



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

CONNECTICUT VALLEY HOSPITAL ADVISORY COUNCIL
MEETING MINUTES
March 9, 2018
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; Helene Vartelas, CEO-CVH; Lisa Zurolo, CVH-GPD Division Director;

Absent/Excused Council Members:

Mehadin Arafah, Joseph Havileck, City of Middletown; William McKenna, Chief of Police, Middletown Police Department; Joann Kiernan, Bennett Moehl, Rushford; Nancy Navaretta, Deputy Commissioner, Department of Mental Health & Addiction Services; Phillip Pessina; Jorge Yepes, Middletown Police Department.

Call to Order Larry McHugh called the meeting to order at approximately 8:00 a.m.

Meeting Minutes Motion was made and seconded to accept the December 8, 2017 minutes as submitted. All were in favor.

TOPIC	DISCUSSION	ACTION
CVH Update	<p>Helene Vartelas gave the CVH Update.</p> <p><u>Administration Issues</u> Last meeting I spoke extensively about the patient abuse allegations at the WFD and the subsequent investigations and our plans for correction. I will give an update to that plan today.</p> <p>In terms of the State Police investigation and the arrests, the cases continue in Superior Court. There were a total of 10 arrests; these cases will continue through the legal process and the individuals involved are no longer employed by the State of Connecticut. Our administrative investigations continue and are winding down; 37 staff were involved and placed on administrative leave; it is a very comprehensive and lengthy process. To date 36/37 have been separated from State Service.</p> <p>I fully addressed in detail our plan of correction last meeting and this is referenced in the minutes. Since last meeting, it was decided in collaboration with the State of Connecticut and CMS, that the Whiting Forensic Division will be separated from CVH and not part of the CMS program due to the unique nature of the patients legal status and ability to freely participate in their discharge plans. The Whiting Forensic Division will become the Whiting Forensic Hospital; the negotiated date of separation is set for May 1, 2018. This is a very ambitious timeline to fully separate and form a new hospital. In order to achieve this goal, DMHAS has formed an Implementation Team with representation from all areas/departments that affect the functioning of the hospital and soon to be new hospital. There is a Whiting Forensic Hospital Plan and the new CVH Plan (which will include GPD & ASD). We are making excellent progress and meet just about daily on various aspects of the plans. Basically the CMS rules are that there can be some shared hospital services but these services that relate to the clinical functioning of the hospitals need to be totally separate. On some aspects, a clinical person may provide services in both hospitals but they must be able to demonstrate separate and distinct services ex. 3 days in CVH; 2 days in WFD. The core services are Psychiatry, Nursing, Social Work, Rehab, Psychology, and Medical Services and these must be separate and not shared. All policies and procedures; staffing plans, medical records all need to be re-done; there are numerous areas to be addressed. The Commissioner makes a progress report to CMS every 2 weeks on the progress of the hospital separation.</p>	

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	<p>In the meantime CMS has agreed to post pone the re-survey of CVH until sometime after 2/1/18; as we were due for a full Federal Survey (both A&B Tags; K ligature risks) by early February or we would be out of the CMS Program. Due to the separation agreement the survey window has been extended until 5/1/18. So in other words, we are in the survey zone right now. We are prepared for the Full Federal Survey which would include a team form DPH and Boston offices of CMS and their subcontractors, plus follow up findings from one Plan of Correction from our July survey (from the WFD allegation) and September (full federal) surveys. We also had a complaint survey from a December allegation of abuse in the WFD; so all of these findings plus a full review of the standards will be performed during the survey. Also it is important to note that Whiting will be included in this survey, as we must have one standard of care throughout the hospital. So we are very, very busy making sure all of our staff & programs are survey ready.</p> <p>It is also important to note that these preparations include improvements to our investigatory procedures whereby we investigate all incidents, especially abuse, neglect and exploitation. We have completely revised these procedures and will be implementing them across the facility with training for all staff. The enhancements include more timely investigations and including all incidents of A/N/E as critical incidents. The goals of all of our procedural enhancements are to improve patient safety.</p> <p>As we move to separate the two hospitals, we are recruiting for a new CEO & COO for the WFH as well as a few additional positions in areas where the hospital will need to establish its own services. Also the same is for the new CVH; we are filling critical vacancies created by this separation. Of note, is that we again recruiting for DN (Assistant D of N) positions for all shifts, to provide leadership and supervision of the direct care nursing staff.</p> <p><u>Other Issues:</u></p> <ol style="list-style-type: none"> 1. We continue our collaboration with a group of parents who have lost children in the opioid epidemic. Deputy Commissioner Navaretta has joined our group. We meet monthly and are planning a Grand Rounds for staff. The objectives of the program are to increase empathy and compassion among our staff; and to better understand the family’s burden in this crisis. 2. Also we are in the recruitment stage of hiring 5 Recovery Support Specialists. These 	

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	<p>are individuals in recovery who have completed a specialized training program focused in advocacy and engagement of individuals in treatment. These RSS will assist the clinical teams in engaging patients in treatment and recovery planning as they progress to discharge.</p> <p>3. We continue to work on a proposal to re-open the Valley View Cafe. We have made some progress with a plan that is cost neutral. This is an excellent avenue for learning vocational skills and it is a demonstration of recovery in action. We need to bring this program back. It would be an extremely positive step, after the allegations in Whiting...a very positive, healing step for the campus.</p> <p>4. We learned that our application for making the patient cemetery a historical site on the National Registry of Historic Places is progressing. The Tourism Department sponsored one application and there is a presentation later this month. Hopefully it will be supported. The cemetery demonstrates the reach Mental Health has in this country...from separation from society, to the struggles against discrimination and stigma of mental illness to integration and recovery. Many years ago due to the stagnant discrimination individuals who died at the hospital were placed in numbered graves; no names. Through our cemetery re-dedication project we renovated 1,500 headstones, and with the help of NAMI created a monument naming all of the individuals buried in the cemetery. We have a beautiful ceremony each year which now calls attention to this history and struggle for recovery and indecision. We also know several individuals each year who in some way have assisted us in furthering the efforts towards full indecision of these who have mental health issues and assisted in reducing stigma and discrimination.</p> <p>5. Along these same lines, we are very fortunate to announce we have been selected for a RFP on furthering our work on Citizenship here at CVH. The Citizenship model, as you may already know from our discussions, is a model whereby we assist individuals in developing skills to become full citizens in their home communities. It is a skill based curriculum; with an internship whereby individuals must chose a valued role project, where they make a valued contribution to their chosen community. Examples here have been the riverfront clean up; landscaping at the historical society, planting saplings and projects on campus, for example Dutcher patients going into Whiting and running a "What's Up" Group and panels on what it takes to move from Whiting to Dutcher. With the RFP we hope to expand our citizenship program to all Divisions as we see it as a true vehicle for recovery.</p> <p>6. We also recently held programs on Martin Luther King Day in January with a speaker (Charmaine Coombs- DN1) and a peer based award for an individual on campus who</p>	

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	demonstrates the ideals of MLK – (Anthony Fisher one of our head MHA’s received this award). We also hosted a program for Black History Month-- Celebrating the Tapestry of our Nation. Reverend Maudine Martin was our keynote speaker who spoke on this topic and on views of immigration; we also had some guest musicians from a Hartford Congregation that was phenomenal- on trumpet and keyboard. The music sounded fantastic in our chapel!	
Other Business	No other business to report.	
Next Meeting	The next meeting will take place on Friday, June 8, 2018. The meeting was adjourned at approximately 9:00 a.m.	