



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

**CATAWBA COMMUNITY MENTAL HEALTH CENTER
EXECUTIVE DIRECTOR PAUL J. CORNELLY**

January 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)	



CATAWBA COMMUNITY MENTAL HEALTH CENTER

Phone: (803) 328-9600

Counties Served: Chester, Lancaster, and York

The “York-Chester-Lancaster Mental Health Center” was established and began treating patients in 1961. The Clinic opened in a house in Rock Hill, SC with only two staff members, a psychiatrist (Dr. William G. Morehouse) and a receptionist. In 1974, two satellite offices were developed in Chester and Lancaster Counties, and the Center maintains fully staffed clinics in Chester and Lancaster today.

On November 6, 1977, the new \$417,000 facility on Dotson Street in Rock Hill

was dedicated. With the new building came a new name: The Catawba Center for Growth and Development. This clinic currently serves our adult clients in York County, and is one of the oldest mental health clinic buildings still in use in South Carolina.

In the mid 1990s, the official name of the Center became the Catawba Community Mental Health Center (CCMHC), and in 2000, the Center moved its York County Child, Adolescent and Family Services to a sepa-

rate facility just off Herlong Avenue across from the Piedmont Medical Center.

Today, CCMHC provides mental health services to people of all ages, offering counseling, psychiatric assessment, medication management, crisis intervention, and other services to those experiencing serious mental illness and significant emotional disorders.

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



CHRISTOPHER “CHRIS” BARTON—BOARD CHAIRMAN

Board Chair Chris Barton has served on the CCMHC board since 2006. His interest in Mental Health stems from a number of sources.

First, shortly after earning a Bachelor’s Degree with a Political Science/Psychology dual major, he worked with a Crisis Stabilization Unit at Rescue Crisis Services in Toledo, Ohio.

Second, his work as an attorney practicing criminal law puts him in contact on a regular basis with individuals who are facing criminal charges who, along with victims, often have mental health and/or substance abuse issues that

contribute to the dynamics that led to their charges or victimization. “Providing appropriate and effective mental health and substance abuse treatment reduces recidivism and is incredibly less expensive than incarceration,” said Barton.

Third, having served in the South Carolina Army National Guard since 1998, mobilized three times, and deployed overseas to a combat zone twice, he has witnessed firsthand the struggles many veterans have with mental health issues following deployment.

“Serving on the CCMHC board allows me to advocate

for individuals who suffer from mental illness along with advocating for their families. Providing quality mental health care at a local outpatient facility is the most effective method to reach people where they are. It is also the most cost effective form of treatment, versus emergency room visits and inpatient hospitalization.

Working to increase access to local mental health services and decreasing the stigma of mental illness continue to be my goals and guide my involvement with Catawba Community Mental Health Center,” said Barton.



Christopher “Chris” Barton,
Catawba Community Mental
Health Center Board Chairman

PAUL J. CORNELY, PHD, MPH—EXECUTIVE DIRECTOR



Paul J. Cornely, PhD, MPH,
Executive Director

“WE BELIEVE
EFFECTIVE
TREATMENT IS
THE
UNDERPINNING
TO RECOVERY
AND WE FOCUS
ON TREATING
THE WHOLE
PERSON.”

DR. CORNELY

Originally born in Philadelphia, PA, Dr. Cornely is the second oldest of 13 children. Perhaps those early years with his siblings helped develop his apparent ability to nurture compassionately and lead by example.

Dr. Cornely received his undergraduate degree from the University of Maryland then went to the University of Pittsburgh, where he received both his master’s and doctorate degrees from the graduate School of Public Health. Since then, he has worked and taught in a variety of locations. Most notably, he was a consultant to programs serving children and youth through the Department of Psychiatry at the University of Pittsburgh Medical Center, and went on to become its vice-president of community mental health programs.

Dr. Cornely said, “As I moved up in that very large Medical Center, I moved further and further from the front lines, from clients and their fami-

lies. I wanted to get back into community mental health and face some new challenges.” Accepting the position of CCMHC Executive Director in 2007 provided just such an opportunity. When he arrived, the Center had a daunting deficit, but it also had excellent clinicians and state of the art programs. With astute leadership, the dedication of CCMHC’s employees, and support from the DMH Central Office, CCMHC has put its finances back in order. Decisions at CCMHC are data driven, outcome oriented, and made with Senior Management input. According to Dr. Cornely, staff contributions have been invaluable.

Dr. Cornely expressed concern about a variety of issues: continued population growth with more clients coming in, the need for client housing with intensive staffing; e.g. Crisis Residential Programs, and of course the possible effects of inadequate funding. But he was quick to say, “While we may face chal-

lenges, we continue to focus on providing quality services to aid client recovery.”

Dr. Cornely works to develop linkages with other community agencies. For example, “We are constantly in touch with our school districts. We provide 30 school-based therapists in more than 50 schools in York, Lancaster, and Chester counties,” he said.

“At CCMHC we embrace the idea that recovery and resilience require ‘a safe, affordable place to live, a productive way to spend time, enough money for food and clothing, and a date on Saturday night (meaningful socialization).’ We all have these aspirations, but often they seem unreachable to individuals with a serious mental illness. We believe effective treatment is the underpinning to recovery and we focus on treating the whole person.”

STAN COLEMAN, MD—MEDICAL DIRECTOR



Stan Coleman, MD
Medical Director

Dr. Stan Coleman has worked at CCMHC for nine years, where he recently accepted the position of medical director. Now, on a typical day he spends 70% of his time seeing clients, 10% handling staffing duties, and 20% goes to administrative work.

Dr. Coleman was raised in rural Indiana, and obtained his master’s degree in English Literature from Ball State and Tulsa Universities. He went to Medical School at the University of North Carolina,

studied General Adult Psychiatry at the Medical University of South Carolina, and completed a child and adolescent fellowship at Duke University. Six months of his residency training was spent at CCMHC. “That experience made me realize I should specialize in Child and Adolescent Psychiatry,” he said.

“I strongly support our school-based program. The work we do with clients in the schools makes treatment much more effective. Information we

have about each client allows us to make very accurate determinations. We have a superb system, with most referrals coming from the schools. Our school-based therapists get to know the kids, parents, and teachers and develop a strong level of trust.”

As for the future, Dr. Coleman said, “I love what I’m doing; if I’m doing the exact same thing five years from now, I won’t have any regrets.”

CHILD, ADOLESCENTS, AND FAMILIES SERVICES BRENDA PARKER, MA—CAF DIRECTOR

CCMHC provides a variety of outpatient programs for children, adolescents, and their families (CAF). CAF staff in York, Lancaster, and Chester counties are qualified Mental Health Professionals (MHPs) with Master's degrees, and/or Licensures, and/or Certifications.

The school-based program embeds MHPs in local schools to provide an array of assessments and services to children and their families in the school environment. The Program provides treatment services such as individual, group, and family psychotherapy. The MHPs address a wide range of behavioral issues. MHPs work with teachers to develop behavioral interventions within the classroom and to reduce stigma associated with mental illness. CCMHC currently has 30 MHPs embedded in 58 schools.

Clinic-based services provide individual, group, and family psychotherapy, as well as Intensive Family counseling (IFC). IFC is focused on an individual's strengths and how each strength can empower the family as a whole. Each family member agrees to participate in family sessions and work toward understanding the needs of one another. CAF counseling services utilize the following Evidence-Based Treatments (EBT): Cognitive Behavioral Therapy, Trauma Focused - Cognitive Behavioral Therapy, Motivational Interviewing, Dialectical Behavioral Therapy, and Play Therapy.

The Young Children's Program provides services to children from two to five years of age by focusing on the child's behaviors and working with the parent/guardian to teach new techniques that address appropriate behaviors. Play Therapy is an EBT used with this population. The staff work with Head Start to develop intervention for negative child behaviors in the classroom. Staff also conduct training to enhance skill levels of teachers of this age group.

CCMHC plans to have staff trained and parents participating in Parent Child Interactive Therapy (PCIT) by the end of 2015. PCIT is an excellent program that was developed to provide "hands on teaching" for parents. Therapists observe parent-child interactions and verbally guide the parent, from an observation room. The parents build skills and enhance their knowledge, which can increase the child's positive behaviors.

CAF services include psychiatric medical assessments by a licensed child psychiatrist. Medication management is provided by the registered nurse and psychiatrist. Clinicians, a psychiatrist, and a nurse work together to ensure the medical needs of each child/adolescent are reviewed and monitored.

All referrals receive an individual assessment, a trauma assessment, and an individualized plan where goals with objectives are developed by the child/adolescent, parent and clinician. This plan is de-

veloped as a road map for success. The referral base includes families, schools, primary care physicians, the Department of Social Services, the Department of Juvenile Justice, Continuum of Care, Family Court, Hospitals, and other agencies.

The Director of CAF services, Brenda Parker, born in Decatur, Georgia, is married and has three adult children and six grandchildren. A CCMHC employee since 2003, Parker brings a strong work ethic, professionalism, and a concern for people to the workplace. She works with a 'strong arm but tender heart.' "At the Center we are many teams within a team. It also takes collaboration with many community agencies to meet the needs of clients; we have no 'turf' issues," said Parker.

Parker has been awarded Employee of the Year for CCMHC four times during her career, was nominated for the DMH Louise R. Hasselplug Award in 2011, and was named National Alliance on Mental Illness (NAMI)-SC Mental Health Professional of the Year for her dedication to the provision of child-centered, family focused and compassionate care for the children, adolescents and families of SC.

Parker and the CAF staff continue to seek new innovative evidenced-based treatments and attend educational classes and seminars to build skills which will allow them to make a difference in the lives of others.



Brenda Parker, MA,
Child, Adolescents, and Families
(CAF) Director

CCMHC
CURRENTLY HAS
30 MENTAL
HEALTH
PROFESSIONALS
EMBEDDED IN 58
SCHOOLS.

CAF
COUNSELING
SERVICES UTILIZE
EVIDENCE-BASED
TREATMENTS.

YORK ADULT SERVICES SHEENA WILLIS, M.A.—CLINIC DIRECTOR



Sheena Willis, M.A.,
York Adult Services Clinic Director

With 1,362 active clients, 18 therapists, two psychiatrists, three psychiatric nurses and an entitlement specialist, York Adult is the largest clinic within CCMHC.

York Adult services include regular assessment/diagnostic services, crisis services, outpatient therapy, medication management, community collaboration, and ongoing specialized group therapy for clients who have co-occurring issues with mental illness and substance abuse issues. Other ongoing groups at the York Adult Clinic are Trauma Focused-Cognitive Behavioral Group Therapy, Dialectical Behavioral Group Therapy, Grievance Group, and Depression Groups. York Adult has an ACT-Like program, TLC program, Dual Diagnosis program and other intensive

counseling programs.

The clinicians at York Adult use evidenced-based practices to assist clients in their recovery. Additional interventions include Motivational Interviewing, Cognitive Behavioral Therapy, Trauma Focused-Cognitive Behavioral Therapy and Eye Movement Desensitization and Reprocessing (EMDR).

The York Adult Clinic has a new Intake/Crisis program that provides assessment/triage and crisis intervention services. Clinical care coordination services are provided, which assist clients who have additional needs with housing, healthcare and community supports.

Sheena Willis serves as the Clinic Director for the York

Adult Clinic at CCMHC. She has been with CCMHC for over five years and started out as a clinician in the Dual Diagnosis Program.

Willis received her Bachelor's degree from Fayetteville State University, where she majored in Sociology and minored in Psychology. She received her Master's degree in Professional Mental Health Counseling from Webster University.

Willis is a designated examiner for York County, Pre-admission Screening and Resident Review (PASRR) Coordinator and Screening, Brief Intervention and Referral to Treatment (SBIRT) Coordinator. Sheena was also selected as Catawba's 2013 Employee of the Year and nominated as SCDMH's 2013 Outstanding Employee of the Year.



Carol Cochran, MHD,
Lancaster Clinic Director

CAROL COCHRAN, MHD—LANCASTER CLINIC DIRECTOR

The Lancaster Clinic currently serves approximately 600 adults and 150 children.

The Lancaster Clinic has six adult service clinicians, four CAF clinicians, a psychiatrist who sees adult clients, a child psychiatrist who sees CAF clients one day a week, a full-time psychiatric nurse, a part-time psychiatric nurse and three support staff.

Services provided at the Lancaster Clinic include assessments, crisis intervention, outpatient therapy, and medi-

cation management. The Lancaster Office currently offers a Dual Diagnosis group for clients with co-occurring mental illness and substance abuse issues, Dialectical Behavior group therapy, and a women's coping skills group.

Carol Cochran, the Lancaster Clinic Director, has been with CCMHC for 18 years. She started out as an Adult Services clinician, providing crisis intervention services and as the Liaison with Springs Memorial Hospital.

Cochran received her Bachelor's degree in Psychology and her Master's degree in Human Development and Learning from the University of North Carolina at Charlotte.

Cochran is the designated examiner for Lancaster County and participates in the after-hours crisis team for CCMHC.

"The staff at the Lancaster Clinic work together as a team to ensure that every client is supported in his or her recovery," said Cochran.

KIM SCONYERS, MRC—CHESTER CLINIC DIRECTOR

The Chester Clinic has approximately 350 active cases served by three adult therapists and three child, adolescent, and families therapists.

The Chester Clinic provides assessment/diagnostic services, crisis services, outpatient therapy, medication management, care coordination and weekly group therapy for clients with co-occurring diagnoses as well as stress management group therapy.

The Chester Clinic provides an array of evidenced-based practices such as Motivational Interviewing, Cognitive Behavioral Therapy, Trauma-Focused CBT, Exposure Therapy, and Solution-Focused Brief Therapy.

The clinic staff takes pride in maintaining close working relationships with community partners. It hosts a quarterly inter-agency staffing in an effort to improve service provision and increase favorable outcomes. Also, approximately 70% of the clinic staff live in Chester County. These ties in the community foster a high level of commitment to the recovery of clients.

The Clinic effectively utilizes clinic-to-clinic telepsychiatry services to minimize staff shortages.

Kim Sconyers began her career with CCMHC nine years ago as the Mental Health Professional in charge of the Psychosocial Rehabilitative Services Day Program.

Sconyers received her Bachelor's degree in Business Administration from Appalachian State University and a Master's degree in Rehabilitation Counseling from the University of South Carolina.

Today, Sconyers is the Director of the Chester clinic, CCMHC Housing Coordinator, and liaison to the Chester Regional Medical Center, the Community Residential Care Facility program, and the Toward Local Care program. She also provides crisis support services to Chester Regional Medical Center's Emergency Department and the Chester County Detention Center. It's easy to see why Sconyers was selected as Catawba's Employee of the Year for 2011.



Kim Sconyers, MRC,
Chester Clinic Director

JANET MARTINI, EXECUTIVE DIRECTOR, KEYSTONE SUBSTANCE ABUSE SERVICES (KEYSTONE)

CCMHC partners with a variety of agencies within the community. Dr. Cornely highly values the level of cooperation offered by Keystone Substance Abuse Services.

Executive Director of Keystone Substance Abuse Services Janet Martini has 21 years of experience in the Alcohol and Drug Field. She began working at Keystone in the School Intervention Program, moved into the Women's Treatment Program, left for a few years to work at the Lancaster Recovery Center, and returned to Keystone in 1998. Since

1999, she's been serving as Keystone's Executive Director.

Keystone recently became a part of the 301 system. Martini said, "We are in a quasi-governmental area where we can adapt and adjust; it's the best of both worlds because we are able to diversify funding to maintain and expand service delivery." The 301 system refers to the 33 agencies authorized by the South Carolina Act 301 of 1973, which required each county council to designate an authority to provide mandated services in cooperation with what is now known as the

South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS).

Martini said, "Keystone has a wonderful working relationship with CCMHC, especially since Dr. Cornely came here. Many of our clients have both substance abuse issues and mental illness, simultaneously. For a number of years Keystone has collaborated with the CCMHC Co-occurring Programs. We are each a valuable resource to the other. We couldn't do what we do without this symbiotic relationship. Together we promote our goals for "Health, Hope and Healing."



Janet Martini,
Executive Director,
Keystone Substance Abuse Services



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

CATAWBA COMMUNITY MENTAL HEALTH CENTER

Administration

North Lake II Building
448 Lakeshore Parkway, Suite 205—Rock Hill, SC 29730
(803) 328-9600

York Adult Services

166 Dotson Street—Rock Hill, SC 29732
(803) 327-2012

Catawba Family Center

448 Lakeshore Parkway, Suite 110—Rock Hill, SC 29730
(803) 329-3177

Chester Clinic

524 Doctors Court—Chester, SC 29706
(803) 581-8311

Lancaster Clinic

1906 Hwy. 521 Bypass South—Lancaster, SC 29720
(803) 285-7456

RECOVERY SPOTLIGHT BY—ROBERTA T.

I am a 64 year old married mother of two grown children, and I came to the Chester Clinic of Catawba Community Mental Health Center in May of 2003. I transferred there after being diagnosed with bipolar disorder in 2002. I have always struggled with depression, and after being treated by my family doctor with anti-depressants for five years, I came to Catawba.

I had many medication changes until we got the right mixture for leading a 'normal' life. My therapist, nurses, psychiatrist,

and the office staff at the Chester Clinic always treated me with dignity and respect. I was very manic for days and then I would have days of depression where I could do nothing at all. There were a lot of ups and downs but I thank God for the help that I have gotten from Catawba Mental Health.

I am also a recovering alcoholic, but I have been sober 22 years, since October, 1989!

I am also resilient. I received my GED and my LPN license, and I have

enjoyed working with the elderly in nursing care facilities as a nurse.

My therapist has been wonderful and patient and has a lot of empathy. She challenged me to think of other ways to deal with stress and she has been a big help in my day to day activities.

I have learned to cope with daily stressors and have not been in the hospital since 2003. I have learned when to act and react to the best of my ability, and I have learned different tools to live a

good and healthy life. I would advise others to hang in there and have faith that Catawba Community Mental Health Center will put them on the path to recovery. Mental illness is not something to be ashamed of, it is a disease.

I like to read, watch TV, and visit my daughters and grandchildren. To be with my family is the biggest thing. They understand that I have a disease, and they love me for who I am; a loving wife, mother, and grandmother.