Co-chairwoman Linda Schwartz convened the meeting. She remarked that the Connecticut Judicial Branch will not address the Psychiatric Security Review Board (PSRB).

Natasha Pierre, JD, MSW, State Victim Advocate, Office of the Victim Advocate presented:

Natasha Pierre Presentation

Ms. Pierre gave an overview of the Office of the Victim Advocate. In the late 1990s, a national wave occurred granting rights to crime victims and their families. Prior, people were not made aware when a family member was a victim and oftentimes found out about it on the news. Ms. Pierre explained that the Office exists to only help those whose rights have been violated. Of note, she added that clients must come to them to ask for help before the Office acts.

Ms. Schwartz asked members if they had any questions, to which there were none.

Ms. Pierre stated that she had a question for the committee and asked what warranted a presentation from the Office of the Victim Advocate.

Ms. Schwartz answered that task force members wished to understand the process from the victim's point of view.

Valina Carpenter, Deputy Director, Office of Victim Services, Connecticut Judicial Branch presented:

Valina Carpenter Assistive Resources

Ms. Carpenter gave an overview of the services provided by the Office of Victim Services. Services include assistance regarding victim compensation, funeral expense coverage, hospital services for sexual assault victims, information on inmate movement, information on outreach to police officers, judges, to the public, and many other services.
Ms. Carpentered explained that the Victim Services Unit provides advocacy services to victims and their families in a variety of settings related to court cases, counseling, housing, and other assistance a victim may need following a crime. She added that two advocates at the Board of Pardons and Paroles work specifically at the parole process locating victims in order to help them. The Unit provides information to the victims about the criminal justice process. Victims are notified of their constitutional rights because those rights cannot be exercised if people are not aware of their existence.

The Office of Victim Services has a statutory obligation to victims of personal injury in sexual assault cases, non-domestic assault, DUI, home invasion and robbery, and homicide.

Ms. Hauser asked if Ms. Carpenter had a sense whether victims are satisfied with PSRB decisions.

Ms. Carpenter noted that she will give the same answer to the task force that she would give in court. She answered that sometimes people aren't necessarily satisfied with the outcome, however, what goes a long way is the notification process. People are satisfied with the process because they are given enough information to be able to speak and give their input.

Ms. Hauser asked if the probate court has a similar notification system.

Ms. Carpenter answered that they do not.

Ms. Hauser asked if it is possible that there could be one in place.

Ms. Carpenter answered that it all has to do with having a physical person doing the notification, or for the probate court to be a part of a computerized application.

Lori asked — do u know if there's any system of notification with the probate court - do they have a similar system of victim notification

Dr. Rodis asked at what percentage are victims present during PSRB hearings regarding status change of the perpetrators.

Ms. Carpenter suggested that the question be addressed to PSRB because the Victim Services Unit are not there for the hearings. They do not have such a statutory charge and only work with victims in court settings.

Ms. Hauser stated that she has testified at numerous PSRB hearings and victims were present during only two of those hearings.

Chris Fontaine, Registered Nurse, Dutcher Service presented:

Chris Fontaine Presentation

Mr. Fontaine is a Registered Nurse at Whiting and presented his views on how staffing is impacting patient care. He stated that the hospital approach has always been to run the facility with the bare minimum of staff. Mr. Fontaine noted that even with mandated staffing, the facilities remain short staffed.
Mr. Fontaine explained that low staffing can create a chain reaction of negative outcomes. Patients can go outside twice in the first shift, and twice in the second shift. When staff isn't available to go outside with them, it aggravates the patients which can deteriorate and trigger patient behavior and escalate it to a point where the patient requires one on one time with a staff member to deescalate the situation causing even lower staffing. Additionally, Licensed Practical Nurses (LPN) are utilized as RNs. LPNs cannot perform independent assessments of patients due to their scope of work. When they perform assessments, RNs must reassess their evaluations to confirm what they presented about the patients is accurate.

Mr. Fontaine concluded that short staffing is a disservice to the patients, it creates a strain among staff and inhibits staff to quickly respond to patient needs.

Rebecca Simonsen, Vice President, District 1199, SEIU presented:

Rebecca Simonsen Presentation

Ms. Simonsen stated that SEIU, District 1199 represents 26,000 healthcare workers including 500 mental health professionals at Whiting and Dutcher. Ms. Simonsen focused on three areas of concern that require immediate attention. First, the Department faces systemic staffing and service shortages, second the Department lacks adequate staff training, and third the Department enforces a punitive disciplinary culture rather than corrective.

Ms. Simonsen explained that even before the Covid-19 pandemic, years of DMHAS budget cuts led to a staffing shortage of over 500 positions, 46 of them at Whiting. The shortages directly result in staff burnout, diminished morale, and reduced services to patients. SEIU 1199 members frequently communicated to management that short staffing causes serious disruption to patient routines by shifting mealtimes and breaktimes, or by rescheduling appointments and posing obstacles to patient treatments and progress.

Ms. Simonsen continued to discuss the inadequate staff training and enforcement of punitive rather than corrective disciplining of staff. In an instance when a staff member employs a restraint, the staff is not invited to review the security camera footage of the restraint with a trainer for real-time education on improving techniques and outcomes for the patient. Instead, management investigates the staff member, during which time they cannot work. Employees have unsuccessfully requested more in-person training on verbal de-escalation techniques, verbal engagement strategies and other non-restraint interventions for patients.

Darion Young, FTS, Whiting Max presented:

Darion Young Presentation

Mr. Young expressed fear of retaliation that is created and propagated by the punitive disciplinary actions of management at Whiting. As a result of the punitive process in place, staff is afraid to deploy restraints or attempt any physical de-escalation. He added that there is a constant fear that if staff attempts physical de-escalation, they will be investigated, punished, or fired. This fear makes it incredibly hard to perform their jobs properly and keep the patients safe.
Mr. Young emphasized that Whiting must find ways to become more training oriented rather than punitive in nature.

Dr. Rodis referenced Ms. Simonsen comment about the 46 vacancies at Whiting. He asked about the root cause the vacancies occurred and the challenges to fill them.

Ms. Simonsen stated that the root cause has been a concerted effort to not fill the vacancies. She noted that's not the case only at DMHAS but also in other state agencies. She added that the real issue is failure of retention of quality staff which starts with low salaries.

Ms. Avery Pittman, an organizer with the union, was present at the meeting to answer any questions the members may have. She answered that underfunding of DMHAS means an underfunding of the Human Resources Department. This leads to a staff shortage and the ones who are employed are trying to keep up with the flow of resignations, retirements, and a high turnover of employees in general which may cause a delay in filling vacancies.

Ms. Hauser explained that Hal Smith, Chief Executive Officer of Whiting Forensic, at a meeting with staff showed them a survey regarding videos. She added that out of thousands of videos, only a handful went on to an investigatory level, and that most staff act appropriately. Ms. Hauser expressed that it is important for staff to be able to be applauded for a job well done and advised on actions that can use improvement.

Mr. Lawlor stated that in the judicial sector, employees are given constructive criticism and advised on how to perform better in the future which they find very helpful.

Ms. Simonsen offered to provide the task force with specific examples of training that may be helpful to staff.

Ms. Schwartz accepted the offer.

Members discussed extensively the scheduling of future meetings and their virtual nature. Task force staff informed members that any meeting, including public hearings which typically take place at the LOB, can now be virtual.

The task force unanimously decided that virtual task force meetings will take place every other Tuesday and will begin at 1:00 PM. The next meeting was scheduled for Tuesday, August 11, 2020 at 1:00 via Zoom Videoconference.