



TESTIMONY ON VERMONT'S PARENT CHILD CENTER MASTER GRANT FUNDING

Senate Appropriations Committee
Advocates Hearing – April 6, 2017

Good afternoon. My name is Emily Marshia. I am the Co-Executive Director of the Orange County Parent Child Center and a champion for all Vermont Parent Child Centers.

We are a network of 15 parent child centers, serving thousands of children and families every year. We are 377 FTE's strong, yet our parent child center employees earn an average of 30% less than comparable positions in education, healthcare and state government.

We experience an average turnover rate of 18% and often lose our staff to higher paying, better-benefited positions. Our analysis of this discrepancy represents our request for an \$8million increase to our base grant to make up that differential.

Our eight core services include: home visiting, early childhood services, parent education, parent support, playgroups, concrete support, community development, and information & referral. I see these core prevention programs and services as a consistent thread across disconnected collections of isolated towns and villages. Whether you find a parent child center in extreme rural Tunbridge or more centralized Chittenden County, families rely on one-time or long-term supports where they need it – at home, in a center, or perhaps in the community, where it is most comfortable for them.

This flexible approach delivers successful results time and again because it focuses on the strengths families already have in addressing the challenges they face. This approach is consistent, accessible, and multi-generational – by design. The parent child center approach helps parents mitigate their own adverse childhood experiences (ACES) and prevent them for their children, which lessens education, healthcare and social service costs for everyone. For all these reasons, the parent child center approach works...

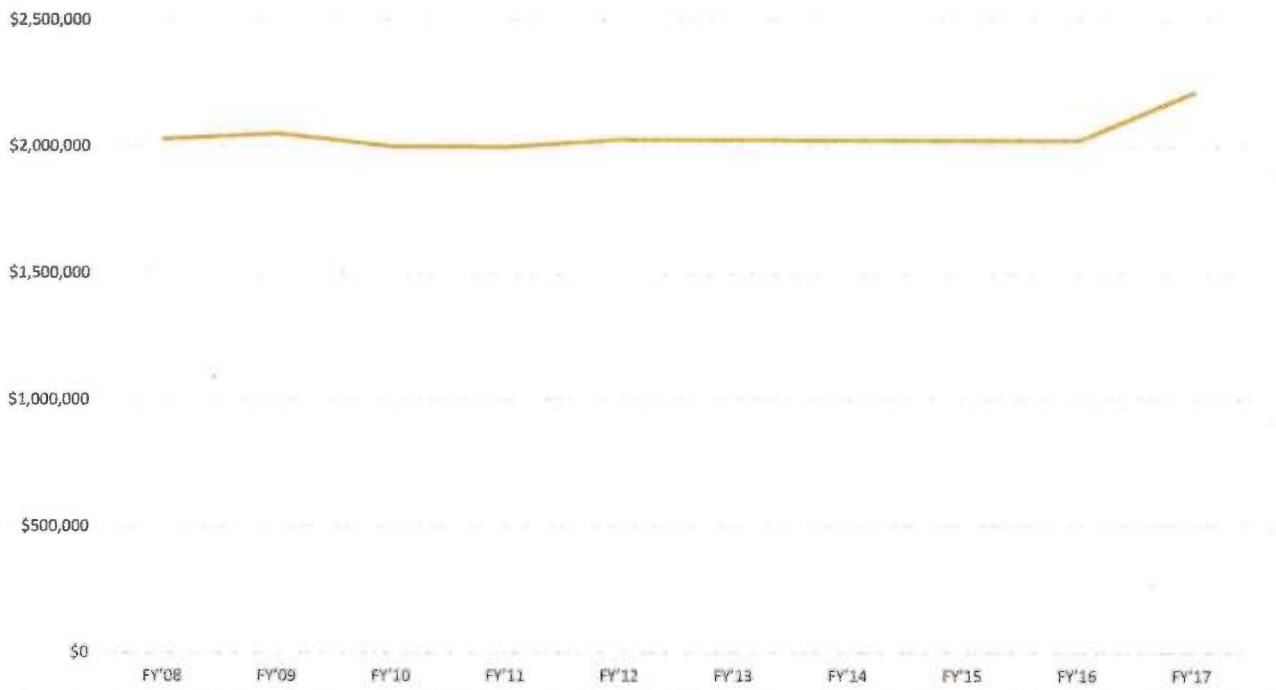
I am an example of one such parent child center employee who was offered a significantly higher paying job for a private, state-wide organization. Because I am a parent of four young children, I took that raise and the opportunities that came with it. But it wasn't the right fit for me. After just a year, I

returned to the Orange County Parent Child Center because I missed working in my own community and seeing the impacts of my work. I missed interacting with children and families and finding solutions for our community's challenges alongside them. I believe so strongly in the work we do as parent child centers that I went back to the work I have found to be the most effective.

Our partners in state government recognize the robust quality of our work too and together we've developed a Master grant agreement that encompasses our eight critical services into one efficient funding stream with specific program performance measures.

To bridge this salary gap, we request that the Master grant be sufficiently funded at \$10 million; this represents an \$8 million increase to close the wage gap. In considering this request, I remind you that this is not a new approach. This is results-proven, family-centered work already taking place out in your communities. We know how to make great gains with families and I ask for your support in securing the parent child center approach.

CDD Master Grant Funding for Parent Child Centers



#1 Note: The Master Grant represents four funding streams totaling \$2,200,000 that were combined into one grant in FY'17

#2 Note: The Master Grant received a \$190,000 legislative increase in FY'17 for the first time in 10 years representing less than 1% per year growth.

#3 Note: PCCs provide a total of \$24,000,000 in services from state, federal and private grant funding sources that have approximated the same level funding over the past ten years.

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 <i>57% of Vermonters have one or more ACEs and 22% have 3 or more ACEs.</i>



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.



Parent Child Centers are the Answer

The Parent Child Centers Master Grant uses Results Based Accountability Population Level Outcomes.

Population-level Quality of Life Outcomes – ACT 186 of 2014 - 3 V.S.A. § 2311:

1. Vermont has a prosperous economy.
2. Vermonters are healthy.
3. Vermont’s environment is clean and sustainable.
4. Vermont’s communities are safe and supportive.
5. Vermont’s families are safe, nurturing, stable, and supported.
6. Vermont’s children and young people achieve their potential, including:
 - a. Pregnant women and young people thrive
 - b. Children are ready for school
 - c. Children succeed in school
 - d. Youths choose healthy behaviors
 - e. Youths successfully transition to adulthood
7. Vermont’s elders and people with disabilities and people with mental conditions live with dignity and independence in settings they prefer.
8. Vermont has open, effective, and inclusive government at the State and local levels.

Related language from the PCC Master Grant:

C. iii. Parent Child Centers provide eight core services which contribute to Vermont population-level quality of life indicators identified in 3 V.S.A. § 2311

(b) (5) Vermont families are safe, nurturing, stable and supported.

(6) Vermont’s children and young people achieve their potential.

(A) Pregnant women and young people thrive.

(B) Children are ready for school.

(C) Children succeed in school.

Eight Core Services and Correlating Statutory Population-level Outcomes:

Home Visits - 2, 4, 5, 6

- Vermonters are healthy
- Vermont’s communities are safe and supported
- Vermont’s families are safe, nurturing, stable, and supported
- Vermont’s children and young people achieve their potential

Early Childhood Services - 1, 6

- Vermont has a prosperous economy (adults able to work or find better jobs because of child enrollment)
- Vermont’s children and young people achieve their potential

Parent Education - 5, 6

- Vermont’s families are safe, nurturing, stable, and supported
- Vermont’s children and young people achieve their potential

Playgroups - 6

- Vermont’s children and young people achieve their potential

Parent Support Groups - 5, 6

- Vermont’s families are safe, nurturing, stable, and supported
- Vermont’s children and young people achieve their potential

Concrete Supports - 2, 5

- Vermonters are healthy
- Vermont’s families are safe, nurturing, stable, and supported

Community Development &

Information & Referral - 1, 2, 5, 6

- Vermont has a prosperous economy
- Vermonters are healthy
- Vermont’s families are safe, nurturing, stable, and supported
- Vermont’s communities are safe and supported
- Vermont’s children and young people achieve their potential

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