

Parent Child Centers are the Answer Legislative Platform 2017



Parent Child Centers (PCCs) are a network of 15 community-based non-profit organizations, serving all of Vermont. The purpose of each PCC is to provide support and education to families with young children. We use the Strengthening Families Protective Factors Framework with the goal to help all Vermont families get off to a healthy start, promote well-being and build on family strengths.

Critical Need #1 – Increased funding for Parent Child Centers

The PCCs deliver critical & essential state services to families with young children. Parent Child Center staff wages and benefits are continually *30% below market rates* to comparable positions in education and state government. If PCCs are expected to continue to provide high quality state services, *PCC wages and benefits must sustain the highly skilled people who do the work.*

PCCs now have a Master grant that adheres to the Sec. E.300.4 of the 2015 Budget Bill: *Human Services; Improving Grants Management for Results-Based Programs.* The Master Grant increases efficiency and clearly identifies Results Based Accountability population outcomes and program performance measures. However, the Master Grant *does not adequately fund* the state services that it requires the PCCs to deliver.

***Master Grant funding must increase by \$8,000,000 to close the salary and funding gap.
Total PCC Master Grant funding must be \$10,000,000.***

Parent Child Centers Core Services

Home Visits
Early Childhood Services
Parent Education
Playgroups
Parent Support Groups
Concrete Supports
Community Development
Information & Referral

Critical Need #2 - Preventing Adverse Childhood Experiences (ACEs)

All Payer Waiver dollars invested in Parent Child Center services can dramatically reduce the rising health care costs in the state of Vermont.

- PCCs are critical community leaders that focus on the prevention of ACEs.
- We provide families with *concrete supports and education to care for their children.*
- Parent Child Centers work with families using a *Two Generational Approach* with a *comprehensive array of supports and services.*
- This approach leads to better outcomes for children and can also have a positive impact on the physical, mental and emotional health and well-being of families.

ADVERSE CHILDHOOD EXPERIENCES:

1. Physical abuse
2. Sexual abuse
3. Emotional abuse
4. Physical neglect
5. Emotional neglect
6. Mother treated violently
7. Household substance abuse
8. Household mental illness
9. Parental separation or divorce
10. Incarcerated household member

***57% of Vermonters have one or more ACEs
and 22% have 3 or more ACEs.***



Research has proven that prevention services targeted at reducing and treating ACEs can dramatically reduce long term health care costs.

Critical Need #3 - Current Services Budget

We look forward to the administration's completion of a current services budget that honestly reflects the true cost of providing state services at the levels required in state law and at the true cost of these services. Years of level funding for both government-delivered programs and state services delivered by non-profit agencies have created a widening gap between the real costs of these state programs and the state funding provided to deliver them. *This cost-shift means that the state government is requiring non-profit agencies to pay for the delivery of state services, or to reduce or eliminate those services without specific policy changes.*



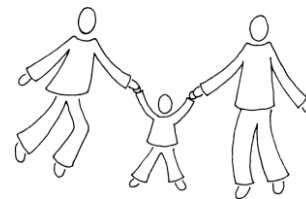
> Planning and implementation of current services budgets will allow the administration, the legislature, state workers, and non-profit agencies have a *clear and deliberate conversation about funding priorities* and ensuring the delivery of state services to those in need.

> PCCs will partner with the administration to develop budgets that honestly reflect the true cost of providing necessary and critical state services at the levels required by state law at the true cost of these services.

Critical Need #4 - Children's Integrated Services

Children's Integrated Services (CIS) offers early intervention, family support and prevention services that help ensure the healthy development and well-being of children pre-birth through age five.

- Addition and increases in child custody rates have propelled CIS and the service system into crisis in Vermont. Increases and demand for services is not keeping pace with funding resulting in an underfunded mandate across the State.
- We are coming up short in meeting our obligation to our youngest learners including those entitled to Early Intervention services mandated by Federal law.
- **Increased Medicaid Global Commitment dollars and additional General Fund dollars would ensure:**
 - continued progress on family safety and stability
 - optimal and healthy child development
 - young children's access to quality early care and education



We support the Early Childhood Alliance's request to increase and diversify funding for CIS.

Critical Need #5 - Family and Medical Leave Insurance (FaMLi)

Vermont Parent Child Center Network supports the FaMLi coalition and stands behind all Vermont workers having paid family medical leave. A statewide family and medical leave insurance program would:

- Give every Vermont worker paid time off to care for a new child or loved one or recover from illness.
- Promote economic security for women and families.
- Level the playing field for small businesses.
- Enable more parents to stay home with new babies, which would help address Vermont's shortage of regulated childcare for infants.

PARENT CHILD CENTERS = RESULTS

The mission of the Vermont Parent Child Center Network is to provide children, youth and families with strength based, holistic and collaborative services across Vermont with a focus on early childhood education and prevention services. The Network provides leadership, support and advocacy on behalf of its membership and in collaboration with key partners to achieve the best outcomes for families.