

SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH

State Director John H. Magill

**DIVISION OF INPATIENT SERVICES
MORRIS VILLAGE ALCOHOL AND DRUG
ADDICTION TREATMENT CENTER**

Director George McConnell

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.

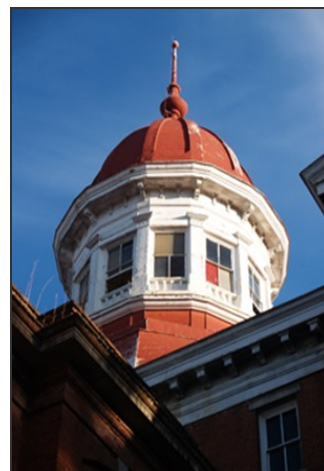
The 1950's saw the discovery of phenothiazines, "miracle drugs" that controlled many severe symptoms of mental illness, making it possible to "unlock" wards. These drugs enabled many patients to function in society and work towards recovery, reducing the need for prolonged hospitalization. Government 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. The centers and clinics have served over 2,800,000 patients, providing over

38,000,000 clinical contacts.

Today, DMH operates a network of 17 community mental health centers, 42 clinics, 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. In FY11, DMH outpatient clinics provided 1,175,482 clinical contacts and DMH hospitals and nursing homes provided nearly 530,000 bed days. Last year, DMH treated nearly 100,000 citizens, including approximately 30,000 children and adolescents.

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



Babcock Building Cupola



MORRIS VILLAGE ALCOHOL AND DRUG ADDICTION TREATMENT CENTER

610 Faison Drive
Columbia, SC 29203
(803) 935-7100

MORRIS VILLAGE ALCOHOL AND DRUG ADDICTION TREATMENT CENTER

The Morris Village Alcohol & Drug Addiction Treatment Center (MV) is the inpatient addiction treatment facility of DMH. The mission of MV is to provide effective treatment of chemical dependence through comprehensive evaluation, crisis stabilization, safe detoxification, and state-of-the-art treatment services.

MV has helped approximately 44,300 South Carolina residents since opening its doors in October 1975. The facility was designed based on the Therapeutic Community Model, which emphasizes the therapeutic power of groups. 14 cottages surround centrally located community functions such as the barber shop, library, and canteen.

Services include medical care, group therapy, activity therapy, family education and therapy, preparation for Alcoholics Anonymous (AA) and Narcotics Anonymous (NA), relapse prevention planning, and case management.

A typical day for patients includes community meetings, addiction education, group therapy, recovery dynamics, AA Big Book study, activity therapy, and AA and NA meetings. Chaplains conduct non-denominational worship services on Sundays.

During fiscal year 2011, MV admitted 1,708 people and provided 40,710 bed days. The average length of stay was 24 days.

Admissions

The primary patient referral sources to MV include hospitals, the probate court system, and the local county alcohol and drug abuse centers. MV accepts three types of admissions: voluntary, judicial (by order of a probate court), and emergency (by examination and affidavit of a licensed physician).

To qualify for admission, an individual must be at least 18 years of age, a resident of South Carolina, meet diagnostic criteria for substance dependence as defined by the *Diagnostic and Statistical*

Manual of Mental Disorders, Fourth Edition, and be appropriate for admission according to the American Society of Addiction Medicine criteria. Special programs are available for women and for individuals with a dual diagnosis.

Accreditation

All DMH facilities are licensed and/or accredited. MV is a specialized hospital, licensed by the South Carolina Department of Health and Environmental Control, and is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) since 1992.

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George McConnell, Director

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GEORGE MCCONNELL, DIRECTOR

Dealing with substance abuse, alcoholism, or drug addiction is never easy. It's even more difficult when one is also struggling with mental health problems. However, MV presents a coordinated approach to deal with these often co-occurring illnesses. As Director George McConnell puts it, "Morris Village individualizes patient care, eliminates fear, and gets people who are often committed here against their will to realize they are in a good place."

McConnell, a Charlotte, NC, native, has been the director of MV for five years. His educational background includes a Sociology Degree from Belmont Abbey College and a master's degree in Divinity from Duke University. His past employment includes serving as director of Daymark Recovery Services-Union Center, director of Constituent's Services at the Department of Alcohol and other Drug Abuse Services, and at Keystone Substance Abuse Services in Rock Hill, SC, where he served 15 years as a counselor and treatment coordinator and later became

deputy director.

At MV, patients can relax and feel safe in their treatment as they are among others who often are experiencing the same feelings and fears. There is an emphasis on individualized treatment that meets patients' specific, unique needs. "I have a passion to make sure that we are not offering 'cookie cutter' treatment," said McConnell.

McConnell feels that one of the biggest challenges to successful treatment at MV is reconnecting people to the community. "If there is a gap between discharge and follow-up appointments with outpatient providers, much of our good work can be undone. It's a real challenge to make sure continuity of care is achieved."

McConnell is especially proud of two of MV's innovative programs, the Women's Treatment Program and the Co-occurring Program. "Morris Village has been doing gender-based treatment for longer than any other treatment facility I know of. Our Women's Program is an

amazing program tailored to the special needs of women; its success is evidenced by our waiting list, and we have a treatment approach with excellent outcomes."

The Co-occurring Program also continues to grow to meet the individualized needs of MV patients with co-occurring substance abuse disorders and mental illness. McConnell notes that trying to deal with two illnesses presents significant challenges. "We're looking at how to prepare patients to have a better quality of life and to reduce harm to themselves, to lessen their hospital visits, and to hopefully impact their penetration of the judicial system," he said.

McConnell continues to challenge both his staff and himself. "I'm still excited about coming to work and want to continue to motivate staff to do the best job possible during these tight budget years. It's crucial for us to deal with and eliminate patient fears and make people understand they can recover from these illnesses and addictions and turn their lives around."

DR. TREY CAUSEY, MEDICAL DIRECTOR

Trey Causey, M.D., a Georgia native, has been employed with MV as medical director since 2007. He graduated from Georgia Tech and the Mercer University School of Medicine, and completed his general psychiatric residency at the University of South Carolina and an addictions residency at the University of Colorado. Prior to coming to

MV, he was the interim medical director at the University of Colorado.

Dr. Causey likes to stay busy. In addition to his role as medical director, he has participated in the DMH Executive Leadership Training Program, works with medical students at USC, and is involved with research projects.

He also lectures Child, Adolescent, and Geriatric residents and is a staff member of the USC Professional Wellness Program.

When asked how he came to enter the field of addictions medicine, Causey recalls, "I always had an interest in the brain and the workings of the brain. I initially thought

DR. TREY CAUSEY, MEDICAL DIRECTOR (CONTINUED FROM PAGE 4)

about going into Medicine because of experiences with hospitals when I was younger and have always found addictions interesting. It is very rewarding when you see dramatic turnarounds after treatment in people who were formerly heavily addicted.”

MV uses a multi-disciplinary approach to drug addiction, alcoholism rehabilitation, and mental illness with its team of treatment professionals. These include licensed and certified counselors, psychiatrists, and nurse practitioners. They guide each resident through a thorough diagnostic process, individualized addiction treatment, and aftercare. “I think that being part of DMH, which as an integrated system combines psychiatric treatment and addiction treat-

ment, allows Morris Village to offer a unique treatment approach,” he said.

While Dr. Causey sees MV providing effective treatment, he would like to see additional staffing to lower the counselor to patient ratio and have enough psychiatrists so that every patient who is admitted can have a psychiatric evaluation.

Dr. Causey feels it is an exciting time to be working in the Addictions field. New tools and treatments have been shown to be effective in treating addictions. He would like to see MV provide additional services to other populations. “It’s tempting to think MV could become flexible enough to generate more revenue and provide services such as a pregnant women’s addictions

treatment program. A mother and baby program would be ideal. There are not a whole lot of states that have these programs, but those that do find them to be of great benefit.”

Dr. Causey said, “Addictions treatment does work and there is plenty of evidence that confirms this. It works when we provide good treatment and treat addiction like what it is, a chronic disease. It works when you treat it like it’s diabetes or hypertension. It doesn’t work if you think it’s like treating the flu. You need a continuum of services that work together and treat the problems that present at each level. It must be a holistic approach, and often you can’t expect instant one-time success.”



Dr. Trey Causey,
Medical Director

PAM WILSON, PROGRAM MANAGER OF REHABILITATION SERVICES

Pam Wilson, an employee of MV since 1990, is the Program Manager of Rehabilitation Services. Her past roles and responsibilities have included working in the Adolescent program as an addictions specialist and in the Women’s program, where she later became the program manager. A Bishopville native, Wilson graduated from the University of Georgia with a bachelor of Business Administration degree in Marketing and Management and from the University of South Carolina with an Education Specialist degree in Guidance and Counseling.

Wilson believes that one of

the strengths of MV is the integrated care that is a cornerstone of the treatment regime. “Our philosophy is to take a ‘no wrong door’ approach, where patients can be treated for both co-occurring problems,” said Wilson.

Wilson would like for MV to continue implementation of evidence-based best practices. She is a strong proponent of trauma assessment and trauma-focused Cognitive Behavioral Therapy.

She believes the Women’s Program at MV is the facility’s marquee program. According to the National Insti-

tute on Drug Abuse, women become addicted to drugs more quickly than men. To respond to this and other addiction issues specific to women, MV has set up more than 30 beds in this specialty unit.

Wilson encourages anyone who struggles with addiction and/or substance abuse to seek treatment.

Wilson says she is blessed to work at DMH and MV. “It’s the best place I have ever worked and I don’t want to work anywhere else. We work closely as a team here and the bottom line is we all want our patients to recover.”



Pam Wilson,
Program Manager of
Rehabilitation Services



Tammy Cleveland,
Nurse Program Manager

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TAMMY CLEVELAND, NURSE PROGRAM MANAGER

Nursing Program Manager Tammy Cleveland, a Dallas, Texas native has been employed at MV for five years. Her educational background includes graduation from Bishop College with a bachelor's degree in Biology, a Nursing degree from Baptist University, and an MBA from Amber University. She previously worked for three years at Bryan Psychiatric Hospital and at the SC Department of Health and Environmental Control as a home health unit manager.

The MV nursing team helps patients to find a light of hope when life for many has been so dark for so long. The team works diligently to find treatment that will be successful for patients and at enhancing staff's education in

Addictions by serving on community boards and task forces, and doing research.

Cleveland spends a large part of each day working directly on the units, and nothing surprises her. She has seen addiction up close outside of MV. "I had a friend that was on crack, and seeing what his mother went through, I couldn't understand why he just didn't go to a treatment center and get help. When I came to Morris Village, I learned about the brain, about recovery and about addiction. I got a lot of insight about what has to happen to recover."

Cleveland feels that substance abuse nurses must be compassionate and personalize treatment by getting to

know each patient. Cleveland encourages all MV staff to work to the best of their ability to meet the individualized needs of the patients.

In the next five years, Cleveland would like to see MV create a Senior Unit Program and additional revenue made available to increase employee salaries.

According to Cleveland, "A good day consists of being fully staffed, with everyone staying on top of their responsibilities. A bad day consists of not having enough staff coverage to ensure the safety needs of both the patients and employees. God has given all of us talents, not to just hold on to but to share with others."

LAWRENCE MCCLINTOCK, HUMAN SERVICE COORDINATOR I

Lawrence McClintock is a Dual Diagnosis Severe Co-Occurring Program counselor at MV. Born in Laurens, he is a graduate of both South Carolina State University, with a bachelor's degree in Sociology and Social Work, and of Clemson University with a master's in Community Counseling and Guidance. Previously, he worked with the Council on Aging and at the Columbia Area Mental Health Center.

Since he first started working with the MV Dual Diagnosis Program in 2006, acute dual diagnosis patients have been integrated into the main population, which poses

many challenges.

Once patients leave MV, regular participation in outpatient treatment needs to occur. Because substance abuse is a chronic, relapsing disorder, treatment may take months, years, or a lifetime. "The benefit of being a part of the DMH system is that occasionally patients need to be sent to Bryan Psychiatric Hospital because we need to stabilize them. Once they are redirected, we can usually still work with them. It can be a challenge for us to treat them when they first come in but it's very rewarding as you see them get better everyday," McClintock said.

McClintock has found MV to be generally very successful in finding safe, affordable housing placements throughout South Carolina. "There are certain counties that are a lot easier than others. The best area for resources and dealing with placements is the Greenville/Spartanburg area. Columbia, however, can be tough."

McClintock said, "I believe people can get well and recover. I believe in persistence, perseverance, and never giving up. That's what I tell patients. I've seen great things happen in life when people persevere in spite of difficult times."



Lawrence McClintock,
Human Service Coordinator I,
Dual Diagnosis Severe
Co-Occurring Program Counselor

KAITLIN BLANCO-SILVA, WOMEN'S PROGRAM COUNSELOR

Counselor Kaitlin Blanco-Silva has been employed with the MV Women's Program for more than a year. "College is when I became interested in women's issues and working with women. I volunteered at Safe Harbor Women's Shelter in Greenville." She went on to say, "I find women's struggles and what they have been through very inspirational. I'm so lucky to work with survivors. Women just really have it tough sometimes."

Silva, a Greenville native, received her master's degree from the University of South Carolina School of Social

Work and her undergraduate degree from Erskine College. She interned with the Lexington-Richland County Alcohol and Drug Addiction Commission's Recovery Professional Program, and later worked at the Piedmont Mental Health Center in the WRAPS Program.

Silva, who specializes in dual diagnosis and relapse prevention groups, said, "MV gives patients the tools to deal with things in a different way about their drug use, about their world, about things in the past and how to deal with the future." The impact of addiction is significant on women.

Statistics show women have a higher risk than men for certain serious medical consequences of alcohol use, including liver, brain and heart damage. MV provides a safe environment for women dealing with alcohol and/or substance abuse. "They come here with stuff on their chest. If they allow us, and if they are at that place, we really can start to change their mode of thinking and change their perspective," said Silva. She instills in her patients that experiences at MV are relatable to bigger experiences out in the world.



Kaitlin Blanco-Silva,
Women's Program Counselor

LOUISE HAYNES, MUSC/NIDA

A former director of MV, Florida native Louise Haynes now partners with MV in several research activities. She works for the Medical University of South Carolina (MUSC) as an assistant adjunct professor in the Department of Psychiatry and is the Community Treatment Program Representative liaison for all research projects with the National Institute of Drug Abuse (NIDA) Clinical Trials Network. She is a graduate of the University of Florida and San Jose State University-California and has a master's degree in Social Work.

Haynes has worked at the Charleston, SC, Veterans Administration Hospital for six years in both inpatient and outpatient psychiatry/addictions treatment units. "I really learned about substance abuse there" said Haynes. Under the leadership of Jerry

McCord, Director of the SC Commission of Alcohol and Drug Abuse, she served as a treatment consultant helping the local 301 system prepare for Medicaid contracts through diagnosing substance abuse, and psychiatric disorders and providing guideline contracts for Medicaid compliance. Later, she became the director of Women Services for the Agency.

Her involvement with DMH began as the director of MV, a position she held for six years. During this time, she began an affiliation with MUSC and the NIDA Clinical trials network by conducting research projects at the facility. Following reorganization in DMH, Haynes decided to work full time with MUSC and collaborate with MV.

MUSC's Department of Psychiatry has one of the most

robust research platforms of any university in the Southeast, and an ongoing contract with MV as a research site and as part of a national network of randomized clinical trials. There is a lot of interest in integrating substance abuse into healthcare as a whole rather than as a stand-alone, highly stigmatized disorder. "Making substance abuse have a stronger medical aspect is one of the strengths of Morris Village treatment programs. It's ahead of the curve, treating the medical problems that people have — the whole person not just their substance abuse," said Haynes.

In the clinical trials network, 200 community treatment programs across the country conduct research in Substance Abuse, with about 20 universities involved. Future participation will continue in this exciting field.



Louise Haynes,
MUSC/NIDA

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TO SUPPORT THE RECOVERY OF
PEOPLE WITH MENTAL ILLNESSES.

SC DEPARTMENT OF MENTAL HEALTH

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RECOVERY SPOTLIGHT – BY JACKIE M.

I came to Morris Village for treatment two times, first in 1991 and then later in 2001.

In 1991, my abuse of crack cocaine negatively affected my relationships and my job performance. At that time, I was unwilling to admit that I was addicted to cocaine. I was in denial, and, unfortunately, I valued my substance use more than my relationships or my job. I didn't do the things my counselors told me to do. I didn't save those valuable recovery tools that I was given then. I went right back out and used again. My life spiraled further out of control and things got much, much worse.

In 2001, I hit rock bottom. My parenting skills and my relationship with my children had deteriorated with the chronic drug use. I was in-

vestigated by the Department of Social Services. They took my youngest child into foster services. I was pregnant at the time and my unborn baby and I both tested positive on a drug test. I begged to be allowed to come back to Morris Village for treatment. This time I knew I needed to pay attention, be honest and learn everything I could to stay clean. I wanted the pain to stop and I wanted my children back. Thank God they let me back into Morris Village!

This time, I was honest and soaked in everything I could about how to stay clean and sober. The people at Morris Village believed in me. They LOVED me back to sanity. I was beaten down and they taught me how to stand back

up! They believed in me at a time when I could not believe in myself.

I did what I was told, and went consistently and often to 12 Step meetings. I chose a Sponsor. I stayed away from "old playmates and playgrounds." I learned how to make better decisions and deal with my feelings without using impairing substances. To be successful in recovery, I went to step-down outpatient treatment at LRADAC, the Behavioral Health Center of the Midlands, and was drug tested weekly. I had to organize my life and stick to my daily schedule.

I am so thankful. I got my children back. The employer I had in 1991 took me back and gave me another chance. People at my job respected

me. They began to recognize that I am trustworthy. The quality of my life is so much better. I'm happy and so grateful to the staff at Morris Village and my Higher Power. My life continues to be blessed. I met my wonderful husband, who is also in recovery. We have been married now for three years. I have restored relationships with my children.

I have learned, through it all, that I am a loving, caring person and a good parent, friend, and co-worker. I recognize that I have a choice today in how I live my life. I can deal with life's chaos without picking up a drug. I am truly blessed!