



THE BRIDGE

ANNUAL REPORT 2017

BUILDING RESILIENCE



RESILIENCE.

How do you define it? How do you build it?



The definition can be seen in action. It's working harder after we fail a math exam. It's knowing our parents want us to keep putting one foot in front of the other, even when we mourn their passing. It's getting up, brushing our teeth, and going into work when we feel most unmotivated, unworthy, unimportant, unloved.

When you think about it, you see resilience everywhere. It's in the welcoming face of your butcher, who may quietly battle a chronic disease, but greets you with a smile. You see it when your child comes home, tired and physically spent, after a long day at school and soccer practice. It's in everyone who gets up, gets out and lives their life for themselves and their families.

It's everywhere. And it's not.

Here at The Bridge, we know resilience is precious, and we want to make sure the individuals we serve have the tools and supports to live their lives to the fullest. It's what we do. And we never give up. On anyone.

In our 2017 Annual Report, you'll read about Carolyn Carlson, who was told she would never walk again – and proved the medical experts wrong. You'll read about school districts that are so impressed by DBT, they're bringing the training district-wide – because they see it fosters resilience in students. You'll meet our staff member, Betty Bragdon, who's on the front line of helping families. There are so many stories, so many examples of everyday resilience.

Thank you for being a part of our history, our future, and our mission.

Ken Bates
President and CEO

A MESSAGE FROM THE CHAIR OF THE BRIDGE BOARD OF DIRECTORS



For me, in my personal and professional life as a youth development professional, resilience has been a way of life. Facing challenges, losses and some really hard days is part of the human condition, and my experience is no exception.

But having the belief and the strength to bounce back from these challenges, emerging stronger, is also a part of

my experience, the youth worker experience, and the goal of the youth development professionals everywhere.

For many, the challenges are more daunting and the resilience more remarkable.

At The Bridge, not only do we see individuals who have difficult stories and painful pasts, but we see them exhibit an extraordinary strength and ability to recover. In fact, what you will read in this

Annual Report are stories not just of surviving difficult experiences, but in fact thriving in the face of adversity. The true measure of resilience.

As Chair of the Board of Directors, I am also mindful of the fact that organizations can face adversity and demonstrate resilience. Staying strong in the face of local, state and federal changes and challenges is crucial. At The Bridge we are dedicated to maintaining our mission, continuing to pursue what is most important for those we serve, and being open and flexible to a changing world, so that we too as an organization emerge stronger from our challenges.

We all have stories of adversity and resilience that form the rich patchwork quilt of our lives and our organizations. What's yours?

Thank You,

Judi Kirk

THE FACE OF RESILIENCE

Two years ago, Carolyn Carlson fell.

After taking a frightening fall at her house, the West Brookfield resident was sent to a rehabilitation facility. While there, she learned some discouraging news: She would never walk again.

Carolyn refused to believe them. “I told them, ‘don’t underestimate me.’”

She moved to another rehabilitation center – one that gave her hope. They listened to Carolyn. They helped her regain strength, and sent her home with a mission of getting on her feet again.

She’s nearly there. The combination of Carolyn’s tenacity, staff support and living habits helped transform her health. “I have a great support system here at the house,” says Carolyn. “And I have a good physical therapist who did not give up on me.”

Since falling, Carolyn has struggled to walk independently again. Her arthritis challenges her. “My knees crack and it hurts like hell, but I just keep moving.” Today she’s taking small steps, with a goal of walking outside by herself to enjoy her annual cookout on her deck. Thanks to The Bridge’s commitment to health and wellness, she’s transformed her eating habits, losing over 100 pounds.

“I gained 50 pounds in the first rehab,” says Carolyn. “They served a lot of ice cream and soda. After I came home, I wanted to feel better.”

Today, when she returns home from her day program she asks for grapes, oranges or apples. She participated in The Bridge’s Six Week Fitness Challenge (along with the rest of her roommates). “I feel great,” says Carolyn. “I can breathe. I can move. And I have a beautiful boyfriend!”

The staff encourages the residents’ healthy eating habits. They grow vegetables (such as kale) in the back yard, and cook them for dinner. Snacks have evolved, and now include all fruits and vegetables.

One of the staff members is a former chef, who tempts the residential appetites with fresh alternatives such as homemade hummus. “You can’t believe how much hummus these women eat!”

A devoted staff, dedicated physical therapist, and remarkably resilient personality all came together to help Carolyn get better. “I have a lot of determination,” says Carolyn.

She sure does.

Carolyn Carlson



FINDING FAMILY AT SAFE HOMES



Alex Fontanes

I heard about Safe Homes through my school friends when I was fourteen. When I first came to the program, I was psyched to realize it was a safe space for LGBTQ youth. I thought I had a crush on a boy at the time, but didn't know how to process it. At Safe Homes there were LGBTQ youth who were happy, proud and very comfortable with their sexuality. Over the next year or two, I started to understand more about my own sexuality and gender identity. I was inspired by the openness and progressiveness of Safe Homes. But more than that, I started to understand what others meant when they talked about Safe Homes as "family".

There were so many youth seeking refuge here because they didn't have supportive families or safe spaces in their lives. I understood how important this was. It became the place I knew I could find unconditional support, nurturing guidance and help whenever I needed it.

Safe Homes had become my family.

I learned that human beings can identify as more than just straight or gay. I came to realize that I was actually bisexual and that was

okay! In fact, at Safe Homes it was celebrated! I went on to become a peer leader after a couple of years. It was a challenge for me at first because I'm known as kind of shy and introverted. But I soon found my comfort zone and went on to have incredible experiences and learn amazing things. I never forgot how it was to feel confused, and it makes me feel really confident and proud when people ask for my help and advice when I bring someone here for the first time.

Safe Homes changed the way I see myself and my world. Being a leader here has given me the confidence to feel safer interacting with people and the insight to understand our world and my place in it.

I live in my own apartment now and work here in Worcester. I'm the proud father of a little girl whose mom also came to Safe Homes! Although we're not together anymore, we co-parent our beautiful daughter. We believe in raising her to be as socially conscience and as open minded as we've become from our time at Safe Homes.

Safe Homes came to me at the most important time in my development. It provided me with the knowledge to figure out who I am.



LEARNING ENVIRONMENTAL RESPONSIBILITY:

Individuals Attend
The Ecology School





West Brookfield Community Living

“I like to make sure the individuals we support take a vacation.” says Stacie Beland, program manager of West Brookfield Community Living, whose program has enjoyed trips to Hershey Park and day trips to local destinations such as Old Sturbridge Village over the years. “This year I wanted to plan in advance. I turned to the staff for advice.”

Celina Korzec, a Residential Counselor on Stacie’s team, suggested Nature’s Classroom, a residential environmental education program where students and teachers have the chance to experience education from another perspective, outside the walls of the classroom.

Intrigued, Stacie talked to her Division Director, Melissa Richardson, who said, “we’ve never done that – but we want to try.”

After researching options, Stacie settled on The Ecology School, a nonprofit, innovative ecology education program in Ferry Beach, Maine. The Ecology School accentuates the magic, mystery and wonder of nature so that students can better understand and care for the environment. Although primarily directed at children’s education, The Ecology School welcomed eight individuals from West Brookfield, Hyde Park, Worcester, and Westborough, in addition to seven staff members, with their own dormitory building for five days.

“It was a fantastic opportunity for us,” says Alex Grindle, Director of Programs at The Ecology School. “Our motto is: Food is ecology, energy and community, and over the week we developed a lovely of comfort and built a community – with The Bridge and our other

students – in a really nice way. We learned a great deal and would love to do it again.”

Although the outing was tremendously fun for everyone, a therapeutic element underscored the experience. “We are all about positive behavioral supports,” says Stacie. Positive Behavioral Supports is a behavior management system used by all individuals served, state-wide, by the Department of Developmental Services. PBS seeks to manage challenging behaviors through a better understanding of why those behaviors are present. “We gave The Ecology School information about what we do, and they helped us design a program that would work for the individuals.” Attendees from West Brookfield to Hyde Park did their lessons together and became friends, now staying in contact regularly. “One couple is now dating!”

Along with building new friendships, they learned about waste, conservation, and protecting the world around them. “They learned what happens when everyone takes a sea shell from the beach,” says Stacie. “Then you have no shells. They learned to leave shells for others.” All the individuals wanted to go back to their houses – to compost. In West Brookfield, the individuals and staff came home to plant their summer gardens with plants from Plantapalooza (one of The Bridge’s HealthFest programs), and they signed up for a CSA farm share.

The programs want to attend again next year, and – depending upon funding – hope to return to Maine to learn more about how they can live gently in the world.



SUPPORTING FAMILIES IN TIMES OF CRISIS

Betty Bragdon gives families hope.

Betty came to The Bridge several years ago when her family was in crisis. Her daughter, Cassie, participated in the School House program, which serves children with mental health issues and their families. Cassie had been to other agencies, but The Bridge was different. “The Bridge focused on the entire family,” says Betty. “They included OUR voice.”

The Bridge helped her daughter get the treatment she needed.

Betty found a career.

At first, she volunteered. “Margaret Crowley asked me to give a parent’s perspective on what it’s like to be a mother of a child with mental illness,” says Betty. “She wanted me to talk with staff about how they can better help families.”

Soon afterward, Margaret talked to Betty about an open position at The Bridge. “They offered me a part-time job running a family connections

group. It’s an education and skill-based group to re-build relationships in the family.” She soon added to her responsibilities when the Flex program needed a family support worker. “I became a full-time Bridge employee after that. I was running the groups.”

We are lucky to have her. “Betty is an extraordinary person who is an invaluable member of our team,” says Margaret Crowley, Service Director in the Child, Adolescent and Young Adult Services Division (CAYAS). “When I first met Betty, I knew that she could help us at the Bridge. Once she started working here, I knew I had to figure out a way to make her position a full-time one.”

Betty relates to the families and their needs. “Having been through the struggles with my daughter, I knew how scary it was to place your child where you don’t know the people supporting them. It’s SO scary. I can help. I can say, ‘I understand where you are coming from.’”

Stigma is still an issue. “It’s changing,” says Betty. “It’s getting better, but there is still work that needs to be done. Parents get a lot of judgments. And blame.”

Helping families navigate crisis has now become Betty’s career. “It’s not something I ever thought I would do. I was a stay-at-home mom, taking care of my family, when I came to The Bridge. I always knew I’d work with kids in some way; I just never thought it would be this.”

Betty smiles and says, “My family went through several agencies when my daughter was ill. I don’t think I would work for any of them. The Bridge heard my daughter. They heard our family. They focused on the entire family. My daughter got better. I truly believe in recovery – everyone just needs some help along the way.”

THAD'S STORY

Thad, an 18 year old young man supported by the Continuum Program, struggled with severe depression, and often isolated himself for fear of negative judgment from others. Additionally, he had threatened violence toward his family members.

Thad was adopted from Ecuador and often described his difficulty connecting with his parents and with people in Worcester. Thad's adopted family was determined to help in any way possible, but were unsure how to support him. They struggled to cope with feelings of guilt; they felt responsible for his emotional issues here in the states.

Through support and treatment in The Bridge's Continuum program, Thad started to investigate his own motivations and strength. He explored how he wanted to spend his time and how to direct himself. Thad often did not meet his own expectations and criticized himself and his parents. In treatment, Thad learned ways to adapt his self-talk and practiced self-compassion.

At the same time, Thad's parents practiced balancing when to validate his feelings and behaviors, but also setting boundaries about what behavior was allowed in their home. Thad's parents were able to unearth and address their own self-critical thoughts that prevented them from interacting well with Thad. In addition, they changed the way they spoke to Thad, no longer predicting that he would be, as they expressed to staff: "a lump on a log in their home for the rest of our days."



Thad and his outreach counselor practiced using the skills in real time situations and worked on building up his self-care. They also practiced going into the community, pursuing goals, and improving his social skills. In time, Thad started to gain more friends and successfully completed his high school education (after nearly dropping out). Thad got a full time job out of high school and quickly established a good reputation as a worker who connected well with his co-workers.

Just recently, Thad felt comfortable enough to go out on his own across the country to test his independence and build his resilience. Thad's mother summed up the help from the Continuum when nearing their graduation from the program: "If you only knew – I swear you have changed my life! I now refer to times in my life as before Continuum and after Continuum!"

"If you only knew – I swear you have changed my life! I now refer to times in my life as before Continuum and after Continuum!"

– Thad's Mother

Continuum / Caring Together

The Worcester Continuum is a part of "Caring Together" – a joint program of Massachusetts Department of Mental Health and the Department of Children and Families to provide services for youth with emotional and mental health challenges and/or multi-stressed families. The goal is to provide services using a Wraparound approach to enable youth ages 6-18 to remain in their homes and to support families as primary caregivers. Services include flexible, individualized treatment, rehabilitation, supervision and support that vary in intensity depending on youth and family needs.

THE BRIDGE TO EVERYWHERE:

Vindicating Youth Artists through Publication

By Luke Knowles, Peer Worker at The Bridge of Central Massachusetts

When Marie Butterfly, artist and novelist, started working with me on The Bridge to Everywhere, she was nothing short of ecstatic. Being a published author had been a major life goal for the fifteen years she had been on Earth. She even described it once to me as being a part of her “bucket list”. It was at that moment that I secretly resolved to make that dream a reality.

But it didn't stop there. Lily Raines had a similar goal and so did Daej Genesis and Sithmas Tree. These are the pseudonyms they chose for The Bridge to Everywhere literary magazine. The youth behind the names are very real. They were looking for an acknowledgement and validation of their creativity as one of the primary needs for human existence.

From my own time receiving services from the mental health system, I knew that many of the individuals served want to be recognized as productive, capable, valuable human beings. I've known that desire and still know it. Even a cursory glance at the mental health system in this country will tell you that identity and purpose are at the core of what a youth receiving services craves. If they must be different from those not receiving services, then being an artist capable of finding the beauty in being different is a powerful consolation. Because of the Bridge to Everywhere, youth like Marie and Lily and Sithmas get to throw their names into the pool of other artists with mental health challenges: Van Gogh, Moussorgsky, Vonnegut.

Even if I can't change their lives or save the world through a blogzine, I can make a published artist out of a timid youth. And that is a superpower I will always cherish.

The Bridge to Everywhere is a vehement rejection of the belief that once you cross into the world of mental health, your life is less fulfilling or marred by obscurity and shame. It is released digitally in blogzine format. Submissions are open to individuals served by the Continuum Program at the Bridge of Central Massachusetts. The Bridge to Everywhere accepts submission of audio files, visual artwork, short stories and poems. There is no Bridge logo on the site and there is no identification of the contributors as having received psychiatric services.

This is essential to the overarching purpose of The Bridge to Everywhere: To provide acknowledgement and recognition for the youth artists, neither contingent upon receiving services nor emphasizing their differences from the other young artists in the world.

Such a philosophy has been in the forefront of my mind in artistic, literary and psychological terms for years if not decades. I remember the ecstasy of opening an email from a literary magazine on Saint Nicholas Day in 2006. At that time, I had just failed out of college and my life was in the depths of psychiatrically-induced disarray. That email, stating I was now a published short story writer was a boost of confidence I needed badly. It sustained me to write many more pieces, some of them published and to one day, years later, give that confidence to others like me. I haven't had any depression in eight months, but conquering depression has not encouraged any complacency. Rather, it inspires me to press to ever new heights of accomplishment in the service of the mentally ill. It is impossible to say with certainty that being a published author kept me alive this long. No doubt there were many other factors. But the identity of recognition and the power of those accolades are irrefutably part of who I am today. It's what I strive to do for others.

At the reception launching The Bridge to Everywhere on September 13th, 2017, my words echoed this sentiment. I encouraged the youth gathered, along with their families and the clinical staff in the room, to think of their new pen names not as a means of ensuring their privacy online but as the first of many new titles they would garner in their quests as artists. One by one, the contributors volunteered some hopeful thoughts and sentiments. It was a moment where the sad realities of earthly existence faded into a blessed realization. Goodness lives in the art of these youth and, moreover, that goodness is not only communicable but deeply contagious. One of the few epidemics I would be honored to catch if I hadn't already been so deeply connected with it.

Can The Bridge to Everywhere change lives through art? The jury may still be out for some but I am very certain of one thing: Even if I can't change their lives or save the world through a blogzine, I can make a published artist out of a timid youth. And that is a superpower I will always cherish.

Luke Knowles



THE BRIDGE
TO EVERYWHERE
LITERARY MAGAZINE

A BLOGZINE SHOWCASING THE TALENTS OF THE YOUTH OF CENTRAL MASSACHUSETTS

DBT IN SCHOOLS: It's a Revolution

Nobody has more tasks to juggle than a school teacher. Between lesson planning, managing students and parents, grading papers/tests and actually TEACHING, teachers barely have time to breathe.

And they're learning: breathing is exactly what they *should* be doing – and so should their students.

Exposure to Dialectical Behavior Therapy (DBT) in the schools is changing that. It's a welcome addition to the schools, and one that teachers are embracing in Massachusetts.

Thanks to a grant from the Metrowest Health Foundation in Framingham, some local school districts have brought DBT into their classrooms, encouraging mindfulness to manage emotions and stress. In three districts – Westborough, Marlborough and Wachusett Regional – the results have been so successful that they are planning to expand access to training by The Bridge Training Institute across all grade levels.

Jen Eaton, the Director of DBT Training and Consultation at The Bridge of Central Massachusetts, has worked with all three districts to help bring DBT into the schools. The need for these services can't be underestimated. "Students today are full of so much more stress than previous generations, and the world is so fast-paced," says Jen. "The stress is so high. Many students don't have the skills to manage the social/emotional struggles of getting through high school and into college. Mindfulness helps them settle down, bring down their stress with skills, replacing damaging behaviors (drinking, taking drugs, self-harm), with something they can practice all of their lives. Working with these schools has been awesome. They are all so committed to supporting their students."

In Westborough, The Bridge ran full day trainings, bringing DBT skills of breathing and mindfulness to the high school. "It was so successful, that we came up with an idea," says Courtney Balacco, Clinical Coordinator at Westborough High School. "We decided to build DBT into the K-12 curriculum. By the time students get to

high school, they'll have the skills to manage emotions and stress." They plan to bring Jen Eaton back next year to do more skills training for everyone. "If teachers are taught DBT skills," says Courtney, "they can assess and help as they see fit. Our biggest mission is to normalize self-care, wellness and emotional health. If we can do this, we'll have healthier children."

Marlborough educators concur. "We are trying to be more inclusive and consistent across the district," says Sharon Buckley, Supervisor of Counseling Services in the Marlborough school district. "This past year we had professional development and DBT training for counselors and they were all on board. We knew we had to get the information to more people in the district, so this year we'll develop lesson plans around DBT for fifth grade, high school English and non-English speakers."

DBT is here to stay. "We made a commitment to this – it's not going away."

Kim Merrick, Administrator of Special Education at Wachusett Regional School District, echoes the same enthusiasm for DBT across the district. "We are trying to keep the momentum going," says Kim. After two recent suicide attempts, the schools wanted to implement coping tools district-wide. They wrote a proposal for bringing in DBT training, and chose The Bridge of Central Massachusetts as the provider. "It's been a wonderful experience for us," says Kim. "Jen is fantastic."

Counselors, school psychologists and transitional workers were trained in an eight day workshop. They pulled together a social/emotional task force, which will train more staff in the coming year. All special education teachers have DBT training, and they're pulling that same training into the traditional student population. "In our district," says Kim, "DBT is the tool that holds everything up."

DBT appears to be a tool to hold everybody up in the local schools, and more districts are signing up to receive supports from The Bridge Training Institute.



Left to right – Courtney Balacco, M.Ed., LMHC, Westborough High School; Sharon Buckley, M.Ed., CAGS, Marlborough Public Schools;
Kimberly Merrick, Ed.D, Wachusett Regional School District

*"We made a commitment to this
– it's not going away."*

NEW EVIDENCE-BASED PRACTICE

Recovery-Oriented Cognitive Therapy

Engaging individuals around their interests, dreams and goals

One of many evidence-based practices used by The Bridge to help individuals on their journey to recovery and community connection is CT-R or Recovery-Oriented Cognitive Therapy. According to Stefanie Gregware, LMHC, Director of Clinical Services, the new model has been making a big difference for individuals served over the past year. Gregware and Andrea Wolloff, LMHC, Director of Cognitive Behavioral Therapy (CBT) have been leading the effort to train close to 50 staff and support the implementation of CT-R across the agency, with help from researchers at the University of Pennsylvania.

CT-R includes training direct care staff on how to form stronger relationships with individuals by engaging them in activities they might enjoy, and on how to use effective strategies for motivating and activating individuals around achieving their goals.

An example is Mike (not his real name) who after expressing a long-held desire to attend football games, became motivated to be more socially and physically active and to engage in community activities once he attended a game with staff. Another individual was inspired by the artistic activity of wood burning and discovered a hidden talent that has unlocked other goals and dreams.

In the first seven months of implementation, activity engagements increased by 50%, community involvement increased 8%, and staff confidence in their ability to successfully engage individuals rose from 3.7 to 4.2 on a 5-point scale.

At the end of one year, 41 individuals had participated in CT-R, and for those who were in the program for 12 months, 89% demonstrated an overall increase in activity engagement and 83% had an increase in community involvement.

“The real heroes of this story,” says Wolloff, “are the staff who have embraced CT-R and who are making it work so well for so many individuals. It is a remarkable tool for helping people connect with the community and engage with others in a way that is rewarding and comfortable.”



Clubs (in programs)

Wood burning club
Breakfast Club
Magic the Gathering club
Walking club
Board game club
Craft club
Driver's Ed club
Gardening club
New Recipe club
Movies

Art club
Spa club
Gym
Basketball
Game night
Brunch club
Fencing club
Video games
Cooking club
Fantasy Football

Activities (outside of programs)

Ski trip
Six flags
Big E
Picnic/hiking at state parks
Eclipse viewing party
Water country
Wachusett Mountain
Art Show

Beach trip
Back yard camping
Paint night
Meals out
Concerts on the common
Sports events

A Program Diary on the Impact of CT-R



When we found CT-R, we had been looking for something to address the sense of things being “stuck” or “stalled out.” This experience, more than anything we were encountering, seemed to erode the sense of self-efficacy and enjoyment for both individuals served and counselors working with individuals. Really effective interventions were not reaching these individuals

and they were being lost in the day to day activities of a program. Staff reported frustration that despite their training and best efforts they were not able to find the best way to support individuals who seemed to have lost momentum in their efforts toward recovery.

Our Stepping Stone Program had been utilizing Dialectical Behavior Therapy and found that despite the staff being well trained and

prepared to use this model, it was not a good match for all of the individuals in the program. They were asking for something different and jumped into CT-R with both feet. It is hard to capture the changes that have taken place in the 4 pilot programs during the past 15 months since we have implemented CT-R. The 4 updates below in chronological order show one way in which Stepping Stone has seen changes during this period.

We have also seen changes in the way that teams discuss and respond to things that come up for individuals. That is harder to capture but overall, staff are able to highlight strengths, reframe judgements, and support the individual's right to make choices about his or her own life in a way that I haven't heard teams do in the past.

- Stefanie

Stepping Stone June 2016

“Since the training, we started the Continental Breakfast Club, which happens every day. We provide muffins and fruit and staff play music during this time. Attendance varies, since it's like a drop-in setting, but some of our guys get really into it, since they all have a chance to pick out songs to play for everyone else. In the past week, we started two more clubs, with some of our staff drawing off their own interests. We started a Wood Burning Club, which was a hit. It involves using special pens with heated tips and they can be used to burn artwork onto cheap pieces of wood. We planned to hold it on just Sundays, but there was enough interest to run it again the next day. We've also started a Drawing Club. We got drawing kits from the store and we printed out basic drawing lessons from the internet, which will be followed on a weekly basis. We've noticed that more activities have definitely helped with building relationships.

Stepping Stone September 2016

“I figured I might share a couple of successes. Due to our efforts in CT-R one individual has been more actively engaging with the program and has recently acquired a job. His first day of work was yesterday and I am told it went well. Another individual at our program who has been struggling with getting up and out has recently discovered that he loves nature and hiking. We went hiking two weeks ago and plan to go again very soon. I think this might be the start of a new interest. He has also been pretty invested in the drawing club that I've started on Monday nights. We are seeing successes, which reaffirms my belief that this treatment works!”

Stepping Stone March 2017

“Just wanted to share some CT-R success! Between last week and this week, we have done three activities in which we were able to close down the program because all staff and individuals were willing to go. We've had one dine-out to eat on Monday (2/20/17), a movie night on Thursday (2/23/17) and a second movie night this past Monday night (2/27/17). It has been a few years since we've been able to go on activities with the whole house. So this is huge! Additionally, we donated blood as a program on Tuesday of last week and earned free lift tickets to Mt. Wachusett. So we've planned a ski/snowboarding trip for Thursday March 9th. Lastly we were able to get a couple of folks to participate in an art class to learn how to do zentangle out in Whitinsville last night. We are starting to see more activity around here!”



Stepping Stone July 2017

“CT-R positive to share! We had a planned trip to Water Country yesterday. We were able to get four individuals to go, two of which have struggled with social anxiety issues in crowded places. Everyone had a wonderful time. They were all in high spirits when we returned to the program. The two individuals that struggle with anxiety both stated to me that this was something that they would do again! Also, last week, a staff member was able to get some of our folks to participate in the Red Cross Blood Drive in Holden again. This time, they received free Six Flags tickets. That was also a success!”

Partnerships Support Resilience



No agency is an island. We cannot help those we serve without the collaboration and support of many others. We are very grateful to partners such as Fallon Health who has been a leader in supporting and funding health and wellness at The Bridge and throughout the community. Fallon served as Presenting Sponsor for both HealthFest and the Safe Homes Gala and People of Courage Awards, demonstrating that leadership transcends populations and causes. We are indeed all in this together.

We are very pleased to have partnered with other agencies to begin a new chapter in the integration of behavioral health and medical care, and long-term services and supports. We are proud to join Alternatives, Inc., LUK, Inc. and Venture Community Services as well as subcontractors Adcare, Center for Living & Working and Elder Care of Greater Worcester in the new Central Community Health Partnership to provide care coordination and management.

Another steady partner for The Bridge is the City of Worcester, with whom we collaborate on programs for the homeless, the Worcester CHIP (community Health Improvement Plan) on the Opioid Task Force, the Quality of Life Task Force and the Mayor's Task Force on Mental Health. The City Manager and Mayor continue to strongly support the people we serve who have mental health challenges, developmental disabilities, autism, homelessness and/or who may be lesbian, gay, bisexual, transgender or questioning (LGBTQ).

We are also very grateful for our major funding partners such as the Department of Mental Health, the Department of Developmental Services, the Mass. Rehab Commission, the Mass. Department of Public Health, the Mass Department of Children and Families and the U.S. Department of Housing and Urban Development.

In addition, we enjoy strong support from grant funders such as the United Way of Central Massachusetts, the Greater Worcester Community Foundation, the Alden Trust, the George and Sybil Fuller Foundation, the Fletcher Foundation, the Massachusetts eHealth Institute, the City of Worcester ESG program, the Carpenter Foundation, Metro-West Health Foundation, Saint Gobain, Webster Five Foundation, the United Way of Sturbridge, Southbridge and Charlton, and the United Way of Webster and Dudley.

Finally, we appreciate the consistent support we receive from sponsors of HealthFest and the Safe Homes Gala who are noted to the right.

The Bridge hosted six visits from legislators including this one with Rep. John Mahoney and Rep. Denise Garlick.

HealthFest Sponsors

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Safe Homes Gala Sponsors

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Joe Early, District Attorney
Worcester Railers



CARF Accreditation



The Bridge was recently notified that we received three-year accreditation through the Council on Accreditation of Rehabilitation Facilities (CARF).

CARF is an independent, nonprofit organization focused on advancing the quality of services that organizations like The Bridge provide.

They provide accreditation services worldwide at the request of health and human service providers. Providers that meet CARF standards have demonstrated their commitment to being among the best available.

This is the first time The Bridge has sought accreditation through CARF and to achieve three-year accreditation on our first survey is remarkable. Among other strengths, the survey report cited:

- Consumer satisfaction with services
- The use of evidence-based practices and outcome measures
- Services provided on a foundation of strength-based person-centered planning, incorporating the principles of recovery and resilience

CARF surveyors also highlighted The Bridge's role in helping people build more fulfilling lives with independence and self-worth.

These are only a few of the many strengths of The Bridge which were cited in the report. The survey also identified some areas where we can improve, which we are working to address.

Accreditation is the gold standard for organizations like ours, demonstrating our commitment to providing the best possible services and support for the people we serve.

Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress — such as family and relationship problems, serious health problems or workplace and financial stressors. It means “bouncing back” from difficult experiences.



Financials 2017

July 1, 2016 – June 30, 2017

		AUDITED
FUNCTIONAL EXPENSES		
Personnel	72.1%	22,895,759
Occupancy	12.3%	3,919,704
Direct Client Care	7.4%	2,345,324
Program Administrative Support	4.2%	1,327,902
Travel & Transportation	2.7%	869,097
Other	1.3%	389,680
	100.0%	\$31,747,466
OPERATING REVENUE		
DMH	46.4%	14,880,767
DDS	25.3%	8,147,694
DCF	9.7%	3,118,309
MRC	2.4%	774,663
US Dept of HUD	1.3%	425,828
Client Resources	3.7%	1,159,782
Other	11.2%	3,591,234
	100.0%	\$32,098,277
OPERATING EXPENSES		
DMH Services	42.8%	13,598,824
DDS Services	23.5%	7,460,041
Caring Together Youth & Young Adult Services	16.5%	5,248,204
US Dept of HUD	1.4%	431,445
MRC	2.8%	876,279
Training and Consulting	1.3%	420,066
Administration and Development	11.1%	3,519,547
Safe Homes	0.6%	193,060
	100.0%	\$31,747,466



Board of Directors

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Credits

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Editors: Rebecca Lynch
Lorie Martiska

Photography: Dan Vaillancourt,
Patrick O'Connor Photography

Design: Beth Rau, Rau Graphics

Printing: Curry Printing

Services and Locations

Mental Health

Child, Adolescent and Young Adult Services

Serving youth with serious mental & behavioral health challenges & their families.

– Group Living	Northborough Westborough Worcester
– Individual and Flexible Family Support	Central Massachusetts Metro Suburban
– Continuum Services (Home-based Services)	Worcester & surrounding towns

Transition-Age Services

Serving young adults with serious mental health challenges.

– Community-Based Flexible Support (Group Living and Outreach Services)	Gardner Littleton Marlborough Worcester
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Adult Mental Health Services

Serving adults with serious mental health challenges.

– Community-Based Flexible Support (Group Living and Outreach Services)	Fitchburg Framingham Gardner Southbridge Templeton Webster Worcester
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Supported Employment and Education

Serving transition age and adult individuals referred by the Department of Mental Health in South County, Worcester, and the Metro Suburban areas with education and employment assistance.

Co-Occurring Mental Health and Substance Use Disorders

Serving adults with co-occurring mental health challenges & substance use disorders.

Developmental/Intellectual Disabilities

Residential Services for Young Adults

Serving young adults with intellectual disabilities and co-occurring mental health challenges.

Residential, Supported Housing, Home Sharing and Adult Foster Care

Serving adults with intellectual disabilities.

	West Brookfield
	Gardner Hudson Hyde Park Marlborough West Brookfield Westborough Worcester

Rehabilitative Services And ABI Waiver Homes

Serving adults with acquired brain injury or physical disabilities.

Central Massachusetts Lunenburg Gardner Fitchburg
--

Additional Services

Autism Support Services

Serving adults ages 22 and older who have been diagnosed with Autism Spectrum Disorder and who are being served by the Massachusetts Department of Developmental Disabilities.

Central Massachusetts

The Bridge Training Institute www.thebridgetraininginstitute.org

Training on evidence-based practices for mental health professionals, social workers, school personnel, and others.

New England

The Bridge Trauma Response Services

Providing psychological first aid for those who have experienced a traumatic event.

Central Massachusetts

Safe Homes Program www.safehomesma.org

Providing support, education and counseling services for Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) youth and young adults ages 14 to 23.

Central Massachusetts

Services for Homeless Individuals and Families

South County Housing Assistance Program (SCHAP)

Providing services for homeless adults and families Homeless Initiative Program providing supported housing for adults or families in Worcester who are homeless and have co-occurring mental health challenges and substance use disorders.

Southbridge Area

ATARP and Homeless Initiative Program

Providing supported housing for adults or families in Worcester who are homeless and have co-occurring mental health challenges and substance use disorders.

Worcester

The Bridge Counseling Center Outpatient Behavioral Health Services.

Worcester

Please note: For some programs and services, the locations listed above are not necessarily indicative of the entire service area of the program, but may only denote the location of the program.

Our Mission

In full partnership with individuals and families facing challenges, we support and inspire them to achieve their goals and dreams.