

**SOUTH CAROLINA OFFICE OF MENTAL HEALTH
COASTAL EMPIRE COMMUNITY MENTAL HEALTH CENTER
BOD MINUTES
6/18/2026**

Board of Director Meeting Attendance:

NAME	Position	PRESENT	EXCUSED	ABSENT
Deborah Blalock	Deputy Director		X	
Melanie Gambrell	Assistant Deputy Director		X	
Erin Laughter	Program Manager II	X		
Angie Salley	Executive Director	X		
Jennifer Cobb-Hayes	Director of Administration	X		
Brittany Sauerborn	Medical Chief		X	
Yokina Williams	Clinic Director		X	
Omega Smalls-Frances	Clinic Director		X	
Narlea Scott	Clinic Director	X		
Karen Williams	Clinic Director		X	
Nina Bilder	Nurse Manager		X	
Touray Beaton	Mobile Crisis Supervisor	X		
Tiffany Swinton	Executive Admin Assistant	X		
Dr. Tom Miller	Board Member	X		
Genora Kennedy	Board Member	X-V		
Henry Hiott	Board Member	X-V		
Korey Williams	Board Member			X
LeeAnne Smith	Board Member	X-V		
Linus Wright	Board Member	X		

TOPIC	DETAILS/ACTIONS
Welcome	- The following are notes taken from the Board of Directors meeting. It does not detail all the intricate discussions but is intended to give an overview and action items from the Meeting. - The Board Chair called the meeting into order and provided a brief description of the agenda items. - Chairman Hiott moved to approve minutes. Minutes approved by vote. A quorum of 5.
	Meeting Agenda and Chronological Discussion Call to Order and Public Comments - No members of the public present; opportunity provided for comments. Presentation Spotlight: Budget Update (reports displayed on screen: - Presenter: Jennifer Cobb Hayes, Director of Administration.

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- Discussion of OMH state allocation: 7% decline in draw from last year, but actual funding received during the year was higher than originally allocated.
- FY26 allocation: \$165,000; actual expenditures: ~\$550,000.
- Staffing: Down 15 staff from last year, impacting projections for next year.
- Housing and crisis funding remained stable; funds support Highway to Hope, clinician, and engagement specialist positions.
- OIDD position funded at \$89,000, likely a one-time expense.
- Revenue streams: Medicaid, private insurance (\$500,000 annually), self-pay (\$200,000 annually), and contracts (including mobile crisis).
- Noted a 30% clawback on \$3M revenue by DHHS and OMH.
- Total annual revenue: ~\$9M (excluding \$1.2M in grant funding).
- Grant funds used to pay contract doctors and embedded law enforcement.
- Payroll: Down 20% in employees, but payroll costs were up 20% over last year due to contract/temporary staffing.
- OPS (retirement payouts, dual employment): Lower due to no bonuses.
- Contract personnel: 4 contractors (2 APRNs, 2 doctors) currently; contract services increased due to renovations and maintenance projects (e.g., HVAC contract: \$37,000).
- IT budget: Large expense for Microsoft licenses (\$50,000), VPN, and laptops (cycle: 25/year, 40 purchased this year).
- Fixed charges: Vehicle insurance reduced by \$25,000.
- Surplus: Generated a surplus of ~\$80,000 for the year.

3. Clinical Update

- Presenter: Touray Beaton – Interim Chief of Clinical Ops.
- Emphasis on “back to basics” for clinical documentation and service delivery (collaborative documentation, same/next day completion, safety plans for all patients, suicide screening, daily living activity metrics).
- Peer Support Specialist hired: Ayanna Mungin (started May, training for certification, will serve all clinics).
- Engagement specialist hired to re-engage patients not seen for a period (45 days).

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- Highway to Hope program continues; RV in the shop but services delivered in alternative spaces.
- Referrals increasing for Individual Placement and Support (IPS) employment program: 11 new referrals since May 17.
- New streamlined IPS referral process implemented.
- Weekly meetings with vocational rehabilitation and employers to facilitate employment and tax credits for hiring clients with disabilities.

4. Administrator's Report

- Presenter: Jennifer Cobb Hayes
- Revenue lag due to billing delays (half of April's revenue outstanding as of meeting date; May billing was anticipated by June 15).
- Payroll for last year: \$5.3M; retirement payouts for Dr. Bishop, Andrea, and Frances (exact amount unclear but included in \$600,000 slush fund for contingencies).
- \$705,000 spent directly supporting patients this year.
- Balancing act between adding clinical positions (increases revenue) and onboarding delays (90 days to full productivity).
- Strategic hiring improved; delays persist due to onboarding time and system changes (Avatar EHR).
- Recent budget presentation received no corrective actions from the new CFO of BHDD.
- Infrastructure improvements: New phones and PA system installed for safety and communication.
- Technical issues with phone system being monitored and resolved.

5. Medical Director's Report

- Delivered by Angie Salley, Executive Director (on behalf of Dr. Sauerborn, on vacation).
- Dr. Sauerborn will provide quarterly reports instead of monthly attendance.
- Recruitment ongoing for Dr. Bishop's vacated Hilton Head position; several contract companies engaged, but onboarding delayed.
- Full-time APRN nurse position being posted; potential candidate identified in Colleton County.
- Noted need for on-site psychiatrists to meet Medicare face-to-face requirements.

6. Executive Director's Report

- Presenter: Angie Salley, Executive Director

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	○ Ongoing systemwide changes: Avatar EHR rollout, Columbia centralization, agency restructuring. ○ Staff anxiety regarding finance reporting lines; shift from direct administrator reporting to future regional finance director (Low Country region: Coastal Empire, Orangeburg, Charleston, Dorchester, Berkeley). ○ Clinic staffing changes: Approvals received to post for Frances Moody (Chief of Clinical Ops.) and Andrea Miley's (Colleton Clinic Director) positions; interviews scheduled. ○ Clinic leadership realignments: Lindsay Davies to Hilton Head, Narlea Scott to supervise both adult and child/adolescent teams; staff transitions to support retention. ○ New hires: One starting July (mobile crisis team), another pending for Beaufort adult staff. ○ Compliance update: Board met quorum for compliance for at least 2–3 years; recent second quarter FY26 audit score 86% (expectation 90%). ○ Focus on improving clinical documentation and QA processes (progress summaries, plans of care, daily living assessments). ○ Successful Beaufort Sequential Intercept Mapping (SIM) session (May 5–6, more than 30 participants, 3 workgroup priorities identified). ○ Criminal Justice Council for Beaufort County to launch July 29; work underway with hospitals, probate court, and solicitor's office to improve mental health and justice system coordination. ○ Compliance concerns with Avatar EHR reporting; new patient care hour tracker implemented. ○ Peer support and patient advisory committee revitalization underway; Ayanna Mungin to be certified and engaged. ○ Staff recognitions: Colleton County school-based team honored by school board; mobile mental health team (Touray Beaton, Janet Spence, Yokina Williams, Angie Salley) recognized by USC Salkehatchie- received USC Salk Community Award on May 1. ○ Collaboration with schools and community partners expanding (interest from Magill interns, increased Allendale service numbers).
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- Continuing contract delays (school districts, law enforcement, changes to templates/renewals, insurance requirements); legal review of indemnification clauses ongoing.

7. Deputy Director's Report

- Presenter: Erin Laughter, Program Manager II
- New acting director for the agency: Dr. Kimberly Rudd (psychiatrist, interim).
- No permanent agency director expected until after the election.
- New Communications Director: Beth Moore; rebranding initiative underway (1-year timeline).
- Internal/external communications to be centralized under BHDD; staff survey distributed for feedback.
- Hiring and contract delays persist due to Department of Administration and Governor's Office processes; recent staff turnover at both state office and center levels.
- IT director position offered, then declined; reposting underway.
- State audit/QA director position posted.
- Ongoing EHR (Avatar) challenges affecting internal/external reporting.

8. Old Business

- No unresolved old business reported.

9. New Business

- No new items were added.

10. Approvals and Decisions

- Motion made and seconded to approve April meeting minutes; approved by board vote.
- Reminder: No meeting in July; next meeting scheduled for August 20, 2026.

11. Announcements and Upcoming Events

- Closure of Colleton HCA Lowcountry Transitions 17-bed inpatient psychiatric unit in Walterboro; clients encouraged to access services at Live Oak Psychiatric Crisis Stabilization Unit, Ladson, SC (24 beds added).
- Mitch Mungell named acting CEO of HCA Colleton; transition in hospital leadership ongoing.
- Next board meeting: August 20, 2026.

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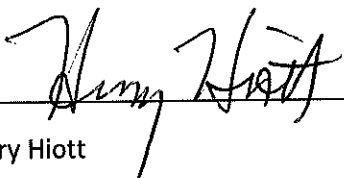
	• Compliance presentation by Nicki Nichols scheduled for August meeting. • Criminal Justice Council initial meeting: July 29, 2026. • Ongoing contract negotiations with school districts and law enforcement agencies. 12. Closing Remarks and Adjournment • Recognition of board and staff efforts, with encouragement to maintain focus on patient care and community service. • Adjournment time: 7:15PM
	Action Items & Follow-Up • Post and fill clinical leadership positions: Responsible – Administration; Interviews scheduled, target hires July 2026 • Continue recruitment for psychiatrist (Hilton Head) and APRN nurse: Responsible – Administration/Medical Director; ongoing • Complete Ayanna Mungin peer support specialist certification: Responsible – Administration/Training; July 2026 • Finalize patient care hour tracker rollout and staff training: Responsible – IT/Admin; immediate • Resolve contract negotiations with school districts and law enforcement: Responsible – Administration/Legal; ongoing • Prepare compliance audit presentation for August meeting: Responsible – Nicki Nichols • Continue follow-up on community criminal justice council development: Responsible – Angie Salley, Omega, Touray Beaton, Judge Haley Finneran; July 29 launch • Address EHR documentation/QA issues and provide ongoing staff support: Responsible – QA/IT/Admin; ongoing • Monitor and address staff onboarding and hiring delays: Responsible – Administration/HR; ongoing • Maintain board quorum for compliance: Responsible – Board members/Chair; ongoing
	Unresolved Concerns & Follow-Up • Ongoing delays in contract approvals and state hiring processes

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	• Indemnification clause and insurance requirements stalling school district contracts • Continued staff turnover and onboarding delays • Avatar EHR reporting/data reliability issues • Psychiatrist and APRN vacancies
Additional Remarks / Topics	• No BOD for July 2026 – BOD reconvenes on August 20, 2026
Henry Hiott, Chairman of Board	•

Scribe for Today's Meeting: Tiffany Swinton

Scribe for August 20, 2026:


Henry Hiott

CECMHC Board of Directors Chairman

Angie B. Salley Digitally signed by Angie B. Salley
Date: 2026.06.23 12:23:26 -04'00'

Angie B. Salley

CECMHC Executive Director