



**STATE OF CONNECTICUT
CONNECTICUT VALLEY HOSPITAL
ADVISORY COUNCIL**

CONNECTICUT VALLEY HOSPITAL ADVISORY COUNCIL
MEETING MINUTES
September 8, 2017
CVH Board Room, Page Hall
Middletown, Connecticut

PRESENT:

Council Members:

Lawrence McHugh, Chairperson; David Bauer; Celeste Cremin-Endes, River Valley Services; Lakisha Hyatt, CVH-COO; Margaret O'Hagan-Lynch, CVH-ASD Division Director; Phillip Pessina; Nancy Navarretta, Deputy Commissioner, Department of Mental Health & Addiction Services; Helene Vartelas, CEO-CVH; Sgt. Jorge Yepes, Middletown Police Department; Lisa Zurolo, CVH-GPD Division Director; Nicole Fodaski, Rushford

Absent/Excused Council Members:

Mehadin Arafeh, Joseph Havileck, City of Middletown; William McKenna, Chief of Police, Middletown Police Department; Bennett Moehl, Rushford

Call to Order	Larry McHugh called the meeting to order at approximately 8:15a.m.
Meeting Minutes	Motion was made and seconded to accept the May 5, 2017 minutes as submitted. All were in favor.

TOPIC	DISCUSSION	ACTION
Commissioners Update	<p>Deputy Commissioner Nancy Navarretta reported on the DMHAS budget on behalf of Commissioner Delphin-Rittmon. An Executive Order was issued and targeted reductions were made. A second Executive Order was issued and \$13M was restored to the budget. These are executive orders and not budgets voted on. On 8/1/17 there was a \$2.5M reduction across the board to Human Services contracts and another \$2.5M in October. We were able to pause there to see where the budget lands. DMHAS asked their providers to have a more active role in the process and instead of us telling them what to cut they told us what they could manage. The Commissioner asked Deputy Commissioner Navarretta to share projects DMHAS has initiated around the opioid crisis. A \$5.5M grant was received and they have been able to get that money into the community very quickly. DMHAS is partnering with CCSD, DPH, DCF DOC and all of the departments involved with making a difference in this crisis. All of the funds are being used for prevention, treatment and recover support dollars as well as transportation, family support group, treatment for the uninsured and recovery coaches in Emergency Departments. A very small percent of the funds go toward evaluation programs. This money is all for community support providers and will be distributed state wide. This will include all substances across the state just not heroin. A media campaign will be included and additional dollars have been added to make sure there is a warm handoff and a ride to a facility. Larry McHugh would like to see some of this money spread across Middlesex County.</p>	
CVH Update	<p>Helene Vartelas gave the CVH Update.</p> <p><u>Administration Issues</u> – Due to the incident in Whiting Forensic Division, which is considered a sentinel event, we had a Joint Commission survey surrounding the entire issue. The facts related to the issue were reviewed by an independent surveyor, from the office of Quality/Patient Safety, Joint Commission. The surveyor reported that the hospital and MHAS were on track and doing all the necessary safeguards in terms of patient safety. Additionally, they concluded that the method by which we were handling the clinical and incident management of this issue was well done and exactly what needed to be done. We also had a survey by DPH and CMS regarding the choking incident in Whiting and just completed a follow-up survey by CMS this week with two surveyors. There were some original findings regarding the documentation of nursing interventions but upon the review this week, this finding was cleared, and CMS had no further findings regarding this event. Also, during this week, we had a full federal survey by CMS with 4 additional surveyors. This CMS survey</p>	

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	<p>was due to the allegations of abuse/neglect of one patient by the 29 staff, which DPH did the initial investigations. The allegation of abuse was originally reported in late March by an anonymous source. The survey team existed yesterday with some findings in documentation by psychiatrists, nurses and social workers, which will be fixed and monitored. We will await their full written report for additional findings. The surveyors were very complimentary about all the actions being done to provide additional monitoring and assistance to WFD during this time. Undoubtedly this is a very unrepresented and serious situation, and the surveyors acknowledged we are doing all the right things to get to the root cause and in building systems and structures so this type of situation never occurs again. Due to the nature of this investigation as reported last meeting, the State Police took the lead in the inter-agency investigation, in cooperation with DMHAS, and DPH. The police investigation is ongoing but at this point and, as the press has extensively reported, 9 arrests have been made. The plan is as soon as the State police allow us to proceed, we will commence our administrative investigation for each employee, which will be all 29 employees and 2 managers.</p> <p><u>Review of Actions Taken:</u> Our first priority was patient safety. The patient was immediately moved to a new unit, with a new treatment team and staff. All other patients “at risk” were reviewed, to be sure there was no evidence of abuse/neglect. In order to meet some of the challenges this patient posed environmentally, a suite was constructed on his new unit so that he can have a comfortable living area, uniquely adapted to his needs, with sensory items to calm him. There have been major improvements and expansion of the camera system in WFD-Max, and other areas on campus. The camera system has been upgraded to digital and are continuously monitored 24/7. The plan is to eventually place cameras on all other patient care units throughout the hospital. Early in the process I deployed our COO, Lakisha Hyatt to become the Acting Division Director and Pam Shea the Acting Division Director of Nursing, while we recruit, fill and train a new management team. We continue with managers on site 24/7, and Executive Management Rounds every shift. We have increased the frequency of staff meetings, and have just completed an additional round of visits with the Commissioner to all 3 shifts. We are working with the PERCH Program at Yale and they have done a series of Focus Groups with staff, (and patients) to assess what areas in their opinion need improvement. The next step is to deliver the findings to staff, and then to move to a strategic planning process. Various committees have been formed to work on CSS/safety strategies, orientation, training and trauma informed care, in order to make improvements in these areas for patient safety. Programming has been enhanced and expanded. EAP was offered on site,</p>	

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	<p>and is continuously available. Patient advocates currently attend community meetings and have office hours on each unit. Increasing education was provided to staff regarding vicarious traumatization and various aspects of trauma informed care. Mentors have been assigned to units to assist with quality improvement efforts. Many more interventions have been implemented and we are continuing to move forward in rebuilding the maximum security program. We are recruiting for a Division Director and a Service Medical Director. We recently hired a new Medical Director. We have added and are recruiting for two additional Directors of Nursing. There will soon be a new permanent management team in place as part of the rebuilding effort.</p> <p><u>Other Administrative Issues:</u> We continue with other regulatory visits; just successfully had our 3 year DEA this week for our Methadone Program.</p> <p><u>Projects:</u> Our power system/energy upgrades with the NORESKO project continues.</p> <p><u>ASD:</u> Margaret O'Hagan-Lynch, Division Director continues to teach within DMHAS and affiliates regarding medication assisted treatment options and treatment planning. The ASD Team also continues to use their newly created video "I Am More Than My Addiction" in both staff education and patient treatment venues.</p> <p><u>Anniversary Planning:</u> We were able to have a birthday party picnic this summer in June for all of the patients and staff. Planning has been delayed due to intensive efforts directed to WFD.</p> <p><u>Mentor Picnic:</u> Cheryl Kraft is co-chair of the Mentor Committee at the Chamber and was honored at a breakfast in May. We also hosted our Mentor Picnic at the Sullivan Pavilion, was a big success – enjoyed by students and mentors alike!</p> <p><u>Citizenship Project:</u> We are bringing our Citizenship Project to WFD to enhance recovery efforts. Patients from Dutcher who are doing well are now visiting Whiting more frequently. One is running a group called "What's Up." Others hosted a panel discussion on getting ready to transition to Dutcher. This type of programming is recovery focused and helps to instill hope that recovery can and does happen!</p> <p><u>Community Involvement:</u> Patients continue to be involved in Middletown Service Projects. We participated in the Riverfront Clean-up, and grounds work at the Historical Society. DMHAS will be the focus area of speakers at Rotary for the month of October; the Commissioner will kick off the series with the first presentation on DMHAS' s effort combating the opioid crisis. Goal is to educate community regarding DMHAS' s role in statewide programs; efforts to combat the opioid epidemic; Forensic Services to assist in</p>	

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	keeping patients out of jail/prisons; Young Adult Services for transitional youth and our Statewide Services Suicide Prevention Programs.	
Subcommittee Report	<p><u>Campus Use Report:</u> Helene presented and gave an overview of the Campus Use Report which was previously sent to the Council members and copy provided at the meeting. Shew Hall use includes Beers Hall which is fully occupied with Dix's Hall only being used for storage. WFD continues to operate at capacity and we cannot refuse admission from court. Dutcher Hall continues to operate at or near capacity. A Battell unit was recently moved to Dutcher Hall. Woodward Hall continues to be used for the TBI/ABI Unit located on Woodward 2 South. Battell Hall is at full capacity for the year. Merritt Hall Units 3D and 3E are currently vacant until construction happens. HVAC renovations have been made. The Greenhouse had another successful sales season. DEEP is helping us remove the old glass greenhouse. We will get a smaller replacement structure. Haviland Hall houses the Patient Commissary, Ambulatory Care, DMHAS Training and Fiscal Services Bureau. Cottage use and the conversion of vacant space continues as needed. Picnic Area (Sullivan Pavilion) continues to have extensive use. Community members use the basketball court area and walking track. The community would like to see the picnic area opened up for public use. Valley View Café is still closed. The future plan is to have vocational staff open without the grill in use with salads and sandwiches available. The staffing would be more clinical vocational staff rather than dietary staff. The Noble Hall Theatre remains vacant while the agency continues to keep it intact with renovations. Current Campus Use by Tenants: Leak Hall is occupied by River Valley Services (RVS). Russell Hall houses the OOC Forensic Unit, Employee Fitness Center, Wheeler Clinic, Alternatives to Incarceration Program. Shepherd Home is currently vacant. Future use is being planned for homeless veterans. Eddy Home currently serves as a homeless shelter and alternative to incarceration program. Recreational leagues currently use the basketball courts and baseball field for programs. The Page Hall court areas is not finished because of financial restrictions. Parole and probate hearings are held at Battell Hall for now. Conference rooms at Page Hall are used by DMHAS, other state agencies and community groups. The Noresco campus wide energy savings project continues in conjunction with the OOC Engineering project.</p>	
Other Business	No other business to report.	

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Next Meeting	The next meeting will take place on Friday, December 8, 2017. The AWOL Report will be on the agenda for presentation at that meeting. The meeting was adjourned at approximately 9:15 a.m.	