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Public Hearing Appropriations Testimony

Thank you for the opportunity to testify. My name is Claire Kendall, Co Executive Director at the Family Center of Washington County. The Family Center is a member of the Parent Child Center Network, and we are the Parent Child Center in Central Vermont.

**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 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 Center Core Services:**

- Home Visits
- Early Childhood Services
- Parent Education
- Playgroups
- Parent Support Groups
- Concrete Supports

Community Development  
Information & Referral

**Investing health care reform dollars in Parent Child Center services to address social determinants of health can reduce the rising health care costs in the state of Vermont. Health Promotion and Preventing Chronic Disease Aligns with PCC Core Services.** We provide a set of upstream services in every community to help ensure family needs are met and to help prevent high cost crisis intervention services.

**Focused on Prevention:** helping all families get off to a healthy start, promoting well-being, building on family strength, keeping children safe, and preventing problems (i.e. illiteracy, poor health, welfare dependency, family violence, sexual, physical and emotional abuse) that have proved to be so costly to our society in both human and financial terms.

- **Providing early interventions and a two-generation approach ensures holistic services where both the child and parents needs are addressed.**
- **Talking about what's right with someone rather than what's wrong with them helps to promote resilient kids and families.**
- **Strengthening Families Protective Factors:** promoting parental resiliency, social connections, knowledge of parenting and child development, concrete supports, and the social/emotional competence of children.

We cannot keep pace with community needs at current staffing levels and often children are not receiving the services warranted by child & family need. Timeliness of services and delays in services are products of underfunding and inadequate staffing. We struggle to hire and retain master and bachelor level trained staff on lower than average salaries. PCCs can no longer pay their staff enough to avoid increasing turn-over rates and staff vacancies. This leads to a lack of access to services due to vacancies.

This translates into reduced services for children and families at a time when research points to early investment having a high rate of return if adequate investments are made. By investing in PCCs the state heads upstream from Family Services. Vermonters need the support of a strong prevention, early intervention and family strengthening system to reduce the number of families coming into Family Services involvement. The system needs shoring up, not further erosion. *An increased investment in Parent Child Centers would help to support young children and families who need these critical services to help ensure family safety and stability; healthy child development; and families' access to quality parenting support and early care and education.*

**Level Funding = A Cut**

- Staff leaving for higher wages and better benefits in education, health or state positions.
- A deeper erosion of the social safety net of services that, as we know from research, demonstrate better long-term health outcomes for Vermonters.
- A diminished capacity to meet the basic needs of Vermonters.
- More kids in the deep end of the system because we didn't support upstream services.

**Thank you very much for the opportunity to provide testimony to your committee.**



**The Family Center** is a Parent Child Center located in Montpelier VT. **The 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 wellbeing and build on family strengths.



The Family Center provides services and resources to all children and families in our region. Here's a story of how your support made a difference for April, and help us achieve

*"I got pregnant in my senior year and in June 2015 gave birth to a beautiful baby girl. Being pregnant in high school was very difficult – I lost all of my friends and didn't feel safe or supported. I continued to go to school anyway and graduated. I had to stop working at seven months pregnant and it was then that **I learned about the services offered at the Family Center.** With the guidance of a case manager, we made plans for my boyfriend to continue going to high school while I decided to participate in a program called Family Works. **That's when I really started to grow as an adult.**"*

***The Family Works program offered opportunities to help me keep my life on-track.** I began as a volunteer in the Family Center's Early Childhood Program. **I learned parenting skills** while I worked and had access to educators who could answer all of my questions about my daughter's development. I learned that I wanted to work with young children and I'm now in a paid training position! I'm also working on earning my Child Development Associate credential and hope to be hired as an infant toddler teacher when I finish. **Without the Family Works program and support of other Family Center staff, I wouldn't be moving forward** as quickly as I am now. I have become more independent and well grounded, and have **learned to problem solve situations that may have been very difficult in the past.** I now have a **career goal** and I'm even thinking about **going to college!** That's a new thought for me!"*

#### **Which services did April receive?**

**Parent Supports** – Family Works, a program for pregnant or parenting teens and young adults. Services includes job skills, parenting support, work experience, peer group activities, access to child care, counseling services and more.

**Parent Education** – knowledge of child development, weekly counseling, and life skills groups.

**Early Childhood Services** – including 4 STARS, high quality care and education and nutritious meals daily - including a healthy breakfast, lunch and afternoon snack.

#### **April's work with the Parent Child Centers improves both her and the state's economic future.**

**Wages Based on Degree:** A person holding a high school diploma can earn 20% more, on average, than someone without that diploma. \$24,960 (@ \$12.48/hr) vs. \$30,000 (\$15/hr)

**High Quality Child Care= 7 to 1 ROI:** Child Care Financial Assistance payment of \$10,164 year results in a potential savings to the state of \$31,850 annually= \$7 "return to society" which is connected to lower special education costs, lower crime rate, higher earnings, better health behaviors, higher rates of employment

**ACEs Intervention Savings= \$210,000 (2010 dollars):** Individuals with a higher number of ACEs are more likely to smoke, abuse alcohol and illicit substances, be obese, be physically inactive, and exhibit high-risk sexual behaviors. In addition to profound health effects, child abuse and neglect is also associated: including \$33,000 in childhood health care costs, \$11,000 in adult medical costs, \$144,000 in productivity losses, \$8,000 in child welfare costs, \$7,000 in criminal justice costs, and \$8,000 in special education costs.

**The services April received relate directly to the outcomes that drive our decision making as a state under Act 186.** April's case shows how supporting Vermont's Parent Child Center moves us closer to achieving at least four of the eight population outcomes we have identified as essential to our state, and local communities.

***The Family Center helped April and her boyfriend stay in school***

- Vermont's children and young people achieve their potential including;
  - o Pregnant women and young people thrive, Children succeed in school, Youths choose healthy behaviors, Youths successfully transition to adulthood
- Vermont has a prosperous economy

***April learned parenting skills, and volunteered to care for children in her community***

- Vermont's families are safe, nurturing, stable, and supported.
- Vermont's communities are safe and supportive.
- Vermont's children and young people achieve their potential including;
  - o Pregnant women and young people thrive, Youths successfully transition to adulthood

***The Family Center helped April find a paid training position***

- Vermont has a prosperous economy.
- Vermont's families are safe, nurturing, stable, and supported.
- Vermont's children and young people achieve their potential including
  - o Pregnant women and young people thrive, Youths successfully transition to adulthood

***April is currently working on her Child Development Associate credential***

- Vermont has a prosperous economy.
- Vermont's children and young people achieve their potential including
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***The family center helped April identify her career goal and help her find a path to achieving it***

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***The help April received directly impacts five indicators tracked by AHS to measure positive population outcomes.<sup>1</sup>***

- Rate of children and youth in out of home care per 1,000 children and youth; Rate of school attendance per 1,000 children;
- Percent of children receiving child care subsidy attending quality early childhood programs.
- Rate of high school graduation per 1,000 high school students
- Percent of high school seniors with plans for education, vocational training, or employment.
- High school graduates who graduated with a Regular High School diploma and enrolled in postsecondary education within 16 months after high school graduation.

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<sup>1</sup> [http://spotlight.vermont.gov/sites/finance\\_transparency/files/PerformanceMeasures/Outcomes\\_Indicators\\_2016\\_FINAL.pdf](http://spotlight.vermont.gov/sites/finance_transparency/files/PerformanceMeasures/Outcomes_Indicators_2016_FINAL.pdf)

# Parent Child Centers are the Answer Legislative Platform 2017



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## Critical Need #1 – Increased funding for Parent Child Centers

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### Parent Child Centers Core Services

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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.*

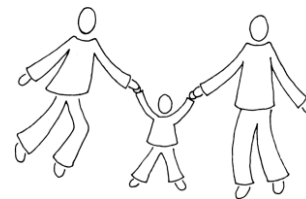


- > Planning and implementation of current services budgets will allow the administration, the legislature, state workers, and non-profit agencies have a *clear and deliberate conversation about funding priorities* and ensuring the delivery of state services to those in need.
- > PCCs will partner with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