

State of Connecticut
State Board of Mental Health and Addiction Services
September 16, 2020
Microsoft TEAMS Meeting

Present online: Chmn. John Hamilton, Paul Acker, Dr. J. Craig Allen, Rachel Allen, Janice Anderson, Michael Askew, William Bromage, Sharon Castelli, Michele Devine, Marcia DuFore, Dr. Duvi, Kathy Flaherty, Allison Fulton, Ingrid Gillespie, Jennifer Henry, Pam Mautte, Kevin Sevarino, Zachery Steinbach, Bridget Williamson

DMHAS Staff: Commr. Delphin-Rittmon, Yvonne Addo, Cheri Bragg, Marilyn Duran, Marlene Jacques Mary Kate Mason, Deborah Moore, Tobias Wasser

Excused: Larry Pittinger

Agenda Item 1: Call to order and introductions

The meeting was called to order at approximately 2:30 PM by John Hamilton.

Agenda Item 2: Minutes of previous meeting review and action

The minutes from the June 17, 2020 meeting were reviewed and accepted.

Agenda Item 3: Commissioner's Update

- **COVID-19** – Commr. Delphin-Rittmon reported that DMHAS is in a place where we are not seeing a number of individuals who tested positive as we did earlier in the summer. It actually has been over a month since we had a patient test positive in our in-patient setting. It also has probably been about two and a half weeks since we had a staff person test positive. We now have an infrastructure in place where we can quickly implement contact tracing and testing when we do have a staff person or patient test positive. We then move to sanitize the units and quarantine. We are following the guidance of CDC and DPH.

We are now close to having a 90-day supply of PPE and we are continuing to request more from the EOC. We are also continuing with our reopening efforts and like many other state agencies and some schools we are implementing a hybrid model of both on-site and off-site services. We are continuing with telework and telehealth.

In terms of overall testing, similar to what we are seeing in the state, our testing rate and positivity rate is relatively low .23% and we have tested 5029 staff members and patients.

Commr. Delphin-Rittmon appreciates hearing about the creative efforts that many DMHAS providers have in place around trying to create opportunities for people to continue to connect. The social clubs are beginning to reopen and provide on-site services.

- **Legislative Session** - Mary Kate Mason reported that we are in a holding pattern as far as the legislature goes. There may be a special session in the last week of September. There is a short list of bills, which they are considering, and if any impact the department or the behavioral health community a legislative update will be sent to everyone. DMHAS is working on the legislative package and a legislative wish list letter was sent to the State Board. Mary Kate gave thanks to all that sent in their ideas.

There were a number of changes to the police accountability bill. The impact to the behavioral health community is that police departments need to do an evaluation about the feasibility of using a social worker to intervene when people are having emotional distress and to increase social workers' presence and collaboration at police departments. Police officers are required to

have a mental health assessment every five years and results of their evaluation will be provided to their supervisor.

- **Budget** - Commr. Delphin-Rittmon reported that we are in the process of approaching the end of the biennium budget. The Governor will propose a new budget at the beginning of the session and the process will start around negotiating the next two-year budget. We will keep you posted once we know what the budget will look like. We are anticipating that there will be some reductions across state agencies.

Agenda Item 4: Quarterly Report – Whiting Forensic Hospital

Chief Medical Officer Dr. Tobias Wasser gave an update on WFH. As part of transformation and change efforts over the past few years WFH has been looking at strategies on how to change and transform the culture at WFH to continue to advance to a recovery oriented system of care. A Safewards model is being implemented, it is an internationally recognized evidence-based model; which is essentially the way the in-patient unit is run primarily by the direct and clinical staff. The model will enhance unit safety by trying to reduce conflict and containment through a number of strategies.

The WFH has done a good job at managing the impact of COVID-19 during the past few months. There has not been a positive case at the hospital since April and no positive staff case since July. Over the summer we had on-site testing for all staff on a regular basis. We have developed a Hospital specific COVID recovery plan which was presented to the Commissioner. Through the Commissioner's kindness, we were able to get a large donation of cookies from the Girls Scout of CT, for all our staff and patients; to recognize and show appreciation for all the hard work during COVID

During COVID the admissions numbers have been down. During this quarter there were 16 admissions. In January – March of 2020 there were 60 admissions; from April – June there were 6 admissions. WFH now has new isolation and quarantine protocols in place and testing for new patients that come in. WFH has been fortunate to be able to discharge 63 patients, despite the COVID pandemic.

Regarding racism and racial justice, WFH has had a diversity committee since inception of May 2018. Lately, there has been a lot more focus and attention on having difficult conversations. CMHC developed a program called "Dialogue on Difference" so they facilitated a program at WFH. Now WFH does their own dialogue called "Bridge Conversations."

The overall risk management at WFH for this quarter on a whole has seen a decrease of incidents of all kinds of aggression, assaults, falls, etc. There were only six allegations of any kind of abuse, neglect or exploitation. That was down from twelve for the prior quarter. WFH continues to see a downward trend on restraints.

CVH and WFH are now looking into using a new restraint chair instead of the restraint bed because it is more trauma sensitive and there is good data and good studies that show its positive effects.

Commr. Delphin-Rittmon announced that WFH holds an all-staff call every morning, which makes a big difference since staff can ask questions to the CEO or the leadership team. There is also a conference call for second and third shift staff that is done on a weekly basis. Commr. Delphin-Rittmon also wants to thank Dr. Wasser and the full WFH team for all of their efforts during the COVID pandemic.

Agenda Item 5: Presentation & Discussion: FACE Group & Citizens Project, William Bromage & Bridget Williamson

Billy Bromage started the conversation by talking about the Focus Act Connect Everyday (FACE) Group. FACE group started about five years ago around conversations held at the social club in New Haven. How FACE works is there are no referrals per case. It is by word of mouth and anyone can attend; there are weekly Zoom meetings held now since the COVID pandemic and everyone gets a chance to talk. The FACE Group do community change and building work. They are in and of the community, rather than going from a treatment setting to the community. There are peer volunteer

roles to assist participants on their recovery journey. FACE in relation to treatment systems is to intentionally hold space outside of the system; power sharing is a foundation of the group; no one has to assume MH or SU identity to join. FACE Group is fortunate to work with DMHAS and receive funding to do this work.

The citizenship framework has been going on for about twenty years now and has been part of work that DMHAS has been doing in various places around the state through training and some interventions. The Citizenship framework consists of the 5R's and Belonging: Rights, Roles, Responsibilities, Resources and Relationships.

Bridget Williamson talked about the citizenship project and the work she has been doing for the past eleven years now. Basically, the program helps empower people who are broken or in despair to move forward in their recovery process.

Agenda Item 6: General Updates and Announcements -

- Lakisha Hyatt has been named the CEO of CVH.
- Allison Fulton, Region 5, announced that October 10th is world mental health day so in Torrington a group called the Green TEAR Initiative is organizing a two-day, online celebration, event starting October 9th with many participants such as WCMHN and with the backing of the Mayor Elinor Carbone of Torrington. The theme is "Mental Health for All: Greater Investment – Greater Access."
- Ingrid Gillespie announced that Liberations Program is organizing an online recovery month celebration for September called "Innovators in Recovery."
- Jennifer Henry from Advocacy Unlimited said they will be holding a webinar and peer forum online and for more information contact her at jhenry@advocacyunlimited.org
- Paul Acker announced that Advocacy Unlimited has a recovery support specialist online training coming up in mid-October and an online presentation/training on language.
- Michele Devine, Region 3, announced a new virtual campaign "Bring Life" and billboards have gone up.
- Michael Askew of CCAR announced a Black Live Matter and Recovery event will be held on September 29th for more information go to <https://ccar.us/>
- Cheri Bragg from the Office of Recovery and Community Affairs wished everyone a Happy Recovery month.

Agenda Item 7: Ideas for future meeting topics and presenters –

Potential Future Topics (need for Presenters):

- Adverse Childhood Experiences and Resilience (Cheri Bragg to get Presenters)
- A look at Emergency Depts.: from the perspective of a person living with mental illness (Brian Reignier to get Presenter)
- Hidden in Plain Sight
- Update on Sober Housing
- HealthCare: Access to Specialty Services
- Alcohol Awareness

Adjournment: The meeting was adjourned at 4:00 P.M. The next meeting will be held on Wednesday, October 21, 2020 beginning at 2:30 PM.