Because every moment matters
The Mission of Natchaug Hospital is to provide a continuum of accessible, community-based services for those living with psychiatric illness and chemical dependency, or emotional and related educational disabilities, with a commitment to the dignity and privacy of those needing services, empowering them to participate in their own care and recovery.

The Mission of Hartford HealthCare is to improve the health and healing of the people and communities we serve.

Our mission
Inpatient Treatment Programs:
• Intensive 24-hour treatment for up to 57 clients on a daily basis in three programs (child, adolescent and adult)

Mansfield

Journey House Residential Treatment Program:
• Residential treatment for adolescent girls involved in the juvenile justice system
• Treatment includes group and individual therapy modalities
• Average length of stay - nine months

Mansfield

Partial Hospitalization and Intensive Outpatient Programs:
• Intensive mental health and substance abuse treatment for children, adolescents, young adults and adults
• Seven Challenges® substance abuse program for adolescents
• Young Adult program serves men and women 18- to 25-years-old in Dayville, Groton and Mansfield
• Older Adult program serves adults over 55 in Windham

Danielson, Dayville, Enfield, Groton, Mansfield, Norwich, Old Saybrook, Vernon and Windham

Intensive In-Home Child & Adolescent Psychiatric Services:
• In-home services treatment for the family, two to three times a week
• Therapeutic teams consist of a case worker and a social worker

Norwich

Extended Day Treatment Program:
• Afterschool treatment for children and adolescents struggling with social skills
• Structured therapy including off-site activities, and life skill development

Danielson, Groton, Mansfield, Norwich

Medication-Assisted Treatment, Close to Home (MATCH™):
• A combination of Suboxone® and therapy to aid in recovery from opioid dependency
• Reduces cravings and allows patients to remain functional and involved with family, jobs and communities

Dayville, Groton, Mansfield, Vernon

Clinical Day Treatment Special Education Program:
• Alternative school option for students who struggle to succeed in the public school setting
• Placement referral made by the local education authority

Danielson, Enfield, Mansfield, Norwich, Old Saybrook, Windham

Because Every Moment Matters
It’s hard to believe that a little over a year ago, I had just joined Natchaug Hospital and the Hartford HealthCare Behavioral Health Network (BHN). I cannot thank all of you enough for helping to make the transition as smooth as it was and for readily welcoming me into the Natchaug family.

The past year has been busy to say the least — with new challenges and opportunities arising almost daily — but this Annual Report has given me an opportunity to pause and reflect on what a momentous year it was for Natchaug Hospital.

In 2015 and 2016, the heroin and opioid epidemic and the deadly toll of addiction captured the headlines and people’s attention in Connecticut and across the nation. And for good reason — by mid-2016, Connecticut alone was on track to lose more than 800 of its citizens to accidental drug overdoses.

The only bright side to this kind of public health crisis is the way it has begun to change longstanding beliefs about substance abuse and those who suffer from it, although discrimination remains a huge problem. If you know and love someone who has experienced an addiction issue, it’s harder to condemn them as weak in character or somehow flawed as people — you see first-hand that this is a disease every bit as chronic and symptomatic as cancer or heart disease, and needs to be treated accordingly with comprehensive, evidence-based care.

As people became increasingly aware of the horrendous toll that the opioid and heroin epidemic was taking at all levels of society, Natchaug and the BHN were looked to more than ever for guidance, leadership and expertise.

Leaders from Natchaug took part in countless community education forums large and small, all across Connecticut. They appeared in local and national media, providing their insights and furthering our ability to both educate the public and help break down the fear and unwillingness that addiction sufferers often feel before deciding to seek help.

Natchaug and its partner entities within the BHN continued to take the lead on the issue by launching MATCH™, or Medication-Assisted Treatment Close to Home, a campaign meant to educate the public about the numerous Natchaug and Rushford locations across the state where people could go for effective treatment. And to meet the increasing need for MATCH, Natchaug expanded three of its existing treatment centers so that more people could receive treatment.

Although addiction was in the spotlight, Natchaug also continued to grow its continuum of mental health services.

In response to a growing elderly population in the greater Willimantic area, Natchaug teamed with Windham Hospital and Hartford HealthCare Senior Services to create the Older Adult Program at the Center for Healthy Aging at Windham Hospital, offering mental health and addiction treatment catered to the needs of seniors.

We also continue to expand our primary care/behavioral health program, which is allowing us to embed mental health clinicians in primary care offices, an initiative that has broken down silos and demonstrated success in terms of patient outcomes.

All of this is occurring in a healthcare landscape that grows more challenging by the day, which is why the success that Natchaug is having is so gratifying, and so deserving of acknowledgement. There is still much work to do to continue expanding the programs we offer clients and enhancing our status as a center of excellence in behavioral health, but those moments will come, too. For now, we will enjoy our moment in the spotlight by keeping the focus where it belongs — on the people we serve.

Thank you to everyone, from the front lines to the board room, for all you do.
In a major public display of hope, members of the Hartford HealthCare Behavioral Health Network, including Natchaug Hospital Associate Medical Director Paul Weigle, MD, took the ultimate leap on behalf of clients on July 27, 2016 rappelling from the top of the Hartford Hilton in support of Shatterproof, a national advocacy group for young people struggling to overcome addiction and substance abuse.
Local woman offers “Hope After Heroin”  
**NBC program focuses on success stories**

Recovering clients whose lives have been transformed by the care they received within the Behavioral Health Network were the focus of a special half-hour television special produced in partnership with the Hartford HealthCare News Service.

“Hope After Heroin: Stories of Recovery” aired on NBC-CT on Saturday, June 11, 2016 with an encore on Sunday, June 19. A link to the show as well as a listing of resources and information on addiction and treatment services can be found at a specially created website, www.hhchope.org.

Among the clients featured in the special television segment was Marilyn Clark, a former client at Natchaug Hospital’s Care Plus program in Groton. Clark was in her mid-30s when she was diagnosed with multiple sclerosis. The mother of three was prescribed Vicodin to help her deal with the intense pain. It helped the pain, at first. But in just a few months, Marilyn — a woman who rarely drank and didn’t experiment with drugs — was addicted to prescription painkillers. Just one year in, she switched to heroin because it was cheaper and easier to find. She lost her home, her career and almost lost her children. It would take years, but Marilyn Clark found hope after heroin with medication-assisted treatment and therapy.

The program takes an in-depth look at the journey to recovery taken by Clark and three other clients who were treated across the Behavioral Health Network, including a young mother, a college student and another young man in recovery. The show also includes commentary from Hartford HealthCare Behavioral Health Network president Patricia Rehmer and Natchaug Hospital Care Plus lead therapist Justin Mink, LPC.

“We are enormously proud of the work we are doing to lead the effort against this epidemic of opioid and heroin abuse,” said Rehmer. “We believe these stories of recovery offer hope and will motivate people to seek the help they need to overcome their addictions and help them lead normal lives again.”

**Looking back on 30 years of sobriety, thanks to Natchaug Hospital**

Ronald Durgan was 50 years old, in danger of losing his ties with his wife and children, when he turned to Natchaug to help him treat the alcoholism that had been tormenting him all of his life.

He doesn’t remember who the counselor was who spoke with him, but he remembers the message he received as clear as if it was yesterday.

“You better stop drinking if you want to keep your family, that’s what they told me,” said Durgan, now 80 and celebrating 30 years of sobriety. “That hit home with me like nothing else.”

Durgan said his wife, Alta, and their two grown children were at their “wit’s end” as his alcoholism progressively worsened in the 1980s. A worker at Pratt & Whitney, Durgan said he was barely hanging on to his job and his family when he decided to seek help at a “dry house” for alcoholics in New Hampshire. But after giving the facility two chances to help him, he began to lose hope when he continued to relapse.

Durgan said he decided to give recovery one more try at Natchaug, which is close to where he and his family were living. After a few days of intensive counseling, he said, he had a moment of clarity that put his life in perspective and set him on a course of recovery.

“Looking back, I don’t know how my wife put up with it, but she was patient and she just kept hoping I would be
Durgan continued to seek help with his recovery, and over time he found it was easier to avoid alcohol and keep it out of his life. He said he is grateful to Natchaug for turning his life around.

“I did it for my family, but it’s been great for me too,” he said. “I’m not sure I would have made it to this point in my life if I didn’t get help.”

His wife of 58 years passed away two years ago, and Durgan said he is most proud that he was able to give her what she had wished for most — his sobriety. The couple grew up in Maine, but spent their married years together in Connecticut. “It was the best thing I ever did,” he said.

Jessie Close and fellow panelists speak at BHN National Dialogue forum

Jessie Close, the younger sister of movie star Glenn Close, told a packed audience of more than 150 people that society has come a long way in accepting and understanding the realities of mental health and substance abuse disorders — but there is still a long way to go.

“The only way to get through hell is to keep going,” said Close, quoting Winston Churchill to convey the enormous struggles that people with mental health disorders live with every day.

The forum was part of the National Dialogue on Mental Health that was created in the aftermath of the tragedy at Sandy Hook and is meant to continue the conversation about mental health issues in local communities. The forum marked the 20th National Dialogue event that the Behavioral Health Network has hosted over the past three years.

The forum featured three other panelists with first-hand experience with mental health and substance abuse, including Bridget Marien, a young woman in recovery from alcoholism who was treated at Natchaug Hospital’s Care Plus young adult program. Patricia Rehmer, Hartford HealthCare senior vice president for behavioral health, served as moderator for the event.

Jessie Close spoke passionately about the decades she lived under the cloud of substance abuse and depression, never fully understanding what she was struggling with. Her frequent efforts to obtain a clearer understanding led to often vague or counterproductive diagnoses, she said, often setting her on a path of ineffective treatments that only deepened her despair.

Her struggle with alcoholism hit a low point in her late 40s, she said, recounting an incident in which she seriously considered using the gun in her husband’s truck to kill herself. A short while later, during a family get-together in Wyoming, she confided to her famous big sister that she was hearing voices repeatedly telling her to kill herself.

It was then that Glenn Close, who grew up with Jessie and two other siblings in Greenwich, Conn., made sure that Jessie got the proper medical care, including a diagnosis of bi-polar disorder that finally connected Jessie with proper medication and treatment. Eleven years later, Jessie credits her newfound happiness to her medication and her passion for inspiring others with her story. More than that, she said, she credits her recovery to her three children, especially her grown son Calen, who also is successfully living with a diagnosed mental health disorder.

“When I sobered up I didn’t realize how big a favor I was doing for myself,” Jessie said. Since that time, Glenn Close has called public attention to the issue by creating a non-profit organization called Bring Change 2 Mind, and Jessie supports the organization’s goals by making numerous appearances each year to share her story and urge others struggling with similar issues to seek help.

All of the panelists agreed that events like this are key to helping them cope.

“I think that’s the theme, that people in recovery can help people a lot,” Rehmer said.
Addiction is a growing health issue that is impacting a wider cross section of people in eastern Connecticut, but the problem is solvable with the right mix of collaboration, evidence-based treatment and coordinated care, a panel of experts said at Eastern Connecticut State University on Sept. 29, 2015.

“The large homes with the fancy cars, they have drug problems too,” said Bill Muskett, Windham Hospital Emergency Medical Services Manager and a long-time paramedic. “Every town has different issues, different drugs, but it’s ultimately the same problem.”

Muskett was one of five panelists who participated in the Overdose Epidemic forum, hosted by Hartford HealthCare (HHC), Windham Hospital and the HHC Behavioral Health Network.

Participants discussed the science of addiction, their firsthand experiences, and how they can work together to deal with K2, heroin and prescription drug abuse in the Windham region.

Willimantic became the focus of state-wide media attention this year after a rash of overdoses was credited to K2, otherwise known as synthetic marijuana.

But despite perception, the issue of substance abuse is not contained to Willimantic, said HHC Behavioral Health Network Vice President of Operations James O’Dea, PhD, MBA, who moderated the event.

“There are 169 towns and villages in Connecticut, and every community has people who are dealing with these issues,” O’Dea said.

“This disease does not discriminate,” said Leah Russack-Baker, Ed.D., LADC, Director at Natchaug Hospital’s Quinebaug Program.

A major barrier to addressing the issue of substance abuse is the stigma around addiction, said Rebecca Allen, MPH, of the Connecticut Community for Addiction Recovery.

“So many think it’s a moral failing,” said Allen, who has been in recovery from heroin since 1998.

Samuel Silverman, MD, Medical Director of Addiction Services at Rushford, stressed that addiction is a disease where the brain’s pleasure centers get “hijacked” by substances.

“Once the brain is addicted, it’s like a dry creek bed in the desert,” Dr. Silverman said.

Silverman added that we tend to “dehumanize” people with addictions, and that needs to change. He applauded Allen’s achievements, including her graduation with a Master’s Degree while in recovery.

“Pride is the antidote to shame,” Silverman said.

A number of solutions were discussed including the widespread distribution of NarCan, which reverses the effects of an opioid overdose; medication- assisted treatment using Suboxone and other drugs; and clearer paths from emergency rooms to treatment programs. The answer, however, is not simple.

“If there was one solution we would have figured it out already,” O’Dea said.

But panelists agreed the first step is to start the conversation — whether it’s in your home with a child or family member, or in a public forum like the Overdose Epidemic, which included Hartford HealthCare and its community partners, all of whom vowed to work together on the substance abuse issues that affect eastern Connecticut.

“In order for change to happen we really do need to have uncomfortable conversations,” Russack-Baker said.

**The Opioid Epidemic**

- **1.9 million** Americans live with opioid pain reliever addiction
- **517,000** Americans are addicted to heroin
- **100** Americans die from drug overdoses each day – more than car accidents and homicide
- **616** opioid overdose deaths in Connecticut in 2015
Natchaug Hospital and its Behavioral Health Network partners took a bold step in the fight against the opioid epidemic in the past year, expanding its programs and launching an extensive campaign to rebrand its addiction treatment services.

MATCH™, short for Medication-Assisted Treatment Close to Home, describes the BHN’s seven opioid treatment facilities, including three expanded Natchaug locations in Dayville, Groton, and Mansfield. A top priority item for the BHN, medication-assisted treatment helps people struggling with addiction into recovery by using medications such as Suboxone or Naltrexone in combination with relapse-prevention therapy and group and individual counseling.

The MATCH campaign marked the first full-scale advertising campaign for the BHN, and featured print, radio and digital advertisements across the state of Connecticut.

In March through June, there were more than 150 calls made to the MATCH call center, a large number of which became patients.
Natchaug opens older adult treatment program at Windham Hospital

In May 2016, Natchaug Hospital opened an Older Adult Program at Windham Hospital for men and women ages 55 and older who are struggling with mental health or substance abuse.

The Older Adult Program was the second phase of senior services to open this year at the Hartford HealthCare Center for Healthy Aging at Windham Hospital. In January, a resource line became operational, offering consultations, education and referrals for common geriatric issues such as medication support, in-home and assisted living services, dementia and Alzheimer’s, and more. The third phase was the GoodLife Fitness Program, offering on-site rehabilitation and individualized exercise programs geared towards older adults.

The Older Adult Program is designed to address the unique behavioral health needs and challenges faced by older patients in an intensive group therapy environment. “Older adults are in a very different life stage than the traditional adult population, and face very different challenges” said Erin Joudrey, program director. “For instance, they may be transitioning out of work, coping with the loss of a partner, or dealing with changes in their physical or mental health. The Older Adult Program offers programming that’s tailored to address issues that are relevant to them.”

Treatment is intensive — three to four hours a day, for up to five days a week — with a focus on topics such as stress management, coping with the loss of loved ones, development of age-specific life skills, chronic illness management and medication education.

“Over time, we’ve learned that to effectively treat mental health and substance abuse issues, we have to focus on stages of life and the challenges present at those stages, as opposed to addressing symptoms in general,” said Carrie Fiche, PhD, Natchaug Hospital Director of Ambulatory Services. “We have had success in creating programs specific to young adults from 18- to 25-years-old, and are pleased to now offer this for older adults as well.”

Care in the Older Adult Program is coordinated by a treatment team that consists of psychiatrists and licensed therapists with experience treating a geriatric population. Patients receive a full assessment of needs, group therapy, medication management, case management, and individual and family therapy.

The expansion of senior services and opening of the Older Adult Program is a direct result of Windham Hospital’s Community Health Needs Assessment, which identified senior care, mental health and nutrition as priorities in the region.

An Epic achievement: Natchaug adds electronic medical record

On August 20, 2016, Natchaug Hospital took its first step towards the future of medical health records as the adult, adolescent and child inpatient units went live with Epic, an electronic health record system.

The transition to the Epic platform creates a single electronic medical record for patients that can be reviewed and updated by any provider in Hartford HealthCare or at other Epic institutions across the country. “From a client’s perspective, it means that no matter where you go across the healthcare system, your history and story follows you,” said Gale Sullivan, MSN, RN-BC, Regional Director of Nursing for the Behavioral Health Network, East Region. “The end result is major improvements in patient experience and safety.”

Epic eliminates the need for multiple medical charts and redundant paperwork as patients navigate the healthcare system; and by giving providers easy access to medical history and records, the likelihood of repetitive medical tests and medication errors is greatly reduced.

Hartford HealthCare Medical Group, Hartford Hospital, MidState Medical Center and Windham Hospital also went live during fiscal year 2016. Plans are in the works.
Staff at Natchaug Hospital in Mansfield began the process of switching over to using EPIC software for their inpatient medical records Saturday, Aug 20. In photo, EPIC support staffers Cathy Sullivan, back to camera, and Tristan De La Villier, right, work with Judy Shea, RN, left, and Amber Morrone, RN, second from left, from Natchaug.

to roll out Epic at all Hartford HealthCare institutions over the next couple years.

King named Vice President of Operations for BHN’s East Region

Thomas King, an experienced leader in the behavioral health field, joined Natchaug Hospital and the Hartford HealthCare Behavioral Health Network East Region as the new Vice President of Operations in late August. King assumed operational responsibilities at both Natchaug Hospital and behavioral health services at Backus Hospital and Windham Hospital in the East Region.

King fills the role that was vacated earlier this year by David C. Klein, PhD, who stepped down after a long career as vice president of operations to work as a clinical psychologist in the Partial Hospitalization Program in the psychiatric services department at Backus Hospital.

Prior to joining the BHN, King managed behavioral health programs at Eastern Connecticut Health Network (ECHN), which includes Manchester and Rockville hospitals. At ECHN, he also assumed responsibilities for the development of palliative programs and management of its care management department.

“Tom has a track record of high performance, operational excellence, and program development and growth,” said James F. O’Dea, PhD MBA, vice president of operations for the Behavioral Health Network.

O’Dea said the BHN leadership team will collaborate with King to help guide the continuing expansion of behavioral health programs and services across the East Region.

“His values as a leader in the field align perfectly with our own,” O’Dea said, “and I am confident that he will continue to ensure that the needs of our communities are met with compassion and highly effective care.”

Top notch nurses named

Fourteen nurses from Hartford HealthCare’s East Region were named Nightingale Nurse Award winners for 2016, including three Natchaug employees. The Nightingale Awards recognize exceptional nurses and promote the nursing profession. Recipients were honored at a dinner during National Nurses Week on May 12 at the Mashantucket Pequot Museum.

Dawna Labrie, RN, Natchaug Hospital Inpatient Units

The holidays are a tough time for those on an inpatient psychiatric unit — so each year, Dawna Labrie does her best to bring some holiday cheer by delivering stockings for each client. “[Nursing] is a profession that means helping people,” she says. And whether it’s through small acts of kindness for clients, lending a hand on a short-staffed unit, or supporting a co-worker in need, being a helper is something that Labrie prides herself in.

Cheryl Armstrong, RN, Natchaug Hospital Adolescent Unit

Psychiatric nurses don’t often hear how their patients are doing after discharge, so Cheryl Armstrong was surprised when she received a Christmas card delivered to the hospital from a former adolescent patient who had been suicidal. In the note, the teenager thanked Armstrong for showing her that she had self-worth and reported that she is now looking to become a nurse herself. “It truly reinforced why I am here working with teenagers,” said Armstrong. “This is what being a nurse is all about.”

Lisa Harrison, APRN, Natchaug Hospital Medical Staff

As a child, Lisa Harrison remembers when her mother, a public health nurse, would bring her to visit patients. “I remember how happy the clients were to see us because they were lonely and homebound, and I’ve always wanted to be able to brighten people’s day by meeting their needs like that,” she said. Harrison, who is pursuing her Ph.D. at the University of Connecticut School of Nursing, is also helping to inspire the next generation of nurses as a graduate assistant.
The grants received during the last half of fiscal year 2015 and the first half of fiscal year 2016, totaling $290,050, include:

**Altrusa International, Inc. NECT**
$500 to support the availability of Narcan for clients and their families

**Chelsea Groton Foundation**
$1,000 to provide Mental Health First Aid Training for the community

**Community Foundation of Eastern CT**
$6,000 to create the IICAPS Emergency Fund for clients

**The Connecticut Health Foundation**
$100,000 to support Primary Care Behavioral Health Integration.

**Charter Oak Federal Credit Union**
$1,500 to support the creation of an auto-detail educational track at Joshua Center Thames Valley

**Department of Mental Health and Addiction Services**
$25,000 to support the education and training to staff to diagnose and treat gambling addiction

**The ECSU Foundation**
Luncheon on March 24, 2016, attended by almost 100 people, generated $9,000. Over nine years, the annual ECSU Foundation luncheons have raised a more than $100,000 for Natchaug Hospital education programs.

**Hartford Dispensary**
$25,000, to support an American Board of Addiction Medicine Fellowship

**Johnson Family Foundation**
$20,000, to support renovations to the new Sachem House program building and $20,000 to support client needs

**Jeffrey P. Ossen Family Foundation**
$12,500, to support the purchase of two sensory machines for use on the inpatient units

**Office of Policy and Management**
$75,000, to support renovations to the new Sachem House program building

**Frank Loomis Palmer Fund**
$5,000 to provide Mental Health First Aid training for the community

**The Leo and Rose Pageau Trust**
$3,000 to support desk replacement and classroom education technology at Joshua Center Windham CDT School

**Putnam Bank Foundation**
$1,000 to provide therapeutic rocking chair replacements

**SBM Charitable Foundation**
$3,000 to support the installation of sound reduction equipment in the Journey House gym

**Soroptimist International of Willimantic**
$550 to support Trauma Sensitive Yoga for Journey House Residents

**Swindells Charitable Foundation**
$2,000 for a clothing fund for clients at the Joshua Center Windham CDT School and the child and adolescent inpatient units

---

**Below, left:** Paul Simeone, H3W Facilitator, and Amanda Watkins, RN Manager for the child and adolescent inpatient units, with the sensory machine purchased with support from the Jeffrey P. Ossen Family Foundation.

**Above, right:** Grant funding from Johnson Family Foundation and the Office of Policy and Management supported the opening of a new building for the Sachem House adult and young adult program.
Building a strong foundation

Natchaug Hospital is grateful to the following individuals, businesses and foundations for their generous pledges and contributions during fiscal year 2015 and the first half of fiscal year 2016. Their support strengthens and expands programs that help people recover from mental health and substance abuse issues.

**Founder**
Connecticut Health Foundation
Department of Mental Health and Addiction Services
Hartford Dispensary/Rushford Foundation
Johnson Family Foundation
Office of Policy & Management

**Visionary**
Jeffery P. Ossen Family Foundation

**Advocate**
Community Foundation of Eastern CT
ECSU Foundation
Frank Loomis Palmer Fund

**Benefactor**
Anderson-Paffard Foundation
David Klein, PhD
Stephen Larcen, PhD & Susan Graham
The Leo & Rose Pageau Trust
Putnam Bank Foundation
SBM Charitable Foundation, Inc.
The CT Whale Community Foundation
Carol Wiggins, PhD

**Leadership**
Judi Caracausa
Charter Oak Federal Credit Union
Chelsea Groton Foundation
Irene Demers
Dr. & Mrs. Raymond B. Johnson
Saranne Murray & Jackson Foley
Michael Pallein, CPA
Betsy & Grant Ritter
Swindells Charitable Foundation
Take Note
James Watson, MD & Ellen Lang
Deborah Weidner, MD & Manny Nainu

**Sustainer**
Altrusa International, Inc. NECT
Dime Bank
Dr. & Mrs. Carl Lindquist
Caragh O’Brien & Joseph LoTurco
Carrie Pichie, PhD
Patricia Rehmer & Peter Tercyk
Shipman & Goodwin
Soroptimist Intl of WMTC
Mary & Robert Sullivan
Cathy & Bob Walton
Waterford Group, LLC

**Friend**
Patricia Adamoski
Advanced Behavioral Health
Allied Printing Services
Sheila B. Amdur & Marcy Neff
Chrystyna Andrychowski
Anonymous
Angela & Michael Arnold
Associated Construction
Timothy Bates Esq.
Curt & Ina Beck
Bruce Bessette
Honey & Harry Birkenruth
Bj’s Wholesale Club
Jane & Jim Bobbitt
Susan & John Boland
Kathy & Tom Borner
Jill Bourbeau
Ellen & Don Buffington
Nancy & David Bull
Rosario Cacciatare
Karen Calef, DMD
Christy Calkins
Annetta Caplinger
Sandy Carboni
Brett Carra
Marianne & Timothy Carroll
Helen & Dale Chapman
Dee Charbonneau

*Former Natchaug board member Toni Ellzey, APRN, is recognized at the 2015 Annual Board Reception for her years of service on the board of directors.*
Building a strong foundation

Mike Lawlor, Connecticut Under Secretary for Criminal Justice Policy and Planning, was the keynote speaker at the 2016 annual ECSU Foundation Luncheon to benefit Natchaug Hospital education programs.

Donna Snell
Gale Sullivan
Tecton Architects
Tennett Tree Service
Lee & Tom Terry
Scott Trepanier
Deborah Walsh
Jonathan Watts
Mary & Edmund Wehrle
Harriotte Wilson
Karen Zimmer

In Kind
Rob Bloomstone
MaryEllen Donnelly
Mr. & Mrs. Joe Gagnon
Francine Leffler
# Community Benefit

## Community Benefits FY 2015

<table>
<thead>
<tr>
<th>Service</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>71 people received free or discounted services</td>
<td></td>
</tr>
<tr>
<td>Community Health Improvement Services</td>
<td>$522,061</td>
</tr>
<tr>
<td>Health Professions Education</td>
<td>$3,773</td>
</tr>
<tr>
<td>Subsidized Health Services</td>
<td>$2,630,949</td>
</tr>
<tr>
<td>Financial and In-Kind Contributions</td>
<td>$4,259</td>
</tr>
<tr>
<td>Community Building Activities</td>
<td>$511</td>
</tr>
<tr>
<td>Community Benefit Operations</td>
<td>$9,227</td>
</tr>
<tr>
<td>Financial Assistance</td>
<td>$79,509</td>
</tr>
<tr>
<td>Unpaid Cost of Medicaid</td>
<td>$5,802,696</td>
</tr>
<tr>
<td>Means-Tested Programs</td>
<td>$93,989</td>
</tr>
<tr>
<td>Unpaid Cost of Medicare</td>
<td>$683,250</td>
</tr>
<tr>
<td>Bad Debt</td>
<td>$650,776</td>
</tr>
</tbody>
</table>

**Total Community Benefit**: $9,146,463

---

Top right: Natchaug program directors Jonathan Watts, MA, LPC, and Leah Russack-Baker, Ed.D, LADC, speak about Natchaug Hospital with an attendee at the annual ECSU Health, Wellness and Benefits Expo.

Bottom right: Students in an E.O. Smith High School psychology class participate in a group activity about mental illness during a presentation by the Hartford HealthCare Behavioral Health Network.

Because Every Moment Matters
We are grateful for all of the community groups and members who support the Journey House residential treatment program. Thank you to the following supporters for their donations of time and talent during 2015 and 2016:

African American Cultural Center of UCONN
Coach Ray Aramini and the ECSU Rugby Team
Bushnell Theatre
Delta Kappa Gamma-Theta Chapter
Sharon Bartlett
ECSU Center for Community Engagement
Kenneth and Dana Gwozdz
Mansfield Community Center
Caragh O’Brien
Dr. Willena Price
Laney Rosenzweig, founder of Accelerated Resolution Therapy
Samadhi Yoga Studio
Kelly Bey, Yoga Instructor
Alexis Vatteroni, Yoga Instructor
Tammy Sneed, Director of Gender Responsive Services
Jeanne Folks, Emotional Freedom Techniques trainer
The DCF Wilderness School
Soroptimist International of Willimantic
UCONN Expanded Food and Nutrition Education Program
Catherine Wade (in memoriam)
Take Note!
Carol Wiggins
Natchaug Garden Improvement Team
Jim Raynor
Ron Beaudoin
Maryellen Donnelly
Trish Lyons
Joyce Wicks
Nancy Schwartz
Ed Sawicki
Natchaug takes on the hidden world of sex trafficking

When Melissa Pelletier began working at Natchaug Hospital’s Journey House residential treatment program in 2007, an alarming trend was starting to emerge among the adolescent girls treated there.

“We were seeing girls coming in who were in ‘relationships’ with men that encouraged them to have sex for money,” said Pelletier, who serves as clinical director for the program.

“At that time, it was considered prostitution.”

Since then, the language and legal landscape have changed drastically. Minors under the age of 18 that have been coerced or forced into commercial sex acts are no longer labeled as prostitutes, but as victims of sex trafficking. And rather than being prosecuted, they receive the appropriate medical care and protection.

As sex trafficking has become better defined and understood, the number of cases and referrals has steadily increased.

In 2008, there were less than five referrals for domestic minor sex trafficking, according to the Connecticut Department of Children and Families; in 2015, referrals to DCF peaked at 133.

At Journey House, which treats girls from across Connecticut who are involved in the juvenile justice system, Pelletier estimates that between a quarter and half of the residents have been the victim of sex trafficking.

“When we look at vulnerabilities, mental health and people’s support networks play a role in victimization,” Pelletier said. “Many of the girls at Journey House lack substantial support networks. Unfortunately, that puts them at risk for being exploited.”

Sex traffickers often replicate a family system for vulnerable young people, offering clothes, money, shelter and food.

“We had one girl say that the female pimp bought her socks when she needed them,” Pelletier said. “They come in and fill voids of need for individuals.”

With incidences of domestic minor sex trafficking on the rise and an at-risk population at Journey House, Pelletier and the treatment team have been proactive in addressing the issue.

In 2011, staff was trained by the Justice Resource Institute in the My Life My Choice curriculum. More recently, Pelletier implemented Not A #Number, a child trafficking and exploitation prevention curriculum from Love 146.

“The girls at Journey House have often been in many different treatment settings. Some have been in dozens of placements over the course of their life, and these are 16- and 17-year-old girls,” said Christy Calkins, assistant director at Journey House. “We have to think out of the box to find treatment modalities that are different and effective, and Melissa has done a terrific job finding and implementing programs that the girls can relate to.”

The Not A #Number curriculum is broken down into five modules — a general overview of human trafficking and exploitation; myths and misconceptions; the power of language; vulnerabilities and healthy vs. unhealthy relationships; and reducing risky behavior and getting help.

“The girls love this curriculum. It’s very interactive and brings a lot of current issues into discussion,” Pelletier said. “For example, we looked at the song by 50 Cent called P.I.M.P. and how so much of this exploitation is mainstreamed into our culture and normalized, and how it’s even considered to be ‘cool’ to take advantage of people.”

Although some girls at Journey House have first-hand experiences with trafficking, the training and education can be beneficial to anyone.

“Even if this hasn’t happened to you, maybe it happened to a friend or a family member, and you can bring this knowledge, because the help and resources are out there,” Pelletier said.

For more information on domestic minor sex trafficking, visit DCF’s Human Anti-trafficking Response Team (HART) website at http://1.usa.gov/1OVXFRn.
Assets

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash on hand</td>
<td>$3,220,612</td>
<td>$2,394,282</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>$10,599,292</td>
<td>$8,379,056</td>
</tr>
<tr>
<td>Other current assets</td>
<td>$1,994,760</td>
<td>$836,797</td>
</tr>
<tr>
<td>Property, plant and equipment</td>
<td>$21,521,506</td>
<td>$21,534,093</td>
</tr>
<tr>
<td>Accumulated depreciation and amortization</td>
<td>($9,835,265)</td>
<td>($9,096,237)</td>
</tr>
<tr>
<td>Net property, plant and equipment</td>
<td>$11,686,241</td>
<td>$12,437,856</td>
</tr>
<tr>
<td>Other assets</td>
<td>$1,691,650</td>
<td>$2,041,819</td>
</tr>
<tr>
<td></td>
<td>$29,192,554</td>
<td>$26,089,811</td>
</tr>
</tbody>
</table>

Liabilities & Fund Balance

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total current liabilities</td>
<td>$8,810,983</td>
<td>$5,133,020</td>
</tr>
<tr>
<td>Total long-term liabilities</td>
<td>$5,908,537</td>
<td>$6,453,266</td>
</tr>
<tr>
<td>Long-term debt</td>
<td>$2,128,289</td>
<td>$2,298,823</td>
</tr>
</tbody>
</table>

Fund Balance

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted</td>
<td>$11,966,301</td>
<td>$11,974,805</td>
</tr>
<tr>
<td>Restricted</td>
<td>$378,444</td>
<td>$229,897</td>
</tr>
<tr>
<td>Fund balance</td>
<td>$12,344,745</td>
<td>$12,204,702</td>
</tr>
<tr>
<td></td>
<td>$29,192,554</td>
<td>$26,089,811</td>
</tr>
</tbody>
</table>

TOTAL REVENUE $51,504,586

- Other Revenue $521,992
- Educational Services $8,738,576
- Inpatient Adult $12,026,726
- Inpatient Child/Adolescent $8,658,776
- Adolescent Ambulatory $9,959,817
- Adult Ambulatory $8,253,622
- Residential Treatment Center $3,345,077

TOTAL EXPENSES $50,950,837

- Salaries & Benefits $37,364,264
- Supplies & Other $1,430,239
- Purchased Services $8,090,762
- Bad Debt $1,171,935
- Capital Costs $1,815,002
- Eastern Region Collaborations $1,078,635
The Hospital continues to operate in a very challenging environment of external change as the continuing impact of the Affordable Care Act is realized, and federal and state governments struggle with financial challenges under the Medicare and Medicaid programs.

However, we continue to move forward with significant investments in patient safety and quality initiatives at Natchaug, collaborating with our Hartford HealthCare partners to build a seamless system of high quality, coordinated care at the lowest possible cost.

We ended the year with overall volume decline of 0.3 percent from the prior year. This is the second year in a row that we have seen volume declines from the preceding period. We saw a slight decline in our inpatient volume. Our residential girls program saw a larger 8.3 percent decline year over year. Our partial hospital and intensive outpatient levels of care saw modest increases in volume. We saw a decline of 1.2 percent from prior year levels in our school programs, a continuing trend.

We continue to experience pressure on our higher margin programs, slower growth in our ambulatory services and significant cost pressures on inpatient care. In the face of these challenges we ended the year with a $554,000 operating margin, a decrease of $460,000 from the prior year’s performance and $600,000 below our operating plan of $1,154,000.

The average daily number of patients in the hospital was 51.3, a decrease of 1.2 percent from the prior year. We operated at 90 percent of capacity each year.

The Journey House program had an average daily census of 10.8 residents. The census during the last six months of the year continued to decline further presenting a significant challenge.

The Hospital’s ambulatory programs provided care for an average daily census of 238 clients, an increase of 3.1 percent from the prior year.

We saw a 10.4 percent decrease in services provided in our in-home service programs.

Our school programs provided education to an average of 158 students each day.

Natchaug is continuing its strategy of investing in resources to drive quality and patient experience metrics to higher levels and to work collaboratively across the Hartford HealthCare Behavioral Health Network to expand services into areas of need as well as integrate best practices. We continue to work aggressively on reducing the cost structure of Natchaug in the face of increasing care management, federal and state reimbursement constraints and slowing managed care rate increases.

During the year we implemented the PeopleSoft technology platform to standardize supply chain activity, treasury services, and financial reporting. We also added the Epic electronic medical record, so that there will be a single electronic health record across all HHC entities in order to enhance the client experience, coordinate care and drive improved outcomes. Throughout the year we trained all of our employees in our HHC Leadership Behavior program and continue to drive results through our H,W workgroups. During the latter part of the year we began initial training of our senior leaders in Lean Management techniques in preparation for the roll out of a system-wide program of daily management across our entities over the next couple of years.

Natchaug continues to fare well in an extended period of change within the healthcare industry and in the face of growing need in the communities we serve. We have implemented many strategies aimed at transforming our operation to succeed well into the future. Our strategies to improve quality and patient experience will position us well in the new era of healthcare reimbursement based upon results rather than volume. Our employees are integral to our success in meeting these challenges. We continue to invest in new tools and techniques to support our employees in the hard work that they do. Our community partners are more important than ever in our ability to serve local needs. As we face the financial challenges of the nation-wide healthcare transformation, we continue to collaborate with other community providers and leaders. We are grateful for the wide support we have in implementing our plan and remain optimistic that we can continue to meet the needs of those we serve.
2016 Annual Report

Because every moment matters