



# Making life better in Bester

Focusing on families to improve outcomes for kids

NOVEMBER 2016

# SAFE STRONG SUPPORTIVE

safe children | strong families | supportive communities





## Introduction

The Bester community in Hagerstown, Maryland, hasn't been the best place to be a kid. The majority of its 7,000 residents live in poverty. The transient rate is high, which has led to the absence of a sense of community. Residents are plagued by obesity and other health challenges. Harsh conditions, bleak prospects and isolation too often lead to child abuse or neglect, making child removal rates the second highest in the county.

These challenges haven't gone unnoticed, and many have wanted to help. A few years ago, several community agencies and the local elementary school hatched a plan to work together to provide wraparound services to families, but that effort fizzled in the face of day-to-day demands on each organization.

Then, around 2012, something changed.

Miles away from Bester's urban streets, on the rolling rural campus of the San Mar Children's Home, staff leaders were questioning the value of their orphanage and foster placement services. They were asking, "What if we shifted our focus completely — from treating kids who have been removed from their homes to preventing that removal from ever happening in the first place?"

"Other residential providers were struggling to keep rates up and doors open, but we realized that's not the right battle," says Bruce Anderson, president and CEO of San Mar. "Research shows the effectiveness of keeping kids in families. This is where the work will expand. We knew we needed to learn more about it, to embrace the idea of looking at families a different way. We were the ones who needed to change."

They weren't alone in their thinking. Nationally, the trend in child welfare is toward prevention and family-based intervention rather than out-of-home placement. That's also the goal of Casey Family Programs, which seeks to safely reduce the need for foster care by 50 percent by 2020.

After meeting at a child welfare conference, San Mar and Casey Family Programs formed a partnership in 2013 to support the launch of a demonstration project for a new approach to child welfare in the Hagerstown area.

"Hagerstown was an attractive site for us because of San Mar's high level of motivation and the fact that they already were connected to several community partners," says Paul DiLorenzo, senior director at Casey Family Programs. "We saw a real need and a very responsive set of stakeholders who came forward very quickly. It was somewhat of a speculative investment for Casey Family Programs, but we could tell the infrastructure was already there in terms of relationships among community agencies."



## Laying the groundwork

With guidance and support from Casey Family Programs, San Mar reached out to key partners and Washington County leaders to discuss areas of greatest need and possibilities for a new model. Kristi Bachtell, principal of Bester Elementary, was among the first to sign on.

“When I met with Paul and Bruce and others, I knew I wanted in,” she says. “I kept going to meetings, because as the local elementary school, I knew we needed to be a key partner.”

The group planned for six months. They worked together to bring in more partners and develop a logic model to identify needs and determine how to address them. They built action plans around health needs, absenteeism, physical activity and afterschool time. They learned from programs in other parts of the country, such as a top-performing afterschool program in Brooklyn, New York, and a model family support program in Jacksonville, Florida. They talked to people in the community and pushed for face-to-face meetings.

In mid-2014, the planning partners agreed that Bester would be an ideal target community, with San Mar as the lead coordinating agency and Bester Elementary as a critical hub for delivering services and support. The effort became the Bester Community of Hope.

At the end of the initial planning process, the Bester Community of Hope had what San Mar’s Anderson believes is its greatest asset: a shared vision for community change. “We pulled together those who had been involved in previous attempts at engaging the community and who had been expecting us to fail also. We asked them to share with us the lessons they learned and the accomplishments they realized. They told us what they would do differently. They became strong supporters of what we envisioned would happen,” he says.

Once community leaders were on board, the group knew it had to build support among residents. “People were saying that you don’t go into a community prescribing programs. You

### What makes a Community of Hope?

A Community of Hope is a place where people share a vision of safety and success for every child who lives there. It’s a place where public and private organizations — nonprofits, philanthropies, government, businesses and communities — collaborate closely to help achieve that vision. As a result, children are safer, families are stronger and communities are more supportive places.

Communities of Hope share the beliefs that:

- Every child deserves a safe, supportive and permanent family.
- Every family should have the support of a strong and caring community.
- Every community can create hope and opportunities for its children and families.
- And everyone has a role to play in building Communities of Hope.

Casey Family Programs has identified Communities of Hope across the country, where demonstration projects are showing us how to make more effective investments in children and families so that they can thrive. These communities are places that will help Casey Family Programs achieve its goal of safely reducing the need for foster care by 50 percent by 2020.





have to sit with residents of the community and ask what their needs are and build programs around those,” says Anderson. “If you don’t have credibility, they are not going to speak truth to you or believe you. You have to create an army of believers and develop a shared vision. You do that by leveraging the existing institutions of hope, like schools.”

Bester Elementary had a new building that had created some community buzz, so the partners hosted a community open house and spaghetti dinner there to share the vision and gauge community reactions. “More than 900 people showed up, and we could see that they knew the principal and perceived her as credible. After that, even more community leaders started volunteering to help,” Anderson recalls.

San Mar secured an additional three-year investment from a local funder, the Alice Virginia and David W. Fletcher Foundation. With that funding, it opened its new office near Bester Elementary, formed a community advisory group and began building partnerships.

### Key partners

Bester Elementary is a natural hub for connection to its 600 students and their families. Within the building, staff maintain a food pantry, and a dental unit visits the school a couple of times a year. A new school counselor, a school-family liaison and the administrative team are all connected to the Bester Community of Hope network.

“We have a dedicated group who believe change can happen,” says Bachtell. That belief is beginning to take root among students as well.

“We’ve done a lot of work at school around the theme of hopes and dreams — setting little goals with the kids, for themselves and the community,” Bachtell says. “We’ve included parents in that, too. The Community of Hope has brought in an astronaut, professional athletes and Olympic gold medalists who have all told their stories, and our kids could relate. They are beginning to understand that if you believe in yourself, and find others around you who also believe, you can make things happen. There really is hope out there.”

The Community Free Clinic (CFC) also emerged as a lead partner, bringing its groundbreaking approach to student health. As an independent nonprofit clinic, the CFC wasn’t in the business of pediatrics. But after learning more about the Bester Community of Hope, clinic director Robin Roberson realized there was a unique opportunity to serve.



“It was obvious that health care was a huge need in the community,” says Roberson, whose clinic sits one block from Bester Elementary. “It took some planning on our part, and several board meetings, but we are here to serve — it didn’t even occur to us not to participate. Plus, our vision is that by caring for the kids, we can attach to the parents and serve their needs as well.”

In partnership with the Bester Community of Hope, the Washington County Board of Education, and Meritus Health (the local hospital), the CFC created a new model for on-site clinic services for Bester Elementary students. Professional medical services are available for all children, from 10 a.m. to 12:30 p.m. every school day, in a fully equipped exam room. (Because the clinic and the school are so close, a medical provider at CFC remains “on call” during school clinic hours and makes the quick trip as needed.) The medical provider contacts parents to discuss treatment, supplies and/or prescribes medications as needed (delivered to the school by a local pharmacy), and sends children back to class if possible.

This approach is a lifesaver for parents who would otherwise have to leave work (and forgo pay) to pick up a sick child. It also helps ensure children receive needed treatments such as antibiotics because parents can pick up medication when picking up their child rather than making extra trips to another medical provider. It also reduces transportation challenges for families without cars.

The clinic opened its doors at the beginning of the 2016–2017 school year with more than 100 Bester parents signing authorizations for their children’s treatment. School and clinic staff are working to increase that number and expect broader participation as parents learn about the benefits of on-site medical services.

A longtime player in child welfare, Washington County’s Department of Social Services also has served as a key partner in creating the community vision and implementing the approach. DSS provides funding to San Mar staff to provide case management and counseling services to families. A DSS supervisor works closely with multidisciplinary teams at Bester Elementary to support case workers and help provide links to supportive services such as housing, food assistance, drug treatment, parenting classes and more.

**Key partners**

- San Mar
- Washington County Department of Social Services
- Washington County Public Schools
- Community Free Clinic
- Washington County Meritus Health
- Maryland Coalition of Families for Children’s Mental Health
- Western Maryland Consortium
- Washington County Mental Health Authority
- Hagerstown Area Regional Council
- Hagerstown Community College
- YMCA
- City of Hagerstown
- AmeriCorps VISTA
- Washington County Community Mediation Center

**Key funders**

- The Alice Virginia and David W. Fletcher Foundation
- Casey Family Programs
- San Mar Children’s Home



In particular, DSS staff saw the Bester Community of Hope as a way to overcome stigmas and fears of their services.

“Families are more likely to avail themselves of services at school rather than DSS, where they see us only as Child Protective Services and fear we’ll take their children away,” says Michael Piercy, DSS director. “But we want to help parents understand their own strengths and abilities. Often people who have difficulty parenting have no role model for that. Case managers and counselors at school can have a more friendly conversation about tough issues. Through the Bester Community of Hope, we can provide those services in a less threatening way.”

Should situations involving abuse or neglect escalate, DSS staff work with school and San Mar counselors to meet with the family to determine safety parameters and provide additional family support if needed. The ultimate goal is to preserve stability and continuity for each child.

“The bottom line is that we’d rather keep the child at Bester Elementary if at all possible, even if they need to leave their home,” says Piercy.

Other partners in the Bester Community of Hope include the YMCA, Meritus Health, AmeriCorps VISTA and the Washington County Community Mediation Center. Like the Community Free Clinic and DSS, all partners have developed plans to deliver their services through or in conjunction with Bester Elementary.

Programs include a community triage program, overseen by a clinical social worker, that provides links to core services, afterschool and summer programs for Bester Elementary students, and meditation and mindfulness classes for parents. The program seeks to provide a less stigmatizing option compared to traditional social services.

“We are working with citizen groups to build community from the ground up,” says Keith Fanjoy, who serves as director of the Bester Community of Hope for San Mar. “We do survey work to understand what the community sees as needs, and that drives what we do. We make sure everything intersects with school. It’s an ecological approach, a multi-level effort that involves individuals, families and community all at the same time. Our challenge is to link the resources and keep the vision moving.”

Casey Family Programs’ partnership with the Bester Community of Hope was based on building relationships and connecting community leaders, not prescribing one-size-fits-all solutions. “We initially thought Casey Family Programs would write big checks, but they haven’t,” says Anderson. “It was a bit frustrating at first because they wouldn’t tell us what needed to be done, but instead just kind of guided us, asked probing questions, and made us think and figure it out ourselves. But it’s better that way, because now it’s *our* program.”

The foundation’s role is to serve as a thought partner, DiLorenzo explains. “Most of what we do is capacity building. We don’t take the lead or come in with directions about how to do the work, and we try not to be the lead funder because local investors are much better positioned to create a local vision for sustainability.”



## Early lessons, ongoing challenges

For San Mar, the shift from residential provider to community coordinator was huge. There was the challenge of explaining the intent behind the change to supporters and partners. There was also the difficult task of letting most of its longtime employees go, reducing staff from 118 people to 19 to accommodate the new approach.

With a huge shift in vision and approach comes huge uncertainty. “There is no map or guidebook for this,” says Anderson. “No one has done exactly what we are trying to do. We have had to figure this all out as we go. It was an unprecedented change, but also an unprecedented opportunity for those who were willing to meet it and change themselves.”

And for every community partner, there needs to be a willingness to step out and do things differently. That means each must have buy-in and support from within. “You need a courageous leadership and board,” says Fanjoy. “This is highly risky work.”

Funding is also an issue, particularly for San Mar, which lost a significant amount of revenue in closing its residential programs and now must learn how to attract and sustain funding for community engagement work.

Casey Family Programs provided technical expertise, and their national presence was extremely helpful in terms of clout, says Anderson. “Casey’s leveraging of other funders on our behalf and their engagement allowed other partners to see us as credible. Plus, they were willing to send some of our partners to other sites in New York and Florida. That helped those partners move along in the journey of developing the vision we all now share.”

Data collection is a big challenge of any community initiative, says Fanjoy, who is developing a long-term collection system. “There are different metrics for different programs. We’ll have to balance markers of early success, like numbers of kids served in the health center or in an afterschool program, with longer-term indicators like improvements in community health and decreases in child abuse and neglect cases before we can really see the impact of what we’re doing.”

“No matter the community, there are always going to be turf and resource issues,” he adds. “Organizations tend to get stuck in self-preservation mode instead of imagining how they could be part of a bigger solution. But if everyone understands the vision, they can get past the survival mindset and will go the extra mile.”

## Carrying the promise forward

Although the Bester Community of Hope is just getting off the ground — and it is too early to report results — partners see a sense of cohesion and connection growing in the community.

“What has stood out for me so far has been the deliberate, intentional and strategic building of the community network,” says DiLorenzo. “From day one, San Mar was intent on bringing in



other partners and never tried to do this on their own. They also brought in the support of a local funder who has been instrumental to the success of this partnership.”

Bester Elementary’s Bachtell says the group is getting better at coordinating resources for better case management. “It used to be that families would access six to eight different places for the same services, while others weren’t getting any. Now it’s more coordinated and streamlined, and easier to figure out who can access what service and where. We’re able to avoid abuse of the system and expand access at the same time.”

The Bester Community of Hope continues to seek out partners and providers and to form new coalitions with houses of faith in the neighborhood. Another community organization, Elizabethtown East, has joined the Bester Community of Hope, providing access to a highly transient portion of the area.

The community continues to learn together. The Bester Community of Hope brings in national speakers to address issues related to child welfare, such as a recent conference at Bester Elementary on Adverse Childhood Experiences that attracted 450 professionals and received rave reviews.

“The process we’ve been engaged in has been validating to what we believe,” says Fanjoy. “We’re still doing what we’ve always done, but we’ve changed the setting and the method. Every positive outcome shows that these are services and supports that make a difference in the kids’ experiences and shape positive outcomes. We spent years treating symptoms. Now we have a new way to prevent issues from becoming problems. We’re changing trajectories.”



