The October 27 Alliance meeting left us with 3 specific requests to improve health and healthcare for all in South Carolina.

It is Collective Impact time!

Let’s work together to make these happen. We’ll track progress at our January 26 meeting.

- Institute at least one drop-box for unused prescription drugs per county
- Establish a crisis stabilization unit in Charleston and evaluate results to potentially expand in other regions of the state
- Support the expansion of training for physicians, nurse practitioners and physician assistants in community settings

How can you help?

3 Gives. 3 Asks. 3 months before our next meeting. Let's make it happen!
November 13, 2015 Update

The October 27th Alliance meeting left us with 3 specific requests to improve health and healthcare for all in South Carolina. It is Alignment time! Let’s work together to make it happen.

1. According to the Governor’s Prescription Drug Abuse Prevention Council, only 14 counties in our state have a permanent drop-off site for unused prescription drugs. Overuse of opioids causes overdoses and deaths every day, and inappropriate disposal of medications is harmful to the environment (infographic here).
   - **We need one permanent drop-box per county!**
   - If you have a pharmacy, or can work with a pharmacy to make this happen, [this 1-pager](#) describes the process. You can also get in touch with Sara Goldsby at DAODAS (SGoldsby@daodas.sc.gov). If needed, DAODAS may provide financial support to establish at least one permanent drop-box per county.

2. A Crisis Stabilization Unit can help many individuals in a behavioral health crisis recover in a safe environment, with intensive services by experienced staff, linkage to needed aftercare, and at a substantially lower cost than a referral to a hospital emergency department.
   - If you have the ability to help fund and/or promote the establishment of a Crisis Stabilization Unit, get in touch with Geoff Mason, Deputy Director, Division of Community Mental Health Services, South Carolina Department of Mental Health; Geoffrey Mason GJM45@SCDMH.ORG
   - Based on the evaluation of the pilot, DMH will potentially start conversations about expansion of the model into other regions of the state.

3. Georgia passed legislation in 2014 with broad-based support that provides tax incentives to community-based physicians who teach health professions students in their practices.
   - Academic programs in South Carolina are working together and are seeking supporters to pass legislation in 2016 that will provide tax credits to community-based physicians as well as to advanced practice nurses and physician assistants who teach students in their practices. [See here a 2-page document](#) that conveys the importance of this legislation.
   - Please contact David Garr, MD, the Executive Director of the South Carolina AHEC, at garrdr@musc.edu if your organization is willing to join the coalition being formed to support the passage of this legislation.
   - Contact agallego@scha.org if you have become a teaching site (or would be willing to become a teaching site) because of the benefits it has in recruitment and retention of providers (or other benefits!).

_for additional information contact agallego@scha.org_