

**S.C. MENTAL HEALTH COMMISSION
S.C. Department of Mental Health**

**Tri-County Mental Health Center
1035 Cheraw Street
Bennettsville, SC 29512**

**February 7, 2014
Center Presentation**

Attendance:

Commission Members

Alison Y. Evans, Psy.D., Chair
Jane B. Jones
Everard O. Rutledge, PhD
Sharon L. Wilson

Joan Moore, Vice Chair
James Buxton Terry
Beverly Cardwell

Staff/Guests:

John H. Magill
Michael Rooney

Emily Freeman
Michael Trulock

Crystal McLendon
Mark Binkley

Amy Kulo
Kathy Cornish

The South Carolina Mental Health Commission met at Tri County Mental Health Center, 1035 Cheraw Street, Bennettsville, SC, on Friday, February 7, 2014. Alison Y. Evans, PsyD, Chair, opened the meeting at 9:00 a.m., and turned the presentation over to Mr. Michael Rooney, Executive Director.

Mr. Rooney thanked the Commission for coming to Tri County and introduced the first presenter, Christian Barnes-Young, the Project Coordinator for the Integrated Healthcare grant. Mr. Barnes-Young said this is a Substance Abuse and Mental Health Services Administration (SAMHSA) grant and is the only one of its kind in South Carolina. It has been recognized as a program of regional significance from SAMHSA. Mr. Barnes-Young said the Tri County catchment area is a “hot” spot for this type of program. The grant was awarded in 2010 and it runs through September 1, 2014, and is for the development and implementation of integrated primary and behavioral healthcare services.

Mr. Barnes-Young said that mental health conditions impact physical health, and physical health conditions impact mental health. Integrated care helps reduce the stigma of mental illness. He said that Care Coordinators take referrals from Mental Health Professionals and perform an assessment. They then describe to the client the benefit of integrated care. On site labs are available and results are received in a few days. The Care Coordinators assist with diagnosing what the client needs and referring them to the appropriate level of care as necessary.

Of approximately 477 clients served through the grant to date, some of the achievements are:

23.5 percent had an improvement in blood pressure;
46.7 percent had an improvement in BMI;
46.9 percent had an improvement in waist circumference;
42.1 percent had an improvement in LDL cholesterol; and
20.3 percent had an overall improvement in their health.

Mr. Barnes-Young said the grant is trying to eliminate barriers to being seen at Tri County. Health screenings and required labs are offered at no cost to the client.

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Effective partnerships have been developed with Chesterfield General Hospital (the primary care provider), Northeastern Rural Health Network, and University of South Carolina. The Northeastern Rural Health Network is a collaborative group of professionals dedicated to improving the health of local residents. Some of the challenges of the program are recruitment of skilled professionals, maintaining primary care coverage, gaining buy-in from staff and stakeholders, and addressing the needs of indigent clients.

Sustainability of the grant is essential and an increase in participation can be obtained with automatic referrals to the program. Mr. Barnes-Young would like to include children and adolescents in the program as there is a need for this population. He would also like to expand the program to other centers.

Amy Kulo, Children's Services, said that in 2008 Tri County Mental Health Center had four School-based Counselors. The center dropped to one counselor, and now it is back to four School-based Counselors. She has worked with the children for so quite some time they are now coming to her directly for assistance. Teachers in the schools are also referring children to her. School-based services have been very successful in the schools. The schools are also very willing to pay part of the salary of the Counselors.

Mr. Rooney also mentioned the recent tragic incident that occurred in the Chesterfield County clinic. He expressed his appreciation for the quick thinking actions of the staff at the clinic, as well as for the support the Center received from the Department's Central Office and from the Waccamaw Center, which sent a team to Chesterfield to assist the staff in the aftermath.

The center presentation concluded at 10:05 a.m.

Alison Y. Evans, Psy., D., Chair

Connie Mancari, Recording Secretary