

Result #1 – All children have a healthy start.

Strategy	Action Step	Accomplishments
<p>1) Support families as children’s primary caregivers</p>	<p>a) Advocate for paid sick days and parental leave policies so parents can be at home with newborns or a child who is newly adopted and care for themselves and their children when sick</p>	<p>H196 passed out of the House in May - covers 80% wage replacement for up to six weeks of caregiving leave, financed by a .141% payroll deduction for an employee, with the option for the employer to contribute. The benefit would apply only to new parents welcoming a child and to those taking time to care for a sick or injured family member.</p>
	<p>b) Educate employers and employees about flexible work arrangements allowable under Vermont law</p>	
	<p>c) Ensure respite and flexible funding are available to families of children with special needs especially at critical/crisis times</p>	
<p>2) Establish a voluntary system that connects children birth through 3rd grade (0-8 years old) with the resources they need to support optimal growth and development, including developmental screening</p>	<p>a) Expand the training of nurses to provide health care consultation to early learning and development programs in each region [RTT-ELC]</p>	<p>ELCG - Project 12 - Child care wellness consultants – December 2014</p>
	<p>b) Implement Help Me Grow and its 4 components:</p> <ul style="list-style-type: none"> • Child health care outreach for early detection of developmental concerns • Community outreach to promote networking opportunities among families and services providers • Creation of a centralized telephone access point for connecting children and their families to services and care coordination • Data collection to understand gaps and barriers in the system 	<p>ELCG – Project 12</p> <p>Community Outreach</p> <ul style="list-style-type: none"> • HMG is working with BBF Regional Coordinators for Family and Community Outreach (2015 to present) • Additionally, in partnership with VCHIP and VB5, HMG offers developmental screening training across the state to early care and education providers (2014 to present) and this VT innovation was 1 of 4 finalists recently selected to be presented at recent HMG National 2017 Forum <p>Data Collection and Analysis</p> <ul style="list-style-type: none"> • HMG is rolling out new Universal Developmental Screening Registry – a statewide data collection and communication registry. Providers in both Lamoille and Orange county are currently trained and piloting the Registry across sectors including the local pediatric practice, early care and education providers and community/CIS providers (in Lamoille). • Legislative approval to include developmental screening in registry

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4) Promote and utilize evidence-based home visiting	a) Ensure alignment and coordination of home visiting models to ensure comprehensive availability of services while preventing duplication	
	b) Initiate or expand the following evidence-based home visiting models throughout the state: <ul style="list-style-type: none"> • Nurse family partnership • Parents as Teachers • Maternal Early Childhood Sustained Home Visiting • Early Start • Early Head Start 	ELCG - Project 11 – Training in Maternal Early Childhood Sustained Home Visiting (MECSH) and Parents As Teachers (PAT) MECSH roll out May 2015 PAT roll out May 2016
	c) Explore use of Medicaid funding under the framework of Early Periodic Screening, Diagnosis and Treatment (EPSDT) to support home visiting service	
5) Ensure that all children have access to adequate nutrition at home, in early learning and development programs, at school, after school and during the summer	a) Increase participation in existing food and nutrition programs and expand capacity of programs including Farm to School and Early Care and Education	ELCG – Project 5 – Bonuses to ELDPs for serving nutritious meals and snacks Farm to Preschool increase in funding by legislature – FY18 Stronger language in Child Care Regulations
6) Develop community efforts in the public and private sectors to enhance children’s safety	a) Ensure that regional/community plans incorporate local safety planning for children (better lighting, improved transportation options, community centers/hubs) and accessible recreation options	
	b) Tie child service locations, including but not limited to early learning and development programs and other programs where children are physically present, into regional and state emergency and evacuation plans	