2025 Wells House Organizational Highlights

Our Foundation & Legacy

Wells House was profoundly shaped by the leadership of our former Chief Executive Officer, Charlie, who dedicated over 25 years to serving others with unwavering compassion and purpose. His work was more than a job—it was a calling. Under his guidance, Wells House grew from a single Level 3.1 program into a multi-county organization serving both men and women with substance use and mental health disorders.

Charlie deeply understood the challenges of accessing effective treatment. He recognized that substance use disorder care is often underfunded, difficult to access, and limited by insurance coverage. He also knew that stigma remains a powerful barrier—too often, individuals are blamed for their illness rather than supported in their recovery.

Despite these obstacles, Charlie believed in the power of treatment and the reality of recovery. He championed the idea that addiction is a treatable disease, and that every person deserves the chance to heal.

Today, all of us at Wells House carry forward Charlie’s legacy. We are proud to offer a safe, supportive environment where individuals can take the first steps toward rebuilding their lives. Our team leads with compassion, understanding, and a deep commitment to the recovery journey. We witness every day how investing in recovery transforms not only the lives of our patients, but also their families and the broader community.

About Wells House

Service & Reach

- Locations: Dual presence in Washington and Frederick counties with the ability to provide telehealth services for mental health patients.
- Substance Use Levels of Care: Level 3.1: Clinically Managed Low-Intensity Residential Services, Level 2.1: Intensive Outpatient Services (IOP), and Level 1: Outpatient Services.
- Mental Health: We operate dedicated Outpatient Mental Health Clinics (OMHC's), providing services to adults, children, couples, and families in 2 counties.

Key Organizational Strengths

- Accreditation: We hold a CARF (Commission on Accreditation of Rehabilitation Facilities) accreditation, which is the gold standard for quality and safety in human services.
- Human Capital: A diverse team of 60+ professionals, ranging from licensed clinicians to peer support specialists—an essential mix for holistic recovery.
- Value Proposition: They focus on "cost-effective" and "outcomes-based" care, which means we prioritize measurable recovery milestones

The Growth Narrative: From SUD to Integrated Care

Between 2022 and 2025, Wells House total reach grew by 58%. The story is that we radically expand the way we help people.

- 2022–2023 (The Foundation): Our efforts were focused squarely on SUD in Hagerstown and Frederick, maintaining a steady and reliable volume of roughly 600+ admissions per year.
- 2024 (The Pivot): This was the "Expansion Year." Introducing Mental Health services increased our total reach by 30% in a single year.

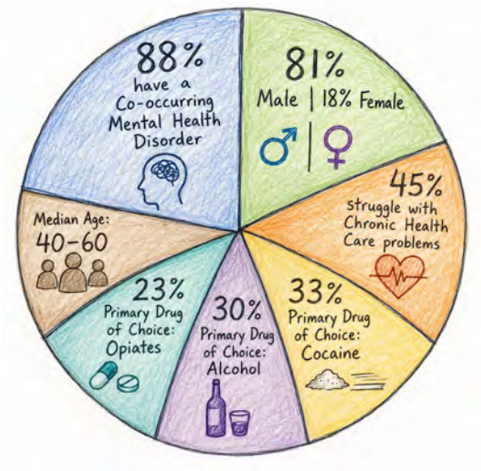
- 2025 (The Transformation): Mental Health services nearly doubled in volume (from 247 to 473). For the first time, Mental Health admissions (473) nearly equaled the combined SUD admissions of both Washington and Frederick Counties (519).

Year	Hagerstown (SUD)	Frederick (SUD)	Mental Health (MH)	Total Reach
2022	310	317	--	627
2023	314	290	--	604
2024	277	259	247	783
2025	265	254	473	992

SUD Patient Characteristics at Enrollment

Our substance use disorder population has high needs and complex barriers to care. With 81% of the population male, the story often centers on men's health and the challenges men face in long-term recovery. This is not just "addiction with a side of depression" — mental health and substance use are deeply intertwined, and treating one without the other is likely to fall short for 9 out of 10 people in our population.

- 88% have a Co-occurring Mental Health Disorder
- 81% Male | 18% Female
- 45% struggle with Chronic Health Care problems
- 33% Primary Drug of Choice: Cocaine
- 30% Primary Drug of Choice: Alcohol
- 23% Primary Drug of Choice: Opiates
- Median Age: 40–60



Mental Health Patients Served Diagnostic Breakdown

This data tells us a story of a population navigating significant emotional and psychological weight. The distribution suggests that chronic mood and stress related struggles exist in our patient population. Together, Generalized Anxiety Disorder and Major Depressive Disorder account for nearly half of our total population.

Preliminary Diagnosis	Percentage
Generalized Anxiety Disorder	23.89%
Major Depressive Disorder	23.26%
PTSD	16.70%
Bi-Polar Disorder	16.49%
Adjustment Disorder	14.80%
Other	4.86%

2025 Recovery Outcomes

Mental Health Progress:

- 80% of patients feel supported in their mental health recovery.
- 75% feel they are developing tools and skills to handle life's challenges.

Substance Use Success:

- 86% of patients report total sobriety 6 months after treatment.
- 82% believe peer support was vital to their recovery.
- 80% are living independently one year after leaving treatment.

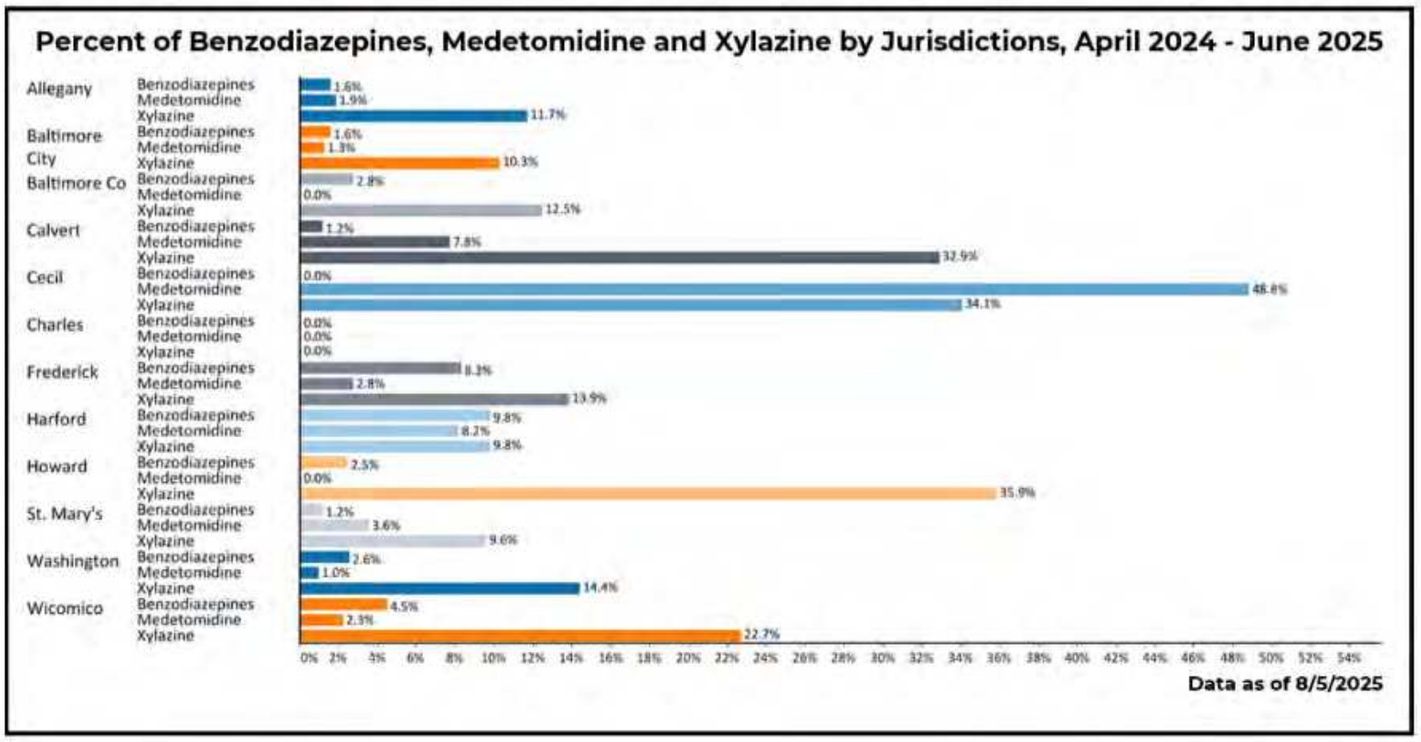
CLINICAL ALERT

Clinical Alert: The Rise of Xylazine

Sedatives have become a common additive to the illicit drug supply. The presence of Xylazine (a veterinary sedative) continues to trend in 2025, complicating overdose responses and causing severe physical health issues such as skin ulcers.

Frederick County: 13.9% of samples positive for Xylazine.

Washington County: 14.4% of of samples positive for Xylazine.



The Voice of Recovery
A personal story of healing and transformation

The Voice of Recovery

There was a time in my life when I felt lost, trapped in cycles of pain, uncertainty, and self-doubt. I was a patient, not just in the clinical sense, but in the deeper emotional and spiritual sense of someone seeking healing. I began attending meetings, not knowing what to expect, but hoping for something better. Those rooms, filled with stories of struggle and resilience, became the foundation of my transformation.

Each meeting was a mirror, reflecting both my past and the possibility of a future I hadn't dared to imagine. I listened, I learned, and slowly, I began to change. The support I found in those spaces helped me rebuild my sense of self. I started making healthier choices, setting boundaries, and believing in my worth.