



Leading and Learning Through Cross-Sector Collaborative Action: the Nexus of Government, Education and Community

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Leading and Learning through Cross-Sector Collaborative Action:
The Nexus of Government, Education and Community

Doctor of Education Leadership (Ed.L.D.)
Capstone

Submitted by

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To the Harvard Graduate School of Education
in partial fulfillment of the requirements for the degree of
Doctor of Education Leadership

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DEDICATION

Her children rise up and call her blessed. . .

Proverbs 31:28

I dedicate this Capstone to my beloved mother. President Abraham Lincoln stated, “All that I am, or hope to be, I owe to my angel mother.” This quote speaks volumes of truth about my angel mother, Victoria L. Jennings. She believed in me despite what my first-grade teacher said about my learning ability. She called me weekly while I was an undergrad, encouraging me and saying, “stay focused, baby.” Her prayers kept me pressing forward in graduate school when the pressure was non-stop. In the doctoral program, once again her prayers carried me through to fulfil my dream of having an impact on the lives of children. She continually reminds me that the “prayers of the righteous accomplish much.”

Thank you for praying for me.

Thank you for loving me.

Thank you for being my beloved angel mother.

ACKNOWLEDGEMENTS

My Family

To my father, Ronnie R. Jennings, Sr.: Thank you for drilling into me that my blackness is to be held in high esteem. I love you, Da.

To my brother, Ray: Because of you, I walk this Earth knowing that riches and fame are not my endgame, but rather through helping and loving people. I love you Ray.

To my nephew, Darryl: I love you with all my heart. I am so proud of you and thank God daily that I can call you my nephew. You make me a better person. I love you.

My Defense Committee

Thank you for guiding me through this capstone journey, and more importantly, preparing me to be a thoughtful and intentional cross-sector system-level leader.

Harvard/Ed.L.D. Family

Thank you for believing in me, challenging me, and equipping me to do the most good for the children and families I will have the privilege of serving post-Harvard.

Cohort 7 Family

You showed me what is possible when a group of committed individuals come together to learn and lead at the system level for students and families. Thank you.

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GLOSSARY OF ACRONYMS

CAAS	Community Action Agency of Somerville
CBP	Community-Based Organizations
CHHCS	Center for Health and Health Care in Schools
CI	Collective Impact (model)
HCZ	Harlem Children's Zone
HHS	Human Services Department
OSS	Office of Student Services
OST	Out-Of-School Time
PACE	Parent and Community Education
PBG	Partner Build Grow (model)
SFLC	Somerville Family Learning Collaborative
SPE	Single Point of Entry
SPS	Somerville Public Schools
SPYC	Somerville Partnership for Young Children
UEI	Urban Education Initiative

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ABSTRACT

From July 2, 2018 to April 30, 2019, I served the City of Somerville (Massachusetts) Health and Human Services Department (HHS) as a doctoral resident. The mission of HHS is to promote the health and well-being of all Somerville residents from birth to death—a monumental task, even for a city with only 4.2 square miles. With limited resources, barriers to services and supports, and other challenges, the HHS department cannot, on its own, meet all the residents' needs. The same is true for the education and community sectors, both of which have limitations that prevent them from removing complex social challenges placed on children and families, such as housing instability, food insecurity, and childhood trauma.

My Strategic Project focused on developing a city-wide “wraparound system” that integrates the services and supports of Somerville’s public-school district, city government, and community-based organizations. To do this, I employed a collaborative action framework as a guide to developing cross-sector capacity to build a city-wide wraparound system. I was able to advance this city-wide wraparound system because cross-sector stakeholders understood the value of their connection and the impact the system would have on their agency, as well as the expanded capacity that advanced the system and the deliberate planning that steered the work. Leading and learning at the intersection of education, government, and community furthered my knowledge of what needs to be done in Somerville and in the education sector to advance cross-sector collaboration that benefits all children and families. This capstone writing chronicles my journey, and highlights the strategies I used to develop and advance the city-wide wraparound system in Somerville.

INTRODUCTION

The City of Somerville is a suburb located north of Boston. It is a densely populated community covering 4.2 square miles with more than 80,000 residents (*About Somerville*, n.d.). Somerville is home to blue-collar families, third- and fourth-generation Somerville residents, young professionals, college students, and recent immigrants from countries including Haiti, Brazil, and El Salvador (*About Somerville*, n.d.). Traveling through Somerville one can see an eclectic combination of historic diners, ethnic retail shops, and posh boutiques. This cultural and ethnic diversity weaves together a small-town community feel that makes Somerville attractive to its residents.

With all the city's charm, however, there is another side to the city, one where inequities are present due to complex and systemic social challenges. These negative challenges, compounded by economic uncertainty, have widened the gaps among Somerville's most vulnerable residents compared to those who have more means. According to the Cambridge Health Alliance and the City of Somerville Health and Human Services Department's Wellbeing of Somerville Report (2017), "Research suggests that certain populations are at a greater risk for certain ailments as a result of their race, social connectivity, neighborhood, economic status and education" (p. 6). Some of these ailments are food insecurity, housing instability, and childhood trauma, all of which negatively impact the health, wellness, and academic achievement of Somerville's most vulnerable residents—its children.

Ed.L.D. Resident

On July 1, 2016 I ended my six-year role as manager of the Urban Education Initiative (UEI) at Brown School of Social Work, Washington University, St Louis, Missouri. The dean of the graduate school had recruited me for this position, to develop and advance the vision of social-work education reformers. At the Brown School, I was responsible for training graduate social work students committed to the K-12 education sector. I was tasked with helping to develop three community schools in the St. Louis region, and to help university groups, community-based organizations, and businesses remove the barriers to learning for children in the St Louis region. At the end of my tenure, more than 200 UEI students had graduated and I had recruited ten UEI partner school districts, each utilizing graduate social-work interns and other community and business resources for the benefit of local children and families.

When I realized the scope of my impact in the St. Louis region, I wanted to influence even more students and families. Toward the end of my tenure I began to realize that no matter what impact I had on students and families, schools or school districts, there was always someone else who had final authority at the system level. At that point, I wanted to become that person. I came to the Harvard Graduate School of Education to learn how to lead at the system level for children and families.

Three Sectors: HHS, SPS, and CBOs

Somerville is fortunate to have three distinct sectors working locally toward improving the lives of children and families across the city. These sectors are: Somerville's Department of Health and Human Services (HHS), the Somerville Public

Schools (SPS), and community-based organizations (CBOs) active in Somerville. Each entity has its own unique resources and strategies for removing barriers to children's physical and mental health, social-emotional development, and educational success. Even with all of these resources and supports, no single sector has successfully provided the aid needed to the majority of Somerville's children and families in need.

Health and Human Services

The Department of Health and Human Services (HHS) expanded its resources and supports to address residents' health and well-being through a number of progressive programs and divisions, including Shape Up Somerville, SomerServe, Public Health Nursing, SomerPromise, and LGBTQ services (*Health and Human Services*, n.d.). When HHS decided to meet the needs of Somerville residents by expanding its capacity, like any government department, it found itself experiencing funding limitations, shortages in operational capacity, and an inability to coordinate all of the services across the city. HHS can meet some, but not all, of the needs of children and families in Somerville.

Somerville Public Schools

The Somerville Public Schools (SPS) educate more than 5,000 children ranging from pre-kindergarten to 12th grade, and those students speak more than 50 languages (*School Overview*, n.d.). The school district has an Office of Student Services (OSS) to provide services and support for student success, but it has limitations. OSS lacks the human resources to meet the diverse needs of students, and its current student services model is inadequate to remove barriers for students and families.

Further complicating the situation, OSS' district office has limited personnel capacity, which means the majority of student support services are the responsibility of the neighborhood schools. When schools cannot meet the students' needs, assistance is offered by the Somerville Family Learning Collaborative (SFLC), the community engagement branch of SPS. In a direct response to community needs, SFLC has elevated itself to serve SPS' children and families through programs such as the SomerBaby program, home visiting program, playgroups, and school-based family and community liaisons (Somerville Family Learning Collaborative, n.d.). During the academic calendar July 2017 to June 2018, SFLC was responsible for a prodigious amount of service, as shown in Table 1. Despite all of the immense outreach and impact of SPS programs, there are still many families in need of services and supports.

Table 1. Services Rendered by SFLC, July 2017 to June 2018.

62 families	Served through parent/guardian support groups
116 families	Served through SomerBaby home visits
85 participants	In parent/ guardian English classes
2,756 referrals	For family support
278 students	Participated in a backpack program at 9 schools
197 meals	Delivered to families in crisis
1,000+ families	Visited the clothing closet
122 families	Attended immigration panels hosted at schools
148 participants	Attended Know Your Rights sessions
72 families	Serviced in legal clinic appointments

Source: Somerville Family Learning Collaborative, n.d.

Community-Based Organizations

The last sector working to remove barriers and support families in Somerville consist of community-based organizations (CBOs) serving communities of color, immigrants, and low-income residents. Over the ten years from 2008 to 2018, many of the CBOs serving Somerville’s most vulnerable and marginalized residents have left the city. Service providers say that increases in property rental and building maintenance, combined with the departure of clients from Somerville for better jobs and housing elsewhere are the major reasons CBOs left Somerville. When CBOs leave, so do the resources that aid residents. Despite these challenges, a few CBOs still serve clients, including the Community Action Agency of Somerville (CAAS) and Riverside Community Care, a CBO that provides a range of services and supports, from behavioral healthcare and human services, to children and families throughout the Greater Boston region. Both groups serve young children and families through Head Start and early interventions services, but neither can meet all of their clients’ needs.

All stakeholders in the government, education, and community sectors would agree that no sector can meet all of the diverse needs in Somerville. As a result, the most vulnerable—Somerville’s children—continually have unmet needs that negatively impact their education and well-being. No matter how good a sector’s intentions are, there are limits: never enough people, money, or space. Consequently, these sectors have to come together to work for the common good of the children of Somerville.

The Challenge

Somerville's governmental, educational, and community sectors face severe limitations in their capacity to individually, and collectively, address the unmet needs of children and families. Each sector has its own unique strengths, weaknesses, opportunities, and threats (SWOTs) to service delivery, human capital, and financial resources. An intervention involving integrating and coordinating the services and support within this sector has never been done successfully.

My strategic project directly addresses this problem. The director of HHS, with the support of Somerville's mayor and school superintendent, asked me to develop a city-wide wraparound system that integrates the services and supports of HHS, SPS, and the CBOs, aiming to provide a seamless connection to services for Somerville children and families.

In this capstone paper, I share my journey – the strategies for leading and learning to develop a city-wide wraparound system, and igniting movement across the three sectors. I begin by explaining how I identified the problem(s) evident in each of the three sectors. To understand the city and its three distinct cross-sector organizations, I describe a system thinking framework that I used as a guide. I dive into the public value, legitimacy, support, and operational capacity of each sector in relation to the city-wide wraparound system. Finally, I provide a detailed description of my journey of facilitating cross-sector collaboration using a collaborative action framework. All of my work attempts to spur cross-sector organizational change for the benefit of the city's children.

Problem of Practice

The City of Somerville Department of Health and Human Services (HHS), Somerville Public Schools (SPS), and local community-based organizations (CBOs) lack the cross-sector operational capacity needed to develop a city-wide, coordinated, wraparound system that supports all of the children and families in Somerville. Stated as a question:

How can the HHS doctoral resident help HHS, SPS, and CBOs build the cross-sector operational capacity needed to develop a city-wide coordinated system for the children and families in Somerville?

This is my core research question, and the rest of this paper presents my research, findings, and conclusions.

REVIEW OF KNOWLEDGE FOR ACTION

In this section, I review the literature on wraparound models seeking to identify and situate the tenets of such a model as well as the necessary structures for development. The wraparound model is a known evidence-based child and family intervention model, used at the direct-practice level in schools and community settings. As a social work practitioner, I have used the wraparound model as an intervention to help individual schools better serve children. Now I am interested in learning how the model can be used at the system-level to better serve children and families. I also hope to learn what makes the wraparound model effective at the system-level.

The Wraparound Model

The term *wraparound* is defined as “a philosophy of care that includes a definable planning process involving the child and family that results in a unique set of community services and natural supports individualized for that child and family to achieve a positive set of outcomes” (Wyles, 2007, 13). The term was first used in 1986 by Lenore Behar to describe a system of personalization and community connections that support people in need (Wyles, 2007, 46). The practice of individual wraparound has flourished and grown as an effective intervention serving hundreds of thousands of children and families nationwide in community settings. The model has been successfully used at the direct

practice and the system levels. Children’s Aid¹ and Communities in Schools² utilize wraparound models in local schools that pursue a “whole child” approach to teaching and learning. Students at community schools have access to services and supports ranging from physical and mental health services from school-based health clients to onsite mental health therapists. Families can access a range of services and supports from English language classes to after-school GED programs. At the system level, organizations such as Harlem Children’s Zone (HCZ)³ and interventions like Promise Neighborhoods⁴ use the wraparound model as a framework. HCZ and Promise Neighborhoods are comprehensive community-based support networks that place children and families at the center of an intervention.

The wraparound model is widely accepted by social workers because it aligns with best practice strategies that place value on a client’s microecosystem and its assets. Similar to social work best practice, the wraparound model emerged from client needs, places high value on community-based approaches, esteems the person-centered perspective, and considers family engagement to be a core component for success. As a result, direct-practice practitioners include components of the wraparound model in individual intervention plans: for child welfare (e.g., Clark, Prange, Lee, et al., 1998);

¹ A nonprofit organization that provides comprehensive services and supports to high-need children and families in New York City.

² A national organization that aims to surround students with caring adults and supportive services in a school setting, to empower students to excel in school and life.

³ A nonprofit organization with a mission to provide transformational community change in children from birth to college graduation. HCZ provides comprehensive support to children and families through educational, social service, and health programs.

⁴ A federal government program enabling grantees to develop an ecosystem of support that provides children and youth with great schools and strong systems of family and community support from birth to college and career.

juvenile justice (e.g., Carney & Buttell, 2003); disability, mental health, and the education fields (e.g., Malysiak, 1998; VanDenBerg, Bruns, & Burchard, 2003; Wyles, 2007, respectively). The wraparound model has proven to be an effective intervention that transcends community settings and professions at both the system and direct-practice levels.

Ten Principles of Wraparound

As noted, the wraparound model has been used as a core component of system-level and direct-practice intervention plans, as well as within the government sector. Human service agencies have used the model's ten guiding principles as an evidence-based practice framework for addressing the needs of children and families. Research indicates that the ten process principles of wraparound (see Appendix A) should be honored when implementing an intervention (Burns et al., 2004, 339-342; Wyles, 2007, 46). According to Walter and Petr (2011), these principles are:

Principle 1: Family voice and choice; the belief that youth and family must be partners at every level of the intervention process.

Principle 2: Youth and family team-based approach; a team-driven process whereby it connects all aspects of the child, family and their community to work together to develop, implement, and evaluate an individualized success plan.

Principle 3: Natural supports; the wraparound intervention plan must include a balance of formal services, informal community and family supports.

Principle 4: Collaboration; the wraparound intervention plan is developed and implemented on an interagency and community level.

Principle 5: Community-based approach; the intervention must be based in the community and/or school setting.

Principle 6: Culturally competent and appropriate; the intervention must not cause harm to children and families.

Principle 7: Individualized plans; services and supports needed to meet the specific needs of particular children and families.

Principle 8: Strength-based; the services and supports must be built on strengths that meet the needs of children and families.

Principle 9: Persistence or unconditional care; practitioners must be committed to the family and have a flexible approach to serving families with diverse funding streams.

Principle 10: Outcome-based approach; the outcomes are determined and measured for the child, program and system.

The ten process principles of the wraparound model lead to tangible outcomes for children and families. Outcomes include a decrease in the frequency of negative behaviors, a reduction in the placement of youth in highly restrictive settings (Yoe et al., 1996, 23-39; Wyles, 2007, 46), and an increase in less-restrictive educational settings (Eber, Osuch, & Redditt, 1996, 83-99). Other research indicates an increase in school or work engagement and attendance (Hyde, Burchard & Woodworth, 1996, 67-82), an increase in school retention and a reduction in recidivism (Kamradt, 2001, 14-22). The wraparound model is an evidence-based intervention, and if used properly can produce significant results for children and families at both the system- and direct-practice levels.

Mixed-Delivery System and Single Point-of-Entry System

Mixed-Delivery System

A mixed-delivery system is a collaboration of existing programs and providers supported by public and private funding aimed at increasing the number of services and supports accessible to clients and provider capacity (Ready to Learn, Ready for K, 2018).

A mixed-delivery system benefits both clients and providers because it ensures streamlined and coordinated services that improve program accountability and quality (Ready to Learn, Ready for K, 2018), and these efficiencies impact the lives of children and families in need.

In a typical siloed delivery system, clients and providers suffer from fragmented services and supports, misused resources, and a persistent state of need among the most vulnerable. For example, a mixed-delivery, early childhood education model might be a parent and young child with access to a community-based or public-school Head Start, or a public- or private-school prekindergarten, or kindergarten, or a private childcare provider. In Somerville, the mixed-delivery model is a cornerstone in the city-wide wraparound system. If HHS, SPS, and CBOs were to streamline and coordinate services, the results would be increased client access to services and supports and increased provider capacities to administer those unique services to clients throughout Somerville.

Single Point-of-Entry System

A single point-of-entry (SPE) system refers to increasing the efficiency of resources and referrals by making them available through one entity point (Ready to Learn, Ready for K, 2018). The SPE system is the mechanism by which a client accesses and obtains all of the services and supports needed without going to the physical locations or website of multiple agencies. For example, a client who needs housing, food, and job assistance would enter the SPE system at one physical location or online system and have all his/her needs met without going to multiple places in the city to obtain

support. The benefits of a SPE system are a centralized knowledge base that contains records, locations, and well-coordinated services (Ready to Learn, Ready for K, 2018).

In Somerville, an SPE system would complement and make possible the mixed-delivery system. In the Somerville client context, an SPE system refers to multiple points of entry, or ensuring there is no “wrong door” to enter and receive needed services. For Somerville children and families, the SPE system can drastically improve quality of life.

Somerville’s city-wide wraparound model does not exist without a mixed-delivery and single point-of-entry system. One function of a mixed-delivery system is to coordinate the services and supports of HHS, SPS, and CBOs so as to streamline access for clients and prevent service redundancy among providers. The SPE system gives clients multiple points of entry to access services and provides coordinated provider connection for service delivery. The city-wide wraparound system has an impact because of the core mixed-delivery and SPE components, both of which ensure that there are no barriers for clients who wish to access services and provider delivery. The status quo in Somerville means it has no mixed-delivery and SPE systems, and both clients and providers suffer from fragmented services, botched or unavailable resources, and a persistent occurrence of people in need.

System Thinking Framework

In this section I review the literature on the “Strategic Triangle,” a system thinking framework (Moore, 1995, 72), to help me answer three questions at the center of my strategic project:

1. How do I understand a city (e.g., Somerville) and the three distinct sectors operating within it? Each sector has its own leadership structures, funding streams, and products.
2. What data should be gathered and utilized to build a cross-sector team?
3. What elements might hinder my project from being completed?

I will consider first the Strategic Triangle, which I hope will help to suggest a new system thinking and organizational change model in Somerville.

Strategic Triangle

The Strategic Triangle (see Appendix B) gives public managers a framework for engaging in deep “analysis of the external demands and of the internal capabilities that helps managers understand why their organization function” (Moore, 1995, 72). Moore proposes three interconnected questions that I will use for my analysis: (1) Is the product or service publicly valuable? Specifically, is the manufactured product or service valuable to the supervisor and citizenry? (2) Is the purpose politically and legally supported? This question covers the legitimacy of authorizers either through funding or support. (3) Does the purpose have administrative and operational feasibility? Simply stated, does the organization have the human capacity and assets to develop the proposed value for public consumption? The Strategic Triangle framework enhances the ability of public managers to measure value creation by highlighting three key areas of an organization: public value, legitimacy and support, and operational capacity (Moore, 1995).

To answer these questions, public managers must do three things: (1) examine their authorizing environment for fluctuations in their legitimacy and support. (2)

investigate the task environment or job for problems that may hinder public consumption.
 (3) assess the organization's operations for promising efficiencies in operational capacity
 (Moore, 1995, 72).

For my strategic project, the Strategic Triangle provides a coherent system thinking framework to help me understand Somerville's sector organizations: government, education, and community. Using the framework, I will be able to measure achievability, and know the steps needed to develop a city-wide wraparound system across three distinct sectors based on the organization's public value, legitimacy, and support and operational capacity.

Collaborative Action Models

In this section I review the collaborative action literature, seeking answers to four critical questions at the center of my theory of action:

- (1) How do I develop cross-sector collaborative action?
- (2) Can collaborative action lead to increased and/or improved operational capacity?
- (3) What are the unique features that make collaborative action models distinct?
and
- (4) What are the major collaborative action models that might be applied in Somerville?

Based on my research and the literature on collaborative action, two models stood out as possibilities that could advance my strategic project: the Collective Impact model

by Kania and Kramer (2011), and the Partner/Build/Grow model from the Center for Health and Health Care in Schools (2015).

The Collective Impact Model

The Collective Impact (CI) model is based on “the commitment of a group of important actors from different sectors to a common agenda to solve a specific social problem” (Kania & Kramer, 2011, 36). CI solves two intersecting problems: complex social ills, and the inability of isolated individuals to make system-level change (Henig et al., 2015, 27). At the core of the CI model is the belief that social change is more likely to happen with cross-sector coordination than with an isolated impact. In isolated impact, individual organizations locate and fund interventions to address specific social challenges such as poverty or prison reform (Kania & Kramer, 2011, 38). Isolated impact often fails because it relies on a single agency that has limited resources and capacities to solve complex and interconnected social problems. For example, the nonprofit sector, with limited resources and capacity, earnestly tries to solve America’s urban housing inadequacy and help students of color obtain positive academic achievements. Despite some successes by nonprofits in both areas, there are still major loses that impact millions of Americans. Kania and Kramer (2011) state: “No single organization is responsible for any major social problem, nor can any single organization cure it” (38).

To adequately address today’s complex and interconnected social challenges, a shift is needed, away from isolated impact to “intentional and structured coordination of pre-existing community assets to meet needs in a systemic comprehensive manner” (Henig et al., 2015, 27). CI acknowledges this and provides a means to address the fact

that no single sector is responsible for today's current social problems, and that no sector by itself can ameliorate the conditions. This is the crux of why I choose collaborative action as the foundation for my strategic project. Somerville is wrestling with multiple social challenges that affect children and families, and if the city truly hopes to remove those challenges, it will require cross-sector collaboration.

Five Conditions of Collective Impact

Kania & Kramer (2011) offers five conditions of collective impact (see Appendix C) that lead to social change and coherency across sectors:

1. *A common agenda*: all members of the alliance need to share an understanding of the problem and agree upon an approach to solve it.
2. *Shared measurement system*: established for alignment and accountability purposes. All members of the alliance need to agree on common success measures.
3. *Mutually reinforcing activities*: alliance activities are coordinated to avoid overlap.
4. *Continuous communication*: the aim is to build trust by developing a common objective and building and maintaining motivation. Participants have to be in constant contact with each other.
5. *Backbone organization support*: a separate organization is needed to provide the administrative, logistical, and coordinating support necessary to build and maintain a thriving partnership. Collaboration only occurs with a supporting infrastructure.

Together, the five CI conditions usher in cross-sector coherency and capacity to address complex and interconnected social challenges.

Partner Build Grow Model

The Partner/Build/Grow (PBG) model is another collaborative-action model designed specifically for developing and sustaining school-connected initiatives by the Center for Health and Health Care in Schools (CHHCS) at the Milken Institute of Public Health, George Washington University. CHHCS integrates health, education, and family systems by facilitating communication and coordination among cross-sector stakeholders to drive collective action for improved health and education outcomes. The PBG Action Guide is a practical toolkit for school and community leaders to use for developing and sustaining school-connected initiatives that promote students' physical and mental health, social-emotional development and educational success (CHHCS, 2015).

PBG's Four Interconnected Prongs

The PBG Action Guide details four interconnected prongs to align and sustain school-connected efforts and resources that enable children to succeed through collaboration and system change (see Appendix D). Moreover, it focuses the efforts of practitioners and system-level leaders on cross-sector collaboration by providing practical and actionable steps. The four steps are:

Step 1: Build an action team that will help people engage with cross-sector partners. This is done by prioritizing networking through strengthening relationships with cross-sector stakeholders in community-based organizations, education, government, policy makers, and elected officials. In addition, sustaining relationships with community members who share your goals, have political sway or who have the ability to navigate system-level policies and procedures is important.

Step 2: Map assets to develop an action plan for your specific context. Mapping assets builds on the strengths of effective school-led and community-based programs in the community. The act of mapping resources with cross-sector stakeholders builds relationships and helps to identify existing programs and resources to uncover gap and opportunities for improvement.

Step 3: The third step connects with the policy environment to access viable financing and regulatory strategies. Taking this step requires a consistent, up-to-date knowledge of the policies that impact initiatives, as well as building relationships with policymakers who can influence policies that are critical to system changes for children.

Step 4: Communicate to create messaging objectives. Communication emphasizes the need to have a flow of positive messaging to garner support from strategically targeted audiences in the public and specific constituents who have control over assets and actions. (Center for Health and Health Care in Schools, 2015)

The four-prong strategy is a framework that can be used in multiple settings to start a new or sustain an existing initiative.

Framework: Six Fundamental Tenets of Cross-Sector Collaboration

In addition to the four-prong approach, the PBG model incorporates a sustainability framework that include six fundamental tenets of cross-sector collaboration.

Tenet 1: The whole community is responsible for providing the environments and supports for children's success.

Tenet 2: No one sector can do the work alone.

Tenet 3: Develop and define a vision and goals across sectors to obtain the best results.

Tenet 4: Take a system-based approach to reap the best results.

Tenet 5: Planning is necessary and time consuming, but vital for success.

Tenet 6: Cross-sector sustainability requires a paradigm shift because it embraces systems integration – a focus on prevention and intervention; changes in practices, procedures, and formal policies; new resources, coordination or reallocation of existing resources; and continuous evaluation and refinement. System integration is necessary to improve strategies and fit an ever-changing context (Center for Health and Health Care in Schools, 2015).

A Theory of Action

My theory of action is grounded in Moore's (1995) Strategic Triangle and its core components of public value, legitimacy, and support and operational capacity. With the Strategic Triangle, I can articulate a coherent problem of practice that directly informs my theory of action (further details on the Strategic Triangle and how I used the framework are located in the Description of the Strategic Project). Lastly, I combined two collaborative action models, Kania's & Kramer's Collective Impact (2011) and CHHCS' Partner Build Grow Action Guide (CHHCS, 2015), as the basis for my theory of action in order to build the collaboration needed for HHS, SPS, and CBOs to increase their cross-sector operational capacity into a city-wide wraparound model. Visually, my theory of action looks like this (see Table 2):

Table 2: My Theory of Action

IF I:	<ul style="list-style-type: none"> • Engage and learn from HHS, SPS, and CBOs about community assets/SWOTs to current services and supports in Somerville; and • Lead and facilitate HHS, SPS, and CBOs efforts to articulate and agree on a common vision and set of goals for a city-wide wraparound supports system that can benefit all students and families; and • Lead the cross-sector partners in developing and committing to a collaborative implementation plan for a city-wide wraparound service system;
And if I	<ul style="list-style-type: none"> • Work with cross-sector partners to develop an effective implementation and evaluation plan; and • Work with cross-sector partners to develop a set of short- and long-term sustainability and resource strategies; and • Design with cross-sector partners a communication strategy aimed to inform and engage community on the implementation, evaluation, and sustainability progress;
Then	<ul style="list-style-type: none"> • Somerville will have the cross-sector operational capacity needed for an innovative, city-wide wraparound system that integrates and sustains services and supports to benefit all students and families.

Source: capstone author

When implementing my theory of action, I will follow the PBG Action Guide's six items to be considered for building, partnering, and growing cross-sector collaborations.

Below, I explain each Consideration and indicate my part in realizing the success of each one. The Considerations are:

Consideration 1: Develop a network of organizations and individuals who have a vested interested in the work, plus an action team that will strive to advance the initiative over the long haul.

My Part: To advance the initiative, I will co-lead a committee of cross-sector individuals who possess deep knowledge of their agency and make a strong commitment to their clients. It will be from this committee that I will develop an action team who will help me advance the initiative.

Consideration 2: Develop a broad goal that encompasses multiple sectors and problem areas.

My Part: Implement the broad goal of a city-wide wraparound system that will bring cross-sector individuals and organizations to the table.

Consideration 3: Determine and define the terms to be used and how they will communicate my initiative among partners and targeted audience.

My Part: One of my first activities will be to lead the committee to completion of how we collectively define terms and develop a communication strategy for our stakeholders.

Consideration 4: Understand the work context, i.e., people, resources, policies, and practices.

My Part: Undertake a SWOT analysis with the committee. Before doing that, I will have conducted my own SWOT analysis.

Consideration 5: Develop strategies to reach our goal. Is there a disconnect between resources and challenges? What issues impacts our goal?

My Part: I will follow my theory of action and rely on the wisdom and expertise of supervisors and committee co-leads.

Consideration 6: Collect information to evaluate the success of these strategies, otherwise make adjustments to achieve success.

My Part: I plan to use exit tickets, which will allow committee members to provide immediate feedback and recommended adjustments. It is important to appreciate each step dynamic and iterative process because it will allow me to build on previous committee work and success (Center for Health and Health Care in Schools, 2015).

DESCRIPTION OF THE STRATEGIC PROJECT

As I began my residency in July 2018, and even before I could think about building a city-wide wraparound system, I realized that learning about Somerville as a community would be critical to understanding my Strategic Project. I had limited knowledge of the city's public-school system, its key players, and current initiatives. I knew very little about how government agencies functioned in the city, or anything of their assets and challenges. Finally, I had no knowledge of Somerville's nonprofit community. My first critical step was to engage with Somerville's stakeholders and institutions in a meaningful way. So I decided to situate myself and the residency in two phases: organizing to learn, and organizing to execute. I was virtually certain that when I had gathered enough information during the learning phase, I could accurately develop and implement my theory of action in the Execute phase. Both of my strategic phases were centered at the core of a strategy that combined both my research and practice knowledge.

Phase 1: Organizing to Learn

Organizing myself to learn consisted of stakeholder interviews, study visits, and research. In July and August 2018, I conducted 30 interviews with key stakeholders from Somerville Public Schools, city government, and local community-based agencies to learn about Somerville's history, current affairs, and the status quo and future of services and supports to children and families. As a social worker trained in the ecological

perspective or person-in-environment, viewing and understanding a client in their environment is where I place high value. Within this framework I was able to understand the complexities of Somerville and not confuse its functions as a municipal government.

Phase 2: Organizing to Execute

By September I was ready to transition from my organizing to learn phase to organizing to execute, responding to the gaps I had discovered during the stakeholder interviews and study visits. After pressure-testing my theory of action with my supervisor, I began to execute my plan by co-leading (with an early childhood consultant and the program manager for SomerPromise) and facilitating six SPE Taskforce meetings from September to December 2018. The SPE Taskforce was comprised of cross-sector leaders from SPS district, City of Somerville government agencies, and Somerville's local CBO practitioners and directors. Aligning learning and execution was a valuable experience and helpful preparation for implementing my theory of action.

My Resident's Strategy

First Tactic

During the organizing-to-learn phase and before I conducted any study visits, stakeholder interviews, or applied any practice literature, I needed a guiding system framework to help me question, track, and convert my observations into actionable learning. I utilized Moore's (1995) Strategic Triangle framework to analyze the external demands of a city-wide wraparound system and the internal capacities needed to develop such a system in Somerville. Moore's three Strategic Triangle core questions (*public*

value—is there public value in a city-wide wraparound system; *legitimacy and support*—does the city-wide wraparound system have political and educational support; and *operational capacity*—is there operational capacity present to develop a city-wide wraparound system) became a template for every learning and information opportunity I encountered. The insights I gathered from using the Strategic Triangle significantly influenced my problem of practice and theory of action.

Second Tactic

I made great use of my social work practice experience as I conducted stakeholder study visits and interviews. In the first two months of my residency, I conducted in-depth study visits with multiple cross-sector agencies in Somerville. I met with a range of leadership teams and practitioners to learn about their agency, work, and clients. I sought out information that was not on their website, such as how they operationalized equity, and the demographic makeup of their staff and clients.

During this same time, I also conducted 30 interviews with cross-sector stakeholders. Because of my direct-practice orientation, I place a high value on the “boots on the ground” perspective, so I went into detail and took my time with practitioners. I wanted to glean from their practice knowledge related to their clients, their agency, and the city.

As an extension of my strategy, I focused on SPS by joining the Somerville Family Learning Collaborative (SFLC) as part of its strategic planning process (I will explain why later). Joining this strategic planning process enabled me to deepen my engagement with SPS. I learned how the SFLC provides critical supports and services to

children and families while also implementing the SPS's most comprehensive strategy for family and community engagement. I also conducted interviews with other SPS officials including the Early Education Director, the Student Services Director, Assistant Director, Director of Communication and Grants, Curriculum Coordinator K-8, Director of English Language Learner Programs, and Family and Community Outreach and Data Coordinator.

Beyond that, and hoping to deepen my relation to and understanding of SPS, I conducted a similar process within Somerville's HHS Department. I met with the SomerPromise Director, Public Health Nursing Manager, Prevention Services Manager, Shape Up Somerville Director, SomerServe Coordinator, and Manager of Diversity, Equity and Inclusion for the city. Each interaction provided me with insights into how HHS interacts and works with other sectors in the city. My aim was to play a coordinating role in transforming their work into authentic cross-sector collaboration.

In addition to interviewing HHS stakeholders, I also interviewed other city agencies and stakeholders, such as the city's Parks and Recreation Director, SomerStat Coordinator, Planning and Zoning, and Office of Housing Stability teams. Since Somerville has few community-based organizations, I did in-depth study visits with the Community Action Agency of Somerville, and Parenting Journey—two longstanding organizations in Somerville. Conducting stakeholder study visits and interviews were invaluable for understanding the key players and systems that I expected would impact a city-wide wraparound system.

Third Tactic

A third strategy I used in Somerville was to “add value” to an agency that was separate from my Strategic Project. My hope (or bet) was that the work I would perform for the agency would result in some return to my Strategic Project. During my third residency month my supervisor presented an opportunity to work with the SFLC director, the district administrative for Family and Community Engagement, and an independent consultant on the SFLC’s strategic planning process. I had never worked on a strategic plan, but I was willing to learn and be part of the process. Just a month later, I had gained knowledge about leading a strategic planning process and how it affected those in non-leadership roles. Shortly after, I was given the opportunity to present to the entire SFLC staff my research on school-based student support services, community service centers and district-wide wraparound initiatives for children and families. At the end of my presentation I challenged the SFLC’s leadership team to conduct a study visit to Springfield Public Schools’ Parent and Community Education (PACE) Center. This was the first time the entire leadership team and other key stakeholders traveled together to learn from colleagues in the education field who have successfully managed and systematized district-wide student, family, and community support services outside their community.

Upon the team’s return to Somerville, they were very pleased with the new knowledge they had acquired about the student enrollment system called InfoSnap. In Springfield, the SFLC team learned that InfoSnap was used at a high level of sophistication through technology “add-ons” that allowed them to track all students

participating in out-of-school programing and activities. This feature is important because at the core of Somerville's SPE system, the desire is to track and enroll students into out-of-school-time activities and to make recommendations for students who are not enrolled. Because of my desire to "add value" to the SFLC, I was able to increase my knowledge and understanding of Somerville. This knowledge also added value to my strategic project because I gained a fuller understanding of the SPS district, its complex student support services, and insights into SFLC's budgeting process.

EVIDENCE FROM THE STRATEGIC PROJECT

Theory of Action and Evidence

The **first point** in my theory of action stated that I would “engage and learn from HHS, SPS, and CBOs about community assets, and the SWOTs of current services and supports in Somerville.” At our first SPE Taskforce meeting on September 12, 2018, we completed an asset mapping of the Somerville community, and discussed opportunities for progress, as well as weaknesses and potential threats that would hinder the work (see Appendix E). The SPE Taskforce members seemed familiar with their own SWOTs, so when we came together, SPE Taskforce members were able to build new insight and perspective from each other, which provided a deeper level of insight and clarity. We agreed on the strengths of an SPE approach, identified questions for the next meeting, and left with a written record of our agreement on the community’s assets.

The **second point** of my theory of action was to “lead and facilitate HHS, SPS, and CBO efforts to articulate and agree on a common vision and set of goals for a city-wide wraparound supports system that can benefit all students and families.” Over the course of three meetings from September to November, we discussed (a) the benefits of an SPE/wraparound system; (b) models of SPE/wraparound systems in other cities; and (c) crafting language for a Somerville SPE/wraparound mission statement. These meetings produced a mission statement that everyone participated in developing and agreed to, and a one-page communications document to ensure we were on the same page (see Appendix F). These

documents serve as evidence of our cross-sector common vision and goals for a city-wide wraparound system.

The **third point** of my theory of action was to “lead the cross-sector partners in developing and committing to a collaborative implementation plan for a city-wide wraparound service system.” In the October 17 meeting, we developed an SPE/wraparound diagram and provided specifics to the SPE components of access, technology, and providers’ services. The diagram and components were collectively approved as the model to share and implement moving forward (see Appendix G).

Further, for the October 31 meeting we added more details to the organizational and governance structures, as well as determined the funding needed to help ensure the SPE/wraparound system (see Appendix H) would be successful. Producing these two products served as evidence that our work was advancing, and produced concrete evidence of the concept of a city-wide wraparound system.

The **fourth point** of my theory of action stated that I would “work with cross-sector partners to develop a set of short- and long-term sustainability and resources strategies.” In the November and December meetings there was (a) agreement that a technology consultant should be hired to recommend a strategy and implementation plan for integrating the student and family data management systems operating in Somerville (see Appendix I); and (b) a projected phases document developed for the technology consultant based on the SPE Taskforce’s work (see Appendix J). We collectively agreed that once the technology consultant’s job was complete in February 2019, we would move to our next phase—cross-sector financing for SPE/wraparound system. The outcomes and

their corresponding documents serve as evidence for the cross-sector sustainability strategies.

The **fifth point** of my theory of action was to “design with cross-sector partners a communication strategy aimed at informing and engaging the community on implementation, evaluation, and sustainability progress.” Over the course of the final two meetings we solidified the mission statement and approved a one-page messaging document to serve as the communication tool for the SPE Taskforce members’ respective institutions and constituencies. The messaging document summarized the SPE Taskforce’s progress and outlined next steps for implementation and sustainability (see Appendix K).

The **sixth and final point** of my theory of action stated that “Somerville will have the cross-sector operational capacity needed for an innovative, city-wide wraparound system that integrates and sustains services and supports to benefit all students and families.” The evidence that the cross-sector operational capacity had materialized were the products and ideas developed at the SPE meetings. I believe SPE Taskforce members began to realize their potential for building cross-sector operational capacity in the late October and early November meetings, which became evident in the exit tickets surveys. The results showed a willingness of SPE Taskforce members to contribute their unique skills and knowledge to the initiative. Additionally, SPE Taskforce members were willing to add their knowledge and expertise to advance SPE Taskforce members’ individual initiatives that contributed to a coordinated and city-wide wraparound system.

Another example of expanding operational capacity and its impact came when a school district veteran said, “I don’t think we should disband the SPE Taskforce yet.” Other

responses expressed the same desire, and as a result we extended the meetings until the end of the calendar year 2018 (see Appendix L). Some exit ticket responses:

- *Many more people care about these issues than I realized on a daily basis.*
- *We're getting there.*
- *We need to clearly articulate what we want the tech to do.*
- *We are getting closer to clarifying what this will be in Somerville.*
- *This makes me hopeful.*
- *We may need ways to keep others through a long process.*
- *We need a tech expert on our team.*
- *We are moving forward.*

Overall, I believe my strategic project was a success. I made substantial progress in helping to lay the foundation for and build the theoretical model for Somerville's city-wide wraparound system. In addition, the SPE Taskforce spurred movement across the city that aligned with the SPE Taskforce. Somerville's operational capacity increased and the city is prepared to move toward the next phase: hiring a technology consultant.

ANALYSIS OF THE STRATEGIC PROJECT

My Strategy as a Resident

I began by defining and then pursuing a strategy of “organizing to learn” and “organizing to execute” to help develop a system of collecting and analyzing data with the intent to act. I entered my residency faced with a monumental task: coordinate three distinct sectors in the City of Somerville and produce a city-wide wraparound system within ten months. My own prior practice experience and the research literature itself compelled me to resist the urge to jump straight into the work without learning everything I could about the community. I hoped to discover the root causes of Somerville’s complex issues through meaningful conversations with stakeholders. If I had not done that, I might have misdiagnosed the problem and applied the wrong solution. I sought help gathering and arranging new knowledge to distill into a systems framework to implement within my project.

The organizing-to-learn and organizing-to-execute framework provided a learning-and-executing model that helped me engage in deep analysis and problem identification. The knowledge I gathered in the learning phase directly informed my execution phase. I uncovered and addressed the root cause: Somerville’s lack of cross-sector operational capacity. That insight gave me a foundation and direction forward for the next ten months.

Strategic Triangle

The Strategic Triangle was my diagnostic tool, helping me to understand Somerville, the community, and its stakeholders. To do my work well, I needed to have a keen understanding of the operating systems within Somerville. The Strategic Triangle also provided the clarity I needed to deduce the root interference to the success of my strategic project. The completion of my project was based on my belief that a city-wide wraparound system would add value to Somerville. If true, I needed to understand what supports and capacities were needed in order to complete the project. To get this information, I examined all of my interactions and learning scenarios in Somerville through the prism of public value, legitimacy, support, and operational capacity. For each lens of the Strategic Triangle, I had three guiding questions: (1) *public value*: is the purpose valuable to the public; (2) *legitimacy and support*: is the purpose politically and legally supported; and (3) *operational capacity*: does the purpose have administrative and operational feasibility (Moore, 1995)? Using that framework, I gathered clear information to advance my strategic project. Without this information I may not have had clear direction.

Affirming Public Value

In December, the Director of Early Education asked me: “Why do you think the SPE Taskforce meetings have been going so strong?” I responded that everyone around the table understood the value a city-wide wraparound system would bring, and the value-add it would also bring to their respective agency. If the city-wide wraparound system was done correctly, individual agencies would have the opportunity to aid more

clients and receive more funding through expanded operational and administrative capacity. The public value was clear, and everyone understood how the work was connected. This alone was enough to ensure that the project advanced.

At the system level, the project had substantial public value across Somerville's HHS, SPS, and CBOs. HHS recognized this endeavor as an expanding safety net for all people across the city, which aligned with HHS's own mission to serve all Somerville residents from newborn to elderly. SPS and its student support programs and departments would increase in size and capacity to serve and meet the needs of students and families. This would give teachers and education staff more time for teaching and learning, which is always good. CBOs would acquire an enlarged footprint in Somerville by meeting the needs of more clients and enhancing their ability to help clients through better coordination of services and supports. Collectively, all three sectors would have better-managed resources, offering better access to students and families between agencies.

Affirming Legitimacy and Support

Legitimacy and support focuses were my guide as I conducted stakeholder interviews and study visits throughout Somerville. It was necessary to ensure that I had authorization that extended beyond my supervisor because I needed a broad cross-sector network of individuals to help advance my project. To my benefit, my supervisor secured authorization from Somerville's Board of Alderman and the School Committee, before my arrival, in the form of funding and endorsement. Still, I knew my work with those governing bodies was not complete. I needed multiple individuals from both governing bodies needed to know me by name, know my story, and understand how my work would

benefit their community. When I had an opportunity to meet members from the Board of Alderman and/or the School Committee, I made a conscious effort to reaffirm my project's public value, which led to them confirm the project's legitimacy and support, and reaffirmed the need in the community.

Missing Operational Capacity

After meetings with HHS and SPS stakeholders, it became apparent that I was not the first person in Somerville to attempt to expand the service capacity that benefit children and families. My initiative followed other early childhood expansion efforts, and I learned immediately that it behooved me to obtain the support of the Early Education Director—the practitioner who would advance this work.

I also wanted to learn from that earlier initiative's successes and failures. My first meetings in Somerville were with the Early Education Director and I was fortunate to reap considerable guidance and knowledge from him. The previous efforts had produced a strong value proposition, and won the support of their authorizing environment, but the initiative itself did not materialize. Why, I wondered? After asking questions about the Strategic Triangle's operations capacity, I discovered that the individuals who worked on the early childhood expansion project held numerous other roles and responsibilities in their agency, and it was clear that there was insufficient operational capacity to advance the initiative.

Unfortunately, I saw the same stressed capacity throughout the city and in each sector as I asked the same operational-capacity question. In SPS, I noticed that many district-level employees often operated at maxed-out capacity. In a meeting, I was

informed by a SPS colleague that the former district superintendent would brag that SPS staff was extremely lean but nevertheless still got substantial work done. It made me wonder if cross-sector partners would be willing to engage in conceptualizing or even building a city-wide wraparound system—especially after this experience. It was clear, at that point, that Somerville lacked the operational capacity across all the three sectors that would enable it to build a city-wide wraparound system.

Study Visits and Interviews

Study visits and cross-sector stakeholder interviews were a critical component of my learning, problem identification and analysis, and enlisting buy-in from key people. Study visits and interviews were the conduit for me to use the Strategic Triangle's three guiding questions, which effectively lead to my problem of practice. I spoke with cross-sector stakeholder allies who offered their technical knowledge and agency support, which came after I shared my story and showed my interest in hearing their personal and professional stories. I built a level of friendship and understanding that was useful when the time came to assemble SPE Taskforce meetings, but more impactful when we developed Somerville's city-wide wraparound system. I would have not advanced my strategic project, if I would have not built rapport with cross-sector stakeholder through study visits and interviews.

After developing that rapport, I asked these key people to review and critique my problem of practice, and my perception of Somerville and the city-wide wraparound system. Their responses provided alternative perspectives that allowed me to pressure test my own thinking, which in return was beneficial to my learning and execution of the project.

Adding Value

Adding value is a commitment I internalized in social work graduate school. This tool allowed me gain acceptability and legitimacy due to the new value I brought. For me, acceptability and legitimacy are vital in change management – the work I was engaged in Somerville. Adding value requires me to be open to unknown possibilities, even if my workload increases as a result. When I committed to adding value to the SFLC, I had no idea what form that commitment might take or how it would materialize. I was open to whatever opportunity presented itself. My rationale behind that unknown “leap of faith” was my belief that my contribution would, with direct or indirect impact, return me to my strategic project. I did not know how, but this was a bet I was comfortable placing. Working with the SFLC forced me to see cross-sector connections outside of the Department of Health and Human Services. Moreover, I built relationships with the SPS family and community engagement stakeholders who would eventually advance the work of the SPE Taskforce.

In my final presentation to the SFLC’s leadership team, I recommended that they undertake a study visit to the Springfield PACE Center. Upon their return, the team shared that InfoSnap—the same enrollment system used in Somerville—was also being used, at a higher level of sophistication, in Springfield through technology “add-ons.” This enable the Springfield PACE Center to track all of their district students who were participating in after/out-of-school programs and activities. This was a critical component for the SPE Taskforce because it answered one of the main issues facing the SPE Taskforce: how can we use existing resources in Somerville to help track students

participating in after/out-of-school programming? My value-add approach in Somerville was a benefit to the SPE Taskforce.

Implementing and Revising the Theory of Action

My Theory of Action as a Guidepost

Implementing my theory of action at the SPE Taskforce meetings was the last component of my strategy. Using the CI and PBG models as key component, I was able to advance the SPE Taskforce. Both models center on cross-sector collaboration with an aim to benefit children and families from social challenges. It behooved me to develop my theory of action after existing collaborative action models. Before each SPE taskforce meeting there was an SPE leadership planning meeting with two colleagues—an independent consultant and the SomerPromise program manager. In our planning meetings, my theory of action was the planning guide for each SPE Taskforce meeting. For each component of the theory of action, there was a corresponding activity. For example, in the first SPE taskforce meeting, I led an activity that combined an asset map and a SWOT analysis that served as the SPE Taskforce collaborative document of cross-sector assets and SWOTs for children and family in Somerville. My theory of action was simple and concrete, and as a result I was able to use it as a guidepost for the SPE taskforce meetings.

Revising My Theory of Action

Looking back today, I would eliminate the redundancy in my theory of action. For example, in the first section, point three states that I would “lead the cross-sector partners in developing and committing to a collaborative implementation plan for a city-wide

wraparound service system.” In the second section, point one states that I would “work with cross-sector partners to develop an effective implementation of plan and evaluation of results.” Both of these points are closely aligned and could be construed as the same, the only (subtle) difference being the evaluation component. When it came time to actually do the work, I could not decipher the distinction originally intended. To make my theory of action clearer, I added the evaluation plan to the first section and eliminated the entire first point in the second section. The revised theory of action is shown in Table 3.

Table 3: A Theory of Action, Revised

IF I:	<ul style="list-style-type: none"> • Engage and learn from HHS, SPS and CBOs about community assets and SWOTs impacting current services and supports in Somerville; and • Lead and facilitate HHS, SPS, and CBOs efforts to articulate and agree on a common vision and set of goals for a city-wide wraparound supports system that can benefit all students and families; and • Lead the cross-sector partners in developing and committing to a collaborative implementation and evaluation plan for a city-wide wraparound service system;
And if I	<ul style="list-style-type: none"> • Work with cross-sector partners to develop a set of short- and long-term sustainability and resource strategies; and • Design with cross-sector partners a communication strategy aimed to inform and engage the community on the progress of implementation, evaluation, and sustainability;
Then	<ul style="list-style-type: none"> • Somerville will have the cross-sector operational capacity needed for an innovative, city-wide wraparound system that integrates and sustains services and supports to benefit all students and families.

Source: capstone author

Three Reasons for Success

The insights I gathered from the Strategic Triangle were the foundation of my problem of practice. My theory of action was a direct response to my problem of practice. The outputs that were produced in the SPE Taskforce meetings are examples of the collaborative cross-sector operational capacity we developed. All of the SPE Taskforce meeting outputs required the contributions of the cross-sector partners.

The strategic project I led in Somerville was a success for three key factors:

1. the **connection** of the city-wide wraparound system to SPE Taskforce members' work;
2. the **expanded operational capacity** brought by the doctoral resident and developed across sectors; and
3. the **deliberate planning process** of both the SPE leadership and Taskforce meetings.

Combined, these three factors resulted in the concrete success of the SPE Taskforce meetings.

Connection to the SPE Taskforce

At the first SPE Taskforce meeting there were 12 to 15 people present, which was also true for the following meetings. This high level of attendance was unexpected, and I did not understand why initially. After a few conversations with SPE Taskforce members, I realized that one reason was the connection participants were able to make between cross-sector partners and city-wide wraparound system. If the system was built and functioning, cross-sector partners could increase their client access and funding opportunities, and

expand their organization's capacity. If children and families in Somerville could access services through multiple points of entry and received streamlined and coordinated services through partnering agencies, then in theory those clients would obtain services sooner and agencies could increase their capacity to serve even more clients. There would be no waste in services, capacity, or capital because of inefficient and/or limited resources. Cross-sector stakeholders understood the value connection between their organization and the success of the city-wide wraparound system, and as a result all of them became committed to the process.

Expanded Operational Capacity

The second component that was instrumental to the SPE Taskforce success was the expanded operational capacity brought by the doctoral resident and developed across sectors. During my organizing-to-learn phase, I noticed every sector included individuals with multiple job roles and responsibilities, but no single person was responsible for planning a new city-wide system or considering how to operate it.

As the doctoral resident, my task was to develop and implement the city-wide system by building cross-sector operational capacity. I closely followed my theory of action plan to help Somerville develop a system by building and facilitating cross-sector operational capacity. I wanted the cross-sector stakeholders to be engaged with every aspect of the system. Furthermore, cross-sector stakeholders put their trust in my ability and commitment to advance the work because of my prior experience in St. Louis. The expertise and capacity I brought allowed cross-sector stakeholders to be fully engaged and present during the biweekly 90-minute SPE Taskforce meetings without having to

take substantial ownership or responsibility for developing the entire system. Stakeholders could be invested in the SPE Taskforce work and still be fully active in their respective job responsibilities.

Deliberate Planning Process

The third component was the deliberate planning process of SPE leadership and Taskforce meetings. Before the first SPE Taskforce meeting in September 2018, the leadership team had two planning meetings in which we aligned our mission, objectives, and desired outcomes for the Taskforce meetings. As a result of these leadership meetings, I gained an understanding of each leader's strengths and a better understanding of each one's role in advancing the city-wide system. This was important because it enabled us to leverage our strengths in the SPE Taskforce meetings.

After the first successful SPE Taskforce meeting, the leadership team set two planning meetings before each SPE Taskforce meeting. We recognized that if we were aligned with the mission and the meeting objectives, and had a clear guide to the technical and adaptive work needed, then everyone would leave the SPE Taskforce meetings knowing that they had contributed to advancing the system. Equally important, the meeting was not a waste of their limited time.

We were projected to have only four SPE Taskforce meetings: one in September, and three in October. However, the Taskforce members asked that we not end our work prematurely. So, we added two more meetings, one each in November and December 2018. I believe the request for additional meetings were a testament of how well we had planned and executed the earlier meetings. By the end of 2018, I had participated in 12

SPE leadership meetings, 6 SPE Taskforce meetings, and countless meetings that required me to partner, build, and grow relationships to advance the city-wide system. The additional meetings allowed the SPE Taskforce to dive deeper into the granular details and engage in discussions around the governance, function and funding of the city-wide wraparound system.

The Next Phase

The SPE Taskforce was a success for three reasons: (1) the cross-sector partners' connection to the city-wide wraparound system. The partners realized that if the system succeeded, so would their agencies; (2) the expanded operational capacity that was brought by the doctoral resident and developed across sectors; and (3) the deliberate planning process that took place in both the SPE leadership and taskforce meetings. The combination of these factors ensured the success of the SPE Taskforce.

By the end of the sixth SPE Taskforce meeting, there were a number of accomplishments that exponentially advanced the planning phase of the city-wide wraparound system. The city-wide wraparound system was renamed "SomersLink," with a mission to provide connections to and between all resources and activities available in Somerville, both public and private, in order to streamline and ensure equitable access for everyone to programs.

There are three components to the SomersLink model:

- access: the entry point for children and families to access services and supports;
- technology: the integrated technology hub where assessments, registration and data are stored; and

- provider connections: where cross-sector providers receive client referrals, and also the point of the delivery of service.

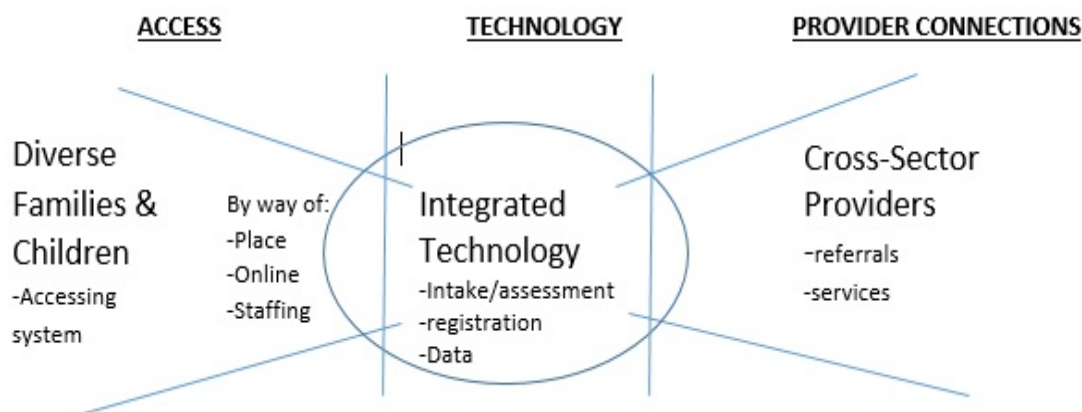


Figure 1. SomerLink/SPE Structure

Source: developed by members of SPE Taskforce

The SPE Taskforce realized that it had gone as far as it could without the guidance of a technology expert. To that end, we developed a request for proposal for a technology consultant to: (1) conduct a feasibility study of the integration and use of existing data/information management systems in Somerville; (2) suggest a phases-of-work expansion with incremental steps to increase capacity and access to SomerLink for clients and providers; and (3) consult with key stakeholders who have Somerville provider and landscape access and knowledge. It is our hope that information and guidance from the technology consultant will guide the next phase of planning and development for the city-wide wraparound system.

IMPLICATIONS FOR SELF

The City of Somerville provided me with sound learning and leading opportunities that have furthered my practice experience and expertise. Working in a city Department of Health and Human Services helped me gain a better understanding of the system-level nuances needed in order to address resident health and wellbeing issues. I now have experience with advocating for children and families through policy creation; I have developed prevention and education materials for multiple stakeholders. Leading cross-sector collaborations between a school district, a city government, and community-based organizations is complex and risky, but also extremely rewarding. This residency provided me with three learning implications that are important for my continued professional development.

1) Information is Key

When I began the residency, I lacked clarity about who I would be working with on my strategic project. I did not ask enough questions to learn if I would be working with others. If I needed to engage more people, who were they and what was their relationship to the work and community? A month into the residency, I was told I would lead a cross-sector committee. Then I learned that I was a part of a three-person leadership team comprised of the SomerPromise program manager, an independent early childhood consultant, and myself.

In August, at our first SPE leadership planning meeting, I felt uncomfortable and unsure of my role and contribution to the work. I tried to fight through this discomfort and lead a discussion on the meeting's objectives and outcomes, but it did not go well. That caused me to question my status, certainty, autonomy, relatedness, and fairness—the SCARF threats (Rock, 2008)—as those elements related to my two new colleagues. Another potentially complicating element was the fact that I am a black male who was leading meetings in which the other two members were older white women. After analyzing my own feelings, I realized it was possible that my status as the lead was threatening to the two women. I did not know either one (they did not appear as part of my organizing-to-learn phase), and I had no idea how we would work together to accomplish the tasks at hand. Based on my (at that time) limited experience in Somerville, I needed to know how they defined and lived diversity, equity, and inclusion. These were “hot topics” in Somerville, especially equity, which was wildly and oddly defined throughout the entire city.

After a meeting with my supervisor, I made a few mental course corrections by the second SPE leadership planning meetings. I had to acknowledge and address my SCARF threats and examine the meeting situation through a different lens. I challenged myself to look at my personal agency, interrogate my emotions, and acknowledge to myself that I had both experience and expertise in the content areas—which meant I did not have to force my leadership. Furthermore, once I got to know my two new colleagues, I found they were extremely kind and knowledgeable, and we shared our background stories. This situation added further perspective to my personal leadership journey: that knowing the race and ethnicity of colleagues I will be working with is

important to me, as a black male, living in a racialized society, especially in this current era.

2) Embracing Cross-Sector Risk

During the Return to Campus Visit II, after hearing from colleagues about the risks they were taking at their sites and in their strategic projects, I began to wonder if I was taking enough risks in my residency. I brought my concern to my capstone advisor who assured me that indeed, the cross-sector space I was operating in for children and families was quite risky. He reminded me that the cross-sector space has little direction for successful navigation and there is no guarantee that every collaborative effort will be fruitful for children and families. After the conversation, I realized that I embraced the risks because I did not see them as risks; I saw them as opportunities to partner, build, and grow on behalf of children and families.

I worked successfully at the nexus of education, communities, and social work for six years in St. Louis. I forged new partnerships, built new bridges, and grew existing relationships across K-12 education, as well as in government, business, philanthropy, higher education, and nonprofit on behalf of children and families. I enjoyed the work because I knew who I was working for, and I knew that my work had positive impacts. There, as in my Somerville experience, was no model to follow. No city has developed a system-level wraparound model that integrates the resources of the government, education, and community sectors. Despite this fact and challenge, I enjoyed the work in Somerville and never saw it as risky.

Through my residency, I learned that nothing is riskier than working in the cross-sector space. It is a challenge to coordinate and collaborate with distinct organizations across

sectors. Building value propositions for multiple sectors, and garnering their resources as an investment, are not easy tasks. I learned that my work is not about building cross-sector coalitions but instead creating operating systems that impact the practice level for children and families; such systems did not exist before. Therefore, I am fortunate that I have the opportunity to embrace the risk on behalf of children and families.

3) Relationships as Valuable Currency

I place a high value on relationships because I believe they are my life currency. Everything starts and ends with and through relationships. Conducting interviews and study visits in the community was a major component of my onboarding strategy. During those engagements I got to know individuals by name and story in every sector. I shared pieces of my own life story as we built rapport together. I saw their passion and commitment to the work and population they serve. At the end of our storytelling, we often ended up at a place that Marshall Ganz (2011) called “the story of now,” as we developed a city-wide wraparound system for Somerville’s most vulnerable children and families. Each individual I met offered his/her assistance in whatever way might advance my project. Through my Somerville residency, I reaffirmed to myself that relationships are my currency of choice.

IMPLICATIONS FOR THE SITE

Somerville is at an interesting crossroads because of demographic and socioeconomic shifts that occur continuously with the influx and outflow of its residents. City leaders have a heightened awareness of institutional neglect and potential inequities that exist in several sectors of the city. These challenges have resulted in a willingness to try new interventions, especially as the leaders realize that what was done in the past is insufficient or not working today.

Cross-sector collaboration is one of the new interventions undertaken in the city, particularly with children and families. Based on my experience and observations in Somerville, if the city wants to realize the benefits of cross-sector collaboration on behalf of children and families, it will need to invest in service delivery and added administrative operational capacity. Furthermore, cross-sector collaboration needs to be esteemed as a core value, individually and collectively, across the sector. Both of these recommendations center on developing sustained operational capacity for cross-sector collaborative action that will benefit children and families.

Expanding Operational Capacity

When I entered my residency, I used the Strategic Triangle to help define my problem of practice, which in turn framed my theory of action. Somerville lacked the cross-sector operational capacity to develop a city-wide wraparound system. If Somerville is to sustain and further advance cross-sector collaboration to benefit children

and families, it will need to invest in increased capacity. The city needs both administrative and service delivery operational capacity to ensure that the city-wide wraparound system is functioning and, more importantly, that children and families obtain the services and supports they need to thrive.

As mentioned, I brought my own experience and expertise to Somerville and together we expanded the city's capacity to plan a city-wide wraparound system, and there was measurable success based on my work. However, I am not permanent, and of the two colleagues who were working with me, one is a consultant and the other is a part-time city employee. Neither has the capacity to lead and steer this work alone. Similarly, an unspoken (and unresolved) question in the SPE Taskforce meetings was: Does Somerville have the service delivery capacity to meet the needs of children and families? Unfortunately, I believe the answer is no.

SomerPromise, which is housed under HHS, is one of the few true cross-sector organizations that exist in Somerville. If it had access to increased human and capital resources, I believe it could serve Somerville in an administrative capacity and spearhead the expansion of the service delivery operational capacity. SomerPromise is well-positioned to do this because of its physical location in a school district building, as well as its ability to leverage its position by leading and funding initiatives with schools, district administrators, and school committee members on behalf of children and families. Investing in service delivery and additional administrative operational capacity is a win for children and families, a win for HHS, and a win for the community.

Cross-Sector Collaboration as a Core Value

Cross-sector collaboration is not a new concept in Somerville. However, it seems that the concept only resides with leadership at the system level, and in my experience, it is a struggle to materialize it at the practice level. The same rigor and vigor for cross-sector collaboration at the system level should also exist at the practice level, but it does not. To make this a reality, system-level leaders should lead efforts to enact cross-sector collaboration as a core value in Somerville. Cross-sector collaboration has to be a core value, as it is the best way to impact the lives of children and families. One example of consistent system- and practice-level cross-sector collaboration is at the SFLC. The SFLC's leadership team values cross-sector collaboration by putting it at the forefront of their work, agency meetings, and actionable internal goals. The same commitment can be seen among school-based liaisons and other SFLC practitioners through their school and community-based programming and the ways they access services and supports for children and families.

The same leadership and practice commitment at the SFLC should exist throughout Somerville, in all of SPS, HHS, and CBOs. There are some technical and adaptive solutions needed in order to make this happen.

Technical:

- Develop a performance indicator for cross-sector collaboration. A performance indicator can track and measure cross-sector collaboration that benefits children and families.

- Hold system- and practice-level individuals accountable by establishing SMART goals—specific, measurable, attainable, relevant, and timely—that align to cross-sector collaboration. Everyone has to be accountable.

Adaptive:

- Hire department directors and program managers based on their ability to articulate the need, and their aptitude for leading and sustaining cross-sector collaboration.
- Develop a new role or expand the capacity of an existing role to include responsibility for cultivating and facilitating cross-sector collaboration. I see these as intrapreneurial roles with program development, evaluation skills, and experience working with school administration and teachers.

Somerville needs stronger cross-sector collaboration for children and families, and it has to be viewed as a core value.

IMPLICATIONS FOR THE SECTOR

The cross-sector space is comprised of multiple sectors working together for a common purpose. The space is not new given the many historic partnerships this nation has implemented between government, nonprofits, and communities to solve complex social problems. I appreciate the nexus of education, government, and community because I believe such collaboration has the ability to make a difference for children and families. I have been fortunate to work at the helm of the nexus through state and city government departments of HHS. In both the State of Virginia and the City of Somerville, I was given opportunities to lead projects that had an impact on children and families while also requiring considerable learning and leading on my part.

Training in the Cross-Sector Space

There is a real need for cross-sector collaboration, if only to simply use the best knowledge and tools from each sector to address pervasive challenges. As the demand increases for collaboration across sectors to solve complex problems, there will be a need for individuals who can lead across sectors. Working at the intersection of multiple sectors requires distinct technical and adaptive skills that are not common in the traditional knowledge base of educators, government employees, or community workers. Cross-sector organizations need to collaborate and train individuals to work and lead in the cross-sector space. All three sectors—education, government, and community—will have to teach their staff and leaders the basic competencies needed to work across

dysfunctional agencies, lead cross-sector collaborations with marginal authorizations, and use system-level frameworks to help bring understanding to complex problems and projects. Furthermore, each sector's leaders can contribute crucial knowledge that will be needed to successfully navigate a respective sector. I firmly believe that cross-sector organizations must combine their efforts and train individuals to lead and work successfully in the cross-sector space.

Positioning in the Cross-Sector Space

In both of my cross-sector learning and leading experiences, I was positioned to work in state and city HHS departments. In both instances, the departments gave me autonomy and support, backed by their mission to meet the health and well-being of residents, and to advocate for children and families. At the Virginia State Department of HHS, I led cross-sector collaborations with social work programs from three universities. In Somerville, I led not only the development of the city-wide wraparound system, but I also worked on developing policies and prevention materials related to issues affecting the health and well-being of children and families. My work extended to creating a policy for adult-use recreational marijuana by ensuring that such policies protected children. I provided research and co-developed marijuana, vaping, and cigarette cessation, prevention, and education materials for presentations for children and families.

Through these experiences I learned that youth and family programming and city policies are dependent on one another. My Somerville experiences gave me the opportunity to enlarge my cache of work experiences centered on the health and wellbeing of children, which ultimately has a strong impact on their education. I am

convinced that I would have not been given the same opportunity to develop public value or access to resources, and be encouraged to create appropriate solutions for children and families if I was positioned in the larger education sector.

I believe the best position for working on behalf of children and families and leading cross-sector collaboration is in HHS departments. Traditionally, educators take a limited focus on child and family. For example, school districts prioritize family engagement if it is part of the school district's theory of action for the students' academic success. Teaching and learning are typically the sole spaces for schools, and it has taken educators some time to realize that in fact schools are perhaps the most ideal space for addressing the social factors that have such a strong influence on education: housing, poverty, food insecurity, etc. However, most teachers do not have the capacity to address these distinct needs, and many school districts have not placed a value on hiring school social workers and other support staff to address issues like these that follow children to school, in school, and after school.

The opposite is true for individuals who work in HHS departments. Many have health, social work, public health, and/or related health-field backgrounds, and they understand the implications and impacts of social determinants of health and well-being. In my opinion, it is easier for HHS departments to acknowledge and address the negative barriers preventing teaching and learning and/or the social determinants of education. The major drawback is that these professionals may lack the education and understanding that education agencies and professionals possess. Given recent innovations in education programs for professionals, I do not believe this will continue to be a barrier for HHS professionals seeking to obtain further education, knowledge, and expertise. If

individuals want to impact education beyond traditional teaching and learning, HHS departments should provide the opportunity.

Access to Cross-Sector Resources

My last implication rests in the education sector and how it accesses services and supports for children and families. I have found that school districts and schools can be hard to partner and collaborate with due to numerous internal and external challenges. For example, schools face state-level pressure to standardize testing, as well as strict demands for teaching and learning. Moreover, schools do not have the capacity to manage and decide which organizations and programs offer the best aid to children.

That said, I still believe that school districts can better recognize that much of the nonacademic supports, services, and expertise for school-age children come from outside the school district. Some district and school leaders acknowledge that their nonacademic supports come from outside the school. Consequently, these district and school leaders do not place barriers on providers that want to service children, nor do they have noncollaborative school employees leading student support services, or anything that requires interactions with the community and families. There has to be an adaptive paradigm shift for school districts and schools.

Since nonacademic-sector resources are located outside of school districts and schools, and because of the many demands placed on schools, sectors will have to engage in cross-sector learning and agreements to collaborate. Schools will have to place a priority on operational capacity and learn how to connect and access supports and services for students. Government agencies and community-based organization will have

to learn about the multiple challenges and complications of education and how to provide the supports and services for school-age children without disrupting teaching and learning. Together, cross sector organizations can collaborate and win for children and families.

CONCLUSION

In this capstone I have shared my journey of learning and leading in the City of Somerville as the HHS doctoral resident. I was tasked with developing a city-wide wraparound system that integrated the services and supports of Somerville's public-school district, city government, and community-based organizations. With the aid of the Strategic Triangle and collaborative action frameworks I was able to build the cross-sector operational capacity needed for a city-wide wraparound system. Given the success, in the next phase of the work, as the SPE Taskforce continues to advance and develop provider connections to resources and activities for equitable access, cross-sector stakeholders will have to reconcile and analyze the capacity gap between service delivery capacity and collaborative/ operational capacity.

My strategic project centered on building the collaborative/ operational capacity to build a city-wide wraparound system and not the service delivery capacity that meets the individual needs of children and families. As mentioned, there are 5,000 students attending SPS and OSS does not have the capacity at the district or school-level to meet every child and family need. Nor does the SFLC have the capacity to engage every SPS' parent and guardian. When school districts lack service delivery capacity, government and CBOs fill the gaps, however service providers have left Somerville. Failing to acknowledge this gap, given the need of children and families in Somerville, is insufficient and harmful. Cross-sector stakeholders and the Somerville community need to invest and build the service delivery capacity.

To invest and build the service delivery capacity in Somerville cross-sector stakeholders will need time, money and commitment. I have three recommendations:

1. Conduct a community gap analysis on the services and needs of residents. It is my hope that this analysis will lead the city council and school committee to examine and reallocate existing funds to align with highest priority and highest value for children and families.
2. Create a Youth and Family Services agency within city government, or cross-sector, that is responsible for ensuring that Somerville has the service delivery capacity to meet demands.
3. Fund agency by using the adult-use marijuana taxes and funds from the community host agreements.

In conclusion, leading and learning at the intersection of education, government, and community in Somerville has furthered my personal leadership development. I am fortunate to have acquired a desire and resolve to create and sustain positive change for children and families in communities across this nation.

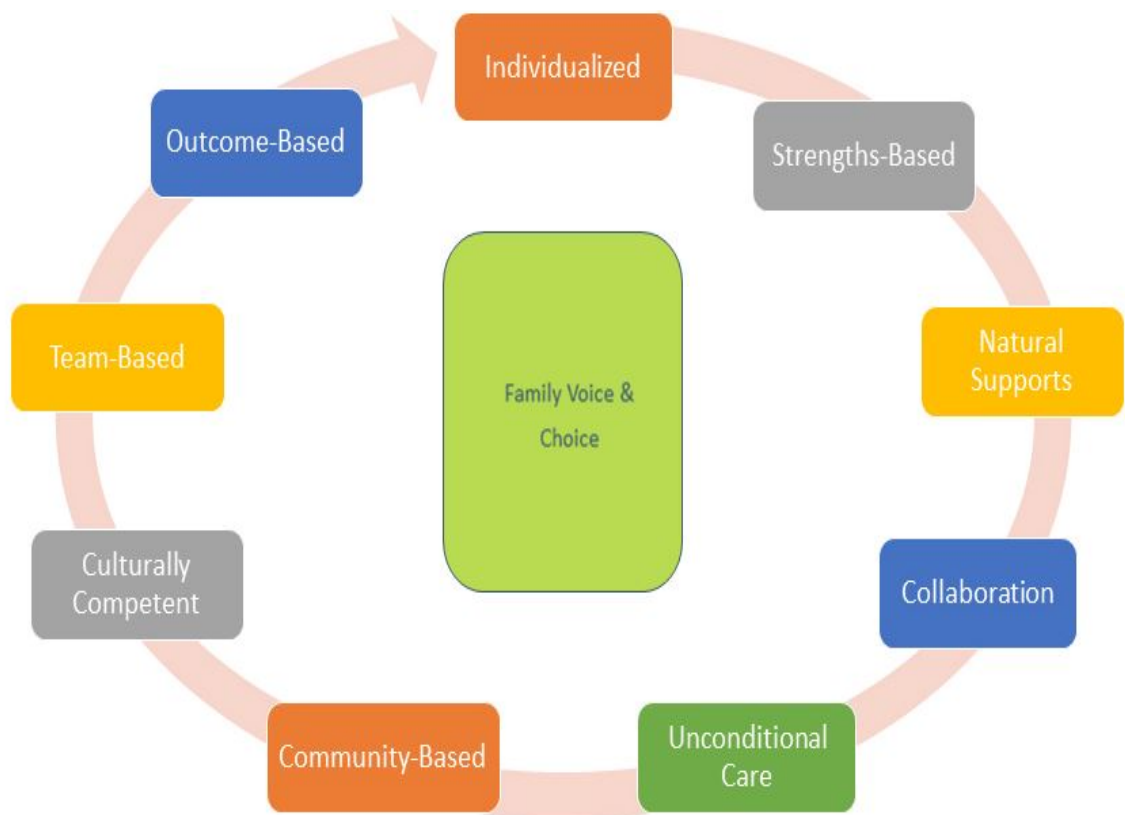
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APPENDICES

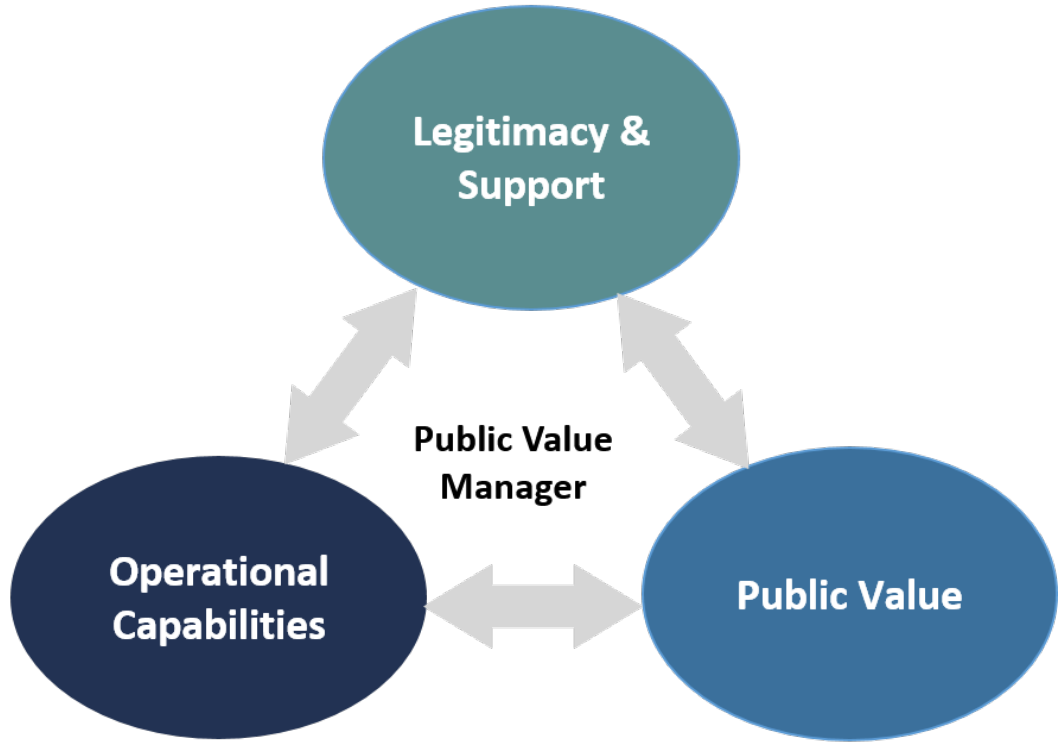
Appendix A Ten Principles of the Wraparound Model



Source: <http://www.cabellfrn.org/resources/safe-at-home-wrap-around-service-model/>.

Appendix B The Strategic Triangle

Do decisions have legitimacy and support?
Are they politically sustainable?



Are plans possible and feasible?
Does the organisational capacity exist?

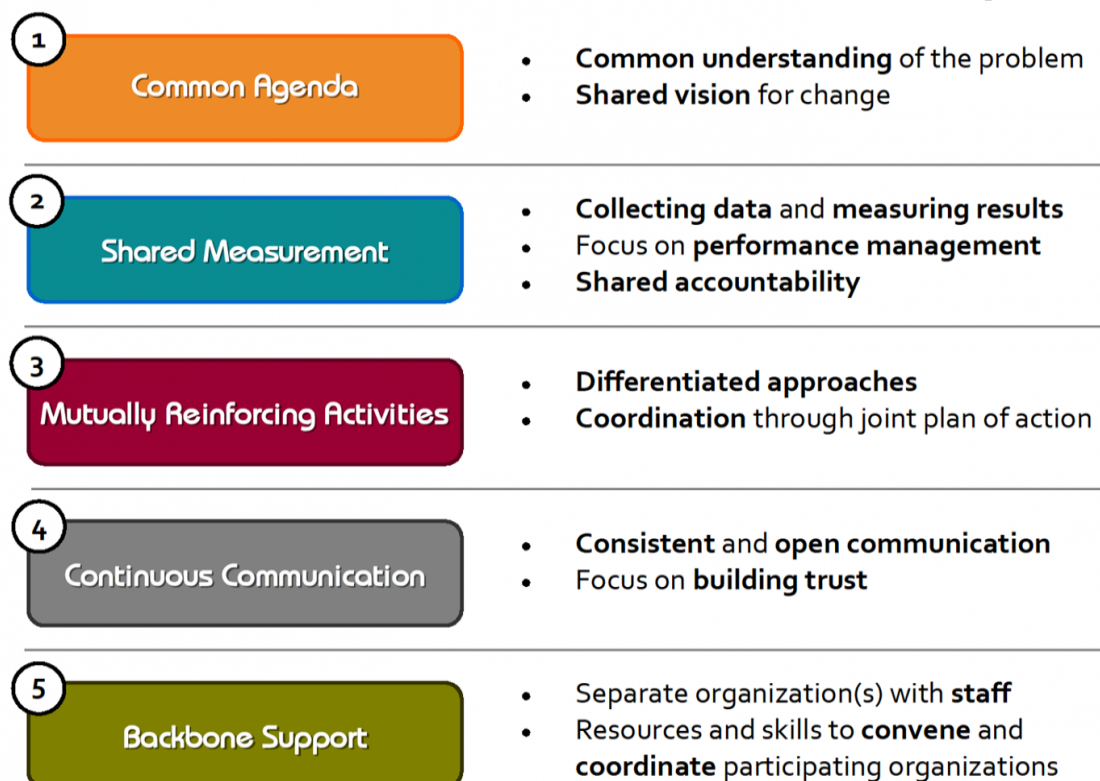
Mission and purpose.
Is the 'offer' valuable?

Source: <https://www.leancompetency.org/lcs-articles/value-confusion-problem-lean-public-services/strategic-triangle-2016/>.

Appendix C

Five Conditions of Collective Impact

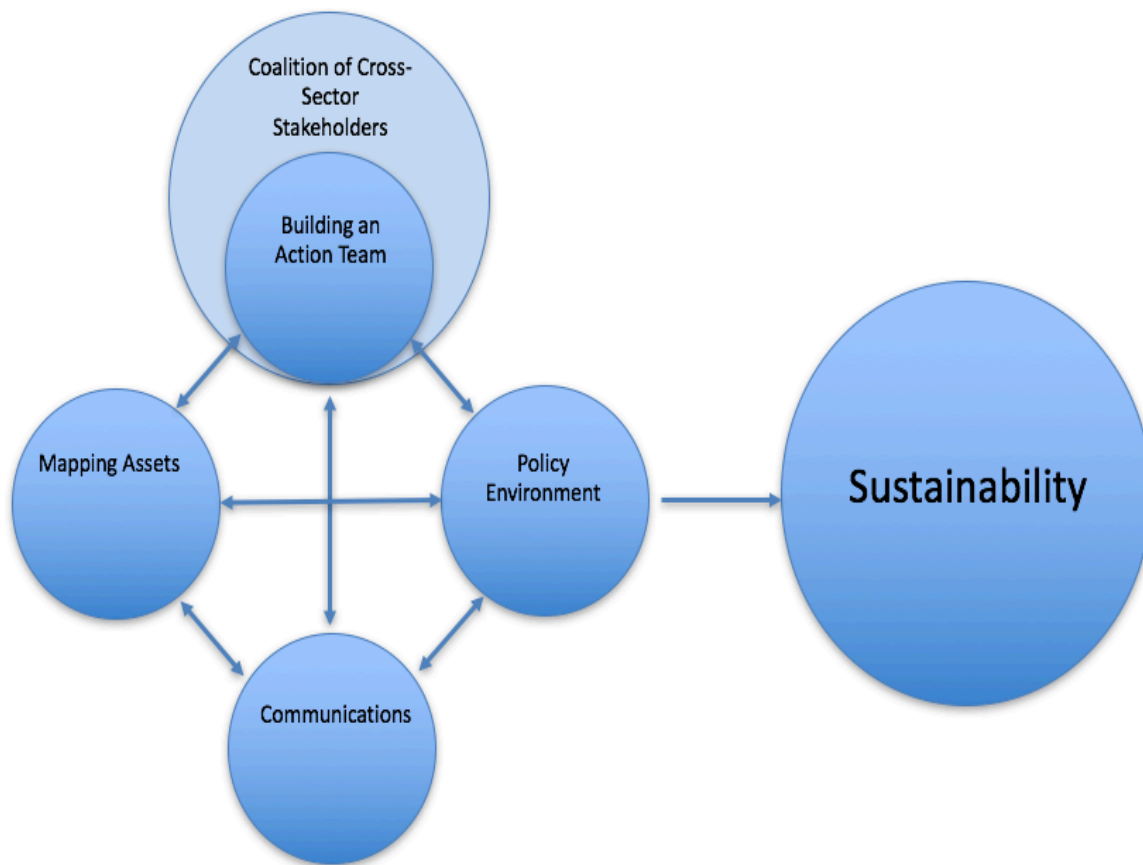
The 5 Conditions of Collective Impact



Graphic Source: <https://www.norcalunitedway.org/collective-impact>.

Academic source: Kania, J., & Kramer, M (2013).

Appendix D
PPG Action Guide:
A Four-Pronged Model to Achieving Sustainability



Source: CHHCS, 2015. <http://actionguide.healthinschools.org/action-guide/>.

Appendix E Somerville SWOT Analysis

Notes from Sept 12, 2018 SPE Meeting

- Acknowledgement that this is not a new idea and that resource and referral systems, such as offered by United Way and others, have been around for a long time.
- Now is a timely coming together of people who have been looking at how SPEs work in different fields (Early Childhood, Out of School time, Health, etc.). There is small pot of money to get things started in terms of looking at a shared system to work for more people more of the time.

Broad Definition of Single Point of Entry

“SPE refers to a centralized system of access to a range of services.”

This is a working definition. It should evolve over the 4 meetings to: “SPE in Somerville refers to.....”

SWOT ANALYSIS

STRENGTHS: Examples of the strengths of SPE that already exist in Somerville?

PIC	WIC
SFLC	The Somerville Hub
Liaisons (both school and SomerViva)	The internet generally
311	City and Schools websites
Police (including COHR Program) and Fire	HHS (LCSWs Nurses, CoA, Vets...)
CHA (and other medical offices)	EI
Housing Authority	Libraries
City Housing	Respond
The Welcome Project	Childcare choices
SHC	Secretaries
Recreation	SomerBaby
Third Space (personal go-tos)	SPS

WEAKNESSES: What problems/weakness would an SPE solve?

- Parents get frustrated and give up
- Providers need more confidence to get the right person with right info
- Now families have to register multiple times in multiple places
- Results in double registration
- Misinformation among providers and among families
- Problem resolution between providers
- Spots taken by families who “know how
- Families finding specialized knowledge

OPPORTUNITIES: What are the benefits/opportunities of Single Point of Entry?

<p>Ease Less Stress Assurance of most appropriate services One stop shopping Family friendly No need for form duplication Better connection between services Seamless entry and referrals Same “language” Customized referrals Awareness of services available Cost saving “provide a broad range of services for ALL - only if ALL can access</p>	<p>Less service duplication Better match to providers Equitable access - not “who you know” Supports an efficient and responsive mixed delivery Supports physical registration Efficient use of time Preventative (less falling through the cracks) More potential integration between providers Needs assessment Training and Quality control Maintain accuracy</p>
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Questions for future meetings:

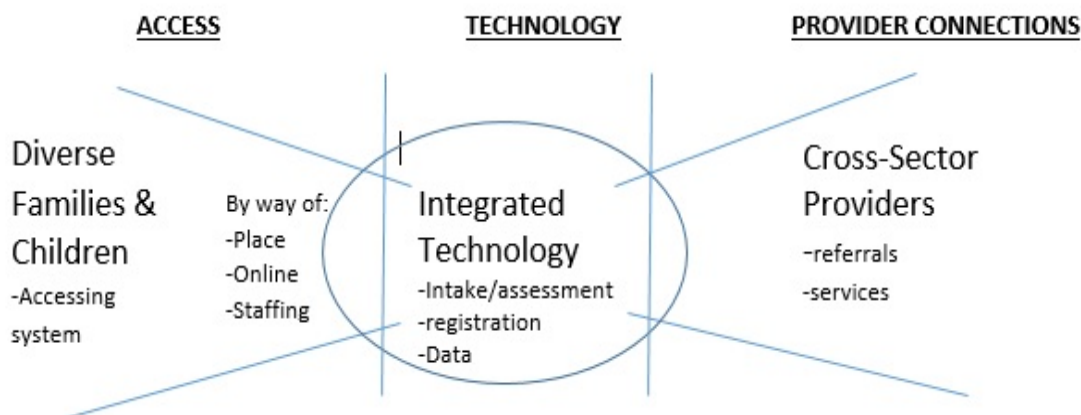
- How to do more than just “send families off”?
- How to make it universal?
- What are the technology needs?
- What are the people/place needs?
- What would “no wrong door” look like?
- What would “efficiencies” in this system look like?

Appendix F

One-Page Communication Document

Mission Statement

“SomerLink provides connections to, and between, all resources and activities available in Somerville, both public and private, in order to streamline and ensure equitable access to programming for everyone in Somerville.”



Brief Update

People working in Early Childhood, Out of School Time, and Health in Somerville had been independently looking at how to simplify and streamline registration and referrals for families, as well as create better connections between organizations within, and across, these fields. A Single Point of Entry Team with staff from City, Schools and the Community started meeting in October 2018 with the goals of avoiding duplication of work and looking at making this happen with a unified approach.

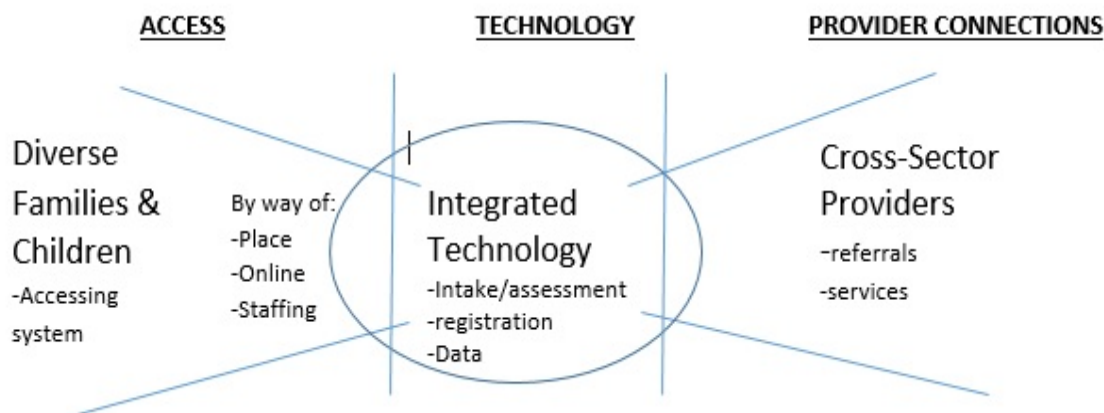
We identified 3 components to the system:

- Family Access: How are families best served? What are the people and places needed to make this happen?
- Technology: What registration and database systems already exist in Somerville? How can we leverage these to simplify processes for families and staff in cross-sector settings?
- Provider Connections: How to facilitate connections and referrals to OST, Early Childhood and Health Services? How to support providers with basic family info and avoid duplication? How to improve connections between providers?

We are currently looking to hire a consultant to guide us regarding the technology side and are delving deeper into the other two components. We hope to have a simple trial system in place by the summer.

Appendix G

Three SPE Components and Diagrams



Component 1: Access for students and families

1. Physical space
 - Repurposing already existing spaces
 - Multi-service center or Welcome Center
 - Places (satellite sites/ extension sites) – public schools, Cummings, CAAS, City Hall, Libraries, Rec Centers, Housing Authority, Police stations
 - Centralized/ decentralized – question/ discussion to have
 - Constant and consistent touch with families – to prevent staff from becoming out of touch with those they serve
2. Staffing (people and skills needed)
 - Identify current staff in Somerville who already do resource and referral (R&R) for children and families and have them provide training for learning
 - Guarantee multi-lingual capacity for staff (may need to hire in order to ensure diversity).
 - Generalist v. specialist positions/staffing.
 - Constant and consistent touch with families*
 - Best practices for agencies currently doing R&R in Somerville
3. Online/ technology
 - User-friendly, multi-modal, flexible technology
4. Accountability* *Missing aspect for access*
 - Board of Directors (comprised of clients) for accountability, mirror citizen Review Board for Police Depts.

Component 2: Technology (data exchange, common intake system)

What We Have:

1. InfoSnap – school registration
 - No interface
 - Can up/download to Aspen/X2, but it’s done manually, goal is auto
2. 311 – citywide service center
 - No interface
3. Student Insights – data profile for students (CFA)
 - Who “owns” code → open source code*
 - Limited capacity to upload information à Aspen/ X2 and whatever data Uri receives from providers/ school staff
 - May interface*/ nightly uploads from Aspen, EasyIEP and STAR
4. Aspen/X2 – (student) database
 - May interface
 - Can up/download to InfoSnap, but it’s done manually, goal is auto
 - Can up/download to Student Insights
5. Somerville Hub – website
 - Online Resource directory
 - No interface
6. ELL system – ELLevation* - ELL students’ performance, reading levels ets.
7. Easy IEP system*

What We Desire:

- Low-tech common screening tool/assessment (Lowell CAP model)
- Family choice: Family gets to decide what services are relevant/wanted and the level of information to be shared in exchange for services provided = right to self-determination.
- Do we need to inventory current databases, i.e., have an expert take a comprehensive look at our existing tech?

What If . . .

1. Somerville Hub (the Face) + Student Insights, interfaced or combined
 - Hub + InfoSnap + Student Insights
 - If information is collected...Insights timeline for child

What is missing:

Awareness	Data-sharing
Resources	confidentiality
Registration – lock in the spot I need for programming. Connects with data-sharing	follow the child

Possible Issues:

1. Eligibility requirements for programs
2. Somerville Hub + Student Insights = different purposes, capacity, populations = what are the options for how they communicate & to/for whom

Component 3: SPE – Provider ConnectionsWhat standards do we want to ensure all providers have?

(Quality assurance, capacity, etc.?)

- MOU – especially if data sharing is involved
- Whatever the standards are in that field – i.e. licensed childcare, accreditation
- Option for tiered system in partnering
- Do we want referral v. recommendation?
- Levels of “service” offering, calls for more information
- Suggestion: start small (few programs or specific population only) *
- Question: what is our “standard” for recommendation? HS/CS/SPS (?)
- Baseline of quality needed
- What are the qualifications for inclusion in the SPE?
- Do providers have responsibilities to uphold?
- This is where the tiers come into play....
- Some just have their names on the site.
- Others you can register.

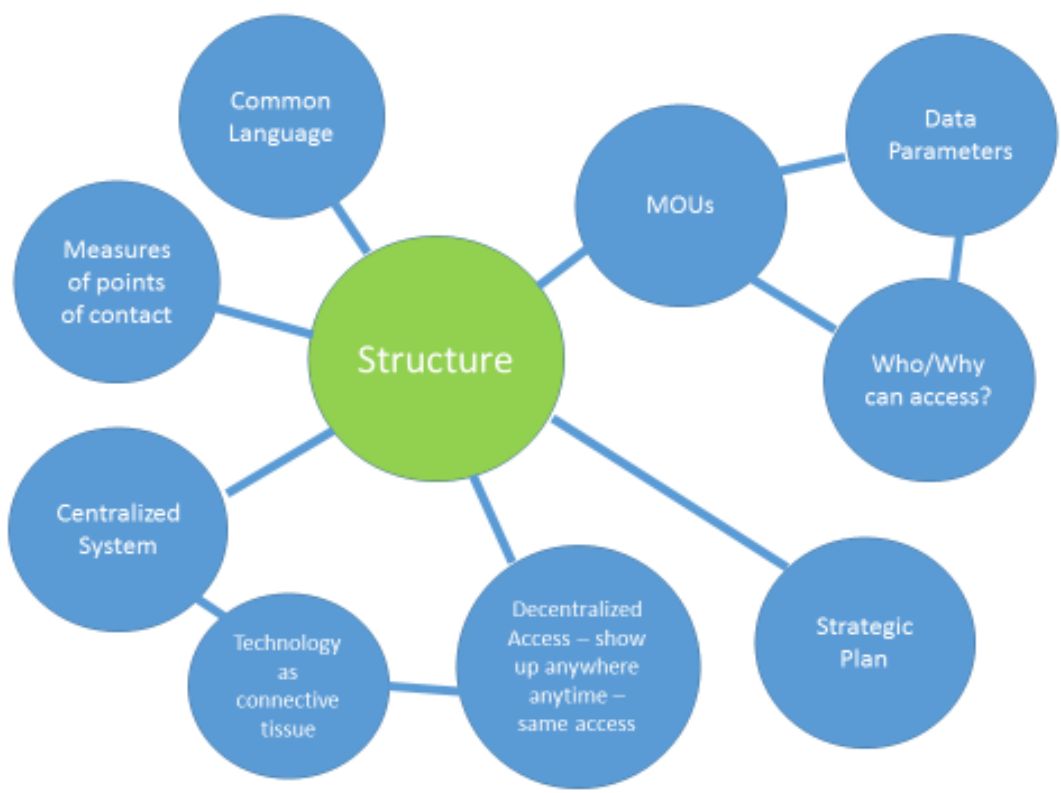
Need:

- Human Capital
- System manager – who & what does the person do?
- Mixed Delivery Coordinator
- SPE Coordinator
- Awareness Campaign – to inform – missing component
- Tech – “routing” structure - example: place for 2 yr. old in Winter Hill for 2 days a week

Appendix H SPE Structure, Governance, and Funding

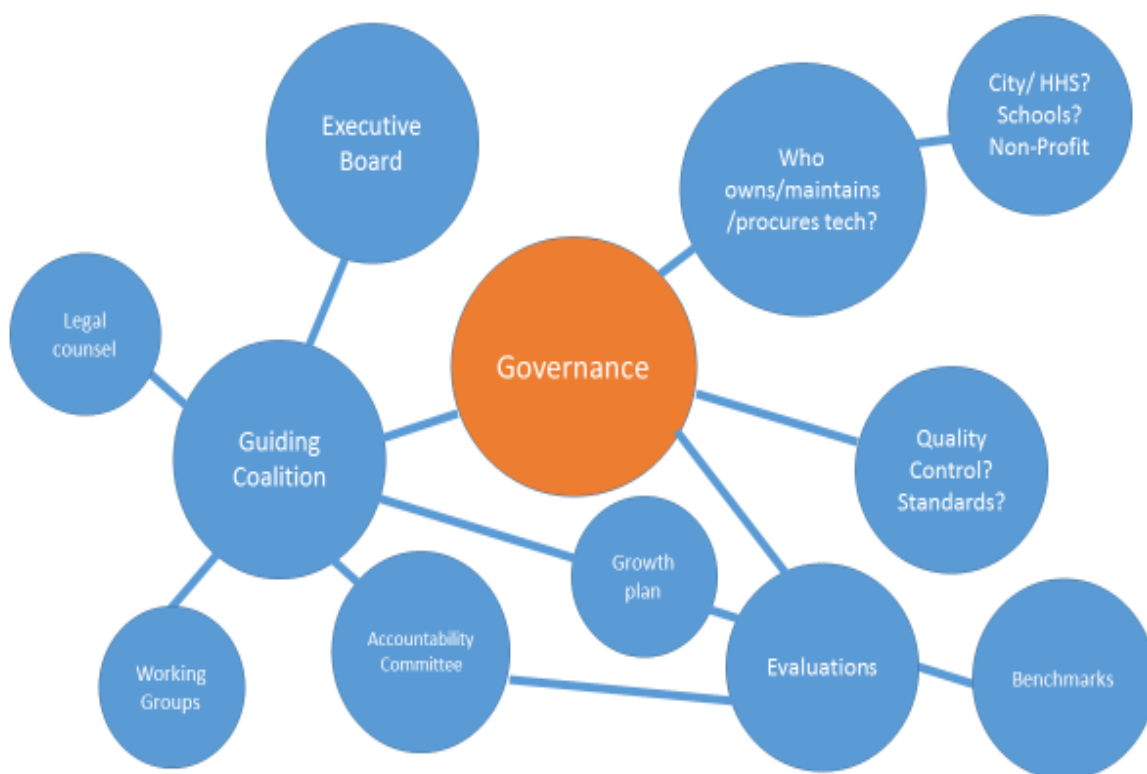
SPE Structure

- Centralized or decentralized system?
- We have pieces in place but:
 - What is missing if we want to make this universal?
 - What would “efficiencies” look like in this system?
- Who else should be here and why?



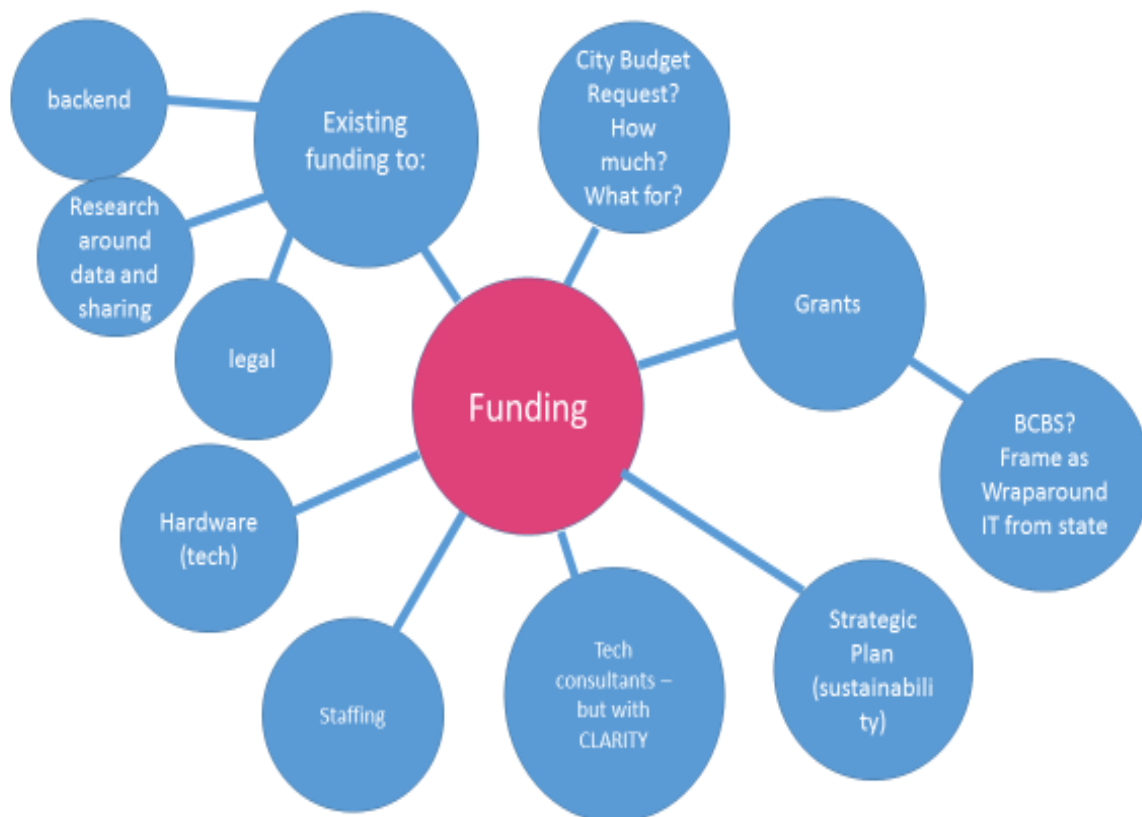
SPE Governance

- What does governance entail?
- Based on the above, who, or what entity governs and/or maintains this SPE system for Somerville?
- Who else should be here and why?



SPE Funding

- What is the best use of existing funds until June 2019 (\pm \$30k)?
- Are there other funding needs this fiscal year?
- Any ideas for grant funding?
- Should we be starting to think about next year's city/schools' budget?
- Who else should be here and why?



Appendix I Technology Consultant Request



Request for Quotes Feasibility Study for Single Point of Entry City of Somerville, MA SomerPromise Department

Background

SomerPromise is a division of the City of Somerville's department of Health and Human Services. SomerPromise's mission is to close opportunity and achievement gaps for Somerville students in order to increase positive academic and life outcomes.

A Single Point of Entry Team with staff from the City of Somerville, Somerville Public Schools and Community Partners started meeting in October 2018. Our unified vision is to simplify and streamline the information, registration and referrals process for Somerville families to access a variety of services across the City, Schools and Community.

Scope of Work

One component of this Single Point of Entry work involves assessing information management systems currently being used by City and Schools as to their capacity to eliminate duplication throughout registration and referral processes, improve data tracking, and to communicate more efficiently with each other.

An inventory of databases currently used to connect families to services is being created. SomerPromise seeks a self-directed consultant for the month of February 2019 to conduct a feasibility study regarding the potential capacities of three or four of these databases (TBD), to evolve in support of our needs.

The work will involve:

- Research into these databases, including meeting with staff who work closely with them,
- Creating a final report with recommendations for next steps, and guidelines for logical and incremental phases of expansion.

Estimated budget

The budget for this entire scope of this project is not expected to exceed \$6000.

Period of Performance

The period of performance is February 2019 with a report due in the first half of March 2019

Required skills

Experience with a variety of information management systems
Ability to clearly rank and prioritize existing systems according to pros and cons, feasibility, scalability, timeline and cost
Strong oral and written communication skills
Excellent time management

Desirable skills

Familiarity with municipal database systems
Good understanding of Somerville and of challenges facing local families
Experience working in the non-profit and/or local government sector

Submission Requirements

Responses must be submitted by February 5, 2019 via e-mail to: rsantos@somervillema.gov. Please be advised that all submissions become City property and will not be returned.

The following are to be included in your submission:

- Name, mailing address, phone number and e-mail of designated point of contact.
- Brief background on the responder along with experience on similar projects.
- An estimated cost, timeline, and fee structure (flat fee, hourly, etc.).
- Names and contact information for 2 professional references

Appendix J SPE Projected Phases

Roll Out

Strategic roll out plan can help ensure the system doesn't overpromise and under-deliver while it is being built and gaining users. Clear expectations and a plan to scale can help build support over time as more sophisticated features are added. Below is a potential roll-out plan.

Phase 1. Information portal. Provide a live menu of services in the city across agencies (HHS, SPS, nonprofits). Information could be useful for providers who refer clients to services and to residents who are looking for a self-serve option.

- This would require provider buy-in; what is the value add for them? Is this additional work to maintain current information and update site?
- Communication strategy and outreach to bring users (residents) to the site.
- Challenge would be keeping information current, either through having providers update site or an API that connects to provider websites (given capacity of nonprofits and potential lack of maintenance on their regular sites, I could see this being an issue long term).

Name Of System	Intent Of System	Used By Agency And Key Contact	Online Only Or Is A Human Needed?	Communicate With Other Systems? Which?	Who Is Data Shared With? Are There MOUs?	How Is Data Used To Guide Work?
311	Connecting services and providing information	Constituent Services: Steve Craig	Both	Yes-- CitizenServe	Elected officials, departments, residents; MOUs with other communities	Performance review, service-related budgeting, staffing
InfoSnap	Pre-K-12 school registration	SPS-PIC: Regina Bertholdo	Both	Aspen (student info system)	Internal reports	Student assignment process, student outcomes, programming/funding
PROMISE	Child and family data MIS	CAAS Head Start: Jessie Leonard	online	Other internal (CAAS) systems, outside organizations (Harvard data), child assessment, Federal Program Information Report (PIR)	SPS, Riverside, Harvard, Cambridge Public Schools and Dept of Human Service Programs (DHSP), Feds	All programming decisions
Child Plus	Child and family data MIS	Riverside Early Head Start: Shannon Sorensen	online			

Phase 2. Enrollment. Direct enrollment in programs

- Start with a limited subset of programs (early childhood and OST, city managed services)
- Need to think about how to verify eligibility for participants (for example, if program only serves specific age group or students at a specific school, how will the system verify?)
- Need to think about management enrollment slots. For example, OST program has 20 slots. Program allows paper applications and online enrollment – who is updating availability online to reflect paper applications?

Phase 3. Integrated referral system (moonshot)

- Ability for providers to see what other services residents are receiving, then make referrals for other services.
- Need to consider data security and privacy issues. Also, a major technical question of if/ how an internal client management system would interface with a public information portal.

Appendix K Next Implementation Steps

Next Implementation Steps with Technology Consultant

1. A **feasibility study** based on the integration and usage of existing data/information management systems in Somerville (311, InfoSnap and StudentInsights). Aim to explore existing systems, instead of creating new ones.

2. SomerLink **phases of expansion** plan that is rational and sequential with incremental steps that will increase the capacity and access for clients and providers.

1. Questions for tech consultant.

- Do we start SomerLink's registration and enrollment for early childhood and out of school time?
- Do we start with city services then expand to community resources?
- When do we include housing and other health determinants?

4. **Guiding Markers/Objectives** for project

Simple intuitive interface	Seamless	Common application
Expendability	Data mining capability	Affordability of system

5. **Key contacts** for the consultant to provide the pertinent knowledge of Somerville's data/ info management systems and technological capabilities.

Bruce Desmond	City IT
John Breslin	SPS IT
Steve Craig	311
Regina Bertholdo	SPS – PIC/SFLC
Jessie Leondard	CAAS HeadStart
Shannon Sorensen	Riverside

Appendix L

Exit Ticket Results from October 31st & November 14th Meetings

Exit Ticket – 10/31/18 Results

Takeaways/ ideas coming out of today's session:

- Deeper understanding of the technology components of SPE
- An easy way to complete a mission statement
- Input from SomerStat person
- Mission driven will help us
- We need to clearly articulate what we want the tech to do
- We are getting closer to clarifying what this will be in Somerville
- This makes me hopeful
- We may need ways to keep others through a long process
- We need a tech expert on our team
- We're further along than I expected

Things you think you can contribute to this work:

- My presence
- People/ stuff → front end of system
- Questions about existing data systems – info that we need to help guide the work of data consultants
- Researching the consultants
- Focus group of how center- based providers work use this
- Understanding of a lot of what already exists
- Understanding of human component and usability
- Patience & fortitude

Questions you still have about this work:

- Timeline → can we get it
- How does this work differ from other/similar systems (e.g. 311)?
- How does this tie into personalized learning (By All Means)?
- How + when can we pilot something?
- Where / what service(s) – will we start with?
- Do we collect enough data in common and of that are we willing to change?

Exit Ticket – 11/14/18 Results

Takeaways/ ideas coming out of today's session:

- Many more people care about these issues than I realized on a daily basis
- Technical solutions can help a lot, but which is best is unclear*
- Communication between groups needs to be better in an ongoing basis to work*
- 311 is a model for much of what we want to do
- Solutions exist
- Appreciate the mission statement
- Excited to learn more about the possibility of 311 expanding & being built upon by new system
- Need to identify a solid/good requirement gathering process to outline what we are looking for
- 311
- Always good brainstorming
- Identifying needs to meet objectives
- Coordinating efforts beyond children and family services
- We're getting there
- We're getting closer towards the tech. part of this
- What will the human aspect look like? *
- Need to talk about funding for the "product" before the consultant finishing the work. This would die from lack of funding
- Need to be careful not to get too big too fast.

Things you think you can contribute to this work:

- Institutional knowledge
- Tech systems experience
- Access to "private" orgs concerns
- Energy and curiosity
- Information regarding systems used by Riverside
- Community resources, work experience, registration system experience
- Pilot effort to create a SPE
- Tangible outcomes to data sharing
- Understanding of family and community needs
- Experience with proposals
- Experience with working with contractors / consultants

Questions you still have about this work:

- How 311 can help is up in the air?
- Will we be able to make a system that is as useful/ accessible to private sector as to city sector?
- Suggestions to know how Riverside can help.
- I am not clear what population we are targeting.
- Funding to support effort. *
- Who will be the tech consultant?
- Is this really going to get enough \$, tech, staff, leadership to support to work?

Appendix M

PRESS RELEASE: Somerville Public Schools Early Childhood Award



Somerville Public Schools

Education • Inspiration • Excellence

FOR IMMEDIATE RELEASE

March 12, 2019

Contact: Dr. Lisa Kuh – lkuh@k12.somerville.ma.us (617) 625-6600, x3656
 Susana H. Morgan – smorgan@k12.somerville.ma.us (617) 629-5221

SOMERVILLE AWARDED COMMONWEALTH PRESCHOOL PARTNERSHIP INITIATIVE FUNDS TO SUPPORT PUBLIC-PRIVATE PRESCHOOL MODEL *Somerville among 6 communities to receive funding support from MA Department of Early Education and Care (EEC) to enhance preschool access and quality through community partnerships*

Somerville, MA – The [Massachusetts Department of Early Education and Care \(EEC\)](#) recently awarded a nearly \$1.5 million multi-year grant to [Somerville Public Schools \(SPS\)](#) to expand access, and align and improve quality of its local early education system through strategic partnerships between the school district and EEC-licensed early education programs in the Somerville community. The Commonwealth Preschool Partnership Initiative (CPPI) targets children who will be eligible for kindergarten by September 2020 through a public-private model that meets the needs of local families. Somerville was awarded just over \$283,000 during the first period of the grant (through June 30, 2019), and is slated to receive just over \$600,000 for each of the next two years pending project state funding availability. Other CPPI grant awardees were Boston, Springfield, New Bedford, North Adams, and Lowell.

“This crucial funding moves our vision for a comprehensive system of early education and care to the next level” commented Dr. Lisa Kuh, Director of Early Education for the Somerville Public Schools. “It is directly aligned with our work on Universal Kindergarten Readiness outlined in our Ready to Learn, Ready for K report, and builds on our inter-agency Community Cabinet priorities. At the core of our work is to develop and sustain high quality programming all across the city so ALL families understand the importance of early education experiences and know where to find them in Somerville.”

“We are thrilled to be one of 6 communities selected to receive this funding,” stated Mary Skipper, Superintendent of Schools. “This award speaks not only to the tireless work that our early childhood community has done in the last several years to build strong partnerships and ensure that every Somerville child has access to rich early learning experiences. It also demonstrates a commitment from the state to strengthening early education systems across the Commonwealth by ensuring that every child has access to high-quality preschool programs that will give them a good start and the greatest opportunity for future success.”

To support this initiative as well as the ongoing work of the Somerville early childhood community, the newly formed Somerville Partnership for Young Children (SPYC) will lead efforts set forth in the [Ready to Learn, Ready for K](#) report that has informed the community’s progress to date. The SPYC is an outgrowth of the Early Education Steering Committee, a coalition of representatives from across the city that has guided the city’s continuous progress toward its vision of Universal Kindergarten Readiness in a mixed-delivery system. While four specific Somerville community partners were named in the initial grant award – The Elizabeth Peabody House, YMCA Preschool, Dandelion Montessori, and CAAS Head Start – the impact of the work that this funding will support will be much broader, with Open Center for Children and Bigelow Cooperative Preschool joining the partnership in Year 2.



Somerville Public Schools

Education • Inspiration • Excellence

CPPI funding will support Somerville’s continuing work toward its Universal Kindergarten Readiness vision with a particular focus on four primary needs and recommendations identified in the Ready to Learn, Ready for K report:

- Establish a mixed-delivery system and leadership structure to unify partners and expand quality;
- Develop a single point of entry system to provide access to programming;
- Comprehensive services team to provide wrap-around supports; and
- Develop enhanced data systems to support learning and development.

The CPPI will allow the Somerville Public Schools and local early childhood providers to formalize their partnership, and to work collaboratively toward a more equitable and accessible early childhood system across the city. Funding will initially support key positions that will help address some of the primary needs identified in the Ready to Learn, Ready for K report. Those positions include a Mixed-Delivery Coordinator, an Early Childhood Instructional Coach, and an Itinerant Special Education Service Provider. In addition, CPPI funds will also support coaching for center directors, professional development and degree attainment, early screening and annual program assessments, mental health and behavioral consultation, development of an equitable salary scale, curriculum alignment, development of a single point of entry, and family engagement and outreach efforts.

“Our progress so far is really built on the strong relationships we have with our community partners who work hard every day to provide early education and care for children and families,” added Dr. Kuh. “These collaborations afford us the opportunity to work side by side with teachers and directors to build quality together. The CPPI funding will allow us to continue this important journey with renewed energy, confidence, and financial support as we lay the foundation for a lifetime of success for generations of children in our community.”

##

Appendix N SomerPromise / Out of School Time February Vacation Pilot Program

February Vacation Pilot Program
City of Somerville
Health & Human Services (HHS)
50 Evergreen Ave, Somerville, MA 02145

Participant Responses

- (13yrs) "It was fun, friendly, a great way to spend my time instead of being behind a device."
- (10yrs) "It's the second best vacation camp I've been to. So maybe. P.S. It was great"
- (6yrs) "I had fun doing parkour [with] my friends, I also made new friends."
 - 25 Participants would register for the program again.
 - All participants responded feeling safe
 - All participants responded as having had fun

Parent Surveys

- "They had a great experience. They don't go to an after school program so I had my doubts if it was going to be too long for them but they were very happy and engaged w/the program."
- "With the opt-in nature, yes. I paid the same as the Somerville after school program (\$200.) which we could afford and I thought was fair. We wouldn't have been able to afford the top level, especially given that there are more affordable options around Somerville and we have two kids."
 - All but one parent response thought the pricing scale was fair.
 - All but one parent responded that they would re-enroll if given the opportunity

Grades	# of Participants	Ethnicity	# of Participants
K	1	Hispanic	5
1	3	White	11
2	1	Black	2
3	5	Asian	1
4	7	None Listed	5
5	2	Mixed	2
6	3		26
7	4		
	26		

Age	# of Participants	Pricing Scale	# of Participants
6	4	Free	8
7	0	125	2
8	2	200	4
9	7	250	3
10	7	400	9
11	2		26
12	1		
13	3		
	26		

Options	# of Participants
Option 1 Half Day	3
Option 2 Parkour + Splats+ SMC	12
Option 3 Parkour + Splats + Dance	11
	26