

State of Connecticut  
GENERAL ASSEMBLY



CVH WHITING TASK FORCE

MEETING SUMMARY

Co-chairwoman Linda Schwartz convened the meeting.

Ms. Schwartz noted that the task force would need to identify meeting dates for the next few months because it will be hard to book hearing rooms once Session begins in February. She also stated that members must begin following Robert's Rules of Order as best they can and wait to be recognized by the task force chairs before speaking.

William Wynne, Chairman, Whiting Forensic Advisory Board presented:



Mr. Wynne presented his testimony, and introduced Eugene Hickey, a clinical social worker and member of the Whiting Forensic Hospital Advisory Board.

Mr. Hickey stated that he has been a member of the Advisory Board since 2013. His past experiences include 39 years of working at the Institute of Living, and prior to that he worked in the division of psychiatric medicine in the state of Massachusetts. Mr. Hickey stated that during his tenure as a member of the Advisory Board, meetings have only consisted of overviews of various administrators and presentations of standard hospital quality measures.

Ms. Schwartz asked if statute authorizes the Board's existence.

Mr. Wynne answered that the Board is authorized by Connecticut General Statute 17a-565. He added that each member is appointed by the Governor to a four year term.

Ms. Schwartz asked what their responsibility is as an advisory board.

Mr. Wynne stated that the board is only mandated to be a consultative advisory board.

Ms. Schwartz expressed that she finds it troubling that the Board needed to request information through the Freedom of Information Act (FOIA) for an institution that they're supposed to be advising.

Mr. Lawlor noted that many boards in statute have vague powers, and some have more authority than others. He asked Mr. Wynne and the Board to specify explicit powers that the board believes they should have so that the task force may make recommendations them to the legislature in their final report, which is due in January, 2021.

Mr. Lawlor asked Mr. Wynne if members had to be approved by the Executive and Legislative Nominations Committee before being appointed to the Board.

Mr. Wynne answered that members did not have to sit in front of the Executive and Legislative Nominations Committee.

Mr. Lawlor expressed that one of the task force recommendations could be that members be approved by the Nominations Committee which would raise the Board's status.

Mr. Wynne stated that the tenure of the meetings have begun to change since the incident at Whiting Forensic Hospital. The Board is now trying to look behind the reports they routinely receive and find rationales of why they receive each particular report. He relayed that in addition to not learning about the Whiting incident from the hospital, the Board also did not know that complaint reports of patient abuse were generated by the Department. They received these documents when they requested incident documents through FOIA. Since learning of the reports, the Board has requested that they receive them on a regular basis, which they have.

Mr. Lawlor asked about the frequency and location of the Board meetings.

Mr. Wynne answered that the Board meets four times a year at Whiting Forensic Hospital.

Mr. Lawlor asked if the Board has staff that sends out meeting notices or takes meeting minutes.

Mr. Wynne answered that the secretary of the administrative assistant of the Director of Whiting sends out meeting notices and takes minutes. He noted that she does a fantastic job.

Mr. Lawlor asked if the Commissioner of the Department of Mental Health and Addiction Services (DMHAS) is a member of the board and whether she attends the meetings.

Mr. Wynne stated that the commissioner faithfully attends the meetings, and on the very rare occasions she has not, she always sent a proxy.

Mr. Lawlor noted that the Board may run into Health Insurance and Portability Accountability Act (HIPAA) considerations, although he is aware that there can be exemptions. He asked Mr. Wynne if he has any recommendations so HIPAA laws would not be an obstacle in receiving information before incidents occur.

Mr. Wynne suggested that the responsibilities of the Board need to be more clarified than they currently are. He added the Board is not tasked with supervising or dealing with complaints of patient abuse and take no part in investigations.

Ms. Schwartz asked if Mr. Wynne ever approached the person who nominated him with the concerns expressed today.

Mr. Wynne said that he had not reached out to the governor. He added that he became chairman of the board in 2017, shortly thereafter the Whiting incident came to light. Since then, the board has been trying to find its feet and members have had many discussions in trying to identify their role.

Ms. Schwartz asked if Mr. Wynne or Mr. Hickey could state their responsibilities once more.

Mr. Hickey stated that when the Board did advise the hospital, it was not at the patient level but at the broader policy level. The recommendations given were in response to the reports received.

Ms. Shwartz asked if meeting minutes are required and whether the Board is required to produce a report.

Mr. Wynne answered that meeting minutes are required but they are not required to produce a report. He stated that even though it's not statutorily required, in light of the developments, members discussed and decided to issue their own report. He added that the Board would welcome such a requirement.

Ms. Schwartz encouraged the Board to clearly lay out what is needed so that they me be relied on for help. She added that she does not find it helpful that the Board must FOIA the commissioner, who is a sitting member, for information.

Ms. Hauser asked about the impetus of the creation of the Board.

Mr. Wynne answered that the legislation for the Board has been in existence since Connecticut Valley Hospital (CVH) was in existence. It was originally created in 1973, which was just prior to the creation of Whiting Forensic Hospital.

Mr. Lawlor clarified that the statute dates back to 1957, but in 1973 there were changes to the statute such as replacing the word "Institute" with "Center" and items of that nature. For as long as Whiting has existed, there has always been some type of an advisory board.

Ms. Hauser asked if any board members have a forensic background.

Mr. Wynne stated that some members do. The statute required that two of the board members be psychiatrists, one psychologist, two attorneys, one of whom must have experience with criminal matters, and he himself has represented institutionalized patients since 1989.

Dr. Rodis commented that Mr. Hickey alluded to the type of things the Board was asked to do in their tenure, but asked if he could provide specific examples.

Mr. Hickey stated that members made suggestions on things presented to them, such as dealing with patient falls, transferring patients from one unit to another, nothing of a substantive nature.

Dr. Rodis stated that Mr. Hickey also alluded to the fact that meetings weren't patient related, and asked if they were financially related.

Mr. Hickey stated that some things had to do with programmatic changes that were being made in the facility and keeping with the recovery model and involving patients more with day to day functioning of the hospital.

Mr. Wynne commended Mr. Hal Smith, Chief Executive Officer of Whiting Forensic Hospital, and stated that things have been improving during his tenure at the hospital. He added that Mr. Smith has been very candid with the Board and recognized the problems they had with the administration and has been very proactive in providing information to the Board. He stated that it is still not 100% satisfactory, but the Board has been acutely aware and has recognized the improvement. In the past, the Board has not had a voice in the formulation of policy or changes to the policy but are rather handed policies. Mr. Wynne recounted that he was a member of the Board when CVH and Whiting were separate hospitals, when the hospitals merged, and when they separated again, and members were never advised about these changes but were presented with it after they were already decided. He expressed that members would like to have more statutory power so they could at least have a voice in the formulation of this policy.

Ms. Schwartz asked if the meeting minutes reflect the recommendation of additional authority.

Mr. Wynne answered that the meeting minutes reflect this recommendation and added that minutes are always extremely accurate.

Ms. Schwartz noted that when annual audits are performed, auditors review meeting minutes and if members weren't receiving answers, then that would have been a way to convey to a higher authority. She added the task force hopes to move forward with the recommendation of giving the Board more authority, but in case that does not happen then the Board needs to understand the parameters of their authority and responsibility.

Mr. Acker asked whether members were part of the audit at Whiting.

Mr. Wynne answered that members have never been contacted by the auditors.

Ms. Schwartz clarified that members only look at the meeting minutes for their audits.

Ms. Acker expressed that he would recommend someone with lived experience in the mental health system, possibly someone who has been through both Whiting and Dutcher, to be a member of the Board. This may be someone who has been transferred out of the hospitals and can now provide firsthand experience. He added that one of the statutory recommendations could be that as part of your function, the Board reaches out to patients.

Mr. Wynne proclaimed that members would welcome that requirement.

Mr. Lawlor conveyed that recently, the Connecticut General Assembly changed the rules governing the Criminal Justice Commission, which is similar to the Board. He added that this governance required that the Commission holds their meetings at the Legislative Office Building, and that they be open to the public. Mr. Lawlor added that a change of venue that is more hospitable to groups may be helpful in enhancing the status of the Board and provide them better access to information.

Ms. Schwartz recounted that in her experience, meetings are open to the public and meeting minutes are also available for public review. She added that the task force is in the mode to strengthen the Board's role and give them the tools and authority, which could help in getting ahead before any damage could occur.

Mr. Wynne invited task force members to review the Board's meeting minutes following the announcement of the Whiting incident. He stated that the Board had to have a special meeting, and minutes will reflect member displeasure of the incident. Mr. Wynne added that members found out about the incident from the news, at which point they asked for a copy of the report but were refused and were told they needed to request the report through FOIA.

Ms. Schwartz asked if the Board has given any thought as to their suggestions for improving patient experiences.

Mr. Wynne again applauded the work of Mr. Hal Smith. From the Board's perspective, Mr. Smith has increased supervision of wards, has instituted more organization such as having ward supervisors present on ward grounds, and the Board is now meeting many directors.

Mr. Hickey expressed that in his opinion, when he thinks of Whiting, he thinks of a system that is more prone to be withholding information rather than a forensic psychiatric hospital in the public sector.

Dr. Rodis asked if the Board has any input or an advisory role in fiduciary responsibilities.

Mr. Wynne stated that the statute does not give the Board that power. Members have only received reports as to how the overall budget has been affected through the years.

Ms. Schwartz asked Mr. Wynne and Mr. Hickey if they have anything else they would to discuss.

Mr. Wynne thanked the task force for inviting them to speak, and added that the Board itself has been trying to adjust and work in improving itself.

Mr. Lawlor conveyed to Mr. Wynne and Mr. Hickey that the task force is trying to organize meetings with patients at the Dutcher and Whiting hospitals. He asked if the Board has done anything similar in trying to get patient input, and asked for their opinion on such meetings.

Mr. Wynne answered that such meetings have not occurred during his tenure on the Board, but would welcome them.

Mr. Lawlor hoped that the task force can set a precedent so that in the future the Board can directly meet with patients. This would help build confidence among consumers, staff and patients. He thanked members of the Board for serving over the years.

Ms. Scwhartz proceeded to the selection of future meeting dates and asked that task force members give their availabilities and preferred days to meet for the next three months.

Members decided that the next meeting dates to be held at the Legislative Office Building will be on November 21, 2019 from 12:00 to 3:00 PM and January 9, 2020 from 1:00 to 3:00 PM.

There will also be a task force meeting on December 13, 2019 from 1:00 to 2:15 PM and it will take place at Connecticut Valley Hospital. This meeting will be open to the public, however, immediately after task force members will attend a patient steering committee meeting at Dutcher Hall from 2:30 to 3:30 PM which will not be open to the public.

Ms. Schwartz proceeded to discuss invitation of future guest speakers and noted that Ms. Alisberg suggested that the task force invite Monte Radler of the Public Defender's Office to present to the task force. She also asked whether DMHAS is able to have any individuals who would be able to present to the task force on training provided to employees.

Mr. Lawlor suggested that the task force should also invite a representative from the State Attorney's Office, Division of Criminal Justice, so the meeting could be balanced. He noted that John Russotto would be the appropriate contact to designate a representative from the Division to present at the meeting.

Ms. Hauser asked if the task force should invite 1199 New England.

Ms. Schwartz answered that 1199 should be invited as members would like to know their insights and response to the situations.

Mr. Acker suggested that the task force also look into employee working conditions and discrimination.

Mr. Lawlor stated that at some point, the task force would invite input from the people who are affected and have been impacted by Whiting, whether it's the patients, families, employees or advocacy groups. They will have the opportunity to share their insight before the task force makes any recommendations to the legislature.

The co-chairs of the task force suggested that there be an informational forum and a public hearing in the future, respectively. They also suggested that the task force may meet at a different public location during the months of February and March since the legislative session begins in February and hearing rooms at the Legislative Office Building will be mostly unavailable for non-committee business.

Dr. Rodis offered to host the meetings at Saint Francis Hospital in Hartford.

The task force agreed that the agenda for the November 21, 2019 meeting include Monte Radler from the Public Defender's Office, a representative from the State Attorney's Office, and a representative of DMHAS with knowledge of employee training. The agenda for the December 13, 2019 meeting will be based on discussion on how the task force will move forward with their charge, and 1199 New England will be invited to the January 9, 2020 meeting.

Ms. Schwartz noted that Shaun Mastroianni, who was a member of the task force and appointed by Minority Leader Rep. Klarides, has resigned because he moved out of state.

Task force staff informed members that the appointing office has been informed of his resignation and the office is now in the process of searching for an appropriate appointee.