Parent Child Centers (PCCs): Evaluation of Master Grant

The 2019 budget bill included the following language:

Sec. E.317 PARENT CHILD CENTER NETWORK: EVALUATION OF MASTER GRANT
(a) The Agency of Human Services, in consultation with the parent child center network, shall calculate the true value of the services delivered through the network’s master grant. The Agency shall present these findings as part of the fiscal year 2020 budget presentation.

Representatives from DCF/CDD met with representatives of the Parent Child Center Network three times during the fall of 2018 to discuss this evaluation and how to frame its report.

The master grant was created in January of 2017 and funds eight core services (detailed further below). Each PCC structures and delivers these core services differently to best meet the needs of their community. Each PCC also has other public and private funding sources based on other services they provide to their community. Given these two variables, it was determined that the best way to respond to this request from the legislature was to focus the report on the eight core services that are delivered across all 15 PCCs.

For the purpose of this report, DCF has provided an overview of the master grant and other DCF funding awarded to the PCCs. The Parent Child Center Network has agreed to respond to this report with their own findings regarding the value of their services.

History, Role and Purpose of the Parent Child Centers

Vermont’s fifteen (15) Parent Child Centers form a network of community-based organizations serving all families and children of Vermont, with a special focus on families with young children, young parents, and pregnant and parenting teens. Parent Child Centers are all independent nonprofit organizations, or programs within nonprofits such as a designated agency or a community action agency. Each center provides a range of supports and services for young parents and young children, both through the centers’ own programs and as clearing houses and referral sources for a variety of other state and other nonprofit services. All PCCs share a core philosophy and a core set of services. The goals are to help all families get off to a healthy start; promote well-being; welcome babies; build on family strengths; and prevent problems, i.e., illiteracy, poor health, welfare dependence, family violence, or sexual, physical and emotional abuse, that have proven to be so costly to our society in both human and financial terms.
Shared Values:
1. Parenting young children is the most wonderful, important, challenging job any of us will ever have yet the one for which we receive the least amount of preparation and support.
2. The parenting patterns that are established early in a family’s development are the ones that form the foundations for life. The best we can do, both humanely and financially, is to prevent problems before they happen.
3. All families deserve whatever supports they need and want to do the best job possible in raising their children to be healthy, productive adults.
4. Services must be provided in the most coordinated, family-driven, comprehensive, and cost-effective way possible.
5. Individual communities - and families in particular - know best the kinds of services that make the most sense for them.
6. Communities must participate in defining, and constantly refining, the outcomes that they are working collectively to achieve and how progress toward outcomes is measured.

All Parent Child Centers are committed to providing, either directly or through referral, at a minimum the eight core serves described in the next section. Each Parent Child Center provides a physical presence in its community, a welcoming place for families with young children. In addition, each Parent Child Center includes parents and community members on boards and committees that govern the centers.

Eight Core Services:
Following is a brief description of each of the Parent Child Center eight core services:

Home Visits: Parent Child Centers provide home visits to families with young children who request home-based support. Frequency and content of visits is determined by family goals and interests. Interest areas may include child development, parent/child interactions, and community resources.

Early Childhood Services: Parent Child Centers provide developmental, inclusive, child care on site or in strong collaboration with other early childhood service providers to ensure that families have quality options to meet full and part-time child care needs and that children have group experiences with their peers.

Parent Education: Parent Child Centers offer parent education opportunities in a variety of formats and on a range of topics and themes responding to family issues. Programs are supportive, educational, practically-oriented and empowering.
Playgroups: Parent Child Centers provide opportunities for parents and children to come together on a regular basis for socialization, peer support, snack, information and resource sharing in a developmentally appropriate setting.

Parent Support Groups: Parent Child Centers facilitate opportunities for families with like common experience and interests to gain mutual support in a peer group setting.

On Site Services: All families have access to a welcoming environment which offers support, information, recreational opportunities and access to services and resources while being responsive to immediate needs.

Community Development: Parent Child Centers advocate for family-centered services by taking a leadership role in broad-based prevention and early intervention efforts, not only at the state level but also at the local level. PCCs partner with local community organizations, schools, businesses, institutions of higher learning, and other partners. Parent Child Centers’ partnerships extend beyond the scope of the base grant and state funding and are unique in each community. All Parent Child Centers are involved in “grassroots” efforts in their communities to improve the wellbeing of children and families.

Information and Referral: Parent Child centers serve as a clearinghouse for general information about child and family issues as well as information about local and statewide resources. Service is provided through direct referral and follow-up, if requested.

What the Research Shows:
Research has shown that Adverse Childhood Experiences (ACEs) can have a lifelong impact on one’s health and wellbeing. The 8 core services the PCCs provide to families and children are important strategies to mitigate and prevent ACEs. The Parent Child Centers also use the Strengthening Families Framework and have a two-generational approach to working with families, both are evidence-based strategies with proven results.

PCC Master Grant
Starting in 2017, CDD consolidated different PCC funding sources into one Master Grant. The following grants were combined into the Master Grant:

<table>
<thead>
<tr>
<th>Grant Type</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCC Base Funding</td>
<td>963,382</td>
</tr>
<tr>
<td>Direct Service Grant</td>
<td>942,334</td>
</tr>
<tr>
<td>CBCAP Funding¹</td>
<td>180,000</td>
</tr>
</tbody>
</table>

¹ Community-Based Child Abuse Prevention (CBCAP) Federal Grant Program
The master grant is currently $2.2 million and the allocation to each PCC is determined through the master grant contract. Performance measures were developed for the master grant and is a “work-in-progress” as we work towards establishing an uniform data reporting system across the 15 PCCs.

While the master grant can be considered base or core funding for the 15 PCCs, each PCC has other funding sources based on other services they provide for their community. Many of these other services are funded through DCF:

**Children’s Integrated Services (CIS):** CIS is a resource for families when they have questions or concerns about their child’s development during pregnancy, infancy and early childhood. Parents and professionals work together as a team to develop and implement a plan that best serves the needs of the child and its family. While 7 PCCs have CIS contracts thru CDD, nearly all PCCs are partners in CIS.

7 PCCs have CIS contracts: Addison County Parent Child Center in Middlebury, Family Center of Washington County, The Family Place in Norwich, Lamoille Family Center, NEKCA/PCC South in St. Johnsbury, Family Center of Northwestern VT in St. Albans, Springfield Area Parent Child Center and Sunrise Family Resource Center in Bennington.

**Community Child Care Support Agency (CCCSA):** A service to help families find child care providers and apply for childcare subsidy through the Childcare Financial Assistance Program.

7 PCCs have CCCSA contracts: Family Center of Washington County, The Family Place, Lamoille Family Center, NEKCA/PCC North in Newport, Family Center of Northwestern VT, Springfield Area Parent Child Center and Sunrise Family Resource Center.

**Strengthening Families Child Care (SFCC):** Grants to child care programs to ensure affordable access to high quality comprehensive child care for children and families challenged by economic instability and other environmental risk factors.

8 PCCs receive SFCC grants: Addison County PCC, Early Education Services in Windham, Family Center of Washington County, Lamoille Family Center, Lund, Milton Family Community Center, Springfield Area PCC, Sunrise Family Resource Center.

While not all PCCs receive this funding, all the PCCs except for the Family Center of Northwestern VT in St. Albans and NEKCA/Parent Child Center North in Newport operate child care centers.
**Vermont Children & Family Community Response Pilot (VCFCR):** A pilot program at three sites to provide short term services (12-16 weeks) to “at-risk” families with young children (0-6) to prevent involvement with the child welfare system. Referrals are made by Family Services.

3 PCCs receive VCFCR grants: Family Center of Northwestern VT, Rutland County PCC and Family Center of Washington County.

**Reach Up (RU):** The PCCs provide case management, job readiness, parent education and family support services to Reach Up participants who are teens or young parents and are preparing for employment.

9 PCCs have RU Case Management grants: Addison County PCC, Early Education Services in Windham, The Family Place, Lund, Milton Family Community Center, Family Center of Northwestern VT, Orange County PCC, Rutland County PCC and Springfield Area PCC.

5 PCCs have a RU Worksite Employment Case Management grants: Family Center of Washington County, Lamoille Family Center, NEKCA/Parent Child Center North, NEKCA/Parent Child Center South and Sunrise Family Resource Center.

**Supervised Visitation Services:** One PCC has an FSD contract to provide supervised visitation to non-custodial parents that are court-ordered. (Orange County PCC)

**Child Advocacy Center Forensic Interviewer:** One PCC is the area’s Child Advocacy Center (CAC) and has an FSD contract to provide a Forensic Interviewer for child sexual abuse cases referred to the CAC. (The Family Place)

**Intensive Family Based Services (IFBS):** One PCC has an FSD contract to provide community-based crisis intervention services with a clinical focused designed to safely maintain children who are at high risk of removal in their home, and to prevent the unnecessary separation of families. (Sunrise Family Resource Center)

**Family Supportive Housing (FSH):** Two PCCs have an OEO contract to provide intensive case management and service coordination to homeless families with children. (The Family Center of Washington County and Sunrise Family Resource Center)

**Other:**

Lund provides residential and transitional housing services to women and children who have substance use and/or mental health issues thru contracts with ESD and FSD. In addition, FSD contracts with Lund for substance abuse screening, referral and treatment services.
In the Northeast Kingdom, the two PCCs are part of the NEK Community Action Agency which is one of the 5 CAP agencies receiving funding through OEO including Community Services Block Grant (CSBG), Micro Business Development Program (MBDP), the Housing Opportunity Program (HOP) and Family Supportive Housing (FSH).

Conclusion
As described above, the master grant is relatively small given the different roles the PCCs take on in their respective communities. Because each PCC structures and delivers the eight core services differently, it is difficult to calculate the true value of services delivered through the master grant. We do know that families, especially young families need these core services and supports making the PCCs an important and valued partner and community resource.