Your desk has gotten a little messy lately. Stacks of books, dirty mugs and piles of papers seem to be scattered all over the place. Are you just a little messy, or could you have hoarding disorder?

“If you came to my office, you’d see that I fall in the messy category,” said David F. Tolin, PhD, director of the Anxiety Disorders Center at The Institute of Living, at a recent Grand Rounds presentation. “I’ve got coffee cups, pencils, papers and books strewn about, but my office still functions as an office. I can sit at my desk, use my computer, use my phone and sit down in my chair.”

There comes a point, though, when “a little messy” moves to a higher level of disorganization. This is what most of us envision when we think about hoarding disorder: the accumulation of clutter. The clutter fills up living and working spaces to the extent where those spaces are no longer usable for their intended purposes.

“That’s when things get serious. The number one criteria of hoarding disorder is a person who can’t throw things away because they have strong urges to save items, or encounter significant emotional distress when they try to get rid of things. For a person with hoarding disorder, throwing something away is no longer functioned as an office,” Tolin said. “It gets converted to nothing more than storage.”

Hoarding disorder is characterized by clutter that fills up living and working spaces to the extent where those spaces are no longer usable for their intended purposes.

Continued on page 2
HHC partnership brings virtual urgent care to employees

Not feeling well? Starting this month Hartford HealthCare employees and their families will be able to consult a licensed medical provider from the comfort of your home or office.

Hartford HealthCare’s partnership with American Well, a national leader in telehealth, will offer patients a new convenient way to access a provider for concerns such as anxiety, bronchitis, colds, cough, depression, diarrhea, ear infection, fever, flu, pink eye, respiratory infection, sinus infection, smoking cessation, sore throat, sprains and strains, urinary tract infection, vomiting, and weight concerns.

Urgent care video visits using a computer or mobile app will be offered to employees and their families through an exclusive pilot to help Hartford HealthCare evaluate whether such a service would enhance access to care for employees and potentially all patients in the communities we serve.

The cost of an urgent care video visit will be $49 and is not covered by insurance, but you may use your health savings account or flexible spending account to cover the cost. The service will be available to all Hartford HealthCare employees and family members. A $10 discount will be offered for first-time users. To learn more or see a doctor, visit the Virtual Urgent Care page of HHC Connect or download the Hartford HealthCare Now app from the App store or Google Play.

Hoarders tend to have emotional distress when parting with objects

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painful — mentally and emotionally.

“With hoarding disorder, we often find people with beds they can no longer sleep in, bathrooms they can’t use, kitchens they can’t cook in, living rooms they can’t walk through,” Tolin said. “These symptoms cause clinically significant distress or impairment in areas of functioning.”

Tolin’s research shows there are three key criteria for identifying hoarding disorder: a person who excessively purchases or acquires objects; engages in significant pathological saving behavior; and maintains high levels of disorganized possessions of mixed importance. These characteristics offer a reliable way to differentiate messiness from hoarding disorder.

Hoarding disorder is treated by introducing patients to the mechanisms of hoarding disorder and addressing each one through cognitive behavioral therapy. The mechanisms — or “bad guys” — include decision making and problem solving, experience of intense emotions, unhelpful thinking, and waxing and waning motivation.

If you or someone you know is suffering from hoarding disorder and ready to make a change, call the Anxiety Disorders Center at 860.545.7685 or visit https://goo.gl/2GA7DX.
Win or lose, Super Bowl stirs strong reactions from fans

On Sunday evening, almost half of all televisions in the United States were tuned into the Super Bowl, the most watched sporting event in the country.

In New England, home to many devout Patriots fans (and some fanatics), the game evoked strong emotions as the Pats fell to the Philadelphia Eagles in what some are calling one of the best SuperBowls ever.

But is it normal to experience strong feelings when your team wins or loses? According to Natchaug Hospital's Carrie Pichie, PhD, the answer is yes.

“Being a loyal fan of a team can make one feel like they are part of something larger, almost like a family,” Pichie said. “As a result, it’s normal to experience emotions with winning and losing and even personalize it. Humans are competitive by nature and have a strong desire to win and be the best.”

Fans should be ready to cope with the range of emotions they might experience, said Pichie, especially those associated with losing — irritability, anger, disappointment, helplessness or even depression.

“If your team loses, it’s important to take your mind off the game so you don’t dwell on it,” Pichie said. “Shut the TV off to avoid the post-game celebrations. Do something unrelated, maybe something calming or physical. And most importantly, stay optimistic — there’s always another game to look forward to.”

Pichie warned that fans should be wary of the effects that gambling, alcohol or taunting behavior can have on emotions.

“These types of external factors exacerbate feelings about a sports team losing and can lead to more extreme reactions because it makes things more personal,” Pichie said.

Most importantly, keep good perspective, says Pichie.

“Losing is a part of sports that you don’t have control over. Be a loyal fan and find a way to keep supporting your team in a positive way.”

MHFA classes now found on HealthStream

In an effort to standardize BHN registration for trainings, Mental Health First Aid (MHFA) training schedules and registration are now found on HealthStream.

MHFA training is offered at the Institute of Living on the third Friday of each month from now through September 2018. A minimum of 10 participants must be registered in order for the course to be run.

If you are interested in scheduling a training outside of the Hartford region, contact MHFA coordinator Patricia Graham at patriciac.graham@hhchealth.org.
Litchfield County Opiate Task Force is making a difference

Opiate abuse has become an epidemic with major public safety concerns in recent years, and the communities in northwest Connecticut, like so many others across the state and nation, have taken action to combat increased addiction and unintentional deaths.

Founded in 2013 by Torrington’s Charlotte Hungerford Hospital (CHH) and the McCall Center for Behavioral Health, the Litchfield County Opiate Task Force (LCOTF) brings together more than 60 professionals and advocates from a wide range of medical, behavioral health, non-profit, government, public safety, and private and public sector organizations to help address and reduce the harmful effects of the region’s opiate epidemic.

Contributing members, some in recovery or family members of those struggling with addiction themselves, share their expertise and experiences at monthly meetings to strategize and problem-solve issues involved with treatment and access to substance abuse-related care.

They also focus on educating, promoting and advocating for key resources and services for those affected by opiate addiction such as providing education and support to area sober houses and instructing ambulance personnel on Narcan protocols and nasal administration when encountering those in an overdose situation.

The group has also been instrumental in offering prescriber education to increase the number of medication-assisted therapy options and in distributing a resource guide detailing treatment options and locations of detox centers, outpatient drug therapy, residential programs, and medication assisted programs.

“The outpouring of support that the Task Force has already received from residents, lawmakers, medical and mental health providers, and virtually every sector of our community is inspiring and has no doubt had a significant impact in reducing the devastating effects of opiate addiction,” said Maria Coutant Skinner, LCSW, Executive Director at the McCall Center For Behavioral Health, a member of the Hartford HealthCare Northwest Region Board of Directors, and LCOTF co-chair.

LCOTF was an early adopter of the concept of hospital-based community case managers tasked with providing individualized guidance and resources to those in immediate crisis. Partially funded by CHH and the state of Connecticut, this care navigator is based in the hospital’s emergency department, and offers free, confidential, individualized consultations to help patients understand and access needed services. Early data from CHH has demonstrated that 25 percent to 30 percent of patients seen were successfully referred to treatment.

Legislative advocacy is also a large part of the role that the group plays in advancing the understanding of opiate-related issues and the critical need for funding and support from state and federal resources. Round table discussions on opiate issues involving state legislators including U.S. Sens. Richard Blumenthal and Chris Murphy and U.S. Rep. Elizabeth Esty are held regularly, and members often testify at hearings when needed.

LCOTF members also recognize the emotional toll that the epidemic has taken on their communities and work to spread the message that no one is alone when dealing with addiction.

In 2017, LCOTF sponsored Northwest CT Overdose Awareness Day and Vigil, a free public event designed to bring people together to commemorate the lives of those lost to opioid overdose, offer and share support to help those affected by addiction, and learn more about available local resources. The evening concluded with a special vigil of inspiring music, prayers, a candle lighting, and messages of hope and encouragement from those in recovery.

“Confronting addiction of any kind can be a scary and emotional journey for the individual and their family and friends. We understand how difficult it may be to seek outside help for those who are facing a crisis and would like to support them in that decision. We encourage everyone to remember that treatment does work, and people get better,” said Tom Narducci, LCSW, CHH Administrative Director Department of Psychiatry and LCOTF co-chair.
Hartford HealthCARES program to help hospital in Puerto Rico

Hartford HealthCare has launched Hartford HealthCARES, a system-wide giving program that extends our commitment to make every moment matter to our neighbors in need locally, regionally and beyond.

This initiative grew from an employee suggestion made during a huddle shortly after Hurricane Maria devastated the island of Puerto Rico.

Employees are asked to make an optional gift of any amount through a one-time payroll contribution through Feb. 15.

The money we raise will help Castañer General Hospital in the rural center of Puerto Rico buy a new generator. A contribution of any size will make a difference. Success will be measured not by how much we give, but by how many of us give. Together we can improve lives.

HHC also has pledged to make a substantial contribution to assist displaced residents from Puerto Rico who have relocated to Connecticut in the storm’s aftermath.

While this inaugural Hartford HealthCARES campaign will raise money, future efforts for other causes might call on us to donate our time, our expertise or food, clothing and supplies.

There are likely dozens of Castañers across Puerto Rico and thousands, maybe tens of thousands of regions across our nation and our world that at any one time suffer immeasurably from the ravages of circumstance or disaster. We selected Castañer General because, like Hartford HealthCare, it plays such an important role in the communities it serves.

Four months after the storm, power still has not been fully restored and Castañer General’s generator is failing from overuse. The hospital’s generator has allowed residents from across the remote and rural region to charge their electronic devices, have access to clean water from the hospital’s well and use medical equipment such as nebulizers and dialysis machines that can mean the difference between life and death for people with chronic conditions.

To make a one-time, tax-deductible contribution, visit the Hartford HealthCARES page of HHC Connect. Donation forms can be submitted through Feb. 15. To learn more and donate visit hhcconnect.org/cares.

Nightingale nurse nominees needed by Feb. 18

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 for the annual Nightingale Awards is Sunday, Feb. 18. To nominate someone, contact:

- Backus Hospital — Mindy Kivlin
- Hospital of Central Connecticut — Jennifer Kolakoski
- Institute of Living — Patty Beebe
- Natchaug Hospital — Gale Sullivan or Paula Purvis
- Rushford — Justin Sleeper
- Windham Hospital — Leslie Chasse

Nominees will be asked to participate in an interview and provide a short biography. Winners will be recognized at the annual Nightingale Awards ceremony.

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

Nightingale nomination form

Name of Nominee
Unit / Dept
Nominator
Shift
Comments: ________________________________

Please return completed form by Sunday, Feb. 18
A new article from Institute of Living and Hartford Hospital employees will soon be published in the Journal of Psychiatric Nursing and Mental Health Services.

The article, titled "Non-Psychiatric Nurses’ Perceived Self-efficacy After an Educational Intervention on Suicide Prevention and Care," is authored by Ellen W. Blair, DNP, APRN, PMHCNS-BC, NEA-BC, Jyoti Chhabra, PhD, AHC, RYT; Cynthia Belonick, APRN, BC; and Maria Tackett RN, EdD, CEN, TCRN, CCRN-k.

According to the article’s abstract, “potential for suicide risk can be a safety concern for patients in all health care settings. Inadequate training of nurses in suicide assessment and prevention is a serious patient safety concern.”

The authors measured the effects of education on the non-psychiatric nurse’s perceived self-efficacy in assessment and inquiry about suicide risk and in implementing suicide prevention strategies.

“The outcomes of this project offer an important contribution to future research in the area of education about suicide prevention and care for the non-psychiatric nurse, promoting safer outcomes for patients,” Blair said in an email.

The article is currently in the review and proofing process and will be published in an upcoming edition of the publication.

For information and print-saving tips, visit the Managed Print Services page of HHC Connect.

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About BHNews

BHNews is published every other Friday. Story ideas or submissions may be sent to amanda.nappi@hhchealth.org or steve.coates@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. 20, 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. 9, 16, 23, March 9, 16, 23, 30. (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. 12, 19, 26, March 5, 12, 19, 26. (Every Monday), noon – 1 p.m. in the Todd Building, Bunker Room and Feb. 14, 21, 28, March 7, 14, 21, 28 (Every Wednesday), 7 – 8 p.m. in the Commons Building, 2nd Floor, Litchfield 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. 14, 28, March 14, 28. (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 as being prominent in their lives. The goal is to discuss support strategies to manage life challenges.

**Trauma Support Group.** Feb. 14, 28; March 14, 28. (Second and fourth Wednesday of each month), 6-7 p.m. A peer-led group that offers a supportive environment for individuals with any type of trauma history. Attendees will discuss relevant topics and educational materials will be available. To attend, please RSVP to Laura at 860.545.7324.

**It's Hard To Be A Mom.** Feb. 15, March 1, 15. (First and third Thursday of each month), 10 - 11:30 a.m. Peer-led group that acknowledges the inherent challenges with modern-day mothering and offers an opportunity for mothers to come together, share experiences, and support each other. This group welcomes expecting mothers and mothers with babies to discuss any and all challenges associated with motherhood. Babies welcome! Space is limited. Please RSVP to Laura at 860.545.7324.

**Hearing Voices Network (HVN).** Feb. 15, 22, March 1, 8, 15, 22, 29. (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. 15, 22, March 1, 8, 15, 22, 29. (Every Thursday), 7 - 8 p.m. One hour topic discussion.

**Bipolar: An Introduction To The Disorder.** Feb. 20, May 29, 6:30 – 7:45 p.m. For family members and friends of individuals who have bipolar or a related disorder. It will present a basic understanding of the disorder, its treatment, along with specific suggestions to help cope with the illness. To attend, please RSVP to Laura at 860.545.7324.

**Autism Spectrum Support/Educational Group Meeting For Parents.** Feb. 21, March 21. (Third Wednesday of the month), 6 - 7 p.m. Providing a place for parents of children on the autism spectrum, or another related disorder, to come together and get support and information. Monthly, peer-run support groups interspersed with special guests and speakers to offer additional guidance and perspective. Please RSVP to Goviana at 860.560.1711 or gmorales@spedconnecticut.org.

**Dementia Support/Educational Group Meeting.** March 6. (First Tuesday of each month), 11:30 a.m. to 12:30 p.m. in the Donnelly Conference Room, First Floor. Please join us as we bring together experts and those who want guidance, direction, and support. Space is limited — reservations are required by calling 860.545.7665.

If you are a student that needs to observe a group for a class assignment, you must contact the Family Resource Center by emailing Laura Durst at laura.durst@hhchealth.org two weeks prior to the group you would like to attend. Please note, not all of our groups are open for observers and it is up to the facilitator and group members themselves.
Oasis room offers peaceful setting for clients to recoup

For clients in Natchaug Hospital’s Older Adult Program, group sessions are therapeutic, but at times can trigger strong emotions.

“We ask clients in group certain questions each day. Are you safe and sober? What’s your mood today? What’s a risky situation for you?” said Janet Ragno, LCSW, lead primary therapist for the Older Adult Program. “Sometimes, one person’s story or words can trigger feelings of anxiety or depression or substance abuse cravings in one of their peers.”

Therapists are always ready to step outside with a client in need and take them into an office or waiting room, but staff wanted a place for clients that was more calming or soothing.

So when each Natchaug program was allocated $1,500 for client needs, thanks to donations made through the hospital’s annual appeal, the staff at the Older Adult Program decided to create an “oasis room” for stressed out clients.

The oasis room offers clients a peaceful and relaxing environment for decompressing from group therapy or for one-on-one sessions with therapists. The room is designed to be therapeutic and features soft, low lighting; a woodland scene with a tabletop water fountain; comfortable rocking chairs; aromatherapy; soothing music; and decorations that include plants and inspirational sayings.

“The oasis room offers a safe space for clients to sit and decompress before they talk with a therapist about what worries them,” Ragno said. “We want to teach them that there are ways to cope with and manage anxiety, depression or cravings before they escalate.”

Clients are also encouraged to consider making an oasis room of their own.

“It’s important to have a calming place, and when they see the oasis room, they realize they can create a safe place like this in their own homes,” Ragno said. “It’s a coping skill that they can take with them and use in the future.”
Party atmosphere: Rushford holiday photos now online

Staff members and their families met at Il Monticello Banquet in Meriden on Saturday, Jan. 20, for Rushford’s annual holiday party.

Photos from this year’s event are now posted on the HHC Connect Intranet. Check them out on the Intranet anytime at https://intranet.hartfordhealthcare.org/news-events/hhc-connect-news-article?articleId=12459&intranetId=235

Now seeking clients or their family members for the Rushford

CLIENT ADVISORY COUNCIL

The Rushford Advisory Council is a volunteer collaborative partnership between Rushford staff, clients and their families to help make the client service even better. We are looking for new members that represent all of Rushford’s programs, services and locations.

Meetings are held on the second Wednesday of every month at 5 pm at Rushford-Meriden at 883 Paddock Avenue.

To recommend a client or family member who may be interested in providing ongoing constructive feedback about their experiences at Rushford, please contact Greg.Hogan@hhchealth.org.