

Hello, I'm Susan Sampl. I'm a Clinical Psychologist, and the Chair of the Psychology Department at Whiting, where I've worked for just under four years. I have many years of experience providing mental health treatment to individuals in CT with serious psychological disorders.

I'm here to tell you about many stories I've witnessed, and played a role in, here at Whiting, which go along the following lines. It starts when a person in the community experiences significant mental health symptoms and difficulties which worsen, often in part due to difficulties obtaining care. Next, a serious criminal act occurs, often violent in nature. This is "the index offense". Not infrequently, the victim is one of the individual's loved ones.

Ultimately, this individual comes to Whiting as an NGRI acquittee with little understanding of what led to the index offense, and with feelings of sadness, confusion, isolation and loneliness. Whiting staff of varied disciplines work very actively with such individuals to make sense of what happened and to begin to restore a sense of hope. This work includes high quality individual and group psychotherapy, skilled assessment, efforts to engage family supports, when available, and skillful use of psychiatric medication. We provide a wide range of psychotherapy groups designed to increase individuals' understanding of the factors that led to the index offense and to prevent future aggression through improved coping. We also offer many groups designed to increase overall health and to reduce isolation. We seek to identify and build on each individual's strengths. We offer a number of specialized assessment and treatment services, including for individuals with problem sexual behavior, for pathological fire setting, for behavioral intervention, and a neuropsychological assessment and consultation service.

My colleagues and I are highly invested in moving individuals through our system, from the Whiting maximum security service, to the Dutcher transitional service, and to community settings, within PSRB guidelines. I have seen many individuals we provided care to at Whiting develop insight into what happened, grieve the related losses, develop a renewed sense of meaning, and move successfully through our system back into and toward the community. When we are unable to successfully accomplish these transitions, we are equally as frustrated as are the individuals who get stuck or set back. In such cases, we work very hard to identify and address the complicating factors and to come up with innovative and individualized plans, to allow them to begin or continue their forward process.

We provide a similar level of expert assessment and treatment to individuals who are hospitalized here at Whiting for competency restoration. The staff members on our competency units work collaboratively to help restore patients to competency where possible, and to develop alternative dispositions for those who are not able to be restored within expected parameters.

I decided to testify to this task force because I wanted to let you know that there are many dedicated professionals here at Whiting who take our work in providing care to this population very seriously, and in my opinion, there are also many individuals and their families who have benefitted from this care. Thank you for allowing me to talk about this experience.