

AGENCY NAME:	S.C. Department of Alcohol and Other Drug Abuse Services		
AGENCY CODE:	J200	SECTION:	037

2022
Accountability Report

SUBMISSION FORM

I have reviewed and approved the data submitted by the agency in the following templates:

- Data Template
 - Reorganization and Compliance
 - FY2022 Strategic Plan Results
 - FY2023 Strategic Plan Development
 - Legal
 - Services
 - Partnerships
 - Report or Review
 - Budget
- Discussion Template
- Organizational Template

I have reviewed and approved the financial report summarizing the agency’s budget and actual expenditures, as entered by the agency into the South Carolina Enterprise Information System.

The information submitted is complete and accurate to the extent of my knowledge.

AGENCY DIRECTOR <i>(SIGN AND DATE):</i> <i>(TYPE/PRINT NAME):</i>	SIGNATURE ON FILE	Signature Received: 9/15/2022 14:30
	Sara Goldsby	

BOARD/CMSN CHAIR <i>(SIGN AND DATE):</i> <i>(TYPE/PRINT NAME):</i>	N/A	

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AGENCY’S DISCUSSION AND ANALYSIS FY22

The use of alcohol, tobacco, and other drugs 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. According to a wide-ranging study by the Recovery Centers of America in 2019, drug and alcohol use disorders in the United States cost the nation **\$3.73 trillion** annually in tangible economic loss and intangible costs due to societal harms through quality-of-life adjustments and premature loss of life.

Recognizing the need for direct services for the general public, as well as for specific high-risk groups, the S.C. 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 31 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 use disorders throughout South Carolina. DAODAS has expanded its partners to include 27 opioid treatment programs, 13 recovery organizations, 15 hospitals, and 83 community distributors of the overdose antidote naloxone. Since the county alcohol and drug abuse authorities were created in 1973, these local agencies have provided intervention, treatment, and recovery services to more than **382 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 **451,000** individuals in South Carolina are suffering from substance-related problems that require immediate intervention and treatment. DAODAS also estimates that **378,000** South Carolinians are in active recovery. 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 authorities (i.e., its local provider network), as well as other public and private contractors, to include opioid treatment programs, recovery community organizations, hospital-based programs and other medical systems. During fiscal year 2022 (FY22), DAODAS and its provider network delivered services to **44,161** South Carolina citizens.

Mission Statement

To ensure the availability and quality of a continuum of substance use services, thereby improving the health status, safety, and quality of life of individuals, families, and communities across South Carolina.

DAODAS Strategic Direction

Capitalizing on 65 years of success in ensuring access to substance use disorder (SUD) services for the citizens of South Carolina, throughout FY22 the department continued to provide the necessary leadership toward a strategic direction for the agency itself, as well as the direction of the addictions field.

DAODAS utilizes a strategic planning framework that emphasizes linked performance measures to align agency activities with selected priorities, strategies, and mission-critical goals. Using its strategic plan, county plans, and epidemiological data, the agency identifies gaps in services and addresses these gaps by (1) ensuring that services are developing or available based on needs assessment data; (2) increasing

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the number and quality of partnerships to address access to prevention, intervention, treatment, and recovery services; (3) increasing service delivery to communities and individuals along the service continuum; (4) increasing the number of local provider staff practicing evidence-based services with fidelity; and (5) increasing the number of residents in recovery-supportive housing and receiving services from recovery community organizations.

Specific areas of focus in FY22 included: (1) increasing the capacity of local providers to serve the state’s citizens in need of SUD prevention, intervention, treatment, and recovery services, thereby impacting access disparities; (2) enhancing individual, family, and community outcomes; (3) increasing coordination efforts; (4) integrating primary and behavioral health care; and (5) addressing the agency’s overarching goal of achieving sustainable recovery for the patients it serves. These goals directly relate to the Enterprise goals established by Governor Henry McMaster, with a primary emphasis on healthy and safe families, public infrastructure and economic development, and government and citizens.

FY22 Major Achievements

To meet the continuing demand for SUD services, DAODAS took a proactive approach to serving citizens during FY22, striving through its partnerships to reach the overarching goal of achieving sustainable recovery for citizens suffering from SUDs. In keeping with the agency’s strategic plan and visionary goals, we have highlighted the following achievements.

Opioid Use Disorder

On December 18, 2017, Governor McMaster signed Executive Order No. 2017-42, declaring a Statewide Public Health Emergency related to opioid misuse, opioid use disorder, and opioid-related deaths. The Executive Order also established the S.C. Opioid Emergency Response Team (SCOERT), under the joint leadership of S.C. Law Enforcement Division Chief Mark Keel and DAODAS Director Sara Goldsby. The SCOERT has developed a multi-lateral strategy to prevent and treat the misuse of prescription opioids and the use of illicit opioids in order to strengthen public health, security, safety, and the economic well-being of the citizens of the state.

The SCOERT continues to ensure the execution of objectives to meet statewide goals for education and communication, prevention and response, treatment and recovery, coordinated law enforcement strategies, and data collection and analysis. The team promotes interagency coordination for an efficient and comprehensive approach to the opioid crisis. As a result of this effort, DAODAS was instrumental in the following accomplishment:

- *Utilizing a coordinated state-level collaboration and initiating a protocol for real-time overdose surveillance and rapid response with local mobilization.* The protocol establishes a framework for monitoring and responding to trends in suspected overdoses in South Carolina. The aim of this effort is to reduce injury and death from overdoses by identifying geographical high-burden areas to target strategies for preventing overdose deaths and to synchronize response efforts across stakeholders and mobilize local partners to deploy resources to limit the effects of suspected drugs. The protocol focuses on routine monitoring, enhanced investigation, and rapid response.

The effort has identified an increase in overdose “hot spots,” with law enforcement, public health, hospitals, coroners, prescribers and dispensers, and SUD treatment agencies collaborating to rapidly address the problem by working to identify individuals in need of treatment and ensuring that naloxone and fentanyl test strips, a harm reduction strategy, are available in those communities to family members

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and others in need of the overdose-reversal drug and testing strips. Longer-term outcomes include increased real-time knowledge of overdose trends, expanded uptake of evidence-based initiatives and innovative strategies, and greater targeting of resources to address opioid overdose burden.

Recognizing that opioid use and addiction are widespread and affect every part of the state, DAODAS implemented Community Distribution Guidelines for the delivery of naloxone to those citizens – and their caregivers – most in danger of an overdose. To date, the agency has approved 83 community distributors, including treatment providers, recovery organizations, healthcare providers, homeless outreach organizations, faith-based organizations, and state agencies. Additionally, the department supported the enacting of legislation during the recent legislative session to expand the distribution of naloxone through hospital emergency departments to an individual (or their caregiver) who might be at risk of an opioid overdose.

Service Capacity

In FY22, DAODAS continued using federal and state appropriations to expand a program of medication-assisted treatment (MAT) throughout South Carolina. Funds were expended to maintain the state’s capacity to serve individuals experiencing opioid use disorder, with DAODAS contracting with local SUD providers for medications, physician services, counselors/therapists, and peer support specialists. All county alcohol and drug abuse authorities have access to state and federal funding to cover behavioral health therapies for the opioid use disorder population. During FY22, DAODAS continued its contract with a departmental Medical Director to assist in the development and expansion of MAT across the medical and behavioral healthcare systems, and to work with Federally Qualified Health Centers on behavioral health models. Under the auspices of the Medical Director, the department has been able to add an additional medication, Sublocade, to its arsenal of medications for treating opioid use disorder.

COVID-19 Federal Program Supplements

The department continues to lead implementation of South Carolina’s plan to spend \$22 million from the Substance Abuse Prevention & Treatment Block Grant COVID-19 supplement. This plan is wide-ranging and includes capacity building for prevention, intervention, treatment, and recovery services. The focus is on schools and colleges, increased awareness campaigns, expansion of overdose education and naloxone distribution in county jails, community-based diversion programs, expansion of women’s programs, coordination of services with the Department of Mental Health, and expansion of recovery community organizations. For example, by providing transportation funding, more than 28 county alcohol and drug abuse authorities have been able to offer transportation to those clients most in need of opioid treatment services.

Ensuring Accessible Services

Prevention services are the use of evidence-based approaches to create or enhance environmental conditions within communities, families, schools, and workplaces that protect individuals from substance misuse and help them develop personal decision-making skills to reduce the risk of alcohol-, tobacco-, and other drug-related problems.

In FY22, DAODAS continued to emphasize prevention programs associated with the reduction of underage drinking. The Alcohol Enforcement Team (AET) effort focuses on community coalition development and maintenance, 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. In

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fiscal year 2021 (FY21) (most recent data available), AETs reported conducting 4,495 alcohol compliance checks, resulting in an effective buy rate of 10.4%. Also in FY21, the AETs reported operating 685 public safety checkpoints, issuing 47 DUI citations, and dispersing 79 parties, which resulted in 169 tickets and 288 youth being referred into the Alcohol Education Diversion Program.

As a result of intensive prevention programming throughout the state, youth use rates for all substances continued to decline. As reported from the Communities That Care Survey conducted in the spring of 2022, self-reported past-30-day use among South Carolina high school youth was as follows:

- use of alcohol has decreased to 9.8% (10.4% in 2020);
- use of marijuana is down to 8.9% (12.7% in 2018);
- use of cigarettes has decreased to 1.3% (2.4% in 2020);
- use of vaping products is down to 13.4% (14.9% in 2018); and
- prescription drug use has decreased to 2.8% (3.9% in 2020).

DAODAS and its local partners also participated in the federally required Youth Access to Tobacco Study to reduce South Carolina youth’s ability to purchase tobacco products. The department documented a buy rate of 10.6% in federal fiscal year 2021.

To help combat opioid misuse, the Just Plain Killers campaign (www.justplainkillers.com) seeks to educate the public on the prescription opioid crisis and to provide prevention information to help stop the epidemic, as well as providing information on treatment and recovery resources. The campaign utilizes three mainstream social media platforms (Facebook, Instagram, and Twitter), with marketing partner Chernoff Newman responsible for creating branded, cohesive content to share across the platforms. Social media impressions in FY22 totaled 788,993. The breakdown of impressions for each platform is as follows:

1. Facebook: 690,408
2. Twitter: 29,094
3. Instagram: 69,491

Impressions for the campaign decreased again this fiscal year as some funding previously dedicated to the campaign was once again allocated to the Embrace Recovery SC campaign that was launched in FY21 (www.embracerecoverysc.com). Social media impressions in FY22 for Embrace Recovery yielded 1,249,536 impressions. The breakdown of impressions for each platform is as follows:

1. Facebook: 779,502
2. Twitter: 11,710
3. Instagram: 458,324

DAODAS has expanded this campaign to raise awareness of the recovery process through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. An evaluation of Embrace Recovery SC based on a statewide survey of 500 South Carolina residents was conducted September 17-23, 2021. This study is the fourth in a series designed and conducted to measure and monitor awareness, perceptions, and positions related to the abuse and misuse of opioids in South Carolina. The initial study, conducted in November 2017, served to establish a benchmark. Since then, three follow-up studies have been conducted – one in May 2018, one in March 2020, and the one in September 2021, which also included Embrace Recovery SC advertising recall. The Embrace Recovery campaign performed well in this survey, with 32% of respondents recalling one or more static images from the campaign, and 31% recalling that they had seen the initial Embrace Recovery television spot.

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Saving lives is the primary goal of overdose prevention efforts in South Carolina. DAODAS continued to administer the South Carolina Overdose Prevention Grant, a federal grant awarded through the Substance Abuse and Mental Health Services Administration (SAMHSA). The grant has three main goals: (1) to identify high-need communities for targeting of prevention efforts in rank order of highest need; (2) to train law enforcement officers (first responders) and, similarly, firefighters, patients, and caregivers to recognize overdose, administer naloxone, and monitor an individual’s response until EMS personnel arrive; and (3) to increase the number of prescribers in the state who are informed about the risk factors associated with opioid overdose and to partner with the S.C. Pharmacy Association to disseminate overdose prevention messages to prescribers across the state. To bolster prescribers, the department championed state legislation that directly impacts the ongoing opioid crisis.

With the help of its partner agency, the Department of Health and Environmental Control (DHEC), DAODAS trained more than 1,914 additional first responders during FY22 through both the Law Enforcement Officer Naloxone (LEON) effort and the Reducing Opioid Loss of Life (ROLL) program for firefighters. To date, the total number of trained law enforcement officers and firefighters is 16,459. Due to its success, DAODAS has been awarded a grant for fiscal years 2022 through 2025 to continue this program and will additionally focus on the Community Outreach by Paramedic Education (COPE) program, which will include first responders making a return visit to patients they revive and delivering naloxone to that individual.

Since January 2018, the state’s county alcohol and drug abuse authorities, opioid treatment programs, and recovery organizations have distributed thousands of doses of naloxone to patients, caregivers, and community members through the Overdose Education and Naloxone Distribution (OEND) Program. During FY22, 26,803 naloxone kits were purchased using State Opioid Response (SOR) funding for community distributors, and 25,484 kits were distributed to patients, caregivers, and community members throughout the state.

In May 2021, SAMHSA notified all SOR grantees that the use of SOR funds for the purchase and distribution of fentanyl test strips (FTS) was an allowable activity with this federal funding. South Carolina immediately worked to add this strategy to the existing overdose prevention efforts through the OEND Program. In FY22, over 88,000 FTS were purchased for community distributors, which in turn distributed 35,911 FTS kits.

Treatment Outcomes

A range of treatment services are available across South Carolina to meet the individual needs of patients who present for services. These services range from educational and individual therapies to withdrawal management and inpatient care. In FY21 (most recent data available), 26,109 individuals received treatment and were discharged from services.

Through treatment and recovery services and programs in South Carolina, in FY21 (most recent data available), patients’ past-30-day use of alcohol decreased to 15% from 36%; patients’ past-30-day use of *any* substances decreased to 8% from 43.8%; and patients’ past-30-day employment status rose to 58% from 48%. Additionally, DAODAS and its local provider network reported treating 5,579 patients with opioid use disorder.

Recovery

DAODAS has emphasized working with recovery community organizations (RCOs) to expand their presence in communities across the state and has supported the formation of two faith-based RCOs spanning six counties. These RCOs now offer a full spectrum of recovery support services to bridge the

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intersection of faith and recovery. South Carolina Faces and Voices of Recovery, now being rebranded as the S.C. Association of Recovery Community Organizations, is seeking to develop a statewide coalition made up of several elements of RCOs.

The department has championed the safe recovery housing movement by leading the way on ensuring that recovery homes meet national standards of quality. During last year’s legislative session, H3997 was introduced by Representative Russell Fry to establish a voluntary certification program for recovery houses across South Carolina. The agency plans to have this bill reintroduced in the coming General Assembly, as safe, quality, and affordable housing for the recovery community is the baseline for recovery success.

Additionally, DAODAS is continuing to identify existing recovery homes and to employ efforts for these homes to meet voluntary quality measures for recovery residences through uniform standards with assistance from the S.C. Association of Recovery Residences (SCARR), which has implemented a robust strategy of certification for recovery houses using National Association of Recovery Residences standards. Currently, 11 residences have been certified.

An ongoing project that has increased access to and availability of recovery houses in South Carolina is the partnership between Oxford House Inc. and DAODAS. Currently, there are 96 Oxford Houses in our state, with 455 beds for men, 131 beds for women, and 103 beds that serve women with dependent children. There is currently an 81.7% occupancy rate. Oxford House policy states that all residences are Medication-Assisted Treatment compliant, and all homes accept individuals who are prescribed medication for an opioid use disorder.

DAODAS has been designated the recipient of a Congressional award of U.S. Department of Housing and Urban Development funds to support recovery housing. Dubbed the Recovery Housing Project, DAODAS will be awarded \$1.8 million over five years to provide direct housing-related services to individuals in recovery from a substance use disorder. This innovative project will allow individuals to apply for housing vouchers through DAODAS and to receive funding for up to two years or until permanent housing is established. This program is expected to begin in fiscal year 2023.

The Collegiate Recovery Program is also the product of a proviso found in the Appropriations Act that directed DAODAS to expand its efforts on campus recovery. During FY22, the agency expanded this effort to three institutions of higher learning, including the University of South Carolina, Greenville Technical College, and Allen University. All offer academic support in designated spaces that enable group meetings, clinical support, technology access, and academic advising to assist students in recovery. One institution has expanded its services to include the community distribution of naloxone, and two others are in the discovery phases of community distribution. One program has begun providing recovery support services on satellite campuses. Allen University, an HBCU, is in process to become a training hub for Certified Peer Support Specialists and other recovery-related trainings for all HBCUs across South Carolina.

Drug Courts

The department is also looking to expand its drug court “footprint.” With a proviso in several budget Appropriations Acts, DAODAS has been directed to increase its drug court efforts. The agency has entered into an agreement with the Sixth Circuit Solicitor’s Office, Fairfield Behavioral Health Services, and the Hazel Pittman Center to provide funding and support for new drug courts in both Fairfield and Chester counties. The new drug courts will adhere to best practice standards as outlined by the National Association of Drug Court Professionals and will permit all evidence-based treatment methods,

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including access to the provision of all three federally approved medications for treating opioid use disorder. DAODAS also designated funding for key drug court professionals in South Carolina (drug court coordinators, assistant solicitors, and S.C. Prosecution Commission staff) to attend the 2022 National Association of Drug Court Professionals Annual Conference. During FY23, the agency is seeking additional partnerships to expand its efforts.

Telehealth

DAODAS continues to make strides in the use of telehealth to enable county alcohol and drug abuse authorities to deliver services during the COVID-19 pandemic. Prior to the pandemic, the department had begun working with the S.C. Telehealth Alliance to equip all county authorities with telehealth carts and was subsidizing county authorities’ broadband costs with state funds. During that time, no Medicaid reimbursement was available for telehealth rehabilitative behavioral health services, and prescriptions for buprenorphine were limited by the state’s Board of Medical Examiners (BOME).

Actions taken to address these issues during the pandemic include Medicaid and DAODAS state support to reimburse providers for clinical services, including crisis management, individual psychotherapy, peer support, case management, and other behavioral health services provided via telehealth or telephone. DAODAS continued providing a \$5,000 stipend for the purchase of cellular telephones for use by patients needing access; worked with the BOME to approve additional prescribers to initiate buprenorphine via telehealth; and allowed counselors to use doxy.me to provide clinical services via laptop computer from their homes or offices.

Some positive results of these measures include increased patient retention and engagement, deeper clinical work with a glimpse of home and family life, reports of higher patient satisfaction, and increased desire to continue in services. The department hopes to increase its telehealth efforts with a range of providers in the coming fiscal year.

Collaboration

DAODAS continued to work with the Department of Corrections (SCDC) to better serve individuals involved in the justice system and to provide substance use disorder (SUD) services to youthful offenders released from prison to help reduce recidivism and SUDs. The Step UP! program starts the process of re-integrating offenders back into the community. During FY21, a total of 179 inmates, both male and female, were referred to county authorities for education and treatment services upon leaving the correctional facility.

A highlight of the partnership between DAODAS and SCDC is the MAT project, which focuses on inmates receiving a dose of Vivitrol before leaving SCDC. Forty inmates have been diagnosed with OUD and administered Vivitrol, and another 2,091 inmates received recovery capital and transitional services. Additionally, inmates have been trained and certified as peer support specialists, enabling them to conduct meetings “behind the fence”. This is a particularly noteworthy occurrence that demonstrates promising results for the project, as the average recidivism rate among the SCDC population is 21.9%.

DAODAS and the Department of Mental Health (DMH) continue to coordinate services and programming across agencies for citizens with co-occurring mental and substance use disorders (SUDs). In partnership with DMH, DAODAS created the toll-free 1-800-SC-HOPES line, designed for any South Carolinian who is experiencing a mental health or addiction concern that escalated due to the circumstances surrounding the COVID-19 pandemic. The 24/7 support line connects callers to licensed mental health and addictions counselors. The program also aims to specifically serve the state’s

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healthcare professionals, as they experience unique mental health issues while serving on the front lines of the pandemic. Although federal funding for this program is ending, it has helped to serve 6,805 citizens in need of SUD and mental health services.

DAODAS and the Department of Social Services (DSS) continue coordinating services and programming across agencies that address families involved in the DSS system for reasons related to alcohol and other drugs. A liaison has been working closely with child-serving agencies, and more importantly with hospitals and private providers, to develop a Family Wellness Support Plan for infants identified with substance exposure or neonatal abstinence syndrome to ensure coordinated care for the safety and well-being of the infants and families.

Ongoing partnerships include work with several hospital-based SUD systems in need of creating or expanding the availability of SUD treatment, to include MAT on inpatient units. Three hospital-based awards have been procured; two focus on addiction consult teams in an inpatient setting to assist patients who may have been diagnosed with an SUD using a peer support specialist, medication for opioid use disorder (MOUD), and a complex care manager to link the individual to comprehensive outpatient care. The third hospital won a grant to develop a plan of care to begin incorporating screening, assessment, and induction of MOUD with their service delivery options.

Additionally, DAODAS works with the Department of Veterans' Affairs (VA) to disseminate the Heritage Health Solutions Comprehensive Substance Misuse Program to South Carolina veterans and their families. The program includes use of Motivational Interviewing techniques, positive psychology, and harm reduction principles. DAODAS will continue working with local VA offices to build capacity for delivering intervention and recovery support services to veterans. The DAODAS/VA project is making a significant difference in the lives of veterans across the state. Since March 2021, through the partnership between Heritage Health Solutions, The Phoenix Center, and Upstate Warrior Solution, **996** veterans have been screened for OUD and **296** were referred to treatment. There have also been **50** engagements with veterans reporting suicidal ideation, and the appropriate mental health referrals were made. Since the inception of the program, **284** veterans have been assigned to and successfully engaged with a Certified Peer Support Specialist and accessed recovery support services. The Phoenix Center is now part of the South Carolina Veteran Coalition (powered by Combined Arms), which allows the agency to receive electronic referrals directly from a network of veterans service organizations. The Phoenix Center also includes veterans in its celebration of September as National Recovery Month, and Charleston's Ralph H. Johnson VA Health Care System, in coordination with Heritage Health, will also celebrate veterans in recovery during their first National Recovery Month celebration in September 2022.

Process Improvements

Two main process improvements include the implementation of a Substance Abuse Prevention and Treatment Block Grant (SABG) Re-allocation Planning Formula for the more equitable distribution of core federal funds among county alcohol and drug abuse authorities. A plan was implemented to re-allocate SABG funding based on a geographic needs assessment and services provided. The plan included providing a base amount for each county authority, then adding funds based on population, agreed-upon discharge service volume, and for those agencies serving a rural population. Implementation of this allocation method will continue in FY23.

A second process improvement is the implementation of a Grants Management System (GMS) that will enhance internal efficiency and ease contractors/sub-grantees' burden through funding and deliverables management. Such an electronic system of grants management increases the quality of prevention,

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intervention, treatment, and recovery services. The goal is to streamline interfaces for contractors/sub-grantees by consolidating multi-funder project source allocations. The GMS will go live in September 2022.

DAODAS also continued to review its contractual processes, employed two Medicaid Compliance Specialists, and created a strategic plan for collaboratively working with county alcohol and drug abuse authorities and opioid treatment programs (OTPs) to ensure compliance with Medicaid standards for both inpatient and outpatient services. The two specialists have audited over 200 patient charts, conducted over 30 trainings for providers, and developed relationships with Medicaid managed care organizations. The specialists' efforts have resulted in improved clinical documentation, better delivery of services, and enhanced relationships between providers and payors. DAODAS has also assumed State Opioid Treatment Authority duties in its Legal/Compliance Division to provide oversight of program staffing, services, and operations of the state's OTPs.

Funding and Grant Awards

During FY22, DAODAS worked with the Department of Health and Human Services to increase reimbursement rates by 15% for critical substance use disorder treatment services such as Alcohol & Drug Assessment, Individual Substance Use Disorder Counseling, Intensive Outpatient Treatment Services, and Detox Residential Services. The Peer Support Individual Session rate was increased by 40%.

DAODAS subcontracted 94% of the agency's total budget for programs and services, subcontracted 95% of all federal funding for programs and service, and subcontracted 94% of all state funds for programs and services.

For FY23, the agency is seeing a continuation of:

- \$18,138,356 in State Opioid Response (Year 4) funds to combat the opioid epidemic, of which \$2.8 million is slated for recovery services
- \$1,258,000 for Screening, Brief Intervention, and Referral to Treatment (SBIRT) grants (carry-forward and Year 4 funds)
- \$146,809 for a Medication-Assisted Drug Court Project
- \$850,000 for an Overdose Prevention grant

Risk Management and Mitigation Strategies

Throughout FY22, the department continued to improve the effectiveness of the public and private provider system, striving for long-term patient outcomes and recovery, even during an enduring national pandemic. System-wide, the goals for FY22 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 process that will enhance the performance of providers and ultimately achieve improved health outcomes for patients.

Should the agency not reach its goals of delivering efficient and effective substance use disorder (SUD) prevention, intervention, treatment, and recovery services, or should it fall short in meeting the opioid crisis head-on, the negative impact on the citizens of South Carolina would include an increase in overall mortality, increased healthcare costs, and a rise in addiction that would impact the workforce, the economic engine of the state, and ultimately the quality of life of all South Carolinians. Collateral impacts would include a rise in underage drinking and alcohol-related crashes, shortened life spans, and increased co-morbidities in chronic disease. Unfortunately, if the state does not address addiction and the opioid crisis, South Carolinians will continue to die of opioid overdoses at higher rates.

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DAODAS relies on its partnerships with the Governor’s Office, the General Assembly, sister state agencies, law enforcement, and the entire behavioral and medical healthcare community to mitigate these impacts. DAODAS suggests the following:

- Continued attention to the disease of addiction and the possible rise in SUDs and needed services if a medical marijuana bill is enacted. Funding should be increased to address diversion of medical marijuana and to provide for the prevention of youth access to marijuana and treatment for those who become addicted should laws be enacted making medical marijuana legal.
- Continued attention to the disease of addiction keeping pace with its southeast neighbors. Funding should be elevated to address increasing capacity as result of the opioid crisis, including stimulants for services, medications, training of prescribers, and working with first responders to reverse overdoses.
- A focus on DUI policy to decrease drunken driving and car crashes. South Carolina ranks in the “Top 5” states for alcohol-related highway car crashes and deaths. Mandatory server training should be enacted.
- A focus on telehealth expansion and allowing reimbursement for a range of medical and behavioral health services provided through this technology.
- A focus on crisis stabilization behavioral healthcare services to include mobile units to address this co-occurring population.

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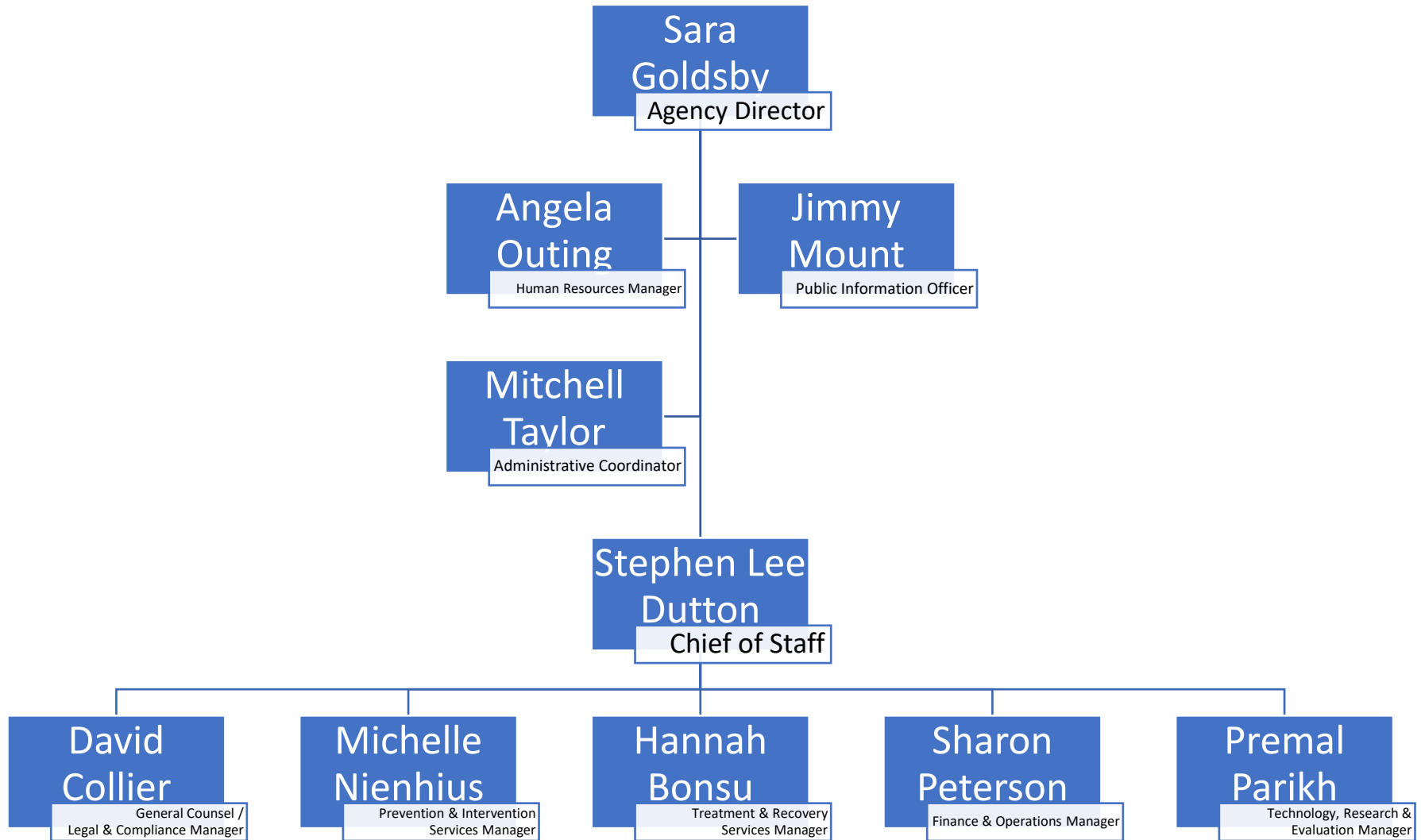
South Carolina Department of Alcohol and Other Drug Abuse Services

AGENCY CODE:

J200

SECTION:

037



FY2022

Reorganization and Compliance

as submitted for the Accountability Report by:
**J200 - DEPART. OF ALCOHOL & OTHER DRUG
 ABUSE SERVICES**

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Agency Mission

Adopted in: 2016

To ensure the availability and quality of a continuum of substance use services, thereby improving the health status, safety, and quality of life of individuals, families, and communities across South Carolina.

Agency Vision

Adopted in: 2016

DAODAS will be an innovative leader, facilitating effective services and compassionate care through a network of community partnerships and strategic collaborations.

Recommendations for reorganization requiring legislative change:

The General Assembly may be considering a reorganization of several health agencies, including DAODAS. DAODAS will work with the General Assembly and the Governor's Office on any legislation introduced and provide its advice throughout the legislative process.

Agency intentions for other major reorganization to divisions, departments, or programs to allow the agency to operate more effectively and efficiently in the succeeding fiscal year:

None

Significant events related to the agency that occurred in FY2022

Description of Event	Start	End	Agency Measures Impacted	Other Impacts
Legislative Audit Council Review	July	June	Increase the Number of Individuals who receive Prevention Services by 1%	The review focused on actions taken by the agency in response to the opioid epidemic; actions taken to address the Covid 19 pandemic; a review of gambling and non-opioid services; a review of administrative costs, management, and carry-forward funds; and a review of the agency's reimbursement process, communications and overall involvement with service providers.
Legislative Audit Council Review	July	June	Increase the Number of Unduplicated Patients Served by 5%	
Legislative Audit Council Review	July	June	To maintain the 5 Recovery Community Organizations across the state	
Legislative Audit Council Review	July	June	Increase Criminal Justice System referrals to SUD treatment to 14,000	

Legislative Audit Council Review	July	June	Provide additional Peer Support Trainings to increase the number of Peer Support Specialists by 5%	
Legislative Audit Council Review	July	June	Increase the Number of Patients receiving Opioid Disorder Treatment Services by 5%	
Legislative Audit Council Review	July	June	Increase the Number of Patients Receiving MAT Services by 5%	
Legislative Audit Council Review	July	June	Increase the number of Narcan administrations through LEON and ROLL by 5%	
Legislative Audit Council Review	July	June	Increase Effectiveness of Treatment Programs to 35% / Decrease Use	
Legislative Audit Council Review	July	June	Increase Effectiveness of Treatment Programs by 1% / Increase Employment	
Legislative Audit Council Review	July	June	Increase the number of uninsured individuals receiving state funded assessments by 5%	
Is the agency in compliance with S.C. Code Ann. § 2-1-220, which requires submission of certain reports to the Legislative Services Agency for publication online and the State Library? (See also S.C. Code Ann. § 60-2-20).				Yes
Reason agency is out of compliance: (if applicable)				
Is the agency in compliance with various requirements to transfer its records, including electronic ones, to the Department of Archives and History? See the Public Records Act (S.C. Code Ann. § 20-1-10 through 20-1-180) and the South Carolina Uniform Electronic Transactions Act (S.C. Code Ann. § 26-6-10 through 26-10-210).				Yes
Does the law allow the agency to promulgate regulations?				No
Law number(s) which gives the agency the authority to promulgate regulations:				
Has the agency promulgated any regulations?				No
Is the agency in compliance with S.C. Code Ann. § 1-23-120 (J), which requires an agency to conduct a formal review of its regulations every five years?				Yes
(End of Reorganization and Compliance Section)				

FY2022

Strategic Plan Results

as submitted for the Accountability Report by:

J200 - DEPART. OF ALCOHOL & OTHER DRUG ABUSE SERVICES

Goal 1 Create an Accessible Continuum of Effective Services within Each Community in 2019

Goal 2 Become a Leader in the Delivery of World Class Quality Services by 2020

Goal 3 Become a Leader in Collaboration and Integration

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
I.1 Reduce Youth and Young Adult use of Alcohol, Tobacco and other Drugs														
										State Objective: Healthy and Safe Families				
1.1.1	Increase the Number of Individuals who receive Prevention Services by 1%	5348456	5000000	5000000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Single Service Count	Impact / DAODAS Prevention Data System	DAODAS Division of Prevention	The public and local providers	0	4502.000000.000	Prevention Services provided to youth and adults reduces first use of among youth and arrests use among adults.
1.1.2	Maintain at least 250 DAODAS Supported Alcohol Enforcement Team Public Safety Checkpoints	376	250	685	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of local entities participating in checkpoints	DAODAS Mosaic Reporting	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	Schools and local providers	4502.000000.000	
1.1.3	Reduce Underage Drinking to 23% or under	23%	23%	23%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self- reported as having drank while being underage in the past 30 days/ total number surveyed by the SC YRBS	Youth Risk Behavior Survey	SC Department of Education	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and misuse.	Schools and local providers	4502.000000.000	
1.1.4	Maintain Underage Alcohol Buy Rate under 10%	10%	10%	10%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number of violations over the total number observed	Mosaic, Pacific Institute for Research and Evaluation	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse.	The public and local providers	4502.000000.000	Alcohol compliance buy rate: 467 buys/4,495 attempts. Forty-one counties completed alcohol compliance check forms.
1.1.5	Reduce Alcohol-involved Car Crashes by 1%	28%	30%	14%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	number of deaths in crashes where BAC is .08% or greater / total number of deaths in crashes	Fatality Analysis Reporting System (FARS) / NHTSA Database	Online database	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	The public and local providers	4502.000000.000	
1.1.6	Keep underage access to tobacco (Synar) to 10% or less	4%	10%	11%	Percent	equal to or less than	Federal Fiscal Year (October 1 - September 30)	Number of violations over the total number observed	Youth Access to Tobacco Study / DAODAS	DAODAS Division of Prevention	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	The public and local providers	4502.000000.000	Tobacco compliance check rate: 64 buys out of 601 attempts. 18 counties submitted tobacco compliance check forms.
1.1.7	Keep Underage Tobacco Use to 9% or less	7%	9%	6%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self- reported as having smoked a cigarette in the past 30 days/ total number surveyed by the SC YRBS	Youth Risk Behavior Survey	SC Department of Education	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	Schools and local providers	4502.000000.000	
I.2 Increase Access to a Continuum of Evidence Based Substance Use Disorder Services														
										State Objective: Healthy and Safe Families				
1.2.1	Increase the Number of Unduplicated Patients Served by 5%	42832	45000	44159	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services to South Carolinians of all ages increases recovery rates and impacts a range of morbidity and mortality statistics, as well as economic output indicators.	The public and local providers	4502.000000.000	

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.2	Increase the number of pregnant women who access treatment and recovery services by 5%	955	1005	625	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services and coordinated prenatal care impacts the Infant Mortality Rate, as well as increase recovery rates.	The public and local providers	4502.000000.000	Due to Due to the COVID -19 pandemic most pregnant people were uncomfortable accessing services due to fear of unborn baby contracting COVID through them. Most a few of our Residential facilities reduced their client census to protect client's safety. We quickly enhanced out telehealth services to increase services.
1.2.3	Increase Criminal Justice System referrals to SUD treatment to 14,000	12410	14000	12878	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of referrals	Internal Records	DAODAS EHR	Provision of treatment services to inmates and parolees increases changes of recovery and decreases recidivism.	SCDC	4502.000000.000	SCDC locked door their facilities due to COVID-19, staff were not allowed into the facilities therefore affecting referrals.
1.2.4	Provide additional Peer Support Trainings to increase the number of Peer Support Specialists by 5%	369	380	462	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of training offered	Internal Records	DAODAS Division of Treatment	Peer Support Services is an industry standard the assists individuals in learning recovery principles and maintain sobriety; increases recovery outcomes.	Recovery Community and Local Providers	4502.000000.000	
1.2.5	Maintain at least 3 Collegiate Recovery Organizations in the state	3	3	4	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal Records	DAODAS Division of Treatment	Expanding Recovery Programs increases recovery outcomes; impacts local communities	Colleges	4502.000000.000	
1.2.6	Maintain the number of unduplicated persons connecting to the Recovery Community organizations annually at 3,000 or more	3307	3000	14836	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated persons connecting	Internal Records	DAODAS Division of Treatment	Expanding Recovery Support for individuals connecting with recovery communities	Recovery Community and Local Providers	9806.550000X000	New RCOs (including a location in North Augusta reporting over 7,000 unique individuals alone) may partially account for the high increase. There are plans to assist with data tracking platforms for the RCOs, which can assist with accuracy of reporting and may provide more consistent/predictable trends for future reporting. Next year, DAODAS will utilize a new Grants Management and reporting system with goals to increase accuracy. As such, the FY2023 goal will be conservative for this transition and to account for any reporting errors for the first year of some RCO operations.
1.2.7	Increase the number of certified recovery residences to 10	8	10	11	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of residences	Internal Records	DAODAS Division of Treatment	Expanding access to certified recovery residences to increase recovery outcomes and impact local communities	Recovery Community and Local Providers	9806.550000X000	
1.2.8	Implement MAT diversion programs in 3 counties	0	3	2	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal records	DAODAS Division of Legal Compliance	Recovery Community and Local Providers	Expanding best practices with treatment courts increases recovery outcomes	9806.550000X000	
1.2.9	To obtain and maintain a 70% occupancy rate (over each 90-day period) in Oxford homes	70%	70%	80%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of beds occupied over total number of beds	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to transitional Housing such as an oxford house, increases recovery outcomes; impacts local communities and increases the ability for an individual to become gainfully employed.	4502.000000.000	

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.10	To maintain the 5 Recovery Community Organizations across the state	5	5	13	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Recovery Community Organizations open across the state	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to continuum of care	4502.000000X000	
1.3 Increase Services to Patients With Opioid Use Disorder													State Objective: Healthy and Safe Families	
1.3.1	Increase the Number of Patients receiving Opioid Disorder Treatment Services by 5%	6388	6700	5579	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	Due to COVID-19 most of our providers closed for a few months will we regroup and work provided guidelines and access to the use of Telehealth services, doxy.me, providing patient who have no access to telephone, loaner telephone and minutes to call in and engaged in telehealth treatment.
1.3.2	Increase the Number of Patients Receiving MAT Services by 5%	4712	5000	5753	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.3	Increase the Number of Professional First Responders Trained in Opioid Reversal Protocols using Narcan to 12,775	14545	15000	16459	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number trained	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	Law enforcement, first responders	9806.540000X000	Count was determined through current participants in LEON and ROLL programs in addition to new individuals trained over the past fiscal year.
1.3.4	Increase coordination with the S.C. Department of Corrections (SCDC) to enroll inmates in opioid recovery services by 10% as measured by number of inmates enrolled.	84	92	422	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of inmates enrolled	Internal Records	DAODAS Division of Treatment	Increases Treatment Referrals; Increases Recovery Prospects.	Correctional Facilities	9806.550000X000	
1.3.5	Increase the number of Prescription Drug Drop Boxes to 240	240	245	241	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of drop boxes	ECHO Grant	DAODAS Division of Prevention	Increases Prescription Drug Prevention Efforts; Increases Disposal of Opiate and Other Harmful Drugs; Decreases Demand for Opiates.	The public and local providers	9806.540000X000	Please note that the ECHO grant has ended. Currently, Just Plain Killers is the main data source.
1.3.6	Increase the number of Narcan administrations through LEON and ROLL by 5%	1105	800	1590	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of administrations through grant programs.	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	The public, first responders	9806.540000X000	
1.3.7	Maintain inducting at least 200 ED patients on buprenorphine in pilot sites per fiscal year.	180	200	800	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients served through pilot sites.	Internal Records	DAODAS Division of Treatment	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	Hospitals	9806.550000X000	
1.3.8	Maintain availability of the 6 Tele-Health providers across the state	6	6	31	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of providers	MAT Report	DAODAS Division of Treatment	Telehealth Services Increases Access, Diagnosis and Treatment options for a range of SUD patients and telehealth-capable healthcare entities.	local providers and hospitals	9806.550000X000	All providers have access to telehealth and use the platform to provide treatment services.

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.3.9	Increase the number of agencies that are designated by DAODAS to be community distributors of naloxone to 65	67	70	83	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of agencies	Internal Records	DAODAS Divisions of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	local providers	9806.540000X000	
2.1 Reduce Substance Use Disorder in South Carolina		State Objective: Public Infrastructure and Economic Development												
2.1.1	Increase Effectiveness of Treatment Programs to 35% / Decrease Use	36%	35%	35%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently use substances over all those who are discharged from treatment	Electronic Health Record - Local Provider Report	DAODAS EHR	Provides Coverage for uninsured individuals increasing access to treatment and recovery assets.	The public and local providers	4502.000000.000	
2.1.2	Increase Effectiveness of Treatment Programs by 1% / Increase Employment	6%	10%	58%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently have employment over all those who are discharged from treatment	National Outcome Measures	DAODAS EHR	Impacts individual and family economic stability; Impacts South Carolina economic outputs.	The public and local providers	4502.000000.000	
2.1.3	Maintain 90 day length-of-stay for 50% of individuals utilizing level 1 outpatient services	55%	50%	42%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing 90 day length of stay / total number of unduplicated patients	Electronic Health Record - Local Provider Report / Monthly	DAODAS EHR	Longer treatment stays leads to better clinical outcomes	The public and local providers	4502.000000.000	
2.1.4	Maintain percentage of patients completing treatment plan of at least 40%	43%	40%	43%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing treatment / total number of unduplicated patients	DAODAS FY Discharge Outcomes Report	DAODAS EHR	Completion of treatment leads to lower rates of re-admission.	The public and local providers	4502.000000.000	
2.2 Workforce Development		State Objective: Public Infrastructure and Economic Development												
2.2.1	Increase training opportunities in evidence based programs in prevention, treatment and recovery by 5%	29	31	39	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of trainings	State Baseline Measure	Administration	Training and Retention of qualified counselor are essential to prevention, treatment and recovery efforts.	local providers and state partners	4502.000000.000	
2.2.2	Maintain having at least 70 individuals certified to provide preventative services in South Carolina	70	70	84	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Prevention Professionals and Advocates (SCAPPA)	Online database	Training and Retention of qualified counselors are essential to prevention and overall efforts.	local providers and state partners	4502.000000.000	
2.2.3	Maintain the number of individuals certified to provide treatment services in South Carolina to at least 1,000	1000	1000	2955	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Alcoholism and Drug Abuse Counselors (SCAADAC)	Online database	Training and Retention of qualified counselors are essential to treatment and overall efforts.	local providers and state partners	4502.000000.000	
3.1 Increase Integration Efforts with Local and State Partners		State Objective: Government and Citizens												
3.1.1	Increase the number of state and local private and public partnerships for targeting substance use disorder to 75	75	75	85	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of partnerships	Internal Records	Administration	Building a strong continuum of prevention, treatment and recovery providers is essential to increasing access to recovery and maintaining sobriety.	local providers and state partners	9806.550000X000	
3.2 Increase Services to the Uninsured		State Objective: Government and Citizens												
3.2.1	Increase the number of uninsured individuals receiving state funded assessments by 5%	5546	5800	8093	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of assessments	Entered Electronic Health Record / Monthly	DAODAS EHR	Provides the department a measure of services to the uninsured and underinsured; a federal priority.	The public and local providers	4502.000000.000	

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
3.3 Increase Integration with Physical and Specialty Healthcare Providers		State Objective: Government and Citizens												
3.3.1	Use Screening, Brief Intervention and Referral to Treatment (SBIRT) as the standard of care at targeted Emergency Department Sites to fully screened (FS) 500 individuals for SUDs annually	850	500	408	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Single Service Count	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	During 2021, SC SBIRT had restricted access to hospital EDs due to COVID-19. As these restrictions were removed full access was regained and additional rural hospital emergency departments contracted with DAODAS to expand the SBIRT to 4 additional counties.
3.3.2	Use SBIRT as the standard of care at targeted Emergency Department Sites to refer 100 individuals to treatment (RT) for SUDs annually	355	100	82	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of referrals	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	During 2021, SC SBIRT had restricted access to hospital EDs due to COVID-19. The inability to conduct SBIRT screenings in turn impacted the number of patients identified as needing a "referral to treatment". As these restrictions were removed full access to emergency departments was regained and additional rural hospital EDs contracted with DAODAS to expand the SBIRT services to 4 additional counties, (Horry, Aiken, Greenwood and Oconee).

FY2023

Strategic Plan Development

as submitted for the Accountability Report by:

J200 - DEPART. OF ALCOHOL & OTHER DRUG ABUSE SERVICES

Goal 1 Create an Accessible Continuum of Effective Services within Each Community in 2019

Goal 2 Become a Leader in the Delivery of World Class Quality Services by 2020

Goal 3 Become a Leader in Collaboration and Integration

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.1.1	Increase the Number of Individuals who receive Prevention Services by 1%	5,000,000.00	5,000,000.00	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Single Service Count	Impact / DAODAS Prevention Data System	DAODAS Division of Prevention	The public and local providers	0	4502.000000.000	
1.1.2	Maintain at least 250 DAODAS Supported Alcohol Enforcement Team Public Safety Checkpoints	685	250	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of local entities participating in checkpoints	DAODAS Mosaic Reporting	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	Schools and local providers	4502.000000.000	
1.2.1	Increase the Number of Unduplicated Patients Served by 5%	44159	46367	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services to South Carolinians of all ages increases recovery rates and impacts a range of morbidity and mortality statistics, as well as economic output indicators.	The public and local providers	4502.000000.000	
1.2.2	Increase the number of pregnant women who access treatment and recovery services by 5%	625	660	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services and coordinated prenatal care impacts the Infant Mortality Rate, as well as increase recovery rates.	The public and local providers	4502.000000.000	
1.2.3	Increase Criminal Justice System referrals to SUD treatment to 14,000	12878	14000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of referrals	Internal Records	DAODAS EHR	Provision of treatment services to inmates and parolees increases changes of recovery and decreases recidivism.	SCDC	4502.000000.000	
1.2.4	Provide additional Peer Support Trainings to increase the number of Peer Support Specialists by 5%	462	490	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of training offered	Internal Records	DAODAS Division of Treatment	Peer Support Services is an industry standard that assists individuals in learning recovery principles and maintain sobriety; increases recovery outcomes.	Recovery Community and Local Providers	4502.000000.000	
1.2.5	Maintain at least 3 Collegiate Recovery Organizations in the state	4	3	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal Records	DAODAS Division of Treatment	Expanding Recovery Programs increases recovery outcomes; impacts local communities	Colleges	4502.000000.000	
1.2.6	Maintain the number of unduplicated persons connecting to the Recovery Community organizations annually at 3,500 or more	14836	3500	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated persons connecting	Internal Records	DAODAS Division of Treatment	Expanding Recovery Support for individuals connecting with recovery communities	Recovery Community and Local Providers	9806.550000X000	

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.7	Increase the number of certified recovery residences to 15	11	15	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of residences	Internal Records	DAODAS Division of Treatment	Expanding access to certified recovery residences to increase recovery outcomes and impact local communities	Recovery Community and Local Providers	9806.550000X000	
1.2.8	Implement MAT diversion programs in 3 counties	2	3	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal records	DAODAS Division of Legal Compliance	Recovery Community and Local Providers	Expanding best practices with treatment courts increases recovery outcomes	9806.550000X000	
1.2.10	To maintain the 10 Recovery Community Organizations across the state	13	10	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Recovery Community Organizations open across the state	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to continuum of care	4502.000000.000	
1.3.1	Increase the Number of Patients receiving Opioid Disorder Treatment Services by 5%	5579	5900	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.2	Increase the Number of Patients Receiving MAT Services by 5%	5753	6040	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.3	Increase the Number of Professional First Responders Trained in Opioid Reversal Protocols using Narcan to 12,775	16459	1750	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number trained	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	Law enforcement, first responders	9806.540000X000	
1.3.4	Increase coordination with the S.C. Department of Corrections (SCDC) to enroll inmates in opioid recovery services by 10% as measured by number of inmates enrolled.	422	440	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of inmates enrolled	Internal Records	DAODAS Division of Treatment	Increases Treatment Referrals; Increases Recovery Prospects.	Correctional Facilities	9806.550000X000	
1.3.5	Increase the number of Prescription Drug Drop Boxes to 245	241	245	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of drop boxes	Just Plain Killers	DAODAS Division of Prevention	Increases Prescription Drug Prevention Efforts; Increases Disposal of Opiate and Other Harmful Drugs; Decreases Demand for Opiates.	The public and local providers	9806.540000X000	
1.3.6	Increase the number of Narcan administrations through LEON and ROLL by 5%	1590	1670	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of administrations through grant programs.	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	The public, first responders	9806.540000X000	

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.3.7	Maintain inducting at least 500 ED patients on buprenorphine in pilot sites per fiscal year.	800	500	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients served through pilot sites.	Internal Records	DAODAS Division of Treatment	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	Hospitals	9806.550000X000	
1.3.8	Maintain availability of the 31 Tele-Health providers across the state	31	31	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of providers	MAT Report	DAODAS Division of Treatment	Telehealth Services Increases Access, Diagnosis and Treatment options for a range of SUD patients and telehealth-capable healthcare entities.	local providers and hospitals	9806.550000X000	
1.3.9	Increase the number of agencies that are designated by DAODAS to be community distributors of naloxone to 90	83	90	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of agencies	Internal Records	DAODAS Divisions of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	local providers	9806.540000X000	
2.2.1	Increase training opportunities in evidence based programs in prevention, treatment and recovery by 5%	39	41	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of trainings	State Baseline Measure	Administration	Training and Retention of qualified counselor are essential to prevention, treatment and recovery efforts.	local providers and state partners	4502.000000.000	
2.2.2	Maintain having at least 70 individuals certified to provide preventative services in South Carolina	84	70	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Prevention Professionals and Advocates (SCAPPA)	Online database	Training and Retention of qualified counselors are essential to prevention and overall efforts.	local providers and state partners	4502.000000.000	
2.2.3	Maintain the number of individuals certified to provide treatment services in South Carolina to at least 2,000	2955	2000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Alcoholism and Drug Abuse Counselors (SCAADAC)	Online database	Training and Retention of qualified counselors are essential to treatment and overall efforts.	local providers and state partners	4502.000000.000	
3.1.1	Increase the number of state and local private and public partnerships for targeting substance use disorder to 85	85	85	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of partnerships	Internal Records	Administration	Building a strong continuum of prevention, treatment and recovery providers is essential to increasing access to recovery and maintaining sobriety.	local providers and state partners	9806.550000X000	
3.2.1	Increase the number of uninsured individuals receiving state funded assessments by 5%	8093	8500	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of assessments	Entered Electronic Health Record / Monthly	DAODAS EHR	Provides the department a measure of services to the uninsured and underinsured; a federal priority.	The public and local providers	4502.000000.000	
3.3.1	Use Screening, Brief Intervention and Referral to Treatment (SBIRT) as the standard of care at targeted Emergency Department Sites to fully screened (FS) 500 individuals for SUDs annually	408	500	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Single Service Count	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
3.3.2	Use SBIRT as the standard of care at targeted Emergency Department Sites to refer 100 individuals to treatment (RT) for SUDs annually	82	100	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of referrals	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	

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Budget Data

as submitted for the Accountability Report by:

J200 - DEPART. OF ALCOHOL & OTHER DRUG ABUSE SERVICES

State Funded Program No.	State Funded Program Title	Description of State Funded Program	(Actual) General	(Actual) Other	(Actual) Federal	(Actual) Total	(Projected) General2	(Projected) Other	(Projected) Federal4	(Projected) Total
0100.000000.000	Administration	Provides program and policy guidance to all divisions of the agency.	\$ 335,497.44	\$ 94,032.28	\$ 306,194.75	\$ 735,724.47	\$ 259,484.00	\$ 98,000.00	\$ 195,149.00	\$ 552,633.00
0503.150000X000	State Block Grant	Enabling legislation (Section 44-49-10) (D) directs the agency to develop a block grant mechanism to distribute funding to the local alcohol and drug abuse authorities.	\$ 174,474.00	\$ -	\$ -	\$ 174,474.00	\$ 174,474.00	\$ -	\$ -	\$ 174,474.00
0503.200000X000	Local Salary Supplement	Section 8-11-945 of the code defines local health care providers who include local alcohol and drug abuse providers. When state employees receive a pay raise, those employees in the local agencies that are paid by a state dollar also receive that same pay raise.	\$ 4,118,502.71	\$ -	\$ -	\$ 4,118,502.71	\$ 4,132,618.00	\$ -	\$ -	\$ 4,132,618.00
0508.010000.000	Finance & Operations	Provides budget, financial and operational support to the agency's mission.	\$ 7,617,498.43	\$ 198,377.75	\$ 46,730,170.54	\$ 54,546,046.72	\$ 18,316,455.55	\$ 987,908.40	\$ 68,271,502.00	\$ 87,575,865.95
3501.010000.000	Services	This state funded program no longer exists as an option in our line item budget.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4502.000000.000	Programs	Funds are considered Aid To Entities and include pass through funding to Prevention, Treatment and Recovery services provided in the local alcohol and drug authorities.	\$ 171,761.03	\$ 684,749.57	\$ 6,960,635.07	\$ 7,817,145.67	\$ 205,300.00	\$ 660,788.00	\$ 7,598,502.00	\$ 8,464,590.00
6001.000000.000	Information Technology	Provides direct assistance in working with the agency's computer hardware, DSIT and with local data systems.	\$ 123,401.26	\$ 153,851.07	\$ 642,594.97	\$ 919,847.30	\$ 128,363.00	\$ 239,713.00	\$ 753,639.00	\$ 1,121,715.00
6501.000000.000	Legal & Compliance	Managse contracts and compliance with those contracts.	\$ 96,280.83	\$ 166,133.28	\$ 96,567.37	\$ 358,981.48	\$ 128,424.00	\$ 242,650.00	\$ 278,445.00	\$ 649,519.00
9500.050000.000	State Employer Contributions	Self Explanatory	\$ 270,717.80	\$ 177,222.79	\$ 576,725.13	\$ 1,024,665.72	\$ 330,367.00	\$ 194,478.00	\$ 774,817.00	\$ 1,299,662.00
9806.540000X000	Prescription Drug Overdose Prevention	Federal grant awarded to assist in the distribution of Narcan and training of front line responders in reversing Opioid deaths.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9806.550000X000	Opioid Response And Addiction Efforts	Federal grant awarded to address the Opioid Epidemic in South Carolina that funds a full range of medications, prevention, treatment and recovery services from Opioid Use Disorders.	\$ 275,343.99	\$ -	\$ -	\$ 275,343.99	\$ -	\$ -	\$ -	\$ -
9822.080000X000	Local County Staff Retention		\$ 2,500,000.00	\$ -	\$ -	\$ 2,500,000.00	\$ -	\$ -	\$ -	\$ -
9812.110000X000	Palmetto Foundation Prev	Prevention Curriculum School Based	\$ 50,000.00	\$ -	\$ -	\$ 50,000.00	\$ -	\$ -	\$ -	\$ -
9815.120000X000	Rubicon Drug & Alcohol	Infrastructure - Renovation	\$ 75,000.00	\$ -	\$ -	\$ 75,000.00	\$ -	\$ -	\$ -	\$ -
9817.090000X000	Aiken Center Renovation	Infrastructure - Renovation	\$ 380,000.00	\$ -	\$ -	\$ 380,000.00	\$ -	\$ -	\$ -	\$ -
9818.100000X000	Trinity Behavioral Health Center	Infrastructure - Building	\$ 500,000.00	\$ -	\$ -	\$ 500,000.00	\$ -	\$ -	\$ -	\$ -
9819.140000X000	Westview Behavioral Health	Infrastructure - Renovation- Newberry	\$ 31,000.00	\$ -	\$ -	\$ 31,000.00	\$ -	\$ -	\$ -	\$ -
9822.130000X000	Chesterfield Alpha Center	Infrastructure - Renovation	\$ 250,000.00	\$ -	\$ -	\$ 250,000.00	\$ -	\$ -	\$ -	\$ -

FY2022

Legal Data

as submitted for the Accountability Report by:

J200 - DEPART. OF ALCOHOL & OTHER DRUG ABUSE SERVICES

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2022
§ 24-13-1920	State	Statute	Directs DAODAS to establish of program of intervention, prevention and treatment for offenders and directs the department provide staff from funds appropriate annually by the general assembly.	Requires a service	The description of the law is self explanatory.	No Change
§ 24-13-1940	State	Statute	Directs cooperation between DAODAS and the DOC Director to develop policies to operate the center, fund the management of the center, including private contract, lease buildings, develop standards for counseling and disciplinary rules for residents of the center.	Requires a manner of delivery		No Change
§ 44-49-10	State	Statute	Establishes the South Carolina Department of Alcohol and Other Drug Abuse Services as a department of the Executive Branch.	Not related to agency deliverable	Establishes the agency.	No Change
§ 44-49-20	State	Statute	Names that the Director will be named by the Governor of the State.	Not related to agency deliverable		No Change
§ 44-49-40	State	Statute	Directs the agency to perform research on drugs and alcohol abuse.	Not related to agency deliverable		No Change
§ 44-49-50	State	Statute	Assigns an attorney to the department through the Attorney General's Office	Not related to agency deliverable		No Change
§ 44-49-60	State	Statute	Names an Adult Education Supervisor for the prevention of alcoholism.	Requires a service		No Change
§ 44-49-70	State	Statute	Names As Adult Prevention Supervisor.	Requires a service		No Change
§ 44-49-80	State	Statute	Establishes a Program for the intervention, prevention and treatment for the public schools of the state.	Requires a service		No Change
§ 56-1-1320	State	Statute	A first offender also includes the mandatory completion of ADSAP through DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-1-1330	State	Statute	A provisional driver's license also includes the mandatory completion of ADSAP through DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-1-2110	State	Statute	Requires a drug and alcohol assessment certified by a Substance Abuse Professional as certified by DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-1-385	State	Statute	If an individual petitions a court to reinstate a permanent drivers license, he or she shall have to complete and ADSAP program as administered through DAODAS	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2933	State	Statute	Driving with Unlawful Concentrations - enrollment in ADSAP is Mandatory	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2941	State	Statute	Failure to Follow Ignition Interlock Rules Require the submission to an ADSAP Assessment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2950	State	Statute	Implied Consent Failure	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2990	State	Statute	Suspension of a Driver's Licensed / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2022
§ 61-12-20	State	Statute	Directs county councils to designate an agency or organization to a appoint a governing body to right a county plan for a program to alcohol and drug abuse planning for that county.	Not related to agency deliverable		No Change
§ 61-12-30	State	Statute	Requires Citizen Participation on the board of the local agency for citizen input.	Not related to agency deliverable		No Change
§ 61-12-40	State	Statute	Designates how revenue funds must be spend.	Distribute funding to another entity		No Change
§ 61-12-50	State	Statute	Requires annual reports and audits to DAODAS for review.	Requires a manner of delivery		No Change
§ 61-12-60	State	Statute	Allows counties to join together to designate a single authority.	Not related to agency deliverable		No Change
§ 61-12-70	State	Statute	These funds are considered supplemental to increase local, state or federal funding.	Requires a manner of delivery		No Change
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 117.120.	State	FY22-23 Proviso	Directs the agency to work with certain entities in addressing the opioid crisis and specifically directs the agency to offer a collegiate recovery program and an MAT Diversion Program.	Distribute funding to another entity	Proviso Explanation is Self Explanatory. (Previously Proviso 117.142)	Redesignated
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.1.	State	FY22-23 Proviso	Allows the agency to charge training and conference fees to support educational and professional development initiatives.	Requires a service	Report our agency must/may provide	Reenacted
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.2.	State	FY22-23 Proviso	Directs the agency to provide gambling addiction services, including referral services and a mass communication campaign, pending appropriations.	Requires a service	Local Substance Use Disorder agencies provide gambling addiction programs.	Reenacted
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.3.	State	FY22-23 Proviso	Directs the agency to transfer \$1.9 million to the Department of Health and Human Services for the purposes of Medicaid Match.	Not related to agency deliverable		Reenacted
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.4.	State	FY22-23 Proviso	Allows the Department to carry forward from prior fiscal years into the current fiscal year unexpended funds in excess of the 10% of the agency's general fund appropriations.	Not related to agency deliverable		Reenacted
Code of Laws of South Carolina 1976, as amended, Section 1.30-20.	State	Statute	Implements Name Change	Not related to agency deliverable		No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2990.	State	Statute	Mandated Treatment for Convicted DUI Offenders	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 59-150-230 (i).	State	Statute	Authorizes funding for Gambling Addiction Services	Requires a manner of delivery		No Change
Code of Laws of South Carolina, 1976, as amended, Section 59-150-230 (i).	State	Statute	Directs the General Assembly to Fund DAODAS for Gambling Addiction Programs	Distribute funding to another entity		No Change
Code of Laws of South Carolina, 1976, as amended, 44-52-10 et. seq.	State	Statute	Involuntary commitment procedures for those experiencing substance abuse.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to work with local mental health offices to implement the service.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 16-17-500.	State	Statute	Courts may order minors to undergo a tobacco education program certified by DAODAS.	Requires a service	Local Substance Use Disorder agencies provide tobacco cessation programs.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 16-25-20 (G).	State	Statute	Criminal Domestic Violence / Offender Referral to Substance Abuse programs Coordinated through DAODAS.	Requires a service	The description of the law is self explanatory.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 24-13-1910 et.seq.	State	Statute	Coordination with the Department of Corrections (DOC) for Substance Abuse Services delivered to rehabilitate alcohol and drug offenders, as determined by DOC.	Requires a service		No Change
Code of Laws of South Carolina, 1976, as amended, Section 44-49-10 et.seq.	State	Statute	Agency Enabling Legislation	Not related to agency deliverable		No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-1-286,	State	Statute	Underage DUI / Zero Tolerance / Administrative License Revocation / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2022
Code of Laws of South Carolina, 1976, as amended, Section 56-1-400	State	Statute	Requires mandatory treatment for Ignition Interlock Drivers who fail to follow the Ignition Interlock Law.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2930 et. seq.	State	Statute	DUI / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2933 et. seq.	State	Statute	DUAC / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2951 et. seq.	State	Statute	Refusal to Submit to BAC / Administrative License Revocation / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 61-12-10 et.seq.	State	Statute	Local Excise Tax Funding Distribution / County Planning Required	Distribute funding to another entity	Local Substance Abuse Disorder must submit County Strategic Plans for approval by DAODAS to receive this funding.	No Change
Code of Laws of South Carolina, as amended, 1976, Section 56-1-2110 (G)	State	Statute	Requires individuals who have a commercial driver's license suspended due to a failed urine screen, to be assessed and treated, if necessary, by a DAODAS substance abuse professional.	Requires a service	DAODAS Contracts with Local Substance Use Disorder agencies to provide substance use programming to those holding a CDL.	No Change
Code of Laws of South Carolina 1976, as amended, Section 1-30-10.	State	Statute	Establishes the South Carolina Department of Alcohol and Other Drug Abuse Services as a department of the Executive Branch.	Not related to agency deliverable		No Change
South Carolina Code of Laws, 1976, as amended, Section 16-25-320 et.seq.	State	Statute	Designates the department as a member of the Domestic Violence Advisory Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 17-22-510.	State	Statute	Directs the South Carolina Prosecution Commission to discuss administrative requirements of an Alcohol Education Program operated by local solicitors.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 20-7-8920.	State	Statute	Requires underage individuals who violated underage drinking laws to attend a certified alcohol intervention program as certified by the department.	Requires a service	DAODAS Contracts with Local Substance Use Disorder agencies to offer alcohol intervention programming.	No Change
South Carolina Code of Laws, 1976, as amended, Section 43-35-560.	State	Statute	Designates the department as a member of the Vulnerable Adult Fatality Review Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 44-107-80.	State	Statute	Upon request, requires DAODAS to provide technical assistance to a state agency to assist in implementing the state Drug Free Workplace Act.	Requires a service		No Change
South Carolina Code of Laws, 1976, as amended, Section 44-53-490.	State	Statute	Requires the Department of Health and Environmental Control to submit an annual report to DAODAS on inspected practitioners who dispense or distribute controlled substances.	Requires a service		No Change
South Carolina Code of Laws, 1976, as amended, Section 59-1-380(D)	State	Statute	Requires the Department to work with DHEC and the Department of Education to develop tobacco exclusion policies for all school districts.	Requires a service	The report has not been provided to DAODAS.	No Change
South Carolina Code of Laws, 1976, as amended, Section 61-4-1515(A)(8).	State	Statute	Requires breweries and micro-distilleries to go through a DAODAS approved merchant education program to train employees who serve beer or wine for on-premise consumption.	Requires a service	The department contracts with local SUD providers to provide this prevention program.	No Change
South Carolina Code of Laws, 1976, as amended, Section 61-6-480.	State	Statute	Requires merchant education certified through the department for vendors who violate underage drinking laws.	Requires a service	DAODAS provides merchant education through its local substance use disorder providers.	No Change
South Carolina Code of Laws, 1976, as amended, Section 63-11-1930.	State	Statute	Designates the department as a member of the State Child Fatality Advisory Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2022
South Carolina Code of Laws, 1976, as amended, Section 63-7-1690 (A)(1).	State	Statute	Allows a court of competent jurisdiction to order DAODAS approved treatment services before the return of a child to a home, if the child has been removed by DSS.	Requires a service	Local Substance use Disorder agencies provide treatment services.	No Change
US Public Law 102-321	Federal	Statute	Establishes the federal Substance Abuse Prevention and Treatment Block Grant with administration requirements.	Distribute funding to another entity		No Change
US Public Law 91-616 of 1970.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change
US Public Law 92-255 of 1972.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change

FY2022

Services Data

as submitted for the 2022 Accountability Report by:

J200 - DEPART. OF ALCOHOL & OTHER DRUG ABUSE SERVICES

Description of Service	Description of Direct Customer	Customer Name	Others Impacted by Service	Division or major organizational unit providing the service.	Description of division or major organizational unit providing the service.	Primary negative impact if service not provided.	Changes made to services during FY2022	Summary of changes to services
Ensuring the balance of alcohol prevention, intervention, treatment and recovery services are contracted to public or private providers with an emphasis on the local SUD providers for direct delivery.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Ensuring the balance of alcohol prevention, intervention, treatment and recovery services are contracted to private providers with an emphasis on the local SUD providers for direct delivery.	Finance	Should the agency not reach its goals of delivering efficient and effective prevention, intervention, treatment, and recovery services, or should it fall short in meeting the opioid crisis head-on, the negative impact on the citizens of South Carolina would include an increase in overall mortality, increased healthcare costs, and a rise in addiction that would impact the workforce and the economic engine of the state, and ultimately the quality of life of all South Carolinians.	Add	The agency contracted with hospitals for screening, brief intervention and referral to local alcohol and drug providers, as well as contracting with certain hospitals to induct opioid substance use disorder clients into medication assisted treatment. Additionally, the agency expanded its partnerships with recovery community organizations.
Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Programs	Collateral impacts would include a rise in underage drinking and alcohol-related crashes, shortened life spans, and increased co-morbidities in chronic disease.	Amend	The agency provided additional TA to OTPs through a contract with Medicaid.
Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Compliance	See explanation above.	No Change	
Provides guidance on IT issues and HIPPA compliance regulations.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides guidance on IT issues and HIPPA compliance regulations.	Information Technology	See explanation above.	No Change	
Distribution of Fentanyl Strips	Persons using legal or illegal opioids.s.	Individuals using legal or illegal opioids.	Family, Caregivers, Front Line Responders, Emergency Room Personnel, Hospitals.	Prevention Department, DAODAS	Preventing the use of alcohol, tobacco and other drugs.	Possibility of Overdose or Death of the individual using illicit or prescribed drugs.	Amend	MAT drug courts in another judicial circuit.
Drug Courts	Persons charged with non-violent crimes.	Individuals who undergo treatment to forego a jail or prison sentence.	Family, Law Enforcement, Courts, Jails and Prisons	Compliance and Treatment Divisions, DAODAS	Ensuring adherence to grants and contracts. Treating substance use disorder.	Increase the possibility of an individual going to jail or prison.	No Change	
Rapid Response Opioid Notifications	Communities who are experiencing high overdose rates.	The 46 Counties of South Carolina	Family, Caregivers, Front Line Responders, Emergency Room Personnel, Hospitals, Mortuaries	Administration, DAODAS	Sets the agency policy and programmatic direction.	Possibility of Overdose or Death of individuals who use legal or illicit opioids..	No Change	
Fetal Alcohol Syndrome Disorder Prevention	Pregnant Women who have substance use disorder diagnoses.	Pregnant Women who have substance use disorder diagnoses.	Family, Mothers, Law Enforcement, Medical Personnel, Hospitals	Treatment Division / Administration, DAODAS	Treats individuals that have substance use disorders.	Increases the possibility that babies may be born with fetal alcohol syndrome.	Amend	Expanded programmatic and partnerships.
Veterans Services	Service Veterans	Veterans who are suffering from substance use or co-occurring diagnoses	Family, Social Services, Medical Service Personnel	Treatment Division, DAODAS	Treats individuals that have substance use disorders.	Increases the possibility that veterans will not have access to substance use disorder services.	No Change	

FY2022

Partnerships Data

as submitted for the 2022 Accountability Report by:

J200 - DEPART. OF ALCOHOL & OTHER DRUG ABUSE SERVICES

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Private Business Organization	3 Hospitals	Provides medical care to opioid involved patients.	Add
Federal Government	Atlanta Carolinas High Intensity Drug Trafficking Area	Identifies areas of the death with high drug trafficking areas and opioid hot spots	No Change
Federal Government	Atlanta- Carolinas High Intensity Drug Trafficking Area	Works with the Opioid Emergency Response Team to ID high drug trafficking areas and opioid hot spots in South Carolina.	No Change
State Government	Birth Outcomes Initiative (BOI)	Development of policy to reduce adverse birth outcomes.	No Change
Higher Education Institute	Colleges and Universities	DAODAS is partnering with colleges and universities to develop recovery environments on college campuses in South Carolina.	Add
State Government	DAODAS Staff	Integral to achieving agency vision, mission and goals.	Add
State Government	Department of Probation, Parole and Pardon (PPP)	DAODAS is partnering with the agency to provide alcohol and substance abuse training to agents employee at PPP	No Change
State Government	Department of Veterans' Affairs	DAODAS is partnering with Veterans Affairs to disseminate the Heritage Solutions Substance Misuse Program to veterans and their families. The program focuses on motivational interviewing techniques, positive psychology and harm reduction principles.	No Change
State Government	DHEC	Major Health Partner / Opioid Emphasis	No Change
State Government	DMH	Major Client Partner / Policy Development	Amend
State Government	DSS	Major Client Partner	No Change
Non-Governmental Organization	First Responders (EMS / Police / Fireman)	Provides health care services, first on the scene to address opioid emergencies.	Add
State Government	Governor's Office	Provides Leadership / Cabinet Agency	No Change
State Government	Healthy Outcomes Program	Targeting chronic disease among Medicaid recipients.	No Change
State Government	LLR	Works closely with the agency to ensure that regulations governing the distribution of certain scheduled drugs is compliant with state law and medical protocols.	No Change
Local Government	Local SUD Providers / Behavioral Health Association of South Carolina (BHSA)	Delivers direct SUD services to individuals, families and communities.	No Change
State Government	Medicaid (DHHS)	Major Payor of SUD Services / Policy Development	No Change
Non-Governmental Organization	Mothers Against Drug Drivers (MADD)	Works to decrease DUIs.	No Change
Higher Education Institute	MUSC	Assists the agency in proving services to train physicians in the art of prescribing MAT medicines and connecting these physicians to opioid treatment providers, plus provide ongoing training and evaluation.	No Change
Professional Association	National Alliance for Recovery Residences	DAODAS is working with NARR to expand the availability of well-operated, ethical and supportive housing across the state and is currently performing a gap analysis in the state build a more true picture of how many exist in South Carolina.	Amend
Non-Governmental Organization	National Association of State Alcohol and Drug Abuse Directors	National Substance Abuse Policy Organization	No Change
Private Business Organization	Opioid Treatment Providers	Provides Medication Assisted Treatment (Methadone) to opiate addicted individuals	Add
Non-Governmental Organization	Oxford House, Inc.	Agency Partner to increase recovery housing options throughout South Carolina.	Amend
Non-Governmental Organization	Pacific Institute for Research and Evaluation (PIRE)	Assists in the development, implementation and evaluation of prevention programs across South Carolina.	No Change
Professional Association	Primary and Emergency Room Physicians	Identifying SUD Patients	No Change
Non-Governmental Organization	Recovery Community Organizations	DAODAS has partnered to expand recovery efforts statewide.	Add
Non-Governmental Organization	Roper St. Francis / Prisma / MUSC	Engaged with 3 hospitals to induct opioid addicted clients within their inpatient units to medication assisted treatment (MAT)	No Change
Professional Association	Rural Health Community Opioid Consortia	DAODAS has partnered to address access to MAT in rural areas.	No Change
Federal Government	SAMHSA	Federal Block Grant Authority	No Change
Non-Governmental Organization	SC Hospital Association	To support its member hospitals in creating a world-class health care delivery system for the people of South Carolina by fostering high quality patient care and serving as effective advocates for the hospital community.	No Change

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
State Government	SC Joint Council on Children and Adolescents	Develop a coordinated system of care that promotes the efficient provision of effective services for children, adolescents, and their families.	No Change
State Government	SCDC	Major Client Partner	No Change
State Government	SLED	Works closely with SLED as co-chair of the State Opioid Emergency Crisis Team as well as the reapid response team to identify emergent high use opioid use in those areas of the state with sudden high overdose rates.	No Change
Local Government	Solicitors	DAODAS is partnering with local solicitors to implement MAT Drug Courts.	Add
Professional Association	South Carolina Alliance for Recovery Communities	DAODAS is working with the state affiliate focused on bringing standards, credibility, ethics and education to the state's recovering communities.	Amend
Non-Governmental Organization	South Carolina Behavioral Health Care Coalition	Implement a multi-sector coalition to improve the availability and access to mental health and/or substance use disorders services for all South Carolina residents.	Amend
Professional Association	South Carolina Favor	Provides Peer Support training across the state, while also providing peer support recovery services to the citizens of the upstate of South Carolina.	Amend
State Government	South Carolina General Assembly	Appropriates funding for SUD Services.	Amend
State Government	South Carolina Leadership Academy for Tobacco Free Recovery	The leadership academy includes a range of federal, state and local advocates in the fields of mental health and substance use disorder which are committed to lowering the prevalence of smoking among adults with behavioral health disorders.	Remove
State Government	South Carolina Opioid Response Team	Governor McMaster established a task force which has developed a multi-lateral strategy to prevent and treat the misuse of prescription opioids.	Amend
State Government	South Carolina Tobacco Collaborative	The Collaborative seeks to eliminate the burden of tobacco use through policy development, advocacy work, education, coalition building and promotes tobacco prevention and tobacco cessation efforts on the state and local level	No Change

FY2022

Reports Data

as submitted for the Accountability Report by:

J200 - DEPART. OF ALCOHOL & OTHER DRUG ABUSE SERVICES

Report Name	Law Number (if applicable)	Summary of information requested in the report	Date of most recent submission DURING the past fiscal year	Reporting Frequency	Type of entity/entities	Method to access the report	Direct access hyperlink or agency contact (if not provided to LSA for posting online)	Changes to this report during the past fiscal year	Explanation why a report wasn't submitted
Agency Accountability Report	Section 1-1-810	The report "must contain the agency's or department's mission, objectives to accomplish the mission, and performance measures that show the degree to which objectives are being met." Agencies must "identify key program area descriptions and expenditures and link these to key financial and performance results measures."	September-21	Annually	Governor or Lt. Governor AND Legislative entity or entities	Provided to LSA for posting online	slutton@daodas.sc.gov	No Change	Report Submitted.
Agreed-Upon Procedures (AUP)	Section 11-17-20(A)	A Review of various Accounting, Reporting, Contractual and Human Resources Functions	May-22	Annually	South Carolina state agency or agencies	Available on another website	speterson@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	December-21	Annually	Entity within federal government	Available on another website	speterson@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	March-22	Quarterly	Entity within federal government	Available on another website	speterson@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	March-22	Twice a year	Entity within federal government	Available on another website	speterson@daodas.sc.gov	No Change	Report Submitted.
Governance, Risk and Compliance Review	Incorporated by CCEIS Policy, April 2017.	Efforts to Update Mitigation Controls with the Accounting and Reporting Sections of the Agency	April-22	Annually	South Carolina state agency or agencies	Electronic file available upon request	speterson@daodas.sc.gov	No Change	Report Submitted.
Petty Cash Review	Section 11-7-20(B)	Review of Procedures and Reconciliations	June-22	Twice a year	South Carolina state agency or agencies	Electronic file available upon request	speterson@daodas.sc.gov	No Change	Report Submitted.
Substance Abuse Block Grant Application and Report	US Public Law 102-321	State Plan for the Expenditure of Federal Funding	October-21	Annually	Entity within federal government	Available on another website	speterson@daodas.sc.gov	No Change	Report Submitted.
Substance Abuse Block Grant Site Visit	1945(g) of Title XIX, Part B, Subpart III of Public Health Services Act (42USC 300x-56(g))	Review of Block Grant FFY2018 Substance Abuse and Mental Health	August-21	Other	Entity within federal government	Available on another website	hprim@daodas.sc.gov	No Change	Report Submitted.