes Development is on track to submit their plans to the City of Columbia by January, which was their previous intention. If this timeline holds, the final approval will be before City Council at the end of April 2012. If all goes well and as planned, development will begin shortly after the City Council gives approval. Mr. Binkley said it appears that the only major issue outstanding is creation of a tax incremental financing (TIF) district to provide money for infrastructure improvements that Hughes wants the City to provide as part
of the overall development agreement. City Council has indicated they may be willing to modify the current TIF to address the objections by the County and the School District.

Mr. Magill said that he asked certain members of the Quality Management Advisory Committee (QMAC) to review operations in the Inpatient system. Dr. Bank said that on May 20, 2011, a team of staff was appointed to review issues at the Division of Inpatient Services. Dr. Bank was the lead on the committee. Other members included Rochelle Caton, Client Advocacy; Ann Marie Dwyer, Risk Management; Zina Hampton, Human Resources; Sandy Hyre, Evaluation, Training & Research (ETR); Geoff Mason, Deputy Director of Community Mental Health Services; and Everard Rutledge, PhD, Member, SC Mental Health Commission.

Dr. Bank said that all inpatient facilities were reviewed, except nursing homes. Emphasis was placed on the Columbia facilities. The completed report was sent to the Commission and was included in the agenda packet.

Detail of the recommendations that came from the review is in the full report. Summarized, they are as follows:

1) Continue to refine the adverse incident reporting system as it relates to patient assaults;
2) The Division of Inpatient Services (DIS) should adopt a system for monitoring PRN medication rates and the rates of refusal of medications for all of the inpatient facilities. DIS Performance Improvement should review the data and use it as part of their ongoing performance improvement process; and,
3) DIS should automate the Key Control Process so that accountability is clear. Key cards should be on an automated software program rather than paper records. Supervisors should have passes to access this program.

Dr. Bank said that Harris Hospital has a good system for tracking PRN medications,
and DIS will try to implement this system in the Columbia facilities.

Dr. Rutledge reviewed the incident reporting process and found it more than adequate. The Commission was urged to contact Dr. Bank if they have questions on any part of the report. Ms. Moore felt the report was very well done and very easy to understand.

Ms. Bellamy highlighted several areas of the Inpatient Facilities Governing Body Meeting of October 11. These highlighted areas are included under the following headings:

- Accreditation and Regulatory Surveys
- Recruitment and Retention
- Scope of Services
- Performance Data/Core Measures

**Accreditation and Regulatory Surveys**

1. C.M. Tucker has had no surveys since the last Governing Body meeting.
2. Bryan Hospital Adult Psych underwent an unannounced Joint Commission survey on June 23 & 24. A one-day follow up survey occurred on August 4. The follow up survey on August 4 was done on behalf of CMS and was the result of the hospital receiving a Condition Level Deficiency during the June survey period. The deficiency was related to the standard “leaders create and maintain a culture of safety and quality throughout the hospital”, particularly in the area of managing disruptive behavior on the part of staff. The deficiency was cleared by the surveyor. The Surveyor was impressed by revisions to the Disruptive Behavior/Code of Conduct policy that the facility has in place.
3. Morris Village is beginning work on undergoing Joint Commission accreditation. Currently, the facility is accredited by the Commission on the Accreditation of Rehabilitation Facilities (CARF). The hospital is exploring
all opportunities and is trying to ensure we are receiving credit for all services that are provided at Morris Village.

**Recruitment and Retention**

1. Dr. Purcell and Dr. Kimball have announced their retirement plans for January 2012 and November 2011, respectively, at Harris Hospital. Active discussions are occurring with locum tenens groups that have contracts with DMH.
2. At C.M. Tucker, the Activity Therapy Department had participated in a Volunteer Recruitment Day at Benedict College. Eighty three students signed up to complete service house with Tucker Center. Three Benedict College students are in intern rotation in Stone and Roddey Pavilions.

**Plan for Services/Scope of Services**

1. On September 17, Veterans Victory House was presented the Patriotic Service Award from the South Carolina Society of the Order of the Founders and Patriots of America, in recognition of exceptional services rendered to the veterans.
2. Effective 10/31/11, Morris Village opened six co-occurring beds. These beds are designated for individuals experiencing severe and persistent mental illness coupled with psychoactive substance dependence.

**Performance Data/Core Measures**

**C.M. Tucker**

For the period April to August 2011, newly acquired pressure ulcer rate at Tucker was below the five percent trigger.

On patient satisfaction surveys, over 80 percent of residents and their family members
were either “exceptionally satisfied” or “satisfied” with the care received at Tucker.

Harris Hospital

There were 14 employee injuries reported for this reporting period as compared to 19 the previous quarter. Patient-related injuries accounted for 71 percent of the overall total, compared to 68 percent the previous quarter.

There was one significant patient injury for the quarter ending June 2011.

Columbia-area Hospitals

The total number of patient injuries requiring treatment beyond first aid was 62 for the period September 2010 to August 2011. This is below the trigger for each hospital.

The total number of nursing staff injuries for the period was 113, of which 85 (75 percent) were due to patient/staff altercations.

Patient-to-patient altercations for the period are below the performance trigger, with the exception of Bryan Adult and Forensics. Bryan Forensics had a slight increase and Bryan Adult a slight decrease.

Patient-to-staff altercations for the period are below the performance trigger, with the exception of Bryan Forensics, which had an upward trend.

Finally, Ms. Bellamy said that a new policy was reviewed at the October 11 meeting concerning **Disruptive Behavior/Employee Code of Conduct**.

*On a motion by Buck Terry, seconded by Joan Moore, the Commission approved the minutes of the Inpatient Facilities Governing Body Meeting of October 11, 2011. All voted in favor; motion carried.*
Mr. Magill reported on the following:

1. Within the next two weeks, the second meeting of the Upstate Coalition will be held at Harris Hospital. This group discusses issues concerning emergency services. Mr. Magill and Dr. Bank will attend.

2. The State Medicaid Agency (HHS) decided to further its past financial support of the telepsychiatry program with an additional $750,000. The Duke Endowment was pleased to hear this as it now allows them more flexibility in funding. There will be a meeting at state office with all entities to cement the relationship and formalize the adoption of the budget plan, which includes the funding from HHS. The Governor’s office was also invited to this meeting.

3. There is a new Medical Director at Santee Wateree Mental Health Center. Mr. Magill is hopeful that the Medical Director will make a positive impact in this catchment area.

4. Yesterday, Rep. Murrell Smith toured the Sexual Predator Program (SVP). The Department feels that he is very supportive of its efforts to try to get this program fully funded. Mr. Magill also mentioned that staffers from Senate Finance will be touring the SVP buildings at Crafts Farrow. They are interested in seeing the northeast facilities for which the Department requested additional funding.

5. Bill Lindsey of NAMI said the NAMI Report came out on November 10. It noted that South Carolina has lost more money percentage-wise than any other state. NAMI went to work immediately to raise awareness of the report. As a result, there was extensive media coverage. Also, the Governor said that more funding needs to be appropriated for Mental Health. Mr. Lindsey mentioned that NAMI has pre-filed legislation to enhance communication between clinicians and families. This legislation would make it easier for a family member to be involved in a person’s treatment.

6. Mr. Magill said that several members of the General Assembly have commented that the Community Forums were very well done and have produced results.
7. The Profile process is about halfway complete. Mr. Magill said this has not been an easy task; however, like the Community Forums, should produce good results in the community.

8. The annual Lawyers and Judges Seminar will be held at the Medical University on Friday, December 2. This is the 28th year that this seminar has been held. Mr. Magill said this is a good opportunity for attorneys to learn about mental illness and addictions. Monique Lee of our Legal office will accompany Mr. Magill and be a part of his presentation. Also presenting is Dr. Trey Causey.

NOTICE/AGENDA

A notice and agenda for the meeting were sent out to all individuals and news media who requested information, in accordance with state law.

ADJOURNMENT

At 11:10 a.m., on a motion by Rod Rutledge, seconded by Buck Terry, the Commission entered Executive Session to receive legal advice concerning a contractual matter. Upon reconvening in open session at 12:00 p.m., it was noted that no votes or action were taken; only information was received. The business meeting was formally adjourned at 12:00 p.m.

ATTENDANCE

Commission Members
Alison Y. Evans, PsyD, Chair
Joan Moore, Vice Chair
Jane B. Jones
J. Buxton Terry
Everard Rutledge, PhD

Staff/Guests
John H. Magill
Versie Bellamy
Shanna Amerson
Mark Binkley
Robert Bank, MD
Rick Acton
Geoff Mason
Dave Schaefer

APPROVALS

Alison Y. Evans, PsyD, Chair
Connie Mancari, Recording Secretary