

**State of Connecticut
State Board of Mental Health and Addiction Services
February 18, 2026
Microsoft Teams Meeting**

Present online: Chmn. John Hamilton, Jennifer Buckley, Mark Irons, Pamela Mautte, Dena Miccinello-Barbarula, Allyson Nadeau, Denise Paley, Manuel Paris,

DMHAS Staff: Commr. Navarretta, Deputy Commr. Harrington, Jose Crego, Cheryl Arora, Marilyn Duran, Christopher McClure, Sarju Shah, Kelly Sinko

Agenda Item 1: Welcome and Call to Order

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

Agenda Item 2: Minutes of previous meeting review and action

The meeting minutes from January 21st were reviewed and accepted.

Agenda Item 3: Commissioner's Update

Budget: The Appropriations hearing is on the 23rd as well as the public hearing.

Budget Process:

- Last spring the biennial budget was enacted for both 26 and 27.
- This legislative session midterm adjustments are under consideration for FY27, the second year of the biennium.
- The Governor released his proposed midterm adjustments in the first week of February.
- We are still early in the budget process and a month away from final mid-term adjustments for FY27.

The FY27 adopted biennial budget:

- Added \$1.1 million to the DMHAS MH Waiver account to annualize FY26 caseload growth and to fund an additional thirty waiver placements in FY27
- Sustained services temporarily supported by ARPA
 - Wrap around services for 125 individuals in supportive housing, annualized funding = \$1,125,000.
 - \$3.0 million annual investment in Mobile Crisis Programs
- Provided COLA increase to private providers each year, details pending (OPM appropriation)

The Governor's Proposed Mid-Term Budget:

- Provides funding to support wage increases for home health aides and low-wage workers under the Medicaid home and community-based services waivers = \$690,000.
- Transfers \$10.75 million to DMHAS to reflect program requirements related to the substance use disorder (SUD) demonstration waiver. This waiver enables federal reimbursement for SUD services for individuals not ordinarily covered under federal rules. The additional revenue is to be reinvested to strengthen the SUD service system.

Governor's Mid-Term Technical Adjustments:

- Supports increased Competency Restoration Costs of \$1.9 million. These funds will cover the continued cost of services and supports for individuals with mental illness who face low level criminal charges and enable DMHAS to respond to the increase in outpatient competency referrals in the least restrictive setting.

- Provides partial funding of \$3.5 million in FY27, annualized to \$7.1 million, to facilitate discharge from state hospitals by supporting community resources for individuals clinically ready to transition to the community.

Governor's Mid-Term Policy Options:

- Provides \$1.0 million for CHES participants with a housing subsidy to transition to the existing supportive housing program in DMHAS as the CHES program sunsets.
 - 100 active CHES participants at \$10,000 each.
 - Anticipates \$250,000 in TCM revenue.
- Reduces funding by \$150,000 for various legislatively directed funds in aggregate by 20 percent to support the constitutional requirements for budget balance and spending cap compliance.

Legislative Update: This session is very short, about 3 months long. Kelly went over the overview of the proposal journey. DMHAS proposes two bills for consideration, an act concerning recovery friendly language and various revisions to mental health and addiction statutes and an act expanding access to Opioid Overdose Reversal Medication. Kelly talked about some of the changes DMHAS is proposing to these two bills.

Agenda Item 4: Quarterly Report: Whiting Forensic Hospital - Jose Crego, CEO

The nursing department staffing has grown by about 30 folks since the last quarter of 2025 to date in 2026. The recruitment continues and they are actively recruiting 64 more frontline staff folks for the hospital, various shifts, various full-time and part-time positions.

The mandated overtime saw a little bit of growth, due to the Thanksgiving and December holidays. There was some increase in overtime as well as some outlier acute patients that also required some more staff online to be able to take care of them. Now those numbers are starting to decline a little bit.

Patient falls had a bit of a spike back in in October and it has them thinking about what things they can do to take a look at falls and at the population. What was found is that it is not new to Whiting. This is across the board, across hospitals, not just behavioral health, but hospitals throughout the country there is an aging population. What they have noticed is an added number of folks that have cognitive decline which adds to the possibility of potential falls. While the overall fall rate has increased over the last quarter, there has been no serious falls or no falls with serious injuries. Some changes to policy have been made that require any patient who has an unanticipated fall to require a face-to-face doctor assessment within 60 minutes. In the interim the nurse will perform neuro checks every 15 minutes until the doctor arrives and assesses the patient and provides orders for care. They have been able to implement that change with a lot of success. They are also adding things like bed alarms and other supportive equipment to allow staff to know the needs of the patient before they fall. They got some additional training coming in to focus on their aging population, especially the folks with Neurodegenerative decline, as they find in the assessment piece, especially on their competency restoration side, working with those individuals with that deficit.

Lastly, in addition to the robust treatment that they have, some of the activities and celebrations held, especially over the holiday period were:

- a couple of ice cream socials for the patients in both buildings.
- field day for patients in both buildings. Dutcher patients were able to go over to CVH and take part of a much larger celebration.
- Whiting only fall festival which included donuts, a corn hole tournament, and apple cider. Everyone had a good time up there during that period.
- Our holiday meal was on December 19th, for Whiting folks.
- Family nights are happening in both buildings.
- One of the areas that they have coming up is their NBA for a day and that is where they have basketball teams that are comprised of both staff and patients from both buildings. They have a playoff in both buildings and then they get together in the Whiting building to go to see who the winner is.

Agenda Item 5: RBHAO Report – Highlights for this month

- For cannabis and prevention, they have done a lot of community outreach, including getting a lot of the lock boxes out there, dispensary visits, a lot of safe storage education, and doing check issuance with the mini grantees. Most of the regions also conducted presentations for a variety of students and adults and the regional workgroups and environmental scans are used to track cannabis trends and guide prevention strategy.
- For nicotine and vaping, all the many grant opportunities were announced statewide. They have several LPC's that have already put in applications. Same thing with vaping there's a lot of community education going on as well as quick kit distribution across multiple regions, and there's a lot of collaboration through the Vaping Unveiled and Vape Waste Disposal initiatives that are going on throughout the state.
- For all the opioid work, the Narcan work trainings are being implemented in community organizations, schools, hospitals, police, and EMS. Those are going well. They have naloxone cabinet placements occurring throughout the state with site assessments and follow up surveys. All the RBHAOs are continuing to do RFW outreach assessments and follow up either with communities or employees or health systems. All the task force participation is going well across the region or work groups regarding opioids.
- LPC's everyone has conducted mid-year check-ins, technical assistance sessions, collaborative planning, and regional coordination with them. Everyone has scheduled a listening session.
- Gambling Awareness Month is coming up next month in March, so all the coordinators across the state are planning to have a variety of stuff that you're going to see going on. Mini grant activities are being carried out in some regions, resource distribution and many community events as well as gambling presentations that are being delivered throughout the state.
- For suicide prevention, and this includes GLS and RSAB, there is plenty of widespread QPR trainings for professional students, and community groups under the GLS a lot of school professionals have been trained. The Gizmo curriculum is being implemented across the state and several districts, and that's starting now through March. RBHAOs also have been working on school suicide prevention and postvention policies across the state. They have active participation in the CT, SAP, RSAB and associated workgroups and the CLSP and the community led and the Multi-school LED suicide teams under the GLS. They're all working on their plans and different initiatives.
- RBHAOs are all monitoring legislative session for prevention related policy updates. Staff are specially trained in evidence-based curriculums, and they have been doing different workshops throughout the state so whether they have been trained as tobacco specialists to offer TA. They have upcoming CALM trainings which is on counseling to access lethal means. There is community and clinician trainings going on. Some are doing alcohol server training, so it varies across the state and the regions, but they do have specialized staff using evidence-based curriculums.
- Across the region there is different surveys and environmental scans that have been happening to inform prevention planning in communities.
- For general trends, they are just doing all the good RBHAO stuff with focusing on youth and lifespan prevention, looking at readiness with our communities based on their data and a lot of cross collaboration and doing capacity building and public education and outreach.

Agenda Item 6: General Updates/Announcements

Liberation Programs: Dr. Maggie Young, Chief Recovery Officer, was selected as the citizen of the Year award in Stamford, CT.

Adjournment: The meeting was adjourned at 4:00 P.M. The next meeting will be held on Wednesday, **March 18, 2026**, beginning at 2:30 PM.