

Promise Community Application Narrative – Barre, Vermont

In 2014, Barre was awarded \$1.6M in federal disaster recovery dollars to help repair damage caused by flooding. When Thom Lauzon, the mayor of Barre, was asked to comment he said, “We’re not going to stop here. We’re going to go all the way down here as far as the eye can see and we’re not going to stop until our success in Barre touches every single member of this community.”¹ Mayor Lauzon’s response is a great example of the dedication and will of the members of the Barre community to make things better for all residents -- and in particular, for our youngest Vermonters.

Community Need

Of the almost 17,000 people living in Barre (9,052 in Barre City and 7,924 in Barre Town), there are 1,397 children aged 0-6 years (833 in Barre City and 564 in Barre Town).²

In the Barre Supervisory Union, the current percentage of children eligible for free and reduced lunch is as follows: Barre City = 51%; Barre Town = 33%. Because of the high percentage of children eligible for free and reduced within Barre City, the community is area-eligible, providing free lunch for all children. Examining the data available for the entire Barre supervisory union, the overall percentage of children eligible for free and reduced lunch increased from 33% in school year 2007-2008 to 41% in school year 2011-2012 -- an increase of 8 percentage points over four years.³

Only 34.3% of Barre children were deemed “ready for kindergarten” in all five domains measured by the Kindergarten Readiness Survey in 2013-2014. This was well below the state average of 49.1%.⁴

Because Barre Supervisory Union participated in the SBAC pilot⁵ in 2013-2014, students in the Barre elementary schools were not given the 3rd grade NECAP tests in reading and therefore no specific data is currently available about reading proficiency for this community. Based on data available on the Agency of Education website, when looking at the NECAP Reading scores for grades 3-8 over the years from 2008-2012, 65% to 69% of students at BCEMS⁶ tested as proficient or above, and 70 to 77% of students at BTMES tested as proficient or above.⁷ While this does not provide a direct correlation to the reading proficiency data provided for other supervisory unions, it can serve as a proxy to suggest a possible gap between the current test scores and true demonstrated proficiency across the Barre schools.

In the Barre Supervisory Union, only eight of our child care programs are rated at 4 or 5 STARS, representing 13.12% of the total number of child care programs in Barre⁸. Expanding that to look at the capacity in high quality child care programs, there are 129 total slots at 4 or 5 STAR programs in

¹ <http://vtdigger.org/2014/07/24/barre-awarded-1-6-million-recover-flood-damage/>

² Per the 2010 census data available at <http://vermontinsights.org/indicators/report/20>

³ Per the Annual Statistical Report from AOE available at <http://vermontinsights.org/indicators/report/1>

⁴ Per the AHS and AOE Statewide Reports on Kindergarten Readiness available at <http://vermontinsights.org/indicators/report/5>

⁵ SMARTER Balanced Assessment Consortium -- alternative standardized test piloted in some Vermont communities during the 2013-2014 school year.

⁶ Per the AOE report available at <http://edw.vermont.gov/ReportServer/Pages/ReportViewer.aspx?%2fPublic%2fNECAP+Assessment+Report>

⁷ Per the AOE report available at <http://edw.vermont.gov/ReportServer/Pages/ReportViewer.aspx?%2fPublic%2fNECAP+Assessment+Report>

⁸ Per the November 2014 to December 2014 dataset

Barre City with a total of 8 open slots. In Barre Town there are 44 total slots at 4 or 5 STAR programs with zero open slots.

Community Profile: Children with High Needs

In 2014, approximately 40% of the participants served by the local WIC program lived in either Barre City or Barre Town. Some families enrolled in WIC face significant challenges, including generational poverty, housing instability and inadequate transportation, as well as parental substance abuse and poor educational attainment. These factors present significant barriers to healthy development for Barre children.⁹ Several of the Barre families currently receiving WIC services are familiar to the nurses because this is the second or even third generation from the same family who have participated in the WIC program in Barre, suggesting anecdotal evidence of generational poverty experienced by some of these families.

Data from the Family Services division of the Department for Children and Families continues to tell a compelling story of need in the Barre area. In 2014, 48% of the investigations and assessments in our district¹⁰ were in Barre City and Barre Town. Data also reflects a 10% increase in investigations and assessments for Barre from 2013 to 2014. 67% of the cases opened for services in our district in 2014 were in Barre City and Barre Town.

Barre children with high needs face challenges in accessing services and transitioning between programs. The early interventionists have indicated that there are a large number of Barre children with significant social-emotional challenges and it is becoming increasingly difficult to find developmentally appropriate environments for these children. One challenging factor is the transition between the early intervention program and the essential early education program (EEE), specifically the challenge in documenting the required 25% delay in social emotional development with the available assessment tools and the possible degree of subjectivity involved. There are several other factors making the transition difficult for young children including parent unavailability, lack of parenting skills, addiction and mental health issues experienced by a large number of the families seen by the EI and EEE programs.

Housing stock in Barre is old and often unsuitable for families with young children. While housing here is less expensive than in neighboring Montpelier, often safe and adequate apartments are still financially out-of-reach for lower income families. Even when families are able to secure a housing voucher such as a Section 8 voucher, there are not enough units available so we still have a high population of homeless individuals and families in the Barre Community, particularly in Barre City.

Community Profile: The Good, The Challenging, and The Unique

The Good: There are a whole host of individuals living and working in Barre that are completely dedicated to making this a great place to live, work, and raise children. James Taffel, co-principal at BCEMS greets students each day as they get off the bus. He shakes their hand, looks them in the eye, and often says, "I'm glad you're here today!" He helps create and foster a warm environment for the children to attend. He makes the children feel special and feel like they matter.

⁹ Data point provided by Debbie Sanguinetti, Maternal Child Health Coordinator for VDH Barre District

¹⁰ The Barre District of the Agency of Human Services. Data provided by Catherine Harris, District Director of DCF - Family Services Division

Mayor Thom Lauzon is passionate about revitalizing Barre City. While in office, he has overseen large development projects, including the creation of Barre City Place, renovation of buildings on Main Street, and a major repaving project that made the downtown more pedestrian-friendly. The Barre schools collaborate with Capstone Community Action Head Start to provide regular access to outings for young families, and there are many additional projects in the works.

City planners also recognize the impact that infrastructure improvements can have upon the health of residents. Barre City's Municipal Plan, adopted in 2014, was subtitled "Our Plan for a Healthy Future." The introductory section explains the city's commitment to improving well-being: "The U.S. Centers for Disease Control and Prevention's Health Impact Pyramid clearly shows that 'Socioeconomic Factors' and 'Changing the Context' have the largest impact on population health. It is these very factors that are addressed in this plan. By working to create a community with safe and affordable housing, educational opportunities and excellence, pedestrian-friendly streets, and ample recreation opportunities, for example, we can have a profound impact on the health of city residents."

Connecting Hope is a group based at the Hedding Church that has been working with a group of several other churches in greater Barre to bring LOVE, INC to Barre. This is a Christian-based national endeavor to provide navigators, volunteers, social workers and others to help people overcome the barriers to obtaining and maintaining services. They provide education and assistance to participants to help them overcome their circumstance and achieve success. The churches pool their funds and provide some concrete assistance to those in need.

Impact of Poverty: Some high quality child care programs are not accessible to families because of transportation barriers or because they have hours that are inconvenient for the work schedules of the parents. While there is public transportation available in Barre through the Green Mountain Transit Authority (GMTA), the buses are not always available, accessible or convenient for families with young children, and many parts of both Barre City and Barre Town are not accessible via the bus routes. Even if a family happens to live and work in locations accessible by public transit and be lucky enough to secure a high quality child care slot in a program also accessible by the bus, the timing of bus routes and lack of early morning and evening routes makes this almost impossible for families to manage reliably. Many of the child care slots in Barre are in home-based child care programs, many of which are not located on the bus routes.

Another transportation-related challenge that is difficult to quantify is the lack of midday transportation options for families. If a family wishes to participate in the public prekindergarten programs at the Barre schools but needs additional child care for the remainder of the day, they often must transport their children between programs themselves. There are very few transportation options available in the region, and those that exist are only available to an incredibly small number of children.

The public schools in Barre, particularly BCEMS, see a host of needs experienced by the young children in the community. There are children with serious dental concerns including major tooth decay even at these young ages, needs for tooth removal, and other needs which are impacting their ability to eat and even speak. Barre City has implemented a "Tooth Tutor" program with a dental hygienist who visits elementary school-aged children and helps teach them about oral health, but there is need for more comprehensive systemic conversations about how to address the dental needs of ALL young children in Barre. In addition, there is a shortage of local dentists who will accept Medicaid patients -- only four of the 20 dentists in the area are accepting new Medicaid patients without

restrictions. Many of the young children in the Barre area in need of extensive dental care are referred to Burlington-area providers, adding an additional burden of transportation on families.

The Unique: One example of an innovative partnership to meet the needs of families in Barre City and Barre Town is a new free shuttle service offered by the UVM Health Network - Central Vermont Medical Center (CVMC) and Green Mountain Transit Authority (GMTA). Last year, CVMC recognized a need for Barre residents who wished to access healthcare services at the Barre Health Center through public transportation. This was challenging because public transportation options were very limited and the Barre Health Center is located outside of GMTA's fixed route service area -- it is accessible only through deviated service request or demand response. A collaboration between GMTA and CVMC began last year with an ultimate desire to address this community need to reach the health care facility. The shuttle is currently available and open to the general public for free, providing flexible transportation to Barre City and Barre Town areas, including Graniteville, East Barre, South Barre and Websterville -- some of the more difficult communities to access without your own car.

Opening a grocery store in downtown Barre is one of the goals outlined in the Barre City Municipal plan (more detail below). Without a downtown, walkable grocery store in Barre, many families without their own transportation opt to purchase food items at the Dollar Store or gas station convenience stores, not known for providing a wide selection of food items that support children's nutritional needs. Residents of the city formed Granite City Grocery in 2012. The vision of the group is to create "a cooperatively owned grocery store located in our walkable downtown" and access to high quality food products for all residents is one of the group's key values. They have been recruiting owner/members in order to establish a sufficient funding base.

In 2014, Barre City became the first and only town in Vermont to sign on to the national Let's Move! Campaign, a comprehensive initiative to reduce childhood obesity. This initiative fits well with the City's plans to reduce barriers to physical activity and nutrition within the City. Activities are being planned in coordination with the University of Vermont Extension. The campaign provides many ideas for improving the health of the community, but unfortunately it does not come with any funding.

Community Will: Coming Together

There are many examples of community collaboration on behalf of the greater Barre community and desire of many individuals and organizations to partner together to improve the lives of young children in Barre. We will answer the first two parts of the Community Will section together, because we believe that the reasons why we should be selected as a Promise Community and the ways in which we will continue to come together to make a difference for the young children of Barre to help with school outcomes are inextricably linked.

Barre created a partnership between Associates in Pediatrics and the Barre City Elementary and Middle School (BCEMS) as a way to provide pediatric services to students at school. For many families, transportation is a barrier to seeking care. For others, it is difficult to get children to appointments due to the parents' work schedules. The medical practitioners provide triage, evaluation and treatment of minor illnesses, manage recurring health concerns, provide ongoing care for chronic medical conditions, help children with high needs by bridging the gap between school and their medical home, and coordinate care with the existing primary care providers. The goal is to keep kids healthy and in school in order to maximize their learning potential. When kids are healthy, they are ready to learn.

The clinic is staffed by two nurse practitioners for two half days each week. Parents have commented that the clinic has meant less time they have missed from work, easier access to care and better coordination of care with their medical home. In the words of one of the nurse practitioners, “It has been wonderful for us to partner with the schools. It gives us insight into where our patients are all day and allows us to communicate with teachers and school staff when necessary and with parental permission. [Principal] Taffel and the nurses have been wonderful partners.” Promise Communities could provide the vehicle to allow the community to explore the value in expanding this program.

There is a direct connection between the pediatric office and the early education program with regard to referrals for special education evaluations, but there is not a comprehensive system for information sharing about regular screening appointments (the Barre schools screen over 200 children each year). While the partnership between BCEMS and Associates in Pediatrics has proven exceptional, there is no comparable school-based clinic available at Barre Town Elementary School (BTMES) and the clinic hours at BCEMS are very limited so there is still limited access available to children and families. Promise Communities could provide the vehicle to engage in conversations with multiple partners to help streamline systems and focus on outcomes for children.

The Barre District Office of the Vermont Department of Health has engaged a diverse cross-section of community partners in an examination of childhood trauma as a determinant of health with profound impacts upon community well-being. A team within the district office has completed a community assessment and developed recommendations for action. Three workgroups have been formed: Childhood Trauma Education Initiative (focusing on organizations becoming more trauma-informed); Programs and Services Availability (focusing on improving awareness of and connection to existing resources); Programs and Tools (focusing on developing enhanced screening and referral practices).

Workgroups have been meeting for approximately one year. Members of the workgroups include representatives from multiple sectors including the local schools, medical practices, Designated Agency, Department of Children and Families/Family Services Division, and Community Action organization. Other regions in the state have looked to us for guidance as they begin initiatives related to childhood trauma in their area. Partnering closely with our VDH and BBF partners, Promise Communities could enable broad, community-wide conversations about how best to infuse trauma-informed practices into our systems and programs.

There is trauma-informed training happening at both BCEMS and BTMES but the trainings and resources are inconsistent. Based on the high levels of trauma experienced by many children in the community, more comprehensive and reliable trauma-informed trainings would be beneficial to staff throughout the elementary schools and other early childhood providers in the community. Promise Communities could enable community-wide conversations about how best to support these needs at the schools and child care programs for the betterment of the students.

There are not a sufficient number of high quality child care slots in Barre. Barre relies on a variety of providers including school-based public preschool programs, Head Start, center-based providers and home-based providers. There is also a high need for child care slots in programs with protective services designation and increasingly fewer providers offering those slots. Just last week we learned of two new provider closures, both of whom were previously protective services providers. There is also fear in the provider community that when the new child care licensing regulations are released this summer, we may see further closures. Some providers do not feel they will be able to meet the new minimum standards for licensing and they may opt either to close their business or to operate without participating in the regulated care system. Promise Communities could work closely with the BBF

regional council to explore the child care quality and capacity needs and engage in community conversations toward successful solutions.

With the coming implementation of Act 166, Vermont's universal prekindergarten law, a great deal of pressure is being felt by schools to provide adequate space either through their own programs or through partnerships with other providers. In recent years, Barre City has struggled to pass their school budgets without including the added financial burden of providing universal prekindergarten. There is a great deal of pressure to accurately predict utilization and no reliable way to calculate the data with a brand new entitlement program like this one, and schools are struggling to find a balance between preparing for all Barre preschoolers while not overstaffing early education programs. Also, the lack of before school, after school and summer programming in the Barre area is a huge strain on families in need of comprehensive care. Promise Communities could work closely with the BBF regional council to help ensure smooth transitions in Barre for parents, providers, the schools and the whole community, and to explore options for additional out of school time care for young children.

In Barre, community-based service providers are partnering with the Agency of Human Services in planning for Integrating Family Services (IFS) whose mission is to bring state government and local communities together to ensure holistic and accountable planning, support and service delivery aimed at meeting the needs of Vermont's children, youth and families. The timing of IFS implementation fits the Promise Community grant well because IFS will work to address existing gaps, increase flexibility, and reduce silos in order to create a more effective system that works for children, youth, and families. These are the very elements that Promise Communities planning can help inform.

Community Will: Engaging Families and Partners

The team is committed to engage with families at all stages of this project. Family engagement will be crucial during the planning stages of the project, and also during the implementation stages. While the list below is somewhat general, we anticipate engaging with families in multiple ways including asking parents to participate in planning meetings while we create the Community Roadmap, vetting our eventual Roadmap with groups of parents to ensure we're headed in the right direction, and finding multiple avenues for disseminating information to diverse groups of parents.

Some of the ways discussed by the team for effective engagement with parents and families include:

- Using current connections with parents / families and building on relationships that are already established with members of our team that are trusted by families;
- Holding focus groups of parents / families where we provide both food and child care;
- Information sharing at community events like Dabble Day and other family activities;
- Building on personal relationships and history with parents / families (both to gather information about what is needed in the community and to disseminate information about available programs and activities);
- Supporting parents / families in multiple ways so they feel comfortable enough to participate;
- Meeting parents / families where they are both philosophically and geographically; and
- Encouraging parents / families to participate in our planning teams.

Several partners were instrumental in crafting this application, and still others have expressed their commitment to this project if we are able to become a Promise Community. As you can see from our signature pages, we have signatory commitments from:

Becky Raymond, Regional Coordinator, Central Vermont Building Bright Futures
Kathleen Bryant, Nurse Practitioner, Associates in Pediatrics
Christine Johnson, Field Director, Agency of Human Services (Barre District)
John Bacon, Superintendent, Barre Supervisory Union
Jennifer Nye, Principal, Barre Town Middle and Elementary School
James Taffel, Principal, Barre City Elementary and Middle School
Tabitha McGlynn, Early Childhood Coordinator, Washington County Mental Health Services
Dana DeMartino, Community Health Team, Central Vermont Medical Center
Marianne Miller, Capstone Head Start
Sasha Bianchi, District Director, Department of Health (Barre District)
Deborah Sanguinetti, Maternal Child Health Coordinator, Department of Health
Rachel Rolfe, Nursing Supervisor, Department of Health
Nancy Zorn, Executive Director, Green Mountain United Way
Lorna Corbett, Maternal Child Health Manager, Central Vermont Home Health and Hospice
Claire Kendall, Co-Director, Family Center of Washington County
Lisa Miserendino, CIS Early Intervention Manager, Family Center of Washington County
Claire Berry, CIS Child Care Coordinator, Family Center of Washington County
Shane Oakes, CIS and Community Outreach Manager, Family Center of Washington County

Anticipated Impact

We absolutely expect this project to impact more than 40 children. Initial conversations with members of our planning team revealed the following impact numbers: 30 to 40 Barre children ages 0-3 are served by CIS early intervention staff; 180 Barre children attend public preschool at BCEMS or BTMES and 48 Barre children attend a high-quality partner preschool program; and 69 Barre children were served through Early Childhood Family Mental Health programs at Washington County Mental Health in 2014. With this brief scan of ways our team is impacting children in Barre, we are extremely confident we can exceed the required number of 40 children aged 0-6 that must be impacted by the project.

In closing, it is clear that the will of the Barre community to address early childhood issues is strong. Existing collaborations on housing and homelessness, health care, Building Bright Futures and within both elementary schools are evidence that we will do “whatever it takes” to improve education and developmental outcomes for children in our community. When you consider the data and the community story, it is clear that the need is high. Our community is positioned well to move forward with the support of the Promise Communities initiative -- we would welcome the technical assistance and funding support to help us create and execute a plan to realize the promise of every child in Barre.

Respectfully submitted,

Becky Raymond, Regional Coordinator
Central Vermont Building Bright Futures Council

Promise Community Pledge of Commitment

Attachment 2 Pledge of Commitment

Organization/agency submitting application

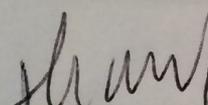
Targeted School District/ Supervisory Union: **Barre Supervisory Union**

Targeted School(s): **Barre City Elementary and Middle School; Barre Town Middle and Elementary School**

Sponsor: **Becky Raymond, Central Vermont Building Bright Futures Council**

We pledge to support the local community of **Barre, Vermont** to improve the lives of the young children in a Promise Community. To do this we will work together in a coalition of partnerships with regular meetings and communication to reach the community goals to fulfill the *promise of every child*. The goals and outcomes will be developed as part of needs assessment, strategic planning and implementation process.

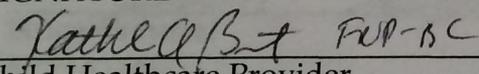
This form must be signed by Building Bright Futures Regional Coordinator; targeted school principal (s); targeted school superintendent; Regional Agency of Human Services Field Director; and community child health care provider, indicating their pledge to participate as a partner in the implementation of the work plan presented in this application. Other partners are encouraged to sign as well to make a commitment to be a Promise Community.



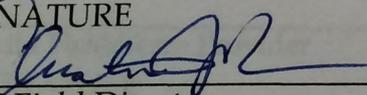
Building Bright Futures Regional Coordinator
SIGNATURE PRINT DATE
Rebecca Raymond 3/13/15

School Superintendent
SIGNATURE PRINT DATE

School Principal
SIGNATURE PRINT DATE



Child Healthcare Provider
SIGNATURE PRINT DATE
Kathleen Bryant 3/14/15



AHS Field Director
SIGNATURE PRINT DATE
Christine Johnson 3/13/15

Promise Community Pledge of Commitment

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Organization/agency submitting application

Targeted School District/ Supervisory Union:

Targeted School(s):

Sponsor:

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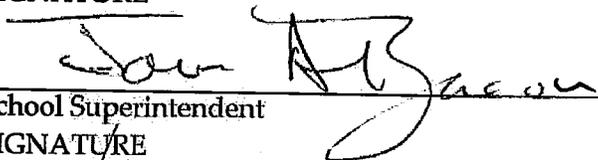
This form must be signed by Building Bright Futures Regional Coordinator; targeted school principal (s); targeted school superintendent; Regional Agency of Human Services Field Director; and community child health care provider, indicating their pledge to participate as a partner in the implementation of the work plan presented in this application. Other partners are encouraged to sign as well to make a commitment to be a Promise Community.

Building Bright Futures Regional Coordinator

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DATE

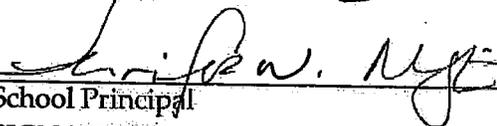
 John A. Bacon 3/12/15

School Superintendent

SIGNATURE

PRINT

DATE

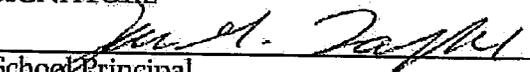
 Jennifer W. Mye 3.12.15

School Principal

SIGNATURE

PRINT

DATE

 James R. Tafel 3-13-15

School Principal

SIGNATURE

PRINT

DATE

Child Healthcare Provider

SIGNATURE

PRINT

DATE

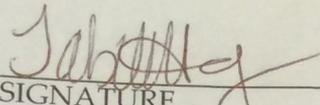
AHS Field Director

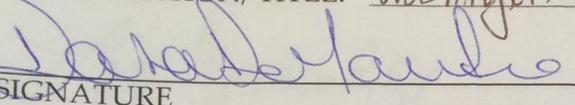
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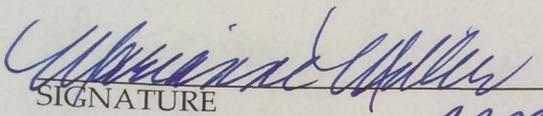
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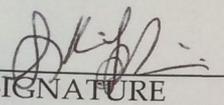
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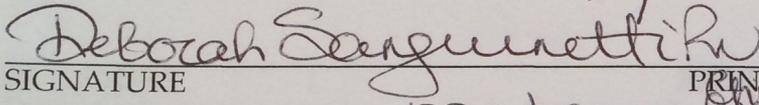
Promise Community Pledge of Commitment Signatures

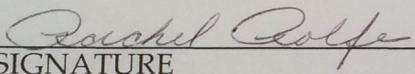
 Tabitha McBlynn 2/26/15
SIGNATURE PRINT DATE
ORGANIZATION/TITLE: Washington County Mental Health / Early Childhood Coordinator

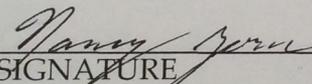
 Dana DePaulo 2/26/15
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ORGANIZATION/TITLE: Community Health Team CMC

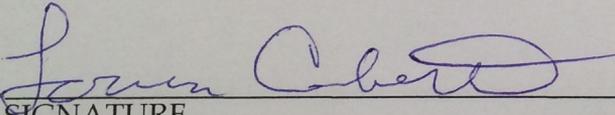
 MARIANNE MILLER 2/26/15
SIGNATURE PRINT DATE
ORGANIZATION/TITLE: CAPSTONE HEAD START

 Sasha Bianchi 2/26/15
SIGNATURE PRINT DATE
ORGANIZATION/TITLE: Health Dept. / District Director

 Deborah Sanguinetti 2/26/15
SIGNATURE PRINT DATE
ORGANIZATION/TITLE: maternal & Health RN VT Dept of Health

 Rachel Rolfe 3/13/15
SIGNATURE PRINT DATE
ORGANIZATION/TITLE: VDH Nursing Supervisor

 Nancy Zorn 3/13/15
SIGNATURE PRINT DATE
ORGANIZATION/TITLE: Green Mountain United Way, Ex Dir

 Lorna Corbett 3/13/15
SIGNATURE PRINT DATE
ORGANIZATION/TITLE: Central VT Home Health & Hospice / Maternal Child Health Manager

SIGNATURE PRINT DATE
ORGANIZATION/TITLE: _____

(This page can be copied to add additional partners as needed.)

