

AGENCY NAME:	South Carolina Department of Alcohol and Other Drug Abuse Services		
AGENCY CODE:	J20	SECTION:	Section 37



Fiscal Year 2014-15 Accountability Report

SUBMISSION FORM

AGENCY MISSION	<p><i>"To ensure the availability and quality of a continuum of services related to substance abuse, thereby improving the health status, safety and quality of life of individuals, families and communities across South Carolina."</i></p>
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Please identify your agency's preferred contacts for this year's accountability report.

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY CONTACT:	Stephen Lee Dutton	803-896-1142	sldutton@daodas.sc.gov
SECONDARY CONTACT:	Sharon Peterson	803-896-1145	speterson@daodas.sc.gov

I have reviewed and approved the enclosed FY 2014-15 Accountability Report, which is complete and accurate to the extent of my knowledge.

AGENCY DIRECTOR (SIGN/DATE):	<div style="text-align: right; margin-top: 5px;">9/27/2015</div>
(TYPE/PRINT NAME):	Robert C. Toomey

BOARD/CMSN CHAIR (SIGN/DATE):	
(TYPE/PRINT NAME):	

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AGENCY’S DISCUSSION AND ANALYSIS

THE USE OF ALCOHOL, TOBACCO, AND OTHER DRUGS (ATODs) AFFECTS SOUTH CAROLINIANS OF ALL AGES AND FROM ALL WALKS OF LIFE. PROBLEMS RESULTING FROM THESE SUBSTANCES SURFACE IN OUR HOMES AND SCHOOLS, ON OUR ROADS AND HIGHWAYS, AND IN OUR WORKPLACES AND CRIMINAL JUSTICE SYSTEM. AS A RESULT, THE SOCIAL COST IN THE UNITED STATES IS \$467 BILLION AND TO SOUTH CAROLINIANS IN BOTH DIRECT AND INDIRECT COSTS IS APPROXIMATELY \$3.12 BILLION PER YEAR.

RECOGNIZING THE NEED FOR DIRECT SERVICES FOR THE GENERAL PUBLIC, AS WELL AS FOR SPECIFIC HIGH-RISK GROUPS, THE SOUTH CAROLINA DEPARTMENT OF ALCOHOL AND OTHER DRUG ABUSE SERVICES (DAODAS) PURCHASES A WIDE ARRAY OF PREVENTION, INTERVENTION, TREATMENT AND RECOVERY SERVICES THROUGH A COMMUNITY-BASED SYSTEM OF CARE. DAODAS SUBCONTRACTS WITH 33 COUNTY ALCOHOL AND DRUG ABUSE AUTHORITIES TO PROVIDE THE MAJORITY OF DIRECT SERVICES TO CITIZENS IN ALL 46 COUNTIES OF THE STATE. THE DEPARTMENT ALSO CONTRACTS WITH A RANGE OF PUBLIC AND PRIVATE SERVICE PROVIDERS TO ADDRESS SUBSTANCE ABUSE SERVICES THROUGHOUT SOUTH CAROLINA. SINCE THE COUNTY ALCOHOL AND DRUG ABUSE AUTHORITIES WERE CREATED IN 1973, THEY HAVE PROVIDED INTERVENTION AND TREATMENT SERVICES TO MORE THAN 2.5 MILLION SOUTH CAROLINIANS AND TOUCHED THE LIVES OF COUNTLESS INDIVIDUALS AND FAMILIES THROUGH THE MANY PREVENTION ACTIVITIES COORDINATED AND PROVIDED BY THIS SYSTEM.

DAODAS ESTIMATES THAT APPROXIMATELY 386,000 INDIVIDUALS IN SOUTH CAROLINA ARE SUFFERING FROM SUBSTANCE ABUSE PROBLEMS THAT REQUIRE IMMEDIATE INTERVENTION AND TREATMENT. WITH A PROBLEM OF THIS MAGNITUDE, THE DEPARTMENT MUST CONTINUE TO ENSURE THAT INDIVIDUALS AND FAMILIES ACCESS THE VITAL CORE SERVICES PURCHASED BY DAODAS THROUGH THE STATEWIDE SYSTEM OF COUNTY ALCOHOL AND DRUG ABUSE AUTHORITIES (I.E., THE LOCAL PROVIDER NETWORK), AS WELL AS OTHER PUBLIC AND PRIVATE CONTRACTORS. DURING FISCAL YEAR 2015, DAODAS AND ITS SERVICE NETWORK PROVIDED OVER 41,000 EPISODES OF CARE.

MISSION AND VALUES

THE DAODAS MISSION STATEMENT FOCUSES ON ACHIEVING POSITIVE HEALTH OUTCOMES AND INCREASING THE QUALITY OF LIFE OF SOUTH CAROLINIANS:

“TO ENSURE THE AVAILABILITY AND QUALITY OF A CONTINUUM OF SERVICES RELATED TO SUBSTANCE ABUSE, THEREBY IMPROVING THE HEALTH STATUS, SAFETY AND QUALITY OF LIFE OF INDIVIDUALS, FAMILIES AND COMMUNITIES ACROSS SOUTH CAROLINA.”

AT THE HEART OF THIS STATEMENT ARE THE AGENCY’S CORE VALUES OF: ACCOUNTABILITY; COLLABORATION; EFFECTIVENESS; INTEGRITY; LEADERSHIP; RESPECT; AND TRUST.

DAODAS STRATEGIC DIRECTION

CAPITALIZING ON MORE THAN 55 YEARS OF SUCCESS IN ENSURING ACCESS TO SUBSTANCE ABUSE SERVICES FOR THE CITIZENS OF SOUTH CAROLINA, AND THROUGHOUT FY15, THE DEPARTMENT CONTINUED TO PROVIDE THE NECESSARY LEADERSHIP TO RE-VISION THE STRATEGIC DIRECTION OF THE AGENCY, AS WELL AS THE DIRECTION OF THE SUBSTANCE ABUSE FIELD, WHICH INCLUDES THE IMPROVEMENT OF THE EFFECTIVENESS OF THE PUBLIC AND PRIVATE PROVIDER SYSTEM STRIVING FOR LONG-TERM CLIENT OUTCOMES AND RECOVERY. SYSTEM-WIDE, THE GOALS FOR 2015 WERE TO CONTINUE IMPLEMENTING A COORDINATED SYSTEM OF CARE, TO IMPLEMENT RESEARCH- AND SCIENCE-BASED PROTOCOLS THAT INCREASE CHANCES FOR RECOVERY, AND TO MOVE TOWARD A FORMULA BASED FEDERAL BLOCK GRANT FUNDING DECISION PROCESS, TO ENHANCE THE PERFORMANCE OF PROVIDERS, AND ULTIMATELY TO ACHIEVE IMPROVED HEALTH OUTCOMES FOR CLIENTS.

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THREE SPECIFIC AREAS OF FOCUS INCLUDED INCREASED CAPACITY OF SERVICE PROVIDERS TO SERVE THE STATE'S CITIZENS IN NEED OF SUBSTANCE ABUSE PREVENTION, INTERVENTION, TREATMENT AND RECOVERY SERVICES THEREBY IMPACTING ACCESS DISPARITIES, ENHANCING INDIVIDUAL, FAMILY AND COMMUNITY OUTCOMES, AND INCREASING COORDINATION EFFORTS; HEALTH CARE/BEHAVIORAL HEALTH INTEGRATION; AND FOCUSING ON THE AGENCY'S OVERARCHING GOAL OF ACHIEVING SUSTAINABLE RECOVERY FOR THE CLIENTS IT SERVES.

STRATEGIC GOALS

BEGINNING IN 2014 AND CONTINUING THROUGH FISCAL YEAR 2015, DEPARTMENTAL STAFF BEGAN A RIGOROUS PROCESS TO UPDATE ITS STRATEGIC PLAN TO TRANSFORM THE ORGANIZATION TO MEET THE CHALLENGES IN PLANNING, COORDINATING AND DELIVERING ADDICTION SERVICES. USING VARIOUS STRATEGIES, INCLUDING SWOT ANALYSES, STRATEGIC MAPPING AND IMPLEMENTATION SCIENCE, STAFF BEGAN THE PROCESS TO REFINE ITS STRATEGIC ALIGNMENT WHILE ALSO LEARNING EFFECTIVE WAYS TO BUILD CAPACITY TO IDENTIFY AND ACCOMPLISH THE MAJOR GOALS OF THE ORGANIZATION.

EMERGING FROM THESE ACTIVITIES ARE SIX STRATEGIC VISIONARY GOALS THAT WILL GUIDE THE AGENCY OVER THE NEXT SEVERAL YEARS. THE SIX STRATEGIC VISIONS INCLUDE: COLLABORATION TO MOVE TOWARD A MORE HOLISTIC SYSTEM OF CARE; INTEGRATION OF PHYSICAL AND BEHAVIORAL HEALTH CARE TO IMPROVE OUTCOMES OF CLIENTS, FAMILIES AND COMMUNITIES; A FOCUS ON CONTINUOUS QUALITY IMPROVEMENT TO CREATE BASIC QUALITY MEASURES AND BASELINE REQUIREMENTS; TO MAXIMIZE FUNDING DECISIONS AS TIED TO THE POSITIVE IMPACT ON CLIENT, FAMILY AND COMMUNITY OUTCOMES; TO CREATE AND OR EXPAND ACCESS TO A FULL SERVICE CONTINUUM; AND TO FOCUS ON INTERNAL WORKFORCE AND ORGANIZATIONAL ALIGNMENT TO ENSURE HIGH EMPLOYEE MORALE AND STAFF SUPPORT FOR THE AGENCY'S CORE PHILOSOPHY THEREBY ACCOMPLISHING THE AGENCY'S MISSION.

DAODAS PRIORITIZED 2015/2016 STRATEGIC GOALS AND HAVE SYNTHESIZED THREE ADDITIONAL GOALS IDENTIFIED DURING THE STRATEGIC PLANNING PROCESS:

- 1) INCREASE THE CAPACITY OF SERVICE PROVIDERS TO SERVE SOUTH CAROLINIANS IN NEED OF SUBSTANCE ABUSE PREVENTION, INTERVENTION TREATMENT AND RECOVERY SERVICES THEREBY IMPACTING ACCESS DISPARITIES, ENHANCING INDIVIDUAL, FAMILY AND COMMUNITY OUTCOMES, AND INCREASING COLLABORATION EFFORTS THROUGH A FULL SERVICE CONTINUUM TO INCLUDE QUALITY ASSURANCE AND CONTINUOUS QUALITY IMPROVEMENT.
- 2) IMPLEMENT RECOVERY SYSTEMS OF CARE.
- 3) IMPLEMENT SYSTEM INTEGRATION WITH PRIMARY HEALTHCARE AND BEHAVIORAL HEALTHCARE SYSTEMS.

2015 MAJOR ACHIEVEMENTS

TO MEET THE CONTINUING DEMAND FOR SUBSTANCE ABUSE SERVICES, DAODAS TOOK A PROACTIVE APPROACH TO SERVING ITS KEY CUSTOMERS DURING FY15, CONTINUING TO REACH THE AGENCY'S OVERARCHING GOAL OF ACHIEVING SUSTAINABLE RECOVERY FOR SUBSTANCE-ABUSING CLIENTS, WHILE REDUCING USE, ABUSE, AND HARM AND THEREBY IMPROVING HEALTHCARE OUTCOMES. IN KEEPING WITH THE STRATEGIC PLAN AND THE VISIONARY GOALS, THE FOLLOWING ACHIEVEMENTS ARE HIGHLIGHTED.

CAPACITY / COLLABORATION /CONTINUUM OF CARE

PREVENTION

DAODAS CONTINUES TO EMPHASIZE PREVENTION PROGRAMS ASSOCIATED WITH THE REDUCTION OF UNDERAGE DRINKING. THE ALCOHOL ENFORCEMENT TEAM (AET) EFFORT FOCUSES ON COMMUNITY COALITION MAINTENANCE AND DEVELOPMENT, MERCHANT EDUCATION, AND LAW ENFORCEMENT PARTNERSHIPS TO REDUCE UNDERAGE DRINKING ACTIVITIES. AETs SEEK TO PROMOTE AN EVIDENCE-BASED ENVIRONMENTAL PREVENTION MESSAGE TO REDUCE ALCOHOL USE AND ITS HARMFUL CONSEQUENCES, COUPLED WITH ACTIVE PUBLIC EDUCATION. SPECIFIC ACTIVITIES INCLUDE ALCOHOL COMPLIANCE CHECKS AT RETAIL OUTLETS, BARS, AND RESTAURANTS; PUBLIC SAFETY CHECKPOINTS; AND PARTY DISPERSALS. MERCHANT TRAINING IS ALSO A PRIORITY. IN ADDITION, THE DEPARTMENT CONTINUED TO IMPLEMENT THE COMMUNITY FOR A SAFER TOMORROW (CAST) GRANT WITH THE GOAL OF REDUCING UNDERAGE DRINKING AND DUI TRAFFIC CRASHES AMONG THIS POPULATION.

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DATA SHOWS THAT BOTH THE AET AND CAST EFFORTS ARE IMPACTING POSITIVELY THE GOALS OF REDUCING UNDERAGE DRINKING IN SOUTH CAROLINA. DATA HIGHLIGHTS SHOW THAT BOTH PROGRAMS HAVE RESULTED IN A REDUCTION OF UNDERAGE DRINKING. ACTIVITIES INCLUDE PUBLIC SAFETY CHECKPOINTS, UP IN FY14 TO 1,382 (FY15 YET TO BE FINALIZED). DURING FY14, OVER 360 DUIS WERE RECORDED DURING THESE CHECKPOINTS AND MORE THAN 550 YOUTH PARTICIPATED IN A DIVERSION PROGRAM FOR ALCOHOL.

TREATMENT

TO FURTHER INTEGRATE RESEARCH BASED BEST PRACTICES INTO TREATMENT PROTOCOLS, THE DEPARTMENT A MULTI-YEAR CLINICAL TRAINING INITIATIVE FOR ADDICTION COUNSELORS. DURING THE SECOND YEAR OF THIS INITIATIVE, 8 ADDICTION COUNSELORS SUBMITTED VIDEOS OF CLINICAL SESSIONS TO BE CODED FOR FIDELITY TO THE TREATMENT RECEIVING A PROFICIENCY RATING ALLOWING THEM TO TRAIN THE MODEL TO ADDITIONAL CLINICIAN COHORTS. PARTICIPATING CLINICIANS MET MONTHLY IN ONGOING REGIONAL LEARNING TEAMS TO SUSTAIN IMPLEMENTATION AND ONGOING LEARNING. THE SECOND COHORT OF 20 INDIVIDUALS COMPLETED THE TRAINING PROCESS IN AUGUST OF 2015. WITH THE KNOWLEDGE OF IMPLEMENTATION SCIENCE PRACTICE BASED TREATMENT, IT IS EXPECTED THAT CLIENTS WILL DIRECTLY SEE THE BENEFIT WITH INCREASED RECOVERY OUTCOMES.

THE DEPARTMENT CONTINUES TO WORK WITH DSS TO IDENTIFY CLIENTS WITHIN THE SOCIAL SERVICES SYSTEM WHO MAY NEED SUBSTANCE ABUSE SERVICES AND TO ENSURE A WORKABLE REFERRAL SYSTEM. DURING 2015, DAODAS CONTINUED TO PARTNER WITH DSS TO DEVELOP MECHANISMS FOR INCREASING THE EFFECTIVENESS OF PROGRAMS ADMINISTERED BY THAT AGENCY BY LEVERAGING THE RESOURCES OF DAODAS AND ITS PARTNERS AND SIGNED A CONTRACT TO FUND ALCOHOL AND DRUG ABUSE COUNSELORS CO-LOCATED IN DSS OFFICES TO IDENTIFY AND ASSESS CLIENTS FOR SUBSTANCE ABUSE USE AND ABUSE. THIS INCLUDED DRUG TESTING, SCREENING AND ASSESSMENT SERVICES FOR DSS INVOLVED FAMILIES. TO DATE, 27 LOCAL PROVIDERS HAVE HIRED STAFF AND RECEIVED ORIENTATION. DURING FY16, PLANS ARE TO COMPLETE HIRING, PROVIDE ADDITIONAL TRAINING AND TO BEGIN SERVICES AND EVALUATION.

DURING FY15, THE DEPARTMENT ESTABLISHED A BLOCK GRANT ASSESSMENT PAYMENT MECHANISM FOR THE UNINSURED. IN SHORT, FUNDING WAS CONTRACTED TO FUND PRIORITY TREATMENT FOR UNINSURED INDIVIDUALS AND TO REDUCE FINANCIAL BARRIERS TO TREATMENT. THE DEPARTMENT PROJECTED OVER 4000 ASSESSMENTS WOULD BE PROVIDED. THROUGH JUNE 30, 2015, OVER 5300 ASSESSMENTS WERE PROVIDED TO THE UNINSURED. THIS EFFORT TIES DIRECTLY TO THE AGENCY'S GOAL OF INCREASING THE CAPACITY OF SERVICE PROVIDERS IN TREATING SOUTH CAROLINIANS IN NEED OF SERVICES. THE EFFORT WILL CONTINUE DURING 2016 WITH A PLANNING EFFORT TO EXPAND TO OTHER SERVICE PROVISION DURING THE FISCAL YEAR.

SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT (SBIRT)

THE DEPARTMENT HAS PARTICIPATED IN AN EFFORT WITH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS) TO IMPLEMENT A SBIRT INITIATIVE FOR PREGNANT WOMEN WHO ARE CURRENTLY RECEIVING MEDICAID SERVICES. THE DEPARTMENT CONTINUES TO EMPHASIZE THE EFFORT TO IMPLEMENT A SBIRT INITIATIVE FOR NOT ONLY PREGNANT WOMEN, BUT ALL POPULATIONS WHO MAY BENEFIT FROM THE SCREENING PROCESS. SBIRT WAS IMPLEMENTED IN OCTOBER 2011 AND IS OPERATED THROUGHOUT THE STATE IN 2015 IN ASSOCIATION WITH DHHS, DHEC, DMH, AND SCADVASA WITH A FOCUS ON PREGNANT AND PARENTING WOMEN. A KEY CORE IMPROVEMENT STRATEGY IS TO ENCOURAGE ALL OB/GYN PROVIDERS IN THE STATE THAT TREAT PREGNANT (OR 12-MONTHS POST-PARTUM) MEDICAID CLIENTS TO USE THE SBIRT SCREENING TOOL TO GAUGE SUBSTANCE ABUSE, TOBACCO USE, DEPRESSION AND DOMESTIC VIOLENCE, AND THEN REFER THAT INDIVIDUAL TO TREATMENT WHEN WARRANTED. DURING FY15, OVER 8300 PATIENTS WERE PROVIDED 12,000 SCREENS. DATA SHOWS THAT THERE IS A POSITIVE CONNECTION BETWEEN SBIRT PARTICIPATION AND IMPROVED BIRTH OUTCOMES, INCLUDING HIGHER RATES OF PREVENTIVE CARE, SIGNIFICANTLY HIGHER RATES OF ACCESS TO PREVENTATIVE HEALTH SERVICES, HIGHER RATES OF TIMELINESS IN PRENATAL AND POSTPARTUM CARE AND HIGHER FREQUENCIES OF ONGOING PRENATAL CARE.

AUGMENTING THE DHHS EFFORTS, THE DEPARTMENT APPLIED AND WON AN SBIRT GRANT FROM THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA). IMPLEMENTED DURING FY14, AND IN ASSOCIATION WITH 14 PARTNERS

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THAT INCLUDES FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs), RURAL HEALTH CENTERS, HOSPITAL EMERGENCY DEPARTMENTS (ED) AND LOCAL ALCOHOL AND DRUG ABUSE SITES, AN ESTIMATED 117,000 INITIAL SCREENS FOR ALCOHOL, TOBACCO AND OTHER DRUGS HAVE BEEN COMPLETED ON 42,000 PATIENTS. THE GRANT IS EXPANDING DURING FY16 TO INCLUDE INSTALLING BRIEF INTERVENTION CURRICULA, EXPANSION OF TELE-HEALTH AND HEALTH INFORMATION TECHNOLOGY EFFORTS, EXPANSION INTO ADDITIONAL EDs, CONTINUED IMPLEMENTATION OF SUBSTANCE ABUSE DISORDER (SUD) TREATMENT SERVICE PROVISION AT PARTNERING HEALTH CARE SITES, AND OBTAINING SUBSTANTIAL OUTCOME DATA TO HELP GUIDE SBIRT'S FUTURE USE AND EXPANSION.

PRESCRIPTION DRUG ABUSE

IN NOVEMBER 2011, THE NATIONAL CENTER FOR DISEASE CONTROL AND PREVENTION CLASSIFIED PRESCRIPTION DRUG ABUSE AS A NATIONAL EPIDEMIC. IN MAY 2013, SOUTH CAROLINA'S INSPECTOR GENERAL PUBLISHED A REPORT HIGHLIGHTING THE FACT THAT SOUTH CAROLINA LACKS A STATEWIDE STRATEGY TO ADDRESS THIS PROBLEM FOR THE MANY SOUTH CAROLINIANS THAT STRUGGLE WITH PRESCRIPTION DRUG ABUSE ILLUSTRATING THAT THE STATE RANKED 23RD HIGHEST PER CAPITA IN BOTH OPIOID PAINKILLER PRESCRIPTIONS AND IN OVERDOSE DEATHS (2011). ON MARCH 14, 2014, GOVERNOR HALEY SIGNED AN EXECUTIVE ORDER ESTABLISHING THE GOVERNOR'S PRESCRIPTION DRUG ABUSE PREVENTION COUNCIL CHARGED WITH DEVELOPING A COMPREHENSIVE STATE PLAN TO COMBAT AND PREVENT PRESCRIPTION DRUG ABUSE.

DURING 2015, THE COUNCIL, RELEASED OVER 50 RECOMMENDATIONS IN 8 PRIORITY AREAS, WITH A FOCUS ON PRESCRIBERS, THE SOUTH CAROLINA PRESCRIPTION DRUG MONITORING PROGRAM (SCPDMP), PHARMACY, THIRD-PARTY PAYORS, LAW ENFORCEMENT, TREATMENT, EDUCATION AND ADVOCACY AND DATA AND ANALYSIS.

WORK HAS ALREADY BEGUN TO IMPLEMENT SEVERAL OF THE RECOMMENDATIONS. WORKING WITH COUNCIL PARTNERS, NOTABLE SUCCESSES INCLUDE AN INCREASE IN THE NUMBER OF PRESCRIBERS AND PHARMACISTS NOW REGISTERED AND USING THE PRESCRIPTION DRUG TRACKING PROGRAM (ESTIMATED AT 30%, UP FROM 22%); TWO MAJOR INSURANCE CARRIERS (SOUTH CAROLINA PUBLIC EMPLOYEE BENEFIT AUTHORITY AND SOUTH CAROLINA HEALTH CONNECTIONS – MEDICAID) WILL REQUIRE CONTRACTED PRESCRIBERS TO USE THE TRACKING PROGRAM, KNOWN AS THE SOUTH CAROLINA PRESCRIPTION DRUG MONITORING PROGRAM (SCPDMP) BEGINNING IN JANUARY OF 2016; AND SEVERAL PARTNERS, INCLUDING DAODAS, BLUE CROSS/BLEU SHIELD, SOUTH CAROLINA MEDICAL ASSOCIATION, DEPARTMENTS OF LABOR, LICENSING AND REGULATION AND HEALTH AND HUMAN SERVICES, AND THE SOUTH CAROLINA DRUG ENFORCEMENT AGENCY ARE COLLABORATING TO CREATE A STATEWIDE PUBLIC CAMPAIGN AND PROVIDER TOOLKIT THAT WILL INCLUDE A CONSISTENT MESSAGE OF EDUCATION REGARDING BEST PRACTICES FOR PRESCRIBING OPIOIDS AND PAIN MANAGEMENT, WITH INFORMATION ON IDENTIFYING SUBSTANCE USE DISORDERS AND REFERRAL OPTIONS FOR TREATMENT.

THE GOVERNOR'S COUNCIL ON PRESCRIPTION DRUG ABUSE PREVENTION COUNCIL RECOMMENDED AN EXPANSION OF MEDICATION ASSISTED TREATMENT (MAT) TO ADDRESS RISING OPIOID ADDICTION IN THE STATE. THIS EXPANSION WOULD INCLUDE NOT ONLY THE USE OF MEDICATIONS, BUT ALSO PROVIDING BEHAVIORAL HEALTH THERAPY IN TANDEM. THIS USE OF MAT CAN INCREASE THE RETENTION RATE IN TREATMENT, IMPROVE SOCIAL FUNCTIONING, DECREASE USE, REDUCE INFECTIOUS DISEASE TRANSMISSION, REDUCE CRIMINAL ACTIVITY AND REDUCE THE RISK OF OVERDOSE AND DEATH.

RECOVERY

RECOVERY ORIENTED SYSTEMS OF CARE (ROSC)

RECOVERY-ORIENTED SYSTEMS OF CARE IN LOCAL COMMUNITIES ARE THE CORNERSTONE OF ACHIEVING SUSTAINED RECOVERY AND ENCOMPASSES A FOCUS ON CREATING INFRASTRUCTURE WITH RESOURCES TO EFFECTIVELY ADDRESS THE FULL RANGE OF SUBSTANCE ABUSE PROBLEMS WITHIN THE COMMUNITY.

DAODAS CONTINUES TO LEAD A STATEWIDE STRATEGIC PLANNING EFFORT TO DEVELOP AND IMPLEMENT SUCH A SYSTEM OF CARE, AND FOCUSED IN 2015 ON DEVELOPING A VISION AND MISSION STATEMENT, ALONG WITH RESEARCHING SYSTEMS TRANSFORMATION

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WITH A NATIONAL EXPERT. IN 2016, THE DEPARTMENT WILL ENGAGE FURTHER IN CONSULTATION SPECIFIC TO THE PLANNING AND IMPLEMENTATION OF 3 DEMONSTRATION PROJECTS FOR A SYSTEM TRANSFORMATION INITIATIVE. THESE SITES WILL ACT AS A LEARNING COLLABORATIVE FOR RECOVERY ORIENTED SYSTEMS OF CARE THROUGH THE LOCAL SUBSTANCE ABUSE PROVIDER SYSTEM.

THE DEPARTMENT TAKES AN ACTIVE ROLE IN SUPPORTING BEHAVIORAL HEALTH ADVOCACY GROUPS, INCLUDING THE LOCAL AND STATE CHAPTERS OF FACES AND VOICES OF RECOVERY (FAVOR). SIX CHAPTERS EXIST CROSS THE STATE, ALL WITH THE GOAL OF RECOVERY SUPPORT. NOTABLY, THE PEE DEE FAVOR CHAPTER HAS INITIATED A TELEPHONE RECOVERY SUPPORT PROGRAM THAT BEGAN RECEIVING REFERRALS IN FEBRUARY OF 2015. IN A SIMILAR EFFORT WITH GREENVILLE FAVOR, OVER 538 INDIVIDUALS ENROLLED IN TELEPHONE RECOVERY COACHING SERVICES AND 128 OF THESE INDIVIDUALS WERE REFERRED FOR ENGAGEMENT IN SERVICE WITH THE LOCAL SUBSTANCE ABUSE PROVIDER. THESE EFFORTS RELATE DIRECTLY TO ACHIEVING LONG TERM RECOVERY.

FAVOR SOUTH CAROLINA IS ALSO ASSISTING IN THE EXPANSION OF PEER SUPPORT SERVICES WITHIN THE SUBSTANCE ABUSE PROVIDER NETWORK. PEER SUPPORT IS AIMED AT TRAINING INDIVIDUALS TO ASSIST CLIENTS NEW TO RECOVERY IN ORDER TO REMOVE BARRIERS AND OBSTACLES TO RECOVERY THAT OFTEN PROHIBIT LONG TERM SUCCESS. DAODAS SPEARHEADS THE PEER SUPPORT TRAINING IN ASSOCIATION WITH FAVOR SOUTH CAROLINA. DURING FY15, AN ADDITIONAL 32 INDIVIDUALS HAVE BEEN CERTIFIED AS SPECIALISTS IN PEER SUPPORT. AS OF JULY 2015, 130 PEER SUPPORT SPECIALISTS HAVE BEEN CERTIFIED, AND ARE WORKING IN THE 301 SYSTEM OR VOLUNTEERING WITH FAVOR CHAPTERS ACROSS THE STATE. RECOVERY IS A MAIN PRIORITY OF THE DEPARTMENTAL MISSION.

THE DEPARTMENT HAS ALSO FOCUSED ON RECOVERY THROUGH THE SUPPORT OF TRANSITIONAL HOUSING THAT WILL INCREASE RECOVERY PROSPECTS FOR SUBSTANCE-ABUSING INDIVIDUALS. THE CONTRACT WITH OXFORD HOUSE INC. CONTINUED DURING FY15; OXFORD HOUSE IS AN ORGANIZATION THAT ESTABLISHES SELF-SUSTAINING HOUSES FOR INDIVIDUALS IN RECOVERY FROM SUBSTANCE USE DISORDERS. IN PARTNERSHIP WITH OXFORD HOUSE, THE OUTREACH COORDINATOR CONTINUED TO WORK TO INCREASE THESE HOUSING OPPORTUNITIES. TO DATE, THERE ARE 28 OXFORD HOUSES WITH 185 RESIDENTS. PLANS FOR 2016 INCLUDE THE ADDITION OF AN OUTREACH MANAGER TO WORK TO ESTABLISH HOMES FOR WOMEN.

HEALTH CARE INTEGRATION.

THE DEPARTMENT WAS SUCCESSFUL DURING FY14 TO CONTRACT WITH DHHS TO INVEST A PERCENTAGE OF FUNDS RECEIVED FROM THE ATTORNEY GENERAL'S OFFICE AS A RESULT OF VARIOUS LEGAL ACTION AWARDS (I.E., SETTLEMENTS) WON AGAINST PHARMACEUTICAL FIRMS. DHHS AGREED TO TRANSFER \$3 MILLION DURING TO MITIGATE THE LONG-TERM AND ECONOMIC COSTS OF ADDICTIVE DISORDERS, AND TO REDUCE THE LIABILITY ASSOCIATED WITH THESE DISORDERS REPRESENTED BY A DISPROPORTIONATELY HIGH RATE OF CO-OCCURRING CHRONIC PHYSICAL DISEASE. KNOWN AS THE RECOVERY PROGRAM TRANSFORMATION & INNOVATION FUND (RPTIF), THREE PRIORITY AREAS WERE FUNDED, TO INCLUDE IMPROVING ACCESS TO SERVICES, SERVICE ENGAGEMENT AND COLLABORATION/INTEGRATION OF SERVICES. TEN CONTRACTS WERE AWARDED IN MID-2014 FOR 18 MONTHS. THE UNIVERSITY OF SOUTH CAROLINA'S SCHOOL OF SOCIAL WORK HAS BEEN EVALUATING THESE EFFORTS IN THE AREAS OF IMPROVING ACCESS TO SERVICE, IMPROVING SERVICE ENGAGEMENT AND ENHANCING COLLABORATION AND INTEGRATION OF SERVICES. AS THESE PROJECTS WIND DOWN TO A CLOSE, THE EVALUATION HAS REVEALED SUCCESS IN IMPROVING ACCESS TO SERVICES BY USING SBIRT IN HOSPITALS AND JAILS, IMPROVING SERVICE ENGAGEMENT UTILIZING COMMUNITY SUPPORTS, AND ENHANCING COLLABORATION BY PROVIDING SERVICES TO WOMEN AND FAMILIES.

DHHS AGREED TO CONTRACT \$3 MILLION IN RPTIF FUNDS IN FY15 TO COVER THE FOLLOWING PROGRAM AREAS; INCREASED ACCESS VIA TECHNOLOGY INVESTMENTS; COLLABORATION AND DISPARITY REDUCTION WITH A FOCUS ON PRESCRIPTION DRUG ABUSE; WORKFORCE DEVELOPMENT; RECOVERY SUPPORT AND THE CONTINUATION OF EXPANDING INPATIENT SERVICES FOR PREGNANT WOMEN AND FAMILY SERVICES. THESE AWARDS WERE CONTRACTED IN CALENDAR YEAR 2015. EVALUATION IS EXPECTED IN EARLY 2016.

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A THIRD ROUND OF FUNDING HAS BEEN ANNOUNCED FOR 2016. AREAS OF FOCUS INCLUDE MEDICATION ASSISTED TREATMENT (MAT), PRESCRIPTION DRUG ABUSE, INTEGRATION OF BEHAVIORAL HEALTH SERVICES, ADOLESCENT AND FAMILY SERVICES, PLUS INFRASTRUCTURE DEVELOPMENT. AWARDS WILL ALSO BE MADE TO THOSE WHO APPLY TO CONTINUE THE 2014 COHORT SUCCESSES.

HEALTHY OUTCOMES PROGRAM (HOP)

CONTINUING THROUGH FY15, DAODAS WORKED WITH DHHS TO ENSURE THAT THE SUBSTANCE ABUSE TREATMENT SYSTEM WAS INCLUDED IN EFFORTS TO REDUCE CHRONIC DISEASE UNDER THE AUSPICES OF A DEPARTMENT OF HEALTH AND HUMAN SERVICE BUDGET PROVISIO (HOSPITAL AND CLINIC INNOVATION / MEDICAID ACCOUNTABILITY AND QUALITY IMPROVEMENT - HEALTH OUTCOMES PROGRAM - HOP). SEVERAL OF THE LOCAL SUBSTANCE ABUSE PROVIDERS ARE CURRENTLY WORKING CLOSELY WITH THEIR HOSPITALS TO TREAT THE UNINSURED AS IDENTIFIED AS HOP CLIENTS WHO MAY ALSO BE DIAGNOSED WITH A SUBSTANCE ABUSE DISORDER. DURING FY15, LOCAL ALCOHOL AND DRUG ABUSE PROVIDERS, NOW DEFINED AS SAFETY NET PROVIDERS, RECEIVED \$2 MILLION TO FURTHER PROVIDE SUBSTANCE ABUSE SERVICES FOR IDENTIFIED HOP CLIENTS AND ALSO LOW INCOME UNINSURED CLIENTS. PLANS FOR 2016 INCLUDE EFFORTS TO WORK MORE CLOSELY WITH THE HOP PROGRAMS ACROSS THE STATE TO DEVELOP STRONGER REFERRAL LINKAGES FOR IDENTIFIED CLIENTS.

TELEHEALTH

WITH THE RAPID TECHNOLOGICAL ADVANCES IN THE RECOVERY FIELD, THE DEPARTMENT HAS SUPPORTED EFFORTS TO INVESTIGATE HOW LOCAL SERVICE PROVIDERS MAY INVEST IN THESE ADVANCES TO SUPPORT RECOVERY. DURING FY15, THE DEPARTMENT PARTICIPATED IN A SAMHSA SPONSORED TECHNICAL ASSISTANCE OPPORTUNITY (INNOVATIVE USES OF TECHNOLOGY IN ADDICTION CARE COLLABORATIVE) TO INVESTIGATE POSSIBLE TECHNOLOGY OPTIONS FOR IMPLEMENTATION HERE IN SOUTH CAROLINA. THE TEAM CHOSE TO FURTHER INVESTIGATE THE USE OF MOBILE PHONE APPLICATIONS THAT HELP INDIVIDUALS IN RECOVERY TO AVOID BEHAVIORS WHICH MAY THREATEN RECOVERY.

IN ADDITION, AND UNDER THE AUSPICES OF THE AGENCY’S FEDERAL SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT (SBIRT) GRANT TO IMPROVE ACCESS TO SERVICES, A TELE-HEALTH INITIATIVE IS IN THE BEGINNING STAGES IN TWO COUNTIES: BARNWELL COUNTY--WITH AXIS I CENTER, SOUTHERN PALMETTO HOSPITAL, AND HEALTHWISE FAMILY MEDICINE, AND HORRY COUNTY--SHORELINE BEHAVIORAL HEALTH SERVICES AND FIVE LITTLE RIVER MEDICAL CENTER FQHC SITES. IN ADDITION, SC SBIRT HAS FUNDED ONE-YEAR OF ‘MYSTRENGTH’ FOR SHORELINE BEHAVIORAL HEALTH SERVICES IN HORRY COUNTY AND THE PHOENIX CENTER IN GREENVILLE COUNTY TO ENHANCE TREATMENT AND RECOVERY SUPPORT FOR CLIENTS. BOTH OF THESE INITIATIVES ARE PROOF-OF-CONCEPT PROJECTS THAT, IF SUCCESSFUL, COULD CONTRIBUTE TO EFFECTIVENESS AND EFFICIENCY OF THE STATE’S PROVIDER NETWORK.

DURING 2015, THE DEPARTMENT ALSO DEVELOPED AND IMPLEMENTED AN RFP TO INSTALL A 24 HOUR ON-CALL PHONE LINE TO ASSIST CLIENTS IN NEED OF ACCESS TO CARE NOT PROVIDED DURING NORMAL BUSINESS HOURS; THIS WILL ENABLE THE CLIENT TO SPEAK WITH A CLINICIAN, BE SCREENED AND THEN REFERRED TO A LOCAL SUBSTANCE ABUSE PROVIDER FOR CARE. THE RFP HAS BEEN AWARDED AND WILL BE OPERATIONAL DURING FISCAL YEAR 2016.

RECAPITULATION

CAPITALIZING ON MORE THAN 55 YEARS OF SUCCESS IN ENSURING ACCESS TO SUBSTANCE ABUSE SERVICES FOR THE CITIZENS OF SOUTH CAROLINA, AND THROUGHOUT FY15, THE DEPARTMENT CONTINUED TO PROVIDE THE NECESSARY LEADERSHIP TO RE-VISION THE STRATEGIC DIRECTION OF THE AGENCY, AS WELL AS THE DIRECTION OF THE SUBSTANCE ABUSE FIELD, WHICH INCLUDES THE IMPROVEMENT OF THE EFFECTIVENESS OF THE PUBLIC AND PRIVATE PROVIDER SYSTEM STRIVING FOR LONG-TERM CLIENT OUTCOMES AND RECOVERY. SYSTEM-WIDE, THE GOALS FOR 2015 WERE TO CONTINUE IMPLEMENTING A COORDINATED SYSTEM OF CARE, TO IMPLEMENT RESEARCH- AND SCIENCE-BASED PROTOCOLS THAT INCREASE CHANCES FOR RECOVERY, AND TO MOVE TOWARD A FORMULA BASED FEDERAL BLOCK GRANT FUNDING DECISION PROCESS, TO ENHANCE THE PERFORMANCE OF PROVIDERS, AND ULTIMATELY TO ACHIEVE IMPROVED HEALTH OUTCOMES FOR CLIENTS.

ORGANIZATIONAL CHART

South Carolina Department of Alcohol and Other Drug Abuse Services
ORGANIZATIONAL STRUCTURE - 1/22/15

