

# Coordinated Bird-Dogging

Carolinas Pandemic Preparedness Task Force Meeting

*February 28, 2022*

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# Pre-Existing Weaknesses



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Photo credit: <https://www.catanzaroinurance.com/home-insurance-101-what-happens-if-my-neighbors-tree-falls-on-my-yard/>

The COVID-19 pandemic magnified and exacerbated pre-existing weaknesses. Behavioral health and mental health challenges have increased to crisis levels. The best way to prepare for the next pandemic is through coordinated bird-dogging: Identify our weaknesses; prioritize our needs; coordinate our strategies; and fortify our systems.

# *Defining Bird-Dogging*

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*To engage in the  
relentless pursuit of  
an objective or goal*  
*[urbandictionary.com](http://urbandictionary.com)*



# Collaboration and Coordination



- Identify Problems
- Prioritize/Sequence Needs
- Strategize
- Resolve

# Bird-Dogging



- *Avoid getting stuck on identifying problems/sharing anecdotes*
- *Avoid prioritizing everything; that's like highlighting all of the words*
- *Avoid assuming that someone else is doing something*
- *Avoid getting comfortable; remember a pandemic is approaching*

# South Carolina's Progress

| <b>BARRIERS</b>   | <b>SOLUTIONS</b>   |
|---|--|
| <b>Suicide continues to rise as a leading cause of death among children and adolescents</b> | Coordinated and engaged response among agencies and organizations with facilitation through the Suicide Prevention Coalition and the Dept. of Mental Health's Office of Suicide Prevention; SCDMH's mobile crisis is active in all 46 states; Telehealth; School-based mental health; Student ID Suicide Prevention bill; Training and awareness for staff and volunteers through DMH/AFSP grant; Plans underway to launch 988 in July of 2022 |
| <b>Agencies and organizations can be silo-ed; Competing interests can stymie progress</b>   | To the extent possible, agencies need to coordinate priorities and strategies; Otherwise, one agency's ask contradicts another agency's ask and neither agency moves forward; We have engaged in interagency meetings to identify shared barriers and shared priorities  |

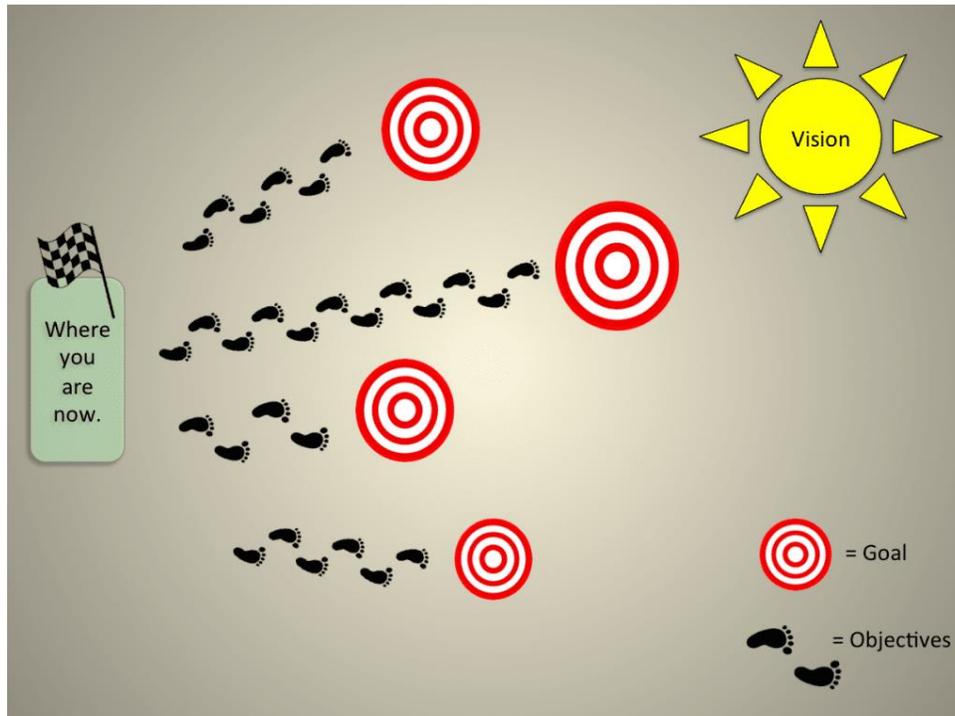
# South Carolina's Progress

| BARRIERS   | SOLUTIONS  |
|--|--|
| <b>Insufficient in-state Psychiatric Residential Treatment Facility Capacity for South Carolina children and adolescents</b>               | DHHS has announced a significant increase in the S.C. Medicaid rate for in-state PRTF providers effective April 1, 2022  |
| <b>Lack of sufficient Psychiatric Residential Treatment Facility capacity for seriously mentally ill, justice-involved youth</b>           | Discussions among agency leadership to create this capacity have resulted in this issue being in the forefront of state planning; DJJ's budget request for \$20 million to design, build and operate a state-operated PRTF for this population   |
| <b>Moratorium on Rehabilitative Behavioral Health Services (RBHS) services coupled with a need for intensive, community based services</b> | DHHS Director Kerr committed to reviewing the moratorium to develop a way to intentionally eliminate the moratorium with quality assurance and monitoring processes in place; Interagency work to increase service capacity including DHHS and DSS's work regarding the Family First Prevention Services Act (FFPSA) |

# South Carolina's Progress

| BARRIERS  | SOLUTIONS  |
|---|--|
| <b>Gap in placement array for step-down services; Need for High Intensity Residential Placement options for children and adolescents; Lack of sufficient treatment and placement for victims of human trafficking</b> | Discussions among agency leadership to create this capacity have resulted in this issue being in the forefront of state planning; Hopeful planning regarding DSS's work with Qualified Residential Treatment Providers (QRTP); Residential private-provider placement anticipated to open in Aiken |
| <b>Inability to recruit, train, develop, and maintain sufficient workforce</b>  | Agencies have announced plans for this work; Governor's office and General Assembly recognize these challenges, including the need to work with high schools, colleges and universities to create attractive careers for future employees  |

# What States Need | How to Achieve the Vision



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**VISION:** We need a robust array of placement and services on our behavioral health “shelves” (not just bread and milk) for the next pandemic, emergency or disaster.

**STARTING:** Where are you now? Are you still identifying problems?

**GOALS:** What are the sequenced priorities?

**OBJECTIVES:** What is your strategy for achieving the goals or resolving the barriers? Who is engaged bird-dogging? Who is engaged in the relentless pursuit of the objective or goal?



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<https://childadvocate.sc.gov/sites/default/files/Documents/Annual%20Report%202020-2021%20FINAL.pdf>

Check out our Resource Library at:  
<https://childadvocate.sc.gov/resource-library>

## Broad Vision for Reform

- Access and awareness of an array of services that allow children to safely remain in their homes and communities or in the least restrictive, most family-like setting based upon their needs
- Coordination of services and efforts for a system of care grounded in urgency, empathy and sustainability
- Continued collaboration with child welfare partners regarding communication, service coordination and planning strategies to improve the timeliness of court hearings and outcomes for children