The Power of Data
TEN YEARS OF THE METROWEST ADOLESCENT HEALTH SURVEY

2015 REPORT TO THE COMMUNITY
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Since inception, the MetroWest Health Foundation has emphasized data in all that we do. The Health Data Center portion of our website provides demographic and health indicators for each of our 25 communities. Our strategic plans are crafted through an analysis of community health data. And, we work closely with our grantees to help them capture key outcome data to assess their progress in meeting the objectives of their grants.

By far our biggest investment in data comes in our sponsorship of the MetroWest Adolescent Health Survey, a biennial census of middle and high school youth designed to help communities understand adolescent high risk behaviors. This past year we completed our initial ten year commitment to this endeavor, a commitment that will continue for the foreseeable future.

As you will see in this 2015 Annual Report to the Community, the data from the MetroWest Adolescent Health Survey has become a powerful tool for parents, educators, law enforcement and public health professionals as they and we seek ways to help youth stay healthy and safe in their community.

Dana Neshe
Chair, Board of Trustees

Martin Cohen
President

“In God we trust. All others must bring data.”

W. EDWARDS DEMING
MEETING A COMMUNITY NEED

The health and wellness of adolescents is a priority for all communities, but figuring out where to focus limited resources is a challenge.

There is state-wide data from the Youth Risk Behavior Survey (YRBS), but in Massachusetts, where each town has its own unique culture, these data may not be truly representative of local needs. Jim Connolly, the former superintendent of the Natick Public Schools, had an idea. What if there were a local survey that allowed towns to compare their data to the region in addition to the state? Jim’s idea sparked the beginning of the MetroWest Adolescent Health Survey, a regional survey that would help identify the needs of over 40,000 middle and high schools students across the foundation’s 25 communities.

The foundation contacted all the school districts in our 25-town catchment area to gauge interest in participating in a health survey of high school and, eventually, middle school students. Although some school systems were nervous about devoting school time to the survey or how the data would be used, in its first year (2006), two-thirds of the region’s public high schools participated and by 2012, every public high school and middle school in the region was participating in the survey.

The survey, administered by Education Development Center in Waltham, is based on the CDC’s national Youth Risk Behavior Survey, asking questions about violence and bullying, tobacco use, alcohol and substance use, impaired driving, suicide, risky sexual behavior, nutrition and physical activity. In each iteration of the survey, new questions were added to address emerging health needs such as cyberbullying or distracted driving. Each survey captures the feedback from over 40,000 youth, making it one of the largest regional surveys of its kind.
USING THE DATA

Gathering data is only the beginning. For the foundation, the real test of the effectiveness of the survey is how the data is used to inform the work of schools, communities and the foundation. Using detailed grade-level analysis, communities can set their own health and wellness priorities. School districts have used the data to improve wellness programs and update health curricula; influence school and district health policy; and engage students in class discussions about high risk behaviors. The data has also helped MetroWest communities develop new partnerships among youth serving agencies, schools, law enforcement and public health departments.

For the foundation, the results of the MetroWest Adolescent Health Survey have been a powerful tool in evaluating the success of long-term initiatives. For example, survey data was used to show the success of the six-year, $2 million investment in reducing youth substance use in 11 communities. The data has also informed where to invest, such as with the three-year, $892,500 investment to reduce bullying in five middle schools, and our recent focus on adolescent mental health issues. In addition, partnerships with school districts have improved with a greater confidence that the foundation and the schools can work together to address health issues.
It’s no surprise given Jim Connolly’s suggestion for a regional survey that Natick was one of the first communities to sign on to the MetroWest Adolescent Health Survey. Karen Rufo, the nurse leader for the Natick Public Schools, uses the survey in many different ways. At the start of each school year, Natick’s Superintendent, Peter Sanchioni, along with his administration, sets goals for the year. At least one goal is based on what the data from the Adolescent Health Survey reveals. One of last year’s goals was to reduce substance use among students. This year, there is a focus on absenteeism as the district revises its policies. The survey allows them to understand why students are absent. This has led to a conversation about how the school and individual teachers can tailor their policies to better support students so they attend school and avoid negative mental health outcomes associated with excessive stress and anxiety.

The ability to look at special populations has been a tremendous asset in identifying emerging needs. The data from the last two surveys showed an alarmingly high rate of bullying, suicidal ideation, and other mental health indicators among sexual minorities as compared to the general population. Ms. Rufo and the administration are looking at ways to engage students and parents to help improve the health status of these students.

In Natick, the survey results are presented to the school committee and then become available to the public on the school department’s website. “The ability to create my own charts and presentation slides when presenting the data to the school committee, teachers and others in the community is wonderful,” said Ms. Rufo. EDC provides templates to help school administrators effectively communicate the data to the community. Ms. Rufo presents parts of the data to teachers at each staff meeting, and while many may be shocked by some of the findings, they are working together to improve supports to students.
The ability to create my own charts and presentation slides when presenting the data to the school committee, teachers and others in the community is wonderful.

KAREN RUFO, NURSE LEADER, NATICK PUBLIC SCHOOLS
METROWEST MIDDLE SCHOOL BULLYING
Percent Who Have Been Bullied in the past 12 months

- Female: 33.3%
- Male: 24.4%

METROWEST MIDDLE SCHOOL BULLYING
Percent Who Have Been Cyberbullied in the past 12 months

- Female: 24.2%
- Male: 13.1%

The data helps community leaders, within and outside the schools, focus on the most pressing issues.

DR. STACY SCOTT, SUPERINTENDENT
FRAMINGHAM PUBLIC SCHOOLS
Framingham Public Schools were also an early adopter, having participated in the middle and high school surveys since inception. Dr. Stacy Scott, Superintendent of Schools in Framingham, refers to the survey as a “seminal point.” The data is so embedded in his decision making, particularly around mental health issues, that he cannot remember what it was like before the information was available. Data on the mental health of students has served as a call to action for Dr. Scott, a licensed psychologist, and other leaders within the schools, including Judy Styer, Director of Health and Wellness. Together they have added supports for students, using the data as a justification for spending staff time and funding on the issue.

Dr. Scott notes that mental health interventions are sometimes challenging to fund if there is not an identified need and track record of success. The survey data helps him identify specific needs when talking with parents, the school committee, and other community leaders, as well as track long-term progress. For example, Framingham High School has a clinical care coordinator, initially funded by the foundation, to coordinate mental health services for youth and provide crisis intervention. This position would most likely not have been possible without the survey data.

Dr. Scott also said that having the data in front of him gives him the information to make decisions about programming and get community and parent buy-in for new initiatives. “These are the community’s kids,” says Dr. Scott, and the data helps community leaders, within and outside the schools, focus on the most pressing issues.
The hallway outside the Needham Public Health Department is lined with brightly colored posters that cite data about the number of Needham youth who use drugs and alcohol and how they obtain them. Other posters address parents, citing data about the power of parental conversations. This is part of how Carol Read, the town’s substance abuse coordinator, and others in the health department, use data to start conversations with community members about difficult topics.

The youth data comes directly from the Adolescent Health Survey and the parent data from a social norms survey administered by the Health Department. Sharing the data through public campaigns is an important part of the substance use prevention efforts in Needham. Ms. Read likes to think of the issues as community issues and not school-based issues. The school is a key partner, but shares the responsibility of keeping youth safe and healthy with the entire community. Sharing the data widely helps create strategies that engage a broad range of stakeholders, including the police department, school nurses, youth and parents.

The survey data also sets the context for taking action. “There is no guessing about what is going on. It gives a realistic view,” says Ms. Reed. This is helpful in setting prevention and education priorities for the Health Department. The issues can seem overwhelming, but the data allows Ms. Read to target efforts on the issues that are most pressing.

“The survey informs and validates the work we are doing to create a healthier and safer community,” said Ms. Read. The Needham Public Health Department is using the Adolescent Health Survey data to identify the most pressing health issues facing youth, engage a wide range of community members in taking action, and evaluate the long-term results.
The survey informs and validates the work we are doing to create a healthier and safer community.

CAROL READ, SUBSTANCE ABUSE COORDINATOR, NEEDHAM PUBLIC HEALTH DEPARTMENT
GRANTS

ACCESS TO CARE

**ADVOCATES, INC.**
To support a pediatric health home by integrating behavioral health into the pediatric care team at Southboro Medical Group. ................. $71,685

**COMMUNITY LEGAL AID**
To support a medical-legal partnership with the Edward M. Kennedy Community Health Center in Milford. ......................... $105,000

**EDWARD M. KENNEDY COMMUNITY HEALTH CENTER, INC.**
To improve medical provider recruitment and retention ................ $135,000

**HEALTH CARE FOR ALL**
To provide assistance to regional health and human service organizations so uninsured individuals have health insurance coverage. ............... $30,000

**LATINO HEALTH INSURANCE PROGRAM, INC.**
To support health insurance enrollment in order to reduce the rates of uninsured adults and children ................................. $61,909

**METROWEST FREE MEDICAL PROGRAM**
To support health insurance enrollment in order to reduce the rates of uninsured adults and children ................................. $63,021

**METROWEST LEGAL SERVICES, INC.**
To support a medical-legal partnership with the Edward M. Kennedy Community Health Center in Framingham. ......................... $120,002

**METROWEST YMCA**
To fund an evidence-based diabetes prevention program. ................. $21,654

**MILFORD REGIONAL HEALTHCARE FOUNDATION, INC.**
To improve access to care for those who lack a primary care provider .... $172,906

**NATICK VISITING NURSE ASSOCIATION**
To provide prescription drug assistance to the uninsured and underinsured in the MetroWest area. $217,575

**SOUTH MIDDLESEX OPPORTUNITY COUNCIL, INC.**
To provide access to primary and preventive health care services and nutritional counseling to homeless families residing in motels and scattered site housing. $54,604

**SOUTH MIDDLESEX OPPORTUNITY COUNCIL, INC.**
To initiate a community response team to address issues of homelessness; $148,720

**WAYSIDE YOUTH & FAMILY SUPPORT NETWORK, INC.**
To develop a child and adolescent mental health care navigator position in connection with local pediatric practices; $143,996

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1 Grants made by the Framingham Union Grants Panel
2 Grants made by the Leonard Morse Grants Panel
GRANTS

ADOLESCENT MENTAL HEALTH

EDUCATION DEVELOPMENT CENTER, INC.
To support the administration and analysis of the MetroWest Adolescent Health Survey. $614,402

ASHLAND PUBLIC SCHOOLS
To reduce marijuana use among Ashland adolescents by engaging in a social norms campaign. $4,000

BELLINGHAM PUBLIC SCHOOLS
To support a comprehensive transitional program that can support students reentering school after an extended period of absence for psychiatric or medical reasons. $209,942

FAMILY CONTINUITY, INC.
To partner with area school districts in developing school-based behavioral health clinics. $70,023

FRAMINGHAM PUBLIC SCHOOLS
To reduce the negative effects of stress on high risk student populations. $59,325

HOPKINTON PUBLIC SCHOOLS
To support a comprehensive transitional program that can support students reentering school after an extended period of absence for psychiatric or medical reasons. $216,433

KING PHILIP REGIONAL HIGH SCHOOL
To support a comprehensive transitional program that can support students reentering school after an extended period of absence for psychiatric or medical reasons. $70,142

MENDON-UPTON REGIONAL SCHOOL DISTRICT
To enhance mental health programming within the school district. $9,500

NATICK PUBLIC SCHOOLS
To support a comprehensive transitional program that can support students reentering school after an extended period of absence for psychiatric or medical reasons. $6,000

NATICK SERVICE COUNCIL, INC.
To offer an education intervention as an alternative for first-time offending youth who are in possession or under the influence of alcohol or marijuana. $71,573

WELLESLEY COLLEGE, WELLESLEY CENTERS FOR WOMEN
To address the problem of youth depression and suicidal behavior. $369,536

1 Grants made by the Framingham Union Grants Panel
2 Grants made by the Leonard Morse Grants Panel
**GRANTS**

### COMMUNITY HEALTH

**HUDSON BOARD OF HEALTH**
Match funding under the Prevention & Wellness Trust Fund. ............... $170,169

**NATICK FIRE DEPARTMENT**
To train and certify Natick High School students in CPR, cardiac defibrillation and first aid. 2 ............................................................ $10,000

**MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH**
To support the Mass in Motion program in the towns of Framingham, Hudson, Marlborough and Northborough. ........................................ $60,000

### HEALTHY AGING

**BAYPATH ELDER SERVICES, INC.**
To support the CaregivingMetroWest.org website.......................... $45,200

**BAYPATH ELDER SERVICES, INC.**
To develop a collaborative focused on supportive environments for those touched by Alzheimer’s disease. ............................ $19,956

**FRANKLIN COUNCIL ON AGING**
To offer in-home respite care relief for caregivers in Franklin and Bellingham................................................................. $9,610

**JEWISH FAMILY SERVICE OF METROWEST**
To offer patient navigators to assist and support frail elders. 1 ........... $41,866

**SENIOR SUPPORT FOUNDATION/ HOLLISTON, DOVER AND SHERBORN COA**
To offer falls prevention training through the Holliston, Dover & Sherborn Councils on Aging. ....................................................... $8,500

**TOWN OF FRAMINGHAM – COUNCIL ON AGING**
To recruit and train volunteers to accompany individuals with dementia at the Callahan Senior Center. 1 ........................................ $25,000

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1 Grants made by the Framingham Union Grants Panel
2 Grants made by the Leonard Morse Grants Panel

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DEBORAH BLUMER COMMUNITY HEALTH LEADERSHIP AWARD 2016

Dr. Michael F. Fitzpatrick
Superintendent-Director
Blackstone Valley Vocational Regional School District

12 | METROWEST HEALTH FOUNDATION
# Grants

## Responsive Grantmaking

**A Place to Turn**
- To purchase food for the food pantry. $5,000

**Advocates, Inc.**
- To educate pediatric providers so as to improve service delivery for patients with autism. $20,000

**Doc Wayne Youth Services, Inc.**
- To offer sports oriented therapy groups for youth. $20,000

**Edwards Church, United Church of Christ**
- To support a new Framingham community access point for veterans. $6,200

**Employment Options, Inc.**
- To improve the organization’s training venue to better prepare individuals in their health recovery journey. $20,000

**Framingham State University**
- To fund suicide prevention efforts. $5,400

**Health Law Advocates, Inc.**
- To educate area agencies on state and federal mental health parity laws. $10,000

**Holliston Police Department**
- To purchase AED equipment. $3,328

**Immaculate Conception Parish**
- To purchase AED equipment. $6,160

**Jeff’s Place Children’s Bereavement Center, Inc.**
- To further develop its strategic plan. $19,200

**Natick Service Council, Inc.**
- To purchase healthy food for the food pantry. $5,000

**Needham Health Department**
- To address youth concussions through a system to track and maintain records of coaches’ trainings and incident reporting. $20,000

**Town of Framingham – Board of Health**
- To train instructors in youth and adult Mental Health First Aid. $19,040

**United Way of Tri-County**
- To enable the “Call2Talk” program to become accredited by the American Association of Suicidology. $3,500

## Scholarships

**Nursing Scholarships (28)** $46,000

**Medical/Clinical Scholarships (22)** $42,000

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1 Grants made by the Framingham Union Grants Panel
2 Grants made by the Leonard Morse Grants Panel
## METROWEST HEALTH LEADERSHIP PROGRAM CLASS OF 2016

- Brendan Castle, *Advocates, Inc.*
- Kathryn Condon, Esq., *MetroWest Legal Services*
- Margot LaFortune Flionis, *Framingham Public Schools*
- Marissa Garofano, *Framingham Board of Health*
- Carolyn Hochard, *BayPath Elder Services*
- Tatiana Melo, *Wayside Youth and Family Support Network*
- Jane Purser, *Town of Wayland/WaylandCares*
- Sarah Lee Roth, *Jewish Family Service of Metrowest*
- Rebekah Roulier, *Doc Wayne Youth Services*
- Peter Wilner, *Public Health Consultant*

## BOARD OF TRUSTEES
- Joel Barrera, *Vice Chair*
- Cynthia Bechtel, Ph.D., *Clerk*
- Anne Marie Boursiquot King
- Maria DaSilva
- Alan Geller
- Bill Graham, Esq.
- John Krikorian, M.D.
- Meyer Levy
- Regina Marshall, Esq.
- Dana Neshe, *Chair*
- Julie Reed
- Adam Rogers, *Treasurer*

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- Carolyn Flammey
- Kevin Foley
- Alan Geller, *Chair*
- Bill Graham, Esq.
- Cynthia Hall Kouré
- K. Joanne Kalp
- John Krikorian, M.D.
- Meyer Levy
- John Minichiello
- Julie Reed
- Laura Senier, Ph.D.

## FRAMINGHAM UNION GRANTS PANEL
- Karin Agte
- Anna Carollo Cross
- Betsy Cross
- Michael Devlin
- Anna Romer, Ed.D.

## INVESTMENT COMMITTEE
- James J. Connolly
- Robert Delaney
- Kevin Foley
- Frank C. Jenkins
- Meyer Levy
- Michael Moody
- Thomas Moore
- Julie Reed
- Adam Rogers, *Chair*
- Brian Stewart
- Thomas Urustom
- J. Ben Williams

## SCHOLARSHIP COMMITTEE
- Cynthia Bechtel, Ph.D., *Chair*
- Maria DaSilva
- Michael Devlin
- Maureen Nguyen

## PERSONNEL COMMITTEE
- Cynthia Bechtel, Ph.D.
- Anne Marie Boursiquot King, *Chair*
- Bill Graham, Esq.
- Dana Neshe

## NOMINATING COMMITTEE
- Joel Barrera
- Maria DaSilva, Chair
- Regina Marshall, Esq.
- Dana Neshe

## STAFF
- Martin D. Cohen, *President/CEO*
- Rebecca Donham, *Senior Program Officer*
- Rebecca Gallo, *Program Officer*
- Cathy Glover, *Grants Management Director*

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**As of 9/30/15**
The Board of Trustees has engaged AAFCPAs of Westborough, Massachusetts to perform the annual audit.
A copy of their complete audit report is available for review from the foundation.

### Statement of Activities: September 30, 2015 (with summarized comparative totals as of September 30, 2014)

#### ASSETS

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2014</th>
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<tbody>
<tr>
<td>Cash and Equivalents</td>
<td>$461,368</td>
<td>$686,313</td>
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<tr>
<td>Investments</td>
<td>$88,313,819</td>
<td>$96,060,549</td>
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<tr>
<td>Beneficial Interests in Perpetual Trusts</td>
<td>$6,989,154</td>
<td>$7,575,391</td>
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<tr>
<td>Other Assets</td>
<td>$52,411</td>
<td>$57,303</td>
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<td><strong>TOTAL ASSETS</strong></td>
<td>$95,816,752</td>
<td>$104,379,556</td>
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#### LIABILITIES & NET ASSETS

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<th>2015</th>
<th>2014</th>
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<tbody>
<tr>
<td>Accrued Expenses and Other</td>
<td>$280,936</td>
<td>$200,237</td>
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<tr>
<td>Grants Payable</td>
<td>$2,705,569</td>
<td>$1,368,622</td>
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<tr>
<td>Deferred Excise Taxes</td>
<td>$290,851</td>
<td>$505,731</td>
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<td><strong>Total liabilities</strong></td>
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<td>$2,074,590</td>
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<tr>
<td>Net Assets</td>
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<tr>
<td>Unrestricted</td>
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<td>$85,244,335</td>
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<tr>
<td>Temporarily Restricted</td>
<td>$6,316,144</td>
<td>$7,291,283</td>
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<tr>
<td>Permanently Restricted</td>
<td>$9,183,111</td>
<td>$9,769,348</td>
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<tr>
<td><strong>Total net assets</strong></td>
<td>$92,539,396</td>
<td>$102,304,966</td>
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<tr>
<td><strong>TOTAL LIABILITIES AND NET ASSETS</strong></td>
<td>$95,816,752</td>
<td>$104,379,556</td>
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#### REVENUES

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<tr>
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<th>2015</th>
<th>2014</th>
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<tr>
<td>Interest, dividends &amp; other investment income</td>
<td>$1,371,864</td>
<td>$1,290,206</td>
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<tr>
<td>Income from outside trusts &amp; other</td>
<td>$380,652</td>
<td>$527,615</td>
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<tr>
<td>Net gains (losses) on beneficial interest in perpetual trusts</td>
<td>$(586,237)</td>
<td>$257,205</td>
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<tr>
<td>Net realized &amp; unrealized gains (losses) on investments</td>
<td>$(5,733,634)</td>
<td>$7,836,470</td>
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<tr>
<td><strong>Net assets released from restrictions</strong></td>
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<tr>
<td><strong>TOTAL REVENUES</strong></td>
<td>$(4,567,355)</td>
<td>$9,911,496</td>
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#### EXPENSES

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<tr>
<td>Direct charitable grants &amp; programs</td>
<td>$3,956,706</td>
<td>$3,162,476</td>
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<tr>
<td>Grant related and administrative</td>
<td>$754,351</td>
<td>$754,891</td>
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<tr>
<td>Investment related</td>
<td>$487,158</td>
<td>$1,123,336</td>
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<tr>
<td><strong>Total operating expenses</strong></td>
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<td>$5,040,703</td>
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<tr>
<td><strong>Change in net assets</strong></td>
<td>$(9,765,570)</td>
<td>$4,870,793</td>
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#### NET ASSETS, BEGINNING OF YEAR

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<th></th>
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<tr>
<td></td>
<td>$102,304,966</td>
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#### NET ASSETS, END OF YEAR

<table>
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<th></th>
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<th>2014</th>
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<tbody>
<tr>
<td></td>
<td>$92,539,396</td>
<td>$102,304,966</td>
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</table>
GET INVOLVED

APPLYING FOR GRANTS: The MetroWest Health Foundation makes grants to non-profit 501(c)(3) community organizations and governmental entities. Requests for grant proposals are issued at various times throughout the year and address specific health issues and areas of concern to the foundation as identified through community needs assessments. The foundation also provides scholarships for individuals interested in pursuing formal educational programs in nursing, medicine and other health professions. Organizations interested in applying for grants should submit a concept paper to the foundation in advance of a full proposal.

For more information on applying for a grant or scholarship, call us at 508.879.7625 or visit our website at www.mwhealth.org.

UNDERSTANDING COMMUNITY HEALTH NEEDS: Since our mission is to address the unmet health needs of the communities in the MetroWest area, we invite individuals and organizations with information or data concerning the current or projected health needs of the area to share them with the foundation. This information will help us shape our grantmaking activities and aid in the development of funding priorities for the foundation and its grants panels.

MAKING A GIFT TO THE FOUNDATION: You can support the work of the MetroWest Health Foundation by making a tax-deductible contribution or by including the foundation in your estate planning. The foundation can assist you in planning a bequest or charitable donation to benefit the health needs of your community. For more information or assistance, contact us at 508.879.7625.

BECOMING A VOLUNTEER: The work of the foundation is largely volunteer. Members of the MetroWest community serve on committees and panels that shape the work of the foundation. If you have an interest in serving on a committee or panel, please let us know.

QUESTIONS: We encourage questions about our grantmaking and community health activities, and welcome opportunities to meet with or speak to community groups and individuals about our funding philosophies, priorities and grantmaking process.
MISSION

Our mission is to improve the health status of the community, its individuals, and families through informed and innovative leadership.

We serve the communities of: Ashland, Bellingham, Dover, Framingham, Franklin, Holliston, Hopedale, Hopkinton, Hudson, Marlborough, Medfield, Medway, Mendon, Milford, Millis, Natick, Needham, Norfolk, Northborough, Sherborn, Southborough, Sudbury, Wayland, Wellesley and Westborough.