



# LEGISLATIVE OVERSIGHT COMMITTEE

## Study of the Department of Mental Health: Executive Summary

The full report of the Legislative Oversight Committee’s study of the Department of Mental Health (DMH), issued on March 6, 2020, is available on the House Legislative Oversight Committee’s [webpage](#).

### Findings

The **Committee has five findings**. During the study of the Department of Mental Health, issues are raised pertaining to the Vulnerable Adult Fatalities Review Committee (VAFRC), a multidisciplinary investigating entity which includes among its membership the Director of the Department of Mental Health. The Committee may or may not have specific recommendations to address these findings. However, the Committee makes the findings to note particular information that a member of the public, or General Assembly, may seek to know or on which they may desire to take action. The Committee’s findings all relate to the VAFRC and fall into three categories: (1) importance of charge; (2) communication of recommendations; and (3) administrative issues. The Subcommittee has a recommendation to address some of these findings.

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### Findings

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IMPORTANCE OF CHARGE	1. The charge of the VAFRC remains important, particularly its functions related to aggregating and disseminating data, detecting trends, identifying opportunities for cross-training, and communicating deficiencies in our statutory infrastructure to the General Assembly and Governor.
COMMUNICATION OF RECOMMENDATIONS	2. There is not a record of the VAFRC communicating recommendations or a lack of a need for any changes to the General Assembly, in the last five years. 3. The VAFRC could communicate any findings or recommendations about a state agency to the agency’s leadership via a letter, in addition to currently required reporting.
ADMINISTRATIVE ISSUES	4. Additional administrative support might be required for the VAFRC to fulfill its statutory requirements. State law only requires each of the nine ex-officio members to provide “sufficient staff and administrative support to carry out the responsibilities of the article.” It does not direct any one agency to be responsible. 5. The VAFRC membership is not currently up-to-date on the Secretary of State’s website.

*Table Note: See also recommendation five, which pertains to the VAFRC.*

### Recommendations

The **Committee has 28 recommendations** arising from its study of the agency. The Committee recognizes these recommendations will not satisfy everyone nor address every issue or potential area of improvement at the agency. The recommendations fall into six categories: (1) patient care; (2)

organizational structure, governance, directives, and performance measures; (3) employee recruitment, retention, and compensation; (4) community mental health services; (5) collaboration; and (6) pass-through funds.

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## Patient Care

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EMPLOYEE TRAINING	<ol style="list-style-type: none"> <li>1. The Department of Mental Health should randomly test employee knowledge of DMH policies and procedures. Random testing should include both written tests and hands-on strategies by trained staff with appropriate expertise to determine whether employees are aware of and employing appropriate care techniques.</li> <li>2. The Department of Mental Health should provide a quarterly update about employee training oversight to the House Legislative Oversight Committee for a period of two years beginning on the date of approval of the full Committee study. The report should include the following: current processes and systems to monitor employee training, compliance, and competency; guidelines, membership and stated meeting times of responsible internal committees; meeting minutes; and reviews of the sufficiency and efficiency of all training programs with appropriate indicators as approved by internal committees. The report should also delineate responsibilities for training, competencies of employees following training, and the assessment mechanisms used to ensure employees understand and rely upon training. All information submitted to the Committee should be in compliance with state law.</li> <li>3. The Department of Mental Health should implement a method to determine which of the trainings it offers can be linked to better patient outcomes.</li> <li>4. The Department of Mental Health should update policy and training manuals to include all necessary training, competencies, and continuing education for each position and disciplinary measures for employees who fail to employ policy and procedural mandates.</li> </ol>
VULNERABLE ADULTS FATALITIES REVIEW COMMITTEE REPORTING	<ol style="list-style-type: none"> <li>5. The Vulnerable Adult Fatalities Review Committee should submit an annual report as required by S.C. Code of Laws Ann. § 43-570(6) and in accordance with the electronic transmission process described in S.C. Code of Laws Ann. § 2-1-230. In addition to statutorily required sections (i.e., findings and recommendations for changes), the report should include a summary of non-confidential portions of minutes, member attendance records, statistical information on cases reported and reviewed, committee member credentials, identified systemic deficiencies in care, and trending issues facing vulnerable adults.</li> </ol>
PERSONS AUTHORIZED TO MAKE HEALTH CARE DECISIONS FOR A PATIENT UNABLE TO CONSENT	<ol style="list-style-type: none"> <li>6. The General Assembly should consider amending S.C. Code Ann. § 44-22-40 to align the priority list of people who may provide substitute consent for electro-convulsive therapy or major medical treatment with 2019 legislative changes to the priority list of relationships in S.C. Code § 44-66-30 (Adult Healthcare Consent Act).</li> </ol>

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Organizational Structure, Governance, Directives, and Performance Measures

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ORGANIZATIONAL STRUCTURE

7. The Department of Mental Health should develop a complete organizational flow chart, which includes position descriptions, scope of responsibility for each position, and scope of responsibility for each area of the organization. The position descriptions should include lines of communication, the chain of command, and responsibilities assigned to each position. The organizational flow chart should depict the specific areas of care which include medical services and psychiatric services.

GOVERNANCE

8. The South Carolina Mental Health Commission should develop a procedure to determine policies and promulgate regulations governing the operation of the department and the employment of professional and staff personnel, as required of it in S.C. Code Ann. § 44-9-30(c).

9. The South Carolina Mental Health Commission should comply with S.C. Code Ann. § 1-23-120(J) by conducting a formal review of the agency’s regulations at least every five years and submitting a report of that review to the Code Commissioner.

10. The South Carolina Mental Health Commission should allow public input at commission meetings.

11. The Department of Mental Health should post contact information for members of the South Carolina Mental Health Commission on its website.

AGENCY DIRECTIVES

12. The South Carolina Department of Mental Health should provide public online access to directives (i.e., policy and procedures) applicable to patients and the public.

PERFORMANCE MEASURES

13. The Department of Mental Health should continue to review and update its performance measures for the Fiscal Year 2019-20 Accountability Report. In doing so, the agency may wish to avail itself of resources available from the Department of Administration’s Executive Budget Office (EBO), including but not limited to consulting with EBO’s performance and accountability manager. The agency should determine whether the current set of performance measures assist agency leaders in evaluating whether the agency is accomplishing its mission.

14. The Department of Mental Health should provide an update, in an approved format, once a quarter for two years after the study is approved, or until the Committee re-visits the need for the updates. The purpose of the updates is to provide a statistical overview about the inpatient and veterans’ nursing home populations.

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Employee Recruitment, Retention, and Compensation

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RECRUITMENT

15. The Department of Mental Health, in collaboration with relevant state agencies and the state’s higher education institutions, should study existing education and training paths for mental health professionals to determine if the capacity exists to meet future estimated needs for mental health professionals at all levels.

16. The Department of Mental Health should collect data to evaluate its recruitment efficacy (e.g., ask each new employee how he or she learned about the position).

RETENTION	<p>17. The Department of Mental Health should continue to employ current retention strategies, implement a method to determine which ones are most effective, and research new or evolving retention strategies.</p> <p>18. The Department of Mental Health should ensure a range of employee levels are represented on agency-wide committees impacting employee onboarding, training, and retention.</p>
COMPENSATION	<p>19. The Department of Mental Health should seek funding to maintain mean salaries at or above the midpoint for each classification, particularly the GA50 (Human Services Coordinator I) and GA60 (Human Services Coordinator II) classifications.</p> <p>20. The Department of Mental Health should review mental health salaries in Georgia and North Carolina counties bordering South Carolina in order to maintain a competitive market for the recruitment and retention of mental health professionals.</p> <p>21. The General Assembly should consider re-establishing the Classification and Compensation Study Committee, originally created in Proviso 93.33 of the 2015-16 General Appropriations Act, for the purpose of examining findings and recommendations of the Department of Administration, Human Resources Division on the state’s classification and compensation system.</p>

**Community Mental Health Services**

SERVICES	<p>22. The Department of Mental Health should annually review services available in each community and determine if they are adequate to serve the needs of the community.</p> <p>23. The Department of Mental Health and the Department of Education should determine a desired clinician to student ratio, in addition to the goal of two schools per clinician, and report this determination to the Committee within one year after the approval of the full Committee study.</p>
FUNDING	<p>24. The Department of Mental Health should continue efforts to increase local government contributions to community mental health services. A year following approval of the full Committee study, DMH should report to the Legislative Oversight Committee local contributions to community mental health centers, and note if a center has experienced a shortfall in the year between study approval and this follow up report.</p> <p>25. In requesting additional funding for school-based mental health services, the Department of Mental Health should report on each district’s financial contributions and the outcomes of the Magill school-based mental health services certificate program.</p>

**Collaboration**

CONTINUITY OF CARE FOR CRIMINAL JUSTICE INVOLVED INDIVIDUALS	<p>26. The Department of Mental Health and the Department of Corrections should form a committee constituted of professionals of these and other appropriate entities to devise a plan to provide a seamless transition for inmates who are under the care of a mental health professional upon the release of the inmate. The plan should be implemented by the participating agencies.</p>
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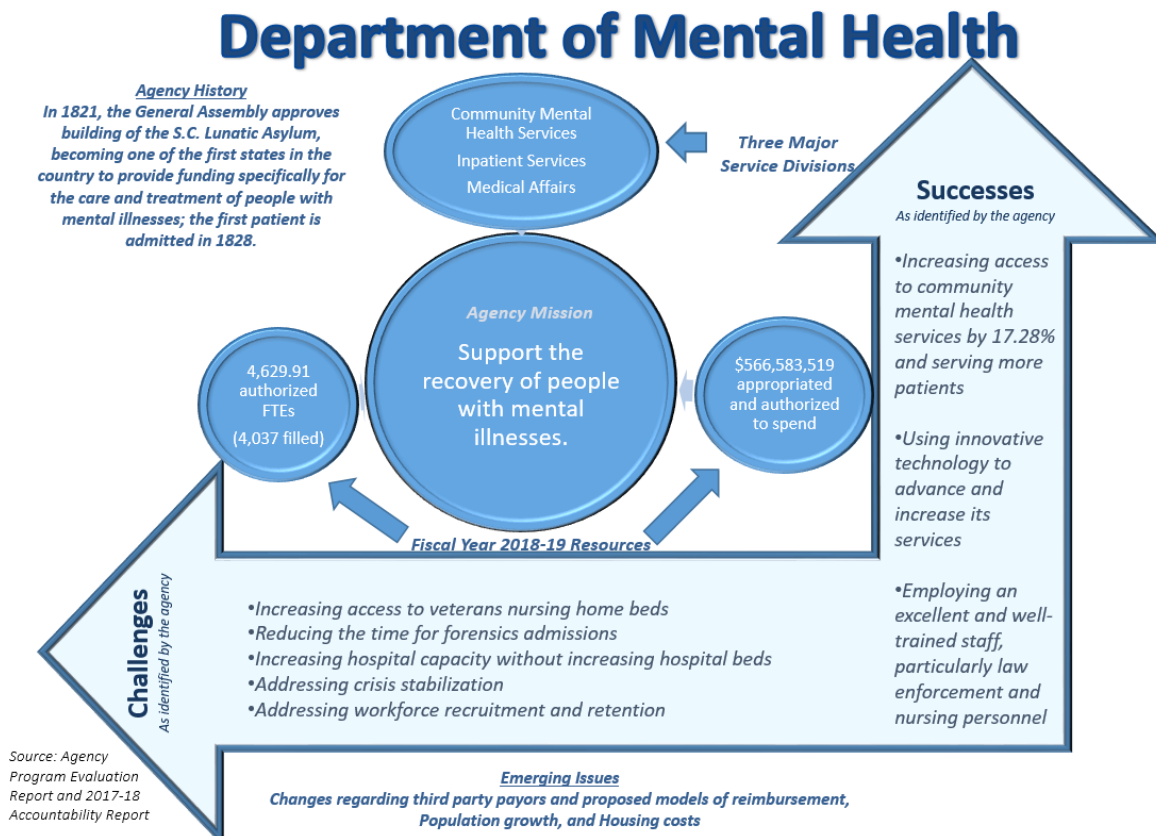
SEXUALLY  
VIOLENT  
PREDATOR  
TREATMENT  
PROGRAM

27. The Department of Mental Health should collaborate with the Office of the Attorney General and the criminal defense bar to review the amendments to S.C. Code Ann. §44-48-10 et seq. (Sexually Violent Predator Act) in Senate Bill 797, as introduced in 2019. The Department of Mental Health should provide to the Committee a summary of suggested changes to Senate Bill 797, as introduced in 2019, if any, based on that input.

Pass-Through Funds

28. The General Assembly should consider removing the pass through of funds to the Alzheimer’s Disease and Related Disorders Association (Proviso 35.3 - 2019), Department of Social Services (Proviso 117.53 – 2019) and the Department of Children’s Advocacy (Proviso 35.1 – 2019 referring to the Continuum of Care) from the Department of Mental Health’s section of the General Appropriations Act and include those funds in the most-applicable agency’s section.

Agency Snapshot



Sources: Agency Program Evaluation Report (November 2018) and Accountability Report (September 2018).

## Purpose of Oversight Study

To determine if agency laws and programs:

are being implemented and carried out in accordance with the intent of the General Assembly



should be continued, curtailed, or eliminated,

the Committee and Subcommittee evaluate:

the application, administration, execution, and effectiveness of the agency's laws and programs;

the organization and operation of the agency;



any conditions or circumstances that may indicate the necessity or desirability of enacting new or additional legislation pertaining to the agency.

S.C. Code Ann. § 2-2-20(B) and (C)

## Study Process

Full Committee schedules agency for study and gathers initial information

Subcommittee investigates through meetings and information requests

Subcommittee publishes report

Full Committee considers Subcommittee report and may conduct further investigation

Full Committee publishes report

## Public Input

**563** Responses to an online public survey

**5** Constituents testify

**6** Online comments received

## Subcommittee Membership

The Honorable John Taliaferro "Jay" West, IV (chair)  
The Honorable Robert L. Ridgeway, III

The Honorable Bill Taylor  
The Honorable Christopher Sloan "Chris" Wooten

## Study Milestones

### AGENCY REPORTS

March 2015	Seven-Year Plan Report
September 2018	Annual Accountability Report
November 2018	Program Evaluation Report

### MEETINGS

Full Committee	Subcommittee		
	2/05/19	4/23/19	8/12/19
5/3/18	2/19/19	5/07/19	8/27/19
1/14/19	3/05/19	6/20/19	9/16/19
12/9/19	3/19/19	7/08/19	10/28/19
2/26/20	4/02/19	7/23/19	12/09/19



## Legislative Oversight Committee

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