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Rushford Board (as of June 30, 2015)

Marie Allan > Robyn Anderson > Steven Basche > David Director > Tracy Ivers > Yves Joseph
Dr. Stephen Larcen > Kevin Leahy > Dr. Arthur McDowell > Tom Pastorello > Linda Worden, Chair
A letter from the President

Stephen W. Larcen, Ph.D., President, Rushford and President, Hartford HealthCare, Behavioral Health Network

Four decades have passed since a group of like-minded Middlesex County leaders took action regarding the issue of alcohol addiction in their community.

From humble beginnings in a Middletown church basement, the organization known today as Rushford has emerged — a modern, evidence-based addiction and mental health recovery center of excellence employing the best in recovery programming, services and, of course, people.

Among those gathered at the very beginning as part of the board of directors of what was then the Tri-County Alcohol Council was Gus Rushford. A Portland, Connecticut native, Gus was in recovery from alcohol addiction. His passion was for helping others join him on recovery’s road. He is credited with organizing the first Alcoholics Anonymous group in Middletown in 1952. In 1975, he put his heart and soul into his long-time vision to establish a community-based residential treatment center for those needing recovery from addiction.

The reality has far exceeded Gus Rushford’s dream. Over these 40 years, the community presence of his namesake organization has enabled us to quickly identify community need trends, and respond accordingly by adding appropriate services to meet those needs. Mental health programming, addiction recovery, Latino services, behavioral health/primary care integration, and prevention services have been grown. Service levels (inpatient, outpatient and residential) have expanded, and all ages from 11 through adults can be assisted in some way at Rushford.

Even today, as Connecticut sees a dramatic rise in heroin-related overdose deaths, Rushford has been swift to respond with additional detox beds at our Middletown facility, information and training for clients and their families and friends about the opioid antidote naloxone (Narcan™), increased medication-assisted treatment with Suboxone, and innovative school-based bullying prevention programming, all of which you will learn more about as you peruse the pages of this annual report. We also take a look back at highlights of the last 40 years with photos and memories from our archives.

As you read about Rushford’s successes and triumphs, be reminded that they are a result of the hard work and dedication of truly wonderful staff, both past and present, which made Rushford the healthcare leader that it is today.

Yet the lasting testament to the work of the last four decades is in the stories — thousands of them — of the Rushford clients who today live lives of recovery, safe in the knowledge their hard work to achieve that recovery will always be supported by the people of Rushford.

It is as Gus Rushford envisioned it, many years ago. May it be so for many more years to come.
Recovery never stops for Stonegate client

To his parents, family, co-workers and the circle of people he’s met on his recovery journey, Tim Harmon represents the future. But just four years ago, he lay in a hospital room near death.

In October 2011, then 17-year-old Tim overdosed on between 2,000 and 3,000 milligrams of the opiate morphine. He was in a coma for the first 48 hours, having suffered from aspiration pneumonia and a collapsed lung.

“We are fortunate that he recovered fully without any cognitive defects,” said his mother, Mary Ann, who discovered her son early that fall morning and performed CPR to revive him.

“CPR was easy,” she said modestly. “Recovery is hard.”

Upon his release from the hospital, Mary Ann and her husband, Justin, sent their son to rehab at Rushford at Stonegate in Durham, a residential facility designed to treat adolescent males between the ages of 13 and 18. Choosing a facility close to their Guilford home was important. “If he had a problem, I wanted to be nearby and be involved in it and have people teach me about what was happening,” Mary Ann said. “I wanted a high quality facility nearby that treated the entire family. We found that in Rushford.”

Now 21, recovery has been a rocky road for Tim. He has faced relapses in his recovery; however, as of this writing, he is six months sober and working to finish the 12 steps of Alcoholics Anonymous. Despite the setbacks, he remains dedicated to achieving sobriety. He remains grateful that the people of Rushford helped set him on his journey by providing needed life skills and support at a critical juncture in his recovery.

Today, Tim is employed, attends school and inspires others about his recovery journey by speaking at public events and AA meetings.
norms and attitudes toward drugs and alcohol were significantly different five decades ago.

“The late 70s were kind of a crazy time,” she said. “Anything went. I had older cousins and siblings who were partiers. The (legal) drinking age was 18, but I tried alcohol for the first time when I was 12 or 13.”

By early high school, partying “became a priority for me.” By 16, she was an IV drug user.

“I did heroin and cocaine. I continued on that path on and off. I drank and smoked pot daily, too,” she recalled.

After high school, she headed to Florida to live, where her partying ways escalated to drug dealing.

“I was a risk taker. I was living on the wild side,” she admits.

For nearly six years, she lived what she considered a “normal semblance of life.” Her family in Connecticut remained mostly unaware of her Florida situation. In Florida, she worked and attended community college — and partied using drugs and alcohol.

In 1986, her worlds collided. Finances crumbled and she returned to Connecticut, landing a good job. But she was still hooked on drugs, finding her fix now in prescription pain killers. In 1989, she and a boyfriend were arrested for trying to fill prescriptions at a pharmacy.

“It was the first time my parents realized something was seriously wrong,” she recalled. “They tried their best to help me.”

At age 25, she was out on a $40,000 bond and had 38 pending felony charges. She still had no interest in getting clean. But her parents insisted.

After a successful stint at a detox unit in New Haven, Karen attended a residential addiction recovery halfway house program then located at Rushford’s Crescent Street, Middletown location.

“It was the third floor in a very old building,” she recalled. “The expectation was that I’d find a job to cover room and board. I had to work in the kitchen washing pots and pans. I hadn’t had a routine in a long time. I hadn’t had a job in a few years. I didn’t have to do anything at a regular time, like eat, make my bed, take a shower or go to work. Rushford provided me structure so that I could do that.”

Her time at Rushford also gave her a chance to live with others who were living sober.

“I met all different kinds of people. I went to (NA and AA) meetings,” she recalled. “I was able to integrate back into the community. I got a job at Aetna.”

She found a sponsor, and she’s been sober ever since. She went on to receive her bachelor’s degree in sociology and criminal justice, and a master’s degree in social work. She is today a married mother of two who works full-time. She still attends NA meetings at least once a week. About a year ago, she and her husband opened a recovery house, not unlike the one at Rushford where Karen herself started her recovery journey in 1989. Her approach to helping is also not all that different from back in the day, either.

“When someone calls about getting into the sober house, they have to want to make a change on some level,” she said. “I do believe it is important to intervene whenever possible. You just never know when someone is going to grab onto (recovery) and run with it like I did.”

Karen Ablondi has overcome her substance abuse issues, thanks, in part, to Rushford.
Connecting to Community
<< through services and growth >>

**<< RUSHFORD REWIND **

1990

The Town Farms Inn becomes Rushford at Middletown

In 1987, Rushford Center was adopted by the board of directors as the name of what was once the Tri-County Alcohol Council.

“The name didn’t fit any more,” recalled former Rushford President and CEO Jeff Walter. “To call ourselves ‘tri-county’ was confusing, and our mission had broadened to the prevention and treatment of other addictions, such as opioids.”

Given the expanded services and growing client base, the time had come to bring all Rushford programs under one roof from several sites around Middletown. State lawmakers and several state departments, recognizing Rushford’s success, were eager to help, offering more than $2 million between 1988 and 1990 for the purpose of purchasing a new facility.

Rushford officials launched a capital campaign to raise additional funds that resulted in the purchase of the former Town Farms Inn on Silver Street in Middletown in 1990. With the dawn of the new decade, Rushford’s employees numbered nearly 50, and afforded the organization the opportunity to again expand programming, this time to include an outpatient treatment program for recovering substance users — both adults and teens — that allowed them to receive treatment and remain at home and employed.

**<< RUSHFORD REWIND **

2013

ABAM Fellowship flourishes at Rushford

In March 2013, the post-graduate addiction medicine fellowship program based at Rushford’s Middletown site was accredited by the American Board of Addiction Medicine (ABAM) Foundation.

Rushford was among eight of the nation’s leading medical organizations to receive ABAM Fellowship accreditation in 2013, joining an elite group of 23 other ABAM Foundation-accredited programs across the United States and Canada. Each institution meets — and often exceeds — the Foundation’s stringent standards of clinical excellence and quality in physician training in the specialty of addiction medicine.

“An important goal of the fellowship is to prepare candidates for independent practice and the ABAM certification in addiction medicine,” noted Samuel M. Silverman, MD, FAPA, Rushford’s ABAM Fellowship Program Director. “By doing this, we ensure that high quality, interdisciplinary, evidence-based addiction treatment programs can be provided to those most in need of this clinical service.”

Rushford’s addiction medicine fellowship offers physicians a one-year training opportunity...
in the evaluation and treatment of patients with substance use disorders. Each fellow trains across a broad array of clinical settings at Rushford’s Connecticut campuses and other institutions within the Hartford HealthCare Behavioral Health Network, including Hartford Hospital’s Institute of Living.

Candidates gain exposure to traditional addiction treatment methods and related inpatient and outpatient programs, including detoxification, dual diagnosis, acute intoxication and withdrawal syndromes, medication-assisted treatment for opiate and alcohol use disorders, and collaboration with various clinicians in team case conferences.

In June 2015, Dr. Brian Murray became the first Rushford addiction fellow to graduate the program under its ABAM affiliation.

**Rushford at Glastonbury grows integrative services**

Two grants awarded by the Norma and Natale Sestero Fund at the Hartford Foundation for Public Giving have enabled Rushford at Glastonbury to offer a series of integrative services for low-income Glastonbury residents and Rushford at Glastonbury clients receiving substance use and mental health treatment services.

These services include acupuncture, creative journaling, yoga, and a free resource library.

**Suboxone™ treatment for Rushford at Glastonbury**

Rushford at Glastonbury offers medication-assisted treatment for opioid recovery. This program offers Buprenorphine-Naloxone (Suboxone®) or Naltrexone (Revia®, Depade®, Vivitrol®), medications providing clients a lower risk of abuse and dependence, fewer side effects, and a long duration of action — as well as blocking the urge to “get high.”

Along with prescriptions and monitoring, the Rushford at Glastonbury Suboxone™ program focuses on treating adults 18 and older with psychosocial and other core therapies, all provided with the utmost privacy and discretion, including a Working Professionals Program, where group therapy sessions are offered early mornings or evenings to enhance the recovery experience.

**Naloxone saves lives**

Throughout 2014, Rushford worked to raise awareness both internally and externally of the signs and symptoms of an opioid overdose, and how to obtain the lifesaving drug naloxone (Narcan”).

“Naloxone (Narcan”) is a medication that, with minimal training, anyone can use,” said J. Craig Allen, MD, Rushford Medical Director. “The atomizer creates a mist that is absorbed through the nasal mucosa reversing a potentially lethal opioid overdose.”

The use of prescription painkillers and heroin is growing in Connecticut and across the nation. According to the Office of the Connecticut State Medical Examiner, there were 174 accidental deaths involving opioids in the state during 2012. In 2014, that number increased to more than 500.

To battle this issue, Connecticut state law changed, allowing naloxone to be prescribed to the family members or friends of an opiate-dependent person. First responders also may carry naloxone, and a new law, which HHC Senior Vice President for Behavioral Health Pat Rehmer and Dr. Allen testified in support of, allows education and distribution by certified pharmacists.

“Like AEDs that can save the life of a person having a heart attack, we’d like to see naloxone at the ready with first responders and the family and

*Left: The Rushford at Glastonbury community acupuncture room. Right: Pamela Mirante, LCSW, poses before starting at a yoga class at Rushford in Glastonbury.*
friends of opiate-dependent people,” Dr. Allen said. For its part, Rushford created opportunities for those with opioid addiction and their families to attend a free class to learn how to administer naloxone, with a prescription available once the evening class was completed. This became a mandatory program for all family members of clients entering Rushford’s adolescent programs, and is also a mandatory training for all Rushford employees.

In addition, a crowdfunding effort, sponsored by the Rushford Foundation, raised $3,680 over a 40-day span. A video supporting the “Naloxone Saves Lives” campaign was recognized with a Lamplighter Award by the New England Society for Healthcare Communications (NESHCo) at its annual meeting in May 2015.

**Parker North Opens**

September 2014 marked the opening of Parker North, Rushford’s five-bed, all-female home. Parker North provides an opportunity for community living to people who are ready for discharge from Connecticut Valley Hospital (CVH) and other state hospitals after long lengths of stay requiring higher levels of care.

Located in Meriden, this program provides a home-like atmosphere where people can receive skill-building programming and 24-hour staff support to assist with reintegration with the community. The house, originally a duplex-style two-family structure, accommodates two apartments with separate sleeping and bathroom areas on the second floors, and common living, kitchen, and laundry areas on the first floor. There are five bedrooms. The program is fully integrated with the continuum of clinical and community support services that Rushford provides at its outpatient center in Meriden. Funding for Parker North was provided, in part, by the Connecticut Department of Mental Health and Addiction Services.

**Latino IOP services launched in Meriden**

Latino Services at Rushford has added an Intensive Outpatient Program (IOP) to its service line at the organization’s Meriden facility. It offers group therapy in Spanish to individuals in need of consistent support throughout the week, and clinicians facilitate all groups in Spanish for those clients who are either monolingual or who prefer to receive treatment in Spanish.

The Latino IOP is staffed with a multi-ethnic, bilingual and bicultural (Spanish and English) group of mental health professionals with decades of experience working with the Hispanic population and who are dedicated to helping clients recover from mental illness and/or substance use and dependence. Because of its early success, the program was expanded from three days per week to five.

**Additional 2014/2015 highlights:**

To better serve the needs of the communities it serves, Rushford expanded the following services in 2014/2015:

- The detox unit in Middletown added three beds, bringing the total number of detox beds to 19, expanding access to care for clients.
- Adolescent programming, offering partial hospitalization for addiction and co-occurring issues, as well as mental health services to adolescents, and community outreach.
- Adult ambulatory intensive outpatient programming was extended to five days a week at Meriden, Middletown and Glastonbury locations.
Rushford’s history includes listening to community needs — and responding to them

It takes good leadership — board members, executive directors and presidents, directors and staff — to successfully bring an organization to its 40th anniversary. In the case of Rushford Center, this has included a unique combination of leaders — Jeff Walter, Steve Larcen and, soon, Pat Rehmer — who have been and will continue to listen to the needs of the community and create partnerships to better serve the ever-evolving need for behavioral health services.

The Tri-County Alcohol Council — Rushford’s forerunner — started in 1975 as a group of concerned Middlesex County citizens with an intent to provide information on alcohol abuse and alcoholism and to act as a catalyst in developing services to prevent and treat alcoholism in Middlesex County. With just three employees and a very active board of directors, Tri-County found a home for its start-up non-profit on the second floor of the South Congregational Church Parish House at 21 Pleasant Street, Middletown.

Despite enthusiasm and good intent, Tri-County floundered. By 1979, with money running out and services nearly non-existent, the Tri-County board of directors hired then 27-year-old Jeff Walter as executive director.

“What I found when I went there that first day is what makes my first day truly remarkable, especially when you compare it to where Rushford is now,” Walter said.

“I was interested in trying my hand at running a non-profit organization, and had an interest in alcohol recovery,” he recalled. “I showed up on November 12, 1979, I introduced myself to the receptionist, Carolyn (Lyn) Shaw and chatted with her for a while. Then I asked Lyn if she could introduce me to the rest of the staff. She said ‘I am the rest of the staff, and I leave at noon.’”

Grassroots efforts

While others would be tempted to leave that day and never come back, Walter was undeterred. He ultimately led Tri-County (now Rushford) as its president and CEO for more than 30 years.

“I started introducing myself to key people around town: United Way, town officials, chamber of commerce, state politicians,” said Walter. With guidance and support from the board, he determined that partnering with local school systems to provide...
prevention services would provide a quick organizational revival.

Walter worked closely with Shaw and a group of volunteers to begin a Family Counseling Program as well as the Student Assistant Program, training teachers in area schools on the signs of alcohol abuse and embedding counselors in high schools to confidentially help struggling teens.

Simultaneously, he worked with the board on Gus Rushford’s long-time dream of a residential alcoholism treatment center for Middletown and the surrounding area.

“Lyn and I fielded calls from people and their families seeking alcohol recovery treatment, but really the only treatment option was the state hospital (Connecticut Valley Hospital, or CVH), which was very difficult to get into. There weren’t really any other resources back then,” Walter said. “Gus would walk up and down Main Street (Middletown) trying to raise money for his dream. I encouraged him, but knew he would need some help from us.”

Humble beginnings

In 1982, Tri-County opened a 22-bed residential alcoholism treatment center, with financial assistance from a special grant provided by the Connecticut General Assembly. The center was named the Gus Rushford Treatment Center, honoring the modest but determined local man who dedicated more than three decades of his life to helping others in Middletown achieve sobriety.

Based upon the belief that recovery is most effectively accomplished in a community-based setting, the Gus Rushford Treatment Center, as part of the Tri-County Alcohol Council, offered short-term detoxification and three-week intensive treatment programming which included counseling and AA meetings. A three-to-six month halfway house program also offered recovering alcoholics the opportunity to work during the day and return to an alcohol-free environment in the evening. The fledgling operation was judged a success based upon an independent study commissioned by the Connecticut State Legislature in 1984.

By 1987, the Tri-County Alcohol Council broadened its mission to recognize alcohol and other drug use prevention and treatment. Walter’s vision was to sustain and grow the organization while unifying it under a single name and a single roof.

“Tri-County Alcohol Council was a confusing name. What did it mean? No one really knew,” Walter said. “The outpatient base was growing and we knew that was the future. I wanted a continuum of care and a true ‘center’ and I wanted it to provide quality services that would make the community proud.”

Rechristening Rushford Center in 1987 proved the easier task. Finding a single place to headquarter the organization took until 1990, when Rushford purchased the Town Farms Inn on Silver Street in Middletown (See page 6).

“I was very proud of the way Rushford was embraced by the community,” Walter recalled.

With the dawn of the 1990s, Rushford’s employees numbered between 50 and 60, and afforded the organization the opportunity to again expand programming, this time to include an outpatient treatment program for recovering substance users — both adults and teens — that allowed them to receive treatment and remain at home and employed.

Strategic growth

The 1990s again marked a period of rapid growth for Rushford. In 1993, Rushford assumed operation of Middlesex Hospital’s Substance Abuse Outpatient Clinic, began a daytime partial hospitalization program and increased its halfway house bed capacity from 12 to 22. In 1997, it opened a satellite office in Glastonbury, offering the full range of outpatient recovery services for adolescents and adults, and established ambulatory detoxification services at its Middletown facility.

In 1998, Rushford took the step of affiliating with Hartford HealthCare (HHC), becoming a member of its nascent Behavioral Health Network (BHN). Stephen W. Larcen, PhD, was appointed the first vice president of the HHC BHN earlier that year.
HHC affiliation and Behavioral Health Network

“The vision at that time was that Rushford would bring a strong addictions expertise to the Hartford HealthCare community,” Larcen said. “The other factor is that we were beginning to organize a managed care organization. Jeff (Walter) had been involved in that arena, and we knew he'd be helpful in organizing a managed care organization for the HHC Behavioral Health Network.”

That managed care unit is now part of Advanced Behavioral Health and provides employee assistance programs (Solutions EAP) to Hartford HealthCare and to many other organizations across the state.

The late 1990s was the beginning of the modern healthcare system movement, and Jeff Walter didn’t want Rushford left behind, believing, then and now, that the integration of behavioral health and primary care was integral to any person’s recovery process.

“I always felt that alcoholism and drug dependency services were part of healthcare,” Walter said. “For a variety of reasons, it was off to the side of the healthcare industry. But I felt it was critical for Rushford to be part of the community at large, the business community and the healthcare community. So I always worked toward that. For that reason, I always felt that the integration with HHC was one of a handful of keys to Rushford’s success,” Walter said.

Impact of HHC Affiliation

Expansion continued into the new millennium. In 2000 as part of HHC, Rushford assumed the operation and management of two children’s programs formerly operated by the Curtis Home of Meriden, including a residential treatment program for abused and traumatized boys and the Safe Harbors Program, for children removed from their homes by the Connecticut Department of Children and Families due to suspected neglect or abuse.

The following year, Rushford entered into a management contract to administer MidState Behavioral Health System, a subsidiary of MidState Medical Center, and by 2003, these outpatient mental health and substance use services for the Meriden and Wallingford communities had found a new home at Rushford. With this merger, Rushford became the Local Mental Health Authority (LMHA) for Meriden and Wallingford, under contract with the State Department of Mental Health and Addiction Services.

“In 2004, as part of an HHC initiative, we bought Stone Haven (Rushford at Portland), which had been owned by Elmcrest/St. Francis Behavioral Health, to provide intermediate beds as a step-down for clients from Silver Street,” Walter recalled.

Healthcare changes, new leadership

Growth continued even as the face of healthcare changed. Rushford’s first medical director, J. Craig Allen, MD, joined the team in 2005. In 2010, Rushford opened an intensive residential treatment center for teenage boys in Durham. By 2010, accountability was on its way to becoming a key indicator of healthcare success, and the coordination of behavioral health with primary care again pushed to the fore.

In 2013, upon Walter’s retirement, Larcen took the reins at Rushford as its president. At the same time, he became the president for the HHC BHN, which includes Natchaug Hospital, Hartford Hospital’s Institute of Living and the behavioral health departments at Backus Hospital, MidState Medical Center and The Hospital of Central Connecticut.

Under his leadership the BHN has moved to embrace the HHC operating model, and created operational and quality initiatives systemwide. He’s credited with working to move forward with a primary care/behavioral health initiative to better coordinate community care, with behavioral health services embedded in family health centers. At 400 employees, Rushford is a relatively small but vitally important part of the BHN, and all of HHC.

“Rushford has a strong track record not only in the...
addictions area but also Rushford brings prevention and community education to the mix, which is an example for all within the BHN,” Larcen said. “They were early adopters of Mental Health First Aid (MHFA) that was invaluable as we responded to the tragedy at Sandy Hook. They were the first in the BHN to hold a National Dialogue on Mental Health forum.”

A system approach

Being part of the BHN has proven to be a plus for Rushford as an organization, too.

“The real impact for Rushford from a clinical perspective is that you can leverage best practices and pick up on the strengths of each of the entities,” he said.

Larcen is quick to emphasize the role of the Rushford Foundation in continuing to develop community outreach, not only from a philanthropic perspective but through community needs assessments for the entire continuum of care — not simply behavioral health.

“The Rushford Foundation, and its board, led by David Director, along with its volunteers, is the group that will continue to carry on assessing the community needs, and gaining community support for the Rushford mission moving forward.”

One era ends, another begins

With Steve Larcen’s retirement expected at the end of 2015, leadership change is again on the horizon for Rushford.

In early 2016, former Connecticut Department of Mental Health and Addiction Services (DMHAS) Commissioner Patricia Rehmer, MSN, is expected to take on the role of BHN president, adding to her current duties as HHC Senior Vice President for Behavioral Health.

“I think having a leader like Pat Rehmer addresses the community piece that has been part of Rushford for so long,” Larcen said. “Her roots are mental health and addiction services in the Connecticut community. Having someone who has both expertise and a passion for advocacy as a leader is an important ingredient to a bright future.”

Rehmer agrees, noting that she fully expects to make her mark in that area by partnering with other organizations whose specialty is aftercare.

“I see Rushford continuing as the primary provider of substance abuse recovery services for the BHN and all of HHC, as well as a hub of expertise on the topics of prevention, recovery and training through its fellowship program with the American Board of Addiction Medicine,” she said. “I also see Rushford turning to partnerships with other community organizations, such as Advocacy Unlimited, to help our clients get follow-up care and wraparound services.”

A bright future

Rehmer sees particular opportunity for Rushford to grow available services for adolescents and young adults ages 18-26.

“I’ve had long conversations with Craig Allen, Rushford medical director) about how we can grow care for adolescents as we see the increase in substance abuse — particularly opiates — across the state. We’ll be looking at ways to get into that population and intervene earlier, which we know results in better recovery outcomes in the long term.”

Rehmer also sees an opportunity for Rushford at Meriden as the Local Mental Health Authority (LMHA) expands young adult services to those emerging from the care of the Department of Children and Families (DCF), yet still in need of behavioral health services.

“Rushford will be looking to better serve the young adults of the LMHA with the state-defined Young Adults Services (YAS) program that provides older teens and those in their early 20s with housing, treatment and wraparound services,” she said.

In short, Rushford’s ability to change and grow in order to respond to the needs of the community remains a vision for its future. With nearly 400 dedicated employees, Rehmer believes the future for Rushford belongs to each of them as leaders in one way, shape or form.

“Rushford has proven to be a leader in listening to the needs of the community and responding to those needs with quality, caring and continuous services. It’s been a winning formula for 40 years. Why change that now?”
Providing assistance to Westbrook High School students

In the 1980s, Rushford concentrated its efforts on building two particular areas of addiction services — a budding recovery center and its prevention services programming. One program under the prevention umbrella was the Student Assistance Program, which started as a way to train teachers in area school systems on the signs of alcohol abuse, but has grown into so much more for Rushford student assistance counselor Lyn Connery.

Hired as a student assistance counselor in 1986, Connery has seen the program grow and flourish at Westbrook High School, where she has been based for all of her nearly 30 years.

“The title is the same, but the job has changed throughout the years,” Connery said.

Student assistance programs were an outgrowth of a highly effective model created by Ellen Morehouse in Westchester County, New York in the early 1980s. The idea at that time was to train counselors to work with teachers looking for signs of alcohol abuse in high school-aged kids. Today, Connery’s job has expanded to provide a full range of substance abuse prevention and early intervention services.

“I see kids all day long,” Connery said. “With certain exceptions, what is shared with the student assistance counselor is confidential. They can talk about drugs, they can talk about their parents. They can talk about their teachers. It was a safe place. It still is.”

From substance abuse issues to family problems to cutting and eating disorders, Connery has spent decades building the trust of students, staff and the community.

“I talk to the PTOs. I talk to the Chamber of Commerce,” she said, providing information on prevention of bullying and substance use. “It’s the relationships in the community. It’s the relationships with people.”

It’s also about trust.

“They know they can trust me to work with them or get them the help they need,” she said. “Being around so long, it’s about the relationships I’ve developed and supporting the kids through difficult times.”

In the past 10 years, Connery’s outreach has turned to community leadership, as she works with town leaders to help infuse into existing town programs the assets identified by the Search Institute as necessary to the positive development of adolescents.

“There are 40 assets that help kids thrive,” Connery said. “They include family and neighborhood support, a caring school climate and general safety within the community.”

“The assets don’t focus on just high-risk kids. The focus is on what every kid needs to succeed. The more of these assets they have, the less substance abuse they have, the less truancy they have, the better grades they have,
the better relationships they have."

As for the future of Rushford’s prevention programming, Connery believes it is truly at the core of what Rushford does.

“I see prevention as an integral part of Rushford’s future,” she said. “The future is getting to kids young and having them understand how to make good choices. If we can help them navigate through, they’ll have a great future.”

Drugs wanted for disposal in Meriden

In August 2014, the Meriden Healthy Youth Coalition (MHYC), the Meriden Police Department, the MidState Chamber of Commerce and Rushford installed a prescription drop box at the Meriden Police Department Headquarters on West Main Street. This initiative is aimed at reducing substance abuse by providing a safe way for city residents to dispose of prescription drugs that are no longer needed or are outdated.

“Unfortunately, prescription drugs have become the target of theft and misuse, oftentimes by young people who have access to residential homes and apartments,” said Krystle Blake, Rushford prevention specialist and MHYC chairperson.

Meriden residents may dispose of their unwanted prescription drugs at this permanent prescription drop box located in the main lobby of the Meriden Police Department. With the installation of a prescription drop box, the City of Meriden Police Department is able to take control of and destroy unwanted or expired prescription drugs on a regular basis.

Prevention raises awareness about bullying and drug use among youth

October 2014 was a busy month for the Rushford prevention program, as it includes both National Bullying Prevention Month, and Red Ribbon Week, which raises awareness about keeping America’s youth drug-free. To that end, Rushford’s prevention professionals were key participants in two events to raise awareness about these important issues.

On Oct. 22, Felicia Goodwine-Vaughters, Sheryl Sprague and Christine Culver were in attendance at Middlesex Community College for Unity Day 2014, a bully-prevention rally of nearly 150 high school and middle school students from the area wearing orange T-shirts proclaiming “I will be an agent of change” and “I’ve got your back.” Headlining the event was former UConn basketball star Donny Marshall. The rally was sponsored by the Community Foundation of Middlesex County’s Council of Business Partners, and is part of the No Bully Zone program supported by Rushford.

On Oct. 23, Middletown’s Deputy Mayor Robert Santangelo met with 7th and 8th grade students attending Woodrow Wilson Middle School to read a proclamation from Mayor Daniel T. Drew that proclaimed October 23-31 as Red Ribbon Week in the City of Middletown. Felicia Goodwine-Vaughters from Rushford was in attendance.

Middletown students participating in Rams In Action, a peer leadership after-school program, organized Red Ribbon Week for the 9th year at Woodrow Wilson Middle School. Red Ribbon Week is now the oldest and largest drug prevention program in the nation, reaching millions of young people. The mission of the campaign is to present a unified and visible commitment towards creating a Drug-Free America. This year’s theme was “Love yourself! Be drug-free!”
Connecting to Community << through donors >>

Rushford corporators annual meeting

On Thursday, Dec. 4, 2014, Rushford held the annual corporators meeting at its Middletown facility. Event highlights included a presentation by Rushford Medical Director J. Craig Allen, MD, on naloxone (Narcan®), followed by the presentation of the story of Josh, a U.S. Army Veteran whose life has been saved, in part, by the quick administration of this opioid antidote.

The evening also marked the official dedication of Rushford at Middletown to Jeff Walter, former Rushford president and CEO. In her dedication remarks, Rushford Board Chair Linda Worden said, “With Gus Rushford having built the foundation for what would become the community’s gold standard for alcoholism treatment, Jeff took Rushford to a whole new level and dimension with the purchase of Silver Street.

He is a deeply committed leader who leads with his heart. His leadership, compassion and tenacious advocacy have provided us with a wonderful model in the field of behavioral health, as Rushford continues its tradition and mission — meeting the substance abuse and mental health needs of children, adults and families and striving to provide affordable, accessible services of proven effectiveness and high quality that embrace the most current research in prevention, treatment and recovery.”
Rushford Golf Classic celebrates 26 years

Friday, June 6, 2015 was a picture-perfect day for the 26th annual Rushford Golf Classic, sponsored by the Rushford Foundation, Inc., and supported by the Council of Business Partners at the Community Foundation of Middlesex County.

Held at Lyman Orchards Golf Club in Middlefield, the tournament netted approximately $40,000 to benefit child and adolescent prevention and treatment programs at Rushford.

Donor support year-round

Thank you to the following organizations for their generosity and support of Rushford services from Oct. 1, 2013 through December 31, 2014:

<table>
<thead>
<tr>
<th>Organization</th>
<th>Purpose</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>3M</td>
<td>Therapeutic Recreation</td>
<td>$1,500</td>
</tr>
<tr>
<td>The Norman &amp; Natale Sestero Fund of the Hartford Foundation for Public Giving</td>
<td>Integrative Therapies in Glastonbury</td>
<td>$88,420</td>
</tr>
<tr>
<td>American Board of Addiction Medicine (ABAM)</td>
<td>SBIRT/ABAM Fellowship</td>
<td>$25,000</td>
</tr>
<tr>
<td>United Way of Meriden &amp; Wallingford</td>
<td>Mental Health First Aid</td>
<td>$2,500</td>
</tr>
<tr>
<td>Middlesex United Way</td>
<td>Mental Health First Aid &amp; Early Intervention Program</td>
<td>$38,521</td>
</tr>
<tr>
<td>Napier Foundation</td>
<td>Mental Health First Aid</td>
<td>$5,000</td>
</tr>
<tr>
<td>Community Foundation of Middlesex County</td>
<td>Girl Talk</td>
<td>$3,000</td>
</tr>
<tr>
<td>Middletown Youth Services Advisory Board</td>
<td>Prevention/Schools</td>
<td>$3,500</td>
</tr>
<tr>
<td>Hartford Dispensary</td>
<td>ABAM Fellowship</td>
<td>$25,000</td>
</tr>
<tr>
<td>ASAM (CT Chapter of ABAM)</td>
<td>ABAM Fellowship</td>
<td>$5,000</td>
</tr>
<tr>
<td>Cuno Foundation</td>
<td>Mothers &amp; Daughters Evenings Out in Meriden</td>
<td>$2,000</td>
</tr>
<tr>
<td>Middletown Youth Services Advisory Board</td>
<td>Mothers &amp; Daughters Evenings Out in Middletown</td>
<td>$500</td>
</tr>
</tbody>
</table>
Stop the Stigma: World Wide Edition

Rushford, along with HHC Behavioral Health Network partners Natchaug Hospital and Hartford Hospital’s Institute of Living (IOL), spent the summer of 2014 promoting awareness and helping to stop the stigma surrounding issues of mental health and addiction.

The “Stop the Stigma: World Wide Edition” contest provided every employee with the popular “Stop the Stigma” T-shirts, taking them where they went to raise awareness about the stigma of mental illness and addiction. From the road, many sent back pictures of themselves, their family members and even their pets wearing the shirts.

Rushford at Durham’s Sue Willmore was among the big winners, with her family photo displayed in Times Square, New York City, judged most unique photo overall.

Rushford, BHN recognized with “Best of New England” by NESHCo

In May 2015, the Hartford HealthCare Behavioral Health Network marketing team, including Rushford’s Carol Vassar, Natchaug Hospital’s Amanda Nappi and HHC BHN Marketing Director Shawn Mawhiney, received seven Lamplighter awards, including the Best of New England, which is the top honor given at the New England Society for Healthcare Communications (NESHCo). The awards — which included three golds, two silvers, one award of excellence and overall Best of New England — were given at the 25th annual Lamplighter Awards Ceremony at the World Trade Center in Boston.

The top prize was garnered for a series of free public forums under the title “National Dialogue on Mental Health (NDMH).” These forums were organized across a wide geographical portion of the BHN’s service area, tackling topics of both mental health and substance abuse that are of interest to the public based upon local HHC affiliate recommendations. This was the second year for the NDMH, which is a community-based response to the tragedy that occurred at the Sandy Hook Elementary School in December 2012.

Top: Rushford’s Sue Willmore, shown with her family on a big screen in Times Square, NYC.
Bottom: Rushford at Meriden staff gathered in front of the building sign for a July 2014 “Flashmob Friday” event.

The BHN marketing team celebrates their Best of New England win upon its announcement in Boston in May 2015. (Left to right): Shawn Mawhiney, Carol Vassar and Amanda Nappi
### Statement of Financial Position  
**September 30, 2014**

<table>
<thead>
<tr>
<th>Assets</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current assets:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>$ 841,455</td>
<td>$ 396,343</td>
</tr>
<tr>
<td>Accounts receivable, less allowance for uncollectible accounts of $1,089,125 in 2013 and $781,379 in 2012</td>
<td>3,687,773</td>
<td>2,591,271</td>
</tr>
<tr>
<td>Other receivables</td>
<td>376,806</td>
<td>505,942</td>
</tr>
<tr>
<td>Inventory and prepaid expenses</td>
<td>498,766</td>
<td>378,420</td>
</tr>
<tr>
<td>Due from third-party reimbursement agencies</td>
<td>(400,075)</td>
<td>(320,000)</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
<td>5,004,725</td>
<td>3,551,976</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Property, plant, and equipment:</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land</td>
<td>389,310</td>
<td>44,500</td>
</tr>
<tr>
<td>Buildings and leasehold improvements</td>
<td>9,510,283</td>
<td>9,869,907</td>
</tr>
<tr>
<td>Equipment</td>
<td>1,808,519</td>
<td>3,621,794</td>
</tr>
<tr>
<td>Vehicles</td>
<td>526,573</td>
<td>427,755</td>
</tr>
<tr>
<td><strong>Accumulated depreciation and amortization</strong></td>
<td>(6,160,501)</td>
<td>(7,499,869)</td>
</tr>
<tr>
<td><strong>Construction in process</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Net property, plant, and equipment</strong></td>
<td>6,074,184</td>
<td>6,464,087</td>
</tr>
</tbody>
</table>

| Other assets - Due from Affiliates and other related parties | 374,891 | 185,557 |
| **Total** | $ 11,453,799 | $ 10,201,620 |

| Liabilities and net assets: | | |
| Current liabilities: | | |
| Accounts payable and other accrued expenses | 2,236,125 | 2,744,414 |
| Payroll-related accruals | 893,787 | 1,206,396 |
| Due to affiliated corporation | 1,379,136 | 456,520 |
| Current portion of long-term debt | 88,522 | 59,763 |
| **Total current liabilities** | 4,597,569 | 4,467,093 |

| Accrued pension liability | | |
| Other Liabilities | | |
| Long-term debt, less current portion | 35,428 | - |

| Net assets: | | |
| Unrestricted | 5,296,955 | 4,003,228 |
| Temporarily restricted | 1,523,848 | 1,731,299 |
| **Total** | 6,820,802 | 5,734,527 |

| **Total** | $ 11,453,799 | $ 10,201,620 |
## Statements of Operations and Changes in Net Assets

<table>
<thead>
<tr>
<th></th>
<th>Years Ended September 30</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2014</td>
</tr>
<tr>
<td><strong>Unrestricted revenues, gains, and other support:</strong></td>
<td></td>
</tr>
<tr>
<td>Net patient service revenue</td>
<td>$16,641,712</td>
</tr>
<tr>
<td>Other revenue</td>
<td>12,476,095</td>
</tr>
<tr>
<td>Net assets released from restriction for operations</td>
<td>94,069</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td>29,211,876</td>
</tr>
<tr>
<td><strong>Operating expenses:</strong></td>
<td></td>
</tr>
<tr>
<td>Salaries and employee benefits</td>
<td>21,033,943</td>
</tr>
<tr>
<td>Purchased services and professional fees</td>
<td>6,491,588</td>
</tr>
<tr>
<td>Supplies and other</td>
<td>2,029,424</td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>663,644</td>
</tr>
<tr>
<td>Interest</td>
<td>31,351</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td>30,249,949</td>
</tr>
<tr>
<td><strong>Excess of revenues over expenses:</strong></td>
<td></td>
</tr>
<tr>
<td>Change in net assets related to Bridge Subsidy Loan Fund, Expenses &amp; Bad Debt Write off approved by DMHAS</td>
<td>(113,564)</td>
</tr>
<tr>
<td>Change in net assets related to Market Value &amp; Gain (Loss) Sale of Invest</td>
<td></td>
</tr>
<tr>
<td>Net assets released from restriction for property, plant, and equipment</td>
<td>113,564</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Increase (decrease) in unrestricted assets:</strong></td>
<td>(1,038,073)</td>
</tr>
<tr>
<td>Temporarily restricted contributions</td>
<td></td>
</tr>
<tr>
<td>Contributions</td>
<td>181</td>
</tr>
<tr>
<td>Net assets released from restrictions (Property and Bridge)</td>
<td>(113,564)</td>
</tr>
<tr>
<td>Intercompany release of Debt - HH</td>
<td>2,329,641</td>
</tr>
<tr>
<td><strong>Net assets released from restriction for operations:</strong></td>
<td>(94,069)</td>
</tr>
<tr>
<td><strong>Increase (decrease) in temporarily restricted net assets:</strong></td>
<td>2,122,190</td>
</tr>
<tr>
<td><strong>Increase (decrease) in net assets:</strong></td>
<td>(1,084,117)</td>
</tr>
<tr>
<td>Net assets at beginning of year</td>
<td>5,734,527</td>
</tr>
<tr>
<td><strong>Net assets at end of year:</strong></td>
<td>$6,818,644</td>
</tr>
</tbody>
</table>
Toll free help for all ages
1.877.577.3233

LOCATIONS
883 Paddock Avenue
Meriden, CT 06450

110 National Drive
Glastonbury, CT 06033

1250 Silver Street
Middletown, CT 06457

459 Wallingford Road
Durham, CT 06422

325 Main Street
Portland, CT 06480