

# Annual Report 2011–2012



**Improving lives through prevention, education and treatment.**



**ARTS**  
Addiction Research & Treatment Services

*A behavioral health care provider organization*

## Our Mission

To improve the quality of life and productivity of individuals and families affected by substance abuse, dependence, and co-occurring mental health disorders through the application of scientifically supported prevention, education, and treatment services.

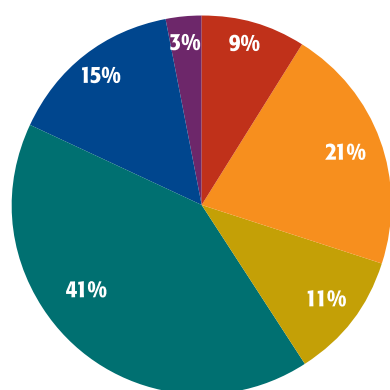
## Our Treatment Philosophy

Substance abuse and dependence are biopsychosocial behavioral disorders that can be severe and in some cases chronic, and the broad aim for ARTS is to reduce the morbidity and mortality associated with these disorders.

The net result of successful treatment has societal benefits as well: Reduced criminality and related social costs; reduced risk of HIV infection and other costly medical problems; and interruption of the intergenerational pattern of drug abuse and dependence.

## Performance: ARTS Fiscal Year 2011–2012

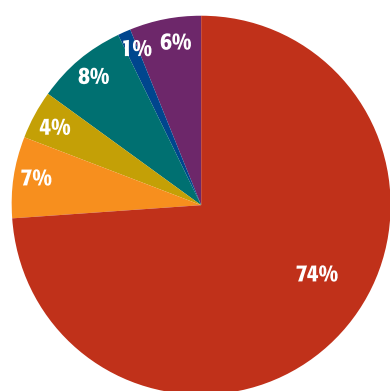
### REVENUE:



Federal and State Grants	\$ 1,574,356
Signal Behavioral Health Network	3,454,548
Approved Provider Services	1,787,794
Fee for Service Contracts	6,967,029
Client Fees/Insurance	2,565,503
Donations/Fund Raising	442,127

**TOTAL: \$16,791,357**

### EXPENSES:



Personnel	\$ 12,402,897
Facilities	1,080,879
Operating/Supplies	733,180
Client Supplies	1,385,112
Purchased Services	155,402
Administration – UCD Indirect Costs	1,581,749

**TOTAL: \$16,791,357**

**It is estimated that for every dollar spent on addiction treatment programs, there is a \$4 to \$7 reduction in the cost of drug-related crimes.**

*National Institute on Drug Abuse.  
Principles of Addiction Treatment, 1999.*

# Letter from ARTS' Executive Director

I begin our sixth annual report with some personal news. After 35 years of assisting ARTS to become one of the premier behavioral health treatment services in the country, I am on the "glide path" to retirement. I will leave this wonderful organization at the end of June 2013. My successor, Elizabeth ("Libby") Whitmore, PhD., is taking the lead to move ARTS through health care reform and beyond.

ARTS is both a community-based organization and a research center that is part of the University of Colorado School of Medicine. We are a service organization informed by the most current well-documented and scientifically supported treatment interventions. The integration of research with services offers clients the best opportunity to make positive changes in their lives, changes that are more likely to be pervasive and enduring. Where feasible, ARTS has adopted promising evidence-based practices across every treatment program.

Additionally, because the Annual Report is disseminated to a broad and diverse group, each year the report also provides an overview of the major clinical services and accomplishments for the past fiscal year. An underlying theme of each report has been the expression of our gratitude to the many partners and referral sources who have worked so closely with us to bring about these accomplishments.

In each Annual Report, I highlight some of the prominent achievements of this past year. For FY 2011-2012, there are four accomplishments that I want to underscore:

- The Baby Haven Child Care Center earned a four star Qualistar Rating, the highest rating a center can achieve.
- ARTS signed a contract with Signal Behavioral Health Network and Qualifacts to purchase and install an Electronic Health Record System in 2013.
- ARTS has continued its successful integration with Sheridan Health Services (SHS), which is now a Federally Qualified Health Care (FQHC) center. SHS and ARTS have co-located services and share some staff to provide integrated medical and behavioral healthcare for both ARTS and SHS clients.
- ARTS Telemedicine Service, funded by the Colorado Health Foundation, is off to a great start. ARTS psychiatrists and addiction medicine providers currently have contracts to provide consultation and direct service in 18 different locations across the state.

On behalf of the faculty, staff, students and volunteers who are the foundation of ARTS, I want to express our appreciation for the many agencies, foundations, and individuals who have supported us this year.

Sincerely,



Tom Brewster  
Executive Director and Associate Professor  
Addiction Research and Treatment Services (ARTS)  
University of Colorado School of Medicine



Tom Brewster is  
retiring in June,  
2013 after 35 years  
with ARTS.



ARTS Management Team, L--R: Kimberly Creedon, Susan Krill-Smith, Jacquelyn Cully, Angie Wold, Elizabeth Whitmore, Tom Brewster, Susan Turowski-Reher, Ken Gaipa, Eric Ennis, Daniele Wolff (not pictured: Amy Neustadt)



# ARTS introduces Telemedicine Services

In 2012, with the assistance of a grant from The Colorado Health Foundation, ARTS introduced **Telemedicine Services**, and hired Dr. Ana Hoffenberg as the Director of Telehealth and Addiction Medicine Services.

Telemedicine, or more specifically, telepsychiatry, is the delivery of mental health and substance abuse services, including evaluations, consultations, and medication management from a distance, using secure, two-way, interactive videoconferencing technology. The follow-up appointments occur at least once per month, but can be more frequent as needed.

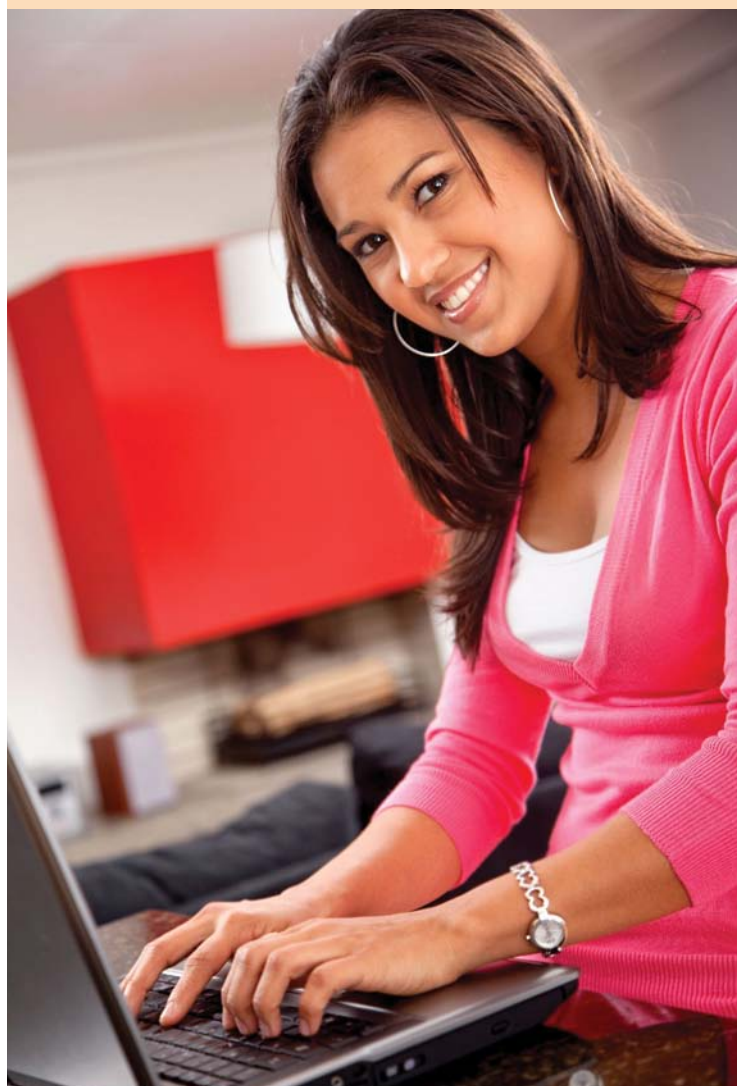
By using telemedicine communication, ARTS is able to provide substance abuse and mental health services to clients and their families from rural, mountain, and underserved areas of Colorado in a cost-effective manner. Because there is an extreme shortage of psychiatrists and physicians who specialize in Addiction Medicine across the state, this program allows ARTS to share our resources and specialty in these areas to other programs across the state.

## Highlights of the ARTS Telemedicine/Telepsychiatry Service:

- ARTS purchased an industry-standard, secure, videoconferencing system, which gives the program the capability to offer services to individual families and agencies across the state, using advanced technology.
- Supported by the American Psychiatric Association, telepsychiatry helps to reduce barriers that clients often face when entering treatment from a rural area or non-traditional settings, such as corrections or hospital facilities.
- The videoconferencing system is managed a national company that provides the highest-available, 1024-bit embedded encryption to protect patient confidentiality. The system is fully HIPAA compliant.
- The software is easily installed on each endpoint computer using cloud technology. No special hardware is needed, other than a webcam and microphone, if not already available.
- ARTS is now able to easily network and videoconference with various sites across the state, including county human services departments, regional mental health centers, hospitals, corrections facilities, and behavioral health organizations.
- The technology also can be expanded for home use to any client or family who has access to high speed Internet.

ARTS will continue to expand telemedicine services in 2013 and beyond.

**For more information about the program, please contact:  
Dr. Elizabeth Whitmore at 303-919-7739 or  
elizabeth.whitmore@ucdenver.edu.**



## Did you know...?

- **Client satisfaction with Telepsychiatry is equal to or greater than face to face appointments.**
- **89% of clients are comfortable seeing their psychiatrist through Telesessions**
- **84% think Telepsychiatry is a good way to receive psychiatric care**
- **85% enjoyed their video consult**
- **92% feel that Telesessions allow them to better communicate their feelings and allow their provider to better address their needs**

*Source: Michigan State University/Lifeways Telepsychiatry Project*



## Analice Hoffenberg, M.D., M.S.P.H.

Dr. Analice Hoffenberg, or Dr. Ana, as she is usually called, is the new **Director of Telehealth and Addiction Medicine Services** at ARTS. She is Board-Certified in Preventive Medicine and is Board-eligible for Addiction Medicine through the American Society of Addiction Medicine. She speaks fluent Portuguese, Spanish and English.

Dr. Hoffenberg is a native of Rio de Janeiro, Brazil. She graduated from medical school at the Universidade Estadual do Rio de Janeiro, and originally specialized in Pediatrics, becoming a Neonatologist. She moved to Denver in 1991, where she completed Clinical General Preventive Medicine training with a Masters of Science in Public Health while also retraining in Pediatrics, all at the University of Colorado Health Sciences Center. Later, she completed the Advanced Fellowship in Substance Use Treatment at the Denver Veterans' Affairs Medical Center (Denver VAMC), while acquiring great experience treating comorbid psychiatric conditions in a very challenging population. After her fellowship, Dr. Hoffenberg continued to serve mentally ill and addiction-challenged veterans as the head of Suboxone services at the Substance Abuse Treatment and Prevention Clinic at the Denver VAMC Psychiatry Department, from 2009 to 2012.

As the Director of Telemedicine and Medication Assisted Treatments for Addiction Research and Treatment Services, Dr. Hoffenberg conducts psychiatric evaluations and treatment via telemedicine throughout underserved rural and mountain areas of the state. She also sees clients in our private-pay Suboxone clinic.

Dr. Hoffenberg is interested in the epidemiology of substance use disorders, and plans to expand her research to include the study of behavioral choices and coping styles in regard to substance abuse. When she is not helping to care for individuals with addiction and psychiatric problems, or doing research, Dr. Ana enjoys spending time with her husband and sons, travelling and swimming.



## ARTS Foundation

### CREATED TO SUPPORT ARTS PROGRAMS

State and local county support has been a critical source of support for ARTS programs since it began in 1972. However, this funding has been declining in recent years, making it even more important to raise additional funds through private donations and foundations. Therefore, in 2012, a nine-member volunteer board of directors comprised of community leaders came together to establish the ARTS Foundation. The Foundation was subsequently incorporated as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Service Code.

**The purpose for ARTS Foundation is reflected in the following mission statement:**

***"To help to save lives and improve the quality of life and overall prognosis of men, women, adolescents, children, and families affected by substance abuse and/or mental health issues. Therefore, the ARTS Foundation may provide treatment and/or recovery support services for this group of individuals. In addition, the ARTS Foundation is committed to providing financial and volunteer support to community partner agencies serving these populations."***

In addition to generating new resources for ARTS operations and programs to support the organization's long-term sustainability, a significant responsibility of the ARTS Foundation will be to strengthen existing partnerships and build new coalitions that benefit ARTS programs. Although it will operate as a separate entity from the University, ARTS Foundation will also have a cooperative relationship with University of Colorado Foundation by sharing resources, jointly writing proposals, and building relationships with major donors. For more information on the ARTS Foundation, including how to make donations, please see the foundation's web site: [www.artsfoundationccolorado.org](http://www.artsfoundationccolorado.org).

## Target Population

For 40 years Peer 1 has been serving adult males referred from the criminal justice system.

## Background

**Peer 1** is a 126-bed Therapeutic Community (TC) long-term residential substance abuse treatment program for men located on the Fort Logan campus. Peer 1 addresses substance dependence, criminal behavior, co-occurring mental health disorders, and the multiple other areas of life functioning that are affected by addiction to drugs. The central goal for Peer 1 is to facilitate individual changes and positive growth for each client. This goal is achieved primarily by the community of peers residing and working together to help themselves and each other. Peer 1 clients assume a major role in managing the TC, serving as positive role models for other more recently admitted clients. Thus, while evidence-based interventions are incorporated into the treatment regimen, in the TC, 'the community is method,' meaning that much of the behavioral change evidenced in the program is achieved through the client community and milieu.

## Peer 1 Programs

Peer 1 is a 9 to 12 month intensive residential treatment program. It utilizes distinct phases through which all clients must progress, with each successive phase providing more responsibility and privileges. Early phases, such as Orientation and Phase I focus on day-to-day treatment and programming within the milieu environment. Later stages such as the Striking and Transitional Phases focus on the gradual re-integration back to the community which involves employment, family reunification and involvement with local support groups.

The Peer 1 program has coordinated educational and vocational services, with a fulltime coordinator. The program offers clients assistance in obtaining their GED, job skills assessment and readiness training, and job placement with on-the-job monitoring and counseling. The coordinators have developed a network of employers that understand the strengths and needs of the men being placed in jobs while in the early stages of recovery from substance addiction and mental health disorders.

The principal services offered by Peer 1 are:

- Intake and Assessment
- Pharmacotherapy
- Behavioral Therapy Counseling
- Case Management
- Self-help and Peer Support Groups
- Continuing Care
- Vocational and Educational Assessment and Counseling
- Family Education Groups
- Housing and Transportation
- Opioid Replacement Therapy
- Drug Testing and Medication Monitoring
- Budget Planning
- AIDS and HIV Screening and Counseling
- Medical Evaluation and Care
- Psychiatric Consultation

Peer 1 also provides Recreational and Replacement Therapy:

- Camping
- Holiday Festivities
- Sobriety Sunday
- Skiing
- Mountain Biking
- Ride for Recovery
- Mountain Climbing
- Rafting



Peer 1 Outpatient Therapeutic Community (OTC) is recommended for men who graduate from the residential treatment program and this continuing care extends for 9 to 12 months. The primary goal of the OTC is to foster and support positive reintegration into the community. Services are gender specific and include educational and therapy groups, parenting classes and family activities. The OTC program also assists with clients with housing as they transition to the community. Peer 1 has 20 beds of clustered housing available for clients in the OTC program.

## Referral Sources

The vast majority of Peer 1 clients are referred from the criminal justice system, including the Colorado Department of Corrections, Community Corrections, parole and probation.

## COMMUNITY SERVICE HIGHLIGHTS

Peer 1 places much emphasis on helping clients develop a sense of community responsibility to make amends for past community transgressions as they contribute to the common good. This year, Peer 1 staff and client volunteers participated in several community projects to help give back to the community including:

- Participating in the Denver Annual AIDS Walk
- Visiting local nursing homes to bring Christmas cheer.
- Singing Christmas carols in downtown Denver and distributing fruit, hot chocolate, cookies, burritos, coats, hats and gloves to homeless individuals.
- Assisting local community churches, and homeless shelters with small-scale improvement projects.
- Raising funds and sponsoring a child through Save the Children Foundation.
- Purchasing goats, sheep, cows and donkeys for farmers in Uganda to help them become more self-sufficient.
- Providing community education on all aspects of addiction and recovery to local community, high school and college audiences to promote drug education and awareness.

## ACCOMPLISHMENTS

- The Peer 1 program was rated number one in the State of Colorado Community Corrections Risk Factor Analysis (Year 8 state wide results October, 2012.)



## Peer 1 Success Story: Russell

### Russell shares his story...

"I began drinking at the age of 14. Almost everyone in my family drank alcohol and I just assumed it was the thing to do. As time went on, alcohol became a huge problem for me. I was a starter on my high school football team and would show up drunk for practice most of the time. By the time I entered college, I was so entrenched with drinking that pretty much nothing else mattered. Drinking had become my main priority in life. I was chosen to be on the University of Texas football team, but I didn't show up for the first practice and was immediately released from the team. I spent the next twenty years going from one job to the next, one relationship to the next, drinking every day. One night in a drunken stupor, I drove a rental car off a cliff. The car became lodged in a tree, and when I opened the car door to get out, I fell 20 feet to the ground. I was badly injured and am truly lucky to be alive today. That accident actually turned out to be the best thing that could have ever happened to me. As a result of the accident, I was put into the Department of Corrections.

One morning, while in the Department of Corrections facility, I woke up and looked into a mirror. I did not like the person I was looking at; a very smart, 43 year old, who had wasted the last twenty years of his life. I started sobbing and decided to face the real truth. I decided to finally do something about my addiction. From that moment on, my life changed dramatically. When I walked into the front door at Peer 1, I knew I had found a home. Not just a place to stay, not just four walls, but a place where people who really want to get better and live a wonderful life, are given the tools and opportunity to do so. I could not have turned my life around and had nearly as much success without the Therapeutic Community and the Peer 1 program. I met many people at Peer 1 with the same common goals of staying sober, living a productive life and helping others. I have many mentors at Peer 1 and I call on them often. Overcoming my addiction is by far the hardest, yet most rewarding, thing I have ever done in my life. For the last two years, I have taught a class at Outpatient Therapeutic Community, and this has played a big part in my continued recovery. It allows me to do the one thing that keeps me connected, to give back to the program that has given so much to me.

Even after completing the program and graduating in the summer of 2010, I really thought I would have just an "okay life" at best considering my felonies, years in Department of Corrections, and past alcoholic addiction, but nothing could have been further from the truth. The life I have now far exceeds anything I have had in the past and anything I could have imagined for my future. I am now married to wonderful loving woman who really cares about me and my recovery.

My wife and I opened our own produce store last year and it has been a great success. Our entire family helps to run the business. I also have a management position at a corporation and I am proud to go to work every day. I truly believe everyone deserves happiness, and it is there for the taking, if you care enough about yourself and are willing to put forth the effort to overcome addiction."



**Three in 10 Coloradans need treatment for mental health or substance use disorders each year – more than 1.5 million citizens.**

*The Status of Behavioral Health Care in Colorado, 2011 Update, Triwest Group, Caring for Colorado Foundation, The Colorado Health Foundation, The Colorado Trust, and The Denver Foundation, Denver, CO.*



## Target Population

**The Haven**, in operation since 1992, is celebrating 20 years of excellence in providing evidenced based and trauma informed care to women suffering from chronic substance use disorders and co-occurring mental health.

## The Haven Programs

The Haven is a 65 bed Modified Therapeutic Community (TC) where women reside for an average of 12 months, followed by an additional 12 months of aftercare services.

- The Haven is unique in that it allows pregnant women and women with infant children to reside in treatment together.
- While in treatment, clients receive services that not only focus on recovery from substances and maintenance of mental health, but treatment that focuses on social functioning, education/vocational skills, and positive community and family ties.
- Participants learn to be accountable to the TC community through a hierarchical model of treatment stages that reflect increased levels of personal and social responsibility.
- The TC model is based on “community as method” or mutual self-help where all individuals within the TC assume responsibility for not only their own recovery, but that of their peers, and hold each other responsible for making meaningful changes.
- Clients participate in a number of structured drug and alcohol treatment groups including: behavioral therapy, contingency management, specialized parenting and interactive groups, coping skills and cognitive therapy groups, trauma informed groups, GED classes, vocational services, job skills training, employment assistance, and individual counseling.
- Psychiatric care is provided on-site and clients receive medical and dental care through the Sheridan Health Clinic which is co-located on the Fort Logan campus.
- The Haven is licensed by the Colorado Division of Behavioral Health and accepts referrals from multiple sources including community corrections, probation, parole, county social services departments and family or self-referrals.

## Doula Program/Infant Mental Health

- The Haven is a Special Connections provider and offers specialized services to pregnant and parenting women. The Haven was the first substance abuse treatment provider in the nation to provide doula services to the women they serve.
- **Doulas** assist pregnant women in obtaining medical care and provide case management services through the child’s first 6 months. The Haven also offers specialized treatment through our **infant mental health team** which provides consultation and direct services to support mothers and increase the child’s development as well as their social and emotional health.

## COMMUNITY SERVICE HIGHLIGHTS

An important component of The Haven program is assisting women in learning how to have fun in recovery and give back to their community. Women participate in a number of cultural and recreational events throughout the year as a part of their treatment. Over the course of the year Haven clients have given back to the community in the following ways:

- Participating in Habitat for Humanity
- Volunteering at Catholic Charities and the Denver Rescue Mission
- Providing donations to refugee assistance programs
- Assisting the elderly community through visiting local nursing homes
- Memorial Day assistance at Fort Logan National Cemetery
- Volunteering through the Denver Public School Outreach Group





## Haven Success Story: Allison

Allison started drinking and using marijuana with her friends when she was 11 years old. Her use with friends seemed harmless at first. However, when she was 22, 6 weeks after her daughter was born, Alison was introduced to crack cocaine by her husband. From there, they “lost everything.” For the next 3 years, Allison stayed with her husband, using all of their earnings on drugs. The relationship turned abusive and Allison took her children and left. Soon thereafter, Alison found another drug that controlled her even more, Methamphetamine. Her addiction became uncontrollable; she soon earned her first felony conviction and was sentenced to a half-way house.

Allison continued to slip deeper and deeper into her addiction and continued to engage in unhealthy relationships that helped fuel her addiction. She reported that she was lying not only to her family but, to herself, and that she was spiraling out of control. Her self-destructive behavior and drug use continued for more than 20 years. During those years, she was in and out of the legal system, engaged in one abusive relationship after another, and neglected her health. Alison lost all but 7 of her teeth as a result of her addiction and domestic violence. Most devastating, however, was that she had lost the trust of her family and the ability to parent her children.

Eventually, Allison was convicted of two felony counts for possession of a controlled substance. Allison assumed she would be going to prison, and was very surprised when the judge told her she was going to The Haven to get the help she needed. Allison admits that she was scared to come to The Haven. However, she knew in her heart, that she needed to get help. At that point, Alison decided to face her fears so that she could heal from her addiction.

When Allison speaks about what she learned at The Haven, a somber tone enters her voice. “I learned how to be honest with myself and how to change my core beliefs. One of my beliefs was that I’m not hurting anybody. However, I was hurting myself, my family, the people I sold drugs to and their families. Everybody around me was being hurt.” Through her treatment at The Haven, Allison realized that her addiction affected everyone with whom she came in contact.

While at The Haven, Allison underwent extensive dental work through a generous donation from the **Smile Again Program**. The Smile Again Program offers donations of dental work from local area dentists to clients with severe dental needs who are survivors of domestic violence. Allison’s gratitude shows on her face, “I have the most beautiful smile in the world and I owe it to The Haven. I haven’t stopped smiling since.”

Since treatment, Allison has been employed as a dog groomer and aspires to own her own mobile pet grooming service. During the four years that she has been clean and free of drugs, she has worked diligently at repairing relationships with her family. One of her greatest joys is her grandchildren and she knows she has come a long way in recovery because she daughter now trusts her to be a part of their lives. Allison works hard to give back to the community and works with local Narcotics Anonymous (NA) as a panel coordinator to bring the message of NA to struggling addicts. Additionally, Allison gives back to her Haven peers by facilitating a weekly group. With her radiant smile, Allison continues to help herself and others by sharing her experience, strength and hope.



**Established by the Metropolitan Denver Dental Foundation, the Smile Again Program offers cost-free dental care to survivors of domestic violence in an effort to help individuals restore their oral health, assist in their recovery and support their efforts toward self-sufficiency. The dental care is donated by volunteer dentists and specialists.**



# THE BABY HAVEN

The **Baby Haven Child Care Center** is located next door to The Haven and is a licensed and Level 4 Qualistar rated center which specializes in caring for the children of the women who are receiving treatment services at The Haven and Outpatient Therapeutic Community Programs.

- The center is able to accommodate 41 children ages 2 weeks of age through 5 years old.
- Children who are in residence at The Haven attend the Baby Haven M–F from 8 am to 4 pm while their mothers are participating in program activities.
- The center also provides care to community families and is a partner of the Mile High United Way School Readiness Initiative. The goal of the center is to provide a quality learning experience to all children so that they can reach and exceed their individual potential. Curriculums are utilized to maximize the physical as well as the social and emotional development of children.
- Early Education Teachers collaborate with the Harris Infant Mental Health Team child psychologist and an on-site physical therapist to assure that the needs of all children are met.



## Lynn Meek, Child Care Director

Lynn Meek joined the Baby Haven team as the Child Care Director in September 2012. She has extensive experience in teaching and leadership roles in the field of early care and education. Formerly she provided program Development for the Early Care and Education Office in Mesa County, was an Education Manager for 8 Head Start centers, and a Child Care Licensing Specialist.

She is a welcomed addition to a fabulous and dedicated team of Baby Haven teachers.





# FRIENDS OF THE HAVEN

**Friends of The Haven** (FOH) is a non-profit organization whose sole mission is to support and advocate for the Baby Haven and The Haven.

- The Friends of The Haven, led by President Bill Winn, were responsible for the capital campaign to build the Baby Haven and have since been actively involved in additional supportive services to assist the center in obtaining additional funding to excel as a quality child care facility.
- In 2011, the FOH raised \$45,000 dollars to assist 24 women with treatment scholarships. The FOH treatment scholarships assist women who do not have funding streams for treatment or who have gaps in their funding.

- FOH took in over 11,000 donations this year and over 1,600 items (many of which were much needed toiletries for the women) in their Holiday gift drive.
- FOH organized 50 volunteers to wrap presents so that each child of women at The Haven program could have Christmas gifts. Volunteer photographers ensured that each mother in the program had a professional portrait of their child's first holiday season.

## Friends of The Haven Gala

**Friends of The Haven** celebrated its second annual fundraising dinner "Changing Seasons and Changing Lives" on October 30th, 2012. Over 180 guests gathered in the Grand Ballroom at the Denver Athletic Club. This event raised over \$60,000 and these monies are used to support treatment scholarships. **Treatment Scholarships** allow The Haven to partially or fully fund a woman at any stage of her treatment at The Haven, regardless of her ability to pay. Although The Haven works with a variety of public and private funding sources, women with unique situations often need financial assistance to fill funding gaps. Following a rigorous application process, women can receive direct support for substance abuse treatment, mental health treatment, medical services, education and job readiness, childcare, family therapy, parenting classes and other critical services.

Each year at the Gala, a **Rising Star Award** is presented to a client that has achieved exceptional success. This year, the 2nd Rising Star Award was given to Tammie Carroll, a graduate of The Haven. Tammie was chosen for the award because of her success in recovery and in life. Before coming to The Haven, Tammie was addicted to methamphetamine, committed identity theft and check fraud, had lost custody of her four children, and was indicted by a grand jury for 60 felonies in 6 different counties. Today, Tammie is doing extremely well. She is the Executive Director of New Genesis, a Denver based transitional community for the homeless. She has recently finished her Bachelor's Degree and is working toward her Master's Degree. She was able to reunite with three of her four children and is now a proud grandmother. In her award speech she noted "I am forever indebted to my peers, staff and the therapeutic model The Haven practices. Without it, none of this would have been possible."

The keynote, Denver District Attorney Mitch Morrissey, delivered a sincere and personal speech about the impact that addictions have on families.

Honorary Co-Chairs for the event include:

- Mary Mullarkey, Former Supreme Court Justice
- George Lundeen, Artist and Sculptor
- Honorable Bill Meyer
- Richard M. Lawrence, President and CEO of the University of Colorado Foundation
- Dottie Lamm, Former Colorado First Lady
- Lilly Marks, Vice President for Health Affairs, University of Colorado and Executive Vice Chancellor, Anschutz Medical Campus
- Jeff McCubbin, Dean of Applied Sciences at Colorado State University



*The Honorable Gail Meinster; ARTS Associate Director of Development, Kimberly Creedon; and The Honorable Tamara Russell*



*LEFT-RIGHT: Bill Winn, President of Friends of the Haven, Mitch Morrissey, Denver District Attorney, Karen Chappelow, Associate Director of The Haven*



*Rising Star recipient, Tammie Carroll and her husband*

# SYNERGY ADOLESCENT TREATMENT SERVICES



Synergy's licensed treatment program encompasses a continuum of services for adolescents and their families, focusing on substance use disorders (SUDs) as well as co-occurring mental health problems and disorders. Many Synergy adolescents exhibit symptoms of other mental health diagnoses, in addition to their SUD, most frequently attention deficit disorder, major depression, bipolar disorder, post traumatic stress and conduct disorder. In most cases, these youths are also engaging in delinquent and other disruptive behaviors and are encountering problems in school. The population of focus for Synergy is adolescent males and females between the ages of 12 and 18 years. Whenever feasible, Synergy treats the whole family, providing integrated treatment that addresses the substance use and mental health disorders concurrently, recognizing the many patterns in which they can interact to affect the youth's behavior.

Synergy programs are staffed by multidisciplinary teams of professionals, including psychiatrists, psychologists, licensed mental health therapist, certified addictions counselors, and case managers. Faculty members from the Division of Substance Dependence, Department of Psychiatry, work in the Synergy programs, providing consultation and direct clinical care, while also conducting scientific research. This integration of research and practice is a critical component of Synergy's services, ensuring that the clients are participating in interventions that are grounded in current scientific evidence.

## The Synergy Residential Child Care Facility

**The Synergy Residential program** offers a nurturing, but non-permissive and highly structured, program for adolescent males. The program is a Modified Therapeutic Community (MTC), an evidence-based intervention in which treatment is phased, with clients receiving increasing levels of responsibility and concomitant privileges, based on their progress through respective phases. As clients move to completion of the RCCF, they are incrementally transitioned into the community, with most youths returning to live with their family at this point.

While in the residential treatment program, clients receive the following services:

- Group and family therapy, with a focus on the substance use disorder and co-occurring mental health disorders
- Medication management, when indicated including medications for addictions
- Motivational Interviewing and Cognitive Behavioral Therapy with incentives for positive behavior change
- Case management services offering intensive support to ensure that clients remain in treatment, and also provide intensive assistance to formulate detailed plans and forge key linkages for youths as they make the transition back into the community.
- On-site Colorado Department of Education (CDE) approved schooling, with special education teachers and also a special on-line course and recovery credit program for both special education and general education.

## Synergy Outpatient Services

- **Day Treatment** is an intensive, structured day program that may be, for some youths, a viable alternative to residential treatment. It has a therapeutic milieu and an on-site CDE approved school with an on-line course and recovery program.
- **Multisystemic Therapy (MST) with Contingency Management** is a home-based model that is evidence-based and continuously monitored for fidelity of implementation. It is an integrated, gender-specific treatment for substance abuse and mental health disorders, and can be the primary treatment intervention for adolescents and their families, or constitute aftercare for those who have completed intensive treatment.
- **Assertive Continuing Care**, an empirically supported community- and home-based model, is available for those youths who have completed the RCCF or Day Treatment Programs or a similar intensive program in another agency.
- **Adolescent Community Reinforcement Approach (ACRA)** is similar to Assertive Continuing Care, this structured out patient treatment model is effective in helping adolescents find alternative coping strategies and supports in their community to avoid drug use.
- **Traditional Outpatient Services**

## LOCATIONS

The Synergy Therapeutic Residential Child Care Center is located on the Fort Logan campus in Denver.

The Day and Outpatient treatment programs are offered at 1212 S. Broadway, Suite 200 in Denver.



## Synergy Residential Success Story: Eliot

Eliot's recovery story began with him being held at gunpoint by the Aurora police department after breaking into a store and triggering a burglary alarm. Getting arrested that night and placed in detention gave him time to think and consider all the damage he had done to his life, his relationships, and the community through his escalating out of control behavior fueled by substance addiction. It was a low point that Eliot now looks back on as "Divine Intervention" as it set the stage for tremendous life change, personal growth, and the embracing of recovery.

Eliot began using Alcohol at age 12 and initially found it a good way to connect with peers, deal with depression, and escape the very difficult feelings he held for his father's past behavior. His alcohol use escalated dramatically and turned into a daily habit by age sixteen, along with daily use of cocaine, methamphetamines, and the party scene drug "Ecstasy" or MDMA. Eliot's alcohol use was so severe that he started to drink until he blacked out and he would wake up and remember nothing of what he had done the night before. By this time, what had initially provided him escape was now crushing his life and in his words, "had created a scattered horrific nightmare". Eliot had lost his mother's trust, was having difficulty in school and was in conflict with his friends, who could not bear watching him spiral out of control. Eliot was struggling with feelings of shame and depression when he was arrested in October 2010.

Coming to Synergy residential in October after his "time to think in detention" began for Eliot a reconstruction of his life. His first order of business was to choose to stay at a facility that has no fences and quickly challenges individuals to look at their "criminal presentation of self" and cognitive distortions. Eliot was ready for change and eagerly dove into the hard work of self-reflection, reconnection with family, and the examination of his priorities and strengths. He quickly became a leader on the unit and worked hard to learn concepts that would be vital for his success in transitioning back into the community. Examining his social networks and making changes in his peer associations, along with working with his mother in family therapy to build trust were some of the elements of recovery that he embraced with maturity and dedication. Eliot also began to reconnect with his passions and potential that had been buried under years of substance addiction. Eliot started to flourish in recovery and access to counseling allowed him to unpack years of resentment and difficult emotions in a safe manner; essentially freeing him to envision a new life. Eliot wrote in his own words, "Synergy was an experience that will never be forgotten. It taught me the virtue of honesty, the value of integrity, but most of all, it taught me that nothing matters more than what I want for myself". Eliot graduated from the residential facility successfully after five months and worked hard in aftercare to maintain his new life of sobriety.

Eliot's story would not be complete without mentioning that he has been clean and sober without relapse since his October 2010 arrest. He takes pride in his two years plus of recovery and is currently a freshman at the Community College of Aurora. Teaching English on the high school level is something that he is considering for his future, although he is also attracted to the counseling field and an opportunity to give back to others by sharing his story. Ultimately, he is happy, doing well and a proud Synergy alumni.



**The Substance Abuse and Mental Health Services Administration has reported that 70% of individuals with substance use disorders have at least one chronic health condition, and 45% have two chronic health conditions.**

# ADULT OUTPATIENT SERVICES



## Adult Outpatient Clinics

Men and women for whom outpatient treatment is more appropriate have ready access to one of six adult outpatient clinics located strategically across the metro Denver area. The **Special Services Clinic** provides specialized treatment and care coordination services for patients who have co-occurring HIV. Two clinics, located in Denver, are specially designed to serve individuals referred from or involved with the criminal justice system: **The Women's Connection** and **CrossPoint** clinics. The Women's Connection also serves non-offender females in a gender-specific environment. Both clinics offer an array of outpatient services, including individual, group and family counseling, case management,

and services are gender-specific. CrossPoint has developed specialized services for offenders, including such Evidence-Based Practices as the Matrix Model and Strategies for Self-Improvement and change. The program also offers education and therapy for Driving While Alcohol Impaired (DWAI) and Driving Under the Influence (DUI) offenses. CrossPoint also provides a state-of-the-art program for offenders re-entering the community from prison.

## Medication Assisted Treatment (MAT)

ARTS offers MAT at the **Parkside Clinic** in Denver, the **Potomac Street Center** in Aurora, and the **Westside Center for Change** in Lakewood. Medication Assisted Treatment (MAT) is a critical internationally recognized Evidence-Based Practice for patients with opioid and alcohol dependence.

- Methadone, Buprenorphine, and Vivitrol are available for opioid dependence.
- Antabuse, Naltrexone, and Vivitrol are available for alcohol dependence.

When integrated with counseling and other psychosocial interventions, principally group, and individual counseling, MAT increases retention in and compliance with treatment, leading to more positive treatment outcomes.

## 2011–2012 FOUNDATION SUPPORT

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## Adult Outpatient Success Story: **Barbara**

### Barbara shares her story ...

"I would be telling a lie if I wrote that my addiction to opiates stemmed from a childhood riddled with abuse and neglect. In fact, my story of addiction is quite the opposite. I was the first of six children born in Kingman, Kansas. We were a typical middle class American family and I never felt like I was in need of anything.

I was a kid whose entire teenage years were spent in the golden age of the 1960s and with being a product of the times, I'm not embarrassed to say that I did my fair share of experimentation with various substances. However, as much as I liked to party and have a good time, I excelled in college and went on to have a successful career as a Legal Assistant.

As the years passed, I got married, had my wonderful son, Joshua, and then got divorced. As a result of my failed marriage, I became deeply depressed. During these years, I was introduced to pain medication for various aches and pains. My introduction to pain medicines came in the form of Lortab as prescribed by my Primary Care Physician. The Lortab had helped me greatly in managing my pain. However, as I was getting my pain under control, I was also unknowingly creating an addiction to pain medication. Soon, it became harder and harder for me to control my addiction.

During this period of time, my son, Joshua, was diagnosed with colon cancer. He was also introduced to, and eventually, became addicted to opiates. Joshua became aware of an ARTS out-patient treatment center and began his treatment. Soon, he insisted that I join him, which thankfully, I did. I made one of the most important decisions of my life by committing myself to treatment for my addiction. My son was as committed to my recovery as he was his own recovery. We both enjoyed our morning trips to the ARTS clinic and, as time passed, we excelled in our recovery plan.

My beautiful son unexpectedly passed away with the cancer. His poor body was exhausted from all of the cancer treatments and he surrendered himself to an eternal slumber and took his last breath on June 27, 2007.

One would assume that, given my lack of self-control in the past, I would have allowed myself to rapidly spiral downhill as a result of my son's death. Instead, I decided that I was going to follow my son's legacy of determination and will power to gain control of my own destiny. Joshua had shown me the way to the ARTS clinic and I knew it was up to me to use the wonderful resources and opportunities that ARTS had to offer.

Although, it has been a long and bumpy road, I am proud to say that I have progressed in treatment to the point that I am entrusted with monthly take home doses of medication. My treatment at the ARTS outpatient clinic has given me my life back. Now, I am functioning not only as a Legal Assistant, but also as a caretaker for my elderly mother. I am totally confident that I will also excel in both of these endeavors because I was introduced to the ARTS outpatient treatment program."



**More than one in 10 Denver residents over the age of 12 reports a substance abuse problem and only nine percent of those seeking treatment say they were able to obtain appropriate care.**

*Denver Drug Strategy Commission*



# ARTS

Addiction Research & Treatment Services

Improving Lives  
Through Prevention,  
Education,  
and Treatment



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