**TO: Senate Health and Welfare Committee** 

FR: Parent Child Center Network - Amy Johnson, Chair

**DATE: January 30, 2020** 

RE: Responses to questions asked during testimony on S.263

What is the structure of the PCCN? How does it provide accountability now for PCCs? How do you imagine working with AHS on accountability measures?

The Parent Child Center Network is a distinct 501c3 organization with officers/leadership elected/nominated annually- a Chair, past Chair, Secretary and treasurer. There is a fiscal agent for the Network, and we have the capacity to receive and administer Network grants. We work with the Agency of Human Services/Department of Children and Families to meet performance measures through the master grant reporting process. Our Peer Review process provides accountability for each individual agency, with a review every 3 years for each Parent Child Center, in a cycle of 5 total each year (15 PCCs). Each PCC conducts family surveys twice annually. The National Family Strengthening Standards of Quality process will ensure a statewide baseline of quality standards. NFSSQ includes an annual self-assessment for each PCC – see below for a bit more on this.

How will this bill help to improve outcomes for families PCCs serve? How would it help to provide seamless services and supports for families when they are working with different agencies and/or moving to different areas of the state?

Throughout the state, each Parent Child Center sits at many tables with community and state partners in each region. PCCs are leaders and members in each region at the CIS, BBF, housing & homelessness tables, substance misuse, IFS, community health teams, Economic & Family Services. At these tables we represent and advocate for families' needs, collaborate with partners to reduce duplication, increase efficiency and to keep family voice and needs at the center of the service planning.

PCCs work to meet families where they are at throughout our communities and try to meet the needs of all with a *no wrong door* approach. PCC's collaborate across regions to make a seamless transition for children and families that move from one region to another. By using consistent measures, standards and core philosophy, PCC's are able to offer families a warm handoff between PCC's across the state. The consistency of the Eight Core Services, the Strengthening Families Framework, the multi-generational approach, and the commitment to standards will all be strengthened by S.263, and the Parent Child Center Network will have a more formal role in ensuring this consistency across the state.

The Parent Child Center Network has committed to the National Family Strengthening Standards of Quality process, and the bill will also formalize the relationship of the PCCN to holding each PCC accountable. By ensuring we are aligned with the National Standards we will offer formal opportunities for families to share with us what they need which in turn will allow us

to be even more responsive to our communities and offer supports that will be accessed by families and will support what they state their needs are.

How will this bill help PCCs? Is primary prevention in this bill? How does it strengthen PCCs?

The Parent Child Centers' Eight Core Services are essentially primary prevention supports and services for expectant families and families with young children. This bill will formalize the PCCs' role in the state's primary prevention strategies for these families. It recognizes the key role the PCCs play and also formalizes a structure of accountability to ensure consistency and quality across the state for these services.

Where are gaps in services now? How would this bill help to level the playing field?

Historically and currently, prevention and upstream services have been and continue to be underfunded. Despite the legislature's work in recent years to focus attention on prevention services, as well as some positive developments to begin to move money upstream, our child and family dollars are still invested heavily in crisis intervention, and therefore needs and costs continue to rise in child welfare and child protection.

Investing in PCC's as critical primary prevention upstream supports for families means that families will have the opportunity to access services and thus build family strengthening & protective factors, which will stabilize children and families, reduce ACEs and the high costs associated with the long-term consequences when families do not get these upstream supports.

Parent Child Centers have historically provided a wide array of services, even with chronic underfunding, and are able to leverage relationships with families and community partners to broaden the safety net for families with young children and connect them with supports and resources. By design, this looks a little bit different in each region, but every PCC's services and supports fall within the Eight Core Services. The Eight Core Services are designed to be interconnected and to ensure that families have the wrap-around support they need to succeed. That said, because of underfunding, providing all the services that all of our families need is a constant challenge, and our outreach efforts are limited because we are basically at capacity all the time. We could always do more for families, and families would be even more successful if we had this capacity.

How does the national network work? How would the standards work to hold PCCs accountable for outcomes?

The standards give us a tool to ensure we are adhering to best practices for evaluation of our programs and services. These practices include getting feedback from multiple stakeholders including parents, community partners, staff and board members. To continue with our standards implementation each PCC will have to do a self-assessment process every year. This will get worked into our current peer review process as well to help ensure quality practices. The process and national organization will also provide tools to elicit feedback from families,

including their own self reporting on whether the programs increased their protective factors. We are already starting to incorporate this into our outcomes data through a grant that we recently received for this effort. Finally, the national standards process will create a common framework for consistency of service delivery practice across PCC's statewide.

How does Home Visiting work?

PCC's have trained Home Visitors that work with families in the community using the Parent Child Center Home Visiting model that is evidence informed and follows the comprehensive family support home visiting practices as submitted to and approved by CDD in partnership with Kay Johnson as consultant on our application. This work is part of our Eight Core Services.

Separately, PCCs are working with the Department of Health and AHS on the proposal for a sustained Home Visiting program.