

# Connecticut Valley Hospital

## *CVH/Whiting Legislative Task Force*

September 16, 2019

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Connecticut Department of Mental Health and Addiction Services

# Mission and Vision

**Mission:** At Connecticut Valley Hospital, individuals receive services that assist them to better manage their illness, achieve personal goals, and develop skills and supports that lead to living the most constructive and satisfying lives possible.

**Vision:** To promote recovery through collaborative, compassionate, and culturally competent treatment in a safe and caring environment

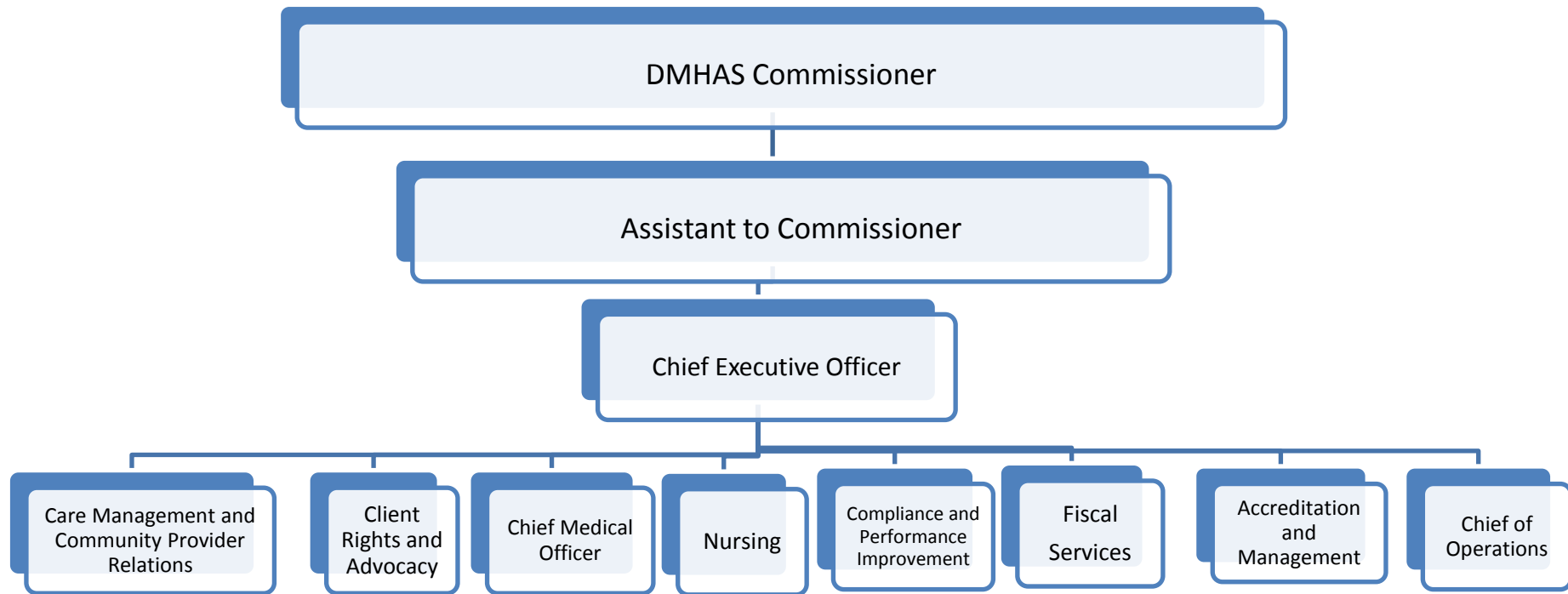


# Hospital Accreditation

- Certified by the Centers for Medicare and Medicaid Services
- Joint Commission, fully accredited under both Hospital and Behavioral Health Standards



# CVH Table of Organization



# Connecticut Valley Hospital

**Addiction Services Division**  
*6 units, 152 beds*

## Middletown Campus

*1 Detoxification Unit, 20 Beds;  
3 Rehabilitation Units, 90 Beds*

## Blue Hills Hartford Campus

*1 Detoxification Unit, 21 Beds;  
1 Rehabilitation Unit, 21 Beds*

## Young Adult Services

*1 Unit, 17 Beds*

## Acquired/Traumatic Brain Injury

*1 Unit, 15 Beds*

## Geriatric Services

*3 Units, 45 Beds*

## General Psychiatric Services

*6 Units, 132 Beds*

**General Psychiatry Division**  
*11 units, 209 beds*

**Transitional Living Program**  
*Cottage – 10 beds*



Connecticut Department of Mental Health

# Addiction Services

## Acute Detoxification Services

- Medically managed program for individuals who have become addicted to a variety of substances including prescription drugs and opiates, alcohol and other drugs

## Rehabilitation Services

- Short-term, inpatient substance use disorder rehabilitation treatment for individuals recovering from a variety of substance use disorders including opiate addiction, alcohol use disorder and other drugs



# Opioid Use Disorder Strategies

- Medication Assisted Treatment (MAT)
  - Medication
  - Counseling and Support from family and friends
  - Education offered to patients and family members on the use of naloxone in the event of an opioid overdose
- Naloxone kits are offered to all patients upon discharge
- Pain Management Committee
  - Reviews opiate use in the hospital
  - Provides guidelines on pharmacologic and non-pharmacologic treatment of patients with pain
  - Provides consultation on complex cases related to pain management



# General Psychiatry Division

## Young Adult Unit

- Young adults, ages 18-25, who are experiencing acute psychiatric symptoms

## Acquired Brain/Traumatic Brain Injury Unit

- Individuals of all ages who are experiencing psychiatric symptoms post brain injury

## Older Adult Units

- Older adult population (60 and beyond) who are experiencing acute psychiatric symptoms

## General Psychiatric Units

- Adult population who are experiencing acute psychiatric symptoms



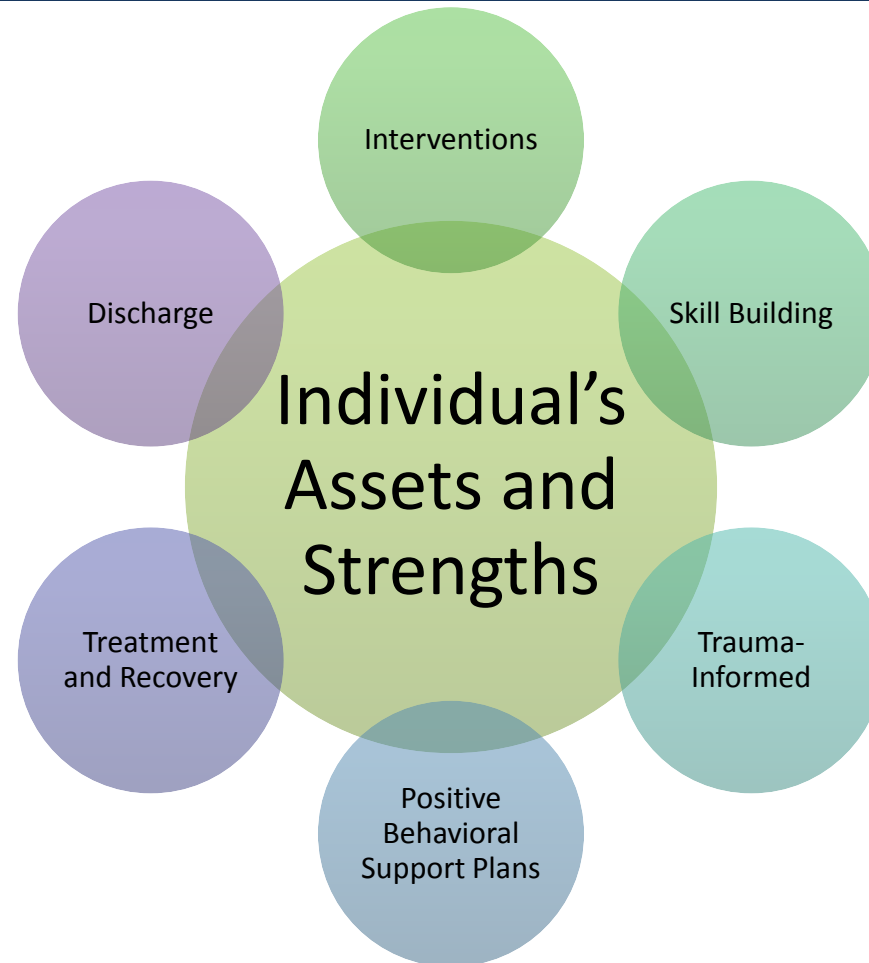


# Legal Status Overview

- **Physician's Emergency Commitment ("15 Day PEC") CGS 17a-502**
  - Psychiatric disability
  - Dangerous to self, is dangerous to others, or is gravely disabled
  - Need for immediate hospitalization for a psychiatric disability
- **Voluntary Admission CGS 17a-506**
  - Voluntarily signs into a hospital
  - May be held up to 3 business days after written request to leave
- **Involuntary Commitment C.G.S 17a-498(g)**
  - Clear and convincing evidence that the individual has psychiatric disabilities **and**
  - Dangerous to self, is dangerous to others, or is gravely disabled
  - No less restrictive placement is available
  - Annual review



# Patient-Centered Care

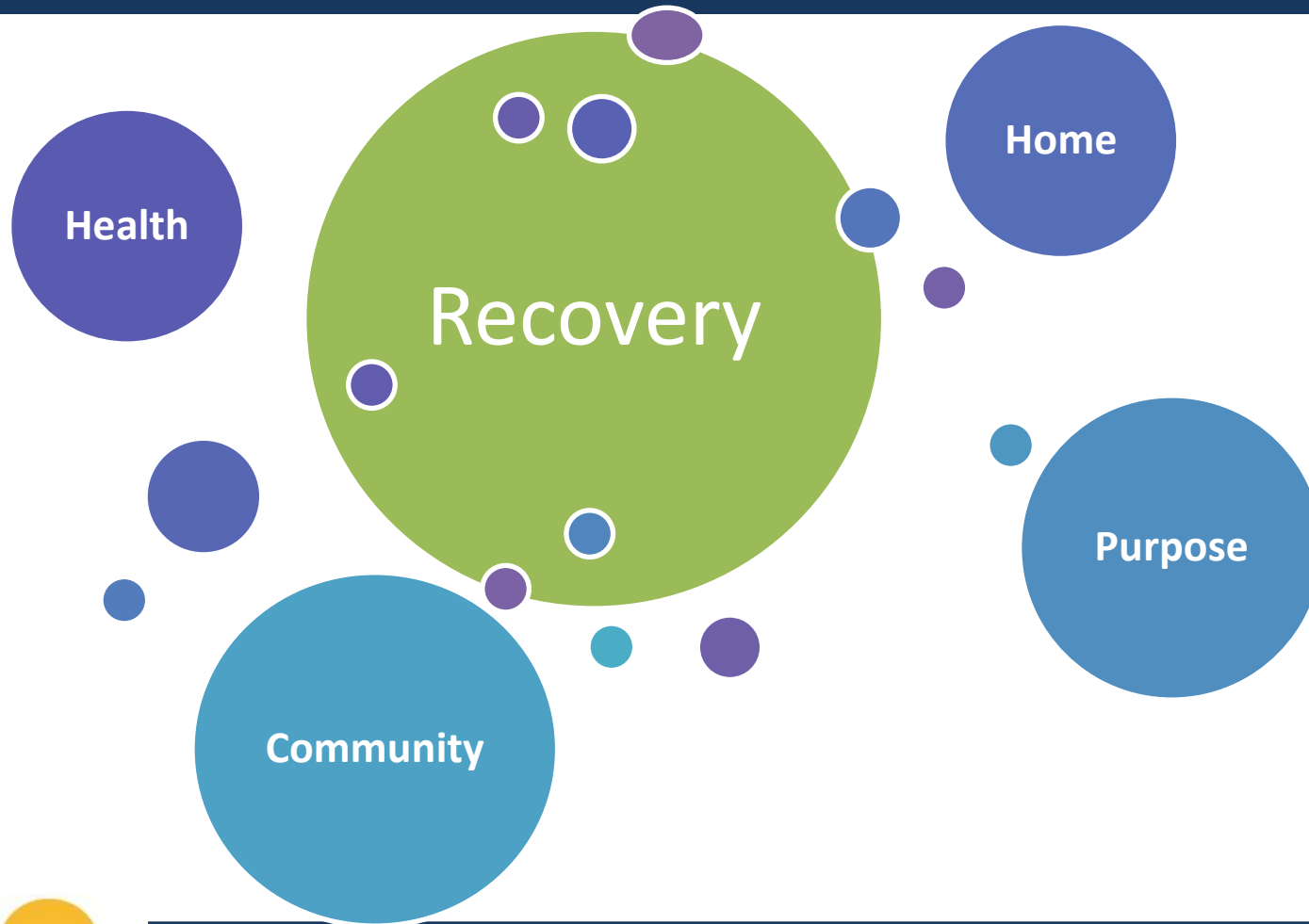


# Patient Services

- Medical and Psychiatric Care
- Group and Individual Therapy
- Integrative Medicine
  - Art and music therapy
  - Meditation and mindfulness
- Rehabilitation Services
- Spiritual Services
- Language Interpretation and Deaf and Hard of Hearing Services
- Family Support Groups
- Community Re-integration



# What is Recovery?



# Citizenship Learning Collaborative

- Citizenship Program assists individuals in recovery to develop the knowledge, skills, and abilities for successful community integration.
  - *Principles: The 5 R's of Citizenship: Rights, Roles, Responsibilities, Resources and Relationships*
- Focused on empowering individuals to become valued and productive members of their communities through strength-based value role projects
- Seven (7) trained Citizenship Facilitators
- Three (3) Recovery Support Specialist Positions

## **Examples of Recent Value Role Projects:**

*Riverfront Clean-up, Campus Beautification, Historic Society Planting/  
Beautification, Reservoir Environmental Support*



# Patient Demographics, 2018

## Race/Ethnicity:

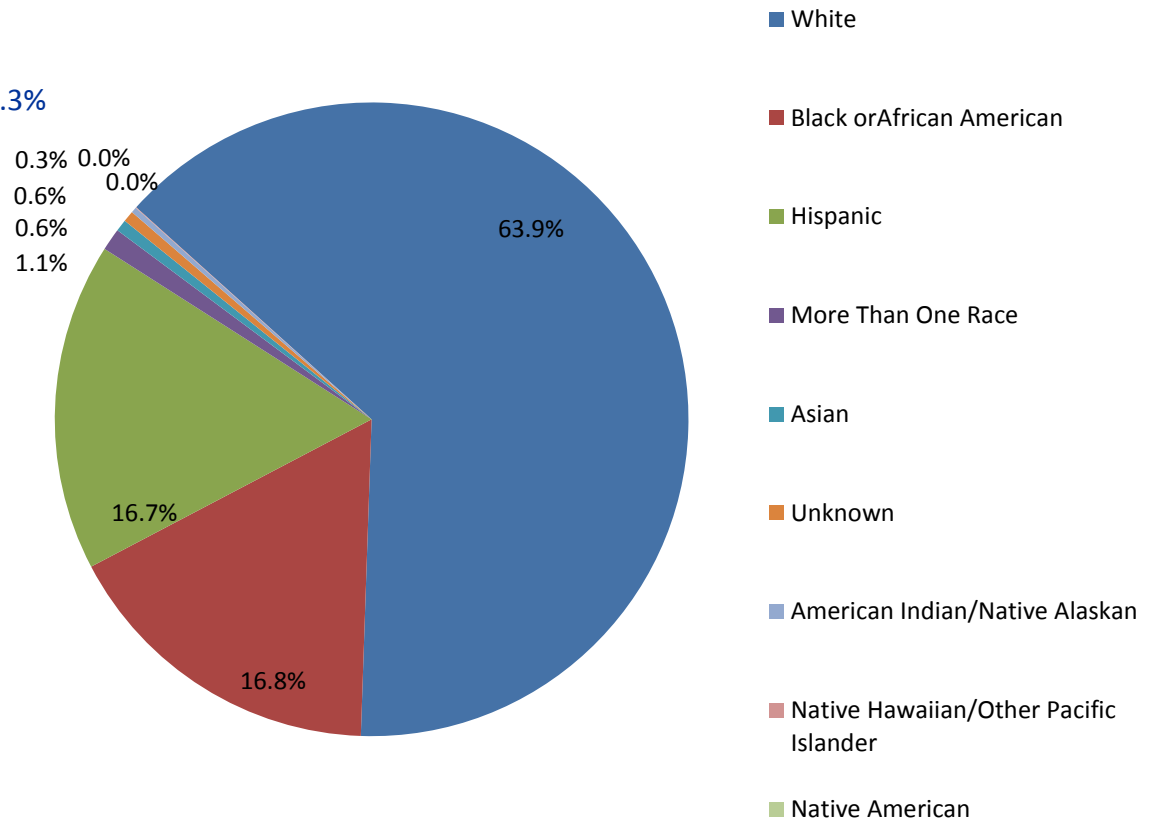
- White – 63.9%
- Black/African American – 16.8%
- American Indian/Native Alaskan - 0.3%
- Asian - 0.6%
- Hispanic – 16.8%
- Unknown - 0.6%

## Gender:

- Female – 28.2%
- Male – 71.7%
- Transgender - 0.1%

## Age:

- 18–25 – 6.9%
- 25–34 – 29.3%
- 35–44 – 23.7%
- 45–54 – 22.8%
- 55–64 - 14.8%
- 65+ - 2.5%



# Employee Demographics, 2018

## **Race/Ethnicity:**

- White – 49%
- Black/African American – 35%
- Latino/Hispanic – 8%
- Other – 8%

## **Gender:**

- Female – 61%
- Male – 39%

## **Age:**

- 18–29 – 5%
- 30–49 – 43%
- 50–69 – 51%
- 70+ – 1%



# Median Length of Stay (LOS), 2018

Division	LOS
General Psychiatry Division (GPD)	224 Days
Addiction Services Division (ASD) – <i>Rehabilitation Unit</i>	36 Days
Addiction Services Division (ASD) – <i>Detoxification Unit</i>	6 Days





# Number of Patients Served, 2018

Division	# Served
General Psychiatry Division (GPD)	323
Addiction Services Division (ASD) – <i>Rehabilitation Unit</i>	1,237
Addiction Services Division (ASD) – <i>Detoxification Unit</i>	1,855
<b>TOTAL FOR CVH</b>	<b>3,415</b>



# Orientation and Training

- New Employee Orientation
- Advanced De-escalation Training
- Milieu Management Training
- Collaborative Safety Strategies (Integrated an Enhanced De-escalation)
- Kaleidoscope Inclusion and Implicit Bias Training
- Code of Conduct In-Service
  - Language Matters Project - OUCH video: Hear Something, Say Something
- Abuse and Neglect Mandatory Reporter Training
- Citizenship Training
- History of Provision of Recovery Services
- Enhanced Hand-Off Communication
- Learning Management System (LMS)
  - Online system allows staff across the DMHAS system to access extensive training on-demand



# CVH Budget, 2017-2019

SID	SID Description	2017	2018	2019
10010	Personal Services	\$138,429,048	\$122,015,931	\$91,640,943
10020	Other Expenses	\$12,274,000	\$11,052,546	\$7,575,567
12207	Professional Services	\$4,452,115	\$3,813,655	\$3,020,549
12250	Young Adult Services	\$5,578,291	\$5,071,430	\$5,188,106
12289	Behavioral Health Medications	\$4,5510,360	\$4,420,631	\$3,251,312
12292	Prison Overcrowding	\$487,221	--	--
<b>Total</b>		<b>\$165,731,035</b>	<b>\$146,374,193</b>	<b>\$110,676,477</b>

*A separate budget for Whiting Forensic Hospital was created as a result of its separation from Connecticut Valley Hospital on May 1, 2018*



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# Current Key Performance Indicators

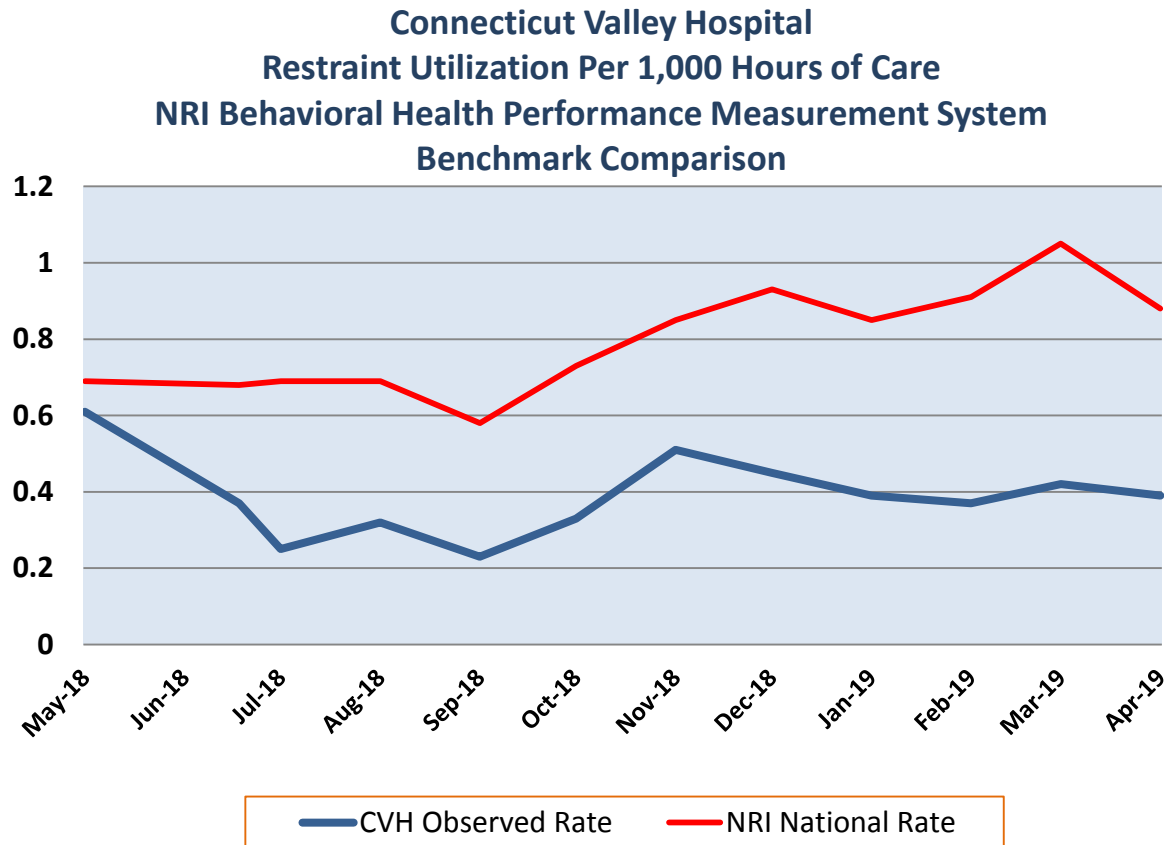
## Quality Assurance Process/Quality Improvements

1. Restraint Events
2. Seclusion Events
3. Allegations of Abuse, Neglect, & Exploitation
4. Aggressive Acts to Others
5. Aggressive Acts to Self



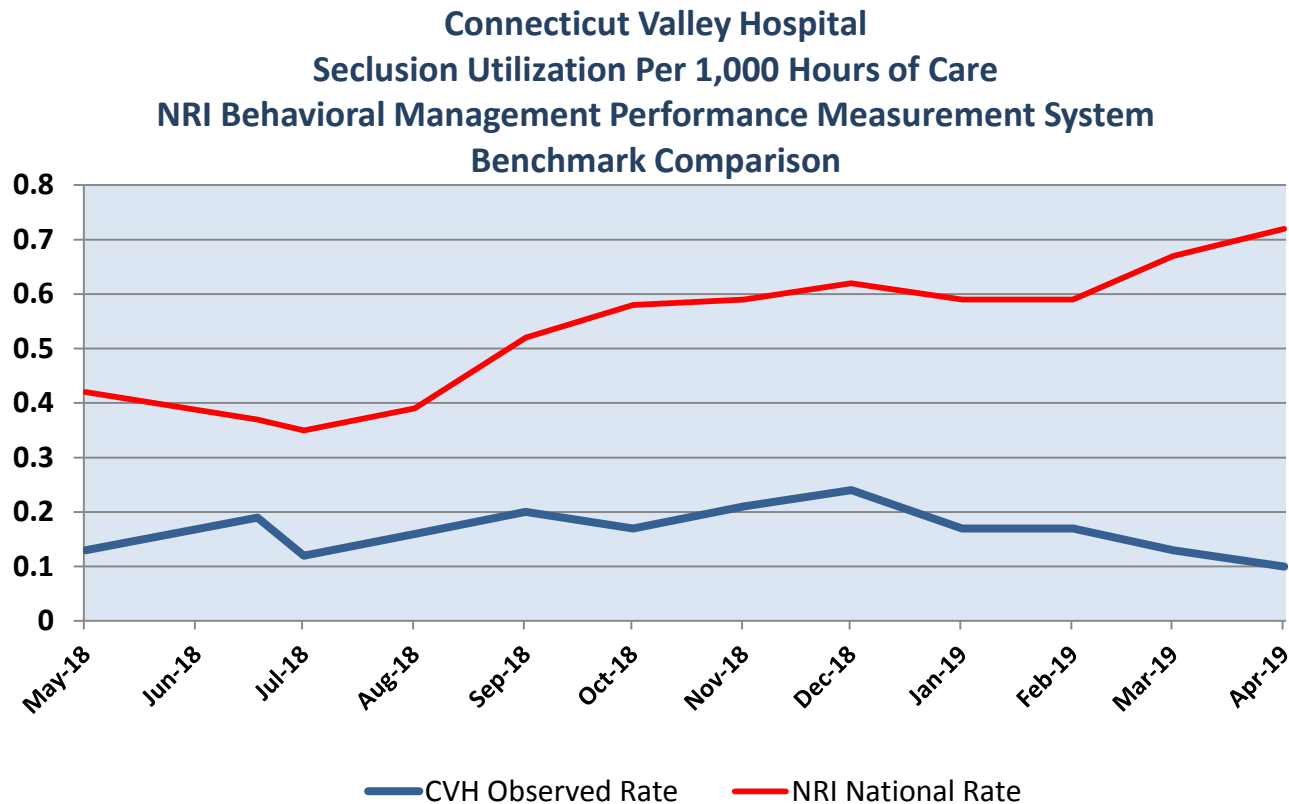
# 1. Restraint Data

## May 2018 – April 2019



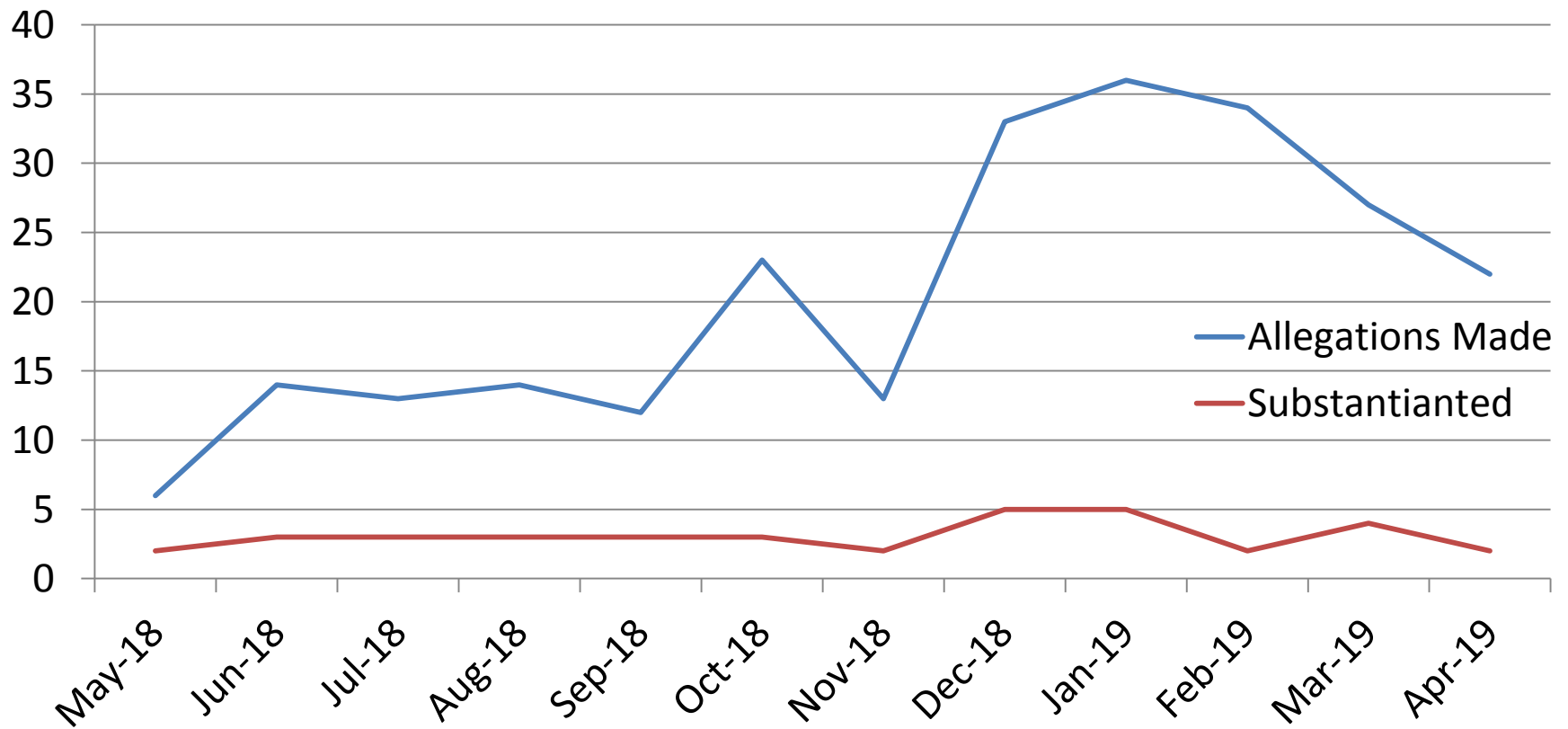
# 2. Seclusion Data

## May 2018 – April 2019



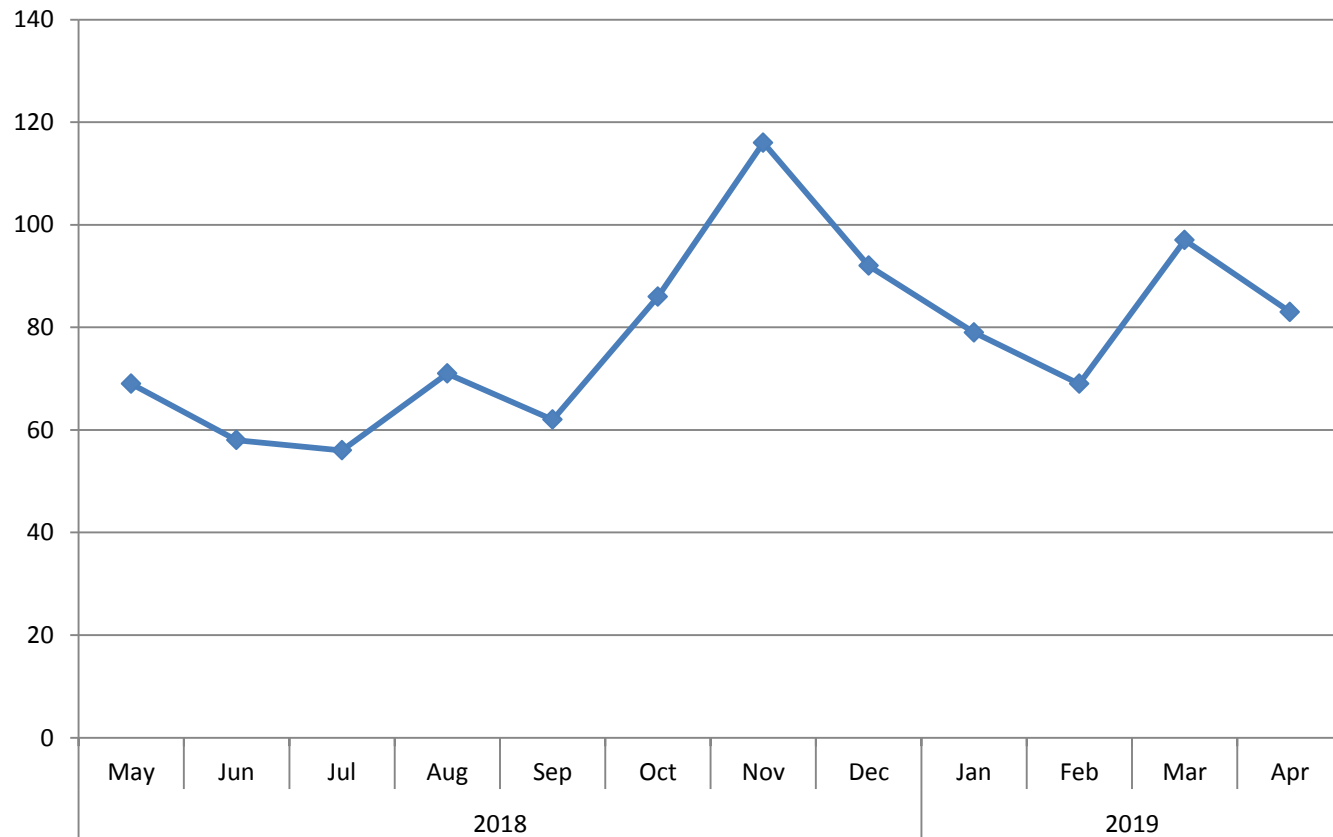
# 3. Allegations of Abuse, Neglect & Exploitation

## May 2018 – April 2019



# 4. Aggressive Acts to Others

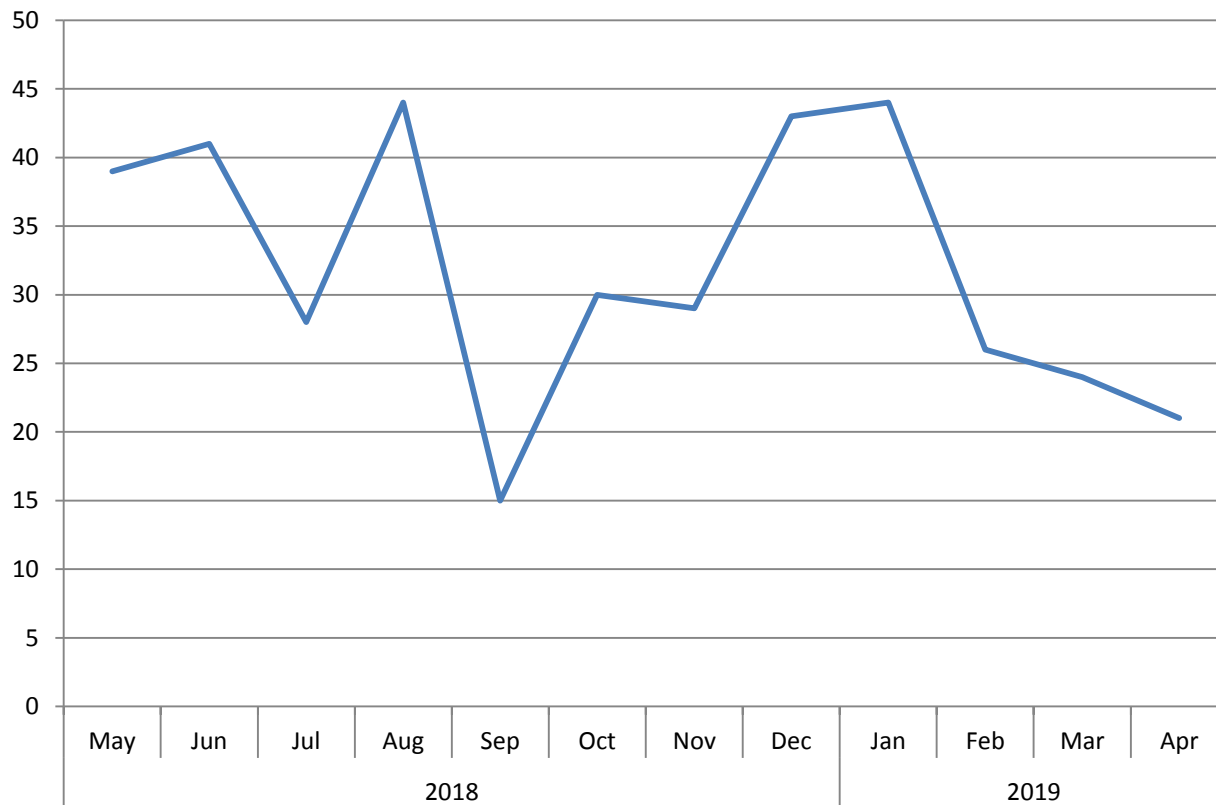
## May 2018 – April 2019





# 5. Aggressive Acts to Self

## May 2018 – April 2019



# *Connecticut Valley Hospital*



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