



2023 Annual Accountability Report

**South Carolina Department of Alcohol
and Other Drug Abuse Services**

Agency Code: J200

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AGENCY’S DISCUSSION AND ANALYSIS FY23

The use of alcohol, tobacco, and other drugs affects South Carolinians of all ages and from all walks of life. Problems resulting from these substances surface in our homes and schools, on our roads and highways, and in our workplaces and criminal justice system. According to a wide-ranging study by Recovery Centers of America in 2019, alcohol and drug use disorders in the United States cost the nation **\$3.73 trillion** annually in tangible economic loss and intangible costs due to societal harms through quality-of-life adjustments and premature loss of life.

Recognizing the need for direct services for the general public, as well as for specific high-risk groups, the S.C. Department of Alcohol and Other Drug Abuse Services (DAODAS) purchases a wide array of prevention, intervention, treatment, and recovery services through a community-based system of care. DAODAS subcontracts with 31 county alcohol and drug abuse authorities to provide the majority of direct services to citizens in all 46 counties of the state. The department also contracts with a range of public and private service providers to address substance use disorders throughout South Carolina. DAODAS has expanded its partners to include 28 opioid treatment programs, 12 recovery community organizations, eight hospitals, five state agencies, four universities, and over 100 community distributors of the overdose antidote naloxone. Since the county alcohol and drug abuse authorities were created in 1973, these local agencies have provided intervention, treatment, and recovery services to more than **382 million** South Carolinians and touched the lives of countless individuals and families through their many prevention activities. More organizations than ever before are ensuring service availability for the state.

DAODAS estimates that approximately **451,000** individuals in South Carolina are impacted by substance-related problems that require immediate intervention and treatment. DAODAS also estimates that **378,000** South Carolinians are in active recovery. With a problem of this magnitude, and with the continuing opioid crisis serving **5,206** opioid use disorder clients this year, the department must continue to ensure that individuals and families access the vital core services purchased by DAODAS through the statewide system of county authorities (i.e., its local provider network), state agency partners, and other public and private contractors, to include opioid treatment programs, recovery community organizations, hospital-based programs, and other health systems. During fiscal year 2023 (FY23), DAODAS and its provider network delivered services to **46,584** South Carolina citizens.

Mission Statement

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

DAODAS Strategic Direction

Capitalizing on 66 years of success in ensuring access to substance use disorder (SUD) services for the citizens of South Carolina, throughout FY23 the department continued to provide the necessary leadership toward a strategic direction for the agency itself, as well as the direction of the state’s addiction services field.

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

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

Specific areas of focus in FY23 included: (1) standardizing and streamlining internal processes; (2) strengthening partnerships; (3) increasing coordination of addiction efforts; (4) improving quality and consistency of services; and (5) addressing the agency’s overarching goal of achieving sustainable recovery for individuals and families. These goals directly relate to the Enterprise goals established by Governor Henry McMaster, with a primary emphasis on healthy and safe families, public infrastructure and economic development, plus government and citizens.

FY23 Major Achievements

To meet the continuing demand for SUD services, DAODAS took a proactive approach to serving citizens during FY23, striving through its partnerships to reach the overarching goal of achieving sustainable recovery for citizens suffering from SUDs. In keeping with the agency’s strategic plan and visionary goals, we have highlighted the following achievements.

Opioid Use Disorder

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

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

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

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

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in notifying communities about new or emerging threats regarding the distribution of counterfeit drugs that can cause overdoses, including xylazine. This powerful sedative is now being laced in opiates, contributing to an increase in overdose deaths. Long-term outcomes of the SCOERT’s efforts include increased real-time knowledge of overdose trends, expanded uptake of evidence-based initiatives and innovative strategies, and greater targeting of resources to address opioid overdose burden.

Recognizing that opioid dependency and addiction are widespread and affect every part of the state, DAODAS implemented Community Distribution Guidelines for the delivery of naloxone to those citizens – and their caregivers – most in danger of an overdose. To date, the agency has approved over 100 community distributors, including treatment providers, recovery organizations, healthcare providers, homeless outreach organizations, faith-based organizations, and state agencies. Additionally, the department supported the enacting of legislation during the recent legislative session to expand the distribution of naloxone by allowing coroners and medical examiners to access and administer naloxone through the Overdose Prevention Act.

Service Capacity

In FY23, DAODAS continued using federal and state appropriations to fund medications for opioid use disorder (MOUD) throughout South Carolina. Funds were expended to maintain the state’s capacity to serve individuals experiencing opioid use disorder, with DAODAS contracting with local SUD providers for medications, physician services, counselors/therapists, and peer support specialists. All county alcohol and drug abuse authorities have access to state and federal funding to cover behavioral health therapies for the opioid use disorder population. During FY23, DAODAS continued its contract with a departmental Medical Director to assist in the development and expansion of MOUD across the medical and behavioral healthcare systems. Under the auspices of the Medical Director, the department has been able to add a long-acting injectable medication, Sublocade, to its arsenal of medications for treating opioid use disorder.

Additionally, DAODAS has joined with Unite Us, a provider platform that seeks to increase the number of patients served via through a coordinated referral platform supporting service providers with warm-handoffs to additional services and resources. The platform facilitates community connections that expand traditional services, to include the recovery community, healthcare, and trusted local resource partners, addressing the social needs that exacerbate SUDs. When used, the platform identifies diverse needs for individuals and supports users with data to make optimized case-management decisions. Currently, the county alcohol and drug abuse authorities are onboarding with Unite Us, which has also onboarded local hospitals, community organizations, and other health systems across the state.

COVID-19 Federal Program Supplements

DAODAS continues to implement spending of the COVID-19 supplements to the Substance Use Prevention, Treatment and Recovery Services (SUPTRS) Block Grant for programmatic and service access and enhancement. The plans for these supplements are wide-ranging and include capacity building for prevention, intervention, treatment, and recovery services through provider stabilization grants. Funds are focused on schools and colleges, public education and awareness campaigns, expansion of overdose education and naloxone distribution in county jails, community-based diversion programs, expansion of women’s programs, and expansion of recovery community organizations. One example of enhancement of service access is transportation funding. To date, 4,468 patients in need of transportation have been provided with transport to treatment services.

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Ensuring Available Prevention Services

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

In FY23, DAODAS continued to emphasize prevention programs associated with the reduction of underage drinking. The Alcohol Enforcement Team (AET) effort focuses on community coalition development and maintenance, merchant education, and law enforcement partnerships to reduce underage drinking activities.

AETs seek to promote an evidence-based environmental prevention message to reduce alcohol use and its harmful consequences, coupled with active public education. In fiscal year 2022 (FY22) (most recent data available), AETs reported conducting 4,495 alcohol compliance checks, resulting in an effective buy rate of 10.4%. Also in FY22, the AETs reported operating 685 public safety checkpoints, issuing 97 DUI citations, and dispersing 52 parties, which resulted in 224 tickets and 202 youth being referred into the Alcohol Education Diversion Program.

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

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

DAODAS and its local partners also participated in the federally required Youth Access to Tobacco Study to reduce South Carolina youth’s ability to purchase tobacco products. The department documented a buy rate of 10.6% in Federal Fiscal Year 2023 (FFY23).

To help combat opioid misuse, the Just Plain Killers campaign (www.justplainkillers.com) seeks to educate the public on the prescription opioid crisis and to provide prevention information to help stop the epidemic, as well as provides information on treatment and recovery resources. The campaign utilizes three mainstream social media platforms (Facebook, Instagram, and Twitter), with marketing partner Chernoff Newman responsible for creating branded, cohesive content to share across the platforms. Social media impressions in FY23 totaled 5,941,623. The breakdown of impressions for each platform was:

1. Facebook: 3,734,044
2. Twitter: 7,797
3. Instagram: 2,199,782

Impressions for the campaign decreased again this fiscal year as some funding previously dedicated to the campaign was once again allocated to the Embrace Recovery SC campaign that was launched in FY21 (www.embracerecoverysc.com). Social media impressions in FY23 for Embrace Recovery SC yielded 62,157 impressions. The breakdown of impressions for each platform was:

1. Facebook: 20,780
2. Twitter: 2,039
3. Instagram: 39,338

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DAODAS has expanded this campaign to raise awareness of the recovery process through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.

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

During FFY23, SAMHSA required states with Narcan programs to develop a naloxone saturation plan that would increase targeted Narcan distribution levels to thresholds that could address the increases in overdoses across each county. South Carolina developed a formula that incorporated the mortality data for each county and their resource inventories (number and capacity of agencies in counties participating in distribution programs). Narcan allocations were provided for each county through federal State Opioid Response funding, and additional state dollars were set aside for those agencies that met their allocated thresholds to avoid disruption in Narcan access. From January 1, 2023, through June 30, 2023, over 17,000 Narcan kits and 27,000 fentanyl test strips were distributed to patients, caregivers, and community members through the Community Distributors to address overdose in South Carolina.

Through the Law Enforcement Officer Naloxone (LEON) program and Reducing Opioid Loss of Life (ROLL) program, 976 law enforcement and 903 fire department were trained in naloxone administrations during calendar year 2022. For the first six months of 2023, 567 administrations were reported from LEON and 573 administrations were reported from ROLL. Additionally, through the Jail Opioid Education and Naloxone Distribution Program, over 2,000 Narcan kits were ordered for use in the state’s jails.

Treatment Outcomes

A range of treatment services are available across South Carolina to meet the individual needs of patients who present for services. These services range from educational and individual therapies to withdrawal management and inpatient care. In FY22 (most recent data available), 26,231 individuals received treatment and were discharged from services.

Through treatment and recovery services and programs in South Carolina, in FY22 (most recent data available), patients’ past-30-day use of alcohol decreased to 15% from 35%; patients’ past-30-day use of *any* substances decreased to 8% from 44%; and patients’ past-30-day employment status rose to 62% from 52%.

Recovery

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

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as the S.C. Association of Recovery Community Organizations, has undergone a strategic planning effort to refocus its efforts on building sustainable non-profit community organizations. This group's mission is to advocate for and implement a full continuum of recovery support services, operating in a recovery-oriented system of care and setting up multiple pathways for education, training, and intervention services in the recovery community.

The department has championed the safe recovery housing movement by leading the way in ensuring that recovery homes meet national standards of quality, including support for S445, which establishes a voluntary certification program for recovery houses across South Carolina. S445 was passed by the Senate during the 125th General Assembly and awaits action in the House of Representatives.

Additionally, DAODAS is continuing to identify existing recovery homes and to employ efforts for these homes to meet voluntary quality measures for recovery residences through uniform standards with assistance from the S.C. Association of Recovery Residences (SCARR), which has implemented a robust strategy of certification for recovery houses using National Association of Recovery Residences (NARR) standards. Currently, 17 residences have been certified, with seven houses in various stages of the certification process.

DAODAS and Oxford House Inc. have formed an ongoing partnership that has increased access to and availability of recovery houses in South Carolina. With a total of 769 beds, there currently are 105 Oxford Houses in our state – 70 for men, 20 for women, and 15 that serve women with dependent children. Oxford House Inc. reports that individuals prescribed medication for an opioid use disorder are welcome in all homes.

DAODAS has been designated the recipient of a Congressional award of HUD funds to support recovery housing. Through the Recovery Housing Program, DAODAS has been awarded \$1.8 million over five years to provide direct housing-related services to individuals in recovery from an SUD. This innovative project allows individuals to apply for housing vouchers through DAODAS and receive funding for up to two years or until permanent housing is established. To date, DAODAS has placed 1,013 South Carolinians in safe, stable recovery housing. Director Goldsby has been instrumental in spearheading and developing this project, the first of its kind in the state, which – when combined with quality housing through voluntary certification – has increased opportunities for citizens in recovery to obtain safe and stable housing.

The Collegiate Recovery Program is also the product of a five-year proviso found in the Appropriations Act that directed DAODAS to expand its efforts on campus recovery. For FY23, the agency expanded this effort to four institutions of higher learning – the University of South Carolina, College of Charleston, Greenville Technical College, and Allen University. All offer academic support in designated spaces that provide for group meetings, clinical support, technology access, and academic advising to assist students in recovery. One institution has expanded its services to include the Community Distribution of naloxone, and two others are in the discovery phases of Community Distribution. One program has begun providing services on satellite campuses to increase the delivery of recovery support services. Allen University, an HBCU, is in process to become a training hub for Certified Peer Support Specialists and other recovery-related trainings for all HBCUs in South Carolina. It is Director Goldsby's vision to ensure that all HBCUs have the opportunity to develop campus recovery.

DAODAS also funds WeCo Cottage, an off-campus recovery residence for college students in West Columbia; four co-eds are currently housed there, and the Cottage is certified by SCARR.

Drug Courts

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The department is looking to expand its drug court footprint. Due to a proviso in the past five Appropriations Acts, DAODAS has been directed to increase its drug court efforts and has contracted with the Sixth Circuit Solicitor’s Office, Fairfield Behavioral Health Services, and the Hazel Pittman Center to provide funding and support for drug courts in both Fairfield and Chester counties. The drug courts will adhere to best practice standards as outlined by the National Association of Drug Court Professionals and will permit all evidence-based treatment methods, including access to medication-assisted treatment. The agency is also working with the drug court representative from the South Carolina Prosecution Commission in seeking to establish new drug courts that focus on opioid use.

South Carolina Center of Excellence in Addiction

In response to the evolving addiction crisis impacting communities across the state, the South Carolina Center of Excellence in Addiction has been established by DAODAS, Clemson University, the University of South Carolina, the Medical University of South Carolina, and the S.C. Department of Health and Environmental Control. In an effort to combine and more efficiently apply expertise and resources that will address opioid use disorder and other SUDs in the state, the Center of Excellence will operate as one collaborative institution jointly owned and operated by the three universities and two state agencies.

The Center will focus on data research and analyzing the effectiveness of strategies and investments. By leveraging South Carolina’s Integrated Data System and robust population data sets, the Center will use a broad and widely recognized “Cascade of Care” framework and state-specific data to pinpoint geographic and population needs, along with systemic barriers to care. Statewide data analysis will help inform clinical, programmatic, and policy opportunities for improved services to engage those South Carolinians with addiction who are currently unserved and underserved until their long-term recovery is achieved, and to prevent South Carolinians from becoming addicted. Analysis will also lay the groundwork for assessing the impact of strategies funded by the significant financial investments intended to remediate the opioid epidemic.

The Center will engage program and service implementation specialists and data scientists from the academic institutions and state agencies who have expertise in implementing and rigorously evaluating evidence-based strategies and clinical care to address addiction and help improve the public health response to the drug crisis. Specific quality-focused support and clinical consultation will be available to service providers and local colleagues, as well as other entities engaging in prevention, intervention, treatment, and/or recovery efforts.

The overall purpose of the Center is to strengthen the quality of how we address addiction statewide by using data to inform how we strategically create change, and specifically support statewide scale and spreading of best practices and approaches to address the ever-evolving addiction crisis.

Staff have been hired, and the Center is in the planning and implementation stages of data discovery and a systemic needs assessment.

Collaboration

DAODAS continues working with the S.C. Department of Corrections (SCDC) to better serve individuals involved in the justice system and to provide SUD services to youthful offenders released from prison to help reduce recidivism and SUDs. The Step UP! program starts the process of re-integrating offenders back into the community. During the past fiscal year, 75 inmates with opioid use disorder (OUD) were provided medication for OUD (MOUD) upon release and referred to county alcohol and drug abuse authorities by peer support professionals.

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A highlight of the partnership between DAODAS and SCDC is the MOUD project, which focuses on inmates receiving a dose of Vivitrol before leaving the prison system. Three hundred inmates have been diagnosed with SUDs and received Vivitrol shots. Fifty-two graduates have entered the community during FY23, as well as 44 inmates who were diagnosed with a stimulant use disorder. There are 429 active participants enrolled in the MOUD program as of FY23, as well as 3,011 Narcan kits distributed to inmates leaving prison. Additionally, 101 inmates have been trained and certified as Peer Support Specialists, enabling them to conduct meetings “behind the fence.” In addition, 17 Narcan vending machines have been placed in SCDC facilities. The total effort of working with SCDC is a particularly noteworthy occurrence that demonstrates promising results for the project, as the average recidivism rate in South Carolina for inmates is 21.9%.

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

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

Additionally, DAODAS worked with the S.C. Department of Veterans’ Affairs (VA) to disseminate the Heritage Health Solutions Comprehensive Substance Misuse Program to South Carolina veterans and their families. The program includes use of Motivational Interviewing techniques, positive psychology, and harm reduction principles. The DAODAS-VA project made a significant difference in the lives of veterans across the state. Through the partnership between Heritage Health Solutions, The Phoenix Center, and Upstate Warrior Solution, 172 veterans have been screened for SUDs and were referred to treatment. The Phoenix Center is now part of Combined Arms (South Carolina Veteran Coalition), which allows the provider to receive electronic referrals directly from a network of veterans’ service organizations.

Process Improvements

Implementation by DAODAS of a Grants Management System (GMS) has enhanced internal efficiency and eased contractors/sub-grantees’ burden through funding and deliverables management. The department has developed and implemented such an electronic system of grants management to increase the quality and accountability of prevention, intervention, treatment, and recovery services. The goal is to streamline interfaces for contractors/sub-grantees by consolidating multi-funder project source allocations.

Starting in FY23, new funding announcements are publicly posted on the DAODAS Grant Application Portal for potential applicants to view and submit applications. Training was provided through several open sessions on the Grant Application Portal. One-on-one technical assistance to sub-grantees has been ongoing during implementation. Specific to the federal Block Grant application, one-on-one technical assistance is being provided to the county alcohol and drug abuse authorities with respect to

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creating budgets and setting and capturing goals, objectives, and performance measures. Implementation has been a large undertaking for the agency and its contractors; however, during the year, the system has been streamlined. The GMS has allowed the agency to review internal processes and to evaluate data collection in an attempt to reduce administrative burden on local providers and contractors.

Compliance

The agency’s Internal Auditor created an Internal Auditing Charter for the agency, and with assistance from the State Auditor’s Office, created processes and reports for an internal audit plan to help ensure that DAODAS achieves its risk-management objectives, both internally and externally, with contractors.

The Internal Auditor also performed financial compliance reviews and cost audits for various county alcohol and drug abuse authorities. Over the course of FY23, financial compliance reviews were conducted for every county authority.

The department’s two Medicaid Compliance Specialists are working collaboratively with county alcohol and drug abuse authorities and opioid treatment programs (OTPs) to ensure compliance with Medicaid standards for both inpatient and outpatient services. During the fiscal year, their work has included providing technical support to local OTPs and county authorities at the request of the S.C. Department of Health and Human Services (DHHS) to ensure beneficiaries’ Medicaid re-enrollment after the end of the COVID-19 Public Health Emergency.

DAODAS and DHHS worked together to identify and implement steps to ensure workforce capacity, including adding Licensed Addiction Counselors as qualified providers under the Medicaid Rehabilitative Behavioral Health Services Manual and increasing reimbursement rates. These rate increases support the active engagement of medical health professionals to address SUDs, particularly opioid use disorder.

The DAODAS Legal/Compliance Division conducted 21 site visits after completing audits to address documentation and billing compliance through review of electronic health records with county alcohol and drug abuse authorities. The Legal/Compliance Division and members of the Treatment and Recovery Services Division provided extensive training opportunities and technical support during FY23 to the county authorities and implemented corrective actions plans when necessary. Extensive training opportunities and technical support were provided on-site at five county authorities, with four corrective action plans being implemented to address compliance and quality service delivery.

For FY23, the Legal/Compliance Division reviewed internal auditing procedures with all 28 contracted OTPs and has completed site visits and Medicaid file reviews for 19 OTPs.

The South Carolina State Opioid Treatment Authority (SCSOTA), housed at DAODAS, reviewed and approved or denied exception requests for take-home dosing, including requests to implement interim maintenance. The SCSOTA also:

- educated partners about OTP services and medications for opioid use disorder;
- acted as a liaison for emergency and disaster planning;
- monitored OTPs’ operations to ensure quality and regulatory compliance; and
- advocated for OTPs to gain the use of software from Lighthouse Central Registry, which monitors dual enrollment as well as assists with any disasters to relocate patients to another OTP or to provide access to necessary emergency information. Access to the registry went live in July 2023.

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Funding and Grant Awards

During FY23, DAODAS again worked with DHHS to increase reimbursement for a range of therapeutic and medical services. This assists the county alcohol and drug abuse authorities in achieving some parity with other Rehabilitative Behavioral Health Services rates.

As a result of a proviso found in the FY23 Appropriations Act, DAODAS was able to serve on the Behavioral Health Oversight Committee that reviewed crisis-stabilization services for those patients who are experiencing behavioral health episodes, including those with mental health and substance use disorders. As a result, DHHS has announced crisis-stabilization grants for hospital-based emergency departments and observational units dedicated to behavioral health. The goal of the program is to ease overcrowding at hospital emergency departments, initiate needed urgent psychiatric treatment, and reduce unnecessary hospital inpatient admissions.

The agency subcontracted 94% of the agency’s total budget for programs and services and subcontracted 95% of all federal funding for programs and services.

For FY23, the agency confirmed the continuation of:

- \$2.2 million in federal State Opioid Response funds (Year 3) to combat the opioid epidemic;
- \$18,138,356 in SOR funds (Year 4) to combat the opioid epidemic, of which \$2.8 million is slated for recovery services;
- \$1,258,000 for Screening, Brief Intervention, and Referral to Treatment (SBIRT) grants (carry-forward and Year 4 funds);
- \$146,809 for a Medication-Assisted Drug Court Project; and
- \$850,000 for an Overdose Prevention grant.

DAODAS was awarded two new grants during FY23. These included a grant for Recovery Housing through the S.C. Department of Commerce – \$790,000 plus \$823,245 for the second-year award; and a Residential Substance Abuse Treatment Program sub-award from the S.C. Department of Corrections.

Risk Management and Mitigation Strategies

Throughout FY23, DAODAS continued to improve the effectiveness of the public and private provider system, striving for long-term patient outcomes and recovery. System-wide, the goals for FY23 were to continue implementing a coordinated system of care, to implement research- and science-based protocols that increase chances for recovery, and to continue to implement a formula-based federal block grant funding process that enhances the performance of providers and ultimately achieves improved health outcomes for patients.

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

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

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- Continued attention to the disease of addiction and the possible rise in SUDs and needed services if medical marijuana legislation is enacted. Funding should be increased to address diversion of medical marijuana and to provide for the prevention of youth access to marijuana and treatment for those who become addicted should laws be enacted legalizing medical marijuana.
- Continued attention to the disease of addiction keeping pace with its Southeast neighbors. Funding should be elevated to address increasing capacity as a result of the opioid crisis, including stimulants for services, medications, training of prescribers, and working with first responders to reverse overdoses.
- A focus on DUI policy to decrease drunk driving and car crashes. South Carolina ranks in the “Top 5” states for alcohol-related highway car crashes and deaths. Mandatory server training should be enacted.
- A focus on crisis stabilization behavioral healthcare services to include mobile units to address the co-occurring population.
- A continued focused on expanding quality housing for recovery services and support.

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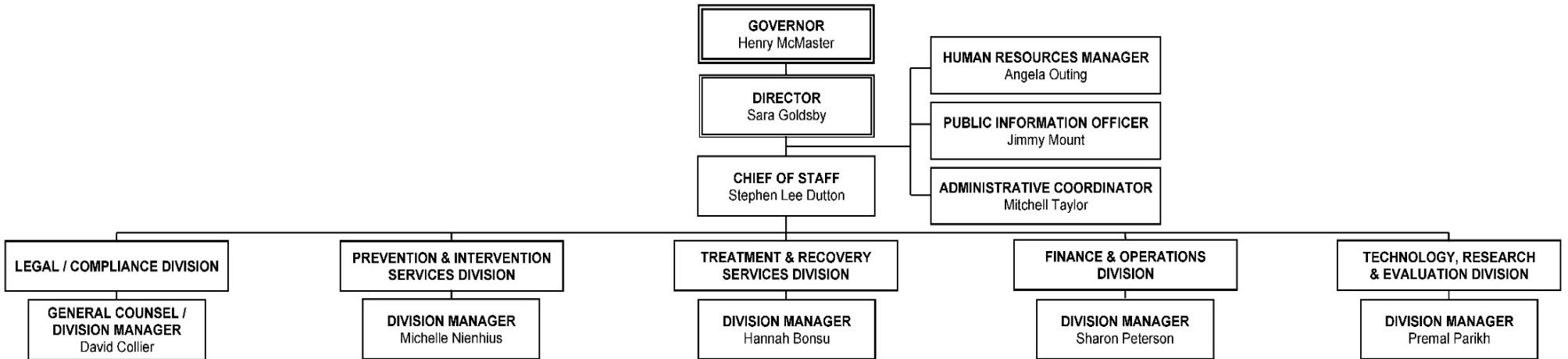
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AGENCY ORGANIZATIONAL CHART

South Carolina Department of Alcohol and Other Drug Abuse Services (6/30/23)



2023

Reorganization and Compliance

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse

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Agency Mission

Adopted in:

2022

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

Agency Vision

Adopted in:

2022

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

Recommendations for reorganization requiring legislative change:

None

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

None

Significant events related to the agency that occurred in FY2023

Description of Event	Start	End	Agency Measures Impacted	Other Impacts
Started New Housing Program	October	June	Maintain the number of unduplicated persons connecting to the Recovery Community organizations annually at 3,500 or more	The program increases the number of individuals who have housing and therefore may access recovery services in the community.
Increased Collegiate Housing Program	July	June	Maintain at least 3 Collegiate Recovery Organizations in the state	Increased the number of Collegiate Recovery Organizations across the State. Funded a Collegiate Recovery House.

Is the agency in compliance with S.C. Code Ann. § 2-1-220, which requires submission of certain reports to the Legislative Services Agency for publication online and the State Library? (See also S.C. Code Ann. § 60-2-20).

Yes

Reason agency is out of compliance: (if applicable)

Is the agency in compliance with various requirements to transfer its records, including electronic ones, to the Department of Archives and History? See the Public Records Act (S.C. Code Ann. § 20-1-10 through 20-1-180) and the South Carolina Uniform Electronic Transactions Act (S.C. Code Ann. § 26-6-10 through 26-10-210).

Yes

Does the law allow the agency to promulgate regulations?

No

Law number(s) which gives the agency the authority to promulgate regulations:

Has the agency promulgated any regulations?

No

Is the agency in compliance with S.C. Code Ann. § 1-23-120 (J), which requires an agency to conduct a formal review of its regulations every five years?

Yes

(End of Reorganization and Compliance Section)

FY2023

Strategic Plan Results

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

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

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

Goal 3 Become a Leader in Collaboration and Integration

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.1 Reduce Youth and Young Adult use of Alcohol, Tobacco and other Drugs														
State Objective: Healthy and Safe Families														
1.1.1	Increase the Number of Individuals who receive Prevention Services by 1%	5,000,000	5,000,000	212,631	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Single Service Count	Impact / DAODAS Prevention Data System	DAODAS Division of Prevention	The public and local providers	0	4502.000000.000	For FY23, DAODAS changed its reporting practice for this metric. The presented number is the sum of 191230 individuals served through population based programs and 21401 persons served through individual based programs. This will be the reporting standard henceforth.
1.1.2	Maintain at least 250 DAODAS Supported Alcohol Enforcement Team Public Safety Checkpoints	685	250	396	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of local entities participating in checkpoints	DAODAS Mosaic Reporting	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	Schools and local providers	4502.000000.000	Due to a change in the state reporting system, agency participation is not a required field that the local providers were required to complete for form submission. It is an aim to update this for FY24
1.1.3	Reduce Underage Drinking to 23% or under	23.10%	23%	19.20%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self-reported as having drunk while being underage in the past 30 days/ total number surveyed by the SC YRBS	Youth Risk Behavior Survey	SC Department of Education	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse.	Schools and local providers	4502.000000.000	
1.1.4	Maintain Underage Alcohol Buy Rate under 10%	10.40%	10%	20.20%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number of violations over the total number observed	Mosaic, Pacific Institute for Research and Evaluation	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse.	The public and local providers	4502.000000.000	Reporting for the fiscal year transitioned to a new platform through compliance checks. DAODAS is working with county level alcohol compliance times to educate on reporting and to reduce this number.
1.1.5	Reduce Alcohol-involved Car Crashes by 1%	14.10%	30%	30%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	number of deaths in crashes where BAC is .08% or greater / total number of deaths in crashes	Fatality Analysis Reporting System (FARs) / NHTSA Database	Online database	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	The public and local providers	4502.000000.000	
1.1.6	Keep underage access to tobacco (Synar) to 10% or less	10.60%	10%	10.60%	Percent	equal to or less than	Federal Fiscal Year (October 1 - September 30)	Number of violations over the total number observed	Youth Access to Tobacco Study / DAODAS	DAODAS Division of Prevention	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	The public and local providers	4502.000000.000	
1.1.7	Keep Underage Tobacco Use to 9% or less	5.90%	9%	3.30%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self-reported as having smoked a cigarette in the past 30 days/ total number surveyed by the SC YRBS	Youth Risk Behavior Survey	SC Department of Education	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	Schools and local providers	4502.000000.000	YRBS data was unavailable for this measure. In lieu, the same parameters of current cigarette use were measured using the Youth Tobacco Survey managed by the DHEC Tobacco Control Unit/
1.2 Increase Access to a Continuum of Evidence Based Substance Use Disorder Services														
State Objective: Healthy and Safe Families														
1.2.1	Increase the Number of Unduplicated Patients Served by 5%	44,159	46,367	46,584	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services to South Carolinians of all ages increases recovery rates and impacts a range of morbidity and mortality statistics, as well as economic output indicators.	The public and local providers	4502.000000.000	
1.2.2	Increase the number of pregnant women who access treatment and recovery services by 5%	625	660	686	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services and coordinated prenatal care impacts the Infant Mortality Rate, as well as increase recovery rates.	The public and local providers	4502.000000.000	
1.2.3	Increase Criminal Justice System referrals to SUD treatment to 14,000	12,878	14,000	10,083	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of referrals	Internal Records	DAODAS EHR	Provision of treatment services to inmates and parolees increases changes of recovery and decreases recidivism.	SCDC	4502.000000.000	
1.2.4	Provide additional Peer Support Trainings to increase the number of Peer Support Specialists by 5%	462	490	823	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of training offered	Internal Records	DAODAS Division of Treatment	Peer Support Services is an industry standard that assists individuals in learning recovery principles and maintain sobriety, increases recovery outcomes.	Recovery Community and Local Providers	4502.000000.000	Certified Peer Support Specialists and Certified Peer Recovery Specialists currently make up 823 (19%) of the total credentials held through APSC.

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.5	Maintain at least 3 Collegiate Recovery Organizations in the state	4	3	7	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal Records	DAODAS Division of Treatment	Expanding Recovery Programs increases recovery outcomes; impacts local communities	Colleges	4502.000000.000	
1.2.6	Maintain the number of unduplicated persons connecting to the Recovery Community organizations annually at 3,500 or more	14,836	3,500	141,114	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated persons connecting	Internal Records	DAODAS Division of Treatment	Expanding Recovery Support for individuals connecting with recovery communities	Recovery Community and Local Providers	9806.550000X000	SC RCO's have serviced 141,114 unique individuals for FY23. 135,472 of those people come from Wake Up Carolina. The other 11 RCO's under contract with DAODAS have registered 5,642 unique individuals combined.
1.2.7	Increase the number of certified recovery residences to 15	11	15	17	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of residences	Internal Records	DAODAS Division of Treatment	Expanding access to certified recovery residences to increase recovery outcomes and impact local communities	Recovery Community and Local Providers	9806.550000X000	
1.2.8	Implement MAT diversion programs in 3 counties	2	3	7	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal records	DAODAS Division of Legal Compliance	Recovery Community and Local Providers	Expanding best practices with treatment courts increases recovery outcomes	9806.550000X000	
1.2.9	To obtain and maintain a 75% occupancy rate (over each 90-day period) in Oxford homes	80%	75%	80.69%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of beds occupied over total number of beds	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to transitional Housing such as an Oxford house, increases recovery outcomes; impacts local communities and increases the ability for an individual to become gainfully employed.	4502.000000.000	
1.2.10	To maintain the 10 Recovery Community Organizations across the state	13	10	17	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Recovery Community Organizations open across the state	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to continuum of care	4502.000000.000	4 Recovery Community Organizations were added during FY23
1.3	Increase Services to Patients With Opioid Use Disorder	State Objective: Healthy and Safe Families												
1.3.1	Increase the Number of Patients receiving Opioid Disorder Treatment Services by 5%	5,579	5,900	5,057	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.2	Increase the Number of Patients Receiving MAT Services by 5%	5,753	6,040	5,655	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X000	
1.3.3	Increase the Number of Professional First Responders Trained in Opioid Reversal Protocols using Narcan to 12,775	16,459	1,750	1,879	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number trained	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	Law enforcement, first responders	9806.540000X000	
1.3.4	Increase coordination with the S.C. Department of Corrections (SCDC) to enroll inmates in opioid recovery services by 10% as measured by number of inmates enrolled.	422	440	300	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of inmates enrolled	Internal Records	DAODAS Division of Treatment	Increases Treatment Referrals; Increases Recovery Prospects.	Correctional Facilities	9806.550000X000	DAODAS transitioned to a new Grants Management System during FY23. During this transition, technical support has been continuously provided; however, delays in reporting arose throughout the transition.
1.3.5	Increase the number of Prescription Drug Drop Boxes to 245	241	245	241	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of drop boxes	Just Plain Killers	DAODAS Division of Prevention	Increases Prescription Drug Prevention Efforts; Increases Disposal of Opiate and Other Harmful Drugs; Decreases Demand for Opiates.	The public and local providers	9806.540000X000	Drop boxes are added upon request by the county. With the drop off days assisted and partnered by law enforcement, demand for drop boxes has decreased. This goal is shifting to maintain the current program to meet shifting community desires for safe prescription drug removal.
1.3.6	Increase the number of Narcan administrations through LEON and ROLL by 5%	1,590	1,670	1,878	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of administrations through grant programs.	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	The public, first responders	9806.540000X000	
1.3.7	Maintain inducing at least 500 ED patients on buprenorphine in pilot sites per fiscal year.	800	500	765	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients served through pilot sites.	Internal Records	DAODAS Division of Treatment	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	Hospitals	9806.550000X000	

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.3.8	Maintain availability of the 31 Tele-Health providers across the state	31	31	31	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of providers	MAT Report	DAODAS Division of Treatment	Telehealth Services Increases Access, Diagnosis and Treatment options for a range of SUD patients and telehealth-capable healthcare entities.	local providers and hospitals	9806.550000X000	
1.3.9	Increase the number of agencies that are designated by DAODAS to be community distributors of naloxone to 90	83	90	102	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of agencies	Internal Records	DAODAS Divisions of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	local providers	9806.540000X000	As of June 30, 2023, there are 102 agencies designated as community distributors. 78 participate in the DAODAS harm reduction project and 24 are designated and procure Narcan through other entities.
2.1 Reduce Substance Use Disorder in South Carolina		State Objective: Public Infrastructure and Economic Development												
2.1.1	Increase Effectiveness of Treatment Programs to 35% / Decrease Use	35%	35%	44%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently use substances over all those who are discharged from treatment	Electronic Health Record - Local Provider Report	DAODAS EHR	Provides Coverage for uninsured individuals increasing access to treatment and recovery assets.	The public and local providers	4502.000000.000	FY22
2.1.2	Increase Effectiveness of Treatment Programs by 1% Increase Employment	58%	59%	62%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently have employment over all those who are discharged from treatment	National Outcome Measures	DAODAS EHR	Impacts individual and family economic stability; Impacts South Carolina economic outputs.	The public and local providers	4502.000000.000	
2.1.3	Maintain 90 day length-of-stay for 50% of individuals utilizing level 1 outpatient services	42%	50%	58%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing 90 day length of stay / total number of unduplicated patients	Electronic Health Record - Local Provider Report / Monthly	DAODAS EHR	Longer treatment stays leads to better clinical outcomes	The public and local providers	4502.000000.000	FY22 / All Other Service Categories
2.1.4	Maintain percentage of patients completing treatment plan of at least 40%	43%	40%	50%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing treatment / total number of unduplicated patients	DAODAS FY Discharge Outcomes Report	DAODAS EHR	Completion of treatment leads to lower rates of re-admission.	The public and local providers	4502.000000.000	
2.2 Workforce Development		State Objective: Public Infrastructure and Economic Development												
2.2.1	Increase training opportunities in evidence based programs in prevention, treatment and recovery by 5%	39	41	43	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of trainings	State Baseline Measure	Administration	Training and Retention of qualified counselor are essential to prevention, treatment and recovery efforts.	local providers and state partners	4502.000000.000	This measure rose by 10%
2.2.2	Maintain having at least 70 individuals certified to provide preventative services in South Carolina	84	70	79	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Prevention Professionals and Advocates (SCAPPA)	Online database	Training and Retention of qualified counselors are essential to prevention and overall efforts.	local providers and state partners	4502.000000.000	
2.2.3	Maintain the number of individuals certified to provide treatment services in South Carolina to at least 2,000	2,955	2,000	2,141	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Alcoholism and Drug Abuse Counselors (SCAADAC)	Online database	Training and Retention of qualified counselors are essential to treatment and overall efforts.	local providers and state partners	4502.000000.000	
3.1 Increase Integration Efforts with Local and State Partners		State Objective: Government and Citizens												
3.1.1	Increase the number of state and local private and public partnerships for targeting substance use disorder to 85	85	85	95	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of partnerships	Internal Records	Administration	Building a strong continuum of prevention, treatment and recovery providers is essential to increasing access to recovery and maintaining sobriety.	local providers and state partners	9806.550000X000	
3.2 Increase Services to the Uninsured		State Objective: Government and Citizens												
3.2.1	Increase the number of uninsured individuals receiving state funded assessments by 5%	8,093	8,500	8,702	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of assessments	Entered Electronic Health Record / Monthly	DAODAS EHR	Provides the department a measure of services to the uninsured and underinsured; a federal priority.	The public and local providers	4502.000000.000	
3.3 Increase Integration with Physical and Specialty Healthcare Providers		State Objective: Government and Citizens												

Perf. Measure Number	Description	Base	Target	Actual	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
3.3.1	Use Screening, Brief Intervention and Referral to Treatment (SBIRT) as the standard of care at targeted Emergency Department Sites to fully screened (FS) 500 individuals for SUDs annually	408	500	310	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Single Service Count	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	Current intakes are below target due to a transition in GPRA reporting. During this update, intakes were completed on paper forms and not all forms for the time period have been uploaded
3.3.2	Use SBIRT as the standard of care at targeted Emergency Department Sites to refer 100 individuals to treatment (RT) for SUDs annually	82	100	155	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of referrals	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	

FY2024

Strategic Plan Development

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

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

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

Goal 3 Become a Leader in Collaboration and Integration

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number	Responsible	Notes
1.1 Reduce Youth and Young Adult use of Alcohol, Tobacco and other Drugs														
State Objective: Healthy and Safe Families														
1.1.1	Increase the Number of Individuals who receive Prevention Services by 1%	212,631	214,757	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Single Service Count	Impact / DAODAS Prevention Data System	DAODAS Division of Prevention	The public and local providers	0	4502.000000.000		
1.1.2	Maintain at least 250 DAODAS Supported Alcohol Enforcement Team Public Safety Checkpoints	396	250	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of local entities participating in checkpoints	DAODAS Mosaic Reporting	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	Schools and local providers	4502.000000.000		
1.1.3	Reduce Underage Drinking to 20% or under	19.20%	20%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self-reported as having drunk while being underage in the past 30 days/ total number surveyed by the SC YRBS	Youth Risk Behavior Survey	SC Department of Education	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and misuse.	Schools and local providers	4502.000000.000		
1.1.4	Reduce Underage Alcohol Buy Rate to under 10%	20.20%	10%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number of violations over the total number observed	Mosaic, Pacific Institute for Research and Evaluation	DAODAS Division of Prevention	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse.	The public and local providers	4502.000000.000		
1.1.5	Reduce Alcohol-involved Car Crashes by 1%	30%	29.30%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	number of deaths in crashes where BAC is .08% or greater / total number of deaths in crashes	Fatality Analysis Reporting System (FARS) / NHTSA Database	Online database	Prevention Services are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Youth Mortality Rate.	The public and local providers	4502.000000.000		
1.1.6	Keep underage access to tobacco (Synar) to 10% or less	10.60%	10%	Percent	equal to or less than	Federal Fiscal Year (October 1 - September 30)	Number of violations over the total number observed	Youth Access to Tobacco Study / DAODAS	DAODAS Division of Prevention	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	The public and local providers	4502.000000.000		
1.1.7	Keep Underage Tobacco Use to 9% or less	3.30%	9%	Percent	equal to or less than	State Fiscal Year (July 1 - June 30).	Number that self-reported as having smoked a cigarette in the past 30 days/ total number surveyed by the SC YRBS	Youth Risk Behavior Survey	SC Department of Education	Prevention of Tobacco Sales are aimed at reducing first use among youth and therefore lifetime use and abuse. Decreases Adult Mortality Rate.	Schools and local providers	4502.000000.000		
1.2 Increase Access to a Continuum of Evidence Based Substance Use Disorder Services														
State Objective: Healthy and Safe Families														

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.1	Increase the Number of Unduplicated Patients Served by 5%	46,584	5%	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services to South Carolinians of all ages increases recovery rates and impacts a range of morbidity and mortality statistics, as well as economic output indicators.	The public and local providers	4502.000000.000	
1.2.2	Increase the number of pregnant women who access treatment and recovery services by 5%	686	5%	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Internal Records	DAODAS EHR	Provision of treatment services and coordinated prenatal care impacts the Infant Mortality Rate, as well as increase recovery rates.	The public and local providers	4502.000000.000	
1.2.3	Increase Criminal Justice System referrals to SUD treatment to 14,000	10,083	14,000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of referrals	Internal Records	DAODAS EHR	Provision of treatment services to inmates and parolees increases changes of recovery and decreases recidivism.	SCDC	4502.000000.000	
1.2.4	Provide additional Peer Support Trainings to increase the number of Peer Support Specialists by 5%	823	864	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of training offered	Internal Records	DAODAS Division of Treatment	Peer Support Services is an industry standard the assists individuals in learning recovery principles and maintain sobriety; increases recovery outcomes.	Recovery Community and Local Providers	4502.000000.000	
1.2.5	Maintain at least 5 Collegiate Recovery Organizations in the state	7	5	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal Records	DAODAS Division of Treatment	Expanding Recovery Programs increases recovery outcomes; impacts local communities	Colleges	4502.000000.000	
1.2.6	Maintain the number of unduplicated persons connecting to the Recovery Community organizations annually at 3,500 or more	141,114	35,000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated persons connecting	Internal Records	DAODAS Division of Treatment	Expanding Recovery Support for individuals connecting with recovery communities	Recovery Community and Local Providers	9806.550000X000	
1.2.7	Maintain the 17 certified recovery residences	17	17	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of residences	Internal Records	DAODAS Division of Treatment	Expanding access to certified recovery residences to increase recovery outcomes and impact local communities	Recovery Community and Local Providers	9806.550000X000	
1.2.8	Implement MAT diversion programs in 3 counties	7	7	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of programs	Internal records	DAODAS Division of Legal Compliance	Recovery Community and Local Providers	Expanding best practices with treatment courts increases recovery outcomes	9806.550000X000	
1.2.9	To obtain and maintain a 75% occupancy rate (over each 90-day period) in Oxford homes	80.69%	75%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of beds occupied over total number of beds	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to transitional Housing such as an oxford house, increases recovery outcomes; impacts local communities and increases the ability for an individual to become gainfully employed.	4502.000000.000	

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
1.2.10	To maintain the 10 Recovery Community Organizations across the state	17	10	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Recovery Community Organizations open across the state	Internal records	DAODAS Division of Treatment	Recovery Community and Local Providers	Expanding Recovery Support and access to continuum of care	4502.00000000	
1.3 Increase Services to Patients With Opioid Use Disorder													
State Objective: Healthy and Safe Families													
1.3.1	Increase the Number of Patients receiving Opioid Disorder Treatment Services by 5%	5,057	5%	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X00	
1.3.2	Increase the Number of Patients Receiving MAT Services by 5%	5,655	5%	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of Unduplicated Patients Served	Entered Electronic Health Record	DAODAS Division of Technology, Research & Evaluation	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	The public and local providers	9806.550000X00	
1.3.3	Increase the Number of Professional First Responders Trained in Opioid Reversal Protocols using Narcan to 12,775	16,549	1,879	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number trained	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	Law enforcement, first responders	9806.540000X00	
1.3.4	Increase coordination with the S.C. Department of Corrections (SCDC) to enroll inmates in opioid recovery services by 10% as measured by number of inmates enrolled.	300	330	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of inmates enrolled	Internal Records	DAODAS Division of Treatment	Increases Treatment Referrals; Increases Recovery Prospects.	Correctional Facilities	9806.550000X00	
1.3.5	Maintain the 241 Prescription Drug Drop Boxes	241	241	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of drop boxes	Just Plain Killers	DAODAS Division of Prevention	Increases Prescription Drug Prevention Efforts; Increases Disposal of Opiate and Other Harmful Drugs; Decreases Demand for Opiates.	The public and local providers	9806.540000X00	
1.3.6	Increase the number of Narcan administrations through LEON and ROLL by 5%	1,878	1,971	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of administrations through grant programs.	LEON Project/ROLL Project	DAODAS Division of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	The public, first responders	9806.540000X00	
1.3.7	Maintain inducting at least 500 ED patients on buprenorphine in pilot sites per fiscal year.	500	500	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients served through pilot sites.	Internal Records	DAODAS Division of Treatment	Expanding Opiate Disorder services saves lives; increases recovery opportunities and impacts the state's economic output.	Hospitals	9806.550000X00	
1.3.8	Maintain availability of the 31 Tele-Health providers across the state	31	31	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of providers	MAT Report	DAODAS Division of Treatment	Telehealth Services Increases Access, Diagnosis and Treatment options for a range of SUD patients and telehealth-capable healthcare entities.	local providers and hospitals	9806.550000X00	
1.3.9	Increase the number of agencies that are designated by DAODAS to be community distributors of naloxone 105	102	105	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of agencies	Internal Records	DAODAS Divisions of Prevention	Reverses Drug Overdose; Saves Lives; Increases Treatment Referrals; Increases Recovery Prospects.	local providers	9806.540000X00	
2.1 Reduce Substance Use Disorder in South Carolina													
State Objective: Public Infrastructure and Economic Development													

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes	
2.1.1	Increase Effectiveness of Treatment Programs to 35% / Decrease Use	35%	35%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently use substances over all those who are discharged from treatment	Electronic Health Record - Local Provider Report	DAODAS EHR	Provides Coverage for uninsured individuals increasing access to treatment and recovery assets.	The public and local providers	4502.000000.000		
2.1.2	Increase Effectiveness of Treatment Programs by 1% / Increase Employment	55%	55%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of those who currently have employment over all those who are discharged from treatment	National Outcome Measures	DAODAS EHR	Impacts individual and family economic stability; Impacts South Carolina economic outputs.	The public and local providers	4502.000000.000		
2.1.3	Maintain 90 day length-of-stay for 50% of individuals utilizing level 1 outpatient services	50%	50%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing 90 day length of stay / total number of unduplicated patients	Electronic Health Record - Local Provider Report / Monthly	DAODAS EHR	Longer treatment stays leads to better clinical outcomes	The public and local providers	4502.000000.000		
2.1.4	Maintain percentage of patients completing treatment plan of at least 40%	40%	40%	Percent	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of unduplicated patients completing treatment / total number of unduplicated patients	DAODAS FY Discharge Outcomes Report	DAODAS EHR	Completion of treatment leads to lower rates of re-admission.	The public and local providers	4502.000000.000		
2.2	Workforce Development							State Objective: Public Infrastructure and Economic Development						
2.2.1	Increase training opportunities in evidence based programs in prevention, treatment and recovery by 5%	43	45	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of trainings	State Baseline Measure	Administration	Training and Retention of qualified counselor are essential to prevention, treatment and recovery efforts.	local providers and state partners	4502.000000.000		
2.2.2	Maintain having at least 70 individuals certified to provide preventative services in South Carolina	70	70	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Prevention Professionals and Advocates (SCAPPA)	Online database	Training and Retention of qualified counselors are essential to prevention and overall efforts.	local providers and state partners	4502.000000.000		
2.2.3	Maintain the number of individuals certified to provide treatment services in South Carolina to at least 2,000	2,141	2,000	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of individuals certified	South Carolina Association of Alcoholism and Drug Abuse Counselors (SCAADAC)	Online database	Training and Retention of qualified counselors are essential to treatment and overall efforts.	local providers and state partners	4502.000000.000		
3.1	Increase Integration Efforts with Local and State Partners							State Objective: Government and Citizens						
3.1.1	Maintain the 95 of state and local private and public partnerships for targeting substance use disorder	95	95	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of partnerships	Internal Records	Administration	Building a strong continuum of prevention, treatment and recovery providers is essential to increasing access to recovery and maintaining sobriety.	local providers and state partners	9806.550000X000		
3.2	Increase Services to the Uninsured							State Objective: Government and Citizens						
3.2.1	Increase the number of uninsured individuals receiving state funded assessments by 5%	8,500	8,925	Count	equal to or greater than	State Fiscal Year (July 1 - June 30).	Number of assessments	Entered Electronic Health Record / Monthly	DAODAS EHR	Provides the department a measure of services to the uninsured and underinsured, a federal priority.	The public and local providers	4502.000000.000		
3.3	Increase Integration with Physical and Specialty Healthcare Providers							State Objective: Government and Citizens						

Perf. Measure Number	Description	Base	Target	Value Type	Desired Outcome	Time Applicable	Calculation Method	Data Source	Data Location	Stakeholder Need Satisfied	Primary Stakeholder	State Funded Program Number Responsible	Notes
3.3.1	Use Screening, Brief Intervention and Referral to Treatment (SBIRT) as the standard of care at targeted Emergency Department Sites to fully screened (FS) 500 individuals for SUDs annually	310	500	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Single Service Count	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	
3.3.2	Use SBIRT as the standard of care at targeted Emergency Department Sites to refer 100 individuals to treatment (RT) for SUDs annually	100	100	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of referrals	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	
3.3.3	Maintain the Psychiatry residency program, 11 Professionals, to train mental health professionals in South Carolina and increase access to mental health care.	11	11	Count	equal to or greater than	Federal Fiscal Year (October 1 - September 30)	Number of providers	Internal Records	DAODAS Division of Treatment	Increases Access to Treatment Services and thus recovery opportunities.	Hospitals	4502.000000.000	

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Budget Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

State Funded Program No.	State Funded Program Title	Description of State Funded Program	(Actual) General	(Actual) Other	(Actual) Federal	(Actual) Total	(Projected) General2	(Projected) Other	(Projected) Federal4	(Projected) Total
0000.000000.002	HR Pay Only		\$ -	\$ 947.24	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
0503.150000X000	State Block Grant	Enabling legislation (Section 44-49-10) (D) directs the agency to develop a block grant mechanism to distribute funding to the local alcohol and drug abuse authorities.	\$ 174,474.00	\$ -	\$ -	\$ 174,474.00	\$ 174,474.00	\$ -	\$ -	\$ 174,474.00
0503.200000X000	Local Salary Supplement	Section 8-11-945 of the code defines local health care providers who include local alcohol and drug abuse providers. When state employees receive a pay raise, those employees in the local agencies that are paid by a state dollar also receive that same pay raise.	\$ 4,490,093.00	\$ -	\$ -	\$ 4,490,093.00	\$ 5,040,258.00	\$ -	\$ -	\$ 5,040,258.00
0508.010000.000	Finance & Operations	Provides budget, financial and operational support to the agency's mission.	\$ 11,187,053.01	\$ 247,267.08	\$ 50,889,917.14	\$ 62,324,237.23	\$ 18,930,642.14	\$ 987,908.40	\$ 67,680,239.60	\$ 87,598,790.14
3501.010000.000	Services	This state funded program no longer exists as an option in our line item budget.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4502.000000.000	Programs	Funds are considered Aid To Entities and include pass through funding to Prevention, Treatment and Recovery services provided in the local alcohol and drug authorities.	\$ 815,049.12	\$ 236,806.85	\$ 7,248,775.67	\$ 8,300,631.64	\$ 459,925.05	\$ 634,393.00	\$ 7,598,502.00	\$ 8,692,820.05
6001.000000.000	Information Technology	Provides direct assistance in working with the agency's computer hardware, DSIT and with local data systems.	\$ 219,633.67	\$ 168,008.63	\$ 806,757.86	\$ 1,194,400.16	\$ 201,231.72	\$ 219,713.00	\$ 691,351.00	\$ 1,112,295.72
6501.000000.000	Legal & Compliance	Managse contracts and compliance with those contracts.	\$ 153,741.15	\$ 247,570.85	\$ 151,954.09	\$ 553,266.09	\$ 121,409.85	\$ 242,650.00	\$ 346,356.00	\$ 710,415.85
9500.050000.000	State Employer Contributions	Self Explanatory	\$ 381,590.28	\$ 168,713.03	\$ 620,721.83	\$ 1,171,025.14	\$ 368,944.00	\$ 194,478.00	\$ 783,817.00	\$ 1,347,239.00
9806.540000X000	Prescription Drug Overdose Prevention	Federal grant awarded to assist in the distribution of Narcan and training of front line responders in reversing Opioid deaths.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9806.500000X000	Act 301 Behavioral Health	Infrastructure Improvement - Renovate existing facility and add new facility for Clarendon Behavioral Health Center	\$ 1,444,980.00	\$ -	\$ -	\$ 1,444,980.00	\$ -	\$ -	\$ -	\$ -
9806.540000X000	Infrastructure Impr/Subst	Infrastructure Improvement - \$1.75 million for New facility near Chesterfield for ALPHA Behavioral Health Center and \$1.5 million for half of a new facility near Bennettsville for Trinity Behavioral Care	\$ 3,250,000.00	\$ -	\$ -	\$ 3,250,000.00	\$ -	\$ -	\$ -	\$ -
9808.570000X000	The Courage Center	Costs related to The Courage Center expanding service to the Midlands	\$ 301,461.00	\$ -	\$ -	\$ 301,461.00	\$ -	\$ -	\$ -	\$ -

State Funded Program No.	State Funded Program Title	Description of State Funded Program	(Actual) General	(Actual) Other	(Actual) Federal	(Actual) Total	(Projected) General2	(Projected) Other	(Projected) Federal4	(Projected) Total
9818.100000X000	Trinity Behavioral Health Center	Infrastructure Improvement - Construction of a new facility in Dillon County for Trinity Behavioral Care	\$ 500,000.00	\$ -	\$ -	\$ 500,000.00	\$ -	\$ -	\$ -	\$ -
9823.250000X000	Unite Us IT Implem	Implementation of licences to the Unite Us Platform of Collaboration Software	\$ 906,000.00	\$ -	\$ -	\$ 906,000.00	\$ 594,000.00	\$ -	\$ -	\$ 594,000.00

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Legal Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2023
§ 24-13-1920	State	Statute	Directs DAODAS to establish of program of intervention, prevention and treatment for offenders and directs the department provide staff from funds appropriate annually by the general assembly.	Requires a service	The description of the law is self explanatory.	No Change
§ 24-13-1940	State	Statute	Directs cooperation between DAODAS and the DOC Director to develop policies to operate the center, fund the management of the center, including private contract, lease buildings, develop standards for counseling and disciplinary rules for residents of the center.	Requires a manner of delivery		No Change
§ 44-49-10	State	Statute	Establishes the South Carolina Department of Alcohol and Other Drug Abuse Services as a department of the Executive Branch.	Not related to agency deliverable	Establishes the agency.	No Change
§ 44-49-20	State	Statute	Names that the Director will be named by the Governor of the State.	Not related to agency deliverable		No Change
§ 44-49-40	State	Statute	Directs the agency to perform research on drugs and alcohol abuse.	Not related to agency deliverable		No Change
§ 44-49-50	State	Statute	Assigns an attorney to the department through the Attorney General's Office	Not related to agency deliverable		No Change
§ 44-49-60	State	Statute	Names an Adult Education Supervisor for the prevention of alcoholism.	Requires a service		No Change
§ 44-49-70	State	Statute	Names As Adult Prevention Supervisor.	Requires a service		No Change
§ 44-49-80	State	Statute	Establishes a Program for the intervention, prevention and treatment for the public schools of the state.	Requires a service		No Change
§ 56-1-1320	State	Statute	A first offender also includes the mandatory completion of ADSAP through DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-1-1330	State	Statute	A provisional driver's license also includes the mandatory completion of ADSAP through DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-1-2110	State	Statute	Requires a drug and alcohol assessment certified by a Substance Abuse Professional as certified by DAODAS.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2023
§ 56-1-385	State	Statute	If an individual petitions a court to reinstate a permanent drivers license, he or she shall have to complete and ADSAP program as administered through DAODAS	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2933	State	Statute	Driving with Unlawful Concentrations - enrollment in ADSAP is Mandatory	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2941	State	Statute	Failure to Follow Ignition Interlock Rules Require the submission to an ADSAP Assessment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2950	State	Statute	Implied Consent Failure	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 56-5-2990	State	Statute	Suspension of a Driver's Licensed / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
§ 61-12-20	State	Statute	Directs county councils to designate an agency or organization to appoint a governing body to right a county plan for a program to alcohol and drug abuse planning for that county.	Not related to agency deliverable		No Change
§ 61-12-30	State	Statute	Requires Citizen Participation on the board of the local agency for citizen input.	Not related to agency deliverable		No Change
§ 61-12-40	State	Statute	Designates how revenue funds must be spend.	Distribute funding to another entity		No Change
§ 61-12-50	State	Statute	Requires annual reports and audits to DAODAS for review.	Requires a manner of delivery		No Change
§ 61-12-60	State	Statute	Allows counties to join together to designate a single authority.	Not related to agency deliverable		No Change
§ 61-12-70	State	Statute	These funds are considered supplemental to increase local, state or federal funding.	Requires a manner of delivery		No Change
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 117.120.	State	FY22-23 Proviso	Directs the agency to work with certain entities in addressing the opioid crisis and specifically directs the agency to offer a collegiate recovery program and an MAT Diversion Program.	Distribute funding to another entity	Proviso Explanation is Self Explanatory. (Previous Proviso 117.119)	Redesignated

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2023
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.1.	State	FY22-23 Proviso	Allows the agency to charge training and conference fees to support educational and professional development initiatives.	Requires a service	Report our agency must/may provide	Reenacted
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.2.	State	FY22-23 Proviso	Directs the agency to provide gambling addiction services, including referral services and a mass communication campaign, pending appropriations.	Requires a service	Local Substance Use Disorder agencies provide gambling addiction programs.	Reenacted
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.3.	State	FY22-23 Proviso	Directs the agency to transfer \$1.9 million to the Department of Health and Human Services for the purposes of Medicaid Match.	Not related to agency deliverable		Reenacted
Act 264 of the South Carolina General Assembly, 2016-2017 General Appropriations Act, Part IB, Section 37, Proviso 37.4.	State	FY22-23 Proviso	Allows the Department to carry forward from prior fiscal years into the current fiscal year unexpended funds in excess of the 10% of the agency's general fund appropriations.	Not related to agency deliverable		Reenacted
Code of Laws of South Carolina 1976, as amended, Section 1.30-20.	State	Statute	Implements Name Change	Not related to agency deliverable		No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2990.	State	Statute	Mandated Treatment for Convicted DUI Offenders	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 59-150-230 (i).	State	Statute	Authorizes funding for Gambling Addiction Services	Requires a manner of delivery		No Change
Code of Laws of South Carolina, 1976, as amended, Section 59-150-230 (i).	State	Statute	Directs the General Assembly to Fund DAODAS for Gambling Addiction Programs	Distribute funding to another entity		No Change
Code of Laws of South Carolina, 1976, as amended, 44-52-10 et. seq.	State	Statute	Involuntary commitment procedures for those experiencing substance abuse.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to work with local mental health offices to implement the service.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 16-17-500.	State	Statute	Courts may order minors to undergo a tobacco education program certified by DAODAS.	Requires a service	Local Substance Use Disorder agencies provide tobacco cessation programs.	No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2023
Code of Laws of South Carolina, 1976, as amended, Section 16-25-20 (G).	State	Statute	Criminal Domestic Violence / Offender Referral to Substance Abuse programs Coordinated through DAODAS.	Requires a service	The description of the law is self explanatory.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 24-13-1910 et.seq.	State	Statute	Coordination with the Department of Corrections (DOC) for Substance Abuse Services delivered to rehabilitate alcohol and drug offenders, as determined by DOC.	Requires a service		No Change
Code of Laws of South Carolina, 1976, as amended, Section 44-49-10 et.seq.	State	Statute	Agency Enabling Legislation	Not related to agency deliverable		No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-1-286,	State	Statute	Underage DUI / Zero Tolerance / Administrative License Revocation / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-1-400	State	Statute	Requires mandatory treatment for Ignition Interlock Drivers who fail to follow the Ignition Interlock Law.	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2930 et. seq.	State	Statute	DUI / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2933 et. seq.	State	Statute	DUAC / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 56-5-2951 et. seq.	State	Statute	Refusal to Submit to BAC / Administrative License Revocation / Mandated Treatment	Requires a service	DAODAS Contracts with Local Substance Use Disorder Providers to offer DUI Programming.	No Change
Code of Laws of South Carolina, 1976, as amended, Section 61-12-10 et.seq.	State	Statute	Local Excise Tax Funding Distribution / County Planning Required	Distribute funding to another entity	Local Substance Abuse Disorder must submit County Strategic Plans for approval by DAODAS to receive this funding.	No Change
Code of Laws of South Carolina, as amended, 1976, Section 56-1-2110 (G)	State	Statute	Requires individuals who have a commercial driver's license suspended due to a failed urine screen, to be assessed and treated, if necessary, by a DAODAS substance abuse professional.	Requires a service	DAODAS Contracts with Local Substance Use Disorder agencies to provide substance use programming to those holding a CDL.	No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2023
Code of Laws of South Carolina 1976, as amended, Section 1-30-10.	State	Statute	Establishes the South Carolina Department of Alcohol and Other Drug Abuse Services as a department of the Executive Branch.	Not related to agency deliverable		No Change
South Carolina Code of Laws, 1976, as amended, Section 16-25-320 et.seq.	State	Statute	Designates the department as a member of the Domestic Violence Advisory Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 17-22-510.	State	Statute	Directs the South Carolina Prosecution Commission to discuss administrative requirements of an Alcohol Education Program operated by local solicitors.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 20-7-8920.	State	Statute	Requires underage individuals who violated underage drinking laws to attend a certified alcohol intervention program as certified by the department.	Requires a service	DAODAS Contracts with Local Substance Use Disorder agencies to offer alcohol intervention programming.	No Change
South Carolina Code of Laws, 1976, as amended, Section 43-35-560.	State	Statute	Designates the department as a member of the Vulnerable Adult Fatality Review Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 44-107-80.	State	Statute	Upon request, requires DAODAS to provide technical assistance to a state agency to assist in implementing the state Drug Free Workplace Act.	Requires a service		No Change
South Carolina Code of Laws, 1976, as amended, Section 44-53-490.	State	Statute	Requires the Department of Health and Environmental Control to submit an annual report to DAODAS on inspected practitioners who dispense or distribute controlled substances.	Requires a service		No Change
South Carolina Code of Laws, 1976, as amended, Section 59-1-380(D)	State	Statute	Requires the Department to work with DHEC and the Department of Education to develop tobacco exclusion policies for all school districts.	Requires a service	The report has not been provided to DAODAS.	No Change
South Carolina Code of Laws, 1976, as amended, Section 61-4-1515(A)(8).	State	Statute	Requires breweries and micro-distilleries to go through a DAODAS approved merchant education program to train employees who serve beer or wine for on-premise consumption.	Requires a service	The department contracts with local SUD providers to provide this prevention program.	No Change
South Carolina Code of Laws, 1976, as amended, Section 61-6-480.	State	Statute	Requires merchant education certified through the department for vendors who violate underage drinking laws.	Requires a service	DAODAS provides merchant education through its local substance use disorder providers.	No Change

Law number	Jurisdiction	Type	Description	Purpose the law serves:	Notes:	Changes made during FY2023
South Carolina Code of Laws, 1976, as amended, Section 63-11-1930.	State	Statute	Designates the department as a member of the State Child Fatality Advisory Committee.	Board, commission, or committee on which someone from our agency must/may serve		No Change
South Carolina Code of Laws, 1976, as amended, Section 63-7-1690 (A)(1).	State	Statute	Allows a court of competent jurisdiction to order DAODAS approved treatment services before the return of a child to a home, if the child has been removed by DSS.	Requires a service	Local Substance use Disorder agencies provide treatment services.	No Change
US Public Law 102-321	Federal	Statute	Establishes the federal Substance Abuse Prevention and Treatment Block Grant with administration requirements.	Distribute funding to another entity		No Change
US Public Law 91-616 of 1970.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change
US Public Law 92-255 of 1972.	Federal	Statute	Directs that the department is the single state authority for the delivery of the Substance Abuse Prevention and Treatment Block Grant.	Requires a service	Substance Use Disorder Services.	No Change

2023

Services Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Description of Service	Description of Direct Customer	Customer Name	Others Impacted by Service	Division or major organizational unit providing the service.	Description of division or major organizational unit providing the service.	Primary negative impact if service not provided.	Changes made to services during FY 2023	Summary of changes to services
Ensuring the balance of alcohol prevention, intervention, treatment and recovery services are contracted to public or private providers with an emphasis on the local SUD providers for direct delivery.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Ensuring the balance of alcohol prevention, intervention, treatment and recovery services are contracted to private providers with an emphasis on the local SUD providers for direct delivery.	Finance	Should the agency not reach its goals of delivering efficient and effective prevention, intervention, treatment, and recovery services, or should it fall short in meeting the opioid crisis head-on, the negative impact on the citizens of South Carolina would include an increase in overall mortality, increased healthcare costs, and a rise in addiction that would impact the workforce and the economic engine of the state, and ultimately the quality of life of all South Carolinians.	Amend	The agency contracted with hospitals for screening, brief intervention and referral to local alcohol and drug providers, as well as contracting with certain hospitals to induct opioid substance use disorder clients into medication assisted treatment. Additionally, the agency expanded its partnerships with recovery community organizations, opioid treatment programs and community distributors.
Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Programs	Collateral impacts would include a rise in underage drinking and alcohol-related crashes, shortened life spans, and increased comorbidities in chronic disease.	Amend	The agency provided additional TA to OTPs through a contract with Medicaid and formally acts as the State SOTA. Additionally, the agency added to its arsenal of MAT programs the use of sublocade.
Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides TA and Policy guidance to guide innovative SUD programming throughout the SUD System.	Compliance	See explanation above.	No Change	
Provides guidance on IT issues and HIPPA compliance regulations.	Local Alcohol and Drug Abuse Authorities pursuant to Title 61, Chapter 12. Opioid Treatment Providers. Community Distributors. Recovering Community Organizations.	Contracted Providers	General Public	Provides guidance on IT issues and HIPPA compliance regulations.	Information Technology	See explanation above.	No Change	
Distribution of Fentanyl Strips	Persons using legal or illegal opioids.s	Individuals using legal or illegal opioids.	Family, Caregivers, Front Line Responders, Emergency Room Personnel, Hospitals.	Prevention Department, DAODAS	Preventing the use of alcohol, tobacco and other drugs.	Possibility of Overdose or Death of the individual using illicit or prescribed drugs.	No Change	MAT drug courts in another judicial circuit.
Drug Courts	Persons charged with non-violent crimes.	Individuals who undergo treatment to forego a jail or prison sentence.	Family, Law Enforcement, Courts, Jails and Prisons	Compliance and Treatment Divisions, DAODAS	Ensuring adherence to grants and contracts. Treating substance use disorder.	Increase the possibility of an individual going to jail or prison.	No Change	
Rapid Response Opioid Notifications	Communities who are experiencing high overdose rates.	The 46 Counties of South Carolina	Family, Caregivers, Front Line Responders, Emergency Room Personnel, Hospitals, Mortuaries	Administration, DAODAS	Sets the agency policy and programmatic direction.	Possibility of Overdose or Death of individuals who use legal or illicit opioids..	No Change	
Fetal Alcohol Syndrome Disorder Prevention	Pregnant Women who have substance use disorder diagnoses.	Pregnant Women who have substance use disorder diagnoses.	Family, Mothers, Law Enforcement, Medical Personnel, Hospitals	Treatment Division / Administration, DAODAS	Treats individuals that have substance use disorders.	Increases the possibility that babies may be born with fetal alcohol syndrome.	Amend	Expanded programmatic and partnerships.
Veterans Services	Service Veterans	Veterans who are suffering from substance use or co-occurring diagnoses	Family, Social Services, Medical Service Personnel	Treatment Division, DAODAS	Treats individuals that have substance use disorders.	Increases the possibility that veterans will not have access to substance use disorder services.	No Change	
Housing Services	Individuals seeking housing in certified homes.	Individuals leaving inpatient facilities to continue treatment in the community	Homeless, Families, Oxford Houses, Sober Homes	Compliance	Ensures contracts are implemented with corresponding outcomes reported.	increases the possibility that individuals continue on the road to recovery and increases their use of community recovery capital.	Add	Expanded programmatic and partnerships.

Description of Service	Description of Direct Customer	Customer Name	Others Impacted by Service	Division or major organizational unit providing the service.	Description of division or major organizational unit providing the service.	Primary negative impact if service not provided.	Changes made to services during FY 2023	Summary of changes to services
Expanded Collegiate Recovery Programs	Students on college campuses who are seeking a recovery environment at higher learning institutions.	Colleges and Universities	Students, Families, Recovery Organizations	Compliance and Treatment Divisions, DAODAS	See Explanation Above	Increases the possibilities of students at colleges and Universities who are seeking recovery environments and recovery communities.	Add	Expanded programmatic and partnerships.

2023

Partnerships Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Private Business Organization	3 Hospitals	Provides medical care to opioid involved patients.	No Change
Federal Government	Atlanta Carolinas High Intensity Drug Trafficking Area	Identifies areas of the death with high drug trafficking areas and opioid hot spots	No Change
Federal Government	Atlanta- Carolinas High Intensity Drug Trafficking Area	Works with the Opioid Emergency Response Team to ID high drug trafficking areas and opioid hot spots in South Carolina.	No Change
State Government	Birth Outcomes Initiative (BOI)	Development of policy to reduce adverse birth outcomes.	No Change
Higher Education Institute	Colleges and Universities	DAODAS is partnering with colleges and universities to develop recovery environments on college campuses in South Carolina.	No Change
State Government	DAODAS Staff	Integral to achieving agency vision, mission and goals.	No Change
State Government	Department of Probation, Parole and Pardon (PPP)	DAODAS is partnering with the agency to provide alcohol and substance abuse training to agents employee at PPP	No Change
State Government	Department of Veterans' Affairs	DAODAS is partnering with Veterans Affairs to disseminate the Heritage Solutions Substance Misuse Program to veterans and their families. The program focuses on motivational interviewing techniques, positive psychology and harm reduction principles.	No Change
State Government	DHEC	Major Health Partner / Opioid Emphasis	No Change
State Government	DMH	Major Client Partner / Policy Development	No Change
State Government	DSS	Major Client Partner	No Change
Non-Governmental Organization	First Responders (EMS / Police / Fireman)	Provides health care services, first on the scene to address opioid emergencies.	No Change

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
State Government	Governor's Office	Provides Leadership / Cabinet Agency	No Change
State Government	Healthy Outcomes Program	Targeting chronic disease among Medicaid recipients.	No Change
State Government	LLR	Works closely with the agency to ensure that regulations governing the distribution of certain scheduled drugs is compliant with state law and medical protocols.	No Change
Local Government	Local SUD Providers / Behavioral Health Association of South Carolina (BHSA)	Delivers direct SUD services to individuals, families and communities.	No Change
State Government	Medicaid (DHHS)	Major Payor of SUD Services / Policy Development	No Change
Non-Governmental Organization	Mothers Against Drug Drivers (MADD)	Works to decrease DUIs.	No Change
Higher Education Institute	MUSC	Assists the agency in providing services to train physicians in the art of prescribing MAT medicines and connecting these physicians to opioid treatment providers, plus provide ongoing training and evaluation.	No Change
Professional Association	National Alliance for Recovery Residences	DAODAS is working with NARR, and its local affiliate, to expand the availability of well-operated, ethical and supportive housing across the state and is currently performing a gap analysis in the state build a more true picture of how many exist in South Carolina.	No Change
Non-Governmental Organization	National Association of State Alcohol and Drug Abuse Directors	National Substance Abuse Policy Organization	No Change
Private Business Organization	Opioid Treatment Providers	Provides Medication Assisted Treatment (Methadone) to opiate addicted individuals	No Change
Non-Governmental Organization	Oxford House, Inc.	Agency Partner to increase recovery housing options throughout South Carolina.	No Change
Non-Governmental Organization	Pacific Institute for Research and Evaluation (PIRE)	Assists in the development, implementation and evaluation of prevention programs across South Carolina.	No Change

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Professional Association	Primary and Emergency Room Physicians	Identifying SUD Patients	No Change
Non-Governmental Organization	Recovery Community Organizations	DAODAS has partnered to expand recovery efforts statewide.	No Change
Non-Governmental Organization	Roper St. Francis / Prisma / MUSC	Engaged with 3 hospitals to induct opioid addicted clients within their inpatient units to medication assisted treatment (MAT)	No Change
Professional Association	Rural Health Community Opioid Consortia	DAODAS has partnered to address access to MAT in rural areas.	No Change
Federal Government	SAMHSA	Federal Block Grant Authority	No Change
Non-Governmental Organization	SC Hospital Association	To support its member hospitals in creating a world-class health care delivery system for the people of South Carolina by fostering high quality patient care and serving as effective advocates for the hospital community.	No Change
State Government	SC Joint Council on Children and Adolescents	Develop a coordinated system of care that promotes the efficient provision of effective services for children, adolescents, and their families.	No Change
State Government	SCDC	Major Client Partner	No Change
State Government	SLED	Works closely with SLED as co-chair of the State Opioid Emergency Crisis Team as well as the rapid response team to identify emergent high use opioid use in those areas of the state with sudden high overdose rates.	No Change
Local Government	Solicitors	DAODAS is partnering with local solicitors to implement MAT Drug Courts.	No Change
Professional Association	South Carolina Alliance for Recovery Communities	DAODAS is working with the state affiliate focused on bringing standards, credibility, ethics and education to the state's recovering communities.	No Change
Non-Governmental Organization	South Carolina Behavioral Health Care Coalition	Implement a multi-sector coalition to improve the availability and access to mental health and/or substance use disorders services for all South Carolina residents.	No Change

Type of Partner Entity	Name of Partner Entity	Description of Partnership	Change to the partnership during the past fiscal year
Professional Association	South Carolina Favor	Provides Peer Support training across the state, while also providing peer support recovery services to the citizens of the upstate of South Carolina.	No Change
State Government	South Carolina General Assembly	Appropriates funding for SUD Services.	No Change
State Government	South Carolina Opioid Response Team	Governor McMaster established a task force which has developed a multi-lateral strategy to prevent and treat the misuse of prescription opioids.	No Change
State Government	South Carolina Tobacco Collaborative	The Collaborative seeks to eliminate the burden of tobacco use through policy development, advocacy work, education, coalition building and promotes tobacco prevention and tobacco cessation efforts on the state and local level	No Change
State Government	Department of Commerce	Began funding a housing program for individuals in need of housing.	Add

2023

Reports Data

as submitted for the Accountability Report by:

J200 - Department Of Alcohol & Other Drug Abuse Services

Report Name	Law Number (if applicable)	Summary of information requested in the report	Date of most recent submission DURING the past fiscal year	Reporting Frequency	Type of entity/entities	Method to access the report	Direct access hyperlink or agency contact (if not provided to LSA for posting online)	Changes to this report during the past fiscal year	Explanation why a report wasn't submitted
Agency Accountability Report	Section 1-1-810	The report "must contain the agency's or department's mission, objectives to accomplish the mission, and performance measures that show the degree to which objectives are being met." Agencies must "identify key program area descriptions and expenditures and link these to key financial and performance results measures."	September-22	Annually	Governor or Lt. Governor AND Legislative entity or entities	Provided to LSA for posting online	sldutton@daodas.sc.gov	No Change	Report Submitted.
Agreed-Upon Procedures (AUP)	Section 11-17-20(A)	A Review of various Accounting, Reporting, Contractual and Human Resources Functions	June-23	Annually	South Carolina state agency or agencies	Available on another website	sldutton@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	December-22	Annually	Entity within federal government	Available on another website	sldutton@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	March-23	Quarterly	Entity within federal government	Available on another website	sldutton@daodas.sc.gov	No Change	Report Submitted.
Federal Financial Report	Federal Law 2CFR Section 200.328-332	Required Financial Reporting for various Federal Grants	March-23	Twice a year	Entity within federal government	Available on another website	sldutton@daodas.sc.gov	No Change	Report Submitted.
Governance, Risk and Compliance Review	Incorporated by CCEIS Policy, April 2017.	Efforts to Update Mitigation Controls with the Accounting and Reporting Sections of the Agency	April-23	Annually	South Carolina state agency or agencies	Electronic file available upon request	sldutton@daodas.sc.gov	No Change	Report Submitted.
Petty Cash Review	Section 11-7-20(B)	Review of Procedures and Reconciliations	June-23	Twice a year	South Carolina state agency or agencies	Electronic file available upon request	sldutton@daodas.sc.gov	No Change	Report Submitted.
Substance Abuse Block Grant Application and Report	US Public Law 102-321	State Plan for the Expenditure of Federal Funding	October-22	Annually	Entity within federal government	Available on another website	sldutton@daodas.sc.gov	No Change	Report Submitted.
Substance Abuse Block Grant Statewide Single Audit	1945(g) of Title XIX, Part B, Subpart III of Public Health Services Act (42USC 300x-56(g))	Review of Block Grant FFY2023 -Substance Abuse and Mental Health	August-23	Other	South Carolina state agency or agencies	Available on another website	sldutton@daodas.sc.gov	No Change	Report Submitted.
Legislative Audit Council	Requested by House Ways and Means Health Subcommittee	The report focused on the agency's opioid service efforts, Covid-19 response, its involvement with the local alcohol and drug authorities, Gambling Addiction Services, Carry Forward Funding and a review of staffing levels.	August-22	Other	Legislative entity or entities AND South Carolina state agency or agencies	Electronic copy available upon request	sldutton@daodas.sc.gov	Add	Report Submitted.

AGENCY NAME:	South Carolina Department of Alcohol and Other Drug Abuse Services		
AGENCY CODE:	J200	SECTION:	037

2023
Accountability Report

SUBMISSION FORM

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

- Data Template
 - Reorganization and Compliance
 - FY2023 Strategic Plan Results
 - FY2024 Strategic Plan Development
 - Legal
 - Services
 - Partnerships
 - Report or Review
 - Budget
- Discussion Template
- Organizational Template

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

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

AGENCY DIRECTOR <i>(SIGN AND DATE):</i>	SIGNATURE ON FILE	Signature Received: 9/14/2023 3:14 PM
<i>(TYPE/PRINT NAME):</i>	Sara Goldsby	

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