

South Carolina Center of Excellence in Addiction Strategic Plan, 2024-25

Introduction

The South Carolina Center of Excellence in Addiction (the Center) is a collaboration of three state research universities – Clemson University, the Medical University of South Carolina (MUSC), the University of South Carolina (USC) – and two state agencies – the Department of Alcohol and Other Drug Abuse Services (DAODAS) and the Department of Public Health (DPH). These institutions came together in 2023 to support South Carolina’s localities and other organizations in navigating opioid and addiction resources, including, but not exclusively, opioid abatement funds awarded to the state through legal settlements. As new abatement settlements and potentially, other addiction-related funding sources like federal grants and foundation opportunities, come into the state, the Center is poised to provide South Carolina-based support for local leaders and organizations as they seek to ensure that they are maximizing every dollar in a way that suits their needs.

Leaders from the five entities that compose the Center form a Leadership Team, which is augmented by a small Steering Committee of colleagues and experts from their institutions. This group meets weekly to discuss Center priorities and opportunities. The Center has also sought the expertise of an external group of individuals representing South Carolina’s providers, payers, state agencies, law enforcement, and people with lived experience as an Advisory Board. The Board meets bi-annually to provide guidance and feedback to the Center as it progresses from establishment to ongoing operations and sustainability.

The Center is structured around five major core areas, designed to function cooperatively to carry out the objectives outlined in this strategic plan. This organization allows for the leveraging of institutional strengths while ensuring coordinated execution of key strategies to advance best practices and innovation in substance use disorder (SUD) and opioid use disorder (OUD) for South Carolina.

- The **Data Analytics Core** uses statewide data from South Carolina’s Integrated Data System to inform timely, targeted, and data-driven clinical, educational, programmatic, and policy interventions.

- The **Technical Assistance (TA) Core** provides direct support to county and municipal leaders and partnering organizations for successful, sustainable, and evidence-based implementation projects aligned to the core strategies.
- The **Training Core** delivers evidence-based OUD prevention and treatment education to maximize spread of best practices as counties and municipalities engage in the core strategies.
- The **Implementation Core** will capitalize on the broad state-academic collaboration created by the Center by efficiently developing and replicating successful implementation projects using innovative approaches to reach unserved and underserved areas of the state beginning in year 2.
- The **Administrative Core** anchors this work, providing cross-institutional leadership and oversight for the Center as a unified entity that includes DAODAS, DHEC, USC, MUSC, and Clemson.

Strategic Leadership

The South Carolina Center of Excellence Leadership Team is composed of leaders from each of the Center's five collaborating institutions: Christina Andrews, PhD, from USC; Kathleen Brady, MD, PhD, from MUSC; Alain Litwin, MD, MPH from Clemson University; as well as Sara Goldsby, MSW, MPH, Director of DAODAS, and Ed Simmer, MD, MPH, DFAPA, Director of SC DPH. The Leadership Team is headed by the Center's Director, Jodi Manz, MSW.

The Center has also established a Steering Committee to guide its work and provide direction. The Steering Committee is composed of the members of the Leadership Team as well as several colleagues and team members from their institutions. This includes Laura Bogardus, PhD, Claire Stam, PhD, and Heidi Zinzow, PhD, from Clemson; Louise Haynes, MSW, Carrie Papa, MBA, and Angie Moreland, PhD from MUSC; and Banky Olatosi, PhD, and Maria McClam, PhD, from USC. Additionally, the Steering Committee has an evaluator employed by DHEC, Jillian Wilks-Catoe, MPH. The Steering Committee meets weekly with the Center's Director to ensure continuous communication and collaboration across organizations.

The 26-member Advisory Board is a made up of a diverse, multi-disciplinary group of South Carolina leaders and stakeholders. This includes policymakers, recovery community organizations, people with lived experience, law enforcement and judicial representatives, provider organizations, treatment leaders, and statewide organizations and professional associations. This group helped to provide initial direction for the Steering Committee and Leadership Team in the development of a strategic plan, and their input on innovation, growth, and sustainability of the Center will continue to be sought at regular intervals.

Strategic Components

The Center's Advisory Board, Steering Committee, and Leadership Team all contributed to the development of the strategic components of this 2-year plan. As a new entity in the state, the input of these groups was critical to clearly articulating how the Center defines, and will achieve, its goals. These components are foundational elements to Center establishment and continued growth.

Vision

The vision of the Center of Excellence in Addiction is that all South Carolinians live free from the harms of addiction.

Mission

The mission of the Center of Excellence in Addiction is to maximize South Carolina's opioid and addiction knowledge and resources through community engagement, collaboration, and research.

Purpose

The Center of Excellence in Addiction was established to improve outcomes for South Carolinians with opioid and other substance use disorders, including alcohol and stimulant use disorders, by using evidence-based strategies, data-driven solutions, and targeted responses to the evolving overdose crisis.

Guiding Principles

The Center of Excellence in Addiction has established a set of principles to guide the implementation of this strategic plan. These include commitment to:

- Evidence-basis. We leverage approaches that are rooted in research and data.
- Recovery and resilience. We promote supports that foster sustainable recovery.
- Trauma-informed lenses. We recognize that trauma is a unique and relevant factor that must be considered in all strategies at both individual and systemic levels.
- Fiscal responsibility. We are accountable stewards of dollars intended to reduce the impact of addiction.
- Respect. We meet localities where they are.
- Collaboration and inclusion. We value the expertise of all partners and rely on one another to advance best practices.
- Transparency. We act with open intent and have the courage to redirect when necessary.
- Integrity. We prioritize the individuals, families, and communities of South Carolina that are impacted by addiction overall.

Center Goals & Objectives

The goals and objectives that frame this 2-year plan result from intense discussion of Center priorities resulting from a facilitated analysis of existing strengths, weaknesses, opportunities, and threats in South Carolina's OUD/SUD landscape, as well as the Center's role in addressing those. The Advisory Board, Steering Committee, and Leadership Team collaboratively identified opportunities for the Center to use the work of its cores to achieve these goals. Metrics assigned to each goal will be reported bi-annually, and additional qualitative measures will be captured from each Core of the Center.

Goal 1: Create innovative approaches to addressing SUD/ODU in South Carolina through research and evidence.

As the OUD/SUD overdose crises continue to take the lives of South Carolinians, new or expanded approaches to prevention, treatment, and recovery are needed. The Center's research universities have capacity to study and foster innovative interventions, and the accessibility of the Center's state agency partners helps to position the Center as a vehicle to make those innovations readily accessible to community leaders. The Center is also poised to share its expertise more broadly, effectively serving as a technical assistance advisor to policymakers, researchers, and state leaders as they consider new paths forward for South Carolina. This is inclusive of innovations in prevention, treatment delivery and integrated care, and harm reduction, but also data infrastructure, inventorying, and interoperability (for which OUD/SUD presents a use case opportunity) as well as payment structures and quality measures to contribute to cost effectiveness.

Objective 1.1: To foster the implementation of new, scalable, evidence-based interventions, the Center will collaboratively develop at least one demonstration project beginning in year 2. This project will consider emerging research and opportunities to measure return on investment for interventions and will remain in alignment with the approved core strategies.

Metric: metrics will measure efficacy in alignment with the designated project

Objective 1.2: To share innovations and successful approaches to reducing the harms of addiction in South Carolina, the Center will plan and host conferences in its first and second years to offer education and connection with South Carolina-based OUD/SUD research and programs that have proven outcomes.

Metrics: number of conference attendees, number of attendees by professional backgrounds, description of session topics

Goal 2: Increase knowledge of opioid abatement and OUD/SUD mitigation strategies among South Carolina's county and municipal leaders and their partners.

The Center serves as a collective entity to support localities as they implement opioid abatement and other addiction mitigation-related strategies; primarily, this speaks to projects funded by opioid abatement dollars as approved by the South Carolina Opioid Recovery Fund (SCORF) Board but could also include initiatives funded through grants, foundations, or other public dollars, or those that are supported by braided funding through both abatement and other funds. As many municipal and county leaders do not have extensive experience in best practices for addressing OUD/SUD – a topic that has not previously been central to the work of local governance – the Center provides expert guidance to help them identify and implement programs successfully. The Center is aligning to the set of evidence-based core strategies identified and approved by the SCORF Board as a framework for these efforts.

Objective 2.1: To develop and increase familiarity with core strategies to mitigate the impacts of SUD/OUD on communities, the Center will provide dedicated bi-weekly ECHO educational opportunities for local decision makers and their partners.

Metrics: number of ECHO participants by session, number of ECHO participants by county/region, participant evaluation surveys

Objective 2.2: To develop and increase capacity to implement core strategies, the Center will provide on-demand technical assistance to local decision makers, their partners, and other South Carolina entities seeking support for planning, budgeting, data management, reporting, and other components of strategy implementation. Technical assistance will be available upon request via a simple online form, phone call, or email.

Metrics: number of unique technical assistance engagements, number of strategies addressed through technical assistance engagements

Objective 2.3: To develop capacity to understand the impact of strategy implementation, the Center will provide technical assistance on data management and reporting, including the development of data dashboards, contributing to our overall understanding of return on investment and how to best target resources, workforce development efforts, and policy efforts over time.

Metrics: number of technical assistance engagements on data management, number of data dashboards produced with technical assistance recipients (year 2 measure)

Objective 2.4: To establish access to ongoing learning support tools, the Center will produce and disseminate core strategy-specific learning resources, including South Carolina-specific webinars, dashboards, and toolkits and/or briefs. These tools, along with research authored by Center partners, will be made publicly available in a resource repository on the Center’s website for health care providers, local and state policymakers, county and municipal leaders, and other prevention, treatment, and recovery leaders in South Carolina. The Center will ensure that resources are tailored to multiple audiences and include a breadth of information from the basics of addiction to advanced clinical interventions.

Metrics: number of webinars hosted, number of webinar participants, and number of resources (one-pagers/toolkits/briefs/resource documents) published to website

Goal 3: Improve access to evidence-based SUD/ODU treatment across South Carolina.

The Center will leverage the treatment and data expertise of its partnering institutions to enhance treatment system capacity in South Carolina. The most recent National Surveys on Drug Use and Health (NSDUH) [report](#) indicates that the vast majority of individuals in need of treatment in our state do not receive it. This is especially concerning amidst the “fourth wave” of ever-increasing illicit opioid potency and polysubstance use – the effects of which are apparent in South Carolina’s overdose and fatality data. Reducing barriers to treatment requires a range of action at multiple levels; in addition to providing direct educational resources that may include treatment-centric strategies including treatment for special populations, stigma reduction, mobile treatment, and other related topics, the Center will engage in efforts to support the development of a robust South Carolina treatment system in which low-barrier access is the norm.

Objective 3.1 (South Carolina decision-makers): To increase understanding of current treatment system performance and address gaps in access, the Center will analyze treatment data in South Carolina. These analyses, provided to county and regional leaders, will initially be conducted using Medicaid and uninsured treatment data sets. This process is foundational to understanding the levers to expand evidence-based treatment access and over time, will also include additional enhancements like asset mapping and data overlays to foster community-oriented interventions and referral systems.

Metric: 40 county level reports created and published to website

Objective 3.2 (for South Carolina clinicians): To enhance provider capacity to treat OUD/SUD, the Center will operate a clinician warmline available to medical and other practitioners in South Carolina. This will establish a mechanism for direct, clinician-to-clinician consults on treatment for OUD/SUD, including but not limited to inducting and prescribing medications for OUD. The warmline will additionally provide clinical consultations on related conditions, including infectious disease, and will offer guidance for connections to community-based resources.

Metrics: number of completed calls

Goal 4: Create sustainable infrastructure.

As a new entity, the Center is initially operating on funding provided through state general funds, opioid abatement funds, and private foundation funds, all of which are braided and administered through DAODAS. This funding has allowed the Center to develop internal processes, plan for ongoing management, and establish our presence as a resource to South Carolina. Establishing and maintaining an organizational structure that works for all partners is imperative to ensuring that the Center can continue delivering the right kind of support and expertise to South Carolina. The Center's collaborative nature requires that infrastructure reinforces accountability, accurate reporting, and collective decision-making both in establishment and ongoing operations.

Objective 4.1 To ensure ongoing operational capacity, the Center's Administrative Core will establish necessary contractual agreements with and among partners for all activities and supports delivered by the Center. Contracts will contain requirements for both funding disbursement and reporting and may be revised over time as necessary. This process will continue with any new funding sources, or renewals of funding sources, obtained by the Center.

Metric: number of executed contracts, rate of successful funding applications

Objective 4.2: To ensure that county and municipal leaders, community partners, and policymakers are aware of opportunities and resources to learn about strategies, the Center will operationalize communications across several platforms. This will include leveraging the Center's website to maintain up-to-date information, producing and disseminating quarterly newsletters announcing opportunities and resource publication, and actively promoting materials and events via email listservs and on social media platforms. A communications strategy will be a core component of ongoing infrastructure for the Center.

Metrics: number of newsletters, social media connections, contact email addresses, website visits to resource page, TA, and training pages, new/independent sign-ups for newsletter

Objective 4.3. To ensure ongoing operations of the Center beyond its initial years of seed funding, the Center will establish a sustainability plan. This plan will include strategies to identify and seek external funding as well as a plan to leverage the relationships established by the Center to create clear return on investment for the state of South Carolina. New funding and new partnerships will be considered based on their ability to increase value and support innovation.

Metrics: new funding resources identified, new resources applied for, new resources successfully obtained

Conclusion

This strategic plan represents a period of establishment and measured, intentional growth, for the Center. As the Center matures over its first 2 years and identifies new funding strategies, sources, and opportunities for sustainability, this plan will guide future evolution of the Center's work. The plan itself will evolve accordingly and will be treated as a living document. Pressing issues to the state, including the changing landscapes of payment and data, the emergence of new substances and illicit formulations, and workforce needs, will all contribute to how we focus and design our path forward within the framework of our goals.