

20
24

ANNUAL
REPORT



South Carolina Department of
**CHILDREN'S
ADVOCACY**
Advocacy. Accountability. Service.





DEPARTMENT OF **CHILDREN'S ADVOCACY**

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A MESSAGE FROM THE STATE CHILD ADVOCATE

Amanda F. Whittle, JD, CWS



To the Governor, President of the Senate, Speaker of the House of Representatives, and Joint Citizens and Legislative Committee on Children:

It is my honor and privilege to share with you the Department of Children's Advocacy's 2024 Annual Report, which covers July 1, 2023, through June 30, 2024.

It has been another year of significant growth for the Department of Children's Advocacy and its divisions, which have continued to work diligently to improve conditions for the children of South Carolina.

Some of the highlights, about which you will read more, are:

- Launch of a new Cass Elias McCarter Guardian ad Litem Program case management system to support best-interest advocacy for abused and neglected children
- Launch of an award-winning Foster Care Review Division case management system to improve advocacy for permanency for children in foster care
- Significant improvement in staff recruitment and retention by reducing the turnover rate from 34 percent at the end of FY22 to 15 percent at the end of FY24, with an agency vacancy rate of 11 percent
- Significant reduction in staff vacancy rate within the Guardian ad Litem Program from almost 40 percent at the end of FY20 to 6 percent at the end of FY24
- Ongoing efforts to advocate for a state-operated psychiatric residential treatment facility (PRTF) for seriously mentally ill, justice-involved youth
- Partnering with the Department of Mental Health and the American Foundation for Suicide Prevention to launch the nation's first online interactive mental health screener for children (Hope Connects SC Kids)

- Collaborating with state and national agencies and organizations concerning children's behavioral health, safety science, and other innovative and effective efforts to improve outcomes for children in South Carolina
- Educating the public about state services that improve outcomes for children
- Coordinating with other agencies to provide and obtain training concerning children's services
- Raising awareness about Foster Care Review Board vacancies to advocate for permanency for children in foster care
- Continuum of Care's commitment to partner with more families through High Fidelity Wraparound to safely maintain children and youth in their homes, schools, and communities
- Creating capacity for a System Improvement Division that receives and responds to complaints concerning services provided to children by state agencies and critical incidents involving children in the care of the state
- Excellent customer service exemplified by a 100 percent response rate to complaints within one business day
- Celebrating the opening of the South Carolina Heart Gallery's largest exhibit in the program's history

The Department of Children's Advocacy is an integral part of South Carolina's work to create a sustainable system of care, including a robust array of integrated services and placements for children and youth. Our work to improve outcomes for children will continue in FY25.

In addition to the strategic goals and targets contained in the agency's FY24 Annual Accountability Report, this report provides a comprehensive review of the Department of Children's Advocacy's goals and accomplishments and the State Child Advocate's activities, pursuant to S.C. Code of Laws Ann. Section 63-11-2270.



AMANDA F. WHITTLE, JD, CWLS

*State Child Advocate and Executive Director,
SC Department of Children's Advocacy*

CHILDREN'S ADVOCACY OVERVIEW

MISSION

The South Carolina Department of Children's Advocacy champions advocacy, accountability, and service to improve outcomes for children served by state agencies in South Carolina.

VISION

Growing a community where children thrive.

BACKGROUND

The Department of Children's Advocacy (DCA) effectively began on July 1, 2019, pursuant to Act No. 160 (S. 805), which was signed into law on May 3, 2018. Amanda F. Whittle was appointed by Governor Henry McMaster on June 3, 2019, to serve as the State Child Advocate and Executive Director of the agency.

Since that time, and pursuant to statute, Whittle has developed a broad vision for reform regarding the services provided to children by child-serving state agencies. DCA has engaged in child-specific staffings and systemic strategies to promote this broad vision and improve outcomes for South Carolina's children, including:

- Joint trainings and meetings to promote access and awareness of an array of services that allow children to safely remain in their homes and communities or in the least restrictive, most family-like setting based upon their needs

- Coordination of services and efforts for a system of care grounded in urgency, empathy, and sustainability
- Continued collaboration with child welfare partners regarding communication, service coordination, and planning strategies to improve the timeliness of court hearings and outcomes for children

DIVISIONS

DCA administers:

- Cass Elias McCarter Guardian ad Litem Program
- Continuum of Care
- Foster Care Review Division
- System Improvement

The Cass Elias McCarter Guardian ad Litem Program, Continuum of Care, and the Foster Care Review Division were administered by the Office of Executive Policies and Programs through the Department of Administration from 2015-2019 and by the Governor's Office prior to 2015. The Foster Care Review Division supports the Foster Care Review Board and operates the South Carolina Heart Gallery. System Improvement has always been under the DCA and oversees the Investigations and Critical Investigations units.

CHILDREN'S ADVOCACY BUDGET

FY 2023 - 2024

DCA's total FY 2023-2024 budget was **\$20M**, of which **\$10M** came from general funds. For FY24, DCA received \$0 federal funds related to COVID-19.

FISCAL YEAR 2023 - 2024 BUDGET

Table 1

State Funded Program Title	General	Other	Federal	Total
Administration and System Improvement	\$467,113	-	-	\$467,113
Guardian ad Litem Program	\$3,751,826	\$5,678,370	\$63,412	\$9,493,608
Continuum of Care	\$2,020,353	\$732,146	-	\$2,752,499
Foster Care Review Division	\$563,251	\$869,125	-	\$1,432,376
Investigations Unit	\$501,125	-	-	\$501,125
State Employer Contributions	\$2,675,879	\$2,418,171	\$28,693	\$5,122,743
Agency Workstations (non-recurring)	\$37,847	-	-	\$37,847
Foster Care Review Board (non-recurring)	\$150,000	-	-	\$150,000
Total	\$10,167,394	\$9,697,812	\$92,105	\$19,957,311

FY 2024 - 2025

DCA's FY25 budget request was submitted in September 2023 and included the seven items listed below, totaling **\$3,440,508 in recurring** and **\$82,400 in non-recurring** funds. All requests align with goals and targets in DCA's Annual Accountability Report and with its mission, vision, and statutory mandates. For FY24, the agency received one FTE each for Investigations and an IT director, four of 16 FTEs for GAL, and funding for additional fleet vehicles to be requested after July 1, 2023, when funding is allocated.

RECURRING:

SYSTEM IMPROVEMENT ADVOCACY **\$1,013,517**

To hire 10 FTEs (three for IU and seven for CIU) to create sufficient capacity to respond to complaints and critical incidents and conduct investigations.

BEST-INTEREST ADVOCACY **\$1,843,300**

To hire 22 FTEs (21 for GAL and one for the Heart Gallery) to create sufficient capacity to provide best-interest advocacy and adoptive recruitment for abused and neglected children.

COC TRANSFER ALIGNMENT **\$400,000**

To offset elimination of a \$400,000 transfer to COC from DMH pursuant to Proviso 35.1.

SR. ACCOUNTANT/FISCAL ANALYST **\$98,691**

To hire one FTE to maximize the budget and plan for the future.

MICROSOFT LICENSING **\$85,000**

To pay for continued agency use of Microsoft software.

NON-RECURRING:

WORKSTATION AND EQUIPMENT **\$82,400**

To provide to 33 new FTEs so they can perform their duties.

RE-ALIGNMENT OF EARMARKED FTEs **\$0**

To authorize the realignment of earmarked FTE positions.

CHILDREN'S ADVOCACY ORGANIZATIONAL CHART

DCA consists of approximately 200 FTE staff positions, 140 local and seven state Foster Care Review Board members appointed by the governor, and almost 1,000 volunteer guardians ad litem. The organizational chart does not show DCA's shared services through the Department of Administration. DCA receives administrative support through Admin for financial accounting, human resources, information technology, procurement, and logistical support, pursuant to S.C. Code of Laws Ann. Section 63-11-2215. The support from Admin's shared services continues to be significant to DCA.

During FY24, the agency operated a Legal Extern Program and also completed the formal designation of System Improvement as a new division, encompassing both the Investigations and Critical Investigations units. The new division will allow the agency to take a holistic view of the services children receive, discover and analyze where and why shortfalls exist, and address them through policy changes.



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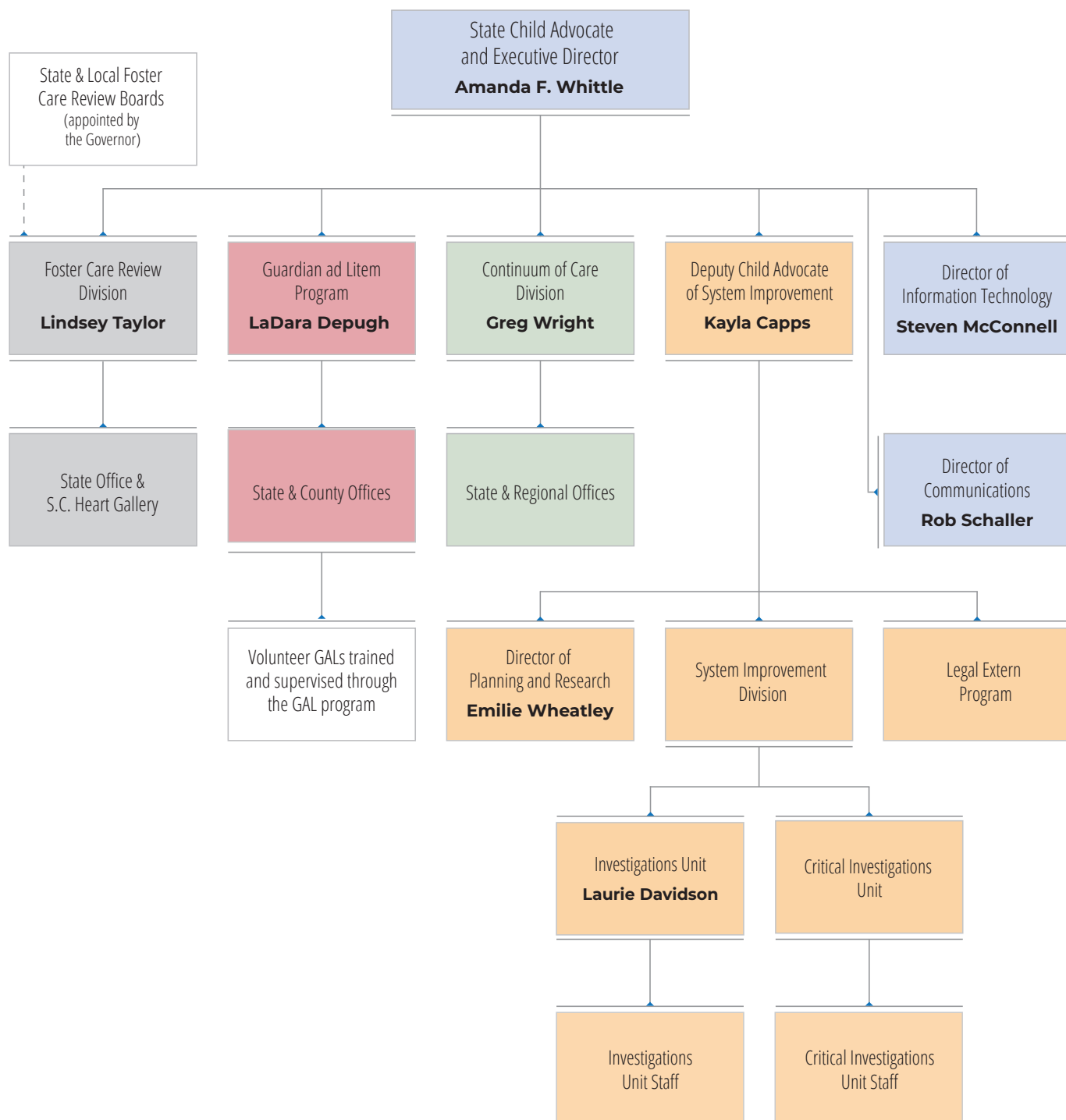
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South Carolina Department of
**CHILDREN'S
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ORGANIZATIONAL CHART



CHILDREN'S ADVOCACY BROAD VISION FOR REFORM

The State Child Advocate is responsible for ensuring that children receive adequate care and protection from services or programs offered by the nine state agencies listed on page 19. To this end, DCA is committed to developing and promoting a broad vision for reform—driven by the values and goals of child-serving agencies—to make the services and programs provided by these agencies more effective for children, youth, families, and communities.

ADVOCACY PRIORITIES

Director Whittle developed the following broad vision for reform in FY20 that the agency has pursued with focus and intentionality:

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

Guided by these principles, DCA began outlining its system of care advocacy priorities with specific and actionable goals and worked steadfastly with multiple agencies and organizations to bring them to fruition. DCA does not assert sole credit for these accomplishments and acknowledges the work of the child-serving system for the coordinated and consistent efforts to improve the state's system of care.

FY22 System of Care Advocacy Priorities

- **PRIORITY:** Funding for a state-operated psychiatric residential treatment facility (PRTF) for seriously mentally ill, justice-involved youth

RESULT: \$20 million was allocated by the General Assembly in the FY24 budget for this facility.

- **PRIORITY:** Cessation/removal of the Rehabilitative Behavioral Health Services (RBHS) moratorium

RESULT: During FY24, DHHS announced the sunset of the RBHS moratorium effective December 2023.

- **PRIORITY:** Incentivized rates for in-state PRTF providers

RESULT: In the spring of 2024, DHHS announced a rate increase to \$500 per day, effective July 1, 2024.

FY23 System of Care Advocacy Priorities:

- **PRIORITY:** Funding for DMH residential intensive treatment/step-down placements

RESULT: Funding for intensive-level residential treatment as a step-down placement was allocated to DMH in the FY24 budget.

- **PRIORITY:** Availability of crisis stabilization services for children

RESULTS: In May 2023, S.C. Code of Laws Ann. 44-7-130 (26) was amended to eliminate the requirement that crisis stabilization unit facilities be operated in partnership with DMH and to allow crisis stabilization unit facilities to provide services for children. This short-term residential programming includes psychiatric stabilization services and brief, intensive crisis services. Prior to this change, this type of facility only served adults and required a partnership with DMH to operate.

During FY24, DHHS, with recommendations from the Master Plan Advisory Committee (MPAC), issued behavioral health crisis stabilization grants totaling \$45.5 million to 13 hospitals to build hospital-based emergency department units dedicated to behavioral health crises.



MPAC was also integral in the creation of the MUSC Health Jean & Hugh K. Leatherman Behavioral Health Pavilion (referred to as the Florence Behavioral Health Hub in the FY23 annual report). Expected to open in FY26, the pavilion will include four adolescent beds for crisis services and outpatient pediatric behavioral health clinics.

- **PRIORITY:** Additional 988 funding

RESULT: As a result of additional funding allocated by the General Assembly in FY23 and FY24, a second 988 call center was opened in Charleston during FY24. This center now operates along with Mental Health America of Greenville County's call center.

FY24 System of Care Advocacy Priorities:

- **PRIORITIES:** Strengthening the service array through funding for intensive in-home services (IIHS) such as Applied Behavior Analysis (ABA), Functional Family Therapy (FFT), Homebuilders, Multidimensional Family Therapy (MDFT), Multisystemic Therapy (MST), and Parent-Child Interaction Therapy (PCIT)

Including integrated treatment in the children's behavioral health system of care

Strengthening the placement array

Creation/implementation of step-down placements by DMH

Residential habilitation for children/youth diagnosed with Intellectual Disability (ID) and Autism Spectrum Disorder (ASD) through DDSN

Independent living/emerging adult housing that provides an alternative to young adults exiting DJJ or foster care due to issues such as family conflicts, access to education, vocation, mental health, transportation, or alcohol and other drug use

RESULTS: During FY24, DDSN began incentivizing individuals to become ABA providers. Although ABA treatment services are covered by the Medicaid State Plan, the reimbursement rate is reportedly much lower than in neighboring states and the demand is high for board certified behavior analysts who can serve individuals diagnosed with ASD.

DHHS amended the Medicaid State Plan to add coverage for MST in January 2024. It also announced in FY24 that it would begin covering the Homebuilders model in July 2024 (FY25).

During FY24, the MPAC, of which Director Whittle is a member, discussed the need for an additional layer of placement options known as Intensive Outpatient (IOP) and Partial Hospitalization (PHP) for patients who need a "step down" from inpatient or PRTF care or a "step up" from in-home or outpatient treatment. As a result of these discussions, DHHS will add IOP and PHP to the Medicaid State Plan in early FY25.

Approximately 20 new beds were created in FY24 as a result of DDSN's efforts to increase its placement array.

Above: DCA staff on the steps of the State House and wearing blue in recognition of April's designation as "Child Abuse Prevention Month." Photo Credit: DCA.

CHILDREN'S ADVOCACY EDUCATIONAL EFFORTS

The Department of Children's Advocacy is committed to ensuring that children, parents, and concerned citizens in South Carolina know how to find and connect to the right services. To accomplish this goal, DCA educates the public about the services it and other child-serving agencies provide and develops processes to deliver excellent customer service.

Awareness of and access to these services help reduce incidences of abuse and neglect; allow children to safely remain in their homes and communities or in the least restrictive, most family-like setting based upon their needs; and improve transparency and accountability from child-serving agencies and organizations.

ONLINE RESOURCE LIBRARY

To fulfill one of its statutory duties of educating the public about state agency services for children, DCA created a resource library on its website. First published in 2021, the resource library initially focused on services provided by the nine specific state agencies outlined on page 19. To increase its efficacy, the library has expanded to include nonprofit organizations, federal programs, and other vetted resources.

COMMUNITY INVOLVEMENT

DCA participated in a number of public outreach events, sharing services and resources available to children, as well as tips on how to access them. Director Whittle and Deputy Capps alone attended more than 143 meetings regarding access to children's services where the audience consisted of more than just state agency employees (up from 125 in FY23). Such events included press conferences, media interviews, public forums, and community presentations.

DCA staff led and/or participated in many other events to share resources for children and to raise awareness about the agency's role. Its goal was to help people know where to turn for assistance

and feel less intimidated, confused, and overwhelmed when navigating the process. Some FY24 highlights include:

Billboards

DCA bought billboards to highlight 988 and suicide prevention, proper seatbelt use, hot car safety, and safe sleep in September 2023 to raise public awareness and help citizens better protect their children.

Child Abuse Prevention Month

DCA recognized April as Child Abuse Prevention Month with numerous activities around the state including pinwheel gardens, press conferences, proclamation signings, awareness walks, and candlelight vigils. Director Whittle presented at Children's Trust of South Carolina's Child Abuse Prevention Month kick-off event.

Children's Advocacy Center Day

On April 10, Director Whittle joined Attorney General Alan Wilson, representatives from Children's Trust of South Carolina, the SC Network of Children's Advocacy Centers, and multiple child advocacy centers and multi-disciplinary partners across the state to share the important ways CACs serve children who are suspected of being neglected or abused.

Legal Education

Director Whittle joined DSS's Managing Attorney for County Operations Dennis Gmerek to teach law students about public termination of parental rights proceedings.



Disability Pride Day

Director Whittle, Deputy Capps, and Assistant Child Advocate Melissa Pettinato-Irby represented the agency during multiple events at the SC State Museum to celebrate people with disabilities through interactive and inclusive activities.

DJJ Graduation Ceremony

DCA attended DJJ's graduation in July 2023, during which more than 100 youth earned their high school diplomas or GED certificates.

South Carolina Heart Gallery Mall Exhibition

SCHG held the grand opening of a semi-permanent exhibit at Columbiana Centre in September 2023, just before mall traffic ramped up for the holiday season. The exhibit was SCHG's largest and most visible to date and remained open through the end of FY24 and into FY25. More information about the exhibit can be found on page 40.

Hope Connects Kids SC Screener

In recognition of September's designation as Suicide Prevention Month, DCA Communications Director Rob Schaller and DMH Suicide Prevention Program Director Jessica Barnes appeared on WIS's Soda City Live to raise awareness about the newly launched Hope Connects SC Kids online mental health screening tool. More information about the tool can be found on page 46.

Irmo Middle School Career Day

Deputy Capps attended Irmo Middle School's Career Day in March 2024 where she spoke with students about careers in child advocacy and shared information about DCA, its divisions, and the work they do.

Mental Health Awareness and Self-Care Day

Continuum of Care's Midlands Region office hosted a Mental Health Awareness and Self-Care Day on May 16 at Dutch Square Center to recognize Mental Health Awareness Month.

National Night Out

Charleston County Guardian ad Litem staff joined law enforcement and other agencies to raise community awareness in Mount Pleasant, South Carolina, in August 2023.

Trunk or Treat

SCHG participated in DSS's Trunk or Treat event specifically for foster, adoptive, and kinship families. Staff snapped and printed photos of children and families in their costumes that they could take home and enjoy.

Women United Gala

Director Whittle was the keynote speaker at the 2024 Women United Gala, sponsored by Women United, an affinity group of the United Way of Aiken County. Whittle shared information about DCA and highlighted four areas regarding children's wellbeing: prevention, foster care, mental and behavioral health, and community relationships.

STATE AND NATIONAL ACTIVITIES

Participation in events and activities at the state and national levels are outlined in the State Child Advocate's report on page 49.

INTERNAL ACTIVITIES

DCA created forums for its staff and volunteers to learn about and share agency successes, as well as opportunities for the agency to strengthen its efforts to improve outcomes for children. These internal forums were in addition to the community forums tracked and reported as part of DCA's FY24 Annual Accountability Report.

Continuum of Care

In May 2024, COC held its annual statewide training and team building conference focused on improving wraparound services.

Foster Care Review Division

FCRD held five professional development sessions and four Lunch and Learn trainings for FCRB members. Trainings on the new "Barriers to Permanency" tool were also held for DSS staff.

Guardian ad Litem

- **Better Advocates, Better Outcomes Conference:** In January 2024, the Guardian ad Litem Program hosted its first statewide conference since DCA's creation in 2019. MelissaRoshan Potter provided the keynote address, sharing her personal story of life in foster care and her road to resilience. Jessica Barnes, with DMH's Office of Suicide Prevention, shared tips on how to help teens in crisis, and David White, with Fostering Great Ideas, facilitated several interactive role-playing scenarios to help attendees walk in the shoes of foster parents, biological parents, and most importantly, children. More than 200 volunteers and staff attended.
- **Moving for Mental Health Initiative:** GAL offices across the state participated in a 21-day "Let's Get Moving for Mental Health Challenge." Staff took part in various activities aimed at reducing stress during the day, such as desk exercises and stretches, walks during lunch, and other ways to calm the mind, relax the body, and prevent burn out.

Cross-Divisional Initiatives

The Florence County GAL office joined Continuum of Care's Pee Dee Regional office for a mental health day on May 17. They engaged in multiple activities to improve mental health and wellbeing.

EMPLOYEE AND VOLUNTEER INITIATIVES

For staff to be strong advocates for timely, safe, and effective services for children, they must know that agency leadership is ready to support and advocate for them. DCA is committed to establishing, maintaining, and continuing to improve innovative and competitive recruitment strategies for staff and volunteers; supporting employees with clear expectations, measurable and



achievable success criteria, and regular feedback to help them flourish in the workplace; and fostering innovation in retention methods for volunteers.

Staff Recognition

The Department of Children’s Advocacy celebrated its staff during a virtual employee appreciation ceremony in May 2024. Staff were recognized for their years of service, and select employees were nominated by their co-workers to receive superlative awards for their efforts over the past year. Additionally, all employees received branded polo shirts.

At the end of FY22, DCA sought to reduce the agency’s turnover rate from 34 to 25 percent or less. The agency surpassed that goal at 21 percent at the end of FY23. The agency then committed to further reduce the turnover rate to 15 percent.

To achieve this, DCA analyzed salaries, developed new salary structures for certain positions, implemented performance pay and equity increases, provided salary adjustments based on additional duties, and developed and executed an agency-wide telework plan. Additionally, vacancies were filled, new positions were created to streamline processes, and staff were provided

with clear expectations of their job duties. FY24 was the first full year the agency’s telework policy was in effect. These efforts were successful, and DCA met its goal by the end of FY24 [Table 2](#). DCA plans to maintain a low turnover rate with continued efforts to recruit, train, retain, and support staff.

Volunteer Recognition

At DCA’s request, Governor Henry McMaster proclaimed April 14-21, 2024, as Volunteer Week in South Carolina and thanked the thousands of South Carolinians who volunteer.

The recognition is particularly meaningful to DCA, which depends on a small army of volunteers who help the children of South Carolina achieve their full potential:

- **999** volunteer guardians ad litem who are specially trained to be the voice of abused or neglected children and advocate for their best interests in family court (learn more on page 28)
- **140** Foster Care Review Board members who sit on 43 review boards around the state, providing accountability for South Carolina’s foster care system and working to ensure children spend as little time as necessary in foster care (learn more on page 36)
- **50+** volunteer photographers who donate their talents to the South Carolina Heart Gallery and take photos of legally free children in foster care awaiting adoption. The Heart Gallery exhibits the photos to help these children find their forever families (learn more on page 40)

At the end of the fiscal year, DCA asked for a proclamation to recognize 50 years of service by the Foster Care Review Board, with a press conference and ceremony to be held in FY25.

Above: Deputy Child Advocate Kayla Capps speaking with Irmo High School students during Career Day. Photo Credit: DCA.

TURNOVER RATE IN FY24 Table 2

Division	Turnover Rate
Administration	0%
Continuum of Care	18%
Foster Care Review Division	5%
Guardian ad Litem Program	16%
System Improvement	11%
AGENCY AVERAGE	15%

CHILDREN'S ADVOCACY COMMUNICATIONS SUMMARY

OVERVIEW

Agency communications are aimed at recruiting and retaining staff and volunteers; improving education about safe sleep, suicide prevention, resource access, and child abuse prevention and reporting; and raising awareness regarding the services provided to children and families by state agencies. Other forms of outreach include participating in staff meetings, conferences, and media interviews.

Communications Director Rob Schaller continued working on a major re-branding effort in FY24 aimed at promoting a unified presence for the agency and its divisions, which included a new family of logos and revamped websites that are now interconnected and share a common look and feel. The project is ongoing, with new brochures, flyers, and other branded materials in development. Schaller has also assumed responsibility for the majority of social media content and has successfully worked with each division to promote new initiatives and events, such as the Heart Gallery storefront at Columbiana Centre (see page 40) and training conferences.

BRANDING

Because each of DCA's divisions pre-dated the founding of DCA, their disparate logos lacked any cohesion to the agency or to one another. In FY24, DCA sought to change that. Using DCA's logo as a base, companion logos for each division were developed, strengthening the divisions' visual identity and establishing a clear connection between each of them to each other and to the agency.

WEBSITES

In tandem with the new logos, DCA also redesigned each division's website with a cohesive look, reinforcing visual and relational alignment across the agency. All DCA sites are now part of the state's NextGen platform.

NEWSLETTER

Eleven issues of the monthly newsletter were created and disseminated to more than 1,600 legislators, internal staff, staff at other agencies, volunteers, board members, organizations, and members of the community.

SOCIAL MEDIA

The Department of Children's Advocacy, the Guardian ad Litem Program, and the South Carolina Heart Gallery each maintain and operate their own social media accounts. Through these channels, the agency and its divisions are able to promote their programs, raise awareness about the services they provide, and increase engagement and civic involvement.

Through these efforts, the agency has continued to expand its audience and online reach, with significant year-over-year increases across all platforms [Table 3](#).

SOCIAL MEDIA FOLLOWERS

Table 3

Division	Platform	End of FY23	End of FY24	Growth
DCA	Facebook	1,407	1,646	17%
	X (formerly Twitter)	408	498	22%
	LinkedIn	41	227	454%
Guardian ad Litem	Facebook	826	1,011	22%
SC Heart Gallery	Facebook	119	1,400	1,076%



SYSTEM IMPROVEMENT

As part of its enabling legislation,¹ DCA is responsible for ensuring children receive adequate protection and care from services and programs offered by the nine child-serving state agencies listed at right.

The DCA is also tasked with examining on a system-wide basis the services these agencies provide and making recommendations to improve the quality of those services to give each child the opportunity to live a full and productive life.

System Improvement (SI), under the direction of Deputy Child Advocate Kayla Capps, is key to fulfilling that mission. SI oversees the teams that are primarily responsible for ensuring children receive adequate protection and care from child-serving agencies:

- The Investigations Unit (IU) handles complaints from the public concerning these agencies. The IU report is located on page 22.
- The Critical Investigations Unit (CIU) handles critical incidents that are self-reported by these agencies. The CIU report can be found on page 24.

STAFFING

IU ended FY24 with six full-time employees (up from four in FY23), including an Investigations Unit director, three investigators, and two intake specialists. CIU closed FY24 with four full-time employees (up from three in FY23), including three full-time investigators and one intake specialist.

Both units continue to be supported by Director Whittle and Deputy Capps, with each carrying caseloads during FY24. To address the anticipated rise in



AGENCIES OVER WHICH DCA HAS STATUTORY OVERSIGHT

- The Department of Disabilities and Special Needs
- The Department of Health and Environmental Control
- The Department of Health and Human Services
- The Department of Juvenile Justice
- The Department of Mental Health
- The Department of Social Services
- The Governor's School of Agriculture at John de la Howe
- The South Carolina School for the Deaf and the Blind
- The Wil Lou Gray Opportunity School



cases, and to ensure continuation of quality reviews, DCA's FY25 budget request will include allocations for additional FTEs. The goal is to have investigators handle all cases, but with manageable caseloads of 25-30 cases at any given time.

DCA also onboarded a director of planning and research, who developed, managed, monitored, and reported statewide and internal projects and also evaluated internal systems performance.

TRAINING

During FY24, the SI team engaged in professional training to enhance their knowledge, skills, and abilities related to child-focused investigations and advocacy. Training sessions included:

- US Ombudsman Association training and conference
- University of South Carolina Children's Law Center trainings
- Training sessions on human trafficking
- Training related to mental health care for youth

SITE VISITS

During FY24, DCA communicated with all nine statutorily defined agencies. Processes were also put into place to ensure face-to-face contact (as opposed to communicating by email and/or telephone only) occurs each fiscal year with each agency.

State Child Advocate Amanda Whittle, Deputy State Child Advocate Kayla Capps, and members of the IU and CIU units made visits to the following state-operated facilities that house children or youth:

- Coastal Evaluation Center (CEC)
- DJJ Broad River Road Complex (BRRC)
- Governor's School for Agriculture at John de la Howe
- Juvenile Detention Center (JDC)
- Midlands Evaluation Center (MEC)
- South Carolina School for the Deaf and the Blind
- Upstate Evaluation Center (UEC)
- Wil Lou Gray Opportunity School
- William S. Hall Psychiatric Institute

In addition to these locations, visits were made to various camps, day programs, residential treatment programs, and other locations where children receiving services from one of the nine agencies are placed.

The primary goal of these visits is to ensure that children are receiving adequate services from state agencies. However, these engagements provide additional benefits, including:

- Raising awareness of the IU and CIU units, the services they provide, and the procedures for submitting complaints or reporting critical incidents
- Gathering information about resources that could be incorporated into the resource library on the DCA website and made available to constituents who contact the hotline
- Facilitating the development of rapport with staff at these placements, fostering a collaborative environment that benefits the children served

CUSTOMER SATISFACTION & RESPONSE TIMES

DCA seeks to respond to complaints and critical incident notifications with urgency and empathy. IU responded to 100 percent of complainants within one business day, surpassing the 98 percent goal set in the FY24 Annual Accountability Report.

LEGAL EXTERN PROGRAM

During FY24, SI saw the continuation of the Legal Extern Program, a strategic partnership with the University of South Carolina School of Law. However, because SI did not receive an extern directly from the law school in FY24, it created a paid legal externship program.

SI hired two law students during FY24, both of whom observed parole hearings, attended interagency staffings, and conducted research. The paid externship program allows DCA to ensure new lawyers have an awareness and understanding of not only DCA, but the overall system of care provided by child-serving agencies.

¹ S.C. Code of Laws Ann. Section 63-11-2270.

INVESTIGATIONS UNIT

3,484

*complaints
received*

18%

*year-over-year
increase*

288

*complaints
investigated*

Since DCA's founding, the Investigations Unit (IU) has been integral to child wellbeing by receiving, referring, investigating, and/or monitoring complaints from the public against nine child-serving agencies. It is led by Unit Director Laurie Davidson and includes state office investigative staff. The information they collect helps DCA and other agencies provide better services and assists the State Child Advocate in promoting and advocating for a broad vision of reform, including recommendations for improvement.

In individual cases, the IU team advocates for services that children should be—but are not—receiving. It also identifies areas needing improvement on a systemic level and brings those deficiencies to the attention of agency leadership. Complaints are received by telephone, email, or via the DCA website. IU is unable to accept complaints or reports of abuse or neglect. In these instances, IU is required to direct the complainant to the appropriate agency.

There were **3,484** complaints received in FY24 that were determined to involve services provided to children by one of the nine child-serving state agencies under DCA's purview. This

represents an **18% increase** over the 2,955 complaints received in FY23.

Of those **3,484** complaints:

- **3,099** were resolved by referral instead of an investigation, with complainants being directed to the appropriate state agency or community organization for assistance
- **288** were deemed within IU's scope and investigated
- **58** were duplicate submissions
- **31** lacked enough information to allow for review
- **8** were found to be non-agency referrals

Of the **288** investigated complaints against state agencies:

- **121** identified that adequate services were provided
- **52** identified inadequate services that were remedied
- **22** identified inadequate services that were not remedied
- **93** were still open and carried into FY25



CRITICAL INVESTIGATIONS UNIT

A second category of notifications—known as "critical incidents"—have been fielded since the agency's inception. Critical incidents are reported directly by the same nine child-serving agencies and involve fatal, near-fatal, or serious bodily or emotional injuries to a child in the care of, or receiving services from, the state.

Because of their sensitivity, critical incidents were only handled by Director Whittle and Deputy Director Capps, and initially, the caseload was relatively small and manageable, with 30 in the first year (FY20). However, as DCA strengthened its relationship with reporting agencies, the number grew exponentially, ending FY24 with a staggering 2,894 reported incidents [Fig. 1](#). This represents a 91 percent increase over the 1,519 critical incident notifications received in FY23. The dramatic rise may be attributed to SI's efforts to work with reporting agencies and raise awareness about the statutory requirement to report these incidents.

In FY23, Whittle and Capps began laying the groundwork for a separate unit, the Critical Investigations Unit, which would be solely dedicated to reviewing and investigating critical incident notifications. DCA hired an intake specialist, its first CIU employee, in January 2023. The unit has since expanded to include three full-time investigators. Additionally, IU's case management system was modified to include critical incident notifications, allowing CIU to identify and report trends to agency leadership.

In FY24, there were **2,894** critical incident notifications received. Of those:

- **1,712** were reviewed and found not to have met critical incident criteria
- **1,182** were reviewed and investigated

Of the **1,182** investigated incidents:

- **813** identified that adequate services were provided
- **110** identified inadequate services that were remedied
- **105** identified inadequate services that were not remedied
- **154** were still open and carried over into FY25

“

A critical incident is defined as:

A fatality, near-fatality, or serious bodily or emotional injury of a child who is in the custody of or receiving services from a state agency, or circumstances that result in a reasonable belief that a state agency failed in its duty to protect a child, resulting in the imminent risk or suffering of serious bodily or emotional injury, or death, of a child.²

DCA takes its responsibility for critical incidents very seriously and has worked closely with all child-serving agencies to ensure they are aware of both the requirement to report critical incidents to DCA, and to do so within the statutory 24-hour time frame.³ Thereafter, the State Child Advocate may perform an independent investigation or review a completed investigation.

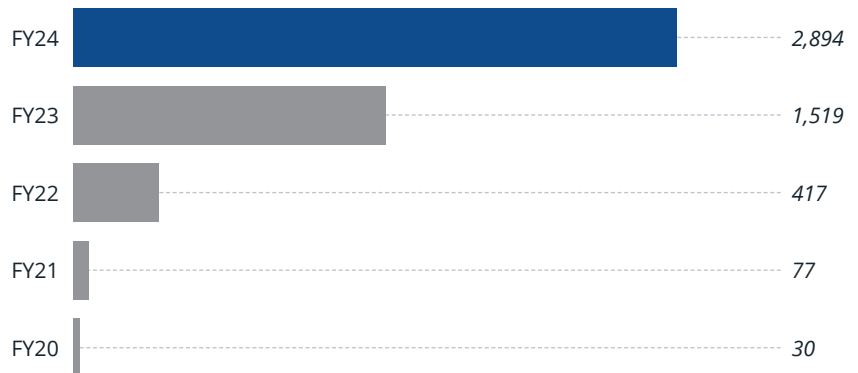
FY24 CRITICAL INCIDENT NOTIFICATIONS

In FY24, Critical Investigations received 2,894 CINs, compared to 1,519 in FY23. This represents a 91 percent increase year-over-year, and a 9,547 percent increase over DCA's first year in existence [Fig. 1](#).



TOTAL CINs BY FISCAL YEAR

Fig. 1



24-HOUR CRITICAL INCIDENT NOTIFICATION RESPONSE TIMES

FY24 saw eight of the nine child-serving agencies report critical incidents, two more than FY23. Unfortunately, the percentage of CINs received within the statutorily defined notification period dropped significantly to 56 percent in FY24 from 65 percent in FY23 [Fig. 2](#).

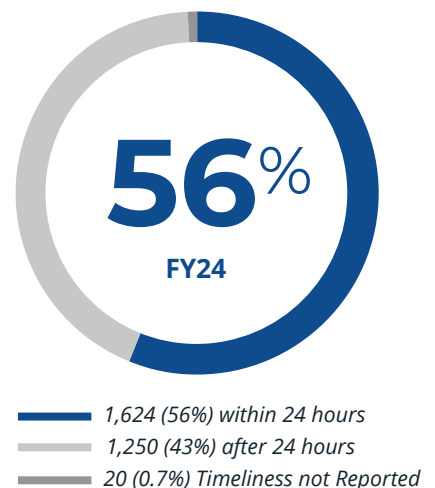
24-HOUR CIN RESPONSE TIMES⁴

Table 4

Agency	Total Notifications	Within 24 Hours	After 24 Hours	Timeliness not Reported	Compliance Rate
DDSN	1	-	1	-	0%
DHEC	50	5	44	1	10%
DHHS	83	36	47	-	43%
DJJ	1,957	1,189	761	7	61%
DMH	373	225	147	1	60%
DSS	426	165	250	11	39%
SCSDB	1	1	-	-	100%
WLG	2	2	-	-	100%
Not Recorded	1	1	-	-	100%
TOTAL	2,894	1,624	1,250	20	56%

CIN RESPONSE TIME COMPLIANCE

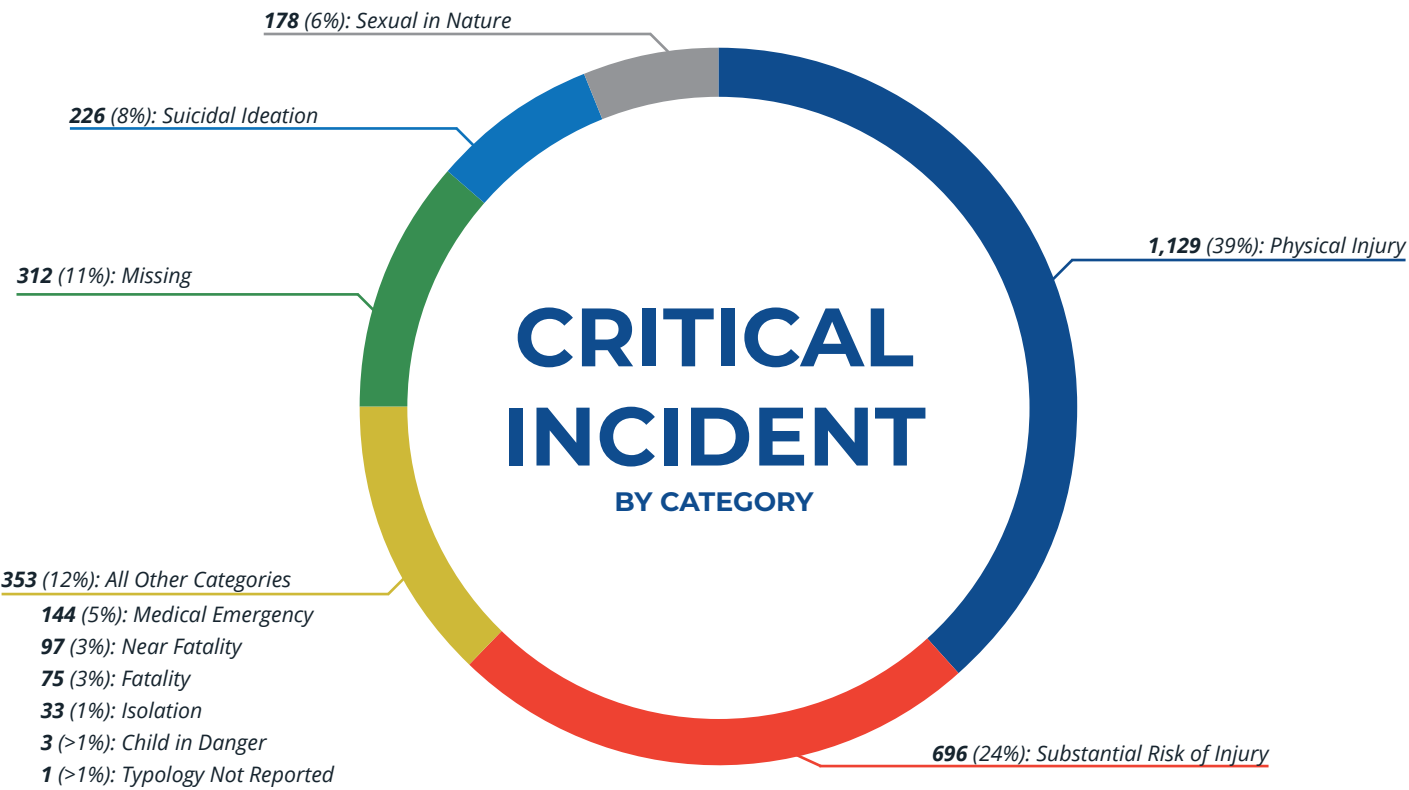
Fig. 2



² SC Code of Laws Ann. Section 63-11-2230. | ³ SC Code of Laws Ann. Section 63-11-2280. | ⁴ Child-serving agencies that have not in FY24 or have never reported a notification are not represented. A dash "-" indicates that no cases were reported.

CRITICAL INCIDENTS BY CATEGORY

Fig. 3



CRITICAL INCIDENT BY AGENCY⁴

Table 5

Agency	FY20	FY21	FY22	FY23	FY24
DDSN	-	-	-	4	1
DHEC	-	-	17	-	50
DHHS	-	-	22	87	83
DJJ	15	15	299	1,021	1,957
DMH	-	-	19	242	373
DSS	15	62	60	162	426
SCSDB	-	-	-	3	1
WLG	-	-	-	-	2
Not Recorded	-	-	-	-	1
TOTAL	30	77	417	1,519	2,894

AGENCIES REPORTING



Eight agencies reported critical incidents in FY24, up from six in FY23 [Table 5](#). For the first time, Wil Lou Gray submitted critical incidents.

CRITICAL INCIDENTS BY AGENCY AND CATEGORY⁴

Table 6

CRITICAL INCIDENT	DDSN	DHEC	DHHS	DJJ	DMH	DSS	SCSDB	WLG	Not Recorded
Child in Danger	-	-	-	-	1	2	-	-	-
Fatality	-	-	1	4	3	67	-	-	-
Accident	-	-	-	-	-	8	-	-	-
Drowning	-	-	-	-	-	4	-	-	-
Drug /Alcohol Exposure	-	-	-	1	-	5	-	-	-
Gunshot Wound	-	-	-	1	-	7	-	-	-
Homicide	-	-	-	-	-	3	-	-	-
Medically Fragile	-	-	-	-	2	11	-	-	-
Natural	-	-	-	-	-	2	-	-	-
Severe Bodily Injury	-	-	-	-	-	1	-	-	-
Suicide	-	-	1	1	1	1	-	-	-
Type not Reported	-	-	-	-	-	10	-	-	-
Unborn Fetus	-	-	-	-	-	1	-	-	-
Unsafe Sleep	-	-	-	1	-	8	-	-	-
Undetermined	-	-	-	-	-	6	-	-	-
Improper Isolation/Restraint	-	-	1	17	15	-	-	-	-
Medical Emergency	-	7	6	59	19	53	-	-	-
Missing	-	17	25	36	53	181	-	-	-
Near Fatality	-	3	1	45	25	23	-	-	-
Attempted Homicide	-	-	-	-	-	8	-	-	-
Attempted Suicide	-	3	1	36	22	5	-	-	-
Car Accident	-	-	-	-	1	1	-	-	-
Gunshot Wound	-	-	-	-	2	4	-	-	-
Medically Fragile	-	-	-	-	-	1	-	-	-
Near Drowning	-	-	-	1	-	1	-	-	-
Severe Bodily Injury	-	-	-	6	-	-	-	-	-
Type not Reported	-	-	-	2	-	3	-	-	-
Physical Injury	1	18	37	909	127	34	-	2	1
Assault	1	11	24	812	87	19	-	2	1
Self-Harm	-	7	13	97	40	15	-	-	-
Sexual in Nature	-	1	7	118	41	10	1	-	-
Attempted Sexual Assault	-	-	1	34	4	2	-	-	-
Sexual Assault	-	1	6	84	37	8	1	-	-
Substantial Risk of Injury	-	3	4	584	75	30	-	-	-
Suicidal Ideation	-	1	1	184	14	26	-	-	-
Typology not Reported	-	-	-	1	-	-	-	-	-
TOTAL	1	50	83	1,957	373	426	1	2	1

CASS ELIAS McCARTER GUARDIAN AD LITEM PROGRAM

BY THE NUMBERS

11,577

Total number of children served in FY24 by both volunteer and staff GALs

999

Number of active volunteer GALs serving across 45 counties in South Carolina

6,600

Average number of children served each month by both volunteer and staff GALs

56

Percent of cases handled by volunteer GALs. The remaining 44 percent were handled by 135 staff

MEETING THE NEED IN SOUTH CAROLINA

The Cass Elias McCarter Guardian ad Litem Program, led by Division Director LaDara Depugh, is statutorily⁵ responsible for assigning a guardian ad litem (GAL) to serve as a court-appointed special advocate for each child who is involved in a Department of Social Services abuse and neglect case in family court in all counties except Richland.⁶

As a result, GALs are assigned to children who are in foster care, as well as children who are placed with their family or other adults through family preservation if there is a DSS legal proceeding in family court.

In FY24, GAL provided best-interest advocacy for **11,577** children, serving an average of **6,600** children each month. The program meets this need through a small army of **999** active volunteers and **135** full-time staff. Volunteers, who typically carry an average of two cases at a time, were assigned to **56 percent** of these children [Table 7](#), while staff attended to the remaining **44 percent**.

DCA'S GUARDIANS AD LITEM
ARE NOT "PRIVATE" GALs.



GALs contribute to advocacy through direct involvement with children and by presenting feedback regarding systemic improvements.

The program was named after Cass Elias McCarter, a volunteer who started the first GAL program in Marlboro County in 1984.

Since its inception, it has operated with a volunteer business model.⁵

All volunteers receive support, supervision, coaching, and training that align with the standards and protocols provided by the National GAL/CASA Association for Children.

Volunteer GALs are sometimes confused with “private guardians ad litem,” who are appointed in private cases, such as divorces and involve issues such as child custody and visitation.⁷

All DCA GALs must:

- Pass criminal background and DSS database checks
- Complete 30 hours of initial training plus ongoing yearly training
- Verify to the court they have met the eligibility requirements
- Be represented by contract attorneys in court proceedings

NEW CASE MANAGEMENT SYSTEM

The GAL Program selected CasaManager for its new case management solution in FY22, with development of, and data migration to, the new system beginning in FY23. CasaManager officially launched on March 22, 2024, and virtual and in-person trainings were held for staff in April and May.

Designed with GAL's child-focused mission and data needs in mind, CasaManager is expected to increase efficiency, improve quality assurance, strengthen staff morale, and enhance advocacy for children.

VOLUNTEER RECRUITMENT AND SATISFACTION

The program's operational model anticipates that all court-appointed GALs will eventually be volunteers, and it has been working towards this goal. In FY19, volunteers were appointed to 51 percent of cases. That number peaked at 61 percent in FY21 and sits at 56 percent for FY24. The new CasaManager system has allowed GAL to significantly clean the data, removing hundreds of inactive volunteers and get a more accurate picture of active volunteers. This shrunk the actual number of volunteers to 999 in FY24 from 1,381 in FY23.

Recognizing recruitment as a priority, GAL has devoted significant resources to increasing enrollment, including creating positions for regional and state recruiters in FY22. While many citizens express interest and enroll in pre-service training, a large number do not finish. In FY23, only 40 percent of volunteers followed through and were eligible to take a case. To stem the attrition rate, GAL changed its training methods in January 2024 to an all-virtual model and offered more days and times to accommodate the schedules of potential volunteers. These efforts paid off and the program ended FY24 with 56 percent of applicants completing their pre-service training and becoming qualified.

To retain these volunteers, it is imperative that they are satisfied with the support and guidance they receive from the program. To measure their satisfaction, DCA has asked volunteers to complete a satisfaction survey each February since 2020. In FY24, 93 percent of volunteer guardians ad litem indicated they were satisfied with their relationship with the program, up from 80 percent the previous fiscal year [Table 8](#).

This increase may, in part, be attributed to a deliberate strategy of recognizing the work and accomplishments of volunteers. In FY23, the program beat its goal of 100 highlights by 600 percent with 647. Although the recruitment and training team continues to perform these tasks, they did not track it as a goal in FY24.

The GAL Program will continue to address the issue of recruiting and retaining volunteers to advocate for children by amending the measures and targets for FY25.

STAFF RECRUITMENT

When a volunteer cannot be appointed to a child's case, GAL staff perform this function, and in FY24, they provided advocacy for 44 percent of children—an average of 21 children per month per staff member. This work is in addition to their regular day-to-day activities, and caseloads are higher when unfilled positions exist in an office.

To reduce these workloads, Depugh created a tool to track vacancies, monitor the hiring process, and regularly communicate with her team to ensure the process was consistently moving. Her intentionality and focus has reduced the vacancy rate to 6 percent at the end of FY24 from almost 40 percent in FY20 [Table 9](#).

QUALITY ASSURANCE

Depugh hired a quality assurance director in June 2022 to ensure that services are being provided consistently across all counties. The QA director developed standards, best practices, scoring metrics, and procedures that members of the QA team used to conduct audits of all county offices in FY24.

Thereafter, GAL Program leadership participated in virtual and face-to-face meetings to discuss barriers, develop solutions, and identify accomplishments, which led to new measures and targets for FY25.

VOCA/SAVS GRANT AWARDS

While the reduction in vacancies is to be applauded, its impact has been lessened by a parallel decline in the number of staff hired through Victims of Crime Act (VOCA) grant awards. Grant amounts have decreased each year and were eliminated altogether in FY24. Replacement of these funds this year came from the state's Supplemental Allocation for Victim Services (SAVS) grant [Table 10](#). The hope is that VOCA funding will be reinstated in the future.

BUDGET REQUEST

At the beginning of FY24, 20 unfilled time-limited positions were reclassified from Continuum of Care to the Guardian ad Litem Program in response to the workloads for GAL staff. The program continues to vigorously recruit volunteers, but until there are enough to serve all children in DSS abuse and neglect court proceedings, additional staff are needed to ensure children are receiving best-interest advocacy as required by law and best practice.

DCA requested 21 and received eight FTEs for the GAL program for FY25. Among other budget items, the agency will request 14 FTEs for FY26 to phase out and replace the time-limited positions, which are not supported by recurring state funding. These new positions are essential to fulfilling the agency's statutory duties of meeting with children, conducting independent investigations, attending meetings and hearings, and issuing reports and recommendations to the court.

GAL VOLUNTEERS APPOINTED TO CASES Table 7

Year	Baseline	Goal	Actual
FY20	51%	60%	59%
FY21	59%	70%	61%
FY22	61%	80%	56%
FY23	56%	65%	52%
FY24	52%	55%	56%

STAFF VACANCY RATE Table 9

Year	Baseline	Goal	Actual
FY20	37%	25%	20%
FY21	20%	10%	13%
FY22	13%	10%	18%
FY23	18%	10%	11%
FY24	11%	10%	6%

VOLUNTEER SATISFACTION SURVEY Table 8

Year	Baseline	Goal	Actual
FY20	n/a	80%	70%
FY21	70%	80%	83%
FY22	83%	90%	76%
FY23	76%	85%	80%
FY24	80%	83%	93%

VOCA/SAVS GRANT AWARDS Table 10

Year	Source	Award Amount	Costs Covered
FY20	VOCA	\$429,984	10 positions and a rental car
FY21	VOCA	\$352,585	7 positions, cellphones, service, laptops
FY22	VOCA	\$317,327	6 positions with mileage, cellphone
FY23	VOCA	\$317,298	6 positions with mileage
FY24	SAVS	\$317,098	6 positions with mileage

LEGAL REPRESENTATION FOR GUARDIANS AD LITEM

Guardians ad litem must be represented by attorneys in court,⁸ and the GAL program works with approximately 40 attorneys to provide this representation. Because these attorneys are on contract, there is a significant savings to the state that would otherwise be spent on salaries, fringe, and recurring operational costs.

DCA and GAL are grateful to the attorneys who represent guardians ad litem, particularly following the cessation of the COVID-19 state of emergency. As courts became fully functional again, the GAL program embraced intentional and aggressive efforts to serve children and families whose cases were delayed due to the pandemic. This included scheduling cases on non-traditional “DSS days,” which required attorneys to be available on days they would otherwise devote to their private cases.

DIRECT REPRESENTATION OF CHILDREN

In South Carolina, children in juvenile justice cases are required to have attorney representation. However, the Palmetto State is one of only four US states that does not guarantee some form of right to counsel for children in abuse and neglect proceedings, according to the National Association of Counsel for Children.

In its Counsel for Kids campaign, the NACC found that, compared to youth who do not have attorney representation, children appointed client-directed attorneys experience better results, less

time in foster care or group settings, shorter time to adoption or guardianship, and more successful reunifications. They are also 45 percent more likely to reunify with their parents, 30 percent less likely to change placements, and 65 percent less likely to change schools. A client-directed attorney can shorten the time a child is in the foster care system, meaning cost-savings for state and federal taxpayers.⁹

All of this adds up to better short- and long-term outcomes for children in foster care.

As chair of the Bench-Bar Committee, Family Court Judge Ernie Jarrett created the Direct Representation Subcommittee to study the issue and explore the possibility of a pilot program in the state. The subcommittee, chaired by DCA Director Whittle, has collaborated with numerous partners including court administration, DSS, the Commission on Indigent Defense, the Children’s Law Center, and the NACC, who has offered free technical assistance to support the effort.

Meetings began in FY24 and will continue in FY25, acknowledging the necessary time to consider, develop, and test the model in South Carolina. Preliminary discussions have included: (1) the agency which would be most appropriate to support the attorneys who are appointed for children; (2) the counties where the pilot should occur; (3) criteria for appointment of counsel for children within the pilot area; (4) statutory implications; (5) funding; and (6) project management.

⁵ S.C. Code of Laws Ann. Section 63-11-500. | ⁶ Richland County operates its own program | ⁷ S.C. Code of Laws Ann. Section 63-3-810, et. seq. pertains to the appointment of GALs for private custody cases where DSS is not a party to the case. | ⁸ S.C. Code of Laws Ann. Section 63-7-1620. | ⁹ <https://counselforkids.org/wp-content/uploads/2024/03/Counsel-for-Kids-Information-Sheet-2023.pdf>

CONTINUUM OF CARE

INTRODUCTION

Continuum of Care (COC), led by Division Director Greg Wright, was created by legislation in 1983 to develop and enhance the delivery of services to severely emotionally disturbed children and youth and to ensure that the special needs of this population are met appropriately to the extent possible within the state. By state statute,¹⁰ COC serves children:

- who have been diagnosed as severely emotionally disturbed
- who have exhausted existing available treatment resources or services
- whose severity of emotional, mental, or behavioral disturbance requires a comprehensive and organized system of care

HIGH FIDELITY WRAPAROUND

COC believes that children heal faster in their homes, schools, and communities than they would if separated from family and placed in a costly and more restrictive environment. Because youth are not removed from their homes, they and their families experience less trauma, and the state sees fewer children under its care, either through foster care or the juvenile justice system.

To realize that goal, in 2014 COC adopted as its treatment model High Fidelity Wraparound (HFW),¹¹ an evidence-based approach to providing individualized, team-based, and intensive care

coordination for youth with complex and challenging mental and behavioral health needs.

Through HFW, COC's objective is to empower youth and families to help them realize their hopes and dreams, decrease out-of-home placements, improve school attendance and performance, decrease interactions with the legal system, and enhance the youth's overall quality of life.

COC is the only state provider of High Fidelity Wraparound services in South Carolina.

CHILDREN SERVED

During FY24, a total of **143** youth were enrolled and received wraparound care coordination services from COC, with an average of **117** children served per month [Table 11](#).

Of those, **129 (90 percent)** were eligible for services through a Palmetto Coordinated System of Care (PCSC) waiver, meaning COC was able to receive reimbursement for services from Medicaid.

This is a decrease from the 162 waiver-eligible youth served in FY23 and well short of COC's FY24 goal of 350 youth. The waiver anticipates that COC will partner with up to 400 youth in its fifth and final year, which is COC's goal for FY25.

IMPROVED OUTCOMES

COC uses the Child and Adolescent Functional Assessment Scale (CAFAS) to objectively measure a youth’s improvement and the efficacy of the High Fidelity Wraparound model. CAFAS gauges how children function in daily life activities and assesses the level of impairment of children and adolescents who have been or are at risk for emotional, behavioral, substance abuse, psychiatric, or psychological problems. Youth are evaluated at enrollment to record a baseline number and then every 90 days until treatment concludes. By the end of the program, youth should see a significantly reduced CAFAS score. That score, coupled with a team decision, helps determine when High Fidelity Wraparound care coordination is no longer needed.

Between July 1, 2023, and June 30, 2024, CAFAS scores dropped an average of 26 points across the state’s four regions¹² Table 12, falling short of the 30-point goal set forth in DCA’s FY24 Annual Accountability Report. The deficit could be attributed to a considerable workforce shortage and/or the dynamics associated with implementing High Fidelity Wraparound.

FINDING FISCAL SUSTAINABILITY

When it became a part of the DCA in July 2019 (FY20), COC was running a deficit. DCA spent FY20 working to stabilize the division through a budget request and expense analysis. It also initiated discussions with DHHS to secure an increased and sustainable reimbursement rate through a Medicaid waiver for COC to provide High Fidelity Wraparound services. The Palmetto Coordinated System of Care 1915(C) waiver was approved in FY21.

Medicaid reimbursement is tied directly to the number of youth served, and this initially helped COC’s budget climb into the black. However, as the number of children served declined, so did the reimbursement amount, falling from \$1.45M in FY22 to \$612K in FY24 Table 13.

INCREASING REFERRALS

State Child Advocate Amanda Whittle has grown increasingly concerned that, as South Carolina clamors for placement and services, COC is serving fewer children. To address this, in FY24 Whittle asked the State Office of Inspector General to conduct a confidential study to improve the efficacy of COC and its service model. This study will continue into FY25 and will include consideration of:

- Monthly number of referrals received
- Monthly number of referrals determined to be eligible
- Source of referrals
- Monthly caseloads of wrap facilitators
- Monthly caseloads of wrap team leads
- Monthly waitlists by region

COC hopes to increase the number of children it serves through several initiatives that are currently in development and scheduled for implementation in FY25, including:

- Launching an electronic application, making it substantially easier to initiate a referral and streamline internal processes
- Lowering the initial CAFAS score threshold from 140 to 120, making it easier for youth to qualify for services
- Reclassifying a COC vacancy to create a new community liaison position responsible for creating, building, and sustaining relationships with referral sources and providing information to communities and agencies about COC’s services and eligibility requirements. This employee will also track data on the number of youth served to evaluate the effectiveness of various tactics and adjust accordingly.

AVERAGE YOUTHS SERVED PER MONTH Table 11

Region	Average Number of Youth
Region A - Midlands	29
Region B - Upstate	28
Region C - Pee Dee	40
Region D - Lowcountry	21
TOTAL AVERAGE SERVED PER MONTH	117

AVERAGE YOUTH CAFAS SCORE IN FY24 Table 12

Region	Base Score	Most Recent	Change	Percent Change
Region A - Midlands	135	112	-23	-17%
Region B - Upstate	127	96	-31	-24%
Region C - Pee Dee	144	119	-25	-17%
Region D - Lowcountry	143	119	-24	-17%
AVERAGE DIFFERENCE			-26	-19%

COC BUDGET ANALYSIS Table 13

Fiscal Year	Year End Balance	PCSC Waiver Reimbursement	Youth Served Through Waiver
FY19	-\$893K	N/A (No PCSC Waiver in place)	N/A (COC not part of DCA)
FY20	-\$757K	N/A (No PCSC Waiver in place)	N/A
FY21	-\$7.5K	\$1.19M	189
FY22	\$487K	\$1.45M	235
FY23	-\$12.5K	\$1.09M	162
FY24	-\$369K	\$612K	129



INCREASING THE WORKFORCE

Hiring has been an issue for the division for several years, including ending FY23 with a 40 percent vacancy rate. The result is that staff have had to wear many hats, including COC Director Greg Wright who at one point was simultaneously serving as regional director for two regions while also fulfilling his statewide duties.

To address the problem and improve recruitment and retention, agency leadership:

- Analyzed salaries with consideration for job duties, position classification, education, and experience
- Developed and received approval for a new salary structure, which provided raises to current staff and allowed the division to increase hiring salaries
- Implemented performance and equity increases for the first time in the division's history

Thanks to these efforts, COC reduced its vacancy rate to 32 percent in FY24. While an improvement, it fell short of its 20 percent goal. COC also lost two positions in April 2024, when DMH did not renew

its contract to have COC staff provide services at the Roads of Independence program in Sumter. Unfortunately, the number of youth served did not increase commensurate with the increase in staff.

THE NEED FOR SERVICES

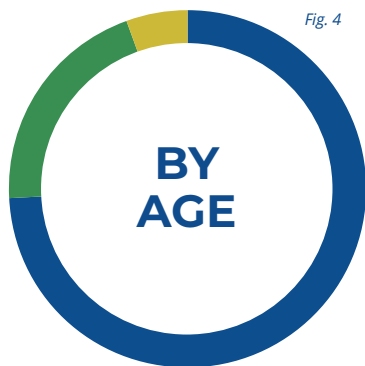
Even as analysis for improvements to the division's operational model are underway, the services it provides remain crucial for children who are suffering from severe emotional or behavioral health needs.

Local Impact:

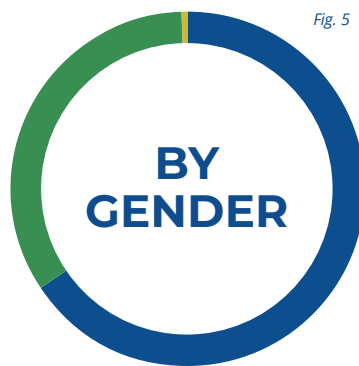
The following story is an example of how COC improves not only a child's life, but the life of the whole family.

John B.¹³ is an adolescent who was referred to COC by his mother for extreme verbal aggression, defiance, and destruction of property at both school and home. In fact, he had been expelled from his middle school and was attending an outpatient day treatment school program. His diagnoses included oppositional defiance disorder, disruptive mood dysregulation disorder, anxiety disorder, and ADHD.

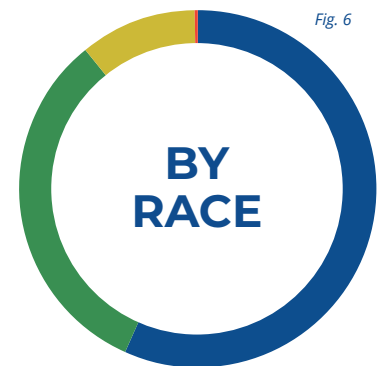
DEMOGRAPHIC DATA FOR FY24



■ 0-5 years old (0.0%)
■ 6-11 years old (20.2%)
■ 12-17 years old (74.4%)
■ 18+ years old (5.4%)



■ Male (65.7%)
■ Female (34.0%)
■ Transgender (0.3%)
■ Gender not identified (0.0%)



■ White (56.7%)
■ Black (32.5%)
■ Other¹⁴ (10.7%)
■ Race not identified (0.1%)

He and his family committed to working with the COC wrap facilitator who provided the child with various supports, including:

- Sharing resources that allowed the mother to find a new private therapist she could afford
- Finding a local provider for John B. to receive behavioral modification services three times each week, where he developed coping skills that resulted in better self-control when challenged, frustrated, or upset. This reduced behavioral outbursts.
- Working with the family and school to create a plan that eventually allowed John B. to be re-admitted to his school and fully transition back to his regular classes

COC's involvement with John B. and his family dramatically improved their lives. His CAFAS score dropped from 160 to 90. His parents reported they had learned how to better advocate for their son's needs, and John B. expressed that he had greatly improved his coping skills in difficult situations. He was now in much better control of his temper and able to manage his emotions. The family shared that they looked forward to sitting down together for dinner at the end of each day.

National Need:

While John B.'s story provides a snapshot of local outcomes, national data paints a broader picture of the critical need for programs like COC.

In 2021, the US Surgeon General published a report¹⁵ revealing that "even before the COVID-19 pandemic, mental health challenges

were the leading cause of disability and poor life outcomes in young people, with up to 1 in 5 children ages 3 to 17 in the US with a reported mental, emotional, developmental, or behavioral disorder."

Among the alarming statistics found in this report:

- Between 2009 and 2019, the proportion of high school students reporting persistent feelings of sadness or hopelessness increased by 40 percent.
- Between 2007 and 2018, suicide rates among youth ages 10-24 in the US increased by 57 percent.
- Early estimates from the National Center for Health Statistics suggest there were tragically more than 6,600 deaths by suicide among the 10-24 age group in 2020.

According to the Journal of the American Medical Association,¹⁶ the pandemic has exacerbated mental health problems among children and adolescents, with rates of anxiety and depression doubling since its beginning. And in a 2022 press release,¹⁷ CDC Acting Principal Deputy Director Debra Houry, M.D., M.P.H., stated, "The COVID-19 pandemic has created traumatic stressors that have the potential to further erode students' mental wellbeing. Our research shows that surrounding youth with the proper support can reverse these trends and help our youth now and in the future."

Continuum of Care's delivery of services is more essential than ever to address children's and youth's complex and challenging mental and behavioral health needs.

¹⁰ S.C. Code of Laws Ann. Section 63-11-1310 et. seq. | ¹¹ <https://preventionservices.acf.hhs.gov/programs/830/show> | ¹² For both active and inactive youth | ¹³ Not his real name | ¹⁴ Other races included: Mixed race (5.2%); Hispanic (5.0%); Native Hawaiian/Other Pacific Islander (0.3%); Other (0.2%); and Not Identified (0.1%) | ¹⁵ <https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf> | ¹⁶ <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2782796> | ¹⁷ <https://www.cdc.gov/media/releases/2022/p0331-youth-mental-health-covid-19.html>

FOSTER CARE REVIEW DIVISION

BACKGROUND

The Division for Review of the Foster Care of Children (herein called Foster Care Review Division or FCRD) was created in 1974 and is responsible for administering the Foster Care Review Boards (FCRB), which review the cases of children in foster care to advocate for permanency.¹⁸ Administered by the Department of Children's Advocacy, FCRD is under the direction of Lindsey Taylor.

FCRB was created to provide external accountability for the foster care system and to advocate on behalf of children in foster care. South Carolina was the first state to enact a system of citizen review responsible for assessing the permanency of children in foster care. FCRB consists of a state board of directors and 43 local boards. The State Board of Directors reviews and coordinates the activities of the local review boards and promulgates regulations regarding the review of information and the scheduling and conducting of reviews.¹⁸

REVIEWS OF CHILDREN IN FOSTER CARE

Statutorily, FCRB is tasked with reviewing case progress and steps being taken to expedite permanency for children in foster care. Local review boards begin reviewing the cases of each child who has been in foster care for four months and then again every six months thereafter while the child is in the custody of DSS.

FCRD schedules each review, during which DSS provides case records and details, and parents, caregivers, and other involved parties share updates and their knowledge of the case.

In FY24, FCRD scheduled **5,706** reviews for **3,156** individual children as compared with 4,960 scheduled reviews for 4,108 children during FY23.¹⁹

REVIEW FORMAT

During FY24, the State Board of Directors voted to make permanent the virtual review format. This move realizes significant cost-savings to the state and provides more accessibility for all parties, which is vital to the success of the review process. Benefits include:

- Reduced travel, which saves time and money and increases efficiency for state employees and board members
- Increased attendance by parents, foster families, and other interested parties who no longer must take time off work to attend hearings
- Greater flexibility for board members who serve as a substitute on boards across the state that have vacancies

Historically, reviews have been held in-person at a county DSS office but went virtual in 2020 in response to Covid-19. With the end of the pandemic, and in acknowledgment of the value of face-to-face interaction, discussions were held regarding a return to in-person reviews. FCRD decided to explore which format ultimately works best, and with help from the division, hybrid reviews were conducted in September 2023 and January 2024 that allowed invited parties to choose whether to attend virtually or in-person. FCRD then distributed a survey to all participants to gather their feedback regarding all three meeting types: fully virtual, hybrid, and fully in-person.

The division found that most attendees, including a significant number of board members, chose to utilize the virtual meeting option. Additionally, 67 percent of respondents indicated a strong preference for virtual meetings and 53 percent disliked the in-person format. Comments highlighted accessibility, flexibility, and the elimination of transportation and other unnecessary barriers.

In addition to the survey, FCRD Director Taylor discussed the format options with numerous board members across the state, the majority of whom were in favor of continuing virtually. Several board members noted that the increased attendance, benefits for families, and overall improved efficiency and resource management outweighed their personal preference for in-person reviews. The State Board of Directors concurred with this feedback and expressed concern that, after four years of virtual access, a return to fully in-person meetings would negatively affect attendance and diminish the impact that reviews have on permanency for children in foster care.



BY THE NUMBERS

5,706

*reviews held
in FY24*

3,156

*children reviewed
in FY24*

35%

*board member
vacancy rate*

ANNUAL AND QUARTERLY REPORTING

FCRD monitors and reports on an annual and quarterly basis the progress in achieving permanent plans for children in foster care. While all four quarterly reports were submitted to DSS, they arrived after FY24 concluded. These delays were due in part to personnel factors, as well as to problems with CASPER, FCRD's previous inefficient and outdated database program. The 18-year-old program was replaced in FY24 by CAMS, a new case management system designed to drive action and advocacy for permanency for children in foster care in South Carolina. More about the transition can be found under the "Continuous Quality Improvement" portion of this report.

TRAINING AND TEAM BUILDING

In FY24, FCRD hosted one statewide, four regional, and four Lunch and Learn trainings designed to ensure that board members have relevant and updated information concerning South Carolina's foster care and child welfare systems. The statewide virtual training, part of the annual Professional Development Day, was attended by more than 100 board members. In-person regional trainings allowed board members, FCRD staff, and DSS staff to have face-to-face interaction. A slate of four sessions were held for DSS staff to receive instruction on the new "Barriers to Permanency" tool. Additionally, FCRD organized the first chairperson training since 2019 to educate local board chairs and vice chairs about their duties and responsibilities in their leadership roles on the board.

Team building has been essential to raising morale and resilience, especially as staff worked steadfastly to migrate to a new case management system while also absorbing workloads resulting from staff vacancies. During FY24, FCRD engaged in a series of trainings and events to build morale and foster a positive work environment, including a two-day staff retreat at the end of calendar year 2023. The results paid off, with zero vacancies at the end of FY24.

CONTINUOUS QUALITY IMPROVEMENT

As reported in DCA's FY22 Annual Report, Director Amanda Whittle asked the Office of Inspector General to conduct an efficiency study of both FCRD and FCRB to assist with improving processes, workflows, workloads, and outcomes. Foundational work to address these concerns began in FY22 and continued through FY24. Key recommendations—followed by their progress—included:

Replace the outdated and unsupported CASPER database system and move to a paperless process

During FY24, FCRD launched its new case management system, CAMS (Child Advocacy Management System) and retired its outdated database, CASPER. The implementation of CAMS began

FCRD's move toward paperless record keeping. CAMS has improved the division's ability to track, analyze, and use data to advocate for children. It has also improved employee morale and efficiency.

CAMS will soon integrate with DSS's case management system, making data sharing significantly more efficient and providing case information updates almost in real time.

Just months after launching CAMS in July 2023, DCA and FCRD received the inaugural Customer Innovation Award for Environmental and Social Impact from Hyland Software, Inc. at its annual national conference, CommunityLIVE. The awards program "recognizes forward-thinking organizations that leverage Hyland's content service solutions to transform their work."²⁰

Create a system of accountability for areas of concern

FCRD completed its effort to transform the boards' "Areas of Concern" to "Barriers to Permanency." This work was spearheaded by Director Taylor to more intentionally detect and target barriers to permanency for children in foster care and improve the division's ability to identify and capture the causes for these barriers. The additional data being gathered about barriers—such as lack of services in a certain area of the state, details about placement shortages for a particular population, and delays regarding adoption services for legally free children—will help define specific approaches to overcoming those barriers. This change in approach provides FCRD, board members, DSS, and other responsible partners with actionable advocacy steps that can be taken to help children in foster care achieve permanency more quickly and easily.

Review and update internal policies as well as inconsistent statutes among partners

FCRD made progress—but did not complete—its goal of reviewing and updating division policies and procedures to coincide with the launch of its new case management system. Although this target was not reached during FY24, significant advancements were made to improving FCRB and FCRD's processes, and this capacity-building work was necessary to drive permanency advocacy for children.

The division continues to work closely with the State Board of Directors, chaired by Andrea McCoy, and local review boards across the state. In addition to the policy updates for both board members and staff, the division and state board will complete their formal review of regulations in FY25, which must be done every five years to stay in compliance with state law.²¹

Similarly, FCRD continued efforts begun in FY23 to address inconsistent statutory standards among DCA and FCRD, and among DSS, FCRB, and GAL. While these statutory changes remain a long-range goal, a great deal of work was achieved by division leadership to clearly articulate and communicate what is required for reviews

to meet existing statutory mandates. Training was also delivered to board members, staff, and DSS staff to educate them on these requirements.

Improve communication among DCA, DSS, FCRD, GAL, the judiciary, and other partners

FCRD continued to strengthen communication and collaboration with several key partners, especially among board members and DSS staff.

Board Members:

During FY24, the division established a training and volunteer coordinator position to be a dedicated point of contact for all questions regarding training, events, and other issues that impact board members and their service. The coordinator also began a monthly Lunch and Learn training series, inviting outside presenters to share their expertise on topics impacting the foster care system.

DSS:

FCRD coordinated initiatives throughout the year to strengthen relationships and promote mutual education efforts between FCRD and DSS staff on their respective missions, values, statutory requirements, programs, and policies. Initiatives included:

- DSS staff attending the Regional Professional Development sessions provided to board members, during which information was shared about the statutory requirements of case reviews and how the Freedom of Information Act impacts board members
- DSS staff attending four "Barriers to Permanency" trainings to learn about this new approach and how it will translate to advocacy
- DSS staff presenting at multiple Lunch and Learn sessions, providing education about the different program areas within their agency to help board members have a more comprehensive understanding of the child welfare system
- FCRD staff participating in quarterly meetings with DSS leadership to address any concerns identified during reviews and collaborate on opportunities for improving the foster care review process
- FCRD staff participating for the third year in a row in the Child Welfare Academy certification training that is required for new DSS child welfare staff

Identify more efficient ways to fill board and staff vacancies

FCRD ended FY24 with 76 local board vacancies (a 35 percent vacancy rate), a notable increase over the 55 vacancies (26 percent vacancy rate) in the first quarter of FY23.²² While some board members volunteer to fill-in on other boards for reviews, this is not a sustainable solution. In FY24, FCRD committed to being more intentional in tracking, reviewing, and raising awareness about board vacancies in the community and among legislative delegations. Among the strategies employed:

- FCRD worked with DCA's communications director Rob Schaller to list and regularly update vacancies on the FCRD website, in the agency newsletter, and via posts on social media
- The State Board of Directors formed a subcommittee to identify additional ways that vacancies can be publicized and to help local board members increase their recruitment efforts
- FCRD held virtual information sessions for interested individuals about the role of the Foster Care Review Board, what the commitment involves, and what types of education and experience may be beneficial for board members
- Attendance at legislative delegation meetings and communication with legislative delegations and the governor's office regarding board vacancies

These efforts are an extension of the comprehensive communication plan and feedback loop developed in FY23 to ensure the public and local legislative delegations are aware of vacancies and the impact vacancies have on FCRB functionality. This two-pronged approach included:

- Staff notifying delegations when a resignation is received and again when current board members share information about new applicants to ensure the process moves forward
- Local board members communicating their concerns about vacancies directly to their delegations to keep legislative delegations apprised of pertinent issues

Data limitations during the transition to CAMS hampered the ability to report specific board member information to delegations and the governor's office in FY24. However, several initiatives are in development to make this process more robust in FY25.

Adhere to the statutory names for the Foster Care Review Division and the Foster Care Review Board

Agency and division leadership and staff have continued to clearly define and consistently communicate the differences between FCRB and FCRD and their distinct roles and functions.

¹⁸ Pursuant to S.C. Code of Laws Ann. 63-11-700, et. seq. | ¹⁹ The DCA's FY23 annual report records reviews for 3,233 children. This discrepancy was due to an error in how data was pulled, counting only reviews where areas of concern were identified and excluding those with no areas of concern. The error was discovered after publication of DCA's report but was correctly recorded in FCRD's FY23 annual report, which can be accessed at fcrd.sc.gov. | ²⁰ <https://www.hyland.com/en/company/newsroom/2023-customer-innovation-award-winners> | ²¹ S.C. Code of Laws Ann. Section 1-23-120(j) | ²² Prior to FY24, FCRD did not track board vacancies on a monthly basis. However, a request for this data occurred in October 2022.



SOUTH CAROLINA HEART GALLERY

The South Carolina Heart Gallery (SCHG) works to find forever families for children in foster care who are legally free and awaiting adoption. To fulfill its mission, SCHG recruits photographers who volunteer to take photos of children at scenic locations around the state. Staff share the photos on SCHG's website and Facebook page, partner with media outlets, and work with public and nonprofit organizations to host exhibits of the framed portraits. A part of the Foster Care Review Division (FCRD) since 2005, SCHG has been funded through a contract with the Department of Social Services since 2008.

SCHG experienced significant growth during FY24 resulting in increased visibility for children waiting for their forever families. One of the largest undertakings was creating an art gallery experience in a storefront that was provided free of charge by Columbiana Centre, a mall in Columbia, South Carolina. This exhibit



launched in September 2023 and continued through the remainder of the fiscal year and into FY25.

SCHG held nine photo and video shoots in collaboration with partner Grant Me Hope and conducted two “porch photo shoots” resulting in photos and videos for more than **50** children. Porch photo shoots began during the COVID-19 pandemic but have continued for children who need individualized sessions based on their specific circumstances, such as medical conditions or behavioral needs.

SCHG created a Facebook page in August 2022 to promote public adoption and recruit prospective adoptive parents. The page accrued almost **1,300** followers in FY24 with several posts going viral, resulting in inquiries from all over the country. Additionally, SCHG more than doubled the number of referrals it received,

from **383** in FY23 to **851** in FY24. To build on its momentum, SCHG developed new annual accountability goals for FY25 to increase social media engagement and the number of adoption inquiries received.

One of the most exciting events for SCHG was attending the adoption finalization hearing for one of the youth from the gallery. After watching her video on the website, the girl's adoptive parents instantly knew they could provide her with the forever home she sought. The youth and her parents participated in a follow-up video to tell their story, and SCHG staff were inspired to hear firsthand accounts of the impact of their work.

Above: South Carolina Heart Gallery Program Coordinator Christina Grant speaking at the grand opening of the Heart Gallery exhibit at Columbiana Centre in September 2024. Photo Credit: DCA.

CHILDREN'S ADVOCACY INTERAGENCY SUMMARIES

DCA works diligently to create and strengthen relationships with other state agencies, evaluates the services they provide, and looks for collaboration opportunities that will lead to better outcomes for children. Summaries regarding interaction with the nine child-serving agencies are provided below.

DEPT. OF DISABILITIES AND SPECIAL NEEDS (DDSN)

DCA continues to advocate for coordinated access to services through DDSN for children with intellectual disabilities (ID), related disabilities (RD), and autism spectrum disorder (ASD). The challenges of finding appropriate residential services for children with intellectual disabilities stubbornly persist, and they rival the challenges of finding residential placements for children diagnosed with serious mental illnesses.

Residential Habilitation Services

In early FY24, DDSN posted a solicitation for youth residential habilitation. The solicitation included a total of 20 beds for youths aged 14-20 in need of residential habilitation services. Through this solicitation process, three providers were awarded capital funds to assist with developing five 4-bed homes. All homes opened over the course of FY24 and 20 youths were admitted to these placements.

In addition, in June 2024, DDSN created a contract for specialized Group Care Intensive Services (GCIS) beds for youths with challenging behavioral needs. This contract allows for up to 15 specialized placements. Placements began in late FY24 and will continue in FY25.

We are encouraged and thankful for DDSN's work to increase the placement and service array for children and adolescents. We

would like to see DDSN's expansion continue by either contracting with providers to create more residential options for youth or creating its own facilities and programs to serve as the backstop for residential treatment needs for children and youth with ID, RD, and ASD. Specifically, the state needs residential skills-based learning for children and residential treatment for youth with complex needs, which often include intellectual disabilities, mental illness, and aggressive or other behavioral challenges.

Reducing Waitlists

In FY24, DDSN hired nine state-level case managers to assist with placement and support for individuals who have been diagnosed with ID, RD, ASD, brain and spinal cord injuries, and similar disabilities. These case managers began onboarding in February 2024.

DDSN also addressed its challenges with recruiting and retaining applied behavioral analysis providers by paying for eight employees to undergo ABA certification training on the condition that they commit to remaining employed with DDSN upon completion.

These are steps in the right direction to help reduce the number of children on lengthy waitlists. If children can be assessed and provided with services more quickly, families may receive the necessary care in their community. This would prevent unmet needs from escalating to situations where a child requires

²³ S.C. Code of Laws Ann. Sections 63-11-2230, 63-11-2240 and 63-11-2280.

more acute treatment and/or be placed in more restrictive environments such as emergency departments, DSS, or DJJ.

This is particularly important, considering that S.C. Code of Laws Ann. Section 63-19-1450 prohibits seriously mentally ill youth and intellectually disabled youth from being committed to a DJJ institution. The statute authorizes DJJ to transfer the juvenile to the state agency which is best qualified for their care. The two designated state agencies for transfer are DMH for seriously mentally ill youth and DDSN for intellectually disabled youth.

Interagency Collaboration

Director Whittle invited DDSN's Stephanie Turner to provide in-depth training to all DCA staff in March 2024 regarding the many different resources available to families with autism—and how to access them. Members from every division asked great questions and received answers they were able to immediately apply to their active cases.

Continuum of Care Division Director Greg Wright participated in DDSN's AutismConnect conference in April 2024, where he presented on the services COC can provide to families. COC was also an exhibitor at this public event that brought together the autism community.

DCA regularly communicates with DDSN leadership as follows:

- Director-to-director meetings
- Directors' meetings as convened by DHHS
- Interagency staffings concerning specific children
- Joint Citizens and Legislative Committee on Children hearings
- Joint Council on Children and Adolescents quarterly meetings
- Routine meetings among DDSN, DHHS, DJJ, DMH, and DSS
- State Child Fatality Advisory Committee

DEPT. OF HEALTH & ENVIRONMENTAL CONTROL (DHEC)

Issues with Critical Incident Notifications

DHEC reported 50 critical incidents in FY24, with only five submitted within the statutory 24-hour time frame. However, this is an improvement over previous years. As detailed in the FY23 annual report, between FY20-23, DHEC was underreporting its critical incidents with a total of 17 notifications, all of which were issued in FY22. At that time, Director Whittle expressed her concern to DHEC leadership regarding its non-compliance with the critical incident reporting statutes,²³ and DHEC committed to submitting notifications in a more timely fashion moving forward.

DCA recommends that DHEC ensures it has capacity to license and monitor child-serving facilities and to provide timely

critical incident notifications to DCA as required by state law. Communication will reconvene with agency leadership when the new Department of Public Health launches on July 1, 2024.

State Child Fatality Advisory Committee

Director Whittle and the DHEC Director (or his designee) are members of the State Child Fatality Advisory Committee (SCFAC). In addition to its regular schedule, Whittle, who chaired the SCFAC during FY24, led the committee through an exploration of how it could be more focused and intentional in its mission to decrease incidences of preventable child deaths. SCFAC met with Professor Mike Cull and Christina Rosato of the University of Kentucky. Cull provided committee members with different approaches to fatality reviews and how other systems have improved outcomes. Rosato led the committee through a Lean Sigma Six exercise to map the SCFAC's current processes and future goals. The current-state and future-state mapping identified actionable steps to improve the committee's effectiveness.

One example of the future-state map focused on the committee's desire to obtain additional aggregate epidemiological data to support its reviews and recommendations. Local Child Death Reviews (LCDRs), by necessity, focus on determination of cause and manner of death and DSS/CPS and law enforcement's initial responses or contacts. This may include a death re-enactment, interviews concerning perpetrators, and assessment of safety and risk of other children in the home. Few data points are collected at this point, and involvement of other agencies is not consistently discussed until a state level fatality review is held.

Through the mapping process, the committee determined it would be helpful to have a secondary or supplemental LCDR process to input information that would be available to the SCFAC. The committee acknowledged that additional resources would be necessary to lead this work. The committee discussed piloting a process to create capacity for a more robust or supplemental LCDR process, and was grateful for DHEC's willingness to be part of this work.

Spartanburg County Coroner Rusty Clevenger and DHEC leadership, including Agency Director Dr. Edward Simmer, State Epidemiologist Linda Bell, and Dr. Brannon Traxler, began meeting to pilot this process in Spartanburg County in FY24.

DCA regularly communicates with DHEC leadership as follows:

- Director-to-director meetings
- Directors' meetings as convened by DHHS
- Joint Citizens and Legislative Committee on Children hearings
- Joint Council on Children and Adolescents quarterly meetings
- Safe Sleep Awareness Month meetings
- State Child Fatality Advisory Committee

DEPT. OF HEALTH & HUMAN SERVICES (DHHS)

A robust and collaborative relationship exists between DCA and DHHS. The two agencies work closely together on behavioral health needs for children in South Carolina.

Palmetto Coordinated System of Care 1915(C) Medicaid Waiver

Medicaid is the healthcare coverage provider for 600,000 children in South Carolina, and DHHS is the state's Medicaid agency. DCA works closely with DHHS through implementation of a 1915(C) waiver that approves Continuum of Care, a division of DCA, as the state's sole provider of High Fidelity Wraparound to youth with serious emotional and behavioral challenges. The waiver provides a sustainable reimbursement rate, and services are provided at no cost to families. More information about these services can be found on page 32.

Multi-Agency Collaboration

DHHS and DCA, along with DSS, DJJ, and DMH, regularly collaborate and cooperate on issues including rate-setting, Rehabilitative Behavioral Health Services (RBHS), and the proposed psychiatric residential treatment facility (PRTF) for seriously mentally ill, justice-involved youth. More information on the PRTF can be found on page 45.

At the end of FY23 and into FY24, DCA and its Continuum of Care division participated in a DHHS-initiated interagency summit aimed at improving coordination for the placement of children in residential or behavioral health settings. Through the summit, a streamlined approach to resolving issues and escalation protocols was developed, and that approach was piloted in emergency departments in FY24 with a goal of statewide implementation. In the meantime, DHHS was instrumental in bringing together agency heads to create solutions for individual children and families with complex needs which required multi-agency cooperation.

Master Plan Advisory Committee (MPAC)

During FY24, Director Whittle continued to serve as a member of the MPAC, facilitated by DHHS. This committee is engaged in intentional and focused analysis and problem-solving to create a continuum of behavioral health services for South Carolina citizens.

Medicaid Advisory Committee (MAC)

The name of the Medical Care Advisory Committee was changed in FY24 to the Medicaid Advisory Committee. Director Whittle continues to serve as a member of the MAC, also facilitated by DHHS. Through this committee, the public is informed of rate increases, beneficiary rolls, and State Plan changes.

At its November 2023 meeting, MAC announced the introduction of Intensive In-Home Services (IIHS) to the Medicaid State Plan, including Multisystemic Therapy and Homebuilders. The primary goal of IIHS is to improve family functioning and help youth stay in their homes, communities, and schools. By increasing the number of care options along the behavioral health continuum, IIHS aims to reduce spending on less empirically-supported out-of-home options with poorer long-term outcomes.

DCA commends DHHS's work through the leadership of Director Robert Kerr to reimagine the behavioral health care system in South Carolina through the MPAC and MAC, to responsibly add services and increase rates to the State Plan, and to sunset the moratorium on Rehabilitative Behavioral Health Services, among other initiatives and developments.

DCA regularly communicates with DHHS leadership as follows:

- 1915(C) Medicaid Waiver
- Director-to-director meetings
- Directors' meetings as convened by DHHS
- Individual meetings and conversations to discuss needs for individual children
- Joint Citizens and Legislative Committee on Children hearings
- Joint Council on Children and Adolescents quarterly meetings
- Master Plan Advisory Committee (MPAC)
- Medicaid Advisory Committee (MAC)
- Routine meetings among DDSN, DHHS, DJJ, DMH, and DSS

DEPT. OF JUVENILE JUSTICE (DJJ)

In FY24, DCA proposed converting the Midlands Evaluation Center (MEC) to a second juvenile detention center—a solution that could use existing resources to increase detention capacity, which frequently runs over, sometimes housing as many as 140 juveniles in a space built for 72.

MEC is already located beside JDC within a secure area that is near—but separate from—BRRC. During the conversion period, youth at MEC could be transferred to the Upstate Evaluation Center (UEC) or the Coastal Evaluation Center (CEC). All DJJ-committed youth could be moved from evaluation centers and placed at BRRC or another appropriate placement.

During FY24, Director Hendrick indicated this was not feasible based on the buildings' conditions and layouts and the need to use MEC as a secure evaluation center. She has also indicated that there is an insufficient number of staff to house all committed youth at BRRC.

DJJ Graduation

Deputy Child Advocate Kayla Capps, Assistant Child Advocate Melissa Pettinato-Irby, and Administrative Coordinator Eden Everett were honored to represent DCA at DJJ's graduation in July 2023, during which more than 100 youth earned their high school diplomas or GED certificates.

Parole Board Hearings

During FY24, Deputy Child Advocate Capps continued attending parole board hearings. She began attending in FY23 after parole board members expressed the need to have recommendations for youth and information about the success rate of rehabilitative programs.

DCA regularly communicates with DJJ leadership as follows:

- Director-to-director meetings
- Directors' meetings as convened by DHHS
- Governor's Juvenile Justice Advisory Council meetings
- Individual meetings and conversations with Director Hendrick and DJJ leadership
- Interagency staffings concerning specific children and youth
- Joint Citizens and Legislative Committee on Children hearings
- Joint Council on Children and Adolescents quarterly meetings
- Parole Hearings attended by Deputy Capps
- PRTF meetings among DJJ, DMH, and DHHS
- Routine meetings among DDSN, DHHS, DJJ, DMH, and DSS
- Site visits by the Investigations and Critical Investigations units

DEPT. OF MENTAL HEALTH (DMH)

DCA has been involved and/or has initiated multiple efforts with DMH to create and strengthen a robust and sustainable placement array to provide mental health care for children and adolescents. This is part of the State Child Advocate's broad vision for reform for children's services, specifically in the areas of behavioral and mental health services in South Carolina.

DMH provides support for youth in communities, including their innovative Roads of Independence program (with an FY24 expansion into Aiken County that DCA toured) and the FOCUS Café, which began as a collaboration between DMH and DCA and continued to grow in FY24 (sparmhc.org/services/focus-cafe).

State-Operated Psychiatric Residential Treatment Facility (PRTF)

DCA has met regularly with DMH, DHHS, and DJJ regarding a state-operated PRTF to serve the long-term needs of justice-involved, mentally ill youth. The RFP was released in FY23, and Director Whittle has been actively engaged in the Design-Build-Operate-Maintain process. The PRTF is scheduled to break ground in FY25.

Interim Placement Planning

During FY24, DMH used financial reserves to renovate and increase staff at William S. Hall Psychiatric Institute in order to provide a PRTF/inpatient level of care for youth detained or committed at DJJ. This was a result of discussions held in FY23 between DCA, DMH, DHHS, and DJJ to find a solution for this kind of short-term and interim placement until the opening of the new state-operated PRTF.

Improved Collaboration with DJJ

During this fiscal year, after DMH offered to speak with DJJ staff about the services it offers, someone in DJJ leadership expressed concern about DMH providing services to pre-adjudicated youth. This prompted DMH leadership to reply, "We serve pre-adjudicated youth every day."

DCA participated in conversations with DMH and DJJ regarding youth-specific and systemic efforts to improve collaboration and coordination for youth diagnosed with mental illnesses, including serious mental illness (SMI). Director Robert Bank provided leadership in these discussions with Director Eden Hendrick and Director Amanda Whittle, which:

- Encouraged doctor-to-doctor communication when there is a difference of professional clinical opinion between DMH and DJJ about whether a youth should be "included" as having an SMI for purposes of S.C. Code of Laws Ann. Section 63-19-1450
- Reiterated that DMH is the final arbiter on diagnosis when there is a difference of opinion and will lead treatment and discharge planning, as well as recommendations for ongoing rehabilitation and recovery (as outlined in DJJ's and DMH's memorandum of understanding)
- Clarified that differences in professional opinion may be the result of either more exhaustive assessments performed at William S. Hall or effective treatments that have reduced or eliminated symptoms necessary to meet diagnostic criteria
- Explained that a change in diagnosis and/or removal from SMI-inclusion may end a stay at William S. Hall but does not preclude DMH treatment in collaboration with DJJ

DCA is grateful for these conversations, particularly the last bullet above, which is a significant deviation from earlier conversations with DMH, DJJ, and other advocacy groups, expressing that only "SMI-included" youth with an indeterminate sentence were eligible to receive services from DMH.

DJJ has since agreed to a contract with DMH for a shared mental health counselor position at DJJ's Juvenile Detention Center to provide clinical services, diagnostic assessment completion, and assistance with acute hospitalizations. This is similar to an agreement DMH has with SC Department of Corrections (SCDC).

DCA encourages DJJ to continue exploring DMH's additional service offerings, including a youth peer support program (noting that SCDC has more than 100 peer support specialists), assistance with secure evaluations (which Director Hendrick said would be very helpful), and de-escalation training, among others.

Hope Connects SC Kids Screening Tool

In September 2023, DCA and DMH launched a new online interactive mental health screening tool for children under the age of 18—the first of its kind in the nation. Available at hope.connectssckids.org, the free anonymous tool connects parents and guardians to a caring professional who can provide guidance, support, and resources to help them access mental and behavioral health services for youth. Additionally, DCA staff regularly volunteer to respond to inquiries received from individuals using the tool.

DCA regularly communicates with DMH leadership as follows:

- Director-to-director meetings
- Directors' meetings as convened by DHHS
- Individual meetings and conversations with Director Bank and DMH leadership
- Interagency staffings concerning specific children and youth
- Joint Citizens and Legislative Committee on Children hearings
- Joint Council on Children and Adolescents quarterly meetings
- Master Plan Advisory Committee meetings
- PRTF meetings among DJJ, DMH, and DHHS
- Routine meetings among DDSN, DHHS, DJJ, DMH, and DSS

DEPT. OF SOCIAL SERVICES (DSS)

A growing number of youth are being referred to DSS due to a lack of capacity in other parts of the system. DCA leadership has been asked to attend and participate in DSS and DJJ hearings regarding complex matters. In response, DSS Director Michael Leach and his leadership team have worked to strengthen the placement and service array in South Carolina.

Exceptional Needs Foster Care

One example is DSS's efforts to work with private providers to create an Exceptional Needs Foster Care (ENFC) designation for youth who require more services than a typical therapeutic foster home can provide.

These are special needs youth with heavy trauma who have also experienced night-to-night placements, according to John Shackelford, senior director of admissions for the SC Youth Advocate Program (SCYAP), the state's first organization to provide ENFC placement services.

After admitting the child, SCYAP holds a Child and Family Team Meeting with clinicians, foster parents, and youth (if appropriate) to make certain all supports are set up and in place before the child arrives in the foster home. The goal is to wrap services around the youth in a structured environment for up to 120 days so the child can find stability that will eventually allow them to step down to a therapeutic foster placement.

While small, the program provides vital services to help these children succeed. Shackelford said the first youth to participate in their ENFC program had been in 60 different homes, including 30 in the same year he was admitted to the program. Thanks to the hard work of this foster family, he went from substance use, school expulsion, and stealing to enrolling in a drug and alcohol program, going back to school, and holding a job. He was able to step down to a therapeutic foster home and ultimately stayed with the foster family.

Improving Child Death Reviews

DSS purchased re-enactment dolls and assembled "Child Death Review Information and Resource" notebooks in an effort to improve local child death reviews and data collection. In November 2023, Director Whittle, as chair of the State Child Fatality Advisory Committee, began meeting with and distributing the dolls and notebooks to coroners throughout the state. She ultimately provided a notebook and re-enactment doll to every coroner.

Weekly Director Meetings

During FY24, Director Leach and Director Whittle continued having weekly meetings to discuss child-specific issues as well as system concerns. These meetings have allowed the directors to share information and troubleshoot matters in real-time and have resulted in a positive professional relationship with effective communication.

DCA regularly communicates with DSS leadership as follows:

- Bench-Bar meetings
- Children's Justice Act Task Force
- Director-to-director weekly meetings
- Directors' meetings as convened by DHHS
- Individual meetings and conversations with Director Leach and DSS leadership
- Interagency staffings concerning specific children and youth
- Joint Citizens and Legislative Committee on Children hearings
- Joint Council on Children and Adolescents quarterly meetings
- Routine meetings among DDSN, DHHS, DJJ, DMH, and DSS

GOVERNOR'S SCHOOL OF AGRICULTURE AT JOHN DE LA HOWE (JDLH)

A state agency since 1918, JDLH changed its mission in the 1980s to serve children who struggled in a conventional school. When DCA's enabling legislation was initially created, JDLH was experiencing issues that resulted in its closure. A 2017 feasibility study recommended the school "undertake a mission for becoming a statewide residential high school for agriculture and mechanical studies." JDLH thereafter initiated an intentional admissions process to support its agricultural mission. It was officially recognized and renamed during a ceremonial bill signing by Governor McMaster on December 8, 2020.

Director Whittle and Deputy Capps made DCA's first visit to JDLH in 2019 when the campus was still closed to students, and what they saw in FY20 differed greatly compared to what staff have seen since.

During FY24 visits, the school offered 10th through 12th grades and had 76 students enrolled. Fourteen of those were day students, and 62 were residential students. Staff consisted of 68 FTEs, including 13 teachers and maintenance staff. The school operated nine residence halls that look like homes and are decorated through private donations. Students displayed great enthusiasm for the program, and even those with no prior agricultural experience seemed to be thriving. Director Keown shared that the school's safety rating is 9.99 (state average is 8). They also have a DARE team, a SADD team, and efforts to address vaping.

No complaints about nor critical incident notifications from JDLH were received by DCA in FY24. In fact, JDLH has maintained zero complaints and critical incidents since DCA's creation in 2019.

For this reason, coupled with the fact that the two other governor's schools in South Carolina are not under the purview of DCA, Director Whittle recommends JDLH be statutorily removed from the list of child-serving agencies DCA tracks.

SC SCHOOL FOR THE DEAF & THE BLIND (SCSDB)

The Investigations Unit visited the school's campus and met with SCSDB President Jolene Madison and her leadership team during FY24. No complaints about the SC School for the Deaf and the Blind were received by DCA in FY24. However, one critical incident notification was reported (see page 27).

WIL LOU GRAY OPPORTUNITY SCHOOL (WLG)

The Investigations Unit visited the school's campus and met with WLG President Pat Smith and his leadership team during FY24. No complaints about the Wil Lou Gray Opportunity School were received by DCA in FY24. However, two critical incident notifications were reported (see page 27).



STATE CHILD ADVOCATE

Amanda Whittle was appointed as South Carolina's first State Child Advocate and Director of the South Carolina Department of Children's Advocacy by Governor Henry D. McMaster on June 3, 2019. In addition to providing leadership as DCA's agency director, participating in events to educate the public, and evaluating the services provided by child-serving state agencies, the State Child Advocate has also participated on committees and leadership teams related to improving services and outcomes for children in South Carolina:

CHAIR, SC BAR CHILDREN'S LAW COMMITTEE

Director Whittle was appointed as chair of the South Carolina Bar Children's Law Committee in June 2023. She created and received approval to conduct training during the January 2024 South Carolina Bar Convention and worked with committee members and presenters to plan the committee's portion of the conference. The agenda focused on children's law and included presentations on legislative issues; legal representation for children; education law; Medicaid; Early and Periodic Screening, Diagnostic, and Treatment (EPSDT); and the South Carolina Court's Mental Health Initiative.

CHAIR, STATE CHILD FATALITY ADVISORY COMMITTEE (SCFAC)

Director Whittle was elected to a two-year term as chair of the SCFAC in September 2022. As chair, Whittle re-claimed the committee's domain name and updated the website for the first time in three years. She prepared data summaries for committee members and facilitated reviews of individual child deaths. Whittle also invited SLED Captain Trista Baird, Assistant US Attorney Stacey Haynes, and State Superintendent of Education Ellen Weaver to present on their agencies' roles in child fatality prevention and raise awareness about state initiatives and opportunities.

When Whittle accepted the role as chair, committee members shared two priorities. First, members wanted the committee's work to be more impactful. To that end, she modified meeting agendas to organize child death reviews by category (homicide, suicide, accidental, natural, or undetermined) rather than by the SLED agent assigned to the investigation. She advocated for a safety science approach to reviews to strengthen the committee's ability

to identify data, trends, and opportunities to reduce child fatalities. The committee decided in late 2022 to explore this new review process in order to be more focused and intentional in its mission to decrease incidences of preventable child deaths. Whittle invited Professor Michael Cull and Senior Policy Analyst Christina Rosato of the University of Kentucky to share how the National Partnership for Child Safety uses safety science to build a body of knowledge about what works in preventing child maltreatment and fatalities. SCFAC members met as a workgroup, applied the approach, found the results to be helpful, and voted to incorporate safety science mapping for state-level child death reviews (learn more on page 43). Systems mapping facilitates collaboration at all levels of systemic influence and considers how certain factors (including family, community, professional, agency, and legislative) contribute to child deaths in South Carolina. This collaboration serves as a means to implement changes and initiate action within agencies represented on the committee and to propose changes in statutes, regulations, policies, and procedures to ultimately prevent and reduce the number of child deaths in South Carolina.

Second, committee members wanted to address the backlog of pending fatality reviews. Previously, the committee scheduled up to 42 cases for each meeting with a goal of completing 200 reviews per year. However, it had only averaged 103 reviews each year since its enactment in 1993. During Whittle's 24-month tenure as chair, the committee completed 675 reviews (76 from October through December 2022; 402 in 2023; and 197 from January to

Left: Governor Henry McMaster presents Director Amanda Whittle with a proclamation honoring the Foster Care Review Division during a ceremony at the State House. Photo Credit: Kinard Lisbon

August 2024). As of June 2024, the committee had addressed its backlog, and the committee voted to limit the number of death reviews to 50 per meeting.

MEMBER, CHILDREN'S JUSTICE ACT TASK FORCE (SUBCOMMITTEE CHAIR)

During FY24, Director Whittle was a member of the Children's Justice Act Task Force and served as a subcommittee chairperson. She worked closely with this task force, which includes law enforcement, the SC Network of Children's Advocacy Centers, and other agencies to identify training opportunities and coordinate investigation and prosecution of child abuse cases.

MEMBER, GOVERNOR'S JUVENILE JUSTICE ADVISORY COUNCIL (SUBCOMMITTEE CHAIR)

Director Whittle was appointed to the Governor's Juvenile Justice Advisory Council by Governor Henry D. McMaster, and she was invited to serve on the Council's Executive Committee by Council Chair John Holler. Whittle also served as chair of the Systems Improvement Subcommittee, which identifies opportunities for system support at the local and state levels; and as a member of the Grants Committee, which recommends grant awards to organizations that align with the requirements of the US Office of Juvenile Justice and Delinquency Prevention (OJJDP).

MEMBER, SUICIDE PREVENTION COALITION (SUBCOMMITTEE MEMBER)

In the absence of a chairperson, Director Whittle arranged and facilitated the Enhancing Access subcommittee. This included creating agendas and inviting speakers to discuss 988 and mobile crisis from both systems and lived experience perspectives. She provided presentations to the coalition about suicide trends and the subcommittee's efforts regarding 988. During FY24, DCA, DMH, and the American Foundation for Suicide Prevention launched the first-in-the-country online, interactive children's mental health/suicide prevention screening tool (learn more on page 46).

MEMBER, 988 STATE ADVISORY BOARD

The 988 suicide and mental health crisis line was implemented in July 2022, and Director Whittle continued to advocate not only for the call centers but also for the infrastructure of services to support individuals who experience suicidal ideations and mental health crises. She also created graphics that appeared on social media posts and billboards to raise awareness about 988 during FY24.

MEMBER, BENCH-BAR COMMITTEE

Director Whittle serves on the Bench-Bar Committee facilitated by the Children's Law Center. She has presented on DCA's work

and the need for partnerships regarding children's issues, particularly those involving juvenile justice, child welfare, mental illness, and intellectual disabilities. In FY24, she chaired the Direct Representation subcommittee to explore the creation of a counsel for children pilot project for youth in foster care (more on page 31).

MEMBER, HUMAN TRAFFICKING TASK FORCE

Director Whittle serves on the Attorney General's Human Trafficking Task Force, which has identified priorities to address the needs of survivors of human trafficking. Director Whittle has advocated for additional placement for youth who cannot safely remain at home.

MEMBER, JOINT CITIZENS & LEGISLATIVE COMMITTEE ON CHILDREN (JCLCC)

Director Whittle is an *ex officio* member of the JCLCC and has been regularly attending committee meetings, including the committee's regional fall hearings, since 2019. Also called the "Children's Committee," the JCLCC is impactful in reporting child-related data and in securing sponsors for legislation regarding children's issues.

MEMBER, JOINT COUNCIL ON CHILDREN AND ADOLESCENTS

Director Whittle is a current member and former chair of this committee, which brings together state agencies, child-serving private providers, and individuals with lived experience to discuss children's issues, ensuring efficient and effective delivery of services to children and adolescents. This council began as part of a SAMHSA grant in 2007 to create and promote a system of care.

MEMBER, KINCAROLINA ADVISORY COUNCIL

Director Whittle was invited to join the KinCarolina Advisory Council in FY24. The council is comprised of 15 representatives from partner organizations, government agencies, and individuals with lived experience to provide overarching management and decision-making for the KinCarolina project; to facilitate dialogue and collaboration among child and family serving systems; and to participate in joint trainings about the needs of kinship families raising children with disabilities.

MEMBER, MASTER PLAN ADVISORY COMMITTEE

Director Whittle serves on the Master Plan Advisory Committee. More information about this committee is in the DHHS section of this report on page 44.

MEMBER, MEDICAID ADVISORY COMMITTEE

Director Whittle serves on the Medicaid Advisory Committee. More information about this committee is in the DHHS section of this report on page 44.

MEMBER, SAFE BABIES COURT STATE ADVISORY COMMITTEE

Director Whittle was identified as a Safe Babies Court Champion and has communicated with state leadership, judges, children's advocacy centers, and guardians ad litem about the benefits of working intentionally with families of young children to provide services with sustained, positive outcomes. The program provides intensive case management for families seeking reunification with young children in foster care to prevent abuse and neglect and reduce time spent in foster homes. In FY24, the program expanded from its initial three counties as a result of additional state funding. Whittle attended the Zero to Three Cross Sites Meeting, a national convening of state leadership teams, in August 2023.

MEMBER, SOUTH CAROLINA BAR

Director Whittle is a licensed attorney and member in good standing with the South Carolina Bar. She is admitted to the United States District Court and the United States Supreme Court. During FY24, she completed more than 50 hours of continuing legal education, including the 2023 SC Courts Mental Health Summit. She chairs the SC Bar's Children's Law Committee and presented at the SC Bar's Annual Convention about children's issues in family court.

MEMBER, SOUTH CAROLINA EXECUTIVE INSTITUTE

Director Whittle was invited to be a part of the 2023-2024 Executive Institute cohort. This provided an opportunity to gain enhanced leadership skills to manage high-level issues and was also a unique opportunity to meet and engage with a group of leadership peers.

MEMBER, STATE CRISIS INTERVENTION ADVISORY BOARD

Director Whittle continues to serve on the State Crisis Intervention Advisory Board, which was created to "inform and guide the state's gun violence reduction programs/initiatives and approve the program and budget plans for the Byrne State Crisis Intervention Program grant funding." The board includes representatives from law enforcement, the community, courts, behavioral health providers, victim services advocates, and attorneys.

MEMBER, UNITED STATES OMBUDSMAN ASSOCIATION

Director Whittle attended USOA's annual conference in Atlanta in FY24. She has benefited from learning and sharing with other states' offices of the child advocate and children's ombudsman agencies regarding a variety of topics, including new investigator training, resource arrays, complex advocacy issues, and publicizing reports. During FY24, other members of the DCA team joined the USOA and also attended the annual conference.

STUDENT, UNIVERSITY OF SOUTH CAROLINA SCHOOL OF MEDICINE

On December 18, 2023, Director Whittle graduated from the University of South Carolina School of Medicine's Graduate Studies Program in the area of Psychiatric Rehabilitation. Whittle pursued the course of study to strengthen her knowledge about identification, assessment, diagnosis, treatment, and recovery for individuals diagnosed with serious and persistent mental illness. She completed the program with a 4.0 GPA and immediately put her new knowledge to good use by enhancing advocacy on behalf of individual children and youth and developing recommendations for a behavioral health system of care for children. She paid for this program herself and attended classes during non-working hours.

SUBPOENAS:

Director Whittle issued five subpoenas in FY24 in her role as the State Child Advocate and pursuant to the statutory authority of S.C. Code of Laws Ann. Section 63-11-2280.

PRESENTER/SPEAKER:

- **Safe Sleep Awareness Summit**

Director Whittle joined medical professionals, social workers, and child advocates from across the state for a four-part Safe Sleep Summit held Thursdays in October 2023 to raise awareness about the importance of safe sleep for infants.

- **South Carolina Coroners Association Annual Meeting**

Director Whittle presented at the annual meeting in November 2023 where she shared information about DCA and distributed "Child Death Review Information and Resource" notebooks and re-enactment dolls provided by DSS. She also learned more about the work of South Carolina's coroners, which was particularly impactful for her role as chair of the State Child Fatality Advisory Committee. Special thanks to Spartanburg Coroner Rusty Clevenger and Charleston Coroner Bobbi O'Neal for these invitations and introductions. More information about the notebooks can be found on page 46.

- **South Carolina Courts Mental Health Summit and Judicial Branch Mental Health Convening Sessions**

Director Whittle attended circuit convening sessions and a statewide summit to learn about the sequential intercept model and the National Judicial Task Force's efforts to examine state court responses to mental illness. This was also a great opportunity to share information about DCA's role and to hear from court personnel across the state about emerging mental health issues that intersect with legal matters.



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