Just the thought of asking a boss questions about what he should be doing at his job made Kevin so uncomfortable he wouldn't apply for the job in the first place.

“It’s better to ask questions than make a mistake, but I wouldn’t have been able to do that before,” he said in a room off of the Institute of Living (IOL) Gift Shop, where he has been working a few hours a week for about six months.

He is not alone, according to Patricia Wardwell, a vocational therapist with the Department of Psychiatric Vocational Services who works in the gift shop with Kevin through the Work Skills Training Program. She described the program as a supportive employment opportunity created to help IOL clients ease into the workforce while seeking treatment.

“Some workers just need to develop confidence before pursuing community employment. Others need to practice social skills or work on strategies to become successful at work. Sometimes, just having a little bit of success can give someone enough self-confidence to take that next step toward working in the community, something they would not
attempt without it,” said Tammy Petrik, a vocational counselor.

Program Manager Laura Mathews said there are three work sites on the IOL property that employ clients. In addition to the gift shop where Kevin waits on customers, stocks shelves and prices and sorts item, Psychiatric Vocational clients work in the seasonal greenhouse, growing vegetables and herbs from seed and then selling them on campus, and in the cafeteria where they work with employees and visitors, as well as in the back washing dishes and preparing food.

“The staff works with clients to train them and offer insight into real work experience in a safe, encouraging environment,” Mathews explained. “For many clients, it’s their first paid work experience, while others need the support and guidance to reenter the job market.”

On average, there are 20 vocational employees working across the three sites at any time. Employees come from various IOL outpatient and residential programs. There are also opportunities for Grace Webb School students to earn credit for working. According to Wardwell, to participate in the program, clients must continue to see their IOL clinician at least once per week to ensure open line of communication for the best outcome.

In some of the clinical programs, a vocational counselor also provides vocational groups for additional support and education about job-related issues. The collaboration of vocational and clinical staff help clients reach their goals.

For the 25-year-old Kevin, who lives on the IOL campus and is part of an outpatient program, working in the Gift Shop is helping him hone in on plans to work off campus, perhaps in a grocery store because he enjoys stocking shelves, and eventually go to college.

“We always keep in mind to meet individuals where they are, to create the just right challenge to start,” said Wardwell. “We stress two things above all else — ask lots of questions and try your best.”

But Kevin has gained more skills than that in just a short time.

“I can count on Kevin to complete all work tasks required to run the gift shop,” Wardwell noted. “He’s very independent and has gained a great sense of confidence and self-esteem in the work place.”

A few days after he started an associate, she said the shop team gradually increased the challenges he faced, such as having a new supervisor there when he arrived. Such challenges mimic real work environments to prepare him for competitive employment.

Kevin was unfuddled, however, and noted that, “I try new tasks and try to figure things out for myself.”

In the program, and with the help of community agencies like Easter Seals, clients also create a resume and get help applying for jobs beyond the IOL. The result has been an 80-percent success rate for clients seeking and maintaining jobs in the community, earning the department an Hartford HealthCare Full Circle Award.

Seton Benjamin of Hartford has been working long enough in a job at an area Staples that she was promoted to a managerial position. Hospitalized at the IOL for 10 months in 2018, she worked in the gift shop then the dish room at the cafeteria.

“The work was tailored to what I could do,” the 28-year-old said. “I started only one day a week because I was in an intensive outpatient program to work on my crippling anxiety, borderline personality disorder and bipolar disease.”

The Psychiatric Vocational program helped prepare her to return to the workforce, even though she had been unemployed for more than a year.

“They set me up properly to determine what I needed and didn’t need so I would be able to work,” she said.

For more information about the Psychiatric Vocational Program at the Institute of Living, go to https://instituteofliving.org/programs-services/psychiatric-vocational-services.

Nominations sought for Nightingale awards

Each year, Nightingale Awards for Excellence in Nursing are given to those nurses who go beyond the call of duty, demonstrate clinical excellence, are committed to the community and support the nursing profession. The awards are organized by the Visiting Nurses Association to celebrate outstanding nurses and the nursing profession as a whole.

This year, the deadline to nominate nurses from Backus, Windham, Natchaug and Rushford for the annual Nightingale Awards is Sunday, Feb. 17. Nominees will be asked to participate in an interview and provide a short biography, and a selection committee of Nightingale nurses from 2018 will choose the recipients. Winners will be recognized at the annual Nightingale Awards ceremonies in May.

Award recipients are selected using objective criteria that demonstrates their clinical excellence, experience, community involvement, education, teamwork and patient satisfaction efforts.

Nominations can be sent to:
- Rushford: justin.sleeper@hhchealth.org
- Natchaug: gale.sullivan@hhchealth.org

Nominations sought for Nightingale awards
As parents, we want the best for our children — limitless opportunities to pursue and enjoy a happy life — but, in reality, much of our hovering and fretting does them more harm than good.

Eli Leibowitz, MD, of the Yale Child Study Center presented, “The Role of Parents in Childhood Anxiety” as part of a recent Grand Rounds educational session for providers at the Institute of Living. His assessment?

“We need to give children the opportunity to learn to cope.”

Noting that research supports direct connections between parenting styles and a host of childhood anxiety disorders — phobias, panic, separation anxiety, obsessive compulsive disorder and social anxiety — Dr. Leibowitz said there is also biological evidence that parental involvement impacts a child’s behavior.

One study used functional MRIs to scan the brains of children twice — once when their mother was with them and once when they were alone — and found a “dramatic difference” in activity in the amygdala, the portion of the brain that regulates emotions.

“The children most affected by their mom’s presence were found to respond most strongly to the level of parent accommodation,” he explained.

Accommodation, he said, is described as ways the parent reacts and enables the child’s anxiety. Childhood anxiety, he said, is “inherently a group response” because the anxious child will cry and cling to a parent, triggering an accommodating response such as:

■ Answering repeated questions
■ Sleeping near the child
■ Maintaining a rigid schedule
■ Answering questions for them

“I use the metaphor of a minefield,” he said. “How do you behave in a minefield? You take as few steps as possible. Anxious children will forego any number of potentially positive experiences to avoid a potentially negative experience.

“In a minefield, you will also step where you’ve already stepped before because it’s safe. Children with anxiety tend to be adverse to change.”

Instead of allowing a child to skip a social activity because they are anxious they won’t fit in or have fun, he suggested a more supportive, encouraging approach outlined in the technique SPACE (Supportive Parenting for Anxious Childhood Emotions).

“More supportive responses to the child’s anxiety conveys an acknowledgement and acceptance of the anxiety but encourages the child to handle it,” Dr. Leibowitz said. “Say something like, ‘It is scary, but I know you can cope.’”

In addition, he suggested the following steps, per the SPACE practice, for addressing a child’s anxiety:

■ Chart the way you accommodate the child so you can target an area to work on.
■ Plan and implement ways you can address your behavior.
■ Provide tools for coping with the child’s difficult or negative responses.

For more information about help for children with anxiety, go to [https://instituteofliving.org/anxiety](https://instituteofliving.org/anxiety).

---

**Overinvolved parents can trigger stress in kids**

Recognize moments that matter in four categories:

1. **Caught in the Act Award for Integrity**
   Nominate a colleague who you caught doing the right thing for someone in our care.

2. **Customer’s Choice Award for Creating an Exceptional Experience**
   Nominate a colleague mentioned in a letter, comment, or media story that came from someone who had such an exceptional experience that they felt compelled to share.

3. **Excellence in Practice Award for Continuous Improvement**
   Nominate a colleague who found a way to improve the experience for someone in our care through one of the Lean/H3W continuous improvement venues.

4. **Great Catch Award for Safety**
   Nominate a colleague who did the safe thing by catching an error and preventing harm to someone in our care.

**Nominations due no later than Feb. 15, 2019**

Eight regional finalists and one winner from each category will be honored at an awards ceremony in April.

Visit HHC Connect for nomination and eligibility details. Nominations submitted through Momentum.

---

**Introducing the HHC EMMie Awards**

Nominate colleagues who made a moment matter for those in our care — patients, residents, clients, families, visitors, and students in our schools.

---

**Caught in the Act Award for Integrity**

Nominate a colleague who you caught doing the right thing for someone in our care.

---

**Customer’s Choice Award for Creating an Exceptional Experience**

Nominate a colleague mentioned in a letter, comment, or media story that came from someone who had such an exceptional experience that they felt compelled to share.

---

**Excellence in Practice Award for Continuous Improvement**

Nominate a colleague who found a way to improve the experience for someone in our care through one of the Lean/H3W continuous improvement venues.

---

**Great Catch Award for Safety**

Nominate a colleague who did the safe thing by catching an error and preventing harm to someone in our care.
When Connecticut made the top 10 list for the number of opioid deaths by state for 2017, addiction experts at Hartford HealthCare were not surprised. “The data is tragic but not new,” said J. Craig Allen, MD, vice president for substance abuse services for the Behavioral Health Network, adding that several system-wide strategies were not in place in 2017. “A multi-modal, all hands on deck approach is what is needed to tackle an epidemic.”

The opioid epidemic was quantified by a state ranking by Becker’s Hospital Review based on data from the Centers for Disease Control’s National Center for Health Statistics. Connecticut ranked 10th with 27.7 overdose deaths per 100,000 residents. The most deaths were recorded in West Virginia with 49.6 per 100,000. In New England, Massachusetts, New Hampshire and Maine ranked higher than Connecticut, and Rhode Island ranked 11th.

Hartford HealthCare, according to Dr. Allen, has responded to the epidemic with such strategies as:

- Tapping its electronic health record for decision support, including best practice alerts, order sets and preference lists, default setting changes, display results for providers and Naloxone alerts to alert prescribing behavior.
- Expanding provider education with electronic learning modules, a system-sponsored opioid symposium, practice lunch and learns, and provider calls in the medical group to share best practices.
- Introducing — and continually expanding — a Medication Assisted Treatment Close to Home (MATCH) program to sites across the state to increase the number of patients receiving treatment and keep them engaged for longer periods of time in recovery.
- Offering telehealth support to treatment in which trained staffers reach out to patients at home to offer support and to facilitate treatment.
- Deploying certified recovery coaches in all hospital-based emergency departments across the system to offer treatment.
- Using the smartphone application Trycycle to identify patients at increased risk for relapse so staff can intervene quickly. The app also offers journaling and check-in capabilities that reinforce the recovery-oriented skills patients develop in treatment.
- Using recent grant monies, the system has partnered with community and municipal groups to allow first responders carrying and administering naloxone (Narcan), and promoted harm reduction strategies.”

Innovative programs are popping up across the system, he continued. In a Hartford Hospital pilot, for example, cardiologists and cardiothoracic surgeons are intervening with patients with endocarditis due to opioid use to help stop the cycle of early discharge and readmission.

“Our goal is to have a standardized approach to all substance use disorders in hospital-based settings and primary care sites across the system. It’s something we continue to work at,” Dr. Allen said, adding that increased support to primary care providers is essential to help them identify and intervene with patients before opioid use disorder leads to overdose.

The state ranking is a reminder, he added, that much work needs to be done to help people struggling with opioid use disorder.

“The goal is to save lives and decrease deaths and injury,” he said. “Seeing a flattening of the rise in annual deaths, a number that has gone up continually since 2012, is one parameter. Ultimately, we want to see the opioid overdose death rate drop significant.”

For more information on help for opioid use disorder at Hartford HealthCare, go to www.hhcbehavioralhealth.org/MATCH.
J. Craig Allen, MD, vice president for substance abuse services for the Behavioral Health Network, was featured in a Medical Rounds piece on the MATCH Program on Channel 3 recently. https://www.youtube.com/watch?v=YNqezBhPE&feature=youtu.be


For more behavioral health news updates, subscribe to the BHN’s e-newsletter on www.healthnewshub.org.

---

### Bonus cash on select vehicle purchases

Did you know that Hartford HealthCare employees are eligible to receive up to $500 cash back when they purchase or lease certain vehicles? Eligible manufacturers include Chrysler, Dodge, Jeep, Ram, Fiat and Hyundai.

For more information, visit [www.bonusdrive.com](http://www.bonusdrive.com), choose Hartford HealthCare as your organization, and complete the application.

---

### Multi-Family Group

**Allies in Recovery Model**

Join us for a support group focused on helping the parents, family members, caregivers and friends of those with addiction. Find support and understanding while also working to:

- Reduce pain, anger, & worry
- Gain skills proven to work
- Reduce substance use
- Get your loved one into treatment
- Improve your well-being

**Sundays from 10-11 AM**

Starting Dec. 2, 2018

**Rushford at Stonegate**

459 Wallingford Road, Durham, CT

For questions, confirmation, and all other inquiries please contact:

Peter Doria 860-349-2043 x308 or Lareina Lacz 860-349-2043 x303

---

### Do you have a Gold Medal Manager?

Nominate through Momentum or visit HHC Connect for details

Selected managers will be honored quarterly

---

### About BHNews

BHNews is published every other Friday. Story ideas or submissions may be sent to amanda.nappi@hhchealth.org or susan.mcdonald@hhchealth.org. Articles must be submitted as a Microsoft Word document. Every effort will be made to run the article in its entirety, but due to space constraints and style requirements, editing may be necessary.

The deadline for the next edition of BHNews is Tuesday, Feb. 19, at noon
Family Resource Center Support Groups

The IOL Family Resource Center (FRC) holds regular support groups. All programs are free of charge and, unless otherwise noted, are held in the Massachusetts Cottage, First Floor Group Room at the IOL Campus, 200 Retreat Ave., Hartford. The upcoming IOL FRC Support Group schedule is as follows:

- **Support Group For Those Coping With A New Or Chronic Medical Condition.** Feb. 8, 15, 22, March 8, 15, 22, 29. (Every Friday except the first of the month), 1 - 2 p.m. in the Center Building, first floor conference room. For young adults ages 17-26 struggling with a new diagnosis, chronic medical conditions, physical symptoms or limitations. The group will help with difficult losses and limitation due to a medical condition, and build a positive, future-oriented focus with realistic goals. To RSVP, please email marissa.sicley-rogers@hhchealth.org.

- **Depression Bipolar Support Alliance Group (DBSA).** Feb. 11, 18, 25, March 4, 11, 18, 25. (Every Monday), noon – 1 p.m. in the Todd Building, Bunker Room, Feb. 13, 20, 27, March 6, 13, 20, 27. (Every Wednesday), 7 – 8 p.m. in the Staunton Williams Building, Clark Social Room. Peer-run support group for those who have been diagnosed with depression or bipolar disorder.

- **Social Support Group — LGBTQ Issues (Lesbian/Gay/Bisexual/Transgender/Questioning).** Feb. 13, 27, March 13, 27. (Second and fourth Wednesday of each month), 5 – 6:15 p.m., in the Center Building, Young Adult Service Group Room. Support group for 16- to 23-year-olds who identify LGBTQ issues in their lives. The goal is to discuss support strategies to manage life challenges.

- **Hearing Voices Network (HVN).** Feb. 14, 21, 28, March 7, 14, 21, 28. (Every Thursday), 5 - 6:30 p.m. in the Todd Building, Bunker Room. Peer-run support group based firmly on a belief of self-help, mutual respect and understanding where people can safely share their experiences of voices, visions, unusual sensory perceptions. The groups offer an opportunity for people to accept and find meaning in their experiences that help them regain power over their lives.

- **Al-Anon Parent Group.** Feb. 14, 21, 28, March 7, 14, 21, 28. (Every Thursday), 7 - 8 p.m. One-hour topic discussion.

- **Substance Use Educational And Support Group.** Feb. 14, March 14, April 11, May 9, June 13. (Second Thursday of each month), 4 – 5 p.m. For family members impacted by loved ones with substance abuse.

---

**Institute of Living Psychiatric Grand Rounds**

**The Neurobiology and Neurochemistry of Lust, Love, Intimacy and the Internet**

**Presented by**

Leslie Lothstein, PhD, ABPP
Forensic Psychologist

**Thursday, Feb. 14
noon – 1:15 p.m.**

IOL Commons Building, Hartford Room, 200 Retreat Ave., Hartford CT

The lecture is also streamed live through the VMR app at:

meet.iolhartford@video.hhchealth.org

**Objectives:** By participating in this live activity, participants should be able to:

1. Conclude that a neurological substrate hardwires our brains to seek the love and companionship of others.
2. Review the effects of neurobiology on attachment and the dramatic changes in desire, excitement, and love as the result of the effect of Internet Porn on love relationships and pair bonding.
3. Review the wide range of interests and fantasy among men and women that are found on the Internet and cannot be explained simply as pathology.
4. Increase comfort in listening to the sexual and love lives of their patients.
5. Review treatment options for sexual addiction and compulsive sexuality.

For additional information about Professional Education at the IOL, visit the website [https://instituteofliving.org/GrandRounds](https://instituteofliving.org/GrandRounds)

**Financial Disclosure:** The speakers and planners indicated that they have nothing to disclose in relation to the content of this activity.

**Continuing Medical Education Accreditation and Designation:** Hartford Healthcare is accredited by the CSMS to provide continuing medical education for physicians. Hartford Healthcare designates this live activity for a maximum of 1.25 AMA PRA Category 1 credit(s)™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

The HHC CME Department has a new CME portal. Please be sure to legibly sign/complete the attendance sheet at the lecture site. You will receive an email link to log-in to the new HHC CME portal and claim your credits for the presentation. Those viewing the presentation via VMR may email/scan their attendance sheet/information (full name and email address) immediately afterwards to ContinuingEd@hhchealth.org.
Join us for a luncheon and presentation

**E-Cigarettes, Vapes, & Juuls in the Playground of Good and Evil**

Hosted by

**Elsa M. Núñez**  
President of Eastern Connecticut State University

**Pet Behmer**  
President of the Hartford HealthCare Behavioral Health Network

**Guest Speaker**  
**J. Craig Allen, MD**  
Medical Director, Rushford  
Chief of Psychiatry, Midstate Medical Center  
Vice President of Addiction Services, Behavioral Health Network

E-Cigarettes, Vapes, and Juuls have been touted as tools to treat cigarette addiction in adults. Although this may be true, the rapid increase in teen and young adult use of these products compels us to examine the consequences of nicotine exposure on the developing nervous system. This presentation will review the evidence base and discuss potential strategies for parents and providers concerned that we may be witnessing the birth of a new generation of tobacco addiction.

**Tuesday, March 12, 2019**  
**Noon - 1:30 PM**  
Betty R. Tipton Room  
Student Center  
Eastern Connecticut State University  
Willimantic, Connecticut

Minimum donation $100 per guest  
Sponsored tables of ten available  
RSVP by March 1 to Sherry Smardon  
860-465-3910 or sherry.smardon@hhchealth.org

Luncheon sponsored by The ECSU Foundation, Inc.  
All proceeds from this luncheon will benefit Natchaug Hospital educational programs.

---

**Town Hall Meetings**

Connect with your Senior Leadership Team at the upcoming Town Hall Meeting.

- Share feedback on your work environment
- Celebrate wins and recognitions
- Hear updates on our external environment
- Meet the new BHN East Region Vice President Roy Saseenaraine, MBA

**Tuesday, March 5, 2019**  
2:30-3:30 pm  
Community Room, Mansfield Campus

Can’t make it? Join by VMR:

Video: meet.natchaugexe@video.hhchealth.org  
Call in: 860-572-6338 Access code: 30007

If you have questions, contact Laurie Clinton at 203.238.6894 or laurie.clinton@hhchealth.org.

---

**Journey House Rocks!!**  
Featuring *Music By The 3rd Degree*

**Saturday, February 23, 2019**  
6:30—Doors Open  
7:00—Concert

At the  
Capitol Theater  
896 Main Street, Willimantic, CT

**Tickets:**  
General Admission $25  
Seniors/Students: $15  
Staff and Cients $20/person

All funds go support the Journey House Program at Natchaug Hospital

To purchase tickets visit  
www.journeyhouserocks.eventbrite.com

Questions: Katherine.McNutty@hhchealth.org or Sherry.Smardon@hhchealth.org
A poetic look at the Harlem Renaissance

An excerpt from [https://allhailchanel.weebly.com/harlem-renaissance.html](https://allhailchanel.weebly.com/harlem-renaissance.html)

Years after World War I, lots of African-Americans in the south migrated to the northern part of America because of the depression in the south. After migrating, new opportunities became available to African-Americans in cities such as Chicago, New York, and Harlem. Harlem was mostly populated with African-Americans. Poets such as Langston Hughes, Countee Cullen, and Gwendolyn Brooks are poets that made the Harlem Renaissance what it was.

“Hey, Black Child” by Countee Cullen

Hey Black Child
Do you know who you are
Who you really are
Do you know you can be
What you want to be
If you try to be
What you can be
Hey Black Child
Do you know where you are going
Where you’re really going
Do you know you can learn
What you want to learn
If you try to learn
What you can learn
Hey Black Child
Do you know you are strong
I mean really strong
Do you know you can do
What you want to do
If you try to do
What you can do
Hey Black Child
Be what you can be
Learn what you must learn
Do what you can do
And tomorrow your nation
Will be what you what it to be

Analysis

Hey, Black Child is a encouraging poem for the possibilities of young children in the Harlem renaissance era and all children for that matter, especially seeing that a black child’s possibilities weren’t made apparent at the time. Although it is very repetitive, it is powerful. It is a method of drilling this inside of children’s heads by repeating this over and over. The messages that Cullen is sending goes by stanza. In the first stanza, it is a message of achievement explaining that you can achieve what you want when you try. The second stanza gives the idea of education when you apply yourself. No one can control you because you are in control of your life. The third stanza is referring to the past by telling black children that they are strong because of the struggle for black people to be able to learn and to achieve things. The last stanza is referring to the future and is telling black children that basically life is what you make it and if you learn what you must learn and do what you must do, your nation will be what you want it to be.

BHN looking to boost social media presence

Are you interested in joining the BHN Social Media Squad? Participants will:

- Write Health News Hub stories from your professional perspective (i.e. thought leadership pieces, consumer friendly clinical pieces, highlights of published research).
- Take photos/videos at employee and public events for posting to social media sites.
- Lead and monitor support for private Facebook support groups across all institutes and service lines.

For more information or to join, contact socialmedia@hhchealth.org.

Mobile van stops for mammograms

The Mobile Mammography van will visit Rushford at Meriden on Wednesday, March 13, from 9 a.m. to 1:45 p.m. The event is for clients, but if there are not enough patient sign-ups, then appointments will be available to staff as well. All insurance will be accepted and if a woman has no health insurance, donated funds are available to cover the cost of her screening.

The following women are eligible for a mammogram:

- Women over the age of 40
- Women whose last mammogram was more than 12 months ago
- Women who have no breast problems such as suspicious lumps, abnormal swelling, bleeding from nipples, or unusual tenderness
- Women who are not pregnant
- Women who have not had any type of breast biopsy or breast surgery since their last mammogram
- Women who have not had a history of breast cancer in the past three years.