



**STATE OF CONNECTICUT**  
**DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES**  
*A Healthcare Service Agency*

NED LAMONT  
GOVERNOR

MIRIAM E. DELPHIN-RITTMON, Ph.D.  
COMMISSIONER

**MEMORANDUM**

**To:** DMHAS Private Non-Profit Providers  
**From:** Miriam E. Delphin-Rittmon, Ph.D.  
**Date:** March 18, 2020  
**Subject:** DMHAS COVID-19 Provider Update #2

As we continue to address COVID-19 the state, DMHAS is constantly evaluating- our state-run programs to protect the health and safety of the people we serve and our dedicated staff who serve them. I wanted to make sure we shared our current plans. I am sure many of you are planning similar scenarios and I thank you for working with us on program adjustments.

Currently the following DMHAS operated programs will continue:

- Mobile crisis
- Assertive Community Treatment
- Inpatient services
- Residential services

DMHAS is adjusting outpatient services so client care can continue while promoting social distancing. These adjustments, which will be happening over the next few days, may include:

- Having clinicians work from home and do phone check-ins of clients. State-operated facilities will maintain a small multidisciplinary team on-site;
- Using mobile teams for community-based administration of IM medication; and,
- Closing wellness centers and social clubs, and providing individuals telephone check-ins

The DMHAS state-run facilities are promoting social distancing in everyday work to help prevent the spread of COVID-19 and other respiratory illnesses. Some of these strategies include:

- Maintaining 6 feet between others whenever possible;
- Encouraging patients to wash their hands upon entry to your facility. Staff should also wash their hands when entering the facility and frequently during their shift;

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- During times where individuals typically congregate, such as meal times in residential programs, try to disperse people as much as possible (allow eating in areas not typically used for dining to increase space between people);
- Wipe and disinfect surfaces (tables, chairs, etc.) regularly and between client use;
- Use vans rather than cars for transport to increase distance between drivers and passengers when possible. Wipe down and disinfect vehicles after use.

In addition, DMHAS is working to implement brief health screenings for staff and patients entering all State-operated facilities. The screening tools are can be adapted for your use and are posted on the DMHAS COVID-19 website at <https://portal.ct.gov/DMHAS-COVID-19>.

### **Residential Programs**

There are several components to consider in responding to COVID-19 in residential programs given the congregate living setting.

#### *Screening*

DMHAS has developed screening protocols for clients and staff. Please feel free to use these tools. Screening tools can be found here on the DMHAS COVID-19 webpage:

<https://portal.ct.gov/DMHAS-COVID-19>. If a staff person is symptomatic, they should self-isolate at home for two weeks. Given school closures, some staff with young children may be having difficulty finding child care. The Governor’s Office is working with the Office of Early Childhood in prioritizing and identifying child care options for health care providers and first responders. For help finding child care in your area call (860) 756-0864.

#### *Visitors*

For the next 30 days, visitors are not allowed at DMHAS-operated facilities. To prevent the spread of COVID-19, I encourage you to implement similar temporary measures. You can review the Commissioner’s Order on visitation at DMHAS facilities here: <https://portal.ct.gov/-/media/Office-of-the-Governor/Executive-Orders/Lamont-Executive-Orders/Executive-Order-No-7C.pdf>

#### *Admissions*

DMHAS, as well as CSSD, is expecting admissions to continue. For new admissions, consider COVID-19 related screenings over the phone and upon client arrival consider meeting the client in a triage room to minimize potential exposure. Consider a separate room for new admissions, so they can be observed for 3-5 days.

#### *Services*

Groups should continue. Modifications, such as smaller groups, larger spaces if possible, and spreading out participants in the group space are expected. Any changes in contracted deliverables and services need to be proposed in writing to Deputy Commissioner Navarretta at [nancy.navarretta@ct.gov](mailto:nancy.navarretta@ct.gov). She will respond to proposals as quickly as possible.

#### *Methadone*

Methadone providers have been granted increased flexibility for take home bottles per SAMHSA. Clients who are deemed to be “stable” by their provider may be able to receive up to 28 bottles to take home, including individuals at your residential programs. Others may be able to receive up to 14 bottles. Please ensure all bottles are in a lock box and those are in a locked location. There should also be an inventory log. DMHAS is in daily communication with the Opioid Treatment

Programs (OTPs). If you have questions related to methadone services, please contact [gina.florenzano@ct.gov](mailto:gina.florenzano@ct.gov).

#### *Cohorting Clients within the Program*

As space allows, we recommend cohorting clients into multiple groups (e.g., new admissions; healthy non-symptomatic clients; symptomatic, but not yet confirmed COVID positive; COVID positive).

I have been in daily communication with the Governor's Office as well as my fellow state agency Commissioners. There have been discussions at the state level about identifying places to quarantine COVID-positive individuals (e.g., hotels). We will keep you informed of this as more information becomes available.

#### *COVID testing*

There are a number of options for COVID-19 testing, including drive-thru test sites. Anyone seeking to be tested must have a prescription from their doctor and make an appointment in advance. For information on COVID-19 testing locations, dial 2-1-1.

#### *Discharges*

It's important not to overload emergency rooms and hospitals. People who are symptomatic for COVID-19 don't necessarily need to go to the hospital. Don't discharge symptomatic clients to another program as they could infect other clients and staff. Extended stays are possible and being considered on a case-by-case basis by ABH.

#### *Special Populations*

Individuals in your program may require special considerations depending on their existing health conditions, housing status, age and other factors.

*Pregnant* - Pregnant women experience immunologic and physiologic changes, which might make them more susceptible to viral respiratory infections, including COVID-19. Clients who are pregnant should engage in usual preventive actions to avoid infection like washing hands often and avoiding people who are sick.

*Persons Experiencing Homelessness* - DMHAS is working with DOH to identify alternative shelter options for individuals who do not have a permanent home. DMHAS will share resources as they become available. 2-1-1 is the best resource for individuals experiencing homelessness.

*Individuals over 60* – People over the age of 60 are particularly vulnerable to COVID-19. Older people and people with underlying health conditions appear to be about twice as likely to develop serious outcomes versus otherwise younger, healthier people. Consider means of enhancing social distancing, enforcing hand washing, providing hand sanitizer and monitoring closely for virus symptoms to protect these residents. Link for information specific to this age group: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html>

### *SA Bed Website*

Please continue to update your program's bed availability for the SA bed website at [www.ctaddictionservices.com](http://www.ctaddictionservices.com).

### *Access Line and Transportation*

DMHAS' 24/7 Access Line and transportation services are still open and functioning. Transportation vendors are taking extra precautions to prevent the spread of the virus.

### *Supplies*

If you have supply requests of DMHAS, please email them to [DMHAS.ECC@ct.gov](mailto:DMHAS.ECC@ct.gov). While we do not have extra supplies or dollars at this time to support requests, we are compiling requests in the event that resources become available.

### **Related Links**

- Governor's COVID-19 website: <https://portal.ct.gov/Coronavirus>
- Governor's COVID-19 Twitter account: @Covid19Ct
- DMHAS COVID-19 webpage: <https://portal.ct.gov/DMHAS-COVID-19>
- 211 - <https://uwc.211ct.org/coronavirus-novel-in-connecticut-general-information/>

DMHAS private non-profit providers are essential to the delivery of treatment and services to the over 100,000 people we serve. Thank you for your continued commitment in helping to keep the people you serve and the staff who serve them as healthy and safe as possible. I know that these are particularly difficult times. I appreciate your partnership and support as we work our way through this continuously evolving situation.