

From: Mark Binkley <MWB86@SCDMH.ORG>
To: Soura, ChristianChristianSoura@gov.sc.gov
CC: John MagillJHM03@SCDMH.ORG
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Subject: Greenville TV News story

Christian—

For your information, a story aired on a Greenville TV station yesterday, which was somewhat critical of the Department of Mental Health and the Department of Disabilities and Special Needs.

Here's the link:

<http://www.wyff4.com/WYFF-INVESTIGATION-Man-lives-in-Upstate-ER-for-9-months/-/9324882/20750734/-/9a8ch7/-/index.html>

I was interviewed for the story. Unfortunately, much of what I said wasn't in the part that aired.

This is an unusual and difficult case. The individual, who is now 21, was in DSS custody for a fairly long period of his childhood, and was apparently in therapeutic placement for much of that time. He apparently has a diagnosed mental illness, mild to moderate mental retardation, and a chromosomal disorder. The last months before he turned 21 he was in a Residential Treatment Facility at Springbrook, a private psychiatric hospital in Traveler's Rest.

When he aged out of DSS custody, he apparently went from Springbrook to a private Community Residential Care Facility, and failed that placement pretty quickly. I understand he touched or assaulted a female staff person, picked up some criminal charges and wound up in the Greenville ED. The ED staff called Greenville CMHC and the local disabilities board for assistance in placing him and "didn't get any help."

In talking to the reporter, I declined to comment on this specific case, but what I explained is that a Mental Health Center will assess anybody who's referred to them for their services, and if in need of mental health services, the Center will provide those services. However, Mental Health Centers don't assess or provide mental health services to patients in a community hospital or an ED, since that's the hospital's responsibility, and although Mental Health Centers offer assistance to their patients who have housing needs, Centers aren't in the business, nor do they have the resources, to find housing for anybody who needs it.

I described the fact that housing resources for disabled adults are limited in SC; if a disabled person who needs a supported living environment also has challenging behaviors which cause them to fail-placement-in/be-denied-admission-to private residential facilities, State agencies may be called upon to assist with placement, but State agencies like DMH and DSS have very limited resources when it comes to available supported housing, and it can be a long, slow process to find placement for such individuals. Housing and treatment are generally separate issues, but the Department recognizes that having appropriate and stable housing is a necessary component of helping patients stay well and recover, which is why DMH CMHCs will endeavor to assist in finding housing for those of their patients in need, but housing is not a primary function of a CMHC.

If a community hospital believes they have a patient who has mental health treatment needs, but due to the patient's disabilities the patient also needs a supported placement, it's primarily the hospital's responsibility to find the right placement. DMH and its CMHCs don't have much to offer. And if the patient has difficult behaviors it's unlikely a private CRCF is going to accept them or that the DMH CMHC is going to have any more success finding placement than the hospital social worker. But if – like this case – it's clearly going to be tough to find a placement, the CMHC can get DMH central office involved in looking for a place, which is what they did, and ultimately we were able to make space for this individual at a DMH CRCF which is principally for forensic patients under a court order.

The Department is currently part of a Housing Task Force which is focusing on what is needed in the way of additional housing resources for patients served by DMH. In fact, it is likely that funds for additional community supported

housing options will be part of the agency's budget request next year.

Let me know if you have any questions.

--Mark

Mark W. Binkley
Deputy Director, Division of Administrative Services
South Carolina Department of Mental Health
P.O. Box 485
2414 Bull Street, Ste. 316
Columbia, SC 29202

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