

WHO: Senator Somers and Fellow Public Health Committee Members

WHAT: Public Hearing Re: Whiting Forensic Institute scandal

WHEN: Monday, November 13 starting at 1:00 P.M.

WHERE: Legislative Office Building, 300 Capitol Avenue, Hartford, **Room 2C**

Hello – My Name is Patricia Guerard, I am a retired DMHAS employee. I worked as Patient Advocate and Client's Rights Officer at both Cedarcrest Hospital and Ct Valley Hospital.

In response to the question: How was this culture of cruelty allowed to persist? We need to take a look back in time. The **Connecticut General Hospital for the Insane** opened 150 years ago in 1867.

The towns of CT wanted to establish a place of asylum, peace and safety for their citizens afflicted with grave mental disorders. Dr. Abram M. Shew laments that during the first five years, patients were being brought to the hospital from attics, cellars and stables in such poor health that the only service the hospital could offer was hospice care for the moribund. He states sadly, he was eager to find people who could be diagnosed earlier in their illnesses so he could show what recovery actually looked like, and gain public trust. Once the public caught on, however, overcrowding rapidly began.

Jump ahead to Clifford Beers' book **A Mind That Found Itself**, written in 1908 which already mentions mistreatment and abuse in CVH as well as at The Institute of Living.

In the 1960's more than 9,000 CT citizens were housed in Ct Valley Hospital, Norwich and Fairfield Hills. In 1963 President Kennedy, signed the Community Health Care Act, - initiating deinstitutionalization.

Rapidly the large, deeply troubling, abusive hospitals emptied into the streets creating a homeless and vagrant population the original founders of CVH had foreseen, and hoped to avoid.

Today the State of Ct has approximately 600 people in its care at CVH. 200 each in: Addictions Division, General Psych and Forensics. The book *Asylums* written by Erving Goffman in 1961 points out that the culture in jails and asylums tends *always* towards abuse of power and self-perpetuates. Let me repeat that – and self-perpetuates. Patients become more docile and jailers become more ferocious. We have known this for over 50 years.

Jump to current events. It was my experience that when confronted with the allegations of misconduct by staff, the various administrations I worked under would not address the issues but, regularly discounted statements of abuse by clients. Today we know better. This publicly came to light during the DOJ/health dept. investigations soon after 2007. It was found that for a single year (please excuse me, I cannot remember exactly which one) 250 formal grievances had been filed. All of which were found unsubstantiated by the then HR/labor management department. The 1199 union is a real force to be dealt with and employees reporting abuse hesitate to contact advocates and often only do so anonymously.

The 1199 union insists that the **forensic** employees receive the same benefits as corrections officers, (20 years of service to be eligible to retire). This in recognition of the violence they are

expected to encounter, which by the way, is the same risk across the entire hospital. Thus, recognizing a difficult situation, but inadvertently perpetuating it and again not offering a remedy, just accommodating it. I encourage you to invite this union to be part of any solution.

I am proud to say that, also, because of this DOJ investigation restraint and seclusion hours went from 700 hrs a weekly down to 10 hours a week; Over the span of five years, after the introduction of many evidenced based practices, and they have stayed within that range ever since.

The culture at Whiting in particular has always been difficult. This program is faced by an identity crisis between being a hospital and a prison, it struggles to be both. The citizens of CT need to decide what they want the fate of the 100 or so people found not guilty by reason of insanity (NGRI) to be, healthcare or prison.

I hope you are sitting down when you look at the budget. Currently the entire hospital is suffering from lack of direction, and has no vision for the future. Staff feel they have little or no supervision and the clients regularly are served rice and beans, so where all this money is being spent is a mystery to me. The Forensic Division leadership has not been fully staffed for a long while, there is no current access for clients to the world and there is no easy access for the public to the clients. In all there is little transparency. Families also are not welcome.

May I encourage you all to consider a wild idea. We are the richest state in the union, and I expect we pay the most for mental health care of any state in the US – so with this in mind we should expect to be getting the best of care. The people in our system are not violent monsters but regular people who for a fluke of chemistry, genetics or environment have ended up needing our help. Let's give it to them.

Let us honor the original intent of the founders, study what works and emulate award winning programs, encourage innovation and new thinking. Let us create a state of the art recovery center that will be the envy of all. Let us make those original founders proud.