

State of Connecticut
State Board of Mental Health and Addiction Services
February 17, 2021
Microsoft Teams Meeting

Present online: Chmn. John Hamilton, Paul Acker, Craig Allen, Daniella Arias, Sharon Castelli, Alan Coker, Sandy Cole, Michele Devine, Marcia DuFore, Kathy Flaherty, Allison Fulton, Ingrid Gillespie, Allyson Nadeau, Larry Pittinger, Brian Reigner, Paul Reinhardt, Cherish Robertson, Kevin Sevarino

DMHAS Staff: Commr. Delphin-Rittmon, Yvonne Addo, Cheri Bragg, Steve DiPietro, Marilyn Duran, Ana Florence, Marlene Jacques, Kim Karanda, Alice Minervino, Art Mongillo, Hal Smith

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 January 20, 2020 meeting were reviewed and accepted.

Agenda Item 3: Commissioner's Update

- **COVID-19** – Commr. Delphin-Rittmon announced that DMHAS is in the process of giving vaccinations to staff and patients. Many staff are working on their 2nd round of the vaccine. DMHAS has set up six vaccination sites across the state (Middletown, New Haven, Hartford, Waterbury, Norwich and Bridgeport). Similarly, to the rest of the state, the COVID numbers continue to decrease. Since about a year ago, the cumulative inpatient data is 142 positive cases of which 123 have recovered and returned to the unit. In terms of staff, there have been a total of 377 that tested positive and 347 have recovered. DMHAS continues to have employees telework until April 20th.

DMHAS has a COVID related website with lots of information on it. DMHAS Medical Director Dr. Charles Dike has developed a protocol document that includes Q&A with a range of responses related to receiving vaccination and what to do if you become positive. There are also updates related to COVID and Executive Orders are also on the website.

- **Legislative Session** – Commr. Delphin-Rittmon stated that one critical piece of legislation that DMHAS is looking at is becoming a single state agency. Right now we are viewed as multiple entities which has implications with our electronic health records. The other piece of legislation is related to Whiting Forensic Hospital to let patients be present during the search of their room and/or personal belongings. It will require to have two additional staff present. There is also a bill on involuntary commitment or treatment in which DMHAS is not in support of. There are opioid bills and there is also a marijuana bill for secret shoppers to ensure retailers are not selling to anyone under 18 years of age.
- **ADPC** – Commr. Delphin-Rittmon provided an update on the last meeting.
 - The recovery subcommittee is working on two different initiatives with municipalities and towns 1.) The recovery friendly workplace and recovery friendly town or city. There is a toolkit that goes along with this. 2.) The value and stigma of harm reduction. There was also a presentation on harm reduction.
 - All four subcommittee work groups prevention, harm reduction, treatment, recovery and criminal justice provided an update.
- **Budget** – Steve DiPietro provided an update on the budget. The DMHAS budget does not have a lot of re-

ductions on it but it also doesn't have a lot of increases. The only expansion is for additional funding for legislation around cannabis. It is recommended that DMHAS get \$500 thousand this coming fiscal year and bumping it up to one million dollars in 2023. There were some reallocations in the budget as well. A -3.6 million dollars was moved to support the centralization of HR functions to DAS. There was also a reallocation of the Worker's Comp Account for about \$16 million and moving it to the comptroller's office. There is a \$2.1 million annualized reduction. This is money that was taken out of last year's budget and annualized for the state operated personnel services line. This has nothing to do with the PNPs. There was an increase of \$600 thousand for each of the years to increase minimum wage for PNPs. There was some caseload growth. There is no COLA at this point in the budget.

Agenda Item 4: Quarterly Report – Whiting Forensic Hospital

Hal Smith provided an update on WFH. COVID testing is being done on both staff and patients, since the pandemic started. Staff can now self-test at WFH through Quest. The vaccination program started January 4th. Staff have been vaccinated with the first dose and now doing the second dose. The number of staff since the beginning of the pandemic that tested positive is 64 and 62 have recovered and are back to work. Since the beginning of the pandemic 17 patients tested and have recovered. The capacity for patients at WFH is 229 and usually there are around 220 patients. Since the pandemic the number is down to 175 and a contributing factor is that the courts have been closed. There have been TEAMS meeting with the court system and that has helped the numbers stay up. The patient vaccination program started this week and 120 patients have volunteered to get vaccinated.

There was a lawsuit brought up on CVH and WFH by CLRP and some plaintiffs were patients. Since then the lawsuit has been dropped without prejudice. The lawsuit had to do with discharges during the pandemic and the hospitals response to COVID. Since the pandemic 80 to 100 patients have been discharged.

There were 13 allegations of abuse and neglect during the quarter. Of this number six were unsubstantiated or pending and three were substantiated. For restraint and seclusions numbers have gone up to 11.6 compared to last year's number of 2.6. The time in restraint has gone down to less than an hour. For a year now there have been no seclusions in the Dutcher building. In the Whiting building there has been an average of nine seclusions and it is up from zero for the previous quarter.

Three initiatives that WFH has been working on are 1.) Dialogues on difference and bridging the gap. 2.) Recovering citizenship. 3.) Introduction of Safe Words.

Agenda Item 5: Presentation & Discussion Topic: Comprehensive Homeless Plan Report/Update Discussion

Alice Minervino presented on the DMHAS Housing and Homeless Services update. Some of the housing programs that are being worked on are Projects for Assistance in Transition from Homelessness (PATH); SSI/SSDI Outreach, Access and Recovery (SOAR); DMHAS Operated Homeless Outreach; Rental Assistance (formerly Shelter Plus Care); Permanent Supportive Housing; and CT Healthy Engagement and Support Services (CHESS) Initiative. Another program is the Coordinated Access Networks (CAN) for coordinated entry in to homeless services with collaboration among State and Federal agencies, private non-profits, advocacy agencies and consumers as well as 211. There are seven CAN throughout Connecticut. HUD subsidies (DMHAS is Grantee) of 49 Supportive Housing HUD grants for approximately 2,200 households. State funded supportive housing services for 47 providers which house approximately 2,600 households with ongoing case management and support. DMHAS also provides training and support to providers.

Due to COVID-19 the meetings are on monthly basis instead of quarterly. Both HUD and DMHAS provided housing waivers during COVID-19. FEMA Crisis Counseling Programs – COVID-19 assistance for community health was implemented. The state department of housing got funding to help people stay in motels. There were 1600 households housed in motels overall and 538 heads of households housed directly from motel to permanent housing.

Kim Karanda talked about the COVID-19 Assistance for Community Health (COACH) program – A program for individuals experiencing homelessness. ABH provides project oversight of six (6) DMHAS funded agencies – services aligned with CAN and targets emergency shelters, hotels used for shelter decompression, unsheltered homeless encampments, soup kitchens, COVID testing and vaccination sites, and other locations discussed in CAN meetings. Staff provide short term outreach oriented interventions. For more information, go to website: ctstronger.org

Commissioner Delphin-Rittmon gave thanks to all of the DMHAS Housing staff for all their hard work and for taking on new initiatives especially during the pandemic.

Agenda Item 6: Workgroup updates / General updates / Announcements

- Dr. Sevarino of the Marijuana workgroup talked about the Governor’s bill on legalizing marijuana. The subcommittee was put forth to look at the implications of that bill. The committee has met three times and have put together a letter to the Judiciary committee. The letter asks for two things 1.) to reconsider the legalization by providing harm reduction measures that should be included in the bill if it were to pass, and 2.) reasons why we stand in opposition of legalization at this time. Not all members of the subcommittee were in consensus to the letter format. The letter will be heard at the public hearing. John Hamilton made a motion to accept the endorsement recommendations on the letter and Marcia DuFore second the motion. A vote was passed to submit the letter to the Judiciary Committee.
- Commissioner Delphin-Rittmon reported on the Disaster Behavioral Health Network Team, which is a collaboration with DMHAS, DCF and UCONN. They did a program today on the emotional challenges of COVID-19 – A survival kit of addressing COVID-19 and the fatigue associated with it. The program was for all state employees and there were around 900 people on the webinar. It was recorded and will be available for anybody interested.
- Marcia DuFore announced that she lost one of her staff member due to COVID-19.

Agenda Item 7: Potential Future Topics (need for Presenters):

- Hidden in Plain Sight - Anna Gasinski, CT PH Analyst, New England High Intensity Drug Trafficking Area (HIDTA) & Haley Brown, Project Director, Wolcott CASA
- Update on Sober Housing
- HealthCare: Access to Specialty Services
- Alcohol Awareness

Adjournment: The meeting was adjourned at 4:30 P.M. The next meeting will be held on Wednesday, March 17th beginning at 2:30 PM.