



<https://vtparentchildcenternetwork.org/>
Supporting Vermont's Parent Child Centers
through **leadership, advocacy** and **collaboration**
with key partners to achieve the best outcomes
for families.

Parent Child Center Network FY2024 Budget Request

Increase Base Funding for the PCC Integrated Grant by \$5.2million

Thank you for your ongoing support of the Parent Child Center Network. Parent Child Centers (PCCs) were established in Vermont statute in the late 1980s. Vermont's 15 PCCs provide eight core services to families with young children on behalf of the state. Last year, with the passage of Act 150, the Parent Child Center Network of providers was recognized and codified as a partner working with the State to provide these services and supports. The Parent Child Center Network has been working for several years to ensure consistency and quality in service delivery for families across the state. PCCs are service hubs for families with young children – an actual place in the local community where families are always welcome and can always get the support they need, regardless of economic status or family status.

Ongoing Challenges – Workforce Competition

The legislature supported an increase in base funding for FY2023 for the PCCs Integrated Grant, which is spread across the 15 Parent Child Centers to deliver services to all families with young children in Vermont. This increase has definitely made a difference for our families and also our staff. However, the decades of level underfunding prior to that year have caused significant challenges for paying our staff competitive wages.

Our Request – Increase Base Funding to Support our Staff & the Families We Serve

Increasing the PCCN base funding (Dept ID 603650) by \$5.2 million would get us to our goal of \$10 million statewide. This increase in the PCC Integrated Grant funding would allow the Parent Child Centers to increase wages and/or benefits to be competitive in the workforce marketplace so that families with young children can receive consistent, high-quality services and supports from people that they know and trust.

This base funding increase request has been a long-standing request to bring PCC staff closer to parity with similar positions in the education and state sectors. Parent Child Centers provide supports and services to families with young children, and these supports and services are delivered by staff people. Because of decades of underfunding, the PCCs are not able to compete in the (ever tighter) workforce market, which creates situations where positions are not filled for long periods of time and/or they turnover frequently. Because these services require strong relationships with families over time, consistent and qualified staff people are important.



Thus, increasing the funding for the Integrated PCC Grant, which funds the 8 Core Services that all 15 Parent Child Centers deliver on behalf of the state, is critical.



PCCN Salary & Benefits Gap

Critical Need #1 – Increased funding for Parent Child Centers by \$5.2 million to close the salary and funding gap

How did we arrive at the \$5.2 million dollar gap?

We compared the following job titles to similar positions at the state level and education:

- Social Worker
- Child Benefits Specialist
- Early Childhood Teacher

We gathered average salary information for the positions above from Parent Child Centers (PCC) and compared them to state and education at the step four level, meaning four years of experience. We thought it would be a conservative comparison since many of the staff in these PCC positions exceed four years of experience.

On average, the PCC Network salary ratio is 21% below state and education rates with some job titles as low as 32%. PCC salaries that came in at less than 21% of state and education rates usually meant those employees exceed 4 years of experience.

Based on an average differential of \$11,893, taking into consideration PCC's account for approximately 330 direct service staff, **the total salary gap estimate is approximately \$3.92 million.**

Specific to health insurance, the state benefit exceeds the PCC benefit by approximately 50% making **the health benefit gap approximately \$620,375.** 2 out of 15 cannot afford to contribute towards health insurance.

The State retirement contribution is 17% vs 3% at the PCC level. **The estimated retirement benefits gap about \$1.94 million.** 5 out of 15 cannot afford to offer the benefit.

The PCC Network has a direct service staff turnover rate that ranges from 3 to 41% with the average being 16%. Our childcare turnover rates in some regions exceed 60%.



State vs PCCN Salary & Benefits Gap

Salary Gap examples (based on state of Vermont pay step 4):

Social Worker: State pay \$59,883, PCCN pay \$45,528, a difference of \$14,355

Child Benefits Specialist: State pay \$51,875, PCCN pay \$46,086, a difference of \$5,789

Early Childhood Teacher: Public Pre-K pay \$58,843, PCCN pay \$40,040, a difference of \$18,803

Health Insurance gap:

State contributes \$11,738, PCCN on average \$8,528. 2 out of 15 Parent Child Centers can't afford to contribute towards health insurance.

Retirement Benefits:

State contributes 27% of salary to benefits, PCCN on average 3%. 5 out of 15 PCCS can't afford to contribute towards retirement.



Parent Child Centers are the Answer

Parent Child Centers provide eight core services across the state.

Home Visits

PCC's provide home visits to families with young children who request home-based support. The frequency and content of visits is determined by family goals and interest.

Early Childhood Services

PCCs provide developmental, inclusive, child care on-site or in strong collaboration with other early childhood services providers to ensure that families have quality options to meet full-time and part-time child care needs and children have group experiences with their peers. PCCs provide services through Learning Together and Strengthening Families programming.

Parent Education

PCC's offer parent education opportunities in a variety of formats and on a range of topics and themes responding to family issues. Educational opportunities are supportive, practically-oriented, and empowering. Information to assist families in understanding and coping with transition issues is included in education services and are also embedded in other services.



Information and Referral

PCC's serve as a clearinghouse for general information about child development and parenting as well as information about local and statewide resources for families. They contribute to the long-term health and well-being of children and families by sharing information about health care (insurance programs, medical homes and related resources). Service is provided through direct referral and follow-up, if requested. PCCs support services to welcome babies into the community.

Playgroups

PCC's provide and support opportunities for parents and children to come together on a regular basis for socialization, peer support, healthy snacks, and information and resource sharing in a developmentally-appropriate setting.

Parent Support Groups

PCC's facilitate opportunities for families with common experience and interests to gain mutual support in a peer group setting.

Concrete Supports

Families have access to a welcoming environment which offers support and information about community services and resources to address the immediate needs of the family and/or contribute to the long-term well-being of the family.

Community Development

PCC's advocate for and contribute to family-centered services and events by taking a supportive and/or leadership role in broad-based promotion, prevention and early intervention efforts in the community. PCCs actively participate in the regional Building Bright Futures (BBF) Council to ensure that direct service activities funded or supported by this grant are aligned with the Vermont Early Childhood Action Plan and regional priorities as identified by the regional BBF Council.

Please Increase Base Funding for Parent Child Centers

We, the undersigned, ask you to increase the base funding for Parent Child Centers to \$10 million statewide. This increase in the PCC Integrated Grant funding would allow the Parent Child Centers to increase wages and/or benefits to be competitive in the workforce marketplace so that families with young children can receive consistent, high-quality services and supports from people that they know and trust.

Parent Child Centers (PCCs) were established in Vermont statute in the late 1980s. Vermont's 15 PCCs provide eight core services to families with young children on behalf of the state. Last year, with the passage of Act 150, the Parent Child Center Network of providers was recognized and codified as a partner working with the State to provide these services and supports. The Parent Child Center Network has been working for several years to ensure consistency and quality in service delivery for families across the state. PCCs are service hubs for families with young children – an actual place in the local community where families are always welcome and can always get the support they need, regardless of economic status or family status.

Sincerely,

Alliance for Period Supplies
 American Academy of Pediatrics (AAP) -Vermont
 Association of Africans Living in Vermont
 Bennington County Head Start
 Blue Cross and Blue Shield of Vermont
 Brandon Speech-Language Pathology
 Capstone Community Action
 Center for Restorative Justice
 Central VT Home Health & Hospice
 Champlain Valley Office of Economic Opportunity
 Child Care Resource
 Clarina Howard Nichols Center
 Copley Hospital
 Counseling Service of Addison County
 Cross Apartments, LLC
 DCF, Family Services (Bennington District)
 Downstreet Housing and Community Development
 Early Care and Learning Partnership
 EasterSeals Vermont
 Felicia's inc
 Greater Bennington Community Services
 Green Mountain Community Network, Inc.
 Green Mountain United Way
 GW Tatro
 Heidi's Therapy PLC
 Horizon Early Learning Program, LLC
 Hunger Free Vermont
 John Graham Housing & Services
 KidSafe Collaborative
 King Street Center
 Lamoille Community House
 Lamoille County Mental Health Services



Lamoille Restorative Center
 Laraway Youth & Family Services
 Mary Johnson Children's Center
 NKHS
 North Central Vermont Recovery Center
 Northeast Kingdom Community Action
 Northern Counties Health Care
 Otter Creek Therapies
 Public Health Council of the Upper Valley
 Quarry Hill School
 Social Tinkering
 Southwest Vermont Supervisory Union
 St. Johnsbury Community Hub
 The Community Restorative Justice Center
 Timber Lane Pediatrics
 United Way of Addison County
 United Way of Lamoille County
 United Way of Rutland County
 University of Vermont Children's Hospital
 Upper Valley Haven, Inc.
 UVMHN- CVMC
 Vermont Adult Learning
 Vermont Association of Mental Health and Addiction
 Recovery
 Vermont Family Network
 Vermont Farmers Food Center
 Vermont Foodbank
 VNA & Hospice of the Southwest Region
 Washington County Mental Health Services, Inc.
 Washington County Youth Service Bureau
 Windham SouthEast School District
 YWCA VT Camp Hochelaga



Children's Integrated Services (CIS) Community Data System Expansion Proposal

February 2023

Submitted by the Winston Prouty Center and the Family Center of Washington County

Proposal Summary

In 2020, the Child Development Division (CDD) awarded the Family Center of Washington County funds to adapt its Salesforce data system solution into a CIS Community Data System. With adequate funding, the system can be made available to other CIS providers across the state. We propose using a one-time investment of **\$768,180 in FY24** to begin to expand the data system solution to three more CIS regions.

About CIS

CIS provides child health promotion, prevention, and early intervention services to pregnant and post-partum women, infants, and children birth to age six, their families, and specialized child care providers.

CIS services are part of a coordinated continuum of care across multiple types of providers and settings. The goal is to improve the health and well-being of pregnant/postpartum women, infants, and children through connections with high quality health care and community support services.

CIS contracts are held by 12 regional fiscal agents. Those community-based agencies in turn contract with subcontractors to provide services at the local level.

The Current State of CIS Data Management

CIS uses an array of data for multiple purposes, including monitoring and evaluating the delivery and integration of services, satisfying state and federal reporting requirements, and identifying areas of success and opportunities for improvement. Data collection and reporting supports better outcomes for families and promotes data-informed decision-making.

It has been over 10 years since the State's first attempt to build a data system for CIS. During that time two different major initiatives failed and to date CDD has not provided a data system for collecting and reporting data. Without a proper data system, CIS providers lack the ability to visualize data, track client progress, and make real-time changes to their service plans.

Over time, community agencies delivering CIS services have had to develop their own data management systems. Some of agencies still track client case management data by hand, using a paper filing system and manually entering data in Excel spreadsheets.

CIS Data System in the Washington County Region

In the Washington County CIS region, the Family Center of Washington County (FCWC) initially developed their own database in 2016 using private funds. In 2020, with financial support from CDD and consultation with the Agency of Digital Services, FCWC worked with Exponent Partners (EP), a national technology company, to implement a Salesforce Community using the FCWC solution.

The FCWC system includes three out of five CIS services (Early Intervention, Family Support Home Visiting, and Specialized Childcare Supports), but could be expanded to cover the other services. This expansion is included in the attached proposed project budget.

Expansion Proposal

Based on the success of the FCWC data system, we propose an investment to allow the expansion of the FCWC solution to more CIS regions in Vermont. The budget below outlines a phased expansion into three new regions each year. All CIS Fiscal Agents have indicated support and/or interest in the project, with several indicating strong interest in making the conversion in the first year.

This approach has several key benefits:

- Proven track record – this system has been in place at FCWC since 2016, supported and maintained by EP through an annual support contract which includes program updates, resolving technical issues, and making improvements as requested.
- Expandable -- the system can be built upon by adding programs and become a whole agency solution.
- Cost effective – much of the upfront development work has been done; adding on to an existing system based on pre-configured templates or modules is much less expensive than starting from scratch.
- Alignment – other CDD systems are based on the Salesforce platform and can be integrated with each other and other state systems.
- Phased in – the proposal allows for individual regions to build-out the system and gain benefits in their region, as the statewide system is developed over time.

Full Project Budget

Expenses	Description	FY24	FY25	FY26	3-year total
Licenses and Fees	\$515/user/year; Estimated to be 20 users per region, up to 240 statewide (3 regions/year)	\$123,600	\$123,600	\$123,600	\$370,800
Building additional modules and improve existing modules	\$100,000/module including improvements	\$200,000			\$200,000
Training, Transition, and Solution adoption support	Training, personnel, community partners support (3/year)	\$150,000	\$150,000	\$150,000	\$450,000
System Administrator	Community Partners system administrator at FCWC	\$100,000	\$100,000	\$100,000	\$300,000
Exponent Partners contract	Developer Managed Services Support	\$140,000	\$140,000	\$140,000	\$420,000
Equipment and Tech Needs	\$6,000 per region (3/year)	\$18,000	\$18,000	\$18,000	\$54,000
Admin./Support fees for FCWC	5% of total before admin fee	\$36,580	\$26,580	\$26,580	\$89,740
Total		\$768,180	\$558,180	\$558,180	\$1,884,540