

# Hopkinton Youth and Family Services



**Strategic Plan 2020 – 2023**

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Thank you for your interest in the Hopkinton Youth and Family Services (HYFS) strategic plan. We are proud to be building on a strong foundation that includes community volunteers who advocated for the creation of the department over 10 years ago, the town leaders who responded and have continued to support HYFS, the remarkable directors who served in the formative years of the program, and the residents who have utilized HYFS services and have given us their trust.

We wish to thank Ann Budner of ABudner Strategy Consulting, who engaged us in a comprehensive and thoughtful process through the most challenging times and delicate circumstances. This work was shared with HYFS current staff, Colleen Souza, LICSW, and Renee Coopridner, MSW, second year intern from BC School of Social Work. I could not have asked for a better or more competent team.

We would be remiss to continue this letter without expressing deep gratitude for the contributions of so many partners throughout the planning process. Whether it be through a stakeholder interview, focus groups, community needs survey responses, draft reviews, or the deeper participation of our planning committee, we have been moved by the enthusiastic support for the department. The transparency of community partners was a valued resource as they shared where we serve well and how we can better serve the community. Residents, who vulnerably shared their stories about trauma, interactions with the mental health system, substance use challenges, recovery, and experiences of prejudice and discrimination, humbled us.

One might imagine the challenge of strategic planning and charting a course for a department's next few years during a global pandemic. But as we listened and thought strategically these past 10 months, our calling grew even more clear. Prior to the pandemic, we saw evidence of an increase in depression, anxiety, and mental health concerns in the community. These trends have taken deeper root due to the pandemic-induced isolation and growing economic instability and to heightened political and social unrest. Bold action is needed to prioritize the social service needs of all residents during this time and into the future. In this strategic plan, we commit our energies to four broad goals and 17 strategies. We will work to strengthen the safety net available to residents, provide preventative services, increase community awareness of behavioral health and how our department can help, and build an efficient and effective departmental infrastructure to support HYFS work and the work of many community partners.

Having only begun to serve as director at Hopkinton Youth and Family Services in May 2019, it has been deeply encouraging to me to engage in this process. Through the vibrant community partnerships there is a shared enthusiasm to continually improve social service delivery. It is gratifying to be engaged in this growing network in the service of Hopkinton residents.

This plan presents HYFS with a way forward. It is not a one and done plan but a living document, where new strategies to achieve our goals are expected to emerge as community conditions shift. HYFS can not do this work alone and we will need the community's input, support, and involvement for the plan to come to full fruition. We hope that you will join us!

With anticipation and gratitude,

Dawn Alcott-Miller, LICSW  
Director

## II. Introduction

Hopkinton Youth and Family Services (HYFS) is a department of the Town of Hopkinton, dedicated to providing access to comprehensive social services for youth and families and enhancing behavioral health for the entire Hopkinton community.

By “behavioral health,” HYFS means the healthy management of anxiety, stress, depression, emotional distress, mental illness, and substance use. HYFS provides free, confidential services to Hopkinton residents including individual, group and family counseling; parent consultation; crisis intervention and support; information and referrals; needs-based assistance; and court diversion. Additionally, HYFS works closely with other departments and community agencies to promote awareness of behavioral health and wellness. The department seeks to build a more caring and connected community, one where all people are valued, where behavioral health is a priority, and all residents have a place to turn when they need help.

The mission and work of HYFS reinforces the Town of Hopkinton’s stated vision and values. The town’s vision statement, adopted in 2015 says, “Hopkinton is a vibrant welcoming community.... We are endowed with open space, natural resources, facilities and programs that promote a well educated and healthy community.” The preamble to the Town Charter states, “Hopkinton welcomes residents of all races, ethnicities, religions, abilities, gender identifications, and sexual orientations; the Town of Hopkinton, further, is committed to providing a climate of safety and acceptance to all residents. The Town of Hopkinton will actively address and resist acts of discrimination, bullying, or intimidation.”

This three-year plan represents HYFS’ commitment to moving the department forward in a strategic way in order to serve even more Hopkinton residents, more effectively. HYFS is cognizant that it will continue to change over the next three years in response to the dynamic needs of the community. In response, the department may modify or add strategies, tactics, or metrics to reflect each year’s priorities, but the goals will not change.

**The four pillars of the plan are high priority goals that provide a guiding framework for all the department’s work.**

- 1. Help to strengthen and clarify the network of services that acts as a safety net for vulnerable residents**
- 2. Provide primary prevention services to build a healthy community culture**
- 3. Increase community awareness of behavioral health issues, of HYFS mission and services, and of how to access help**
- 4. Develop effective and efficient funding, staffing, and processes**

A small staff - a Director and one part-time licensed counselor - provide all services with the support of one social work intern and community collaborators.

### III. History

The concept of a Youth Services department had its beginnings in a youth substance use reduction initiative called the beFREE! Project, funded by the Metrowest Health Foundation in the spring of 2005. When the grant ended in 2007, volunteers sustained Be Free! for an additional three years. The beFREE! coalition organized substance-free youth education and social activities, and worked successfully to enact a social norms marketing campaign directed at parents. To renew the momentum, beFREE! advocated for a paid position and garnered the support of the Youth Commission, which had similar concerns around youth mental health. Together, citizens made the case for a new town department with a staff person to coordinate community efforts. The Select Board responded and approved the hiring of a part time Youth Services Coordinator. The adult coalition of beFREE! eventually disbanded, leaving the youth group as a school run club.

Jean Vazza was appointed to the 19-hour coordinator role in August of 2010 and led the department for the first five years. Through her tenure, Jean brought behavioral health education programs to parents through forums and parent coffees, created a youth diversion program, provided prevention education for youth substance use, and served to deepen the collaboration between Youth Services and town departments and civic organizations. She responded to the Youth Commission's request to provide deeper supportive services by offering mental health screening programs and mental health and needs-based referrals. Jean and the Youth Commission worked together to establish collaborative goals and align the work of the Commission with the Youth Services office. In 2013, they wrote a new Youth Commission charge and presented it to the Select Board, which edited and ultimately accepted it.

In 2015, Denise Hildreth replaced Jean Vazza. Through the commitment of the Town Manager and Select Board the coordinator role was increased to a full time position. In that year, the department received a \$100,000 substance abuse prevention state earmark grant. The grant's goals were coalition building, prevention, and intervention/access to services. Denise rallied the community to begin a substance use prevention coalition, Hopkinton Organizing for Prevention (HOP), and was a co-founder of the regional Metrowest Substance Awareness and Prevention Alliance (MWSAPA) to grow collaborative prevention work across the region. In addition, a regional youth-led substance use prevention coalition, Metrowest Youth Teaming Together (MYTT), was funded by the MetroWest Health Foundation. Since its inception, HYFS has led the MYTT coalition.

Through Denise's leadership, the department thrived and began to emphasize more clinical services to families and the name was changed to Hopkinton Youth and Family Services to reflect the increasing scope of the department. Denise started the popular therapy dog program to make clinical services more accessible to all. Again, the Town Manager and Select Board responded to the growth needs of the department and approved an expansion. In 2017, a clinical social worker, Colleen Souza, was hired for 15 hours/week to support the department's initiatives and provide coordination to the MYTT coalition.

In 2019, Dawn Alcott Miller replaced Denise Hildreth. The current staff consists of a full-time Director and a 30 hours/week social worker, Colleen Souza. In addition to continuing its clinical support services, information and

referral, and needs-based assistance, the department has deepened its collaboration with many other town departments and community agencies to strengthen the safety net.

Until June 30, 2020, HYFS continued to use \$100,0000 in state earmark grant funding to support substance use prevention and community mental health; due to COVID, those funds will not be extended to future fiscal years. HYFS also continues to coordinate two local and regional prevention efforts, the HOP Coalition and MYTT, and to participate in MWSAPA.

In August of 2019, Hopkinton added the INTERFACE Referral Helpline as a town-wide contracted service. In 12 months, the helpline provided outpatient behavioral health referrals to 104 residents (70 children and 34 adults). The top reported issues were Anxiety (56), Depression (28), and Family Related Issues (16) and, notably, 9 callers reported current or recent Suicidal Ideation. In the fall of 2019, HYFS contracted with Bright Solutions Consulting to educate the HOP coalition in evidence-based prevention and to collect community data. HOP plans to use this knowledge to apply for the five-year federal Drug Free Communities grant in the spring of 2021. If approved, the coalition may apply for an additional five years of funding.

The emergence of COVID-19 in March, 2020 has added new challenges to the department's work. Now, nearly all services are provided online even as cases of anxiety and depression rise. HYFS staff are members of the Hopkinton Emergency Management Group (HEMG), the leadership team coordinating the town's response to COVID.

Over its ten-year history, HYFS has been a trusted and free resource for Hopkinton residents, one that has become more integrated into and depended upon by Hopkinton's service network.

#### IV. The Hopkinton Service Network

Hopkinton Youth and Family Services is an essential member of a community-wide network of service providers that includes town departments and boards (e.g., Schools, Police, Fire, Public Health, Library, Veteran's Services, Council on Aging), civic committees, (e.g., Freedom Team, Hopkinton Helpers), nonprofit community organizations (e.g., HOP Coalition, Project Just Because, Mommying is Hard), regional partners (e.g., MYTT, MWSAPA), and contracted services (INTERFACE, therapy dog services). This is a rather complex network that can be opaque to residents. The planning committee recognized that the best way to access services can be confusing, even for service providers, and that improvements could be made. Consequently, the first strategic goal concerns better coordination of the service net and clarification of HYFS' role within it.

This plan has been informed by the priorities and data shared by HYFS community partners outside the strategic planning process as well as data that the committee collected as part of the planning process. This data is shared in detail in the next section and in the appendices. Further, this plan connects to the Hopkinton School Improvement Plans which identified Social Emotional Learning as a priority. HYFS shares the school department's focus on the social development and well-being of youth and supports the schools in finding evidence-based tools and programs that meet youth behavioral health needs. For example, guidance counselors send families to HYFS for referrals to private therapists, rehabilitation programs, and emergency food or housing support.

Finally, HYFS collaborates with a volunteer Youth Commission composed of adult and youth community members who are appointed by the Board of Selectmen. The Youth Commission is charged with identifying the emerging needs of Hopkinton's youth and families and communicating them to HYFS. Among other activities, the Youth Commission organizes the annual Martin Luther King, Jr. celebration.

Over the past ten years, the relationship between the Youth Commission and HYFS has varied for several reasons. HYFS is a town department which primarily provides confidential services and the Youth Commission is a volunteer committee that primarily plans public events, yet their missions are similar. Residents can be unclear on the differences between the two organizations. Additionally, the two entities have seen multiple leadership and membership changes and it takes time to establish new relationships. HYFS and the Youth Commission value a strong and cohesive collaboration and work together on various community events, including Family Day, Police National Night Out and HOP 101.

HYFS understands that only community-wide solutions can solve community-wide problems. The department's collaborative approach to behavioral health builds on the strengths, skills, and enthusiasm of Hopkinton's network of service providers.

## V. Community Needs Assessment Data

In preparing this plan, HYFS conducted 34 stakeholder interviews and one youth focus group via Zoom. The summaries of these conversations are in Appendices A and B. HYFS also referenced the community needs highlighted in the Mass General Brigham Community Health Needs Assessment (CHNA)<sup>1</sup>, which was conducted during the COVID summer of 2020. Also in summer 2020, HYFS worked with HOP Coalition to complete a substance misuse survey.<sup>2</sup> Lastly, HYFS referenced the Mental Health Collaborative's 2019 parent survey (MHC)<sup>3</sup> and the 2018 MetroWest Health Foundation's MetroWest Adolescent Health Survey for Hopkinton High School (MWAHS).<sup>4</sup>

**COVID-19, which led to a statewide quarantine in March, 2020, has already had a profound impact on mental health.** By September 2020, Hopkinton had 140 Coronavirus cases and 13 deaths.<sup>5</sup> In the CHNA study, 49% of 180 MetroWest respondents placed COVID concerns first ahead of mental health (35%) and financial insecurity (33%). Participants cited COVID worsening existing mental health issues: depression, anxiety, trauma, isolation, and fear.

The HOP Coalition substance misuse survey highlighted **issues with drinking and the perception that others are drinking.** Of the 318 respondents (97% Hopkinton residents), 12% reported their drinking has increased during COVID, yet 61% think drinking has increased among MOST parents in Hopkinton. While the MWAHS survey showed a majority (57%) of Hopkinton youth have never used alcohol in their lifetime, 47% of parents believe that MOST Hopkinton youth drink alcohol. Research shows that parents who believe most parents have increased their drinking are more likely to follow suit; those who believe most children are drinking are more likely to allow their children to drink.

One of the most interesting findings of the Mental Health Collaborative study was the data about stigma. Of the 475 respondents, mostly white women ages 35-54, nearly a quarter (22%) said the **fear of being judged would prevent them from seeking mental health information and support.** Coincidentally or not, 23% described their mental health as fair or poor. A full 58% had accessed mental health services since being in Hopkinton (nearly all for individual counseling and 56% for medication support) and 68% were aware of Youth and Family Services.

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<sup>1</sup>Mass General Brigham 2020 PAC Community Health Needs Assessment, Westborough Service Area, for Mass General Brigham, prepared by Health Resources in Action, September 2020.

<sup>2</sup>Hopkinton Survey for Healthy Communities, for HOP Coalition, prepared by Bright Solutions Consulting, August 2020.

<sup>3</sup>Hopkinton Community Needs Assessment, for Mental Health Collaborative, prepared by Boston Research Group, October 2019.

<sup>4</sup>2018 MetroWest Adolescent Health Survey, Hopkinton High School, for MetroWest Health Foundation, prepared by Education Development Center, September 2018.

<sup>5</sup>Town of Hopkinton Coronavirus website. Accessed at: <https://coronavirus-hopkintonma.hub.arcgis.com/>



## ***V. Community Needs Assessment Data (cont.)***

The MWAHS data on Hopkinton, pre-COVID, are consistent with the planning committee’s interview and focus group reports and consistent with data from towns across the MetroWest region. HYFS recognizes the town has a problem, but the regional data show that it’s not a problem unique to Hopkinton.<sup>6</sup>

**Hopkinton youth are reporting high levels of anxiety, stress and other mental health issues followed by substance use and bullying.** In the 2018 study (the most recent available), 1060 Hopkinton High School students (91%) responded.

- 33% reported that their life was very stressful in the past 30 days
- School is the most common source of stress, reported by 71% of youth, followed by stress related to social issues (30%)
- 32% of students reported feeling nervous, anxious, or on edge on at least half the days in the past two weeks, and 24% reported feeling unable to stop or control worrying
- 32% of students reported depressive symptoms in the past 12 months and 12% reported that they had seriously considered suicide in the past 12 months
- LGBTQ youth and youth with disabilities reported elevated mental health problems compared to the general population. They are more likely to report depressive symptoms, self-injury, and suicidal ideation.
- 30% of youth have used electronic vaping products in their lifetime (up from 26% in 2016), 21% in the past 30 days (up from 11% in 2016). About half of the youth reported that marijuana is “fairly easy” or “very easy” to obtain.
- 24% of high school youth reported being bullied in the past 12 months, and 20% have been bullied on school property (a slight increase from 18% in 2016)
- LGBTQ youth and youth with disabilities are at elevated risk of being bullied at school compared to the general population
- The proportion of youth spending three or more hours online on an average school day has increased substantially from 2010 (28%) to 2018 (67%). Youth who spend three or more hours on social media daily are more likely to report cyberbullying victimization and perpetration, substance use and mental health problems.

As concerning as the MWAHS data is, COVID-19 has made things worse. The disease and the resulting quarantine have led to health and safety worries, financial insecurity, family tensions, and social isolation, among other stressors.<sup>7</sup> In addition, the current strains of racial injustice, political discord, and a fractured civil society have magnified the feelings of instability, anxiety, and fear. All of these conditions negatively affect behavioral health. The statistics may be dry, but there are real people behind the numbers, youth who are going to school in Hopkinton right now and families who are struggling to cope. HYFS is committed to helping as many Hopkinton residents as possible during this crisis, and beyond.

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<sup>6</sup>For comparative MWAHS data on area towns and the MetroWest region overall, see Appendix D

<sup>7</sup>Estimated COVID-19 Behavioral Health Outcomes: Research in Perspective to Inform Action to Mitigate Morbidity and Mortality, Massachusetts Association for Mental Health, June 2020. Accessed at: [https://www.mamh.org/assets/files/Final\\_COVID-19-Deaths-of-Despair\\_MAMH-062220.pdf](https://www.mamh.org/assets/files/Final_COVID-19-Deaths-of-Despair_MAMH-062220.pdf)

## VI. Guiding Principles

### MISSION:

To provide access to comprehensive social services for youth and families and to enhance behavioral health for the entire Hopkinton community

### VISION:

Hopkinton will be a town in which all people are valued, where behavioral health is a high priority, and residents have a place to turn when they need help

### VALUES:

We are:

- **Leaders in behavioral health** - Improving access to behavioral health services for youth and families through connecting them to services and providing clinical support to residents most in need
- **Champions of behavioral health prevention and education** - Reflecting that behavioral health concerns are HEALTH concerns and impact general wellness
- **Advocates for underserved residents** - Working to build a safety net for those who don't benefit from the socioeconomic status of the majority and recognizing that it is important to bridge the divide
- **Adaptable** - Continuing to provide service during uncertain times and responding to evolving community needs
- **Collaborative** - Working in partnership with residents, town departments, community agencies, and regional networks

We believe:

- It's OK to not be OK. Getting help is a sign of strength.
- Access to mental health care and substance abuse treatment and recovery should be easy to navigate, stigma-free, and open to all.
- If one of us is not OK, none of us are OK. When our most vulnerable residents are healthy, everyone else is healthy. Meeting basic needs is critical to good mental health.
- Vulnerability can reflect many different barriers in a resident's life (attitudes and beliefs about mental health and substance use, ability to identify and access resources, and systemic barriers that prevent equity in receiving care) and are not always visible on the surface.
- The whole environment around people affects their mental health and wellness. Broad and well-coordinated community supports can boost protective factors and reduce risk factors.



## VII. Strategic Goals

The Strategic Planning Committee has identified four goals that are essential to HYFS' long-term success. These goals are interdependent and connected.

1. **Help to strengthen and clarify the network of services that acts as a safety net for vulnerable residents**
2. **Provide primary prevention services to build a healthy community culture**
3. **Increase community awareness of behavioral health issues, of HYFS' mission and services, and of how to access help**
4. **Develop effective and efficient funding, staffing, and processes**

## VIII. Critical Strategic Issues

As part of the strategic planning process, HYFS conducted an internal SWOT analysis (Strengths, Weaknesses, Opportunities, and Threats), individual phone interviews with 34 community stakeholders, an online community survey of 318 residents, and one focus group with teens. That process identified several strategic issues:

1. **HYFS can not succeed by itself.** Collaboration and community-wide efforts are crucial to increase preventative efforts, de-stigmatize seeking help, and ensure that resources are available when needed
2. **Community members are not entirely clear on HYFS' purpose and how to access its services.** Underserved or/and skeptical audiences require especially clear communication.
3. **It is challenging to be different in Hopkinton.** Special attention needs to be given to accessing racial minorities, LGBTQ youth, English language learners, low income residents, and any residents who are less likely to seek services.
4. **With its current resources, HYFS will be unable to meet community demands;** its staffing, systems and infrastructure must be as effective and efficient as possible
5. **COVID-19 has created a critical situation, with pressure building in every aspect of community life.** Residents are experiencing heightened levels of stress, anxiety, fear, depression, trauma, and substance use. Adults who are acting from anger and fear will in turn influence youth behavior, leading to more demands for HYFS services.

HYFS has been providing comprehensive social and clinical services to residents since 2010. The staff have helped hundreds of town residents each year with private counseling and referral services that are unique in the town and complementary to other available services. The town's significant growth and the call to be involved in multiple initiatives have led to demands that can leave the staff working long hours and feeling overextended. The small staff needs to find ways to service more people, more effectively and efficiently, particularly given the demands of Covid-19. This plan guides and focuses the department in responding to the town's critical needs.

### **VIII. Critical Strategic Issues (cont.)**

Data show that the need is greater than the number of people seeking help. One reason is that the nature of mental health work is confidential and many residents have not been aware of the department's services or that they can take advantage of them. A related reason is that some Hopkinton residents feel uncomfortable accessing mental health services through the town - and in the town hall - worrying about stigma and a loss of confidentiality. It is clear that informing the community - especially those most likely not to seek services on their own - must be a high priority.

Like many towns in MetroWest, Hopkinton is a community undergoing rapid change. Of all towns in Massachusetts, Hopkinton had the largest percentage change in population from 2013-2017 (12.1%).<sup>8</sup> Over just the last four years, the school population increased by 409 students (from 3453 to 3862). In 2019-20, the White, non-Hispanic school-age population was 70.8%, the Asian population was 20.6%, the Hispanic or Latino population was 3.9%, the Black, non-Hispanic population was .8% and the multi-racial population was 3.7%. Since 2010, the population of South Asian students has increased by over 17 points (3.3% to 20.6%). Also since 2010, the number of English Language Learners have increased by 5.4 points (.8% to 6.2%) and students whose first language is not English increased by 11.6 points (1.8% to 13.4%). Students determined to have "high needs" have increased by 7.7 points (16.5% to 24.2%)<sup>9</sup>

These rapid changes have led to tensions. In the wake of the George Floyd murder, Hopkinton High School students and alumni created two Instagram accounts called "BIPOC at Hopkinton" and "MeToo Hopkinton." The testimonials are disturbing. Anonymous posts detail intolerant, discriminatory, racist, sexist, and aggressive acts and assaults from peers, faculty, staff, and other residents. The youth focus group and many of the interview respondents agreed to the statement, "it is difficult to be different in Hopkinton." One adult community member described the climate as "us vs. them-ish," saying "it has been a strain on kids, making everybody a little crazy."

HYFS is fully committed to anti-racism, equity, social justice, and meeting the needs of all Hopkinton residents. This plan makes it a strategic priority to reach out to residents who are less likely to seek services because of economic, racial, ethnic, linguistic or social barriers. Accordingly, when providing direct clinical services (counseling from HYFS staff) HYFS prioritizes serving those who find it hardest to access mental health and substance abuse services. These residents may be uninsured, underinsured, responsible for numerous co-pays that make an added service unaffordable, or have trouble physically traveling to a doctor. In delivering all HYFS services – clinical, case support, information, referrals, and prevention – the department recognizes that reaching the most underserved residents requires sustained effort and collaboration with partners who are trusted by those residents. These partners may be new to the department and require extra effort to collaborate with, but HYFS is committed to doing that work.

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<sup>8</sup>Community Mental Health Assessment, Metrowest Region, MA, Health Resources in Action, 2019.

<sup>9</sup>Mass Department of Education School and District Profiles. Accessed at:  
<http://profiles.doe.mass.edu/profiles/student.aspx?orgcode=01390000&orgtypecode=5&leftNavId=300&>

### **VIII. Critical Strategic Issues (cont.)**

The department's main focus will be to provide behavioral health services including clinical counseling, referrals, and case management. Direct clinical services will be prioritized for residents who can not afford to pay for private therapy. The department will also work to provide behavioral health workshops and support groups and to strengthen the community service network.

Any and all HYFS programming will take into consideration that community members have varying levels of readiness to address behavioral health. The department will offer a range of approachable and relevant programs: those that informally introduce the department and behavioral health issues to youth and caregivers who might normally not engage in programs, training programs that take behavioral health education to a higher level, and specially tailored workshops that help those with different learning needs more deeply explore a topic.

In regard to community events, the department staff will be selective in hosting and/or attending only those events that support the department's strategic goals, and may act as an advisor and in some cases a funder to support partnering organizations. The department will rely heavily on a new community ambassadors program to represent the department at community events when staff are unavailable to attend.

In order to accomplish these goals, the plan calls for a new full-time social worker/program coordinator position and a part-time administrative coordinator. Prevention-focused staffing will also be needed. At the appropriate time, HYFS will make a data-driven case for new staff. The department envisions four sources of funding and in-kind resources:

- Town of Hopkinton annual budget allocation
- Grants from state and federal government and private foundations, particularly for prevention work
- Partnerships with other community organizations in Hopkinton
- Regional efforts with Youth & Family Service departments in other towns and other area partners

All of these critical strategic issues have informed this plan's identification of the four strategic goals introduced in Section VII and outlined in detail in the following section.

## IX. Goals Language

### 1. Help to Strengthen and Clarify the Network of Services that Acts as a Safety Net for Vulnerable Residents

- Work to define HYFS' roles and responsibilities within the existing and growing network of services
  - Distinguish the role of Youth and Family Services from that of the Youth Commission while working with them to coordinate programming on an annual basis
  - Guide town departments and community agencies/organizations in how and when to ask for specific help
  - Contract with outside agencies to fill gaps in service provision/provide specialty care
- Provide case management, counseling services, consultation, information and referrals to residents most in need
  - Refer residents in need of therapeutic services to private and/or other community providers
  - Prioritize direct counseling services by HYFS for those who are uninsured, underinsured or those with extenuating circumstances
  - Grow culturally sensitive approaches to care, particularly for those who require interpretation assistance and/or who do not come from the dominant culture in Hopkinton
  - Grow sensitive approaches to care, particularly for those most vulnerable (e.g., the LGBTQIA+ population, the elderly, teens, etc.)
- Provide assistance with connecting to financial and other emergency assistance, especially during and after COVID
  - Collaborate with community organizations that provide needs-based assistance
  - Support the establishment of a Hopkinton COVID Neighbor Fund

### 2. Provide Primary Prevention Services to Build a Healthy Community Culture

- Prepare for expanded delivery of prevention services by strengthening the HOP Coalition
  - Utilize consultant, Bright Solutions, to assess and prepare coalition for expanded service delivery
  - Design a primary prevention program, including action plan, new bylaws and coalition structure, inclusion of new members, and community engagement
    - Launch a positive community norms campaign, emphasizing the positive trends in the community
- Expand delivery of prevention services
  - Apply for state and federal prevention grants
  - Hire a full-time prevention coordinator with grant funding
  - Deepen the collaboration among town departments and organizations
  - Engage the HOP Coalition in decision making relative to budget, programming, and action plan while writing and implementing the grant

## IX. Goals Language (cont.)

### 2. Provide Primary Prevention Services to Build a Healthy Community Culture (cont.)

- Represent HYFS role in the community at prevention organizations including HOP Coalition, MetroWest Youth Teaming Together (MYTT), MetroWest Substance Abuse Awareness & Prevention Alliance (MWSAPA), and other area Youth and Family Service/Human Service departments
  - Engage HYFS partners in regional coordination of MYTT
  - Partner in new projects where appropriate and manageable
  - Contribute to agenda with examples of HYFS prevention work/coalition activities
- Cultivate a broader community appreciation of the importance of prevention services
  - Organize annual community stakeholder meetings
  - Launch a social norms marketing campaign based on local substance use data
  - Hold community workshops on relevant topics
  - Implement action plan based on grant(s) received

### 3. Increase Community Awareness of Behavioral Health Issues, of HYFS' Mission and Services, and of How to Access Help

- Develop and implement an outreach, communications and engagement strategy to promote and raise awareness about HYFS resources
  - Enhance social media presence, esp. to reach younger clients
  - Advocate for new communications staff hire to be shared by other departments
  - Advocate for HYFS' ability to utilize a more user-friendly website platform, similar to Public Health's site
- Prioritize outreach to underserved populations
  - Open deeper communication with English Learner Parent Advisory Council (ELPAC), Special Education Parent Advisory Council (SEPAC), South Asian Circle of Hopkinton (SACH), BIPOC youth, the LGBTQ community via MetroWest OUT, and additional community collaborators
  - Research and consider purchasing translation services for HYFS materials, and possibly for town-wide use
- Work with community partners to provide training workshops, events, and other programs to enhance knowledge and reduce mental health stigma
  - Offer training about signs, symptoms and coping strategies related to COVID-19 and trauma related to current events
  - Offer training on general mental health topics, including signs of anxiety and depression, substance abuse prevention, suicide prevention, marriage and family counseling, etc.
  - Build HYFS Ambassador program
    - Train residents in mental health, suicide prevention efforts
    - Increase awareness of issues in order to strengthen informal support, referrals



#### 4. Develop Effective and Efficient Staffing, Funding, and Processes

- Make the case for increased department staffing AND contracted services for specific needs
  - Make a data-driven case, citing research on trends and predicting overall costs
  - Advocate for a new full-time social worker/program coordinator position (#1 priority), .25 administrative coordinator (#2), and prevention staffing (#3 with grant funding). Priorities may change in response to community needs
- Support and develop existing staff
  - Continue to attract, develop, and maintain well-qualified and well trained staff
  - Develop comprehensive staff development and succession plans
  - Encourage employee recognition
  - Utilize Ambassadors, including Youth Commission members, to help articulate and advocate for the department's value
- Reduce the burden on the taxpayer by applying for grants, when and only when the funding supports the department goals
  - Clarify trade-off between public funding and grant funding
  - Work closely with Grants and Procurement Director, Town of Hopkinton once this position is filled
- Plan for long-term improvements
  - Find more private space with waiting area, three offices and a meeting space within walking distance of schools, e.g., Center School
  - Ensure employees have a healthy, safe, and secure workplace and appropriate equipment to perform their work at a high level in the office and remotely
- Increase regulation compliance
  - Purchase online record-keeping service for teletherapy and home visits, treatment plans, etc.
  - Stay current with professional development requirements
- Develop Standard Operating Procedures for the department
  - Develop a handbook for the department's best practices, including efficiencies, staff job descriptions, new staff needs
  - Purchase the documentation system and telehealth platforms that meet department's needs
    - Update all documentation systems in compliance with new platform
    - Make community aware of new platform for telehealth and how to access it

## **X. The Strategic Planning Committee**

In order to create this plan, HYFS formed a diverse committee of HYFS staff members, town employees, and community members. The intention was for the planning committee to meet for eight sessions but the demands of COVID-19, including quarantine restrictions, forced us to revise the process. The planning work was divided into three phases, conducted virtually: initial planning with the HYFS staff, data collection including stakeholder interviews and a focus group, discussion of strategies and priorities with the planning committee (two meetings in August 2020), and finishing the plan with the HYFS staff. The entire process took seven months. With support from the Town of Hopkinton, Ann Budner of ABudner Strategy Consulting was hired to facilitate the planning process.

HYFS is very grateful to the following committee members who donated their time, expertise, and insights to this process.

**Amy Beck**, Hopkinton Senior Center

**Joseph Bennett**, Police Chief, Town of Hopkinton

**Jennifer Cuker**, Director of English Language Acquisition, Equity and Access, HPS

**Christina Hannigan**, Mommying is Hard

**Shaun McCauliffe**, Public Health Director, Town of Hopkinton

**Stephen Slaman**, Fire Chief, Town of Hopkinton

**Dawn Alcott Smith**, HYFS Director

**Colleen Souza**, HYFS Social Worker

## **XI. Stakeholder Interviews, Focus Groups, and Reviewers**

The strategic planning process offered four opportunities for community members to participate: planning committee, individual interviews, focus groups, and reviewing the draft plan. The HYFS planning committee is grateful to the 34 community stakeholders who agreed to be interviewed for the needs assessment. The committee also appreciates the seven teens who shared their opinions so candidly in the youth focus group. Their names are not listed in order to protect confidentiality.

<b>Toni Alexander</b> , community member	<b>Alan Keller</b> , Principal, Hopkinton Middle School
<b>Agha Mehdi Ali</b> , Islamic Masumeen Center of NE	<b>Shazain Khan</b> , HHS senior
<b>Amy Beck</b> , Hopkinton Senior Center Director	<b>Norman Khumalo</b> , Town Manager
<b>Jess Beck</b> , young adult, college student	<b>Tim Kilduff</b> , Hopkinton Chamber of Commerce
<b>Brigid Belger</b> , young adult, college student	<b>Elaine Lazarus</b> , Assistant Town Manager
<b>Joseph Bennett</b> , Police Chief	<b>Deb Lysik</b> , St. John's Parish/St. Vincent DePaul
<b>Vanessa Bilello</b> , Principal, Hopkins Elementary	<b>Irfan Nasrullah</b> , Select Board Member
<b>Evan Bishop</b> , Principal, Hopkinton High School (HHS)	<b>Jocelyn Peirce</b> , Faith Community Church
<b>Anne Carver</b> , Principal, Elmwood Elementary	<b>Phil Powers</b> , School Resource Officer, HHS
<b>Carol Cavanaugh</b> , Superintendent of Schools	<b>Charusmitha Ram</b> , South Asian Circle of Hopkinton (SACH)
<b>Renee Coopriider</b> , young adult, graduate student	<b>Abby Rosenberg</b> , Mental Health Collaborative
<b>Rich Cormier</b> , Athletic Director, HHS	<b>Stephen Slaman</b> , Fire Chief, Emergency Management Dir.
<b>Lauren Dubeau</b> , Principal, Marathon Elementary	<b>Kim Sullivan</b> , Coordinator, Hopkinton Preschool
<b>Cheryl Elder</b> , School Counselor, HHS	<b>Brendan Tedstone</b> , Select Board Chair
<b>Amanda Fargiano</b> , HOP Coalition	<b>Valerie von Rosenvinge</b> , HHS Drama & Speech, GSA Advisor
<b>Rachel Gurevitz</b> , Rabbi, Temple B'nai Shalom	<b>heryl Ann Cheryl Ann Walsh</b> , President, Project Just Beaus
<b>Christina Hannigan</b> , Mommying is Hard	<b>Sarah Watson</b> , Vineyard Church

Finally, HYFS thanks these community members who volunteered to review and provide feedback on the nearly final draft of the plan.

**Toni Alexander**, community member  
**Tracey Ferencsik**, Youth Commission member  
**Norman Khumalo**, Hopkinton Town Manager  
**Valerie von Rosenvinge**, HHS Drama & Speech Teacher, GSA Advisor

## **XII. For More Information**

If you or a loved one are in need of mental health support or referrals to other community resources, please don't hesitate to contact us.

Dawn Alcott Miller  
Director

Colleen Souza  
Social Worker

Hopkinton Youth & Family Services  
18 Main Street  
Hopkinton, MA 01748  
Phone: 508-497-9700  
dalcott@hopkintonma.gov  
[https://www.hopkintonma.gov/residents/youth\\_and\\_family\\_services.php](https://www.hopkintonma.gov/residents/youth_and_family_services.php)

If you would like more information about our strategic planning process, please contact:

Ann Budner  
ABudner Strategy Consulting  
[www.budnerstrategy.com](http://www.budnerstrategy.com)  
[ann@budnerstrategy.com](mailto:ann@budnerstrategy.com)

# XIII. APPENDIX

## Appendix A: Stakeholder Interview Summary

### Hopkinton Youth and Family Services

#### *Stakeholder Interviews*

#### *Executive Summary*

### Background

In March 2020, the Hopkinton Youth and Family Services (HYFS) staff - Dawn Alcott Miller and Colleen Souza - began a strategic planning process with Ann Budner, consultant. The group reviewed the history of the department and past planning efforts, and then finalized HYFS' guiding principles – its mission, vision, and values. At that point, COVID-19 arrived and the committee pivoted to virtual meetings.

In order to assess the community's understanding and expectations of HYFS, the team conducted phone and virtual interviews of key community stakeholders in June and July. The interviewers were Renee Coopridier (graduate MSW student), Jess Beck (undergraduate politics student) and Brigid Belger (undergraduate BSW student), and Shazain Khan (2020 Hopkinton HS graduate). Ann Budner also conducted three interviews. The purpose of the interviews was to gauge community awareness of and support for the department, to gather feedback on the department's strengths and weaknesses, and to understand community perceptions and priorities around substance use and mental health.

Potential respondents were identified who represented various aspects of the community: town and school employees; public officials; and business, nonprofit, civic and faith leaders, including leaders in the Southeast Asian community. Of the 39 people invited, 34 people agreed to be interviewed. 19 were residents and 15 were not. The average length of time working or volunteering in Hopkinton was 15.3 years. Of the residents, the average length of time living in Hopkinton was nearly 27 years.

### Major Findings

#### **1. Strong Community Support, with Some Reservations**

HYFS has the benefit of a lot of community good will. Even those who were less familiar with HYFS were supportive of its services. Both the former and the current staff are well respected for their hard work and the help they have provided.

They always step up and help out the community in times of crisis. All people...at HYFS have been passionate and good at what they do.

While admitting the community benefit, some questioned the financial value.

As a client, they exceeded my expectations. As a community member, I'm not sure why they would need more funding if they asked for it, because it is still vague what they do specifically.

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*\* Comments in italics are recommendations/observations of consultant, not of HYFS*

## **Appendix A: Stakeholder Interview Summary (cont.)**

The community is still having a live conversation about whether it is appropriate for the government to provide mental health services. They ask, 'With affordable care, why is HYFS needed?'

The top recommendation from respondents was for HYFS to increase its visibility. Some noticed that similar organizations are at work in the community and called for greater collaboration.

*HYFS has strong support on which to build, but could benefit greatly from making a stronger case for its value. This task is made more challenging by the fact that other organizations in town address mental health, substance and/or food insecurity issues in different ways. Clarity of purpose is essential to HYFS' success.\**

### **2. HYFS' Purpose - A Vague Understanding or the Perception of Vast Scope**

Many respondents were vague about the purpose of HYFS, saying "it helps youth and families" or "provides support to the members of the community." Others were even foggier, saying, "I didn't even know there was one" or "I think they are there to provide free services to town residents." Several other respondents saw virtually no limits to HYFS' scope:

To help all sectors of the community with any kind of needs whether it be general health, mental health, care, or service access.

The clearest tended to be those who had direct interaction with the department.

In a nutshell, I think that they provide essential life service support for mostly families with kids. If you get into a crunch with housing or food or you're in a mental health crisis, they are there to refer you to a path to get help as well as providing support.

*HYFS should clarify its own purpose and then communicate that more clearly. The community needs to understand the scope and nature of HYFS' services, particularly how to access them, who may take advantage of them, and an assurance that they are completely confidential.\**

### **3. Biggest Stressors are Mental Health, Substance Abuse, COVID, and Performance Pressure**

As might be expected, the most commonly cited stressors were mental health, substance abuse, and COVID. Another theme was the pressure to perform and a reluctance to admit that there is anything wrong. Three respondents explained,

Parents feel pressure to achieve at a certain level, and kids feel like they have to meet those expectations, and then everyone feels stressed with time and pressure all of the time.

Hopkinton is an affluent community. Keeping up with the Jones-es. If you don't, you're isolated from social things. 'We don't hang around with that family because...you know.' There is strange competition about the things your kids do.

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\* *Comments in italics are recommendations/observations of consultant, not of HYFS*

## **Appendix A: Stakeholder Interview Summary (cont.)**

They feel like it is an embarrassment to their families and do not seek out help.... Hopkinton sees things as personal, private, confidential, and is a 'bedroom community,' meaning they don't let their neighbors know something is wrong.

One respondent observed that the stigma around seeking help limits access to resources.

There is a taboo in South Asian cultures against mental health so as a result, it becomes an uncomfortable conversation. There is not enough awareness as well, sometimes people don't even know they suffer from a mental health problem (essentially undiagnosed mental health until things get very severe, which is when people typically seek out for help, but then people don't know who to reach out to).

*HYFS can address these issues but not in isolation. Collaboration and community-wide efforts will be crucial.\**

### **4. Mental Health and Substance Abuse Concerns and How to Respond**

The most commonly mentioned mental health concerns were anxiety and depression. Additional concerns were: eating disorders, trauma, bullying and stigma, domestic abuse, and isolation and loneliness (especially among the elderly).

Nearly all respondents agreed that if their child were clearly depressed, they would first talk to the child and then seek professional help. Resources included: pediatricians, guidance counselors and other school employees, therapists, and HYFS. One person explained that this is a challenging situation because children will deny they are depressed and the parents avoid seeking help for fear of shaming the child or the family. In this case, intervention with other peers can sometimes work.

The substance abuse concerns cited most often were vaping, marijuana, and drinking. Several people mentioned how easy it is to get drugs and observed that there is almost no stigma to it. Hard drugs are also present in town.

We are not naive; we have a heroin problem in our community. We have used Narcan a lot. We have seen a shift to methamphetamine in the community so that is a concern.

The responses to a child with a substance abuse issue were similar to the mental health scenario, but people were more reflective about what they would say. Some thought a direct "catch them in the act" approach was best while others would take a more inquisitive approach. One community member would explore the reasons behind the abuse.

I think that it all starts in their self and in their identity and their ability to make their own choices- will drinking make you popular?....How can we gain value in relationships and investing in good quality friendships, because drug abuse is tied to this so strongly....we need to empower children to make their social life satisfying on their own terms.

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*\* Comments in italics are recommendations/observations of consultant, not of HYFS*



## **Appendix A: Stakeholder Interview Summary (cont.)**

The open-ended question, “What are your thoughts on youth alcohol use?” generated a wide variety of responses and lengthy comments. Some described it as abnormal, illegal, or immoral. Others felt that more lenient standards (as in Europe) de-glamorize drinking and accepted parents who allow controlled drinking at home for their own children. Still others lamented what they saw as a drinking and party culture in Hopkinton in which parents are enabling and encouraging youth alcohol use. When asked if they would allow youth drinking in their own home, 8 responded “Yes,” 20 responded “No,” and 6 responded “I’m not sure.”

*Each family has different triggers for when they will seek help. The challenge for HYFS and the community overall is to destigmatize seeking help and ensure that resources are readily available. Parents and caring adults may also need guidance in how to talk to children about these issues.\**

### **5. It is Hard to be Different in Hopkinton**

Most respondents expressed that Hopkinton can be a challenging place for people who are different. Differences mentioned were economic, ethnic, racial, linguistic, religious, gender and sexuality. The rapid demographic changes have led to particular tension as the Southeast Asian population in the schools has increased by 500 in the last four years.

I get a sense that people feel like they lack a sense of belonging, that our town is cliquy and not welcoming. I see things on Facebook and posts, without people even getting out and talking to their neighbors. Recently I have seen acts of racism and homophobia and I think a lot needs to be done.

Hopkinton is figuring out how to respond to this new diversity. One respondent of color has found the community “embracing” while another said it sometimes feels that “things are different for her and her son.” White respondents admitted they don’t know as much as they could about the experience of people of color in town. The student Instagram account “BIPOC at Hopkinton” (Black, Indigenous, People of Color) has been an eye-opener. One respondent described it as “beautiful, very respectful, but horrifying to look at and embarrassing to my institution.”

Hopkinton is definitely more of a beginner, and I don’t think there has been a leading edge with regards to creating a diverse learning environment. The majority outlook seems to be the small-town mentality where everyone knows each other, which may negatively affect the minorities.

When asked how to make Hopkinton more caring, people had a lot to say. Answers included: more diversity in town employees, translated materials, revised department and school policies, training programs, widely accessible resources, and more collaboration, communication, respect, and patience with each other.

It’s a community conversation more than a school conversation. When we come together it shows a strong united force in making progress.... Need to bring people with opposing views into the conversation, not just one type of person/group.

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\* *Comments in italics are recommendations/observations of consultant, not of HYFS*

## **Appendix A: Stakeholder Interview Summary (cont.)**

What it takes is for people of all communities to reach out to the other communities....I think we are cultivating a really exclusive bubble here where outside observers may wonder why these people are so exclusive and secretive, and prejudice and bias can stem from that. I've been encouraging people to get to know their neighbors.

*Anti-bias work is both vital and challenging, and it is an issue in many (if not all) towns and cities across the state and the country. Prejudice can be very hard to see, especially for the white majority. HYFS should continue to work to make its own department more welcoming and inclusive and continue to assist the community in doing the same.\**

### **6. Service Accessibility is Good but Could be Improved**

Respondents were almost evenly divided on whether HYFS would be the first place they would turn if someone they cared about needed help ("Yes" = 16, "No" = 14, "I'm not sure" = 4). Other resources were: physicians, school therapists and other staff, private therapists, other trusted adults, and community organizations.

Those who had collaborated with HYFS praised its services. Some said they wished they could collaborate more often with HYFS or that the collaboration could be improved. A community agency director would like to see more referrals between the two programs.

The strongest recommendations for increasing access were: 1) increase visibility, and 2) assure confidentiality. Several people mentioned that the website could be more user-friendly and one suggested a communications plan. Equally important in increasing utilization is assuring residents that the services are entirely confidential. Some suggested that HFYS' location at the town hall is too public.

I would tell the residents how to contact them, what services they offer, give examples of how someone might be depressed and say how they would help that. So, clearly lay out their services and specify the confidentiality and how exactly it takes place.

*HYFS is a "hidden gem" in Hopkinton. It can improve its service delivery by finding creative opportunities to publicize its services , including to diverse audiences. But more visibility will bring more clients, and balancing unlimited need with limited capacity is tough. As part of its strategic planning process, HYFS must decide how to allocate its limited resources and how best to prioritize the community's requests for 1:1 services, prevention, advocacy, and community building.\**

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\* Comments in italics are recommendations/observations of consultant, not of HYFS

## **Appendix A: Stakeholder Interview Summary (cont.)**

### **Stakeholders Interviewed**

Ali	Agha Mehdi	Islamic Masumeen Center
Toni	Alexander	Community member
Amy	Beck	Hopkinton Senior Center
Jessica	Beck	HYFS intern, BSW student, Hopkinton resident, HHS graduate
Brigid	Belger	HYFS intern, BSW student, Hopkinton resident, HHS graduate
Joseph	Bennett	Chief of Police
Vanessa	Bilello	Hopkins School, Principal
Evan	Bishop	Hopkinton HS, Principal
Anne	Carver	Elmwood School, Principal
Carol	Cavanaugh	Superintendent of Schools
Renee	Coopriider	HYFS intern, MSW student, Hopkinton resident, HHS graduate
Rich	Cormier	HPS Athletic Director
Lauren	Dubeau	Center School, Principal
Cheryl	Elder	HHS Guidance Counselor
Amanda	Fargiano	Hopkinton Coalition
Rachel	Gurevitz	B'nai Shalom Temple, Westborough, Rabbi
Christina	Hannigan	Mommying is Hard
Alan	Keller	Hopkinton HS, Principal
Shazain	Khan	HYFS intern, HHS graduate
Norman	Khumalo	Hopkinton Town Manager
Tim	Kilduff	Hopkinton Chamber of Commerce, Marathon Committee
Elaine	Lazarus	Assistant Town Manager
Deb	Lysik	St. John's Parish
Irfan	Nasrullah	Select Board, Vice Chair
Jocelyn	Pierce	Faith Community Church
Phillip	Powers	School Resource Officer
Charusmitha	Ram	SACH – South Asian Circle of Hopkinton
Abbie	Rosenberg	Mental Health Collaborative
Valerie	Von Roseninge	Hopkinton HS Drama Director, Gay Straight Alliance advisor
Stephen	Slaman	Fire Chief
Kim	Sullivan	Hopkinton Preschool
Brendan	Tedstone	Select Board, Chair
Cherylann	Walsh	Project Just Because
Sarah	Watson	Vineyard Church

Thank you to the following stakeholders for their consideration, even though they were unavailable to participate in the interviews: Dawn Ronan (Youth Commission), Samantha Prescott (The Spoon), Oui Tran (Pan Thai), Beth Torah Synagogue (Westborough), Gurdwara Sahib (Westborough), Sri Lakshmi Temple (Ashland).

## Appendix B. Youth Focus Group Summary

On August 5, 2020 a youth focus group was held via Zoom with Renee Coopriider facilitating and Shazain Khan scribing the session. Seven youth participated. Most were students of color and currently enrolled at or recently graduated from Hopkinton High. They responded to 19 questions in a roughly 90-minute meeting.

### Major Findings

#### 1. Most Important Mental Health Issues

- The youth identified **depression** and **anxiety** as two of the most important mental health issues in Hopkinton, stemming from academic pressure, social stress, and what one student described as the “toxic culture”. Other mental health issues included eating disorders and a lack of addressing the impact of individuals’ traumatic experiences.
- Several factors negatively impact youth’s overall wellbeing including the **pressure to meet unattainably high expectations**, the **pervasive competitiveness** that spans “from academics to social situations to sports to everything”, the power of social media to create a **sense of isolation**, the **unwillingness to talk about mental health**, the **lack of diverse school staff** for BIPOC students to relate to, and the **discounting of others’ experiences**. In regard to the last point, one student said, “toxic masculinity is very present.”
- Factors that positively impact one’s overall wellbeing include the many different opportunities Hopkinton provides to allow students to meet new people, the small sense of community which can make you feel known and cared for, having a really good friend group, and having trusted adults and mentors to talk to.

#### 2. Most Important Substance Abuse Issues

- The youth identified **vaping and drinking alcohol as the most prevalent substance use issues**. The youth explained how school bathrooms show signs and smells of vaping and marijuana use, performance enhancing drugs such as Adderall are occasionally used, and alcohol use is “very social and at almost every party”.
- The main reasons teens use substances are to alleviate stress, fit in with their peers and social hierarchies, and curiosity. Factors that prevent teens from using substances include positive peer pressure, hearing others’ stories, substance education, personal commitment, religion, and older mentors.

#### 3. Barriers to Seeking Help

- Barriers include **lack of acknowledgement** surrounding these issues within households (perhaps due to tradition, culture, or religion), **lack of knowledge** of where to go for help, and a **discomfort in reaching out** due to the stigma or a lack of trusted and relate-able adults including guidance counselors.

- Recommendations included an anonymous chat log/text mental health service, BIPOC guidance counselors, and accessible, low-cost, confidential counseling possibly with trained peers

#### ***Appendix B. Youth Focus Group Summary (cont.)***

#### **4. Improving the Hopkinton Community**

- The youth would like to see a lot of changes within the community. Their grievances include the lack of places to go, a homogeneous white school staff and curriculum, the pervasive and insulting joke culture among peers, the unaddressed micro aggressions against BIPOC individuals, the lack of conversations surrounding these sensitive and important issues, and the relative silence within the town regarding social injustices.
- Ideas included more restaurants, more events in public spaces including the parks and common, and events that showcase minority experiences

#### **5. Safety and Being Different in Hopkinton**

- The youth shared that racism and discrimination, which is usually not overt but prevalent under the surface, reduce feelings of safety. Additionally, while the presence of police officers and resource officers create a sense of safety for most, this is not the case for all.
- The youth agreed that while it may not be outwardly apparent, it is definitely difficult to be different in Hopkinton. The subtle discriminations, judgements, and jokes are not addressed as issues and speaking up for yourself or those who are different often leads to further ridicule. Stereotypes run deep and there is a lack of mutual dialogue and respect.

## Appendix C. Hopkinton Survey for Healthy Communities - August 2020

### Parent Verbatims

In summer 2020, HYFS contracted with Bright Solutions Consulting to collect community data about substance use and misuse. The online survey was distributed to parents through the school district listserv. Of 318 total responses (97% Hopkinton residents), 82 answered the final question, "Is there anything else you would like HYFS to know?"

### Major Findings

#### 1. Community Issues Mentioned

Several respondents mentioned concerns with irresponsible drinking and substance use, easy access to marijuana, academic stress, and peer pressure. Additional concerns included Covid and social media and their negative effects on children and their development. While some described an intolerant and exclusionary culture in the school system and the larger community, others disagreed.

*There is a deep-rooted "joke culture" in the school systems which perpetuates racism and discrimination and forces minorities to sit by and deal with it because they face social repercussions for speaking out. We need to work on dismantling that sort of toxicity.*

*It's a great town that respects diversity.*

#### 2. Outreach Needed

Several respondents encouraged HYFS to increase its visibility by distributing easily accessible information about available services and insurance coverage. Others urged HYFS to relieve the stigma of seeking mental health services.

*Many [kids] won't seek help [for substance use] because they are afraid of getting in trouble. Kids don't say anything [about others who smoke and drink] to avoid being a pariah. Parents are afraid of what others in town will think if they seek help.*

#### 3. Mental Health Services and Education Needed

Multiple parents felt that teens needed more support around mental health. Several suggested a peer support program, outside of school. Several others spoke from experience, lamenting the difficulty and wait time in finding good mental health professionals. Others suggested educational programming for parents, e.g., teen concerns and resources and talking to kids about racism.

## Appendix D: Comparative MWAHS Data

The Hopkinton MWAHS data, while troubling, are consistent with and in some cases are better than other towns and the MetroWest average.

The schools take this data very seriously, but they are not the only stakeholders who are working to address these issues. Behavioral health is a community responsibility. To access social emotional resources for Hopkinton High students and families, click here: <https://sites.google.com/view/hhs-counseling-resources/home?authuser=1>

### MetroWest Adolescent Health Survey 2018 Comparative High School Results

	Percentage of Respondents, Grades 9-12						
	MetroWest	Hopkinton	Ashland	Medfield*	Needham	Wayland**	Westborough
<b>Marijuana Easy to Get</b>	64	51	66		61.5	69	59
<b>Current Marijuana Use</b>	21	14	22	26	20	19	18
<b>Lifetime Vaping</b>	41	30	44		35	36	32
<b>Current Vaping</b>	28	21	34	36	23	24	24
<b>Bullying Victim</b>	22	24	26	25	15	21	23
<b>Bullying Victim at School</b>	19	20	23		11	17	19
<b>Life is "Very Stressful"</b>	36	33	35	41	32	39	34
<b>#1 Stress Source - School</b>	66	71	69		66	69	65
<b>#2 Stress Source - Social Issues</b>	33	30	37		30	26	33
<b>Nervous, anxious</b>	35	32	34		33.4	33.1	33
<b>Can't stop worrying</b>	27	24	28		23.4	23.1	28
<b>Depressive Symptoms</b>	20	16	21	15	13	11	20
<b>Seriously Considered Suicide</b>	13	12	13	9	9	9	16
<b>3 Hours or More per Day Online</b>	65	67	65		64	66	65

Notes:

\*Medfield - excerpted data only

\*\*Wayland - #2 stress source tied with Appearance

Data unavailable for Medway, Milford, Northborough, Southborough

References:

MetroWest Adolescent Health Survey Results, Regional Highlights Report, MetroWest Health Foundation, Spring 2019

**Appendix E. SWOT Analysis**

**Hopkinton Youth and Family Services SWOT Analysis - July 2020**

Items highlighted in blue are currently being worked on

<p><b><u>Strengths</u></b></p> <ul style="list-style-type: none"> <li>● Good reputation for excellent service in community</li> <li>● Experienced and committed staff</li> <li>● Good support (from Hopkinton town departments and leadership and via Youth Commission)</li> <li>● Sound social work practice</li> <li>● High demand (although limited capacity)</li> <li>● Innovative and unique services offered to community</li> <li>● Strong presence for prevention in community</li> <li>● Earmark funding at \$75-100,000 per year</li> <li>● Support from Town Manager, Board of Selectmen</li> <li>● Prevention Coalition partnership</li> <li>● Community good will</li> <li>● Internship/Field Placement of social work students, highly sought field placement</li> <li>● Strong relationship with other YFS Directors/good support/mutual aid</li> </ul>	<p><b><u>Weaknesses</u></b></p> <ul style="list-style-type: none"> <li>● No process to collect statistics for the department</li> <li>● No formal mission statement</li> <li>● Documentation is not always complete due to constant demands on time.</li> <li>● High demand and limited capacity to meet demand</li> <li>● No formal dependable space to hold programming (whether it be group counseling, larger education programs, meeting space, outside activities)</li> <li>● Location (while convenient for public, is not the most confidential)</li> <li>● No clerical/administrative support</li> </ul>
<p><b><u>Opportunities</u></b></p> <ul style="list-style-type: none"> <li>● Collaboration with private and non-profit mental health services to add value for Hopkinton residents</li> <li>● Regional Programmatic Collaboration with YFS departments in other communities (Clinical collaborative/consultation, director meetings, events, programming)</li> <li>● Grow relationship with Youth Commission to support each other’s charge/mission.</li> <li>● Utilizing social media to communicate with residents</li> <li>● Create a database to track client referrals</li> <li>● Drug Free Communities grant could add Prevention Specialist for community</li> <li>● Program Coordinator and additional Social Worker could help greatly in meeting community needs</li> <li>● Large Southeast Asian community population – HYFS unfamiliar with their needs</li> <li>● Opportunity to collect better community needs data</li> </ul>	<p><b><u>Threats/Challenges</u></b></p> <ul style="list-style-type: none"> <li>● Lack of capacity can lead to feeling or being perceived as “jack of all trades, master of none.” The department staff do case management, clinical work, program development, prevention coordination, and administration but with such limited capacity that none are done to completion. These are separate roles.</li> <li>● Lack of definition of duties and alternate resources can lead to everything sliding on to our plate...no way to say “no”</li> <li>● Risk of not meeting community expectations due to lack of capacity</li> <li>● Difficulty providing confidential services due to public location</li> <li>● Community mental health needs are incredibly significant</li> <li>● Youth Commission operates independently of HYFS, not functioning as an advisory group to HYFS</li> <li>● HYFS budget funds the Youth Commission even though they function as separate entities/hard to for HYFS to know what to plan for in terms of expenditures.</li> <li>● Funding sources are not definite (earmarks are not a guaranteed source of funding). No “friends of” group, not a 501(c)3, no discretionary funds for one-time needs</li> </ul>



	<ul style="list-style-type: none"><li>● Risk of burnout/low morale</li></ul>
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**Appendix F. Outcomes Benchmarks**

<b>Goal #1: Help to Strengthen and Clarify the Network of Services that Acts as a Safety Net for Vulnerable Residents</b>							
<i>Strategies</i>	<i>Metrics</i>	<i>FY 2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person(s)</i>	<i>Deadline</i>
Work to define HYFS' roles and responsibilities within the existing and growing network of services	· Improved coordination with Youth Commission	· Inadequate communication with YC · Lack of clarity about YC programmatic and spending priorities despite HYFS funding	· Transparent application process for all HYFS funding · Spending priorities connected to goals of HYFS department and evidence-based  · Spending in line with Town of Hopkinton regulations and priorities	· Improved tracking and transparency of outside project spending and connection to HYFS goals	· Google Form application to track outside applications from community groups for any funding associated with HYFS programming (HOP included)	· YFS Director · Program Coordinator (future) · Finance Director for Town of Hopkinton	· Initial Youth Commission coordination - Spring 2021  · Other coordination - Ongoing
	· Strong relationships with and clear division of labor between key departments	· Established relationships w/Town Manager, School Department, Police, Fire, Library, Public Health, Senior Center, Wellness Committees	· Clarify how and when to ask for HYFS help · Implement HEMG interventions in response to COVID · Develop Communication Plan together	NA	TBD	· YFS Director	· December annually

**Goal #1: Help to Strengthen and Clarify the Network of Services that Acts as a Safety Net for Vulnerable Residents (cont.)**

<i>Strategies</i>	<i>Metrics</i>	<i>FY 2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person(s)</i>	<i>Deadline</i>
Work to define HYFS' roles and responsibilities within the existing and growing network of services (cont.)	· Strong relationships with and clear division of labor between community organizations and task forces	· 1st tier: Established relationships (Strong and working well) w/HOP Coalition, PJB, Mommying is Hard, Women's Club, Salvation Army, St. Vincent's, YFS departments in other towns  · 2nd tier: Strengthening relationship (working together with room for growth) w/Youth Commission, Mental Health Collaborative, other faith organizations, local and regional task forces/committees  · 3rd tier: Potential relationships (Desired new partnerships) w/SACH, LGBTQ groups, BIPOC	· 1st tier: Continue and expand on strong partnerships  · 2nd tier: Implement formal application process for grants to all community partners  · 3rd tier: BIPOC support group in place  · LGBTQ education for the community  · Connections to OUT MetroWest and SACH	· Continue collaborating with 1st tier partners at the same or slightly increased levels.  · Grow collaboration with 2nd tier partners, strengthening 3 partnerships per year  · Grow 2 completely new collaborative partnerships per year	· Track partnerships and document new growth via monthly reports and annual reports.	· HYFS Director · HYFS Staff · HYFS Interns  · Utilize Ambassadors to attend meetings or events to increase HYFS collaborative reach	· Ongoing for Tier 1  · By February 2021 (and ongoing) for Tier 2  · By June 30th for Tier 3 (and ongoing)

**Goal #1: Help to Strengthen and Clarify the Network of Services that Acts as a Safety Net for Vulnerable Residents (cont.)**

<i>Strategies</i>	<i>Metrics</i>	<i>FY 2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person(s)</i>	<i>Deadline</i>
Provide case management, counseling services, consultation, information and referrals to residents most in need	<ul style="list-style-type: none"> <li>· # of cases managed and clinical cases stays steady</li> <li>· % of uninsured/under-insured clinical cases and referrals rise</li> </ul>	<ul style="list-style-type: none"> <li>· # of case management = 696</li> <li>· # of clinical hours (counseling and consultations) =864</li> <li>· 80% of clinical cases were underinsured or uninsured</li> <li>· # of I &amp; R = 372</li> <li>· # of Interface referrals =104 (70 kids, 34 adults over 12 months)</li> <li>· % of referrals given to underinsured/ uninsured = 27%</li> </ul>	<ul style="list-style-type: none"> <li>· # of direct clinical hours = 864</li> <li>· # of I &amp; R = 428 (15% increase)</li> <li>· # of Interface referrals = 100</li> <li>· % of referrals given to uninsured, underinsured =35%</li> <li>· Track requests and establish baseline if none</li> </ul>	<ul style="list-style-type: none"> <li>· We expect increases in number needing mental health care, uninsured, difficulty accessing care, etc.</li> <li>· Annual targets difficult to predict due to Covid, but we will track closely</li> </ul>	<ul style="list-style-type: none"> <li>· New case management tool</li> </ul>	<ul style="list-style-type: none"> <li>· YFS Director</li> <li>· YFS Social Worker</li> </ul>	<ul style="list-style-type: none"> <li>· ONGOING and as needed</li> </ul>
Provide assistance with connecting to financial and other emergency assistance, especially during and after COVID	<ul style="list-style-type: none"> <li>· Amount of financial assistance accessed through other nonprofits, amount of other emergency assistance</li> </ul>	<ul style="list-style-type: none"> <li>· Financial assistance = \$20,000</li> <li>· Holiday Funds = \$2,500</li> <li>· Number of referrals to food resources (APTT, PJB, SNAP, etc.) = unknown</li> <li>· Referrals for furniture, clothing, essentials other than food = 11</li> </ul>	<ul style="list-style-type: none"> <li>· Unknown. Expect increases in need for assistance, but due to the uncertainty of the pandemic the amount of need cannot be anticipated</li> </ul>	<ul style="list-style-type: none"> <li>· Expect increases in number needing financial and other emergency assistance</li> <li>· Annual targets difficult to predict due to Covid, but we will track closely</li> </ul>	<ul style="list-style-type: none"> <li>· Track referrals and amount of financial assistance that have been required by residents using a tool that is developed by department</li> </ul>	<ul style="list-style-type: none"> <li>· YFS Director</li> <li>· YFS Social Worker</li> </ul>	<ul style="list-style-type: none"> <li>· ONGOING and as needed</li> </ul>

**Goal #2: Provide Primary Prevention Services to Build a Healthy Community Culture**

<i>Strategies</i>	<i>Metrics</i>	<i>2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person(s)</i>	<i>Deadline</i>
Prepare for expanded delivery of prevention services by strengthening the HOP Coalition	<ul style="list-style-type: none"> <li>· Training programs offered by Bright Solutions consulting to train all HOP members in primary prevention</li> </ul>	<ul style="list-style-type: none"> <li>· Basic coalition building training provided as well as basic primary prevention training.</li> </ul>	<ul style="list-style-type: none"> <li>· Intense preparation for the application to the highly competitive Drug Free Communities Grant Program (Spring 2021)</li> </ul>	<ul style="list-style-type: none"> <li>· By 2022, obtain Drug Free Communities Grant Funding</li> </ul>	N/A	<ul style="list-style-type: none"> <li>· YFS Director</li> <li>· Bright Solutions Consulting</li> </ul>	Grant application due Spring 2021
Increase Capacity for HOP coalition through engaging new members, developing by laws, building a leadership team, and applying for state and federal prevention grants	<ul style="list-style-type: none"> <li>· Develop By-laws for HOP Coalition</li> <li>· New membership to include 4 new sectors and at least 6 new members to the HOP coalition.</li> <li>· Build leadership team of 4-5 members that meets monthly (to include key stakeholders: Superintendent, Chief of Police, Parents, Business, etc)</li> <li>· Create working groups for programs and tasks</li> <li>· Submit DFC application in Spring of 2021</li> </ul>	<ul style="list-style-type: none"> <li>· Discussion of By-laws</li> <li>· Existing members or partners (may rotate out individuals, but no new sectors)</li> <li>· Whole coalition works as one unit and attends every meeting</li> <li>· Funding through earmarks. Limited ability to spend and no ability to add the most crucial component...a staffed prevention specialist.</li> </ul>	<ul style="list-style-type: none"> <li>· Development and implementation of bylaws</li> <li>· Campaign to increase membership and engage new sectors in the community (business, parents, faith community, volunteer sector, other youth serving agencies, and local government)</li> <li>· Leadership team meets monthly</li> <li>· HOP coalition meets every other month as a whole and working groups meet monthly</li> <li>· Hire a prevention specialist as a HYFS/ Town of Hopkinton Employee</li> </ul>	<ul style="list-style-type: none"> <li>· Have an established leadership team that has met 3x by spring of 2021 that sets the agenda for HOP coalition.</li> <li>· Have 3 established working groups for the DFC grant by Spring 2021.</li> <li>· Obtain grant funding and hire a prevention coordinator by 2022</li> </ul>	N/A	<ul style="list-style-type: none"> <li>· YFS Director</li> <li>· Bright Solutions Consulting</li> </ul>	

**Goal #2: Provide Primary Prevention Services to Build a Healthy Community Culture (cont.)**

<i>Strategies</i>	<i>Metrics</i>	<i>2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person(s)</i>	
Represent HYFS role in community at prevention organizations including HOP Coalition, MYTT, and MWSAPA	<ul style="list-style-type: none"> <li>· Have a HYFS presence of at least one staff at each prevention meeting</li> <li>· Explore interest in creating a suicide prevention arm of HOP and include mental health in the programming more readily</li> </ul>	<ul style="list-style-type: none"> <li>· HYFS staff attend MWSAPA and MYTT as able</li> <li>· HYFS coordinates MYTT</li> <li>· HOP views mental health as inextricably linked to substance use and supports access to mental health care through INTERFACE</li> </ul>	<ul style="list-style-type: none"> <li>· Other regional prevention partners step up to co-coordinate MYTT</li> <li>· Continued participation in MWSAPA by HYFS staff and contribute more from HYFS once a prevention coordinator is hired</li> </ul>	<ul style="list-style-type: none"> <li>· HYFS clinicians transition to coalition members, not coordinators of HOP</li> <li>· HYFS able to develop meaningful programming vs. run the coalition</li> <li>· HYFS staff position for community substance use prevention will assume this role</li> </ul>	N/A	· YFS Director	
Cultivate a broader community appreciation of the importance of prevention services	<ul style="list-style-type: none"> <li>· Stakeholder meeting 1x per year</li> <li>· Engage members from different community sectors in the work of the coalition.</li> <li>· Ambassadors to HYFS become acquainted with HOP's work and can share with broader community.</li> </ul>	<ul style="list-style-type: none"> <li>· No broad outreach to stakeholders</li> <li>· Day of Recovery and other large events (Drive in Movie)</li> <li>· Attendance at other events as HOP</li> <li>· Swag giveaways with brand names getting into people's hands (mugs, bags, masks, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>· Offer community-wide prevention training to build stakeholder understanding of primary prevention practice and its importance to youth and community health</li> </ul>	· N/A	· N/A	· YFS Director	· Ongoing

**Goal #2: Provide Primary Prevention Services to Build a Healthy Community Culture (cont.)**

<i>Strategies</i>	<i>Metrics</i>	<i>2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person</i>	<i>Deadline</i>
Apply for the Drug Free Communities Grant to hire a prevention coordinator (fall 2021) or like grant offered through BSAS	<ul style="list-style-type: none"> <li>Improved delivery of prevention services</li> <li>Improved awareness of substance abuse issues</li> <li>Reduced substance use among youth over time</li> </ul>	<ul style="list-style-type: none"> <li>Minimal prevention activities, Intensive training program for HOP coalition in primary prevention</li> </ul>	<ul style="list-style-type: none"> <li>Increase the capacity of the HOP Coalition through engaging new members, creation of by-laws, development of leadership team and application to the DFC Grant Program</li> </ul>	<ul style="list-style-type: none"> <li>Reduced substance use trend among youth by 2024 with deep reductions by 2032</li> <li>By 2024 have some town funding as match funding for DFC and a model toward eventual sustainability</li> <li>Reapply to DFC or like grant program in 2026 for 5 more years of funding</li> </ul>	<ul style="list-style-type: none"> <li>Surveys</li> <li>MWAHS</li> </ul>	<ul style="list-style-type: none"> <li>Prevention Coordinator</li> </ul>	<ul style="list-style-type: none"> <li>December 2021 (apply for grant)</li> <li>November of 2022 (results May 2023)</li> </ul>

**Goal #3: Increase Community Awareness of Behavioral Health Issues, of our Mission and Services, and of How to Access Help**

<i>Strategies</i>	<i>Metrics</i>	<i>2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person</i>	<i>Deadline</i>
Develop a communications strategy to promote and raise awareness about our resources and engage the community	<ul style="list-style-type: none"> <li>Enhanced social media presence</li> </ul>	<ul style="list-style-type: none"> <li>Website is very difficult to edit in terms of font size/uniformity.</li> <li>No marketing materials</li> <li>Post to social media to promote HYFS events; 1 to 3x weekly posts, request sharing by other departments for some events</li> <li>Occasional articles and press releases through local media</li> <li>Name: Youth and Family Services is confused with DCF and protective services. People don't think to call us as they think we stand for something else</li> </ul>	<ul style="list-style-type: none"> <li>Explore hiring a town-wide communications director or consultant to better convey our brand</li> <li>Explore possibility of an independent website platform</li> <li>New brochure, fact sheet/ flowchart format</li> <li>Increase social media presence with posts 3-4x per week; more before events</li> <li>Engage other departments/organizations to distribute information, via paper and electronically</li> <li>Submit one article to local newspaper or/and online media</li> </ul>	<ul style="list-style-type: none"> <li>Update website</li> <li>Distribute materials annually</li> <li>Add new venues where we distribute materials</li> <li>Increase social media following annually</li> <li>Explore rebranding for clarity of department's purpose</li> <li>Utilize youth expertise in re: social media strategies</li> </ul>	<ul style="list-style-type: none"> <li>Website</li> <li>Printed marketing materials</li> <li>Facebook page</li> <li>Local media (newspapers, TV)</li> <li>Surveys and focus groups to test messaging and name of department with youth and adults</li> </ul>	<ul style="list-style-type: none"> <li>YFS Director</li> </ul>	<ul style="list-style-type: none"> <li>New/ revised website August 2021</li> <li>Marketing materials, August 2022</li> <li>Website updates monthly</li> </ul>

**Goal #3: Increase Community Awareness of Behavioral Health Issues, of our Mission and Services, and of How to Access Help (cont.)**

<i>Strategies</i>	<i>Metrics</i>	<i>2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person</i>	<i>Deadline</i>
Prioritize outreach to underserved populations	Improved inclusion in programs, services, and outreach to diverse populations	<ul style="list-style-type: none"> <li>· Limited specialized efforts related to targeted populations, including culturally and linguistically specific groups; residents impacted by substance use; LGBTQ communities</li> <li>· Limited tracking of current service and outreach to these populations</li> <li>· No translation services</li> </ul>	<ul style="list-style-type: none"> <li>· Begin collecting demographic and other relevant data</li> <li>· Begin tracking of services to targeted populations</li> <li>· Increase engagement of diverse targeted populations</li> <li>· Utilize interpretation/ translation services</li> <li>· Explore creation of language access plan as part of policies</li> </ul>	· TBD	<ul style="list-style-type: none"> <li>· New data collection tool (to be created)</li> <li>· Adapt/ create new tracking tool</li> <li>· Utilize Interpreter Service</li> </ul>	· YFS Director Staff and interns	<ul style="list-style-type: none"> <li>· Begin collecting data; tracking services &amp; engagement by June 2021</li> <li>· Begin utilizing interpreter service by December 2021</li> <li>· Begin exploring language access plan June 2021</li> </ul>
Work with community partners to provide training workshops, events, other programs to enhance knowledge and reduce mental health stigma	· # of training workshops and events/year	<ul style="list-style-type: none"> <li>· Events - 10 held, 4 planned but canceled due to Covid</li> <li>· 14 trainings sponsored by HYFS</li> </ul>	<ul style="list-style-type: none"> <li>· Reduction of in- person events due to COVID19</li> <li>· Increase in community trainings and online events due to increased need for emotional support due to COVID19 and associated systemic inequities</li> </ul>	<p>In non pandemic years:</p> <ul style="list-style-type: none"> <li>· 3 events for HOP unique to HOP</li> <li>· Participate in 3 community events as a partner representing the services of HYFS</li> <li>· 14-20 training programs for community, dependent on pandemic and method of delivery</li> </ul>	HOP Action Plan to be developed by fall 2020/spring 2021	· YFS Director and YFS Social Worker	



<b>Goal #3: Increase Community Awareness of Behavioral Health Issues, of our Mission and Services, and of How to Access Help (cont.)</b>							
<i>Strategies</i>	<i>Metrics</i>	<i>2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person(s)</i>	<i>Deadline</i>
Build HYFS Ambassador program	· Formal ambassador role	· Nonexistent	<ul style="list-style-type: none"> <li>· Create guidelines for ambassadors</li> <li>· Implement formal ambassador role</li> <li>· Continue to develop relationships to invite key participants to ambassador program</li> <li>· Create training program for Ambassadors</li> </ul>	· Launch ambassador program in 2022	· Guidelines for ambassadors (to be created)	<ul style="list-style-type: none"> <li>· YFS Director</li> <li>· Support of Staff/Interns</li> <li>· Youth Commission, ideally</li> </ul>	· June 2022

<b>Goal #4: Develop Effective and Efficient Staffing, Funding, and Processes</b>							
<i>Strategies</i>	<i>Metrics</i>	<i>2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person</i>	<i>Deadline</i>
Make the case for increased department staffing AND contracted services for specific needs	· Town funding for staff positions, as needed	· 1.75 staff positions - FT Director, Social Worker	<ul style="list-style-type: none"> <li>· Create data-driven proposal for all staffing needs, including town and contract positions</li> <li>· Create job descriptions for new positions</li> <li>· Present to Board of Selectmen</li> <li>· Explore adding article to Warrant for Town Meeting</li> </ul>	· Obtain social worker/program coordinator position (1 position) for department by 2022	· NA	· YFS Director	· TBD
Reduce the burden on the taxpayer by applying for grants, but when and only when the funding supports the department goals		<ul style="list-style-type: none"> <li>· Earmark funding was generous and provided for a lot of programming.</li> <li>· Funding did not always fit with department goals</li> </ul>	<ul style="list-style-type: none"> <li>· Explore grant opportunities with funders that will support department goals.</li> <li>· Apply for the Drug Free Communities Grant and others to support primary prevention efforts</li> <li>· Apply for grants to support behavioral health programming</li> </ul>	<ul style="list-style-type: none"> <li>· Apply for grants through state agencies, MWHF and other local funders each year or as needed.</li> <li>· Continue relationships with state legislators to qualify for earmark funding that meets both state and community goals</li> <li>· Apply for DFC grant for first 5 year cycle at \$625,000 to provide prevention coordinator</li> </ul>	· NA	<ul style="list-style-type: none"> <li>· YFS Director with the support of staff, coalitions, community partners</li> <li>· Procurement Director at the town level or Finance Director</li> </ul>	· ONGOING

				and technical assistance			
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<b>Goal #4: Develop Effective and Efficient Staffing, Funding, and Processes (cont.)</b>							
<i>Strategies</i>	<i>Metrics</i>	<i>2020 Baseline</i>	<i>2021 Forecast</i>	<i>Annual Target</i>	<i>Tool</i>	<i>Key Person</i>	<i>Deadline</i>
Plan for long-term improvements	· Obtain accessible and private office space with 3 offices, meeting room, private waiting room	· Town hall space is comfortable and accessible but not private Other options (Center School Renovation) are on a long timeline 4-5 years away)	· No action until 2022, at the earliest, educate and advocate re: need for proper location	· NA	· NA	· YFS Director	· 2022-2024
Increase regulation compliance	· Implementation of online system	· Handwritten record-keeping system	· Advocate for funding to purchase online record-keeping system	· NA	Online record-keeping system	· YFS Director with Town Manager	· Fall 2020
	· Up-to-date professional development training for staff	· Staff members select training based on interests or identified need	· Specified # of hours and topics needed/justification of work time for trainings not solely based on interests, but based on department goals. · Training programs should support the work, staff's individual goals, and department goals.		Google form to keep record of trainings attended	YFS Director	· Ongoing