

STATE OF CONNECTICUT DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES A Healthcare Service Agency

NED LAMONT GOVERNOR MIRIAM E. DELPHIN-RITTMON, Ph.D. COMMISSIONER

# Whiting Forensic Hospital

#### Whiting Forensic Hospital Task Force June 17, 2019 Hal Smith, CEO & Tobias Wasser, M.D., CMO



# Background

- Whiting Forensic Institute was founded in 1970
- In 1995 WFI merged with and became a division of Connecticut Valley Hospital
- From 1995-2018, CVH was comprised of three main divisions
  - General Psychiatry Division (GPD)
  - Addiction Services Division (ASD)
  - Whiting Forensic Division (WFD)
- WFD encompassed two services:
  - Whiting maximum security service
  - Dutcher enhanced security service

# Separation of CVH and WFH

- CVH receives funds from The Centers for Medicare & Medicaid Services (CMS)
- In 2017, CMS informed CVH that patients residing in the Whiting Forensic Division did not meet CMS' conditions of participation requiring that patients sufficiently participate in their own discharge planning
- CMS asserted that WFD patients, as a result of their jurisdiction under either the Psychiatric Security Review Board (PSRB) or the Superior Court system, did not sufficiently participate in discharge planning to meet CMS standards

# Separation of CVH and WFH

 In the summer of 2017, DMHAS voluntarily withdrew the WFD beds from CMS participation

 In December 2017, CMS informed DMHAS that in order to continue to receive CMS funding for the remaining CVH beds, WFD would need to separate from CVH

# Separation of CVH and WFH

 On January 2, 2018, Governor Dannel Malloy issued Governor's Executive Order #63 instructing DMHAS to separate WFD from CVH and form Whiting Forensic Hospital (WFH)

• On May 1, 2018, WFH was officially formed and separated from CVH

# New WFH Leadership

- Hal Smith, CEO (as of June 2018)
- Tobias Wasser, CMO (as of July 2017)
- Jan Bergin, CNO (as of February 2018)
- Jose Crego, COO (as of February 2019)
- Christine Bouey, CQCO (as of April 2018)

# Patients Served by WFH

- Services are provided to individuals who are admitted under the following categories:
  - Psychiatric Security Review Board commitment
  - Criminal court order for restoration of competency to stand trial
  - Civil commitment (voluntary or involuntary)
  - Transfer from the Department of Correction (during period of incarceration or at end of sentence)

Whiting Forensic Hospital Services

#### **Whiting Service**

5 Units (91 beds):

- 3 Admission Units (1 co-ed)
- 2 Transitional Treatment Units

#### **Dutcher Service**

6 Units (138 beds):

- 1 Admission Unit
- 1 Intensive Treatment Unit
- 4 Community Preparation Units

# Whiting Service



#### **Dutcher Service**



#### **Patient Flow through WFH System**



#### **Dutcher Service Level System and Mobility**

- Level 1: Patients reside on their inpatient unit
- Level 2: Patients reside within the building
- Level 3A: Patients may travel on campus grounds with staff
- Level 3B: Patients may travel off campus grounds with staff
- Level 4: Patients may travel campus grounds on their own for up to 1 hour at a time

Treatment teams conduct ongoing risk assessments and present cases for increased level privileges to the Forensic Review Committee for approval.

Behavioral Sciences and the Law Behav. Sci. Law **34**: 423–443 (2016) Published online 8 April 2016 in Wiley Online Library (wileyonlinelibrary.com) DOI: 10.1002/bsl.2222

#### Assessing Insanity Acquittee Recidivism in Connecticut

Michael A. Norko, M.D., M.A.R.\*, Tobias Wasser, M.D.<sup>†</sup>, Heidi Magro, M.S.W.<sup>‡</sup>, Erin Leavitt-Smith, M.A., L.P.C.<sup>§</sup>, Frederic J. Morton, M.P.H.<sup>§</sup> and Tamika Hollis, M.B.A.<sup>†</sup>

• Yale Law & Psychiatry Affiliation greatly enhances recruitment and retention of nationally scarce forensic psychiatry resources.

# **Patient Demographics**

- Age:
  - Range = 19-89 years old
  - Median = 44 years old
  - Mean = 45 years old
- Race/Ethnicity:
  - Caucasian = 50%
  - African American = 33%
  - Other Ethnicities= 17%
- Gender:
  - Male = 92%
  - Female = 8%

# Length of Stay

- Length of stay (LOS) is determined by a number of variables
  - Legal Status: PSRB, Competency, Civil/Correctional
  - Clinical/Behavioral Assessment and PSRB release decisions
  - Mean or Median LOS for the WFH population is heavily weighted by very long term and very short term patient's LOS
  - PSRB patients (40% of WFH's population) have a range in LOS from 10-15 years to 15-30 years
  - Competency restoration patients (40% of WFH's population) range from 60-120 days

# **Staffing Composition**

Total WFH Staffing = 544

- Race/Ethnicity:
  - Caucasian = 50%
  - African American = 33%
  - Hispanic = 11%
  - Other Ethnicities = 6%
- Direct Care Staff
  - MHA 1&2 = 118 (22%)
  - FTS/LFTS = 129 (24%)
  - LPN = 12 (2%)
  - Nurse/Forensic Head Nurse/Head Nurse = 68 (13%)
  - Psychiatrist/Physicians/APRN = 20 (4%)
  - Psychologist, Social Workers, Rehab Therapist, & Admin. (see Org. Chart)

- Gender:
  - Female = 53%
  - Male = 47%

## **Organizational Chart**



# Budget

Department of Mental Health and Addiction Services

Whiting Forensic Hospital Budget

Beds:

229

SID (Budget Lines)	SID Description	2019
10010	Personal Services	\$51,090,027
10020	Other Expenses	\$3,094,035
12207	Professional Services	\$981,345
12289	Behavioral Health Medications	\$1,816,079
12601	Forensic Services	\$1,057,722
Total		\$58,039,208

# Enhancements to WFH Staff Orientation & Training

- New Employee Orientation Program
  - Direct Care Staff: 4 weeks prior to patient care
  - Collaborative Safety Strategies (CSS)- A harm reduction initiative
  - CSS Coaches (26 coaches all units/shifts)
  - CEO Welcome/WFH Overview
- Kaleidoscope Training
- Annual Completion of Learning Management System (LMS) Training by all staff (updates/additions as needed)
  - Staff participation in video scenarios for imminent risk and deescalation

Enhancements to WFH Staff Orientation & Training

- Newly developed employee trainings

   In-service LGBTQ
  - Behavior Management Plan Development Training
  - New Forensic Mental Health orientation program
  - Developed Grand Rounds with an affiliation with
    Yale Law and Psychiatry Division

# Changes since WFH Formation

- Licensed as a Hospital for Mentally III Persons by the CT Department of Public Health effective June 2018
- Directors of Nursing on-site 24/7 which increased managerial coverage on all shifts
- New CEO, CMO, COO, CQCO, and CNO on call 24/7
- Establish Behavior Management Specialist position
- Morning Report (chaired by CEO and CMO)—Hospital-wide risk management meeting—all transports, COs, Acuity reports
  - All units, building managers, and attending physicians review all incidents of previous 24 hours and new procedures for reviewing patients on higher level of observation

# Changes since WFH Formation

• Staying at or near authorized position fill level

• Expansion of Patient Steering Committees and formation of joint Whiting-Dutcher meetings

 Monthly Town Hall Meetings & Labor/Management Meetings

# **Changes since WFH Formation**

- Expanded the WFH Advocacy Department
  - Director of Patient Advocacy
  - 2 Patient Advocates
  - 2 Recovery Support Specialists
- Continuation and enhancement of Employee Workgroups in collaboration with Yale Program for Recovery and Community Health (PRCH)
  - Safety
  - Wellness
  - Policy & Procedure
  - Training

# **Changes Since WFH Formation**

- Pilot Programs
  - Technology Pilots (Patient USB and Internet Pilots)
  - Music Therapy
  - Enhanced Educational Opportunities for Patients
- New Policies
  - Dress Code
  - Transport Risk Assessment
  - Milieu Management

# **Changes Since WFH Formation**

- Approved member of CT Hospital Association
- HD Camera Installations throughout Dutcher
- Formed our own transportation department by cancelling outside transport vendor which created enhanced efficiency and expenditure saving
- Formed, expanded or re-established academic affiliations with several universities for major clinical departments

# WFH Data Points on Major Performance Indicators

- Incident Report Data (approximately 60 categories of incidents of a verbal or physical nature which may or may not involve injury to patients or staff)
- Allegation Data
- Comparisons of WFH Seclusion and Restraint with National Research Institute (NRI) Benchmarks
- WFH Restraint and Seclusion Data
- Constant Observation Data (1:1)

# Incidents May 2018-May 2019



## Allegations May 2018-May 2019

#### WFH Abuse, Neglect, & Exploitation Total Allegations May 2018 - May 2019

-----# of Allegations -----Allegations Trendline



#### National Research Institute Data Compared to WFH on Seclusion and Restraint

- The following information is from the National Research Institute (NRI) which is a database that collects data on behavioral health services throughout the country.
  - Looking at January 2019, WFH's restraint and seclusion hours are significantly less than half of the national average as reported by NRI
  - Since May 2018, WFH has been under the national averages each month with the exception of use of seclusion for the month of June which was less than 1 percentage point above the national average

# Restraint Data May 2018-May 2019

WFH is below National Research Institute (NRI) averages (database that collects data on behavioral health services throughout the country).





Note the y-axis scales are different due to Dutcher's low number of restraints.





### Seclusion Data May 2018-May 2019

WFH is below National Research Institute (NRI) averages (database that collects data on behavioral health services throughout the country.











## **Constant Observation (Hours)**



## **Overtime Report (Hours)**



# **Future Strategic Planning**

- Whiting 2020: Moving Forward
- Funded architectural study in progress
- Development of strategic plan using change management technology
- Improving both patient and staff morale
- Increase programming across all disciplines
- Seeking Joint Commission Accreditation

# **Contact Information**

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