

**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
STATE DIRECTOR JOHN H. MAGILL**

**AIKEN-BARNWELL MENTAL HEALTH CENTER
EXECUTIVE DIRECTOR RICHARD L. ACTON**

Spring 2015

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



Babcock Building Cupola

DMH OPERATES A NETWORK OF SEVENTEEN COMMUNITY MENTAL HEALTH CENTERS, 42 CLINICS, FOUR HOSPITALS, THREE VETERANS' NURSING HOMES, AND ONE COMMUNITY 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. 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. Since the 1820's, South Carolina state-run hospitals and nursing homes have treated approximately one million patients and provided over 150 million 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 use 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. Since then, the Centers and clinics have served more than three million patients, and provided more than 42 million clinical contacts.

Today, DMH operates a network of 17 community mental health centers, 42 clinics, four hospitals, three veterans' nursing homes, and one community nursing home. DMH is one of the largest hospital and community-based systems of care in South Carolina.

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)	



AIKEN-BARNWELL MENTAL HEALTH CENTER

1135 Gregg Highway
Aiken, SC 29801
(803) 641-7700

AIKEN-BARNWELL MENTAL HEALTH CENTER

Operating a main Center and two satellite clinics, Aiken-Barnwell Mental Health Center (ABMHC) provides behavioral health services to families, adults, and children who are diagnosed with mental illness.

Intervention, prevention and recovery services may include: Assessment, Therapy, Care Coordination, Psychosocial Rehabilitation, Peer Support, and Community Collaboration.

Founded in 1965, ABMHC was one of the first community mental health centers in South Carolina. In 1963, the Federal Community Mental Health Act provided 50/50 grant money to develop community-based mental health centers. In 1965, Governor David Russell appointed the Aiken County Mental Health

Board, consisting of 12 members. Shortly thereafter, on July 1, 1965 Aiken County Mental Health center became operational.

The original staff consisted of three people: including a psychiatrist, a secretary, and a part-time psychiatric consultant. Dr. Elna Lombard served as the first center director, beginning in December 1965. In October 1970, the first board members were appointed to serve from Barnwell County. As a result, the center officially changed its name to Aiken-Barnwell Mental Health Center.

In 1979-80, federal grant money helped to establish the satellite office, Hartzog Center, in North Augusta.

ABMHC is committed to the belief that

“Prevention works, treatment is effective and people recover.” Recovery is defined as process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

In Fiscal Year 14, ABMHC provided more than 59,000 services to approximately 4,100 Aiken and Barnwell residents.

All DMH facilities are licensed or accredited; ABMHC is nationally accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF).

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AIKEN AND
BARNWELL
COUNTIES.



**ABMHC
BOARD OF
DIRECTORS**

- RACHEL RYAN,
CHAIR
- DR. ROSA ISHMAL,
VICE-CHAIR
- JAMES BAGGOT, JR.
- HARRY DOUGLAS
- DR. W GAINES
ENTREKIN
- MARION GARY
- MARY HEAD
- JANIE KEY
- CHERYL AZOURI-
LONG
- LISA TINDAL
- JOHN YOUNG

ABMHC BOARD OF DIRECTORS

The ABMHC Board of Directors plays an important role in Center operations. As advisors, their efforts, in concert with the Executive Director Richard Acton, Center staff, and patients, help ABMHC to provide a community-based system of care for people with mental illness. The primary responsibility of the center board is to ensure that quality care and treatment is provided by the center.

The ABMHC board ide-

ally consists of fifteen residents of Aiken and Barnwell counties selected by the Aiken and Barnwell County Legislative Delegation to serve as the voice of the community. Currently, the Board has four vacant seats.

Board Member Mary Head said, "I am excited to serve on the board because I see first-hand the dedication the Aiken-Barnwell staff has toward the mentally ill in our community!" Head would like to see the

Board more involved in community education and more involved with fundraising.

Serving on this board provides Marion Gary the opportunity to make a difference in the lives of citizens of Aiken and Barnwell counties. Gary's goal is to ensure citizens are aware of the services offered at ABMHC and for them to know the staff is available to address mental health concerns in a professional and caring manner.

RICHARD "RICK" L. ACTON, EXECUTIVE DIRECTOR

Rick Acton is the executive director at ABMHC and Lexington Mental Health Center. He has served as the executive director at ABMHC for the past seven years.

An Ohio native, Acton's educational background includes a bachelor's degree in Psychology from Wittenberg University and a master's degree in Social Work from Ohio State University.

Rick has more than 30

years' executive and operational experience in private/non-profit and public community-based family service and behavioral health. He has extensive knowledge and experience in the areas of Program Development & Implementation in Mental Health, Alcohol and Substance Abuse, Family Preservation Services, and Chronic Mental Illness- Needs/Treatment.

Acton's emphasis is on

focusing and developing people's strengths, especially staff clinicians and managers, who make the difference in patients' lives.



Richard "Rick" L. Acton
Executive Director

TAMARA L. SMITH, ASSISTANT DIRECTOR

ABMHC Assistant Director Tamara L. Smith, is a native of Aiken County. She grew up in North Augusta and attended North Augusta High School and the University of SC Aiken.

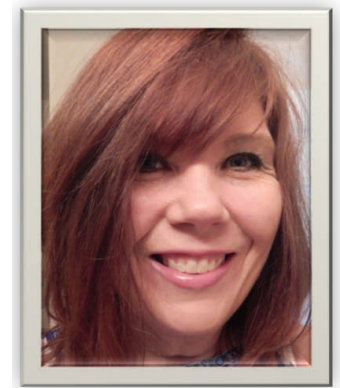
The health and general well-being of the citizens of Aiken and Barnwell counties is very important to her. Smith has worked at ABMHC for 23 years.

Smith feels her contribu-

tion to mental health is three-fold. She works closely with clinicians at the Center to implement evidenced-based and best practices to help patients move forward in their recovery. She provides leadership for the Center, assisting with policy-making, program development, strategic planning, performance improvement and administration to enhance overall quality of services provided in the system.

In addition, she works with community partners to strengthen relationships to promote a holistic approach to health-care and enhance the health of the overall community and advocate for those served.

Her vision for the Agency is to move towards a system of integrated care thus addressing patients' mental and physical health and helping them achieve recovery.



Tamara L. Smith
Assistant Director

BIANCA OTTERBEIN, PROGRAM COORDINATOR II CHILD, ADOLESCENT, AND FAMILY SERVICES

Bianca Otterbein launched into her professional career by serving as a case manager for Shoreline Behavioral Health Services, where she also worked as an Adolescent Counselor, Adolescent Coordinator, and Coordinator of Out-patient Services.

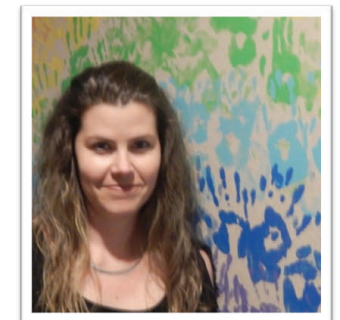
Otterbein has worked with children, adolescents, adults, couples, and families, although most of her experience has focused on working

with children and adolescents. She has trained extensively in the areas of Grief, Child Abuse, and Substance Abuse treatment. She utilizes many different theories of practice to fully meet patients where they are.

Otterbein's vision for the ABMHC CAF Department is to increase counselor competency with added training, utilize best-practices in clinical supervision, and increase community partnerships

and collaboration. Ultimately, she would like to see a school-based counselor stationed at every school in Aiken and Barnwell counties.

Otterbein is committed to creating a positive environment for both patients and staff by providing support and encouragement and building strong community relationships.



Bianca Otterbein
Program Coordinator II
Child, Adolescent, and
Family Services

GREGORY E. SMITH, CHIEF OF PSYCHIATRIC SERVICES



Gregory E. Smith
Chief of Psychiatric Services

In 2013, Greg Smith, MD, returned to the position of medical director for ABMHC. Additionally, he serves part-time as a DMH telepsychiatry psychiatrist. Seeing patients across the State in hospital emergency departments via computer and high definition video.

Dr. Smith's vision for Medical Services at ABMHC is to become the "premier provider of psychiatric medical and nursing services in Aiken and Barnwell counties, providing medical assessment, nursing services, injectable medications, education to patients and families about medication treatments, and links to the latest treatment technology for patients."

When asked what his contribution to Mental Health is, he shared,

"Through telepsychiatry I am personally able to make the world of medicine, and more specifically psychiatry and mental health, available to my patients in the form of a friendly face that they see in real time. I am, in that way, just one half of a partnership with someone who suffers from mental illness, and a strong partnership makes it possible for that person to enjoy a full and meaningful life."

Dr. Smith noted that ABMHC's most valuable resource is its people. "It's what attracted me to the Center 23 years ago when I first worked part time at the Garvin Center in Aiken, and it's what has kept me here. We have veterans in the field who have years of

experience and hundreds of thousands of patient contacts, and we have fresh new faces just out of training that have the knowledge and the energy to keep us moving forward in this era of rapid change in the field of Mental Health. Together, they make a very strong workforce that is on the side of patients and families and other stakeholders who benefit greatly from their contact with the mental health system and ABMHC."

Dr. Smith emphasized that stigma is still very much alive, but it should not stop someone from seeking help.

"The local mental health center is a good place to talk things over with emergency services staff, counselors, doctors and nurses who care about you, have something to offer you, and will partner with you as you figure out how to achieve your own brand of recovery."

Greg Smith, MD

SCHOOL-BASED SERVICES - AIKEN & BARNWELL COUNTIES

ABMHC is dedicated to the development of school-based mental health programs in Aiken and Barnwell counties.

Our goal is to identify and intervene at early points in children's emotional disturbances and assist parents, teachers, and counselors in developing comprehensive strategies for resolving

these disturbances.

In addition to individual and family therapy, school-based therapists also meet with teachers and other school personnel to coordinate services for students. Services are provided in the schools to increase accessibility and decrease stigma related to mental illness.

ABMHC provides school-based services at the following Barnwell County schools: Barnwell Primary, Barnwell Elementary, Kelly Edwards Elementary, Macedonia Elementary, Guinyard-Butler Middle, Blackville Hilda Junior High, Barnwell High, Barnwell Alternative School, Williston Elko High, and Blackville Hilda High.

ABMHC provides school-based services at the following Aiken County schools: North Aiken Elementary, Aiken Middle, Wagener-Salley High, Busbee-A.L. Corbett Elementary and Middle, Aiken High, South Aiken High, and Midland Valley High.

RACHEL RYAN, CEO OF AURORA PAVILION

For a community mental health center, partnerships in the community are invaluable, and some of the most critical are the relationships with inpatient facilities. At ABMHC, Aurora Pavilion (Aurora) is the closest facility and the one with the closest relationship. In no small part, that is through the work of Rachel Ryan, Aurora's CEO.

Aurora, located on the campus of Aiken Regional Medical Center, offers inpatient and partial hospitalization. Serving up to 60 individuals, Aurora houses a child and adolescent unit, a senior adult unit, and two adult units. The partnership

includes ABMHC attending treatment team meetings twice a week and a contract between ABMHC and Aurora for the treatment of indigent patients that gives Aurora the resources to take care of patients "in our own backyard." Patients are also brought from Aurora to ABMHC for designated exams needed for involuntary commitment.

A big advocate of prevention, Ryan sees the need to identify resources across the board to support patients and prevent relapse or even initial hospitalizations.

"If we are doing what's right for patients then I can sleep at night" is the bottom line. While all

the options she would ideally want are not available in the community, Ryan works to balance staff, money, and patients. For Aurora and ABMHC, this partnership is one way to make that balance work.

Ryan also currently serves as the chairman of the ABMHC Board. She is committed to providing support to the ABMHC staff, increasing knowledge of the Center in the community, and serving as an advocate for the Center with local and state representatives.

Ryan shared, "I am excited that ABMHC is working to improve the care for mentally ill patients in the local community."



Rachel Ryan,
CEO of Aurora Pavilion



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SC DEPARTMENT OF MENTAL HEALTH

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SATELLITE CLINICS:

HARTZOG CENTER

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NORTH AUGUSTA, SC 29841
(803) 278-0880

POLLY BEST CENTER

916 REYNOLDS ROAD
BARNWELL, SC 29812

WWW.AIKENBARNWELLMHC.COM

RECOVERY SPOTLIGHT – BY WILLIAM

When I was 11, I was diagnosed with attention deficit hyperactivity disorder (ADHD). I saw a psychiatrist until I was a teenager. During that time I was diagnosed with schizophrenia and bipolar disorder. I started getting into trouble, using drugs and was kicked out of high school permanently.

When I was 17, I was arrested for dealing drugs. I continued using drugs and drinking. I experienced multiple hospitalizations and participated in several treatment programs throughout this time. One such program was Building New Beginnings, an as-

sisted living program that Aiken Barnwell Mental Health Center had at the time. I continued drinking and using drugs, and ended up being kicked out of the apartments that I was living in, so I moved into my mom's house. I had a few outbursts with family, and I was arrested and placed in Bryan Psychiatric Hospital.

As a result of my most recent outburst, I was court-ordered to go to Psychosocial Rehabilitation Service (PRS) groups for a year. I attended PRS groups and then started going to Peer Support in September 2012. I have

been going to Peer Support ever since then.

I have been sober for two years and have been trying my best to do what is right. I've been taking my medicine as prescribed. I go to Double Trouble in Recovery (DTR), a 12 step group that is designed for individuals recovering from mental illness and addictions, four times a week.

I interact with my peers more than I did when I first started going to group therapy. I've started having more fun going to group therapy than I did when I first started. My relationship with my fam-

ily is better now that I'm trying. I have not had any anger outbursts in two years.

Peer Support has taught me to communicate with my peers better and to have fun instead of focusing on the negative things in life. Peer Support keeps me active during the day and focused on the right things. My self-esteem has improved and I don't think about myself in a negative way anymore. I plan on continuing to attend Peer Support and working on my recovery to become more sociable and maintain my stability in the community.