

1. What is Discretionary Funding?

Discretionary funding is a duly-appropriated sum of money in the Town's expense budget allocated to an eligible not-for-profit organization by the Selectboard and approved at Town Meeting.

2. What Types of Organizations May Receive Discretionary Funds?

Discretionary funds may only be allocated to not-for-profit; community-based social services providers. In order to receive discretionary funds directly, an organization must be incorporated as a not-for-profit and registered with the State of Vermont., unless exempt and have a Federal Employer Identification Number (EIN).

3. What Types of Organizations May Not Receive Discretionary Funds?

For-profit entities may not receive discretionary funds, except when the primary non-profit contractor subcontracts with a for-profit entity as part of the delivery of services. Such subcontracts, however, must be only an ancillary part of the program to be funded, not the primary basis for the discretionary award, and must be approved by the contracting agency.

4. What are the Restrictions on the Use of Discretionary Funds?

All public funds, however awarded, must be used for a Town purpose. In general, a Town purpose is defined as an activity or service that is open to all members of the public, regardless of race, creed, gender, religious affiliation, etc., without restriction, and which does not promote a particular religion.

Programs and services provided by religious or religiously-affiliated organization must be able to demonstrate that the program is open to non-members, is not a religious program, and does not promote the religion.

Closed membership groups, which are those to which membership is restricted or subject to eligibility based upon prohibited factors, may generally not receive funding.

Groups that serve a particular population, for example, those age 65 and above in a particular community; are not considered a closed membership group, as long as the program is open and accessible to all seniors in the community. Similarly, tenant organizations in public housing may also receive funding, as long as they provide equal access to all residents of the public housing units they serve.

Funds may only be allocated for a public purpose and may not support political activities and private interests.

5. How to Apply for Discretionary Funding?

All organizations that wish to receive discretionary funding must submit a "Request for Special Appropriations" application to the Town Manager. The application elicits information about an organization's experience, qualifications, and integrity, and the project or service for which the organizations is requesting support. The form is available on the Town website by clicking on BOARDS & MEETINGS > SELECTBOARD then scroll down to FY24 Budget and "FY24 Discretionary Funding Policy-for applicants" or by emailing Duncan Wardwell, Assistant to the Town Manager, at: dwardwell@richmondvt.gov. Deadline for submission is the end of the day, October 3, 2022.

Town of Richmond

Request for Special Appropriations

Request for Fiscal Year: 2024

Organization's Name: Turning Point Center of Chittenden County (TPCCC)
Address: 179 South Winooski Avenue Suite 301
City, State, Zip: Burlington, VT, 05401
Website address: www.turningpointcentervt.org

A. GENERAL INFORMATION

1. Program Name: Center Recovery Coaching, Outreach Recovery Coaching, Parents in Recovery, and Emergency Dept. Coaching

2. Contact Person/Title: Cam Lauf, Executive Director

Telephone Number: 802-861-3150

E-mail address: caml@turningpointcentervt.org

3. Total number of individuals served in the last complete fiscal year by this program:
699

4. Total number of the above individuals who are Town residents: 2
Please, attach any documentation that supports this number.

Percent of people served who are Town residents: .2%

5. Amount of Request: \$5,000

6. Total Program Budget: \$464,405.84 Percent of total program budget
you are requesting from the Town of Richmond: 1.07%

7. Please state or attach the mission of your agency: _____

The Turning Point Center of Chittenden County is an inclusive compassionate community supporting those ,
on multiple paths to recovery through peer-driven services in a safe, substance-free environment.

8. Funding will be used to:

Maintain an existing program Expand an Existing Program
 Start a new program

9. Has your organization received funds from the Town in the past for this or a similar
program? No

If yes, please answer the following:

a. Does the amount of your request represent an increase over your previous
appropriation? If yes, explain the reason(s) for the increase.
No

b. Were any conditions or restrictions placed on the funds by the Selectboard? _____
If yes, describe how those conditions or restrictions have been met.
N/A

B. PROGRAM OVERVIEW

1. Statement of Need: Identify the issue or need that the program will address (use statistical data to justify the need for the program). To what extent does this need, or problem exist in the Town of Richmond? _____

The TPCCC provides free, peer recovery services that are evidence-based and proven to provide positive outcomes for individuals to attain and sustain recovery from addiction. Vermont has seen overdose fatalities reach all-time highs for the previous 2 years.

210 vermonters died in 2021 due to overdose. All Richmond residents living with substance use disorders (SUD) can access our services at no cost to them.

2. Program Summary:

a. Identify the target/recipients of program services. Specify the number of Town residents your program will serve during the fiscal year and explain the basis upon which this number is calculated. Indicate any eligibility requirements your program has with respect to age, gender, income or residence.

We expect to serve all Richmond residents seeking peer recovery services from the TPCCC. Our Center provides services to individuals living with SUD and families coping with their loved ones' SUD. All our services and programs are free to access. In 2021, two Richmond residents used our coaching services, and three residents accessed them and to date in 2022, the number recorded is three. There may be others who access our groups and other wellness programs, but their personal information is not recorded. With expanded outreach, we expect to double the number of Richmond residents we support..

b. Identify what is to be accomplished or what change will occur from participating in the program. How will people be better off as a result of participating in the program? Describe the steps you take to make the project known to the public, and make the program accessible and inclusive? _____

From 2018-2021, 83% of patients seen by an Emergency Dept. Recovery Coach requested follow up services or treatment. In 2021, 71% of all Center Recovery Coaching participants reported an increase in their wellness just 60 days after working with a recovery coach. The average retention rate, as of August 2022, for Recovery Coaching is 8 months.

All our services can be accessed electronically, by phone, or in-person out in the communtiy. Our Recovery Yoga is in-person and virtual.

3. Program Funding:

a. Identify how Town funds, specifically, will be used (i.e., funds will provide "X" amount of units of service.) _____

\$5,000 will provide for a year's worth of coaching for 5 participants.

Retention to coaching services and maintaining connections will prevent fatal outcomes from chronic addictions.

b. List the other agencies to whom you are submitting a request for funds for this program and the amount requested. How would this program be modified should revenues be lost?

We are requesting support from the Vermont Department of Health. We don't expect revenue to be lost. Our organization will do everything possible to maintain our programming. Our services are sustained through federal, state grant dollars, and direct public support.

C. ORGANIZATIONAL CAPACITY

1. Describe your agency's capability to provide the program including its history, previous experience providing this service, management structure and staff expertise.

The TPCCC is a foundational recovery center in Vermont, providing recovery coaching services as an evidence-based practice since 2013. For almost ten years, the TPCCC has been leading the charge in developing peer recovery services and recovery coaching for individuals and families struggling with SUD. All direct service providers, program coordinators, and coaches receive support, guidance, and leadership through the Center's management and infrastructure. The Center has a combined 70+ years worth of peer recovery experience among its staff and Board of Directors.

2. How will you assess whether/how program participants are better off? Describe how you will assess program outcomes. Your description should include: what (what kind of data), how (method/tool for collecting the data), from whom (source of data) and when (timing of data collection).

Our program assessments use Results Based Accountability (RBA) measurements to determine efficacy of all TPCCC direct services. We use self-reporting measurements such as Wellness Recovery Action Plans, Self-Sufficiency Matrixes, and progress on referrals. We measure individuals served, unduplicated individuals, demographics, volume of units of service, program retention, and completion of programs, all collected at intake/assessment, 60-90 days from intake, and discharge.

3. Summarize or attach program and or service assessments conducted in the past two years.

See attached.

4. Does your organization have a strategic plan and a strategic planning process in place?

Yes, see attached.

The strategic plan should include a mission statement, goals, steps to achieve the goals, and measures that assess the accomplishments of the goals.

5. What is the authorized size of your board of directors? ⁹ _____

How many meetings were held by the board last year? ¹¹ _____

I, the undersigned, confirm the information contained herein is accurate and can be verified as such. I understand and agree that if the requested funds are approved, the disbursement of funds are subject to all conditions established by the Richmond Selectboard.

Signature of Applicant _____ Date _____

Print Name of Applicant and Title



2021 Turning Point Center of Chittenden County Annual Data Report – Program Report

Moms in Recovery Program – Parents in Recovery Program

The Moms in Recovery Program (MIR), Parents in Recovery (PIR) was first implemented in 2017 to offer support for Moms in Recovery. Our goal was to provide peer support and strengthen participants' ties to the recovery community. The program has grown much since then; and although there have been obstacles, the program is a viable resource in the recovery community.

When a person comes to the center and identifies as being a parent with a history of substance use, they are educated about the MIR/PIR program. The participant is able to choose which aspect of the program will best suit their needs. Reporting measurements include demographics, presenting substance of challenge, and supports that are needed/wanted. Discharge criteria is 30-days of no contact with participants. Data is collected through participant self-reporting and consent to program participation. Progress is measured through program retention, documentation, and units of service.

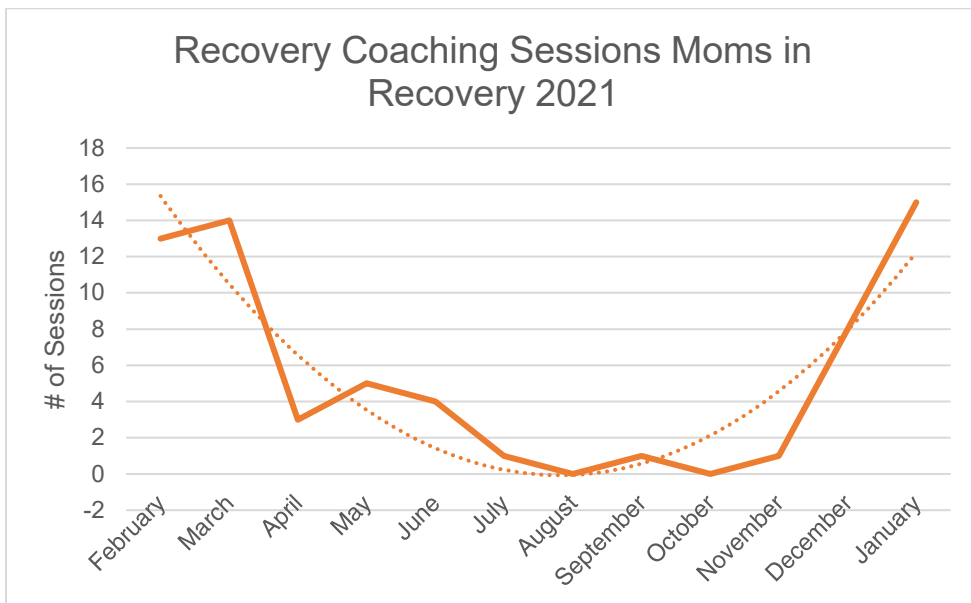


Figure 1. Moms in Recovery Coaching Sessions by Month from January 1, 2021- December 31, 2021.

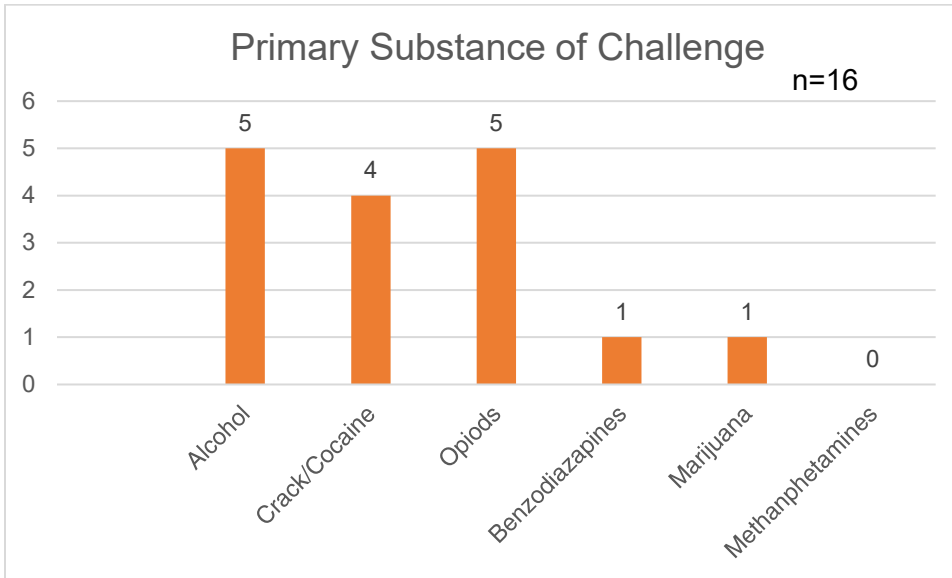


Figure 2. Moms in Recovery Primary Substance of Challenge 2021.

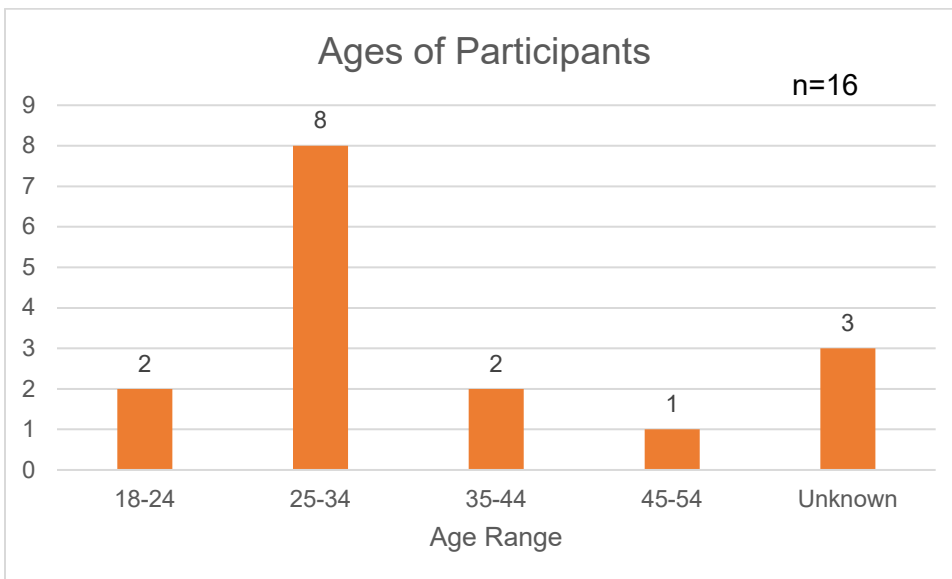


Figure 3. Moms In Recovery Age Range of Participants 2021.

Recovery Coaching Program

Once an individual has completed an inquiry to receive Recovery Coach services through the Turning Point Center of Chittenden County, an intake is conducted by the Recovery Coach Coordinator. During this intake, information is collected to assist in matching the individual with a suitable Recovery Coach. This Recovery Coach is an individual who has been trained and certified by the state, is in recovery themselves, knows the local resources, and has celebrated various paths of recovery.



Recovery Coaches build alliance with their participants and cultivate motivation from their individuals to sustain their identified pathways of recovery. Demographics, participant progress, program retention, and self-reported measures are all collected to reinforce our evidence-based practices and sustain our services.

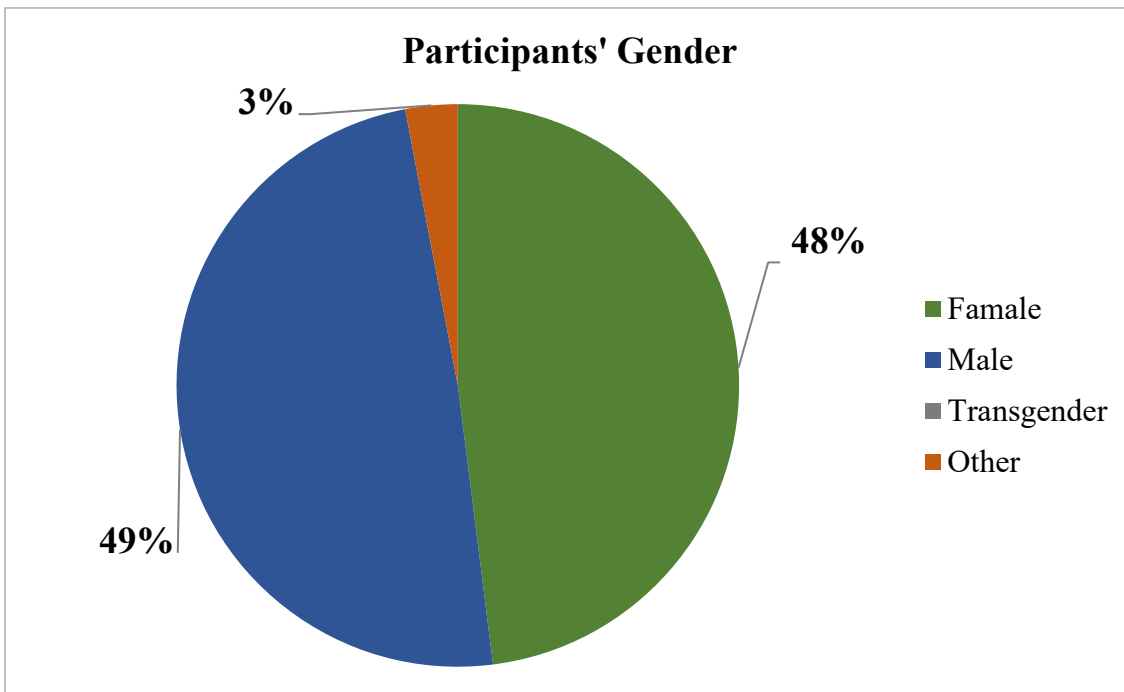


Figure 1. Participants' gender identity, collected at time of intake for individuals who receive center recovery coach services from January 1, 2021, to December 31, 2021.

- All data collected by participants is self-reported.
- Received Center Recovery Coach Services – participants who completed an intake and/or attended at least one Recovery Coach Session between January 1, 2021 and December 31, 2021.

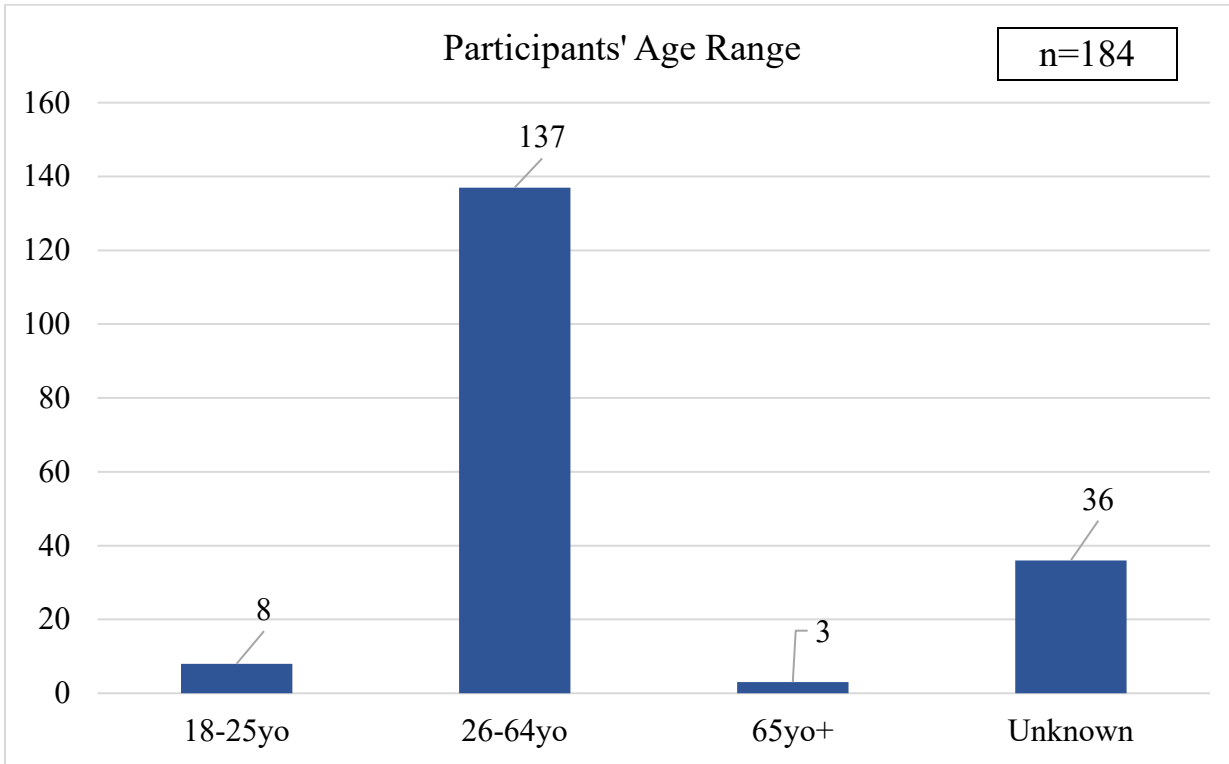


Figure 2. Participants' age range, collected at time of intake for individuals who received center recovery coach services from January 1, 2021, to December 31, 2021.

Participants' Race	
Alaskan Native	2%
Asian	1%
Black/African American	4%
Native Hawaiian or Other Pacific Islander	0%
White	80%
Native American	0%
Unknown	13%

Figure 3. Participants' race collected at time of intake for individuals who received center recovery coach services from January 1, 2021, to December 31, 2021.

Referral Source	
Residential Treatment	14%



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Therapist/Counsellor	4%
Recovery Center	12%
Primary Care Provider	3%
E.D./Hospital	11%
Treatment Court	4%
Other	21%
Unknown	31%

Figure 4. How participants heard about the Recovery Coach Program at Turning Point Center of Chittenden County from January 1, 2021, to December 31, 2021.

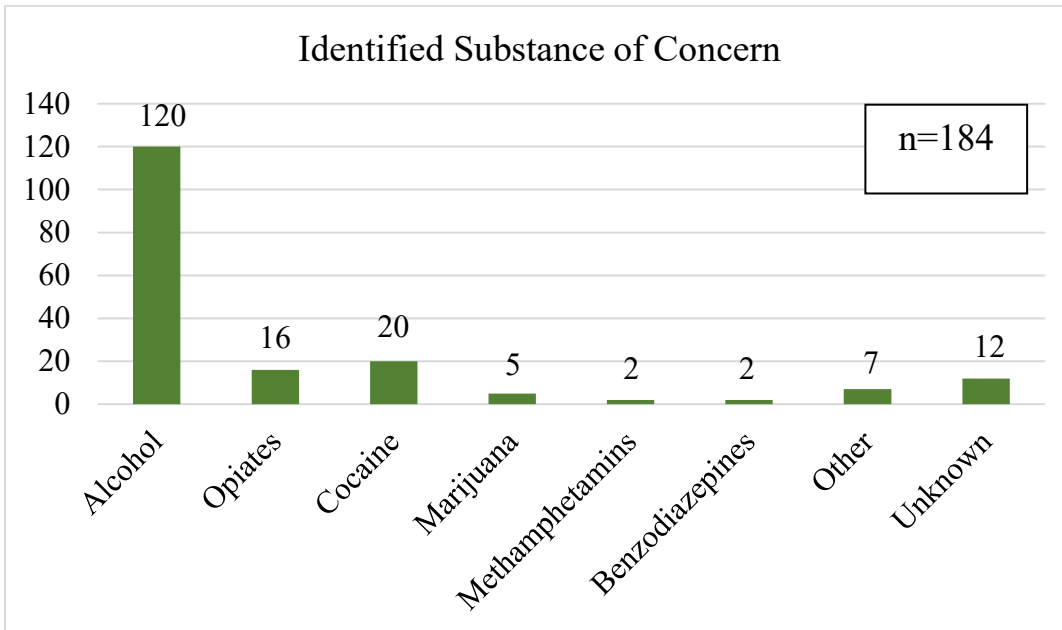


Figure 5. Participants' identified primary substance of challenge from January 1, 2021, to December 31, 2021.



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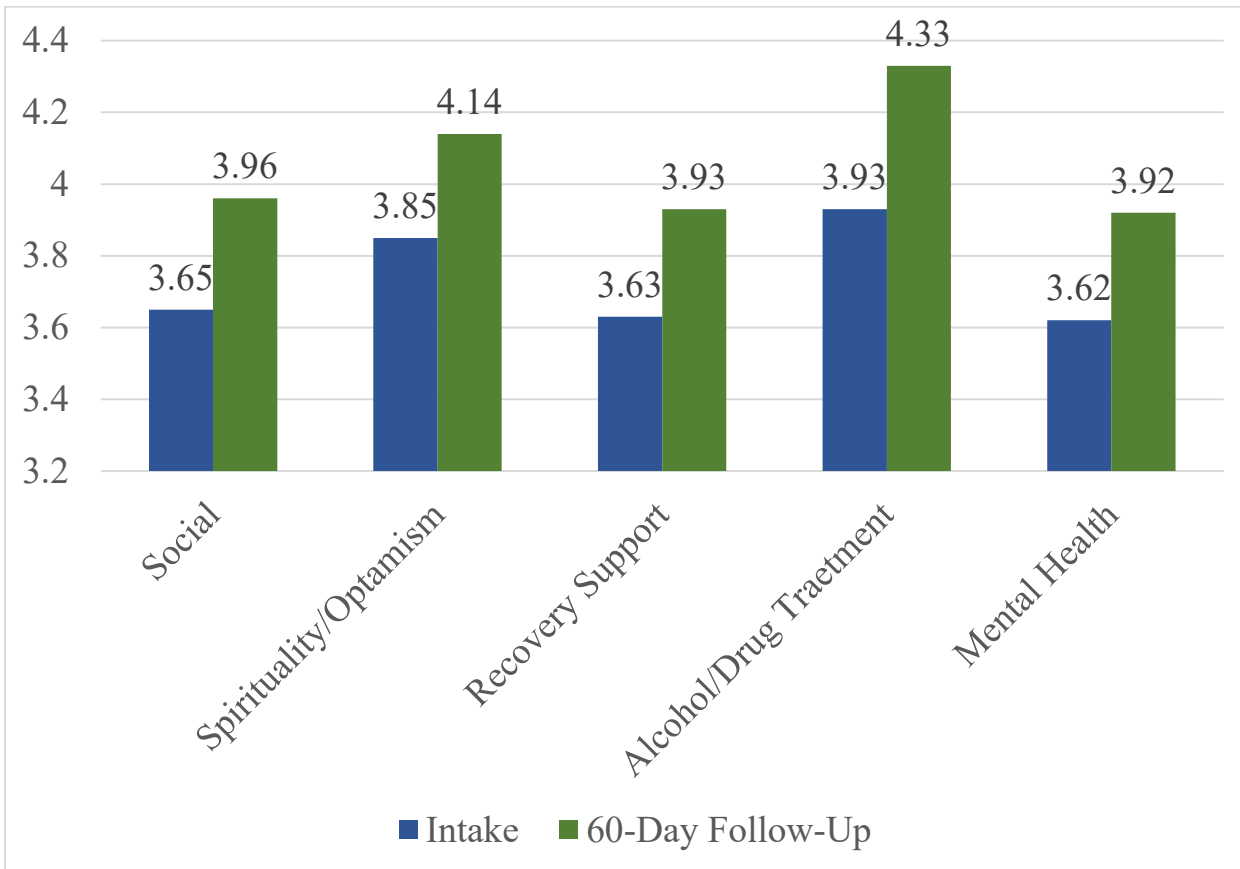


Figure 5. Participants' score difference between SSM intake and SSM 60-Day follow-up, among five categories, for individuals who received Recovery Coach services from January 1, 2021, to December 31, 2021.

During time of intake, a Self-Sufficiency Matrix (SSM) is completed. This is an evaluation tool that measures a participant's ability to live without assistance at a specific point in time, using a five-point scale. While this result-based accountability measurement tool is used to track a participant's progress toward self-sufficiency over time, this tool is also helpful to evaluate the effectiveness of evidence our services provided.

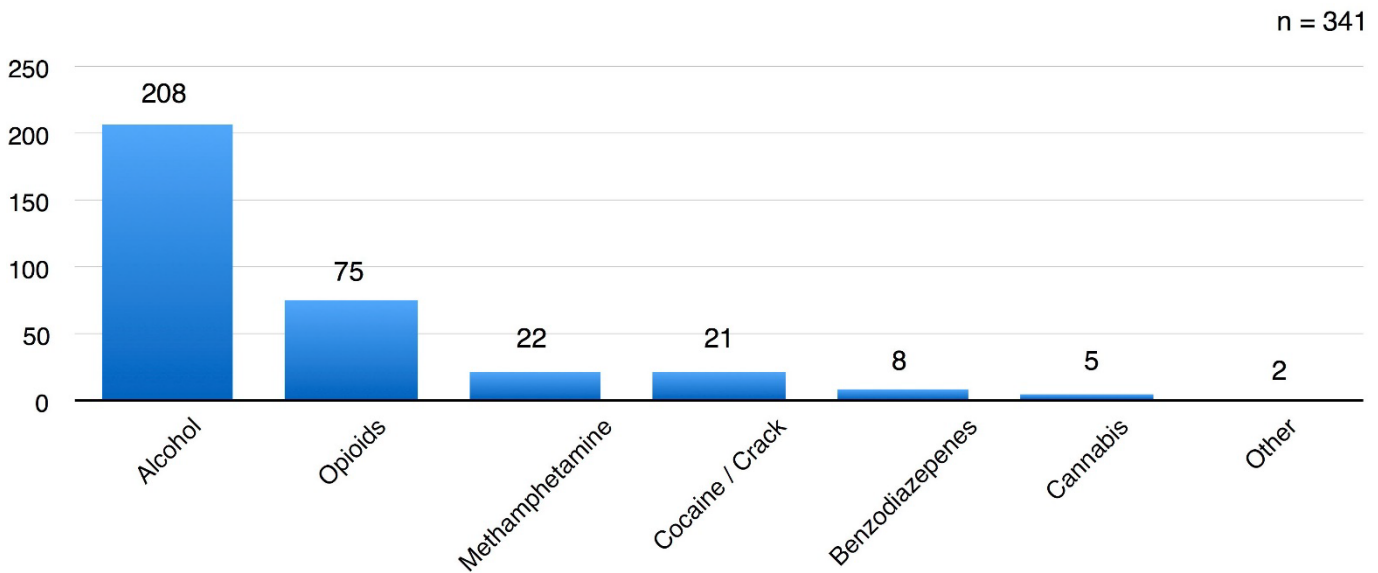
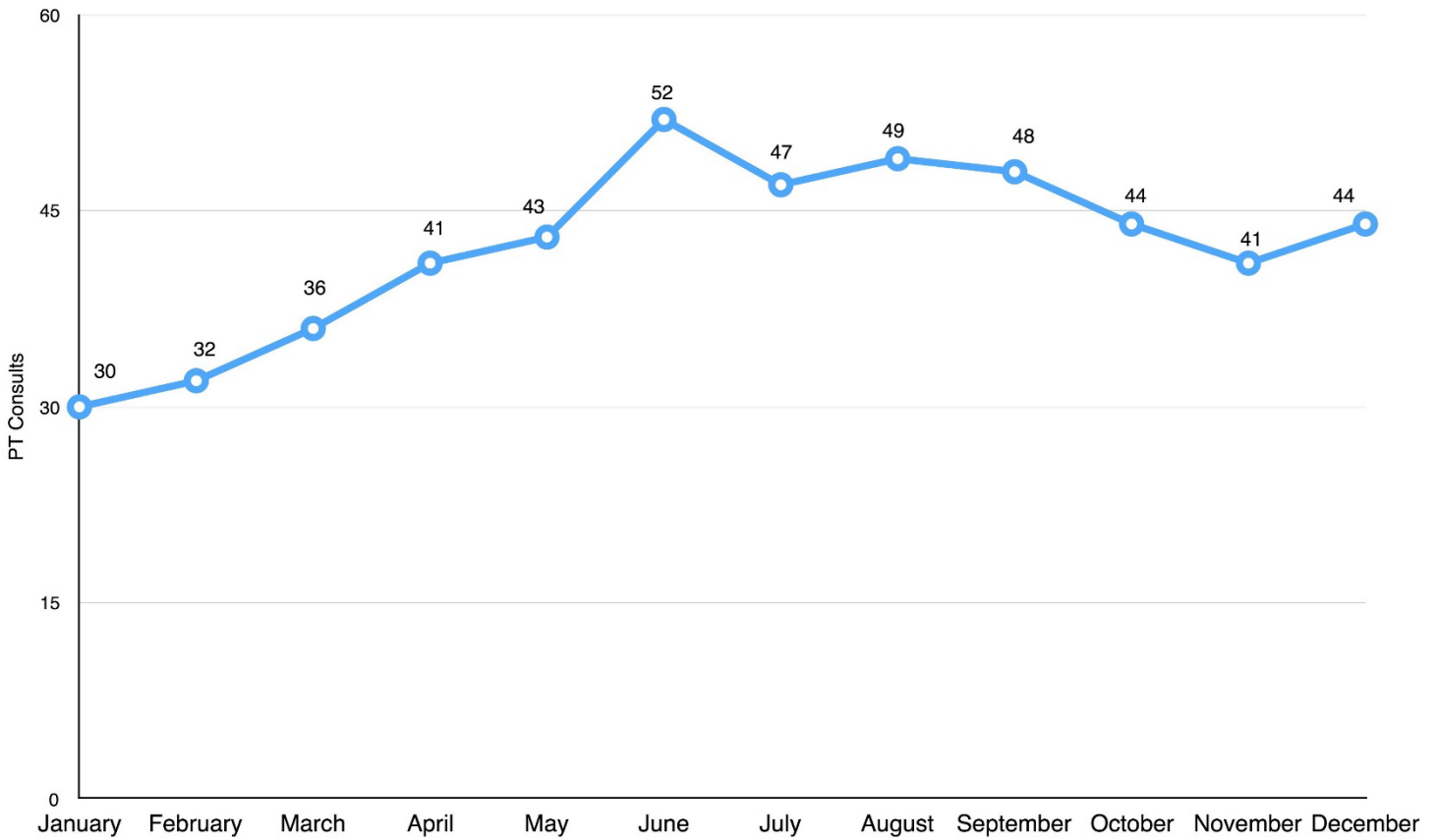
A follow-up SSM is conducted 60 days from the time of intake. The initial SSM is compared to the 60-day SSM to track progress in the identified areas of the participant's life.

Emergency Dept. Recovery Coaching

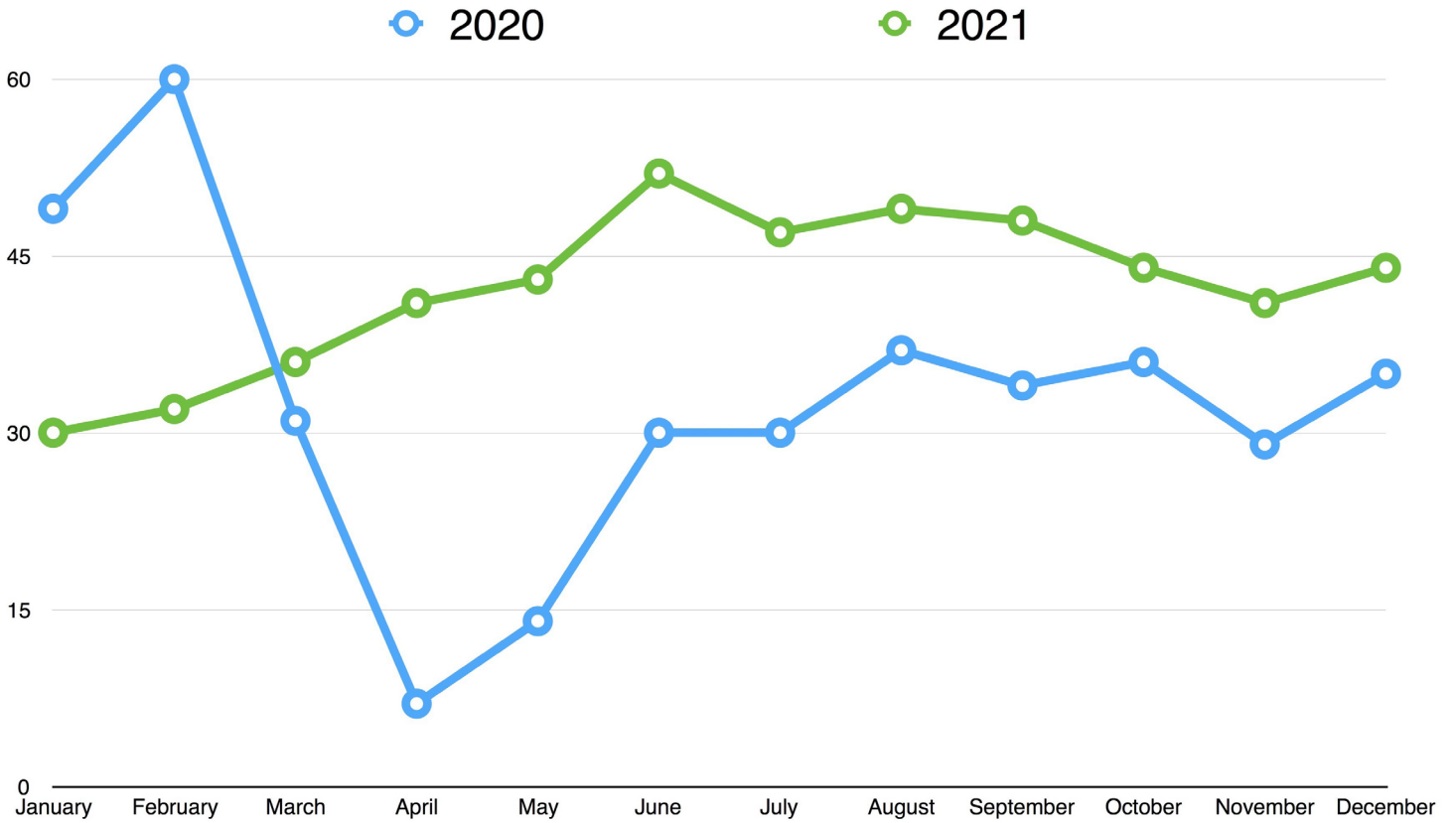
Following The Turning Point Center of Chittenden County/University of Vermont Medical Center's protocol, when an individual is seen at the emergency department and substance use is identified as part of the visit, an Emergency Department Peer Recovery Coach (EDRC) is paged. Patients who consent to meet with coaches will undergo an interview/dialogue at the E.D. in which the coach will help facilitate the patient's engagement with recovery supports and treatment, if the patient wishes to do so. Patients are also offered EDRC follow up services post discharge from the hospital. The service provides a coach to assist in identifying appropriate re-sources, contacting them regularly over the following 10 days, helping them to create a change plan, or offer a kind ear. The individuals who accessed treatment outlets or other programs may also have received the EDRC follow up.

The following figures illustrate the scope of the UVMCC EDRC program in 2021.

Patient Consults by Month



Impact of Covid-19 Pandemic: 2020 and 2021 Program Engagement Per Month



Engagement with Recovery Support Services and/or Treatment Post Discharge Following Consultation with EDRC Program

- Total EDRC consultations (unique individuals)
- Participants who requested follow up services after meeting with a recovery coach¹

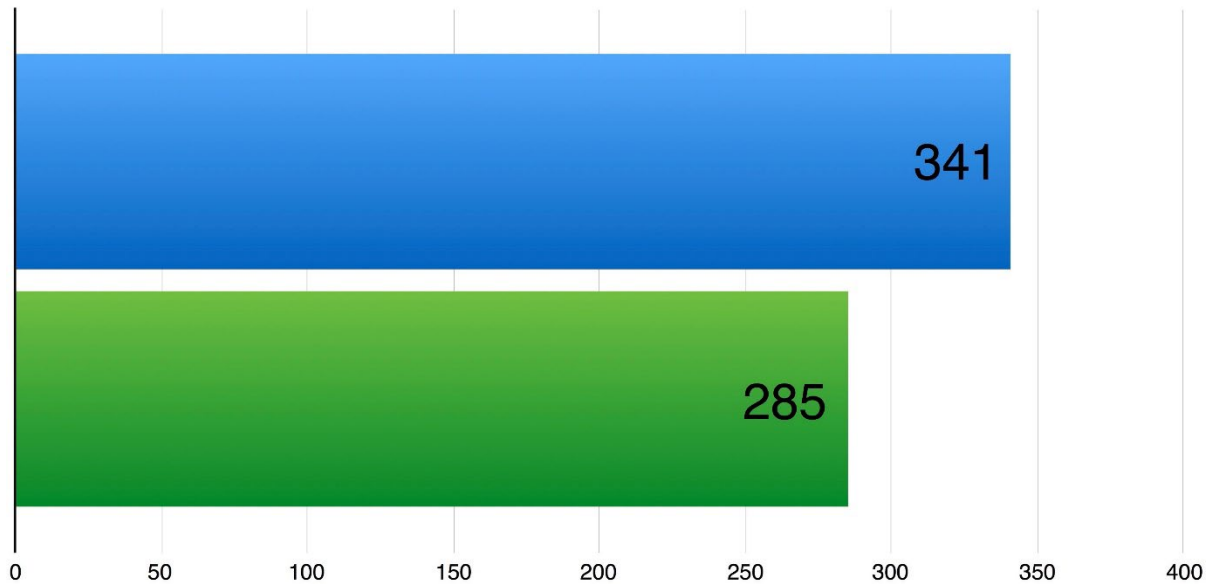


Figure 4. Number of people among unique/unduplicated individuals who pursued some type of treatment / follow up recovery support services after meeting with the EDRC program

1. 83% of unique / unduplicated participants opted some for treatment and/or recovery support services following a consultation with the EDRC program.



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Individuals Served Across Organization by Township

County	City/ Township		HPRC	PIR	TPCRC	UVMMC	RPSS	Total
Chittenden	Burlington	Record Count	2	1	34	152	91	280
	Charlotte	Record Count	0	0	1	4	2	7
	Colchester	Record Count	0	1	5	17	3	26
	Essex Junc- tion	Record Count	0	0	13	21	13	47
	Hinesburg	Record Count	0	0	1	2	1	4
	Huntington	Record Count	0	0	0	1	0	1
	Jericho	Record Count	0	1	0	8	0	9
	Milton	Record Count	0	1	3	9	4	17
	Richmond	Record Count	0	0	0	2	0	2
	Shelburne	Record Count	9	1	0	6	2	18
	South Bur- lington	Record Count	2	1	12	30	12	57
	St. George	Record Count	0	0	0	1	1	2
	Underhill	Record Count	0	0	0	3	0	3

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	Westford	Record Count	0	0	1	0	0	1
	Williston	Record Count	0	0	1	11	1	13
	Winooski	Record Count	0	1	9	28	1	39
	zTransient/ Unknown/ n/a	Record Count	0	2	47	24	3	76
	Subtotal	Record Count	13	9	127	319	134	602
Other	Other	Record Count	0	0	8	72	1	81
	Subtotal	Record Count	0	0	8	72	1	81
Out of state	Other	Record Count	0	0	2	13	1	16
	Subtotal	Record Count	0	0	2	13	1	16
Grand Total		Record Count	13	9	137	404	136	699

Real empathy. Real connections. Real solutions.



Real Impact. Last year, even in the wake of COVID, we served 699 individuals struggling with addiction or in recovery. Our many programs provide effective recovery services by bridging the gaps between hospitalization, residential, and outpatient treatment.

83%

of the patients that met with our recovery coaches in the Emergency Department requested follow up services

We welcomed more than

3,500

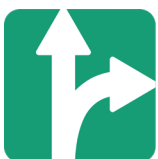
visits to the Center in downtown Burlington

71%

of our participants reported an increase in wellness after just 60 days of working with a recovery coach

The Turning Point Center of Chittenden County is a dedicated, compassionate community that provides recovery support services in a safe, substance-free environment for individuals and families on multiple paths to self-discovery and sustained recovery.

All programs are free, led by peers in recovery, and welcome all who are seeking support and recovery from addiction.



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Turning Point Center of Chittenden County

3-Year Strategic Plan

2021-2024

Adopted by the Board of Directors: June 9, 2021

Background and Context

The context in which the Turning Point Center of Chittenden County (TPCCC) has provided its services in 2020-2021 is radically transformational. We have experienced with the rest of Vermont, the U.S., and the world a pandemic, polarization in how we think of democracy, and a deep call for fundamental honesty and action to improve justice, equity, diversity and inclusion, in all we do.

Some things, however, do not change. Recovery from substance use disorder continues to be a critical need, and our reason for being. We have worked to be resilient, adaptable, and creative. We transitioned coaching to telephone and on-line to keep staff and guests safe from the virus. We launched an outreach campaign to draw people to our website and services. We re-imagined our big events: the Circle of Stars recognition gala was transformed into the \$100,000 in 100 Days campaign, and Comedy Night went on line. We implemented safety protocols to make face-to-face connection possible again.

During this time, we also celebrated the great service of Gary De Carolis, who retired as Executive Director in 2020, and welcomed Jesse Bunch, who has taken leadership in this truly exceptional time.

The Strategic Planning Process

In this context, the board of directors launched our 2021 strategic planning process knowing that we could not rely on the assumptions of earlier plans, past successes, or traditional outcomes. Nor could we rely on face-to-face meetings and walls covered with newsprint and sticky notes.

Our process included a round of interviews with partner organizations in the community, to gain insight into our current standing and what our partners hope for us going forward. The board reviewed the mission and vision to ensure alignment. A steering committee provided connection and communication, as working groups broke down by priority area to develop goals and objectives based on input, feedback, and an assessment of our environment. The Executive Director reflected with staff on the priorities and provided staff perspective. Staff and board developed annual action plans to continually carry out the objectives.

The Strategic Planning Team

This strategic plan is the result of the hard work of many, and we are grateful.

Steering Committee

Cathy Aikman
Jesse Bunch
Rosi Gowdey
Cyndi Haselton
Roger Kilbourne
Craig Weatherly

Working Group Members

Cathy Aikman
Patrick Brown
Rosi Gowdey
Sam Hemingway
Cam Lauf
Maureen Leahy
Hailey Ronconi

The process was facilitated by Anne Lezak and Christine Graham, who helped us to navigate these turbulent waters.

Board of Directors

Elected Annually

Cathy Aikman, Vice-President, 2017 - present

Sarah George, 2018 - present

Rose Gowdey, President, 2019 - present

Cyndi Haselton, Secretary, 2019 - present

Sam Hemingway, 2019 - present

Roger Kilbourn, Treasurer, 2020 - present

Maureen Leahy, 2021 - present

Shawn Nolan, 2013 - present

Chris Powell, 2020 - present

Ron Redmond, 2020 - present

Hailey Ronconi, 2020 - present

Craig Weatherly, At-Large, 2013 - present

VISION

The Turning Point Center of Chittenden County envisions a strong and vibrant community where no one faces recovery alone and people in all our diversity achieve long-term recovery and successful lives.

MISSION

The Turning Point Center of Chittenden County is an inclusive, compassionate community supporting those on multiple paths to recovery through peer-driven services in a safe, substance-free environment.

BOARD AND STAFF STATEMENT ON RACIAL EQUITY

In June, 2020 the Turning Point board and staff adopted this statement in response to the murder of George Floyd. It has served as a starting point for reflection and learning , and informs revisions in our mission, plans, and programs in order to be part of the solution to achieve greater justice and equity in our community and our society.

The Turning Point Center of Chittenden County stands in solidarity with the Black community in the fight against systemic racism and injustice. To be silent is to be complicit, and we have a duty and commitment to our Black guests, employees, volunteers, and extended recovery community to join our voice and our actions against such injustice. We acknowledge that we have work to do in the fight against the ongoing discrimination against people who are Black, Indigenous, and People of Color (BIPOC), and we are listening and educating ourselves. As we take this moment to express our condemnation of racism and our call for justice for all, we also commit to examine and grow our anti-racism practices. We hold ourselves accountable to ensure our practices and services are extended to all people in recovery in Chittenden County and beyond, and to incorporate, in particular, the perspectives and needs as expressed directly to us from BIPOC communities. Black Lives Matter.

GOALS

1. Develop a more mature and diverse philanthropic financial base that enables the Turning Point Center to make significant progress in funding operations on a long-term sustainable basis.
2. Increase culturally appropriate programming for more diverse populations.
3. Document program efficacy in a quantifiable way and use that data to strengthen and promote programs.
4. Increase mental health supports in alignment with programs.
5. Create an educational campaign about substance use disorders to decrease stigma, increase participation in Turning Point Center services, and expand financial and community-based support.
6. Create and adopt consistent branding and marketing guidelines for all outreach and marketing materials to reach a diverse audience.
7. Ensure staff is well-supported, well compensated and has the expertise and competence they need to carry out Turning Point Center's mission for our increasingly diverse community.
8. Develop the board's ability to support and guide the vision, mission and direction of the Turning Point Center through board recruitment, continuous learning, and team-building that grow the Center's community relationships to increase the Center's diversity, inclusion and equity policies and practices throughout the organization.

GOALS AND OBJECTIVES

Goal 1: Develop a more mature and diverse philanthropic financial base that enables the Turning Point Center to make significant progress in funding operations on a long-term sustainable basis.

Objective 1.1: Form a standing fundraising committee in June 2021, comprised of board members and the Executive Director, to cultivate and better inform larger individual and business contributors with a goal to expand the Center's private donations by 25% overall over the next three years.

Objective 1.2: In 2021, complete the planned giving design project with Leadership Champlain to implement in 2022 and subsequent years.

Objective 1.3: Launch two major fundraising appeals annually, starting Fall 2021. These appeals will be coordinated with and promoted during the Turning Point Center's events and activities.

Objective 1.4: Refine online giving options in Summer 2021 to encourage small donors to become sustaining supporters through monthly gifts, and to participate as volunteers in the Center's outreach, education, and fundraising activities both online and in-person.

Objective 1.5: Beginning Fall 2021, present the Center's programs to and request financial support from Chittenden County townships not currently contributing, beginning with at least seven of the 14 townships. In 2022, begin making annual requests of all 14 townships.

Objective 1.6: In 2021, introduce recovery services as an option to businesses in cooperation with Vermont Business for Social Responsibility, Lake Champlain Chamber of Commerce, and/or other business associations to expand recovery education and services under contract to area businesses.

Goal 2: Increase culturally appropriate programming for more diverse populations.

Objective 2.1: Meet with leaders of at least three organizations that represent/serve diverse people and groups the Turning Point Center does not currently reach, to determine specific needs, develop partnering/contract relationships, and identify personnel from partnering organizations who will participate in recovery coaching training, post-training support and supervision, and then be available on site at their organization.

Objective 2.2: Provide information, services and programming in ways that are welcoming and culturally appropriate for the diverse populations of Chittenden County, and collaborate with organizations serving diverse populations as we do so.

Goal 3: Document program efficacy in a quantifiable way and use that data to strengthen and promote programs.

Objective 3.1: Collect data from participants in each program (questions, frequency, validity, process, Results Based Accountability); and analyze and summarize the data to better understand the impact of programs and services and what gaps exist.

Objective 3.2: Review what data is currently collected; determine what is useful, what else is needed, operational definitions and how best to collect it while ensuring confidentiality, easy access to programming, and data reliability (assessment and standard development).

Objective 3.3: Highlight the good outcomes in communications with the community, guests, donors, through social media and print media and presentations; present and discuss with staff (for transparency, boosting and understanding).

Objective 3.4: Scrutinize the less than satisfactory outcomes and determine next steps toward improvement.

Goal 4: Increase mental health supports in alignment with programs.

Objective 4.1: Partner with mental health agencies to provide ongoing training for Center staff to recognize and effectively work with guests with mental health issues.

Objective 4.2: Collect mental health resources available and share with guests (i.e. pamphlet, poster, discussion, website).

Objective 4.3: Apply for grants to support an on-site mental health provider for referrals and easy access to care.

Goal 5: Create an educational campaign about substance use disorder to decrease stigma, increase participation in Center services, and expand community-based support.

Objective 5.1: Develop and deliver a presentation to 7-10 businesses, civic organizations, towns, and schools annually on the science behind addiction, the recovery path, and eliminating stigma.

Objective 5.2: Partner with other organizations, including those serving diverse populations, to create and promote a stigma reduction campaign using mainstream media/marketing, video, digital, and/or PSA, educational materials, messages at events, social media platforms, and our website.

Objective 5.3: Integrate these materials into orientation and training of the Center's staff, volunteers, and interns.

Goal 6: Create and adopt consistent branding and marketing guidelines for all outreach and marketing materials to reach a diverse audience.

Objective 6.1: Work with a creative consultant to develop new branding and marketing materials and guidelines.

Objective 6.2: Revise Turning Point Center's materials, in print, on website, and through all social media platforms, to reflect updated branding and marketing content and guidelines.

Objective 6.3: Ensure all materials follow guidelines by implementing a development, review, and approval process, which includes diversity and inclusion standards.

Goal 7: Ensure staff is supported and well compensated, and has the expertise and competence they need to carry out Turning Point Center’s mission for our increasingly diverse community.

Objective 7.1: Pursue UVMCC funding in 2021 in support of health benefits for the Emergency Department coaches, on-call costs for 24/7 Emergency Department coverage, and advanced training for the coaches.

Objective 7.2: Review compensation and benefits and expand or enhance where possible and appropriate, based on funding, to ensure equity and to support strong performance.

Objective 7.3: Review and channel resources toward professional development opportunities for all staff, to enrich career development and to grow a culture of awareness and inclusion within the organization.

Objective 7.4: Recruit an increasingly diverse staff that reflects the richness of Chittenden County in cultures, sexual orientations, gender, race, socio-economic status, abilities, and more, both today, and in the unfolding future.

Goal 8: Develop the board’s ability to support and guide the vision, mission and direction of the Turning Point Center through board recruitment, continuous learning, and team-building. This is with the intent to grow the Center’s community relationships, and to increase the Center’s diversity, inclusion and equity policies and practices throughout the organization.

Objective 8.1: Engage the board in outreach and fundraising opportunities, including the development of a board-based speaker and networking team to launch by January 2022 to act as ambassadors at-large throughout Chittenden County.

Objective 8.2: Engage the board and staff in continuous awareness-raising work through ongoing learning experiences.

Objective 8.4: Strengthen cooperation between board and staff through formal and informal activities.

Objective 8.5: Build a full, strong and diverse board membership by May 2022.

Objective 8.6: Complete a review of by-laws, policies, procedures and programs by the end of 2022, to align all aspects of TPCCC’s work with diversity, equity and inclusion priorities. Outside expertise may be sought to do this.