Trusted Connected Care
Our **Mission**

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 **Vision**

**Natchaug Hospital:**
Helping people find their way.

**Hartford HealthCare:**
Nationally respected for excellence in patient care and most trusted for personalized coordinated care.

**Accreditation and Licensure**

- Licensed by Connecticut Department of Public Health
- Surveyed by the Joint Commission using Hospital and Behavioral Health Standards
- Licensed and surveyed by the Department of Children & Families
- Special education programs are approved by Connecticut’s Department of Education
- Participates in most insurance and managed care programs
- Approved by Medicaid and Medicare
- A member of Hartford HealthCare’s Behavioral Health Network

**Pictured on the cover from left to right:**
Muhammad Hassan Majeed, MD, attending psychiatrist
Kaitlyn Occhionero, MSW, primary therapist, adult inpatient unit
David Heg, principal, Joshua Center Northeast clinical day treatment school
Mayra Santana-Robles, staffing manager
“Trusted, connected care” is what our entire system strives for every day. This year, this phrase is the theme of Hartford HealthCare’s annual reports – including Natchaug Hospital’s.

It’s a very fitting theme. In our fiscal year 2018 annual report you will read stories about our Zero Suicide initiative; Narcan distribution and education; MATCH expansion; our schools; community outreach; fighting the opioid epidemic and much more. All of these accomplishments enhance Natchaug’s reputation in the community as being both trusted and coordinated. But in addition to these highly visible examples, there is so much more, many times behind the scenes. Here are some examples:

• Our Rivereast adult and young adult program in Vernon started a non-clinical support group for the survivors of overdose. This is a much needed addition – it’s hard to find anyone who has not been touched by this widespread epidemic.

• Continued support after discharge. The Quinebaug adult and young adult program in Dayville successfully launched aftercare groups for patients who have completed partial hospitalization or intensive outpatient treatment.

• Thanks to a $15,000 grant from the Community Foundation of Eastern Connecticut, Care Plus adult and young adult programs in Groton and New London area responders were equipped with Naloxone (Narcan), a life-saving medication. A special thanks to the Foundation for its support.

• The Mansfield young adult program offered a summer program for college students on break, offering proactive strategies to stabilize them and prepare them for the upcoming school year.

• We are implementing new assessment tools to measure clinical and programmatic outcomes, as well as to meet a quality and safety balanced scorecard goal to reduce restraint and seclusion among the child and adolescent population.

• In 2018, Natchaug launched manager rounding with inpatient clients, at the time of admission and discharge, creating meaningful touch points. Rounding creates individual personal connections with patients, addresses needs proactively, offers the opportunity for service recovery in the moment, and ultimately led to improved patient experience scores and feedback.

• The inpatient beds continue to be full or near capacity daily, as we are serving both the Backus and Windham emergency departments, as well as surrounding communities. We are among the last organizations continuing to provide child and adolescent services in Connecticut.

• Journey House no longer has a contract with the Department of Children and Family Services. The funding allocated to the program by the state was moved to the Community Support Services Department (CSSD) of the Judicial Branch. CSSD has such confidence in this highly structured program, which is the only locked facility for girls in the state, that they didn’t even put the contract out to bid.

These are just a few examples of why Natchaug is known for “trusted, connected care.” But none of this would be possible without the hard work and dedication of our staff. Thank you to everyone for helping us reach new heights in 2018, and for your work towards continued improvement in the next fiscal year.

Pat Rehmer, MSN, ACHE
President, Hartford HealthCare Behavioral Health Network
Senior Vice President, Hartford HealthCare
Suicide prevention is a topic that’s very close to Patricia Hayward-Paige’s heart. The Natchaug pharmacy technician lost a close friend to suicide nearly 20 years ago.

“She made an attempt and was unsuccessful. I was able to get her to a hospital and get her some help. She moved back to California, tried again and succeeded because no one there knew she was having a problem,” said Hayward-Paige.

Hayward-Paige’s experience has made her determined to help those who might be thinking about suicide. She and dozens of other clinical and non-clinical staff from across the Behavioral Health Network are helping to implement Zero Suicide – a system-wide, evidenced-based approach to establish more focused assessment and timely follow-up care for patients who are at risk of suicide.

In 2015, the Institute of Living was one of the first 20 organizations worldwide to be accepted into and trained by The Zero Suicide Academy, a two-day training for senior leaders of health and behavioral health organizations seeking to reduce suicide inside and outside their care settings. Since then, Natchaug, Rushford, Backus Hospital and the Hospital of Central Connecticut have all joined the IOL in implementing Zero Suicide as individual entities and as a system.

Under the Zero Suicide initiative, patients are assessed using the highly regarded Columbia Suicide Severity Rating Scale (C-SSRS). C-SSRS uses a series of simple plain language questions asking the patient, for example, whether and when they have thought about suicide; what actions they have taken to prepare for suicide; and whether and when their attempted suicide was either interrupted by another person or stopped of their own volition.

Zero Suicide also focuses on training clinical and non-clinical staff, evidenced-based treatments focusing explicitly on suicide risk, establishing policies to ensure safe handoffs between caregivers, and effective engagement of patients at risk including a follow-up phone call within 24 hours after discharge.

“It’s a high-risk period. Just reaching out and making that call dramatically reduces the risk of suicide,” said Deborah Weidner, MD, MBA, East Region Behavioral Health Network Medical Director and BHN Vice President of Patient Safety and Quality.

At Rushford, Medical Director J. Craig Allen, MD, said the organization’s highest risk patients are those discharged from their detox program. He said these are the patients who get next day follow-up phone calls.

“The population that suffers from substance abuse disorders is at an extremely high risk of suicide because of the nature of the substances, which can increase the rates of depression, decrease inhibitions and increase impulsivity. And the one variable that’s most highly correlated with suicide is alcohol,” Allen added.

Dr. Weidner said staff engagement in the Zero Suicide initiative is a key to its success and that many staff members, like Hayward-Paige, have answered the call.

“For me, if I can help one person by volunteering to be part of this group then it’s worth it,” said Hayward-Paige.
Clinician saves a life by preventing woman from jumping off bridge

When you work on the frontlines in healthcare, you’re really always on duty.

For Amy Gallagher, lead clinician at Natchaug Hospital’s Joshua Center Thames Valley in Norwich, that was never more apparent than on Thursday, April 12, 2018.

Gallagher was driving with her 16-year-old daughter on Interstate 91 in New Haven. Traveling on the historically congested section of highway, she was forced to slam on her breaks after the truck in front of her did the same to avoid an accident. A car immediately in front of the truck had spun out and came to an abrupt stop in front of the overpass.

“The truck drove off and we stopped. We were kind of shocked. My daughter thought it might be the person’s tires [that caused the crash]. I told her to call 911,” Gallagher said.

While her daughter called for help, Gallagher approached the driver’s side window to see if the driver, a young woman, was OK.

“She said she was OK. She was just a little dazed,” Gallagher said. “Then she got out and went in front of the car and put her head down on the overpass.”

The woman was trying to kill herself.

“She put her leg on top of the bridge and went to jump so I grabbed her and had her by the waist and she was just slipping,” Gallagher said. “It was like a scene from a movie, to the point where I literally had her by her two wrists and she was dangling off the bridge.”

Minutes later another car pulled over, two women got out and, along with Gallagher’s daughter, helped to subdue the woman. Gallagher, who was eight months pregnant at the time, had to back away because the woman was punching and flailing, and she was concerned about her baby.

“She continued to fight with us and was saying, ‘I just want to die. I just want to die,’ ” Gallagher said. That’s when Gallagher’s social worker training kicked in. “I just wanted to bring her back [mentally] to where we needed to be.”

“First of all, I told her ‘I’m eight months pregnant. I can’t have you punch me in the stomach, and I’m not going to let you kill yourself in front of my daughter,’” Gallagher said.

That seemed to calm the woman a bit. She said she just wanted to die, but didn’t want to hurt anyone else, Gallagher said. “I said, ‘I understand that. I hear you. But it’s not going to be today. There’s not anything that we can’t fix. We’re going to get you some help,’” Gallagher said.

After about 20 minutes of struggle and trying to calm the woman down, emergency workers arrived and took the woman to a local hospital. Gallagher was unharmed. Her daughter was a bit shaken.

“When we got home, she just started to cry,” Gallagher said. “She’s such a goal-oriented kid who wants to go into medicine as a career, so I know this will just reaffirm her desire to want to help people. I’m so proud of her.”

For Gallagher, there was never a second thought about what she had to do.

“It wasn’t really a decision for me. It was ‘just do it,’ ” said Gallagher. “I didn’t want commendation. It wasn’t about that. It’s really about me appreciating that God put me there at that very moment to help this young lady, and I would do it over and over again.”
Thanks to $15,000 in funding from the Community Foundation of Eastern Connecticut (CFECT), families of clients at Natchaug Hospital’s Care Plus program and the City of New London’s first responders have better access to Narcan to help save the lives of opioid overdose victims.

A ceremony was held at the New London Fire Department Headquarters on Oct. 12, in which Hartford HealthCare, Natchaug Hospital and the city of New London, including its fire department, celebrated their strong relationship and gave thanks for the grant—which not only saves lives, but also helps connect patients to care.

Natchaug Hospital used funds from CFECT to purchase Naloxone kits, known commercially as Narcan, for family members of clients who have been treated for opioid addiction and/or overdose, and also distribute them to New London first responders.

“We’re very proud of the quick response times of our ambulance service here in New London,” said New London Mayor Michael Passero, a former firefighter. “With Narcan, timing is everything. This partnership is crucial because now the ambulance service can partner with the community, family members, friends and educate them on how to provide Narcan. The extra time that is saved can be really important.”

Narcan prevents opiate overdose death by quickly reversing the effects of the drug. While pharmacies in Connecticut can now prescribe and distribute Narcan and the accompanying kit over the counter, it is expensive and not covered by insurance. New London Human Services Director Jeanne Milstein said New London has made strides in the opioid crisis and said community partnerships are crucial.

“Hartford HealthCare has been an essential partner,” she said. “We know we can get someone into treatment and that there are quality services available in the city.”
In the shadow of a relentless opioid epidemic, Hartford HealthCare and Natchaug Hospital have become leaders in addressing the challenges of addiction and mental health in a compassionate, accessible and discreet way with the rapidly expanding MATCH Program.

MATCH, or Medication Assisted Treatment Close to Home, was first introduced in the Behavioral Health Network (BHN) in early 2016 as a multifaceted way of helping opioid and alcohol users find lasting sobriety.

“Substance use and psychiatric disorders frequently co-occur and outcomes are significantly improved when treatment addresses both issues,” said J. Craig Allen, MD, medical director of Rushford. “With MATCH, we coordinate medication management and psychosocial therapy within a team that has expertise in both behavioral and substance use disorders.”

MATCH combines the use of the FDA-approved medications such as Suboxone or Vivitrol to reduce cravings for opioids and alcohol with group therapy aimed at relapse prevention and opportunities for holistic treatment such as yoga. Through its various locations, the program has touched thousands of lives. From July 1, 2017 through June 30, 2018, more than 2,500 clients with a diagnosis of opioid addiction came through the various MATCH locations.

“Medications such as Suboxone help these individuals continue to function at home and at work while they are working on their recovery,” Allen said, adding that, “same-day appointments and flexible programming accommodates clients who have real-life work, family and social responsibilities in addition to managing their substance use disorder.”

Medication, he explains, improves treatment outcomes but every patient also participates in a relapse prevention group to help improve their overall functioning and provide support throughout the recovery process. Private physicians can prescribe medications to help patients find sobriety, but the value of MATCH comes in the support and healthy services offered as well. Classes in yoga, meditation, exercise and mindfulness are also part of MATCH because Allen said they are known to have a positive impact on substance use disorder, depression, anxiety and overall mental and physical health.

To meet the state’s demand for opioid-specific programming, MATCH expanded recently to add several new sites. The 16 locations now include:

- Natchaug treatment sites located in Danielson, Dayville, Enfield, Groton, Mansfield, Norwich and Old Saybrook, as well as a new location in Vernon.
- A new Rushford site in Middletown in addition to its existing sites in Avon, Cheshire, Glastonbury and Meriden.
- A Backus location opening soon in Norwich.
- A Hospital of Central Connecticut site in New Britain and one recently opened in Southington.

“The opioid epidemic continues in Connecticut and nationwide,” said BHN President Patricia Rehmer. “The Hartford HealthCare Behavioral Health Network continues to be proactive by providing MATCH services across Connecticut, in urban and suburban locations, so people can access the services that they need. We are consistently adding new locations because we are keenly aware of how important it is to have medication assisted treatment, close to home.”
Partnership Builds a Bridge:
Natchaug Students Create Span for Spirol Campus Walking Trail

Natchaug is building bridges with the community – literally.

On Tuesday, June 10, the Natchaug Hospital Joshua Center Northeast YouthWorks program presented Spirol International Corporation chairman Jeffrey Koehl with a 16-foot bridge, designed and constructed by the students for the company’s campus green walkway.

Spirol, a global manufacturer headquartered in Danielson, Connecticut, has been a long supporter of Joshua Center Northeast. The company’s $12,000 donation in 2010 funded the purchase of the Haulmark cargo trailer that was transformed into a portable workshop for the YouthWorks vocational skills program at Joshua Center Northeast (Danielson) and Joshua Center Thames Valley (Norwich) Clinical Day Treatment Schools.

“They got in touch with us at the beginning of the school year and told us about the new green walking trail they had added to their campus for their employees, and asked if we would be willing to build a bridge for it,” said Joshua Center Northeast Clinical Day Treatment School principal David Heg.

The materials were paid for by Spirol, but the design and execution of the project was handled by YouthWorks teacher Kevin Maines and 10 students over a five-month period, starting with a site analysis where they measured the length needed and the height above where the water flows out. Maines and the students worked with town hall and the building inspector to determine the requirements for railing height and spacing, created a material list and priced it out, looked into different designs, profiles, installation techniques and types of fasteners, and eventually created a detailed plan to follow.

“The actual building process was really production style; we became very efficient. We had people set up making the balusters, people plating railings, people drilling holes,” Maines said. “The project really reinforced partnerships and teamwork, even with kids who maybe don’t really like each other.”

The finished bridge weighs between two and three tons, Maines estimates, and is made entirely from locally sourced materials purchased at Danielson-area stores including Boudreau’s Welding Company, Sigfridson Wood Products and O.L Willard Company.

“That’s really key to this whole project – it all goes back into the community,” Heg said.

For the students involved in the project, the presentation ceremony was especially meaningful.

“The students were really excited to be photographed and recognized for something they did for the community, something that they constructed themselves,” Maines said. “The issues that bring them here kind of stay behind when they’re being recognized.”

Cassandra, who is in her first year at Joshua Center Northeast and hopes to someday pursue a career in construction, took pride in the group’s accomplishments.

“It felt good because it’s not only making us happy, it’s making many people happy when they walk across it and know that somebody put a lot of work into this,” Cassandra said.
At just 29 years old, Tiffany has endured more hardship and suffering than most can imagine.

She was just 15 when she and her sister were kidnapped and sold into the human trafficking system. During her captivity, she was sedated with heroin, which started a lifelong battle with addiction. She was only able to escape because of the heroic acts of her sister, who was murdered in the process.

Since then, she has battled her opioid addiction, coped with the loss of her brother to overdose, and fought to gain custody of her two children, all between stints in jail and rehab. On Oct. 26, Tiffany stood at a podium before dozens of Natchaug Hospital staff and supporters to share her story and how Natchaug’s Care Plus program transformed her life.

“It’s rare when you come across a program like Care Plus. It’s amazing. It’s a big family. You feel at home.”

“Today, I’m grateful to tell you that I will have four years of sobriety [in January], and if it wasn’t for [Care Plus] I don’t know where I’d be,” Tiffany said. “It’s rare when you come across a program like Care Plus. It’s amazing. It’s a big family. You feel at home.”

Tiffany was one of three clients who shared their stories at Natchaug Hospital’s annual reception at the HHC East Region System Support Office in Norwich.

“Lives are being changed [at Natchaug Hospital] and I’m one of them. That’s why I stand here today in front of you,” said Betty, an oncology nurse and former client at Care Plus. “To think that at one time I was suicidal boggles me. I’ll always be grateful for Natchaug and its programs.”

The third speaker, April, is a former client at Natchaug’s Rivereast program in Vernon who received public attention for her work starting an impulse control support group after graduating from treatment. April was diagnosed with kleptomania after more than 20 larceny arrests and has used the support group as an opportunity to give back. “If I can help one person not feel alone, it’s all worth it,” April said.

Pat Rehmer, HHC Senior Vice President and Behavioral Health Network President, applauded the courage of all three speakers and highlighted the importance of a recovery-oriented system of care. “It’s critical that people with lived experience are involved in the decisions that we make and the programs that we develop and the care we deliver,” she said. “We are really moving the system in that direction, which is very important to me and the people we serve.”

Betsy Ritter, chair of Natchaug’s development committee and the state commissioner on aging, underscored the importance of having open and honest dialogues about mental health and addiction in her opening remarks for the event. All three speakers received standing ovations for their moving stories, as they credited the clinicians, program directors and staff who helped them along the way.

“If only you knew how you guys make us feel and how comfortable, and knowing that you guys took the time to get to know me when I didn’t want to know me,” Tiffany said. “That’s what’s beautiful.”
At first glance, it looks like so many other events on a college campus. Inflatable obstacle courses, T-shirt tie-dying stations and a student-led yoga class pepper the lawn. Students stroll by booths representing different campus groups, collecting Frisbees, sunglasses and other giveaways. Others line up by a row of local food trucks as a student acapella group performs nearby.

What differentiates this event from so many other college fairs and festivals is the important message it hopes to deliver to students – that mental health matters and you’re never alone.

Delivering that message has become a personal calling for Marisa Giarnella-Porco, who spoke at Natchaug Hospital’s ECSU Foundation Luncheon on Wednesday, March 14. Her son, Jordan, was just a month into the second semester of his freshman year at St. Michael’s College in Vermont when he took his own life.

“In speaking with Jordan’s friends, we know he was exhibiting some behavior changes,” Giarnella-Porco said. “At home, before he left for the semester, he was struggling with decisions like whether he wanted to take a gap year and what his major would be.”

Jordan didn’t show some of the tell-tale symptoms of severe depression or mental illness, like withdrawal from friends or activities, and as a career social worker, Giarnella-Porco never shied away from discussing mental health or suicide in her home.

“There were some definite changes going on, but he wasn’t formally diagnosed with any mental illness and was masking his symptoms by going to school and about his routine,” Giarnella-Porco. “[After his death,] a lot of people felt that if it happened to Jordan, it could happen to anyone.”

In the wake of Jordan’s death, Giarnella-Porco channeled her grief into helping address the issue of suicide in young adults, which ranks as the second leading cause of death for the age group. With the help of family and friends, she began that journey by researching the landscape of college mental health education and awareness.

“Our initial finding was that there were some really great resources and programs out there, but we didn’t know how they were getting to the kids,” Giarnella-Porco said.

Inspired by her son’s legacy, Giarnella-Porco co-founded the

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Jordan Porco Foundation which debuted its signature Fresh Check Day in 2012 at Eastern Connecticut State University in Willimantic.

Fresh Check Days raise awareness and education about mental health and suicide on college campuses, while also offering students an opportunity to connect with organizations and resources. The event is packaged in a way that appeals to the college lifestyle, with free food and giveaways, live music and interactive displays and activities.

“Jordan never would have gone to a mental health event on campus, but if you made it fun with a festival-like atmosphere, you might engage somebody like Jordan to come and have conversations with people on campus and create an avenue for education and awareness,” Giarnella-Porco said.

Each Fresh Check Day takes about a semester to plan, and the organizers rely heavily on support from student groups and organizations.

“We involve all disciplines across campus, so it’s not just on the back of the counseling center,” Giarnella-Porco said. “It’s designed to bring the message to the students wherever they’re at, whether they are concerned about a friend or themselves, or they need the opportunity to see where on campus they can fit in or connect.”

Since the Jordan Porco Foundation held its first Fresh Check Day, the event has spread to college campuses across the country. In 2017 alone, there were 128 Fresh Check events in 34 states that were attended by more than 30,000 students.

Many schools, including local colleges like Eastern Connecticut and the University of Connecticut, have made Fresh Check Days an annual occurrence, and the response from students has been powerful.

“We’ve had students say, ‘I needed this. It’s finals time and I’m stressed out,’” Giarnella-Porco said. “One school shared that a student ripped up their suicide note after attending the event.”

With the success of Fresh Check Days, the Jordan Porco Foundation established two other programs – “Nine Out of Ten,” an ambassador program which empowers students on campus to find their voice and spread suicide prevention messaging in creative ways, and “4 What’s Next,” which offers high school juniors and seniors the chance to interactively discuss transitioning out of high school into work, the military or college.

“Everything we do is really peer-centered, because kids really know how to communicate with each other,” Giarnella-Porco said. “When it’s done safely and with some guidance, it’s a really effective way to promote this message… that suicide prevention is everyone’s responsibility.”
Second Annual Charity Co-Ed Softball Tournament

Natchaug Hospital held its second annual Charity co-ed Softball Tournament on Saturday, June 2 at Recreation Park in Willimantic. The event raised more than $3,500 for Natchaug’s child and adolescent unit. The event featured 11 teams vying for a title along with concessions from local food trucks, raffles and a visit from a therapy donkey.

Thank you to the softball teams for their support:

- Backus Hospital Crushers
- Foxy’s Gang
- FWB
- Natchaug Hospital Ogre
- Prime 82
- Quintal Insurance Agency
- Rushford Recovery Rockstars
- Sandlot
- Willimantic Police Department
- Windham Public Schools

Second Annual 5k Trail Run and Nature Walk

The second annual 5K Trail Run and Nature Walk took place Saturday, Oct. 14 on the Nipmuck Trail in Mansfield Hollow. Walkers and runners were transported to and from the trail and enjoyed a picnic lunch. All proceeds raised from the event benefited programs and services at Natchaug Hospital.
A team of experts from Hartford HealthCare’s Behavioral Health Network (BHN) hosted a town hall discussion at Norwich Free Academy regarding the Netflix series “13 Reasons Why.”

The series, in which a teenage girl commits suicide, leaving behind cassette tapes detailing the way people in her life let her down or hurt her, has sparked numerous conversations surrounding teen suicide.

One of the most honest moments in the episode, which included the graphic suicide, is when Clay Jensen, the series protagonist and reason number 11, says, “The way we treat each other and look out for each other — it has to get better somehow.”

“It’s important to have conversations because this is what our kids are watching,” noted BHN Vice President James O’Dea, PhD, MBA, who moderated the viewing and panel discussion at Norwich Free Academy on Nov. 30. “If we engage with them, we can really have an impact on our children’s lives.”

“13 Reasons” instantly became binge-worthy among American teenagers when it aired earlier this year, but Paul Weigle, MD, associate medical director at Natchaug Hospital and a child and adolescent psychiatrist, said that’s actually positive.

“It has brought up for discussion topics we find difficult to talk about,” he said. “Five thousand teens a year commit suicide — what can you do if a friend talks about it?”

He suggested:
• Taking all threats seriously.
• Letting people know, even if that means the friend who threatened suicide gets mad.
• Let the person know you care by listening.

“Your purpose is to get them to talk to someone who can help keep them safe, not to fix their problem,” Weigle explained, adding, “but, do not rush to a conclusion or judgment.”

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Laura Saunders, PsyD, ABPP, a clinical psychologist at the Institute of Living, said “13 Reasons” helped people understand depression more and made them want to erase the stigma surrounding all mental health issues.

“Being depressed is not your fault. Being assaulted is not your fault,” she said, referring to an incident of sexual assault that also happened in the series. It’s important, she continued, for friends and family to ask direct questions without worrying that they will “plant” the idea of suicide. “It doesn’t put the idea in a person’s head, it’s already there,” she said. “It might actually be a relief so they know they can talk about it. Ask how they’re doing. Then ask again. Eventually, they’ll know you’re a resource for them.”

When starting that conversation, Weigle suggested being prepared to hear that the person feels hopeless or beyond help. Pressing on to find the person help is important because treatment is extremely effective.

Conversations can be informal and spontaneous or planned as part of a nightly dinner ritual, something Saunders said is rare today. “There is research into the value of the family dinner,” she said. “It lowers drug use and suicide rates. We are losing our basic social skills with the increased use of technology, so it’s even more important to gather the family as often as possible.”

There is also a direct relationship between depression and the time teens spend online, which has doubled since 2000, Weigle added. Screen time pulls teens away from activities they enjoy, socializing and sleep, which all impact their frame of mind.

Grants Support Vital Programs

The grants received from August 2017 to August 2018, totaling $127,000, include:

- **Altrusa International, Inc. NECT**
  $600 to fund sex trafficking training for staff at the Groton programs

- **Bodenwein Public Benevolent Foundation**
  $1,000 to support a clothing fund for clients being served at Care Plus and Joshua Center Southeast

- **Chamber of Commerce of Eastern Connecticut Foundation**
  $1,500 to create a therapeutic library to benefit clients at Care Plus

- **Chelsea Groton Foundation**
  $3,000 to build an outdoor play area for Joshua Center Thames Valley
  $2,400 to create a therapeutic library to benefit the clients at the Joshua Center Thames Valley

- **Community Foundation of Eastern CT**
  $16,000 to support the Natchaug Client Connection and Retention Project

- **Community Foundation of Eastern CT – the Marilyn Anne Adams Nellis Fund**
  $5,000 to purchase sensory motor arousal regulation treatment (SMART) supplies for Journey House

- **Connecticut Health Foundation**
  $50,000 to fund the integration of behavioral health in the primary care setting

- **The Dime Bank Foundation**
  $1,500 to purchase sewing machines for clients at Joshua Center Thames Valley

- **Department of Mental Health and Addiction Services (DMHAS)**
  $25,000 to train staff to treat gambling addictions in the adult ambulatory programs

- **The ECSU Foundation**
  $9,000 raised at the annual ECSU foundation luncheon, attended by almost 100 people, to benefit Natchaug educational programs. Over 10 years, the annual ECSU Foundation luncheons have raised a more than $120,000.

- **The Johnson Family Foundation**
  $20,000 to support upgrades to the child and adolescent unit, family room updates and playscape enhancements as well as naloxone kits for clients and their families

- **Soroptomist International of Willimantic**
  $1,000 to fund trauma-informed yoga programs at Journey House
Visionary
Community Foundation of Eastern CT
Connecticut Health Foundation
Department of Mental Health and Addiction Services
The Johnson Family Foundation

Benefactor
Anderson-Paffard Foundation
Chelsea Groton Foundation
Stephen W. Larcen, Ph.D. & Susan Graham
Margaret Marchak, JD
Carol A. Wiggins, Ph.D.

Leadership
Bodenwein Public Benevolent Foundation
Chamber of Commerce of Eastern CT
Arthur Diaz
The Dime Bank Foundation
ECSU Foundation
The Savings Institute Foundation
Deborah Weidner, M.D. & Manny Nainu

Sustainer
Altrusa International, Inc, NECT
Annetta Caplinger
Dee Charbonneau
Vincent and Janice DiBattista
Gates GMC Nissan
William Goba & Joan Russoniello Goba

Dr. & Mrs. Raymond B. Johnson
Tom King
James Murray
Caragh O’Brien & Joseph LoTurco
Michael Pallein, CPA
Patricia Rehmer & Peter Tercyk
Betsy & Grant Ritter
Pamela Shuman, M.D.
Robert & Mary Sullivan

Patricia Adamski
Katemilly Alvarado
Sheila Amdur & Marcy Neff
Christy Andrychowski
Donna and Jim Andrychowski
Glenn & Laura Brilla
Robin Beauregard
Curt Beck
Lenny Bellet
Harry & Honey Birkenruth
BJ’s Wholesale Club
John & Susan Boland
Stephanie Bonardi
Tom & Kathy Bonner
Jill Bourbeau
Carolle Breault
Don & Ellen Buffington
David & Nancy Bull
Catina Caban-Owen, AGSW
Rosario Cacciatore
Harry & Sandy Carboni
Christy Ca folks
Amanda Carchidi
Judy Cariglia

Timothy Carroll, LCSW & Marianne Carroll
Janette Cawley
Darren Chick
Laurie Clinton
Larry & Elaine Coletti
Karen Colt
Shawn Cyr
Diane Daniels
Gus Demo
Howard & Carol Drescher
Candace Duchaineau
John & Victoria Duers
David & Phyllis Emigh
First Church of Christ, UCC
Katelyn Gomes
Kaye Gregory
Michael Haggerty
Betty Hale
Jenna Hanelus
Carleigh Hannah
Karla Harbin Fox
Kimberly Harrison
Karen Hart
David & Suzanne Heg
Brian & Jennifer Helbe
Angela Hernandez
Onix Herrans
Nisal Hewathanthri
Shawna Jaworowski
George & Janet Jones
Janet Keown
Mary Kinsella-Shaw
Hans & Christine Koehl
Henry & June Krisch
Landon’s Tire
Ashley Laprade
Scott & Rebecca Lehmann
Martin Levine

Janet Luberto
Gerry Lupachino
Matt & Margarethe Mashikian
Shawn Mawhinney
Shawn Maynard
John & Barbara McGrath
Andreanna McKinzie
Kate McNulty
Dr. & Mrs. Walter McPhee
Alan & Kathy Miller
Jon Mitchell
Edward Moran
Anthony & Melissa Morgera
Saranne Murray & Jackson Foley
Dr. Elsa Nunez
Jim O’Dea, Ph.D.
Hommy Otero
Jessica Pacheco
Jayantkumar Patel, M.D.
Melissa Pelletier
John Perry
Carrie Piche, Ph.D.
Policemen’s Benevolent Association of Willimantic
Bill & Candace Powers
Kenneth Przybysz
Paula Purvis
Lynne Quintal-Hill
Janet Ragno
Amanda Riesley
Larry & Catherine Ross
Juan & Brandi Sanchez
Robert & Marie Santa
Mayra Santana-Robles
Jose Scarpa
Rabby Jeremy Schwartz
Paul Secker
Jacqueline Seide
Deanne Shapiro
Pamela Shaw
Jonathan Simpson
Beverly Sims & William Okes
Sherry Smardon
Evette Smith
Shelby Smith
The Honorable & Mrs. Squatrito
Gale Sullivan & Jerome Ray
Team Backus
Team Crushers
Team Foxy’s Gang
Team FWB
Team Natchaug
Team Ogre
Team Prime 82
Team Quintal Insurance Agency
Team Rushford Recovery
Rockstars
Team Sandlot
Team Willi PD
Team Windham Schools
Lisa Tedesco
Tom & Lee Terry
Phil & Dani Titterton
Jennifer Tomenesen
Scott Trepener
Deborah Walsh
Cathy Walton
Jonathan & Patricia Watts
Paul & Diane Wishnafski
Paul Weigle, M.D.
Karen Zimmer

In Kind
Helen Collins-Rucker
TOTAL EXPENSES $53,578,961

A: Supplies & Other: $728,896
B: Eastern Region Collaborations: $762,489
C: Capital Costs: $1,633,152
D: Bad Debt: $1,608,373

TOTAL REVENUE $53,461,223

Financial

Assets

<table>
<thead>
<tr>
<th>Item</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash on hand</td>
<td>$6,983,142</td>
<td>$4,867,157</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>$9,788,865</td>
<td>$10,694,783</td>
</tr>
<tr>
<td>Other current assets</td>
<td>$1,758,177</td>
<td>$1,794,950</td>
</tr>
<tr>
<td>Property, plant and equipment</td>
<td>$22,697,302</td>
<td>$22,026,331</td>
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<tr>
<td>Accumulated depreciation and amortization</td>
<td>$(11,552,459)</td>
<td>$(10,768,963)</td>
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<tr>
<td>Net property, plant and equipment</td>
<td>$11,144,843</td>
<td>$11,257,368</td>
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<tr>
<td>Other assets</td>
<td>$361,492</td>
<td>$534,210</td>
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<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$30,036,519</strong></td>
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Liabilities & Fund Balance

<table>
<thead>
<tr>
<th>Item</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total current liabilities</td>
<td>$10,392,175</td>
<td>$9,434,103</td>
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<tr>
<td>Total long-term liabilities</td>
<td>$3,618,548</td>
<td>$6,710,303</td>
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<tr>
<td>Long-term debt</td>
<td>$1,851,161</td>
<td>$1,955,075</td>
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<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$15,861,884</strong></td>
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</table>

Fund Balance

<table>
<thead>
<tr>
<th>Item</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted</td>
<td>$13,604,782</td>
<td>$10,576,206</td>
</tr>
<tr>
<td>Restricted</td>
<td>$569,853</td>
<td>$472,781</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$14,174,635</strong></td>
</tr>
</tbody>
</table>

|  | **Total** | **$30,036,519** | **$29,148,468** |
Operations

Statement of Operations

Natchaug Hospital continues to operate in a very challenging environment including reductions in funding by Medicare and Medicaid, reductions in state grant funding, increased competition and an increasingly acute client population in need of our services.

The hospital ended the fiscal year with an overall net loss of $118,000 in comparison to the prior year’s net gain of $952,000.

Overall, Natchaug ended the year with a volume increase of 2.4 percent over the prior year, which reversed a three-year trend of declining volumes.

Inpatient volumes saw a 4-percent increase; Journey House residential girls program increased census by 9.3 percent year-over-year; partial hospital (PHP) and intensive outpatient (IOP) levels of care increased volume by 5.1 percent.

However, a subset of the PHP and IOP volume, the young adult programs which opened several years ago in response to an increased need, saw an 18.5-percent decline in census from the prior year. Natchaug school programs saw a slight decline of 0.8 percent from prior years, which represents the fifth successive year of decline and reflects the increased challenge that local school districts face in funding special education needs.

The hospital’s lower level outpatient service volume, which includes the Medication-Assisted Treatment Close to Home (MATCH) program started in response to the opioid epidemic, grew 13 percent from the prior year.

Natchaug did see reductions in adult service volumes in both inpatient (2.5 percent) and ambulatory (2.9 percent) services offset by increases in adolescent and child services. This trend causes challenges as it results in a shift to lower margin services which generally have a significantly higher cost per unit of service.

During the year, the hospital realized the full impact of the Medicaid outpatient rate reduction implemented in July 2016. This reduction resulted in an annualized loss of approximately $1.2 million in revenue to the hospital.

Despite the improved overall volumes, the shift toward lower margin services, the higher acuity of our clients and the Medicaid rate reduction depleted net income by $1.1 million, resulting in the $118,000 loss for the period.

- The average daily number of patients in the hospital was 53.4, an increase of 4 percent from the prior year. The hospital operated at 94 percent of capacity during the year.
- The Journey House program had an average daily census of 11.3 residents, also representing 94 percent of capacity.
- The Hospital’s ambulatory programs provided care for an average daily census of 249 clients, an increase of 5.1 percent from the prior year.
- Services provided by in-home service programs saw a 6.1-percent reduction.
- School programs provided education to an average of 154 students each day.

In the face of increasing care management, federal and state reimbursement constraints and slowing managed care rate increases, hospital leadership and staff continue to work aggressively on reducing costs.

There continues to be significant need in the community. Natchaug remains fully engaged with partners throughout the region and across the state in identifying and addressing those needs. Natchaug will continue to implement many strategies so we can continue to achieve Hartford HealthCare’s vision of being most trusted for personalized coordinated care.
Program Listing

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 with an 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 including the Young Adult program that serves men and women 18- to 25-years-old in Dayville, Groton, Mansfield and Vernon.
Older Adult program serves adults over 55 in Windham.
Danielson, Dayville, Enfield, Groton, Mansfield, Norwich, Old Saybrook and Vernon

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

Extended Day Treatment Program:
After-school 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.
Danielson, Dayville, Enfield, Groton, Mansfield, Norwich, Old Saybrook, and 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, Franklin, Mansfield, Norwich, Old Saybrook

NATCHAUG HOSPITAL
189 Storrs Road
Mansfield Center, CT 06250
860.456.1311 or 800.426.7792

JOURNEY HOUSE
189 Storrs Road
Mansfield Center, CT 06250
860.456.1311

JOSHUA CENTER ENFIELD
72 Shaker Road, Suite 7
Enfield, CT 06082
860.749.2243

JOSHUA CENTER MANSFIELD
189 Storrs Road
Mansfield Center, CT 06250
860.456.1311

JOSHUA CENTER SHORELINE
5 Research Parkway
Old Saybrook, CT 06475
860.510.0163

JOSHUA CENTER NORTHEAST
934 North Main Street
Danielson, CT 06239
860.779.2101

JOSHUA CENTER SOUTHEAST
1353 Gold Star Highway
Groton, CT 06340
860.449.9947

GREEN VALLEY CLINICAL DAY TREATMENT SCHOOL
206 Pond Road
North Franklin, CT 06254
860.809.0410

CARE PLUS
1353 Gold Star Highway
Groton, CT 06340
860.449.9947

(Continued next page)
Journey House Supporters

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 2017 and 2018.

African American Cultural Center of UCONN
Coach Ray Aramini and the ECSU Rugby Team
Sharon Bartlett
Bushnell Theatre
Delta Kappa Gamma-Theta Chapter
EASTCONN
ECSU Center for Community Engagement
Jorgensen Youth Program
Mansfield Community Center
Natchaug Garden Improvement Team
Jim Raynor
Ron Beaudoin
Maryellen Donnelly
Trish Lyons
Joyce Wicks
Nancy Schwartz
Ed Sawicki
Caragh O’Brien
Dr. Willena Price
Laney Rosenzweig, founder of Accelerated Resolution Therapy
Samadhi Yoga Studio
Sea Tea Improv Comedy Theater
Soroptimist International of Willimantic
Take Note!
Tera Rescue Farm
UCONN Expanded Food and Nutrition Education Program
Carol Wiggins, PhD
Windham Area Interfaith Ministry

Community Benefits

**FY 2017**

<table>
<thead>
<tr>
<th>Services</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>People Who Received Free or Discounted Services</td>
<td>1,465</td>
</tr>
<tr>
<td>Community Health Improvement Services</td>
<td>$437,525</td>
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<tr>
<td>Health Professions Education</td>
<td>$360,534</td>
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<tr>
<td>Subsidized Health Services</td>
<td>$54,752</td>
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<tr>
<td>Financial Assistance</td>
<td>$120,558</td>
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<tr>
<td>Unpaid Cost of Medicaid</td>
<td>$4,302,255</td>
</tr>
<tr>
<td>Means-Tested Programs</td>
<td>$370,778</td>
</tr>
<tr>
<td>Unpaid Cost of Medicare</td>
<td>$457,701</td>
</tr>
<tr>
<td>Bad Debt</td>
<td>$892,922</td>
</tr>
<tr>
<td><strong>Total Community Benefit with Medicare, Bad Debt and Community Building</strong></td>
<td><strong>$6,997,025</strong></td>
</tr>
</tbody>
</table>