



One Year Update – Behavioral Health Taskforce May 6, 2016

The number of people and families in our state and nation affected by mental health conditions and substance use disorders is substantial and growing. We are reminded daily by media headlines about the addiction and suicide epidemics that have overtaken the country. More Americans are dying annually <u>each</u> from opioid overdoses and suicide than from automobile accidents. This is a phenomenon that our country has never experienced. The social, economic and human toll of behavioral health issues is unprecedented and, more than ever, we must collaborate and innovate to improve the health and well-being of the people of South Carolina.

Since 2013, the South Carolina Institute of Medicine & Public Health (IMPH) has served as the leading convener in our state around this important health challenge. The IMPH Behavioral Health Taskforce, comprised of over 60 public and private behavioral health providers, researchers and advocates, worked during 2014 to identify the most significant needs in the behavioral health services and support systems and to develop solutions to improve outcomes and control costs. The taskforce was chaired by Kester Freeman, executive director of IMPH, and guided by a 20-member steering committee.

The taskforce created a bold vision for behavioral health in South Carolina based on two focal points: the need for crisis stabilization services and a better, more accessible system of chronic care management. This vision depicts a future in which all residents of South Carolina will have equal access to quality behavioral health services regardless of their individual means or where they live in the state. The taskforce concluded that behavioral health care should be as accessible as care for physical illnesses, such as a heart attack or trauma.

In May of 2015, the twenty recommendations developed by the taskforce were published in the report <u>Hope for Tomorrow: The Collective Approach for Transforming South Carolina's Behavioral Health Systems</u>. Recommendations fell into six categories: access to clinical services, integrated care, housing, school-based services, services for justice-involved individuals and workforce. The release of the report garnered significant media attention, buy-in from partners and momentum among stakeholders invested in improving and expanding services.

To build upon that momentum, IMPH established the Behavioral Health Implementation Leadership Council (ILC). The role of the ILC is to:

- Keep continued, focused attention on the recommendations.
- Provide the vision for how the recommendations will be achieved.
- Minimize or eliminate barriers to implementation.
- Promote and track progress toward implementation and issue an annual report demonstrating progress to date.

The ILC has met quarterly during the past year and this fall, will be guiding IMPH in releasing a formal update on all twenty recommendations. The ILC has focused its conversations to date on expanding crisis intervention services around the state. This includes the development of crisis stabilization facilities, mobile crisis services and expanded outpatient hours. The ILC has also explored the need for a new licensure category for crisis stabilization centers.



Highlighted Action Areas

- Establishment of first-of-its-kind Implementation Leadership Council (ILC) to maintain focus and forward movement on transformation of South Carolina's behavioral health system.
- Prioritization of the need for expanded crisis stabilization services in South Carolina with five communities in various stages of planning crisis stabilization facilities.
- Increased <u>media coverage</u> of the behavioral health needs of people living in South Carolina.

Members of the Behavioral Health Implementation Leadership Council (ILC)

Mr. Kester Freeman, Jr., Executive Director, IMPH and ILC Chair

Dr. Alison Evans, Chair, South Carolina Mental Health Commission

Mr. Thornton Kirby, President and CEO, South Carolina Hospital Association

Dr. Pete Liggett, Deputy Director for Long Term Care and Behavioral Health,

South Carolina Department of Health and Human Services

Mr. John Magill, Director, South Carolina Department of Mental Health

Ms. Gloria Prevost, Executive Director, Protection and Advocacy for People with Disabilities, Inc.

Mr. Bryan Stirling, Director, South Carolina Department of Corrections

Mr. Bob Toomey, Director, South Carolina Department of Alcohol and Other Drug Abuse Services

Dr. Gerald Wilson, IMPH Board Member and Surgeon, Midlands Surgical Associates

While significant barriers continue to exist, considerable action is being taken by a number of partners to enhance a variety of services for South Carolina residents with behavioral health challenges. The progress report to be published in September will highlight the encouraging progress being made towards specific recommendations, such as the planning that several communities across the state have undertaken to provide enhanced behavioral health crisis response services. Through this collective action, we are making progress in achieving the vision established by the taskforce.

For more information or questions, please contact Maya Pack at maya@imph.org.

The mission of the South Carolina Institute of Medicine & Public Health (IMPH) is to collectively inform policy to improve health and health care. IMPH seeks to achieve this mission by convening academic, governmental, organizational and community-based stakeholders around issues important to the health and well-being of all South Carolinians. In conducting this work, IMPH takes a comprehensive approach to advancing health issues through data analysis and translation and collaborative engagement.