



To: Mr. Michael Brenan, Chairman, First Steps Study Committee
Members of the First Steps Study Committee
From: Ken Wingate, Chairman
Date: October 27, 2015

RE: Committee Requests for Publication

Thank you again for the opportunity to address the First Steps Study Committee during its final meeting on Monday, October 26, 2015. I am appreciative of both the Committee's hard work and its request to supplement the final report with clarifications provided by the agency. Attached, as requested, are:

- 1) A transcript of my full testimony, and
- 2) First Steps' detailed response to the 19 item list that that concludes the report.

Again, please accept our thanks for your commitment to strengthening First Steps on behalf of the state's 336,000 children under six.

**Testimony of Ken Wingate, Chair of the South Carolina First Steps Board of Trustees
October 26, 2015**

Good afternoon Mr. Chairman and members of the committee. It is a pleasure to be here with you today. I know that you, as I know I have, have had a long number of months. You've had multiple meetings and received a lot of testimony and read reams and reams of paper. I appreciate the diligence and time that each one of you individually has put into this. I know you've got legislative responsibilities that you're carrying out, but I think this goes beyond responsibilities and into the realm of policy and the shaping governance for the sake of our children, or – as we like to say – the youngest learners in South Carolina, in a way that will have a very big, long-term impact. Mr. Chairman, I appreciate the collaboration that we have been able to bring to this process. I'm not "head in the clouds" thinking that everyone is of the same mindset as to where the path leads next.

I want to remind the committee that I've just completed my first year of service as Chair of the [South Carolina First Steps] Board [of Trustees]. I'd ask that you remember from where we have come. In 2014 the members of the General Assembly reauthorized First Steps. A very significant thing that was done during this reauthorization was a restructuring of the Board. It was pared down to its current size. As I've spoken with almost every one of you in recent months, it was a brilliant change – at that time – in that the agency heads of the relevant agencies such as DSS were added. I won't rattle off the whole list...but there are five agency heads that now serve as members, not only with voice, but also with vote on the board and I think that has brought an extraordinary measure of focus. Some of you individually also sit as members of the Board of Trustees. And I think you've seen over the past year a new level of engagement by the Board. It is a pleasure to work with this group.

Also over the past year I've worked with the Governor's office to bring current all of the appointments to the First Steps Board. We had a number of individuals that, for a number of reasons going far back in time had remained in carry-over terms. So now having an infusion – and I'll say a good balance – of some long-serving members of the Board (and therefore institutional knowledge and memory is there), some midrange individuals (who have the energy of bringing to the Board their ideas, whether they are private sector individuals, public sector, legislative members or whatever that may be) and then "new blood." We've had two new members or...or will be adding another one very shortly, and so I think the level of engagement in the current structure of the Board is extremely strong.

And then finally to that end, recapping the past year, you know that we are in the final stages of concluding our five year strategic plan as required by Act 287. And largely that was informed or brought about by our 46 site visits. We went...board members and staff from the state office, out into the field and met in person, face-to-face with all 46 county partnerships. So local board members and Executive Directors and local committed volunteers had an opportunity to interface with us. And I think it's brought a great level of understanding to our work.

Finally, Mr. Chairman, I think that everyone is certainly aware that Susan DeVenny – who is with us today and has really been the face and voice of First Steps in her service over the years, both as a Board member initially and then as Director of the agency, has announced recently that she is going

to be leaving us in order to take over the leadership of a private foundation...a non-profit, in Lancaster. And so that appointment will begin in mid-December and she will be leaving us by that point.

To that end I've already been asked many questions about what we are going to do in terms of an Interim Director. Let me just head off your questions by saying, "I don't know." The Board will meet next Monday, November 2. And at that meeting we will take up the questions of "what to do," "how to do," and "who to do" as Interim Director. We have a number of options before us and I would not get ahead of my Board because this is a Board decision, as you can fully appreciate. Be assured that the Board is intimately and integrally involved in the day-to-day operations at this point, as we have tried to be for the past year. And so with the capable leadership that is in place and the fantastic and committed staff that is there also, we will not miss a beat. I will inform you after Monday when the Board meets, what we do.

I want to elevate eight characteristics, that I think based on my one year of very intensive investigation, will inform you, the members of this study committee on which of the options in the draft report you should pursue. And I will list these one at a time, briefly comment on them, and then will be happy to supply this list to you in writing after today's meeting as well.

Let me frame it this way, if I may. I am aware of the considerations and primary options that are included in your draft report. Regardless of which of those three options – or any variation or combination of these three options a person might favor – there are eight things that I think we can and must do together in order to make early childhood education and development a success as we move forward in South Carolina. And they are as follows:

Number 1: Preserve local involvement. As I went around to the counties and met with Executive Directors, their boards and the private partners, including the faith community, local corporations, passionate individuals who serve as volunteer tutors or in whatever capacity, what came home to me in spades in each location was the local flavor that that adds. What happens in Greenville, for example, is radically different than what happens in Bamberg, for a host of reasons. I think we all know that and recognize that, but I think that maintaining that local involvement is essential. It's essential because that's where volunteers come from. It's essential because that's where dollars come from, but it's also essential because the needs are so different.

The **second characteristic** I would strongly encourage is that we **protect private sector and faith based involvement.** Here's my reason, friends: Access is probably the single largest challenge facing the Governor and Generally Assembly right now, especially in the plaintiff districts. It is not feasible, it is not possible in the wildest imagination of anyone, that we could create a structure that creates access to quality child care and early education, or to family training apart from preserving the private sector and faith-based involvement with the public sector as well.

The **third of my eight would be to require transparent accountability.** Everything that is done for our youngest learners must be done with consistent assessments ("where are they now?"), reporting ("what have we done to try to move the needle?"), and the use of outcome based incentives to positively inform what happens in the various communities.

Fourth on my list would be to **emphasize the training of teachers using research based methods and solid data.** It warmed my heart and yet also sent chills down my spine simultaneously to see, sometimes, to see the few – as I like to say – trying so hard to do so much with so little. And yet realizing that without the training and the engagement of effective teachers, that passion in and of itself is not enough to push the ball across the goal line. Well-trained teachers are vital to the solution that you will craft.

Number five on my list, Mr. Chairman, would be to **keep the scope of intervention comprehensive.** I cannot underscore this enough, friends. What do I mean when I say “keeping the scope of the intervention comprehensive?” It’s not just about what goes on in the classroom, though that’s very significant. It’s about what goes on in the afternoon child care centers. It’s about what happens in the local healthcare centers. Are these children assessed for vision and hearing and a host of other health needs. And what goes on in the home. It’s every child care center. It’s every family. It’s every home. And unless we comprehensively reach out to parents and families and comprehensively reach out to help them with their parenting skills, with raising their children in a healthy and safe environment, with helping them achieve base levels of social skills, in addition to being loved, clothed, fed and warmly embraced on a daily basis...without that comprehensive total life engagement we are going to fall short on what we need to deliver.

The **sixth** of my eight would be to **assist the 46 local partnerships in every way possible.** That includes providing technical assistance. That includes providing grant writing assistance, because there is a great need for that which we have been diligently seeking to undergird and support. Fund-raising assistance and accounting and bookkeeping assistance are also essential. Again, that 46 county structure must be vital.

Number **seven** on my list Mr. Chairman would be to **develop an integrated data system across all early childhood agencies that includes health and social services data linked with K-12 data.** Regardless of where that is housed or how it is structured, I think we all know that being able to assess, train, report and follow our students as they go through this pipeline (though that sounds very impersonal...these are human lives we are talking about, not widgets)...but as they move through that pipeline of years we have to be able to show, “what are we doing?” “where are we investing?” and “what are the outcomes?”

Finally number **eight.** I’m going to say that we should substantially **emphasize early childhood development as the most cost effective, socially responsible investment that we as a state can make...especially in the poorest districts.** You’ve heard this year as you did your studies a number of key indicators. Things like, “90% of brain development takes place before age five, whereas 90% of all education expenditures take place after age five.” You’ve heard statistics that a child from an underprivileged home by age three has heard 30 million fewer words spoken to him or her than a child from a two parent, middle income family. And that, friends, is a deficit that almost can never be overcome.

The General Assembly and the Governor are facing an enormous financial challenge and crisis in this state. We’ve got education and the Abbeville suit. You’ve got roads and bridges and infrastructure. The place where the lowest cost-highest return investment can be made is in early

childhood development. I had a conversation one month ago with a man whose name I won't use, but rest assured that every one of you would know this person individually, and he said to me, "Ken, politically in the past 25 years you and I have never agreed on one thing. But let me tell you, my friend, you are singing the right song. And I'm totally on board with you. Putting our muscle behind early childhood development is the cause that you and I can pursue together. I can't say it passionately enough, that I'm convinced that from the business community's perspective, the faith community's perspective and the education community's perspective, this is it. And I applaud what you're doing."

You'll notice that I have astutely avoided saying which of the three options I prefer, for this reason. Whatever I say about what Ken Wingate prefers is totally irrelevant. I'm not a member of the General Assembly. It's the policymakers: you and the Governor who will make these decisions. If you incorporate these eight characteristics into whatever plan you adopt, it will work. If I may respectfully state the inverse of that as well: if we fail to incorporate these eight characteristics in whatever plan is adopted, it will not work.

There has been a lot of tug-of-war over South Carolina First Steps to School Readiness. We are here, engaged, active and I hope displaying good faith and a willingness to respond to any and all questions and requests for information, and to work hard for you and for our youngest learners. And with that Mr. Chairman I'll conclude my remarks and I'm happy, either now or later to take questions.

Questions from the Committee

Mike Brennan: Mr. Wingate, thank you. It was about this time a year ago that both of us were appointed by the Governor to these positions. In this process I think we've collaborated and shared lots of information and so Mr. Wingate I want to thank you for that level of communication and collaboration on this important issue.

Ken Wingate: It's mutual.

Mike Brennan: Let me also say that I believe that the eight things that you just shared with us ought to be part of our report.

Senator Setzler: Mr. Chairman, that's where I was going to go. First of all, Mr. Wingate, thank you for your comments. You make me proud to be a member of this committee and to have worked with you and I would move that the comments of Mr. Wingate be printed and distributed as part of the report when adopted by this committee as part of its report to the members to the South Carolina General Assembly.

Mike Brennan: If we could take that up as we take up the report, I think there is general consensus around the table. At this time I would ask other members of the committee if they have any questions or comments for Mr. Wingate. Senator Fair?

Senator Fair: Thank you Mr. Chairman. Ken, thanks for those comments and I'm not going to ask you a question to get you into the weeds you just avoided...the points you made are excellent. But I don't understand the last thing you said. The opposite won't work? What will not work?

Ken Wingate: If we do not preserve all eight of these characteristics, whether the structure is left more or less as it is, or changed to another, it would not succeed.

Senator Fair: So you're saying that the eight points that you made are a corporate body of principles that need to be focused on, and that if we fail to do that then the structure is irrelevant? I'm just restating the point that you made.

Ken Wingate: I guess I could say it in slightly different words. I won't say the structure is irrelevant, that would be too strong a statement. But my point is that regardless of the structure if it is left as is – or changed – using these eight key principles and highlighting them, and maintaining them on an ongoing basis as we move forward would be vital.

Rep. Allison: First of all, Mr. Wingate I appreciate everything that you said in all eight and I know that you do it not only from a comprehensive look at early childhood but I also know that you do this with your heart. And that came across very much. And I appreciate very much the time that you have spent and the time the staff at First Steps spent coming up with those eight. I dare say that having chaired a committee and chairing a committee ongoing right now that is looking at the court case, so much of what you have said in these eight pieces of in—depth considerations have been the things that have been bubbling up in this state. And that has come from people all over the state. Those in the plaintiff districts, those outside the plaintiff districts and those who have been educators most all their lives. These are the things that have bubbled up and I dare say that whatever structure you had for First Steps going forward, if these pieces were not a part of it none of them would be successful. It boils down to great leadership development, it boils down to a passion to serve all children in the state and I think very definitely as you said Senator, that they should be a part of the report. So thank you.

Rep. Felder: I too, Mr. Wingate, truly appreciate all of the effort that went into that. I do think that the definition of the characteristics, I must commend you on that, because it's very difficult to sit down and make such a neat little list. But I think you've mastered it well. I do have a question. I realize you've only been there a year, but the five year strategic plan, is that a first time creation of a five year strategic plan or are you just reviewing a five year plan that is currently in place and making changes and tweaks and when is the estimated completion for that?

Ken Wingate: Thank you. This is not the first time South Carolina First Steps to School Readiness has gone through a strategic planning process. There have been two comprehensive, prior plans in years past. This current plan is, number one, mandated by Act 287 – so in 2014 the General Assembly said, "South Carolina First Steps to School Readiness shall come up with a five year strategic plan." So not scrapping the prior plans, but building off of them, we started an entirely new process. That was in part what led to the 46 county visits and we drew the Board...the full Board has been engaged in this all year long. At our meeting next week, we will be looking at a draft of that strategic plan with consideration of adopting it, certainly before December. November 2 and

December 3 are our next meetings. We hope to adopt the plan on December 3rd and then will have timely met the requirement of the General Assembly. I hope that answered your question.

Rep. Garry Smith: Mr. Chairman thank you for your presentation. It was a very comprehensive list and certainly one that's going to be very helpful to the committee moving forward. And I had a couple of questions related to that. We had also asked previously that you come and talk about the evaluation of First Steps. So now that that is done can you give us a little bit of an update as to how that evaluation audit came out?

Ken Wingate: The financial audit? Is that what you're referring to? It came back with no recommendations. The auditors came back with what, in their terminology, was an "unqualified opinion" which is the highest and cleanest level of reporting that they can give. The auditors will be meeting with the Board at their next meeting, and yet that is their finding. And we are very pleased and grateful to announce that.

Rep. Smith: As part of the strategic plan you go back and look at the system and evaluations to look at what you've done and accomplished. And what kind of things are left to be done, for example. Can you give us an update as to how that looks? What the data is actually showing about how much the growth in 4K has taken place, and the number of students that are being served?

Ken Wingate: I could do that at a high level or general level and if it would be appropriate I certainly would defer to Mrs. DeVenny and to Dan Wuori for specific, precise numbers because they're on the ground day to day. But there has been, through the Early Head Start grant, an expansion of services to our young learners. That award was issued last year as you know and we have been in the process of advancing that. After a diligent search we have hired an Early Head Start Director and we are excited about how that is coming online. I don't know how much detail you'd like me to get into. I'd be happy to defer to Susan or Dan. What is your pleasure?

Rep. Smith: What may be helpful is if you had a little bit of a report you'd like to share with the committee. I think it would be very good for us to have that information and share that part of the report.

Mike Brennan: Rep. Smith, can we deal with that once we have a motion on the floor to have a full review and discussion of the draft report?

Rep. Smith: We can. I do have a few more questions. With the changes that have been made in the governance structure, how would you say that has worked out as far as being able to give those agencies an ability to be an active part of the Board? Are you sensing a change in the dynamics?

Ken Wingate: I've seen significant positive changes as a result of that. And I commend the General Assembly for those changes made in 2014. My personal engagement with the directors of DSS and DHEC and DDSN has been well-received. And now at Board meetings of South Carolina First Steps – and by the way now I think Board members may think we have too many meetings, as we've gone from four to seven meetings this year. In those, no longer do the agencies simply send a representative to monitor the conversation, but rather those individuals are sitting at the table, engaging in conversation, raising their hands yea or nay. We are seeing a very positive, significant

new level of engagement. What that's led to is an honest discussion. I sat down with Susan Alford recently in her office and said, "What is DSS doing that touches on some of the things that SC First Steps is doing? How can we better share information with one another? How can we better assist one another?" And the result of that level of engagement has been very beneficial.

Rep. Smith: We're you able to take a look at the draft report in advance?

Ken Wingate: Absolutely.

Rep. Smith: When did you get that?

Ken Wingate: I've seen it more than a week ago.

Mike Brennan: I'd go ahead and remind you that we sat down on October 2nd at your office to discuss the draft. And that at that time, together, we discussed the full draft. The greatest concern that Mr. Wingate expressed were the 19 items that are listed at the end. We both agreed that First Steps' staff should be offered the opportunity to respond to that. They have responded to that. And I believe that that response needs to be a part of what we submit to the General Assembly.

Rep. Smith: Thank you for that Mr. Chairman, but that really wasn't my question. The question I was trying to ask is whether, before it was actually published, did he have a chance to take a look at the written draft?

Ken Wingate: I was told that there was a draft, that was posted and available to the committee that had begun to circulate. If I may go back to comments that I made to the committee when I addressed them on day one, I expressed then – as a brand new chair with only a few months under my belt – that I sensed a strong undercurrent with respect to First Steps and that there was a lot of tug-of-war over just basic data. Was something provided, was it not provided, to whom was it provided, who drafted it, who edited it, where did it come from, where did it go? And I have shared the frustration that many others have experienced in that kind of thing. I have asked the staff and they have put together, as you're aware, a response to these 19 items that are listed at the end of the document. It is frustrating when things that aren't yet due are listed as deficiencies or not yet reported. For crying out loud, if they aren't due yet...I'm a lawyer and deal with court deadlines all the time. When something's due to be filed it will be filed. If I fail to file it in a timely manner, then that's bad for me. But if it's not yet due, it's not yet due. So above that fray, and I'm never going to get into "he said," "she said" and pointing fingers, because that sort of thing drives me nuts...is to look at the policies of what's going to serve the best interest of children in South Carolina. I'll say guardedly, I don't care about what happened yesterday. Of course I do. But what I really care about is what happens tomorrow. And so in a spirit of collaboration and cooperation and responding to requests and board leadership of this important work, that we will together happily move forward. And so we have asked for and were readily granted an opportunity to respond to that list of 19 items. I believe that's been provided and that's why I answered your question that a week ago, give or take, I got word that there was a draft out there that raised some concerns. Would we be able to respond to them? I sought permission to respond to them and that was granted. And that's what brought us to where we are today.

Rep. Smith: I appreciate that very much Mr. Chairman. The whole purpose of bringing that up is that I feel like the integrity of the process that we go through as a study committee is one that certainly reflects greatly on the product that comes out. And that really bothered me that we have done it in this way. So that a draft report was published before the agency had an opportunity to take it and respond to it. There were a number of parts of that report that really bothered me that were published. And it reflects not only upon First Steps but it reflects upon this committee. And I just can't let those sort of things go by as a member of this committee. I'm not going to throw rocks at anyone but I'd just say that that should not have happened and I apologize personally that it did so. And would certainly hope that going forward that we would do a much better job of making sure that we have accurate information that we are publishing and that we have gone through a process that allows for the input of those who are very much involved in the evaluation who are being impacted by it. And to give them the opportunity to respond to that in an appropriate manner.

And in that regard also, one of the things that was certainly in the draft report was that you guys are in somewhat of a crisis in administration. And from what I've heard from you, based upon the questions I asked earlier, that doesn't seem to be anywhere close to being correct. Maybe there were some past issues. That was the whole purpose behind the reforms that we did two years ago. But you have done a good job as Chairman, and the staff, of meeting those issues and concerns and are headed in the right direction. And I would ask you: Do you feel like there is a crisis in administration there at First Steps?

Ken Wingate: I do not feel like there is a crisis. We, under the General Assembly's changed Board structure, have become a much more engaged – and I've used the phrase in Board meetings – a “board-led” organization. So policy and broad directional initiatives are coming from the Board level. Staff engagement and response with the Board has been very positive, very open and also phenomenal. And I've already addressed, for reasons that have nothing to do with how things are going at the agency, that Ms. DeVenny has already announced that she's going to be changing careers but is going to remain engaged in this early childhood endeavor as a so called “private citizen” and a participant in the Lancaster community. So I feel good about where South Carolina First Steps is and where it is going.

Rep. Smith: Thank you Mr. Chairman, and if I could I'd also like to thank Ms. DeVenny for all the time that you have put in and all the efforts you have put in over the years for our children in South Carolina. We certainly have come a long way during this time, so thank you very much.

Item:	First Steps Response:
<p>1. Description of School Readiness--Due 7/1/15 (§59-152-32)</p>	<p><u>STATUS: COMPLETE</u></p> <p>The description of school readiness required in §59-152-32 was given final approval by both the First Steps Board of Trustees and State Board of Education on October 14, 2015. The First Steps Program and Grants Committee worked aggressively to ensure completion of this product before the legislative deadline of July 1, 2015, working with well over 100 teachers beginning April 20 with agency partners, national and regional experts, and key stakeholders (including Dr. Danny Varat, a designee of the State Board of Education and SCDE staff representatives) to draft and approve a description that was approved by the Program and Grants Committee on June 9, 2015 and the full Board on June 18, 2015.</p> <p>On June 8, 2015, State Board Chair, Dr. Traci Young Cooper, informed First Steps that – given conflicting meeting timelines - the State Board would prefer to take up this document at its August 12, 2015 meeting. On Friday, August 7, 2015, Dr. Julie Fowler of the SC Department of Education provided initial notice that the Department was removing the readiness description from the August meeting agenda in order to better incorporate the feedback of newly hired staff. First Steps and SCDE staff met repeatedly to discuss, prior to convening a secondary review panel consisting of approximately 40 invited members, collaboratively selected by SCFS and SCDE. With participation of First Steps trustees, this panel met on three occasions in September and October of 2015, agreeing to the refined, consensus draft ultimately re-adopted by the First Steps Board of Trustees and approved by the State Board on October 14, 2015. A memo outlining this timeline and process is attached (ATTACHMENT A), as is the final draft (ATTACHMENT B).</p>
<p>2. Benchmarks and Objectives for the Board and Local Partnerships--Due 7/1/15 (§59-152-32)</p>	<p><u>STATUS: COMPLETED ANNUALLY SINCE 2007</u></p> <p>Though only recently codified at the suggestion of the agency, the First Steps Board of Trustees has met this requirement annually since 2007. First Steps' Partnership Accountability Standards, which detail the Board's programmatic and operational requirements are reviewed and adopted</p>

	<p>each spring and enforced as an attachment to each partnership's annual grant agreement. The standards for FY16 were adopted by the Board on March 19, 2015. A copy of these standards is attached (ATTACHMENT C) and is posted on our website at http://scfirststeps.com/accountability.</p>
<p>3. Determination of Effectiveness of State and Local Programs--Due 7/1/15 (§59-152-32)</p>	<p><u>STATUS: COMPLETED ANNUALLY SINCE 2008</u></p> <p>Likewise, this requirement is a standing practice of the First Steps Board of Trustees since inception. Following the board's adoptions of enhanced Partnership Accountability Standards in 2007 (reviewed and approved annually since), the Board has completed an exhaustive review of strategy-level fidelity, compliance and outcomes as part of its annual grant renewal process. This pervasive accountability mechanism, recognized nationally, gives the local partnerships clear metrics and the board the ability to approve, conditionally approve or recommend the disapproval of each partnership strategy annually. The FY16 grant renewals were approved by the Board on June 18, 2015. A copy of the grant renewal packet, documenting this effectiveness review is attached (ATTACHMENT D).</p>
<p>4. Review of the School Readiness Description, Benchmarks, and Objectives--Due 12/31/2014 (§59-152-32)</p>	<p><u>STATUS: DRAFTING ERROR (Review of Readiness Description) COMPLETED ANNUALLY SINCE 2007 (Benchmarks/Objectives)</u></p> <p>This item is a likely drafting error within Act 287, requiring the Board to review in December of 2014 the readiness description not required for creation by law until July of 2015. As pertains to the Board's review of Benchmarks and Objectives for local partnerships, this is completed by the State Board annually - most recently on April 10, 2014 (ATTACHMENT E) and March 19, 2015 (ATTACHMENT F).</p>
<p>5. 2014 and 2015 Annual Report--Due 12/1 annually (§59-152-50), to include all applicable requirements itemized in 59-152-50(6) and (7).</p>	<p><u>STATUS: 2014 REPORT COMPLETE, 2015 REPORT DUE DEC. 1</u></p> <p>The 2014 annual report is complete and attached (ATTACHMENT G). The 2015 report is not due until December 1, 2015.</p>

<p>6. Response to the November, 2014 external evaluation--Due 6/30/15 (§59-152-50)</p>	<p><u>STATUS: COMPLETE</u></p> <p>The SC First Steps Board of Trustees reviewed, discussed and adopted its response to the 2014 external evaluation on June 18, 2015. This response is captured in the Board's meeting minutes (ATTACHMENT H).</p>
<p>7. Local Partnership 2015 Annual Reports received --Due 10/1 annually (§59-152-70)</p>	<p><u>STATUS: COMPLETE AND UNDERGOING INTERNAL REVIEW</u></p> <p>Local partnerships complete these reports annually. Partnership annual reports for 2015 have been submitted and are undergoing internal review, as per the agency's annual protocol. Each will be posted to the First Steps website following this internal review.</p>
<p>8. Cyclical Evaluation Calendar including each major investment--Due 6/30/2015 (§59-152-160)</p>	<p><u>STATUS: COMPLETE</u></p> <p>The SC First Steps Board of Trustees reviewed, discussed and adopted its proposed cyclical evaluation calendar on June 18, 2015. This cycle is captured in the Board's meeting minutes (ATTACHMENT H) and an RFP for the evaluation of Parents as Teachers, as the initiative's largest program investment is currently at the SC Department of Education, who will finalize and post on First Steps' behalf. As soon as First Steps receives the final, a copy will be provided to the committee.</p>
<p>9. Independent Evaluation of the Progress on the Initiatives' Goals and Progress-Completed March 2015 (§59-152-160)</p>	<p><u>STATUS: COMPLETE</u></p> <p>First Steps' most recent external evaluation was conducted by Compass Evaluation and Research and released in March of 2015. A copy of both the full report and a short executive summary are posted on the First Steps website at http://scfirststeps.org/compass-evaluation-and-research-report. A copy of the Executive Summary is included as ATTACHMENT I.</p>
<p>10. BabyNet OSEP Report--Due 12/31/2015 (Proviso 1.96)</p>	<p><u>STATUS: DUE AT A FUTURE DATE</u></p> <p>This is a new proviso, detailing a report due on December 31, 2015.</p>

<p>11. SUNS Report (Unique Student Identifiers)-- Due 11/1/2015 (Proviso 1A.66)</p>	<p><u>STATUS: DUE AT A FUTURE DATE</u></p> <p>First Steps final 4K student data for 2014-2015 was delivered to the Education Oversight Committee as required on June 15, 2015. 2015-2016 SUNS numbers have been assigned by the SC Department of Education and will be provided to the Education Oversight Committee as required by November 1, 2015.</p>
<p>12. CDEPP Data for the Education Oversight Committee --Due 11/30/2015 (Proviso 1A.66)</p>	<p><u>STATUS: DUE AT A FUTURE DATE</u></p> <p>Again, this is a future deadline. All requested data will be provided timely to the SC EOC by November 30, 2015 as requested.</p>
<p>13. First Quarter of FY16 Quarterly Progress Report on the Implementation of the LAC's BabyNet recommendations-- (Proviso 117.99)</p>	<p><u>STATUS: COMPLETE/ONGOING</u></p> <p>The agency's most recent status report pursuant to Proviso 117.99 is complete and included as ATTACHMENT J. With the exception of recommendations requiring legislative changes by the General Assembly, First Steps has – as documented in the LAC's own follow up report - largely addressed the findings of the LAC as pertains to BabyNet. First Steps is currently working with agency partners to prepare for submission of the BabyNet report established in Proviso 1.96 and a joint, inter-agency budget request designed to address the state's lengthy history of federal non-compliance.</p>
<p>14. Grant qualification requirements posted on OFS web site (59-152-90(C)(3))</p>	<p><u>STATUS: COMPLETED ANNUALLY</u></p> <p>Local partnerships apply for renewal grants annually in late spring. The FY16 grant application materials is included as ATTACHMENT K and available for review at http://scfirststeps.com/renewal-application-materials</p>

Note that the items below are new requests of the Study Committee	
15. Listing of Fiscal Year 2015-16 grant allocation amounts, examples of how three formulas were calculated, and how the requirements support Plaintiff district needs.	<p><u>STATUS: NEW REQUEST FROM STUDY COMMITTEE</u></p> <p>First Steps will be happy to provide detailed responses to each of these new requests by November 15, 2015.</p>
16. Brief explanation of the modest growth in the number of children from Plaintiff districts served in First Steps' private 4K program in recent years (309, per the 2007-2008 EOC Program Report, vs. approximately 695 last year).	
17. Timeline for promulgation of regulations (63-11-1730)	
18. Update to October 2014 Legislative Audit Council response	
19. Update to First Steps Board members provided to the Study Committee in March 2015	<p><u>STATUS: COMPLETE/NEW REQUEST FROM STUDY COMMITTEE</u></p> <p>An updated board roster is included as ATTACHMENT L, pursuant to this new request of the committee.</p>

Supporting Documents

Item 1: Readiness Description

ATTACHMENT A: Memo to State Board of Trustees from Program and Grants Committee Chair, Julia Ellen Davis (October 15, 2015)

ATTACHMENT B: Final readiness description document as adopted by First Steps Board of Trustees and State Board of Education (October 14, 2015)

Item 2: Benchmarks and Objectives for Local Partnerships

ATTACHMENT C: FY16 Partnership and Program Accountability Standards (March 19, 2015)

Item 3: Effectiveness Review

ATTACHMENT D: FY16 Grant Renewal by Strategy/Effectiveness Review (June 18, 2015)

Item 4: Review of Readiness Description, Benchmarks and Objectives

ATTACHMENT E: Board of Trustees Minutes, April 10, 2014

ATTACHMENT F: Board of Trustees Minutes, March 19, 2015

Item 5: 2014 Annual Report

ATTACHMENT G: 2014 Annual Report

Item 6: Response to Compass Evaluation

ATTACHMENT H: Board of Trustees Minutes, June 18, 2015

Item 8: Cyclical Evaluation Calendar

ATTACHMENT H: Board of Trustees Minutes, June 18, 2015

Item 9: External Evaluation Completed

ATTACHMENT I: Executive Summary of Compass Evaluation

Item 13: BabyNet LAC Update

ATTACHMENT J: October 2015 BabyNet LAC Status Report

Item 14: Grant Qualification Requirements

ATTACHMENT K: FY16 Partnership Renewal Grant Application

Item 19: Updated Board of Trustees Roster

ATTACHMENT L: October 2015 Board Roster

**ATTACHMENT A: Memo to State Board of Trustees from Program and
Grants Committee Chair, Julia Ellen Davis (October 15, 2015)**



To: First Steps Board of Trustees
From: Julia-Ellen Davis, Chair, Program and Grants Committee
Date: October 15, 2015

RE: Description of Readiness Pursuant to Section 59-152-32

I am writing to provide an update on the school readiness description passed by the Board on June 18, 2015. As you will recall, Act 287 of 2014 (First Steps' Reauthorization) contained South Carolina's first-ever legal definition of "school readiness."

'School readiness' means the level of child development necessary to ensure early school success as measured in the following domains: physical health and motor skills; emotional and social competence; language and literacy development; and mathematical thinking and cognitive skills. School readiness is supported by the knowledge and practices of families, caregivers, healthcare providers, educators, and communities.' SC Section 59-152-25

Section 59-152-32 requires that the First Steps Board of Trustees elaborate upon this brief definition, requiring that it do the following by July 1, 2015:

In consultation with the State Board of Education, and with the advice and consent of that board, adopt a description of school readiness that includes specific:

- (a) characteristics and development levels of a ready child that must include, but are not limited to, emerging literacy, numeracy, and physical, social, and emotional competencies;*
- (b) characteristics of school, educators, and caregivers that the board considers necessary to create an optimal learning environment for the early years of students' lives; and*
- (c) characteristics of the optimal environment which would lead to the readiness of students and their continued success.*

The First Steps Board of Trustees' Program and Grants Committee worked throughout the spring to craft a parent-friendly description of readiness, informed by key partners. Meeting for a full-day work session on Monday, April 20, the committee welcomed the participation of representatives from:

- The State Board of Education
- The State Department of Education
- The SC Education Oversight Committee
- Head Start
- The SC Council on Competitiveness
- The Institute for Child Success, and
- Parents as Teachers.

During this meeting the committee agreed on three major deliverables:

- 1) A parent-friendly description of the "ready five-year-old" (to be aligned with and informed by key state and national works)
- 2) A "Profile of the Preschool Graduate" designed to align with Transform SC's Profile of the Ready (High School) Graduate.
- 3) A supplemental document, detailing the characteristics of "ready schools, educators, caregivers and communities/environments"

On Monday, May 4 the committee met to review working drafts of the above – including an alignment document comparing recent works from Parents as Teachers, SC's voluntary preschool standards (a joint project of the SC Department of Social Services and Department of Education), the EOC and

Institute for Child Success. At this time the committee endorsed a survey of SC kindergarten teachers designed to assist in the prioritization of the readiness description's key indicators. We are grateful for the Department's assistance in distributing an electronic survey, through which a panel of 100 SC kindergarten teachers ultimately provided feedback.

On Tuesday, June 9, 2015, the Program and Grants Committee met to complete a final review of the proposed document, adopting it as the committee's recommendation to the full Board – which adopted it unanimously on June 18, 2015.

On June 22, 2015 this document was provided to Dr. Traci Young Cooper, Chair of the State Board of Education and other key Department leaders. Shortly thereafter, the Department of Education expressed a desire to extend the timeline of the document's consideration by the State Board of Education to allow time for newly hired staff to review and provide feedback on the document.

First Steps and Department of Education staff worked throughout the intervening months, convening a secondary working group to ensure the document's full alignment with the newly approved SC College and Career Ready Standards in English Language Arts and Mathematics. In addition to a number of staff meetings, this team – consisting of representatives from the Program and Grants Committee, Department of Education, school districts, local First Steps Executive Directors and DSS' Department of Early Care and Education - met on three occasions:

September 16, 2015 from 3-5pm,
September 25, 2015 from 1-3pm, and
October 2, 2015 from 1-4pm.

During these meetings, the work team reviewed the legal charge to First Steps and the Department and carefully reviewed the language of each section, yielding a refined document that remains true to the spirit of the Board's June 18th version, but has been modified in the following ways:

- Adds additional language specifically aligned with the College and Career Ready Standards for English Language Arts and Mathematics,
- Reformats the document throughout, providing references and a simplified, bulleted format,
- Removes "I can" verbiage in favor of learning objective-style action verbs,
- Creates a new section on "Ready Families" the content of which has been broken out (and expanded) from the prior "Ready Schools, Educators and Caregivers" section to spotlight the specific role of families.
- Removes for the time being the "Profile of the Ready Preschool Graduate." You may recall that this section was added voluntarily by the Program and Grants Committee in an effort to illustrate alignment with the Profile of the Ready (High School) Graduate. While the Committee remains committed to illustrating this connection, we received some important feedback from the Department concerning the concept of preschool "graduation" which the Department does not recognize using specific terminology. We have agreed to revisit this optional section – which was not mandated by Act 287 – and return it to the group in the coming months after additional modifications.

I am pleased to share with you the attached consensus document, crafted over many hours by a diverse cross-section of early childhood stakeholders. This final version was **approved by the Program and Grants Committee on Tuesday, October 13, 2015 and approved by the First Steps Executive Committee, the State Board of Education's Standards, Learning and Assessment Committee and full Board of Education on Wednesday, October 14.**

Thank you again for your support, participation and collaborative spirit throughout this process.

**ATTACHMENT B: Final readiness description document as adopted by
First Steps Board of Trustees and State Board of Education**

(October 14, 2015)

Preparing for Kindergarten Success in South Carolina:
Characteristics of the Ready Learner

Approaches to Learning and Inquiry

- Demonstrates eagerness to learn.
- Shows curiosity through questioning.
- Shows creativity and imagination.
- Engages in daily opportunities for play and exploration.
- Shows willingness to try new things.
- Persists in tasks that are challenging.
- Maintains attention.
- Applies learning to new situations.
- Solves problems with materials at hand.
- Use senses and observations to learn about the surrounding world.

Emotional and Social Development

- Works and plays cooperatively with others.
- Expresses emotions through appropriate actions and words.
- Follows simple rules/directions.
- Adjusts to changes in routine and environment.
- Shows self-control.
- Shows caring and understanding of other's feelings.
- Takes turns.
- Shares toys and equipment with others.
- Interacts with familiar adults.
- Respects the property of others.
- Resolves conflicts using words and adult support.
- Makes Friends.

Physical Development, Self-Help and Motor Skills

- Moves with control and balance while walking, running, jumping, climbing.
- Uses fingers to manipulate small objects, such as pencils/crayons, scissors, buttons, zippers.
- Uses hand-eye coordination to perform simple tasks, like putting together a puzzle.
- Independently performs self-help tasks such as toileting, hand washing, tooth brushing, and dressing.

Language and Literacy Development

Listening, Speaking and Understanding

- Converses with others, taking turns speaking and listening.
- Speaks clearly, expressing ideas and questions.
- Uses words to seek help, answer questions and solve problems
- Speaks in complete sentences of at least six to eight words.
- Listens to stories and retells them.
- Begins to ask questions about events in texts that are read aloud.
- Follows directions and completes tasks that require multiple steps.
- Asks and answers "how" and "why" questions.

Early Reading

- Shows interest in books and reading.
- Explores books independently.

- Knows that printed words have meaning.
- Uses pictures in a text to tell and retell the story.
- Recognizes and reads familiar signs and logos.
- Maintains attention on story being read aloud.
- Makes predictions about what will happen next in a story being read aloud.
- Identifies the front and back of a book.
- Begins to follow text from left to right as it is read aloud.
- Recognizes and names rhyming words.
- Recognizes that letters represent spoken sounds.
- Recognizes some upper and lower case letters and their sounds.
- Recognizes that spoken words can be represented in written language.
- Recognizes written name as well as other familiar words.
- Begins to use pictures and text read aloud to learn the meaning of unfamiliar words.

Early Writing

- Draws pictures and tells their story.
- Writes using a combination of drawing, letters, scribbles, letter-like shapes and/or symbols to tell a story.
- Uses writing during play to create signs, lists, etc.
- Writes name independently or using a model.

Mathematical Thinking

Number Sense

- Counts orally to 20.
- Counts up to 10 objects.
- Matches numbers to groups of up to five objects
- Compares sets of objects (more than or less than) and describes quantity size (big and small), length (long and short) and weight (light and heavy).
- Identifies first through third in a line of objects.

Matching, Sorting, Classifying

- Creates simple repeating patterns.
- Describes positions of objects by using the terms, *above and below*.
- Recognizes and draws basic shapes (circle, square and triangle).
- Sorts and classifies up to 10 objects into categories.

Characteristics of Ready Families and Caregivers

- Provide safe and loving home environments in which children can grow and develop optimally.
- Ensure that their children's pediatric health and dental needs are regularly addressed.
- Create "language rich" homes in which conversation and written literacy are modeled daily.
- Ensure that their young children receive adequate rest and a healthy diet.
- Expose young children to regular and varied learning experiences in and out of the home.

Characteristics of Ready Schools and Educators

- Understand that each child develops on a unique timeline.
- Prepared to meet the unique, individual needs of all students.
- Highly knowledgeable in both child development and the progression of early learning.
- Provide the social, emotional and academic supports needed to advance their students abilities.
- Create emotionally safe and nurturing environments that are free of stress.
- Equipped to support the needs of their students' parents and caregivers.

Characteristics of Ready Communities

- Provide access to the resources necessary to ensure good health and optimal physical, social/emotional and cognitive development.
- Create environments in which children:
 - Can grow and develop in the absence of fear, stress, danger and hunger.
 - Have access to needed pediatric, dental and mental health resources.
 - Spend their days in nurturing, language-rich, and developmentally supportive environments (whether a loving home, a high-quality early education setting or both).
 - Are cared for by loving adults attentive to their physical, emotional and developmental needs.

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ATTACHMENT C: FY16 Partnership and Program Accountability Standards
(March 19, 2015)

SC First Steps to School Readiness FY16 Partnership and Program Accountability Standards

Effective July 1, 2015 – June 30, 2016

This document outlines the standards, or expectations, of local First Steps Partnerships with regard to all programmatic, operational, financial, and administrative activities of the partnership. This document will be attached to the 2015-16 grant agreement between local partnerships and South Carolina First Steps as a condition for receiving an annual funding allocation from the South Carolina First Steps Board of Trustees. It is the responsibility of the local partnership board and staff to comply with all partnership and program accountability standards (Section 19. Section 9-125-160(A)).

1. Partnership Accountability Standards:

Partnership standards are organized into the following sub-sections:

- Governance and Operations**
- Fiscal Accountability**
- Collaboration/Community Engagement**
- Resource Development**

Additionally, partnership standards reference the partnership's annual grant agreement with SC First Steps, the SC First Steps Operations Manual, First Steps legislation, local partnership by-laws and other important documents. It is the responsibility of the local partnership board and staff to be familiar with and comply with the terms and conditions, policies and procedures contained in these documents.

Partnership standards and supporting documents shall be reviewed with board members and staff on at least an annual basis.

2. Program Accountability Standards:

Program standards apply to all local First Steps partnerships that operate the strategy in question, regardless of funding source. All strategies, whether operated by the partnership in-house or by one or more vendors or partners, must adhere to board-approved program standards. Program standards sub-sections include:

- Parents as Teachers (also see Att. 1)**
- Parent-Child Home Program**
- Early Steps to School Success (also see Att. 2)**
- Nurse-Family Partnership**
- Dolly Parton Imagination Library**
- Family Literacy**
- Early Identification and Referral**

Child Care Quality Enhancement
Child Care Training
Child Care Scholarships
Four-Year Old Kindergarten
Countdown to Kindergarten
Other Strategies (for all strategies not listed above)

Program standards shall be reviewed with board members and staff on at least an annual basis. Partnership staff should also review applicable standards with vendors on an ongoing basis as part of program monitoring.

Monitoring and Compliance:

On behalf of the First Steps Board of Trustees, the State Office of First Steps will monitor local partnerships on an ongoing basis throughout the year for compliance with partnership and program accountability standards (Section 19. Section 59-125-160(A)).

During the review of local partnership Renewal Plans, the State Office of First Steps will provide feedback in order for local partnerships to create **Continuous Quality Improvement (CQI) Plans** for the following program year (Section 11. Section 59-152-70(F)).

CQI Plans shall be developed with partnership board members, staff, vendors and other partners, with input from SCFS staff as needed.

Partnerships shall submit draft CQI Plans to their SCFS TA for review and endorsement, then present the plan to their local board for approval during a partnership board meeting. Approved CQI Plans are due to the partnership's SCFS TA by September 30. Continuous Quality Improvement Plans may also be updated or modified as needed, if additional issues of monitoring or compliance arise during the program year.

Continuous Quality Improvement Plans may include:

Areas of Commendation

Areas in which the local partnership excelled or significantly improved during the program year.

Areas for Improvement

Areas of Improvement will include findings of non-compliance with Partnership Accountability Standards or Program Accountability Standards that, while not severe enough to be a Conditional Approval, are issues that need to be addressed by the local partnership.

Should the partnership not become compliant with one or more Areas for Improvement findings by the end of the program year, the finding(s) may become a Conditional Approval for the program or partnership for the subsequent program year.

Conditional Approvals

Conditional Approvals are findings of non-compliance, issued by the SC First Steps Board of Trustees upon recommendation by the State Office of First Steps, that the local partnership **must address by the end of the program year**. Conditional Approvals will also be attached to the partnership's grant agreement for the coming year as a contractual obligation.

Partnership CQI Plans must include a Compliance Plan for each Conditional Approval.

Conditional Approvals may be issued due to:

- Areas of Improvement findings for which the partnership has not come into compliance with program or partnership accountability standards by the end of the program year, may result in a Conditional Approval for the subsequent program year.
- Non-compliance issues that are determined to have a significant negative impact on program implementation, partnership governance, or fiscal accountability. These issues include, but are not limited to:

Program Accountability Standards:

- Non-implementation of a program strategy that was included in the partnership's Renewal Plan
- Serving less than 75% of projected clients, as proposed in the partnership's Renewal Plan
- *Not meeting standards for client targeting
- *Not meeting standards for staff qualifications
- *Not meeting standards for intensity of services (i.e., home visits, technical assistance visits, program service delivery)
- *Not meeting standards for screenings and assessments
- *Not meeting standards for data collection and evaluation

**For "Other" strategies, the strategy information provided in the partnership's Renewal Plan pertaining to strategy objectives, client targeting, staff qualifications, service intensity, screenings and assessments, and data collection and evaluation will serve in place of program standards.*

Partnership Accountability Standards:

- Significant governance issues
- Not meeting the matching funds percentage required by First Steps legislation; not submitting appropriate documentation for matching funds to the Regional Finance Manager
- Not complying with deadlines for contractual or legislative requirements, or with fiscal deadlines relating to submitting reallocations, allocating carry-forward, submitting invoices, and providing requested information to partnership auditors (effective after July 1, 2014)

Partnerships failing to correct Conditional Approvals – or receiving Conditional Approvals for the same strategy area or partnership standard in consecutive years – may be subject to penalties up to and including the suspension of grant funds at the discretion of the First Steps Board of Trustees.

SECTION 1:

FIRST STEPS PARTNERSHIP ACCOUNTABILITY STANDARDS

FIRST STEPS PARTNERSHIP ACCOUNTABILITY STANDARDS GOVERNANCE AND OPERATIONS

REQUIREMENTS FOR FY16:

1. The local partnership board shall exercise leadership with its local and state Early Childhood partners through a functional and effective board. The Board as the governing body shall:

- a) Adhere to local partnership By-Laws and Operating Procedures and the First Steps Legislation.
- b) Implement program strategies in accordance with SC First Steps Program Accountability Standards, exercise due diligence when selecting program strategies and, when establishing new program strategies, commit to allowing sufficient time for successful implementation (min. 2 years recommended).
- c) Comply with the terms and conditions contained in the local partnership's annual grant agreement with South Carolina First Steps.
- d) Maintain, at a minimum, two committees for assessing and implementing responsibilities of the Local Partnership Board. Committee and board member rosters shall be published and all meetings are subject to FOIA requirements.
- e) Implement the current strategic plan approved by the SC First Steps Board of Trustees.
- f) Maintain all current approved policies/procedures/standards, board minutes, and records of all meetings (e.g. notices, sign-in-sheets, and documentation of conflict of interest as well as Freedom of Information Act).

2. The local partnership board members shall:

- a) For new members, receive a board orientation that addresses, at minimum, membership responsibilities; the mission/vision, structure, policies/procedures/standards for operation; and program strategies. Partnership boards shall participate in an annual review of key documents to include, but not limited to, the partnership's grant agreement with SCFS; partnership and program standards; partnership-by-laws; and First Steps legislation.
- b) Participate in ongoing board development.
- c) Maintain a current term on the board not to exceed 8 years (2 consecutive four-year terms) and regularly attend meetings in accordance with local partnership By-Laws.
- d) Hold annual elections for partnership board officers. Officer terms are for one year. Partnership board chair terms cannot exceed 4 years (4 consecutive, one-year terms).

3. Conduct and submit an Annual Report annually by October 1 (Section 11. Section 59-152-70(A)(8)).

4. The local partnership board and staff shall exercise appropriate stewardship by adhering to the practices and procedures outlined in the SC First Steps Operations Manual.

5. Data shall be collected and entered timely in the First Steps Data Collection System for all programs/strategies, according to the First Steps Program Accountability Standards for that strategy. Partnerships must complete program and vendor registration for all funded strategies, enter projected to serve numbers for each strategy, and begin data entry by September 1 of each program year. Partnership and vendor staff are expected to adhere to the deadlines for timely data submission: within 30 days of the date of service. Data may be used to evaluate overall program performance and sustainability.

6. An equitable work environment that is supportive of organizational productivity, diversity, and stability shall

be provided by the local partnership board and staff.

7. The local partnership board and staff shall not unlawfully discriminate against any person or category of persons for services or employment.

8. The local partnership board and staff shall prohibit preferential treatment and nepotism with regard to hiring, supervision, and promotion. The partnership board shall adopt, and review annually, the conflict of interest policy contained in the partnership's grant agreement with SCFS.

9. The local partnership board and staff shall comply with all contractual and legislative deadlines for submitting documents to the State Office of First Steps.

10. Local partnerships shall maintain a current local board roster with email contact information on file with SCFS (Section 11. Section 59-152-60(A)).

11. Local partnerships shall submit signed, electronic copies of board minutes for the prior fiscal year to SCFS, on behalf of the state board, by the deadline for submitting partnership Annual Reports (Section 11. Section 59-152-70(A)(8)).

FIRST STEPS PARTNERSHIP ACCOUNTABILITY STANDARDS FISCAL ACCOUNTABILITY

REQUIREMENTS FOR FY16:

1. The local partnership board and staff shall exercise appropriate fiscal stewardship by adhering to the policies and procedures outlined in the SC First Steps Operations Manual.
2. The local partnership board and staff shall monitor on an ongoing basis the financial condition of the partnership, to include but not limited to: revenue, expenditures and balances within all strategy areas, budget codes and funding sources.
3. The local partnership board and staff shall ensure that funds granted to the partnership by the SC First Steps Board of Trustees are spent in a timely manner in service to children pre-birth to school entry within the partnership's service area. Starting in FY16, the SC First Steps Finance Office will certify available carry-forward per partnership by October 15. Partnerships whose carry-forward funds from FY15 exceed 15% of their FY16 SCFS allocation must submit a written justification to their SCFS TA along with a plan to reduce their amount of carry-forward to 15% or lower by the following fiscal year (FY17). Partnerships whose carry-forward exceeds 15% for two or more fiscal years will be subject to conditional approval and potential withholding of grant funds at the discretion of the First Steps Board of Trustees.
4. The local partnership staff should process vendor invoices for payments upon receipt, obtain board member signature if applicable and immediately forward to the Regional Finance Manager for payment. Fees and/or penalties due to late payments are unacceptable.
5. Financial reports should be presented at all local partnership board meetings.
6. The local partnership board and staff should review internal financial controls annually.
7. The local partnership board and staff shall adhere to the fiscal calendar deadlines outlined in the SC First Steps Operations Manual.
8. The local partnership board and staff shall respond in a timely manner to all requests from Regional Finance Managers and partnership auditors.

FIRST STEPS PARTNERSHIP ACCOUNTABILITY STANDARDS COLLABORATION/COMMUNITY ENGAGEMENT

REQUIREMENTS FOR FY16:

- 1) The local partnership board shall participate in and document efforts to mobilize communities and other early childhood agencies/organizations to focus efforts on providing enhanced services to support families and their young children to reach school ready to learn.
- 2) The local partnership board shall develop an annual Community Education and Outreach Plan.
- 3) The local partnership board will annually submit its needs and resource assessment as a basis for community-wide planning efforts to support at-risk children. This document shall be made public in the service area of the local partnership and shall be on file with SCFS. Partnerships must update their Needs and Resources Assessment every three years (Section 11. Section 59-152-70(A)(5)).

FIRST STEPS PARTNERSHIP ACCOUNTABILITY STANDARDS RESOURCE DEVELOPMENT

REQUIREMENTS FOR FY16:

- 1) The local partnership board shall engage in resource development responsibilities that include:
 - Develop and submit an updated Resource Development Plan annually as part of the local partnership's Renewal Plan, which includes shared responsibility for resource development by board members and staff.
 - Assurance of adequate resources to support the local partnership board's strategies/programs.
- 2) The local partnership board shall conduct fundraising activities in an ethical and fiscally responsible manner. A written process shall be developed to address the handling and acknowledgement of contributions and respect for donor confidentiality requests.
- 3) The local partnership board shall:
 - Accurately describe the purpose for fundraising activities.
 - Expend funds for the purpose they were solicited.
 - Maintain accounting segregation for restricted funds.
 - Raise funds in accordance with applicable local, state, and federal requirements.
- 4) The local partnership board will seek opportunities to collaborate with other partnerships and/or agencies/organizations to raise funds to meet the needs of at-risk children.
- 5) The partnership board and staff shall document in-kind contributions to the partnership in the format specified in the SC First Steps Operations Manual, and provide timely submission of in-kind documentation to the Regional Finance Manager.

SECTION 2:

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS



FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS PARENTS AS TEACHERS (201)

REQUIREMENTS FOR FY16:

First Steps' parent home visitation strategies are designed to equip adult clients with the knowledge and skills necessary to promote the school readiness, healthy development and long-term success of their preschool-aged children. Partnerships funding these strategies shall ensure vendor compliance with each of the following:

Partnerships funding Parents as Teachers shall work in collaboration with SC First Steps (in its capacity as South Carolina's State Office for Parents as Teachers) to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting the 17 Essential Requirements of the Evidence Based Model along with a few SC-specific additions. The following standards include a mix of both; however, the expected Measurement Criteria for PAT National Center is attached for clarity.

1) TARGETING:

a) Targeting Clients At-Risk Of Early School Failure

At least 60% of home visitation clients shall be identified on the basis of two (2) or more of the readiness risk factors below (with 100% of client families possessing at least one risk factor at the time of enrollment):

- A preschool-aged child has been abused
- A preschool-aged child has been neglected
- A preschool-aged child has been placed in foster care
- Eligibility for the Supplemental Nutrition Assistance Program (SNAP, e.g. Food Stamps) or Free School Lunches (130% of federal poverty level or below – with first priority given to TANF-eligible clients whose annual family income levels fall at 50% of federal poverty level or below)
- Eligibility for services under the Individuals with Disabilities Education Act, Parts B (Preschool Special Education, ages 3-5) or C (BabyNet, ages 0-3)
- A preschool aged child with a developmental delay as documented by a physician or standardized assessment
- Teenage mother/primary caregiver (at the time of the focus child's birth)
- Low maternal/primary caregiver education (less than high school graduation at the time of focus child's birth)
- A preschool-aged child has been exposed to the substance abuse of a caregiver
- A preschool-aged child has been exposed to parental/caregiver depression
- A preschool-aged child has been exposed to parental/caregiver mental illness
- A preschool-aged child has been exposed to parental/caregiver intellectual disability
- A preschool-aged child has been exposed to domestic violence within the home
- Low birth weight (under 5.5 lbs.) in association with serious medical complications.

- English is not the primary language spoken in the home, when combined with one or more additional risk factors
- Single parent household and has need of other services
- Transient/numerous family relocations and/or homeless

b) Targeting By Age (Early Intervention)

At least 70% of newly enrolled client households shall contain an expectant mother and/or a child under thirty-six months of age. In the event that unique and/or emergency circumstances warrant, Partnerships may enroll additional clients aged three-years or older with the provision of written justification to SC First Steps.

c) Client Retention

In order for home visitation to be effective, it is critical that client families remain in the program long enough to benefit from the planned intervention. Each partnership will be required to demonstrate its successful, long-term retention of 75% of its home visitation clients across nine or more months of program participation. Pursuant to national model guidelines PAT affiliates must plan to provide at least two full years of service to eligible families.

2) SERVICE DELIVERY:

Fidelity to a published, research-based model

In order to ensure the delivery of high quality services and the validity of agency-wide evaluation efforts, vendors shall ensure that each First Steps-funded parenting/family strengthening strategy is implemented with fidelity to its published, research-based model. "Fidelity" is defined as complying with model specifications relating to:

a) Home Visit Intensity and Delivery:

- Programs shall match the intensity of their service delivery to the specific needs of each family and case load of families per Parent Educator, with no client being offered less than 2 visits monthly. Clients identified as possessing two (2) or more board-approved risk factors shall receive home visitation up to weekly as the needs and availability of the family dictate. (For purposes of grant renewal, conditional approvals may be issued to Partnerships averaging fewer than 2.0 visits per family, per month. For each family served, 1.8 average is considered the minimal threshold for visits per month, 2.0 is the targeted expectation, and 2.5 and above is considered outstanding intensity.)
- First Steps funded PAT programs shall maintain formal affiliate status via the Parents as Teachers National Center. SC First Steps will continue hosting regular Technical Assistant conference calls to assist vendors with tracking and meeting all model requirements.
- All Affiliate Programs should complete a minimum of 24 visits per year, per family, as is required from the National PAT Center.
- In households in which two or more preschool-aged children reside, vendors are permitted – but not required – to conduct separate visits designed to address the development of individual children. Alternately, curriculum information relating to the needs of each child may be combined into a single visit of greater duration.
- While PAT is ideally suited for delivery within the home (and home-based visitation expected as the primary method of service delivery), visits may be approved for delivery at an alternate location (a childcare center, family resource center, etc) as either the documented needs of the family or safety of the visitor dictate. The alternative location must be suitable to delivery of parenting services such that integrity of the session and confidentiality of clients is maintained. Regardless of location, all visits must be one-on-one (First Steps-funded PAT visits may not be delivered in group settings), entail the use of PAT-specific lesson plans and last at least 45 minutes.
- Data on each home visit shall be entered into the FSDC client database system within 14 days of completion. In the event that the Partnership has identified an individual responsible for all client data entry, vendors shall formally submit this information to the Partnership within this same 14 day window for subsequent entry.
- No parent educator may carry a caseload of more than twenty (20) active families. Smaller case loads may be necessary based upon the intensity of services provided (ex: weekly home visits) or as determined by individual family needs. **One Full time Parent Educator should serve no less than 15 families unless specifically**

discussed and approved by South Carolina First Steps TA Team.

b) Group Connections:

- At least one parent education group meeting will be offered each month (per vendor or area of service if large program) shall be offered, for a total of 12 per program year.

c) Screenings and Referrals:

- Parenting vendors shall document the completion of all model-related health and developmental screenings to include hearing, vision, use of milestone checklists, dental checks, etc.
- Vendors shall seek to ensure that each participating client family is connected with a pediatric medical home and other community services as appropriate.
- Each client child shall be assessed using the age-appropriate developmental screening tools Ages & Stages 3 and Ages and Stages SE. In the event that a developmental screening (conducted in association with any First Steps-funded program) indicates a possible developmental delay, the vendor shall collaborate with parents/guardians to seek the consensual provision of these results to: (a) the child's pediatric care provider, and (b) either BabyNet (ages 0-3) or the child's zoned school district and Disabilities and Special Needs Board (ages 3-5) for additional diagnostic evaluation. Vendors shall maintain (within the First Steps Data Collection System) referral records to include information on the outcome/disposition of each First Steps-initiated referral.
- Partnerships and their funded vendors shall ensure active collaboration with other parenting and family support services in their communities, refer families to these services as necessary, and follow up as feasible to ensure that appropriate connections have been established. Active and sustained efforts to connect client families to pediatric medical homes shall be a priority.

d) Family Assessment and Goal Setting:

- First Steps PAT vendors shall adhere to national model requirements pertaining to use of the Life Skills Progression (LSP), an approved family needs assessment tool. It is completed every six months on the focus parent/caregiver and is used for Parent Educator Information only. All LSP items shall be entered into the First Steps Data System.
- All parenting and family strengthening vendors shall develop well-documented Family Goal Plans between the home visitor and families (using the PAT Goal Setting form) within 3 months of the enrollment of each within the program, and subsequently update these plans at least semi-annually to gauge progress and goal attainment.

e) Integrated Service Delivery and Referrals:

- Partnerships shall utilize the Life Skills Progression and/or other formal and informal needs assessments to refer/ link families to additional interventions as necessary and beneficial – either simultaneously or as part of a planned, multi-year service continuum. All referrals to other services shall be entered into the First Steps Data System.
- Each PAT Affiliate shall convene an advisory committee at least twice yearly. These meetings shall incorporate community stakeholders in an effort to identify service gaps, and increase collaborative service referrals. This committee also advises, provides support for and offers input to the affiliate program for planning and evaluation purposes.

f) Staff Qualifications and Training:

- All Parent educators and Supervisors in SC must possess at least a two-year degree in early childhood education or a closely related field and document successful completion of/initial certification in PAT's *Foundational and Model Implementation Training*. Educators whose caseloads include children aged 3-5 must also maintain the *Foundational 2 (3-5)* certification.
- Each PAT program shall be overseen by one or more individuals certified as PAT Supervisors. Supervisors are expected to be certified in the Foundational Curriculum as well as Model Implementation.
- Each parent educator in a First Steps-funded program shall successfully complete (as part of his/her annual recertification and regardless of his/her individual funding

source) at least three hours of professional development preferably around early literacy and document the successful completion of all national model requirements related to ongoing professional development hours. Annual training and/or recertification (for both the program and individual staff members) must be documented on-site by each vendor.

- Each parent educator shall maintain annual re-certification in the Keys to Interactive Parenting Scale (KIPS).

g) Ongoing Program Quality Improvement and Professional Development

- Each PAT vendor shall participate in the PAT affiliate National Quality Endorsement process every 4th year and make ongoing use of the *PAT Parent Evaluation* (annually), *Parent Educator Performance Evaluation* (annually), *Parent Educator and Supervisor Self-Evaluations* (annually), *Program Evaluation by Parent Educators* (annually) and *Peer Mentor Observation* (optional). Each program must submit an Affiliate Performance Report to PAT and South Carolina First Steps by July of each year. All Performance Measurement Reports generated by PAT National and State Offices are to be used to develop Continuous Quality Improvement Plans.
 - Each participating First Steps Partnership PAT program shall convene a monthly staff meeting of all pertinent program/vendor staff (to include those staff members providing both supervision and direct service to families) to review recruitment, standards compliance, programmatic data and other issues related to strategy success. A minimum of 2 hours of staff meetings per month for full-time Parent Educators and a minimum of 1 hour of staff meetings for part-time Parent Educators. Full-time Parent educators shall participate with their supervisor in individualized reflective supervision meetings at a minimum of 2 hours per month. No less than 18 hours of individualized reflective supervision during the program year is expected. Part-time Parent Educators shall participate at a minimum of one hour of reflective supervision per month.

3) ASSESSMENT AND DATA SUBMISSION:

- All First Steps-funded vendors shall complete, at minimum, baseline and post assessments of the *primary adult client* identified within each enrolled case using the Keys to Interactive Parenting Scale (KIPS). The initial KIPS should be completed within 45 days of enrollment if the child is older than 2 months; if less than 2 months old at enrollment, the initial KIPS should be done immediately after (not before) the child's 2-month birthday.
 - Thereafter, KIPS should be done at the following intervals during the first program year of enrollment: A 2nd KIPS should be done before the current year's data deadline if the case was enrolled by December 31 AND the child was age-eligible for KIPS by December 31. If not, then a 2nd KIPS is not required for data compliance, but highly recommended if there is any reason to believe the family may leave the program before the next program year starts.
 - For the 2nd and subsequent years of enrollment, KIPS needs to be scheduled for the beginning and end of the program year (prior to the data deadline), IF the case only received one KIPS during the first year of enrollment. If the case received 2 or more KIPS during the first year of enrollment, only one KIPS is required per year thereafter.
 - Regardless of how long a family has been served, or how long it has been since the family last received a KIPS, it is important to assess the family one final time within 30 days of exiting the program, if possible.
- In addition to the KIPS, each family containing children aged 30 months or older shall have their interactive literacy behaviors assessed by a trained evaluator using the Adult-Child Interactive Reading Inventory (ACIRI). Each family educator making use of the ACIRI shall document his/her attendance at a First Steps sponsored training on the instrument. An initial ACIRI shall be performed within 45 days of enrollment if the child is 30 months or older; if less than 30 months old at enrollment, the initial ACIRI should be done immediately after (not before) the child's 30-month birthday.
 - Thereafter, ACIRI should be done at the following intervals during the first program year of enrollment: A 2nd ACIRI should be done before the current year's data deadline if the case was enrolled by December 31 AND the child was age-eligible for ACIRI by December 31. If not, then a 2nd ACIRI is not required for data compliance, but highly recommended if there is any reason to believe the family may leave the program before

the next program year starts.

- For the 2nd and subsequent years of enrollment, an ACIRI needs to be scheduled for the beginning and end of the program year (prior to the data deadline) IF the case only received one ACIRI during the first year of enrollment. If the case received 2 or more ACIRIs during the first year of enrollment, only one ACIRI is required per year thereafter.
- Regardless of how long a family has been served, or how long it has been since the family last received a ACIRI, it is important to assess the family one final time within 30 days of exiting the program, if possible.
- SC First Steps may conduct randomized KIPS/ACIRI reliability monitoring. Sample client videos may be requested for confidential scoring review and shall be maintained on site for potential review for a period spanning four months from the date of original administration.
- Note that both the KIPS and ACIRI are utilized as assessments of adult behaviors and thus need not be completed with each adult-child pairing in the household. Post assessments should, however, assess the interactions of the same adult-child pairing observed during the baseline assessment.
- Client demographic, program referrals, connections to services, screening and family needs assessment data shall be collected within the First Steps Data Collection System (FSDC).

SEE ATTACHMENT 1 FOR A TABLE OF PAT ESSENTIAL REQUIREMENTS AND ASSOCIATED MEASUREMENT CRITERIA.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS PARENT-CHILD HOME PROGRAM (206)

REQUIREMENTS FOR FY16 :

First Steps' parent home visitation strategies are designed to equip adult clients with the knowledge and skills necessary to promote the school readiness, healthy development and long-term success of their preschool-aged children. Partnerships funding these strategies shall ensure vendor compliance with each of the following:

Partnerships funding the Parent-Child Home Program shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting PCHP requirements along with additional SC-specific additions. The following standards include a mix of both; however, the inserted PCHP fidelity requirements are included for clarity.

1) TARGETING:

a) Targeting Clients At-Risk Of Early School Failure

At least 60% of home visitation clients shall be identified on the basis of two (2) or more of the readiness risk factors below (with 100% of client families possessing at least one risk factor at the time of enrollment):

- A preschool-aged child has been abused
- A preschool-aged child has been neglected
- A preschool-aged child has been placed in foster care
- Eligibility for the Supplemental Nutrition Assistance Program (SNAP, e.g. Food Stamps) or Free School Lunches (130% of federal poverty level or below – with first priority given to TANF-eligible clients whose annual family income levels fall at 50% of federal poverty level or below)
- Eligibility for services under the Individuals with Disabilities Education Act, Parts B (Preschool Special Education, ages 3-5) or C (BabyNet, ages 0-3)
- A preschool aged child with a developmental delay as documented by a physician or standardized assessment
- Teenage mother/primary caregiver (at the time of the focus child's birth)
- Low maternal/primary caregiver education (less than high school graduation at the time of focus child's birth)
- A preschool-aged child has been exposed to the substance abuse of a caregiver
- A preschool-aged child has been exposed to parental/caregiver depression
- A preschool-aged child has been exposed to parental/caregiver mental illness
- A preschool-aged child has been exposed to parental/caregiver intellectual disability
- A preschool-aged child has been exposed to domestic violence within the home
- Low birth weight (under 5.5 lbs.) in association with serious medical complications
- English is not primary language spoken in the home, when combined with one or more additional risk factors
- Single parent household and has need of other services
- Transient/numerous family relocations and/or homeless

b) Targeting By Age (Early Intervention)

PCH is designed for children aged 16-48 months of age. At least 70% of newly enrolled PCH client households shall contain a child between 16-36 months of age. The model is designed for use only once within a family unit. Exceptions to this "one time" rule may be sought by providing a detailed justification to SC First Steps

c) Client Retention

In order for home visitation to be effective, it is critical that client families remain in the program long enough to benefit from the planned intervention. Each partnership will be required to demonstrate its successful, long-term retention of 75% of its home visitation clients across two years of program participation.

2) SERVICE DELIVERY:

Fidelity to a published, research-based model

In order to ensure the delivery of high quality services and the validity of agency-wide evaluation efforts, vendors shall ensure that each First Steps-funded parenting/family strengthening strategy is implemented with fidelity to its published, research-based model. "Fidelity" is defined as complying with model specifications relating to:

a) Home Visit Intensity and Delivery:

- Parent Child Home (PCH) programs shall be designed to incorporate visits twice weekly for a minimum of 23 weeks or 46 home visits annually across a period of two years (46 weeks/92 visits total).
- While home visitation models are ideally suited for delivery within the home (and home-based visitation expected as the primary method of service delivery), PCH visits may be approved for delivery at an alternate location (a childcare center, family resource center, etc.) as either the documented needs of the family or safety of the visitor dictate. The alternative location must be suitable to delivery of parenting services such that integrity of the session and confidentiality of clients is maintained. Regardless of location, all visits must be one-on-one (PCH may not be delivered in group settings), entail the use of PCH-specific lesson plans and last at least 30 minutes apiece
- Data on each home visit shall be entered into the FSDC client database system within 14 days of completion. In the event that the Partnership has identified an individual responsible for all client data entry, vendors shall formally submit this information to the Partnership within this same 14 day window for subsequent entry.
- No PCH home visitor may carry a caseload of more than sixteen (16) active families. Smaller caseloads may be necessary based upon the intensity of services provided (or as determined by individual family needs).

b) Screenings and Referrals:

- Parenting vendors shall document the completion of all developmental screenings.
- Vendors shall seek to ensure that each participating client family is connected with a pediatric medical home and other community services as appropriate.
- Each client child shall be assessed using an age-appropriate developmental screening tool (e.g. Ages & Stages, Brigance, DIAL-3, etc.). In the event that a developmental screening (conducted in association with any First Steps-funded program) indicates a possible developmental delay, the vendor shall collaborate with parents/guardians to seek the consensual provision of these results to: (a) the child's pediatric care provider, *and* (b) either BabyNet (ages 0-3) or the child's zoned school district and Disabilities and Special Needs Board (ages 3-5) for additional diagnostic evaluation. Vendors shall maintain (within the First Steps Data Collection System) referral records to include information on the outcome/disposition of each First Steps-initiated referral.
- Partnerships and their funded vendors shall ensure active collaboration with other parenting and family support services in their communities, refer families to these services as necessary, and follow up as feasible to ensure that appropriate connections have been established. Active and sustained efforts to connect client families to pediatric medical homes shall be a priority.

c) Staff Qualifications and Training:

- All PCHP Home Visitors must possess at least a two-year degree in early childhood education or a closely related field and document successful completion of 16 hours of training prior to their first home visit.. Each PCHP educator shall meet the minimum education requirements above and be trained and supervised by a site coordinator approved by the PCHP National Center.
- PCHP vendors must each employ at least one Site Coordinator trained by the PCHP National Center or a certified local trainer (with sites serving 60 or more families employing a second Site Coordinator).
- Each home visitor shall successfully complete at least two hours of weekly professional development/training and supervision meetings from the site Coordinator. Each home visitor shall maintain annual re-certification in the Keys to Interactive Parenting Scale (KIPS).

d) Ongoing Program Quality Assessment:

- PCHP vendors shall utilize *Parent and Child Together (PACT) Observations* to guide family goal setting and evaluate changes in parent behavior, as required, report all required data within the national PCHP Management Information System and administer the *Evaluation of Child Behavior Traits (CBT)* as required.
- Each participating PCHP program shall convene a supervisory meeting of all pertinent program/vendor staff (to include those staff members providing both supervision and direct service to families) no less than quarterly to review recruitment, standards compliance, programmatic data and other issues related to strategy success.

e) Family Assessment and Goal Setting:

- Partnerships or PCHP Vendors shall utilize the PCHP family-centered assessment and/or other formal and informal needs assessments to refer/ link families to additional interventions as necessary and beneficial – either simultaneously or as part of a planned, multi-year service continuum.
- All parenting and family strengthening vendors shall develop well-documented Family Goal Plans between the home visitor and families (using the SCFS-issued template if needed) within 3 months of the enrollment of each within the program, and subsequently update these plans at least semi-annually to gauge progress and goal attainment.

f) Integrated Service Delivery:

- Partnerships shall utilize the Life Skills Progression and/or other formal and informal needs assessments to refer/ link families to additional interventions as necessary and beneficial – either simultaneously or as part of a planned, multi-year service continuum.

3. ASSESSMENT AND DATA SUBMISSION:

- All First Steps-funded vendors shall complete, at minimum, baseline and post assessments of the *primary adult client* identified within each enrolled case using the Keys to Interactive Parenting Scale (KIPS). The initial KIPS should be completed within 45 days of enrollment if the child is older than 2 months; if less than 2 months old at enrollment, the initial KIPS should be done immediately after (not before) the child's 2-month birthday.
 - Thereafter, KIPS should be done at the following intervals during the first program year of enrollment: A 2nd KIPS should be done before the current year's data deadline if the case was enrolled by December 31 AND the child was age-eligible for KIPS by December 31. If not, then a 2nd KIPS is not required for data compliance, but highly recommended if there is any reason to believe the family may leave the program before the next program year starts.
 - For the 2nd and subsequent years of enrollment, KIPS needs to be scheduled for the beginning and end of the program year (prior to the data deadline), IF the case only received one KIPS during the first year of enrollment. If the case received 2 or more KIPS during the first year of enrollment, only one KIPS is required per year thereafter.
 - Regardless of how long a family has been served, or how long it has been since the family last received a KIPS, it is important to assess the family one final time within 30 days of exiting the program, if possible.
- In addition to the KIPS, each family containing children aged 30 months or older shall have their interactive literacy behaviors assessed by a trained evaluator using the Adult-Child Interactive Reading Inventory (ACIRI). Each family educator making use of the ACIRI shall document his/her attendance at a First Steps sponsored training on the instrument. An initial ACIRI shall be performed within 45 days of enrollment if the child is 30 months or older; if less than 30 months old at enrollment, the initial ACIRI should be done immediately after (not before) the child's 30-month birthday.
 - Thereafter, ACIRI should be done at the following intervals during the first program year of enrollment: A 2nd ACIRI should be done before the current year's data deadline if the case was enrolled by December 31 AND the child was age-eligible for ACIRI by December 31. If not, then a 2nd ACIRI is not required for data compliance, but highly

recommended if there is any reason to believe the family may leave the program before the next program year starts.

- For the 2nd and subsequent years of enrollment, an ACIRI needs to be scheduled for the beginning and end of the program year (prior to the data deadline) IF the case only received one ACIRI during the first year of enrollment. If the case received 2 or more ACIRI during the first year of enrollment, only one ACIRI is required per year thereafter.
- Regardless of how long a family has been served, or how long it has been since the family last received a ACIRI, it is important to assess the family one final time within 30 days of exiting the program, if possible.
- SC First Steps may conduct randomized KIPS/ACIRI reliability monitoring. Sample client videos may be requested for confidential scoring review and shall be maintained on site for potential review for a period spanning four months from the date of original administration.
- Note that both the KIPS and ACIRI are utilized as assessments of adult behaviors and thus need not be completed with each adult-child pairing in the household. Post assessments should, however, assess the interactions of the same adult-child pairing observed during the baseline assessment.
- Client demographic, program, referrals, connections to services, screening and assessment data shall be collected within the First Steps Data Collection System (FSDC).

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS EARLY STEPS TO SCHOOL SUCCESS (213)

REQUIREMENTS FOR FY16 :

First Steps' parent home visitation strategies are designed to equip adult clients with the knowledge and skills necessary to promote the school readiness, healthy development and long-term success of their preschool-aged children. Partnerships funding these strategies shall ensure vendor compliance with each of the following:

Partnerships funding Early Steps to School Success shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting ESSS requirements along with a few SC-specific additions. The following standards include a mix of both; however, the inserted ESSS fidelity requirements are included for clarity.

1) TARGETING:

a) Targeting Clients At-Risk Of Early School Failure

At least 60% of home visitation clients shall be identified on the basis of two (2) or more of the readiness risk factors below (with 100% of client families possessing at least one risk factor at the time of enrollment):

- A preschool-aged child has been abused
- A preschool-aged child has been neglected
- A preschool-aged child has been placed in foster care
- Eligibility for the Supplemental Nutrition Assistance Program (SNAP, e.g. Food Stamps) or Free School Lunches (130% of federal poverty level or below – with first priority given to TANF-eligible clients whose annual family income levels fall at 50% of federal poverty level or below)
- Eligibility for services under the Individuals with Disabilities Education Act, Parts B (Preschool Special Education, ages 3-5) or C (BabyNet, ages 0-3)
- A preschool aged child with a developmental delay as documented by a physician or standardized assessment
- Teenage mother/primary caregiver (at the time of the focus child's birth)
- Low maternal/primary caregiver education (less than high school graduation at the time of focus child's birth)
- A preschool-aged child has been exposed to the substance abuse of a caregiver
- A preschool-aged child has been exposed to parental/caregiver depression
- A preschool-aged child has been exposed to parental/caregiver mental illness
- A preschool-aged child has been exposed to parental/caregiver intellectual disability
- A preschool-aged child has been exposed to domestic violence within the home
- Low birth weight (under 5.5 lbs.) in association with serious medical complications
- English is not primary language spoken in the home, when combined with one or more additional risk factors
- Single parent household and has need of other services
- Transient/numerous family relocations and/or homeless

b) Targeting By Age (Early Intervention)

ESSS home visitation is designed for expectant mothers and/or children under 36 months of age. Supplemental group meetings and transition activities may be incorporated for children older than 36 months.

c) Client Retention

In order for home visitation to be effective, it is critical that client families remain in the program long enough to benefit from the planned intervention. Each partnership will be required to demonstrate its successful, long-term retention of 75% of its home visitation clients across nine or more months of program participation. ESSS vendors shall provide services to families for 12 months in a program year.

2) SERVICE DELIVERY:

Fidelity to a published, research-based model

In order to ensure the delivery of high quality services and the validity of agency-wide evaluation efforts, vendors shall ensure that each First Steps-funded parenting/family strengthening strategy is implemented with fidelity to its published, research-based model. "Fidelity" is defined as complying with model specifications relating to:

a) Home Visit Intensity and Delivery:

- Programs shall match the intensity of their service delivery to the specific needs of each family, with no client offered less than 2 visits monthly. Clients identified as possessing two (2) or more board-approved risk factors shall receive home visitation 2 times per month. (For purposes of grant renewal, conditional approvals may be issued to Partnerships averaging fewer than 2.0 visits per family, per month.) For each family served, 1.8 average is considered the minimal threshold for visits per month, 2.0 is the targeted expectation, and 2.5 and above is considered outstanding service delivery.
- While the ESSS model is ideally suited for delivery within the home (and home-based visitation expected as the primary method of service delivery), visits may be approved for delivery at an alternate location (a childcare center, family resource center, etc.) as either the documented needs of the family or safety of the visitor dictate. The alternative location must be suitable to delivery of parenting services such that integrity of the session and confidentiality of clients is maintained. Regardless of location, all visits must be one-on-one (ESSS visits may not be delivered in group settings), entail the use of model-specific lesson plans, and last at least one hour per visit for 24 hours of home visits per program year.
- Data on each home visit shall be entered into the ESSS data system and the First Steps data system each week by the following Monday, close of business. Every home visitor is required to have 20 children enrolled per model standards. (Up to 30 additional children per home visitor may participate in the model's group meetings and transition activities (book bag exchange) for children older than 36 months.)

b) Group Meetings:

- At least one parent education group meeting shall be offered each month (12 per year, per vendor or area of service if large program) for parents receiving home visits and those participating in the three-year-old book bag exchange.

c) Screenings and Referrals:

- Vendors shall document the completion of the ESSS HOME assessment within 90 days of enrollment and at least annually thereafter
- Vendors shall seek to ensure that each participating client family is connected with a pediatric medical home and other community services as appropriate.
- Each client child shall be assessed using an age-appropriate developmental screening tool (e.g. Ages & Stages, Ages and Stages- SE, Brigance, DIAL-3, etc.). In the event that a developmental screening (conducted in association with any First Steps-funded program) indicates a possible developmental delay, the vendor shall collaborate with parents/guardians to seek the consensual provision of these results to: (a) the child's pediatric care provider, *and* (b) either BabyNet (ages 0-3) or the child's zoned school district and Disabilities and Special Needs Board (ages 3-5) for additional diagnostic evaluation. Vendors shall maintain (within each client file) referral records to include information on the outcome/disposition of each First Steps-initiated referral.
- Partnerships and their funded vendors shall ensure active collaboration with other parenting and family support services in their communities, refer families to these services as necessary, and follow up as feasible to ensure that appropriate connections have been established. Active and sustained efforts to connect client families to pediatric medical homes shall be a priority.

d) Staff Qualifications and Training:

- Each home visitor in a First Steps-funded ESSS program shall successfully complete at least four hours minimum of professional development each month. This shall be documented and approved by Save the Children. Annual training (for both the program and individual staff members) must be documented on-site by each vendor.
- Each Home Visitor shall maintain annual re-certification in the Keys to Interactive Parenting Scale (KIPS).

e) Ongoing Program Quality Assessment:

- ESSS vendors shall utilize the PPVT and HOME Inventory as prescribed by the Early Steps National Model and any other quality assessments as required for evaluation.
- Each ESSS program shall convene a supervisory meeting of all pertinent program/vendor staff (to include those staff members providing both supervision and direct service to families) no less than quarterly to review recruitment, standards compliance, programmatic data and other issues related to strategy success.

f) Family Goal Plans:

- All home visitors shall develop well-documented Family Goal Plans between the home visitor and families within 3 months of the enrollment and subsequently update these plans at least semi-annually to gauge progress and goal attainment.

g) Integrated Service Delivery:

- Partnerships shall utilize the ESSS HOME assessment and Risk and Resource assessment to refer/ link families to additional interventions as necessary and beneficial – either simultaneously or as part of a planned, multi-year service continuum.

3. ASSESSMENT AND DATA SUBMISSION:

- All First Steps-funded vendors shall complete, at minimum, baseline and post assessments of the *primary adult client* identified within each enrolled case using the Keys to Interactive Parenting Scale (KIPS). The initial KIPS should be completed within 45 days of enrollment if the child is older than 2 months; if less than 2 months old at enrollment, the initial KIPS should be done immediately after (not before) the child's 2-month birthday.
 - Thereafter, KIPS should be done at the following intervals during the first program year of enrollment: A 2nd KIPS should be done before the current year's data deadline if the case was enrolled by December 31 AND the child was age-eligible for KIPS by December 31. If not, then a 2nd KIPS is not required for data compliance, but highly recommended if there is any reason to believe the family may leave the program before the next program year starts.
 - For the 2nd and subsequent years of enrollment, KIPS needs to be scheduled for the beginning and end of the program year (prior to the data deadline), IF the case only received one KIPS during the first year of enrollment. If the case received 2 or more KIPS during the first year of enrollment, only one KIPS is required per year thereafter.
 - Regardless of how long a family has been served, or how long it has been since the family last received a KIPS, it is important to assess the family one final time within 30 days of exiting the program, if possible.
- In addition to the KIPS, each family must be assessed with the HOME Inventory per ESSS model requirements.
- SC First Steps may conduct randomized KIPS reliability monitoring. Sample client videos may be requested for confidential scoring review and shall be maintained on site for potential review for a period spanning four months from the date of original administration.
- Note that the KIPS is utilized as an assessment of adult behaviors and thus need not be completed with each adult-child pairing in the household. Post assessments should, however, assess the interactions of the same adult-child pairing observed during the baseline assessment.
- Client demographic information, home visit dates and durations, developmental screening results and KIPS assessment data shall be collected within the First Steps Data Collection System (FSDC).

SEE ATTACHMENT 2 FOR A COPY OF ESSS STANDARDS.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS NURSE-FAMILY PARTNERSHIP (214)

REQUIREMENTS FOR FY16:

Partnerships funding Nurse Family Partnership (NFP) strategies shall work in collaboration with SC First Steps (in its capacity as South Carolina's NFP sponsor agency) to ensure full compliance with national model guidelines. Fidelity of implementation includes, but is not limited to:

- 1) **TARGETING:** First time, low-income mothers (Medicaid eligible or a family income not to exceed 185% of the federal poverty definition).
- 2) **DATA COLLECTION:** Full client and visit data will be submitted via the NFP Efforts to Outcomes (ETO) system, per model guidelines.
- 3) **TRAINING/PROFESSIONAL DEVELOPMENT:** Nurses and supervisory staff will complete all required training, prior to the provision of service and participate in professional development as required by the NFP National Service Office.
- 4) **CURRICULAR FIDELITY:** Nurse Family Partnership services will be delivered with fidelity to each of the model's 18 model elements as defined by the Nurse Family Partnership National Service Office.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS DOLLY PARTON IMAGINATION LIBRARY (212)

REQUIREMENTS FOR FY16:

1) 92% Books Rule

Partnerships administering an Imagination Library strategy must devote 92% or more of strategy funds to the procurement of books. Programs seeking a waiver of this 8% cap on non-book related spending must petition the State Board of Trustees, providing a detailed accounting of all strategy-related spending.

2) Use DPIL as a Supplement to More Comprehensive Interventions

Because the Imagination Library incorporates a low-intensity, passive service delivery model it should be used to supplement more comprehensive forms of service as possible. For the purposes of meeting the integration requirements established in other standards categories, however, the DPIL will not be considered an intervention to which parenting or scholarships may be linked for credit.

3) Solicitation of Community Support (50% Match Requirement)

A dollar-for-dollar, cash match is required for any state funds committed to the DPIL strategy. (e.g. No more than 50% of the Partnership's total DPIL budget may be derived from state funding.)

4) Data Collection

DPIL strategies are not required to enter case data into the First Steps Data Collection System (FSDC). Partnerships are expected to keep an electronic record of DPIL families with, at minimum, their contact information and beginning and ending dates of program participation.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS FAMILY LITERACY MODEL (211)

REQUIREMENTS FOR FY16:

Partnerships supporting comprehensive Family Literacy models within public school district settings or other public or private settings shall ensure that each vendor delivers a four component Family Literacy Model, including: 1) Parent Education, 2) Adult Education, 3) Early Childhood Education and 4) Parent/Child Interaction. Qualified families shall participate in all four components.

1) TARGETING:

a) Targeting Clients At-Risk Of Early School Failure (Adult shall have one or more preschool-aged child or is pregnant and expecting a child during the current school year.

At least 80% of FL clients shall be identified on the basis of two (2) or more of the readiness risk factors below (with 100% of client families possessing at least one risk factor at the time of enrollment):

- A preschool-aged child has been abused
- A preschool-aged child has been neglected
- A preschool-aged child has been placed in foster care
- Eligibility for the Supplemental Nutrition Assistance Program (SNAP, e.g. Food Stamps) or Free School Lunches (130% of federal poverty level or below – with first priority given to TANF-eligible clients whose annual family income levels fall at 50% of federal poverty level or below)
- Eligibility for services under the Individuals with Disabilities Education Act, Parts B (Preschool Special Education, ages 3-5) or C (BabyNet, ages 0-3)
- A preschool aged child with a developmental delay as documented by a physician or standardized assessment
- Teenage mother/primary caregiver (at the time of the focus child's birth)
- Low maternal/primary caregiver education (less than high school graduation at the time of focus child's birth)
- A preschool-aged child has been exposed to the substance abuse of a caregiver
- A preschool-aged child has been exposed to parental/caregiver depression
- A preschool-aged child has been exposed to parental/caregiver mental illness
- A preschool-aged child has been exposed to parental/caregiver intellectual disability
- A preschool-aged child has been exposed to domestic violence within the home
- Low birth weight (under 5.5 lbs.) in association with serious medical complications
- English is not primary language in the home
- Single parent household and has need of other services
- Transient/numerous family relocations and/or homeless

b) Client Retention

In order for a family literacy model to be effective, it is critical that client families remain in the program long enough to benefit from the planned intervention. Each partnership will be required to demonstrate its successful, long-term retention of 75% of its family literacy clients with both parent and child each receiving 120 hours of program participation. If one component is completed, such as the adult GED, in a shorter time span then the family shall continue to participate in the other three components for as long as needed (based on a family needs assessment.)

2) SERVICE DELIVERY:

Fidelity to a published, research-based model for Family Literacy

In order to ensure the delivery of high quality services and the validity of agency-wide evaluation efforts, vendors shall ensure that each First Steps-funded family literacy strategy is implemented with fidelity to a published, research-based model. "Fidelity" is defined as complying with model specifications relating to:

a) Parent Education:

- Programs shall match the intensity of their service delivery to the specific needs of each family with a minimum of 2 contacts per month. This component shall be delivered using an

approved, evidence-based parent education model. Approved models are EHS, PAT, PCHP, ESSS, Triple P, Incredible Years or another evidence based curriculum model. Clients identified as possessing two (2) or more board-approved risk factors shall receive services as the needs and availability of the family dictates with a minimum of 2 contacts per month.

- At least one parent education large group meeting/training shall be offered each month (per vendor or area of service if large program).

b) Adult Education:

- The adult/parent client(s) shall participate in an Adult Education Program recognized by the South Carolina Department of Education.
- Participation is desirable until the GED, High School Diploma or other educational goal is obtained.
- The adult/parent client shall work independently with guidance and support from an Adult Ed Teacher or staff that meets requirements of SCDE, within the classroom setting at an individualized pace.

c) Early Childhood Education:

- The preschool child client shall be enrolled in a quality early childhood education program (preferably on location where the adult education class is conducted). A quality early childhood education program is defined as a program that is DSS licensed and exceeds minimum licensing requirements (participating in the ABC quality Program at a level B or higher) or has a DSS waiver of approval. If a DSS waiver is granted then a quality environment rating assessment needs to be done as well by a trained ERS evaluator.

d) Parent/Child Interaction:

- The adult/child client pair shall participate in a planned monthly interactive literacy play session. This shall occur in the child's classroom, home, or family resource center at a regular time designated by early education staff for parents to come and interact with their child.
- Interactive sessions may include "child's choice of play" within the classroom learning centers. This open choice play shall last for approximately 30-45 minutes. The final 15 minutes shall include a planned literacy activity led by early education staff, librarian, community visitor, or parents and shall include such literacy activities as singing songs, finger-plays, stories, literacy games, etc. that is appropriate for the age of the child.

e) Developmental Screenings and Referrals:

- First Steps Partnership funding a Family Literacy Strategy shall ensure the completion of an age-appropriate developmental screening for each preschool child within the client family with results being shared with parents. This screening may be conducted by the partnership, the early education provider, the parent educator or other community partner as local needs and resources dictate. Examples of most commonly used tools for screening are Ages & Stages-3, Brigance, DIAL-3, etc.
- In the event that a developmental screening indicates a possible developmental delay, the vendor shall collaborate with parents/guardians to seek the consensual provision of these results to: (a) the child's pediatric care provider, *and* (b) either BabyNet (ages 0-3) or the child's zoned school district and Disabilities and Special Needs Board (ages 3-5) for additional diagnostic evaluation. Vendors shall maintain (within each client file) referral records to include information on the outcome/disposition of each First Steps-initiated referral.
- Partnerships and their funded vendors shall ensure active collaboration with other parenting and family support services in their communities, refer families to these services as necessary, and follow up as feasible to ensure that appropriate connections have been established. Active and sustained efforts to connect client families to pediatric medical homes shall be a priority.

f) Family Assessment and Goal Setting:

- Family Literacy Vendors shall use a family needs assessment to determine the priority needs of the clients being served. The Life Skills progression is a preferred option; however a tool currently being used by a Family Literacy Program may be used.
- Vendors shall develop family service plans within 3 months of enrollment and subsequently update these plans every 6 to 12 months to gauge progress and goal attainment.

3) ASSESSMENT AND DATA SUBMISSION:

- a) All First Steps-funded vendors shall complete, at minimum, baseline and post assessments of the *primary adult client* identified within each enrolled case using the TABE (Test of Adult Basic Education) and/or the BEST Plus (Basic English Skills Test). The testing schedule should align with adult education assessment policy as set by SCDE.
- b) In addition to the TABE and/or the BEST plus each family shall be assessed using a nationally recognized parenting assessment within 45 days of enrollment. This should be conducted again after 6 to 9 months. Or, the program may opt to use the KIPS (Keys to Interactive Parenting Scale) to measure parenting behaviors.
- c) Each focus child shall have their emerging literacy skills assessed (pre- and post-, with the PPVT (Peabody Picture Vocabulary Test). The assessment shall be conducted by a trained assessor. This is initially done when the child reaches 36 months old and then yearly thereafter. Or, the program may opt to use the ACIRI (beginning at 30 months) to assess the parent/child interactive literacy skills.
- d) Client demographic and all assessment and screening data shall be collected within the First Steps Data Collection System (FSDC) when updated to capture this or kept at the county level where documented and reported at time of renewal.
- e) Adult Outcomes for graduation with a GED, HS diploma or other educational achievement shall be documented within the FSDC as well.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS EARLY IDENTIFICATION AND REFERRAL (909)

REQUIREMENTS FOR FY16:

First Steps' early identification and referral (EI&R) strategies serve families with young children with suspected delays in development as a local portal connecting them to community-based services they may need or desire to ensure the school readiness of their children.

1) SERVICE POPULATION:

- a. Service Population for Early Identification and Referral: Any child ages birth to five years with suspected delays in development, including:
 - children residing on a reservation
 - children who are homeless
 - children who are born prematurely
 - children with prenatal exposure to drugs or alcohol
 - children with substantiated child maltreatment
 - children who are in foster care or who are wards of the state
- b. Services shall be provided to any family regardless of their county of residence.

2) SERVICE DELIVERY:

- a. Public Awareness for BabyNet Services (for children ages birth to 36 months only):
 - i. With guidance from the state BabyNet office,
 1. Coordinate dissemination of BabyNet brochures and posters directly to families
 2. Coordinate dissemination of BabyNet brochures and posters for families through local primary referral sources
 - ii. Primary Referral Sources
 1. Parents of infants and toddlers
 2. Boards of Disabilities and Special Needs
 3. Child care and early learning programs
 4. Department of Social Services, Child Protective Services and Foster Care
 5. Domestic violence shelters and agencies
 6. Early Head Start
 7. Family Practice physicians
 8. Health Departments
 9. Homeless shelters
 10. Hospitals
 11. Local Indian tribes, tribal organizations, and consortia
 12. Local school districts
 13. Maternal, Infant, and Early Childhood Home Visiting Program
 14. Neonatal Intensive Care Units
 15. Nurse-Family Partnerships
 16. Pediatricians
 - iii. Public awareness and child find materials must be those developed by the BabyNet Division of South Carolina First Steps to School Readiness.
 - iv. Data: Monthly records regarding the number and nature of public awareness contacts and BabyNet materials disseminated using the First Steps Data Collection System.
- b. Screenings:
 - i. Any child ages birth to 5 years with suspected delays in development shall be screened using an age-appropriate developmental screening tool (e.g. Ages & Stages III, Ages and Stages SE, Parent Evaluation of Developmental Status, Battelle Developmental Inventory -2 Screener). Partnerships recognize that parents have the right to determine which provider of developmental screenings will conduct the screening for their child, including the BabyNet System Point of Entry (SPOE) Office.

- ii. Any additional but not required physical and developmental screenings, including functional hearing and vision assessments and/or use of milestone checklists, shall be documented.
- iii. Data: Client demographic, health, and developmental screening results will be entered into the First Steps Data Collection System (FSDC).

c. Referrals:

i. Children aged 0 to 34.5 months:

- 1. In the event that a developmental screening (conducted in association with any First Steps-funded program) indicates a possible developmental delay, the Partnership shall refer the family to the local BabyNet System Point of Entry Office. No consent is required to make the referral.
- 2. Partnerships are encouraged to refer children and families to other services, as appropriate.
- 3. Following determination of eligibility for BabyNet, the local BabyNet System Point of Entry Office, with parental consent, will notify the Partnership of each child's BabyNet eligibility status.
 - a. Children eligible for BabyNet: with the family's consent, Partnership staff who conducted the developmental screening will be included in development of the initial Individualized Family Service Plan as a representative of local early learning resources.
 - b. Children ineligible for BabyNet: Partnership staff shall contact the family to facilitate referral to appropriate local early learning resources, including but not limited to:
 - i. First Steps County Partnership
 - ii. Help Me Grow
 - iii. Early Head Start
 - iv. Use BabyNet Central Directory to identify service providers as resources to family and child

ii. Children 34.5 to 60 months:

- 1. In the event that a developmental screening (conducted in association with any First Steps-funded program) indicates a possible developmental delay, the Partnership shall refer the family to the local school district to determine eligibility for IDEA Part B services. No consent is required to make the referral.
- 2. Partnerships are encouraged to refer children and families to other services, as appropriate.
- 3. Following determination of eligibility for IDEA Part B services, the local school district, with parental consent, will notify the Partnership of each child's IDEA Part B eligibility status.
 - a. Children eligible for IDEA Part B services: With the family's consent, Partnership staff who conducted the developmental screening will be included in development of the initial Individualized Education Plan as a representative of local early learning resources.
 - b. Children ineligible for IDEA Part B services: Partnership staff shall contact the family to facilitate referral to appropriate local early learning resources, including but not limited to:
 - i. First Steps County Partnership
 - ii. Help Me Grow
 - iii. Head Start
 - iv. Independent service providers (for example, speech therapists), notifying parents that the child may not qualify to receive such services as a part of IDEA Part B eligibility
 - v. Use BabyNet Central Directory and other resources to identify service providers as resources to family and child

- iii. Partnerships are encouraged to arrange with the local BabyNet SPOE Office to receive information on ALL children found ineligible for BabyNet within the partnership's service area, if the family provides consent. Similarly, partnerships are encouraged to arrange with the local school district to receive information on ALL children found ineligible for IDEA Part B services and younger than five years of age within the partnership's service area, if the family provides consent.

- iv. Data: Client referrals to BabyNet and other community resources will be entered into the First Steps Data Collection System (FSDC).

3) STAFF QUALIFICATIONS AND TRAINING:

All Partnership staff involved in provision of developmental screening, referrals to BabyNet and the local school district, and participation in development of initial Individualized Family Service Plans and, for children three to five years of age, Individual Education Plans shall:

- i. Possess the minimum qualifications of an Associate Degree and 3 years' experience (course work contributions i.e. psychology, sociology, data management, etc.)
- ii. Successfully participate in training in use of developmental screening tool(s) through either South Carolina First Steps, the Team for Early Childhood Solutions (TECS) at the USC School of Medicine, or other qualified personnel.
- iii. Successfully complete "BabyNet Basics", the online training course offered by TECS 2.0 of the University of South Carolina's Team for Early Childhood Solutions. Work cooperatively with local SPOE offices, including attending regional coordination team meetings when available.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS CHILD CARE QUALITY ENHANCEMENT (601)

REQUIREMENTS FOR FY16:

First Steps' child care quality enhancement (Q.E.) strategies are intended to produce measurable improvements in the quality of care provided young children, as measured by a program's advancement within South Carolina's existing quality infrastructure (the ABC system) and/or its improvement on an approved program quality measure.

1) TARGETING:

Each participating provider shall be identified via competitive application (the minimum components of which will be specified by SCFS) with priority to providers:

- Participating in the USDA Child and Adult Care Food Program and documenting that at least 30% of enrolled students qualify for free meals/snacks (130% of federal poverty), - OR -
- Located within the school attendance zone of (and/or enrolling primarily children attending) an individual elementary school rated "Below Average" or "At Risk" (Unsatisfactory) during the preceding three-year period, - OR -
- In which 10% or more of enrolled students are ABC voucher recipients.
- Participating in a publicly-funding early care and education program (such as First Steps 4K)

Family and Group Child Care Homes may qualify under the criteria above or through their documentation that at least 30% of enrolled students have a family income of 130% of poverty or below.

Centers participating in First Steps-funded quality enhancement projects must permit the on-site delivery of "natural environment" services/therapies to children eligible under the Individuals with Disabilities Education Act.

Additionally, participant providers will be required to document the completion (or pending/planned completion within two semesters) of ECD 101 (or comparable coursework) by the director and 100% of lead classroom staff as a condition of participation.

2) SERVICE DELIVERY:

a) On-Site Technical Assistance (TA)

Technical Assistance (TA) is defined as "the provision of targeted and customized support by a professional(s) with subject matter and adult learning knowledge and skill to develop and strengthen processes, knowledge application, or implementation of service by recipients." This includes **consultation/**

coaching and mentoring. The goals of technical assistance are to provide the following: 1) individualized information and 2) personalized skill building opportunities in order to enhance child care providers' abilities to support the growth and development of young children.

Technical assistance includes mentoring and consultation/coaching which are described below:

Consultation is defined as a collaborative, problem-solving process between an external consultant with specific expertise and adult learning knowledge and skills and an individual or group from one program or organization. Consultation facilitates the assessment and resolution of an issue-specific concern—a program-/organizational-, staff-, or child-/family-related issue—or addresses a specific topic. **Coaching** is defined as a relationship-based process led by an expert in early care and education and adult learning knowledge and skills, who often serves in a different professional role than the recipient(s). Coaching is designed to build capacity for specific professional dispositions, skills, and behaviors and is focused on goal-setting and achievement for an individual or group. Quality Enhancement strategies are **required** to provide consultation/coaching at least twice monthly as part of their technical assistance services, via employee or contracted staff who are certified as technical assistance providers with CCCCD.

Mentoring pairs a new or less experienced EC professional with a peer in the same role, but who has a great deal more experience. The ideal match between a mentor and mentee is one that is agreed upon by both parties since establishing and maintaining a positive, trusting, and respectful relationship is one of the most important features of the mentoring process. The process is enhanced by establishing role clarity, setting goals, and having both planned contacts and unplanned contacts when needed by the mentee. The duration of this process is ongoing and should build on previous learning. Mentoring programs offer new EC professionals a practical and supportive way to learn and grow on the job. For experienced professionals, mentoring programs create an opportunity to advance their own skills, knowledge and career goals. Quality Enhancement strategies are **encouraged** to incorporate mentoring into their program services.

Partnerships implementing or contracting to fund quality enhancement strategies will develop a detailed Quality Improvement Plan in partnership with each participating provider - the minimum requirements of which shall be specified by SCFS and which must include on-site technical assistance (TA) as a central component. In all cases, technical assistance shall entail the incorporation of reflective practice principles and a best-practice curriculum model. Partnerships working with providers that are participants in First Steps 4K (formerly CDEPP) must develop the provider's Quality Improvement Plan and provide services in close coordination with the assigned SCFS 4K Technical Assistant.

Registered family home providers receiving First Steps QE funds shall document their voluntary completion of 15 hours of professional development annually, mirroring the DSS requirements for licensed, center-based providers.

TA needs shall be determined by the providers' self-identified needs, regulatory deficiencies (if any) and/or the results of an approved environment and/or administrative assessment. First Steps-funded QE strategies shall incorporate on-site consultation/coaching at least bi-weekly (twice a month) to all participating centers. Partnerships unable to provide at least bi-weekly consultation/coaching due to staffing limitations shall reduce the number of QE-funded centers to ensure this level of support to each participating center.

Technical assistance visits (consultation, coaching and mentoring) shall be planned and purposeful and logged within the First Steps Data Collection (FSDC) System no less than monthly. These visits, which may span several hours in duration and entail multiple individual classroom visits, may be supplemented (but not replaced) by additional phone consultation and/or shorter drop-in visits. Two or more visits to the same site on a single day shall be considered a single visit of increased duration. In the event that topical, on-site consultation may be appropriately considered for provider training credit through the CCCCD, TA staff shall take responsibility for the advanced submission of all appropriate training outlines.

First Steps Partnerships offering QE strategies may choose to provide limited, periodic TA to non-QE centers provided: 1) these services are supplemental to the standard QE programming described herein; 2) the consultation provided addresses the attainment of specific goals (such as NAEYC accreditation, maintenance of previous QE gains, etc.); 3) these services support First Steps 4K or other publicly-funded early care and education programs; and 4) no QE grant funds are provided to these centers.

b) Equipment and Materials Funds

Equipment/materials funding to centers, if provided, may not exceed \$5,000 annually without the approval of SC First Steps. In all cases equipment/materials purchases must be aligned with classroom needs as indicated by the environment assessment and/or the center's current Quality Improvement Plan. Equipment/materials funds shall not be awarded independent of training and/or qualified technical assistance. Equipment/materials funding may not be used to support classrooms funded by the First Steps 4K program without approval by the First Steps 4K Administrator.

c) Coordination with Community Partners/ Integration with Child Care Training

In developing the Partnership's quality enhancement efforts, each will be required to explicitly coordinate their efforts with other state/community-level entities offering similar services in the county (example: Child Care Resource and Referral, Success by Six, etc.) including attending regional Technical Assistance Coordination Team meetings. Formal, county-wide (and/or regional) quality enhancement and training plans will be developed (and filed with SCFS) in an effort to ensure the maximization of resources and avoid duplication of effort.

Partnerships will plan and offer training for participating child care providers based on needs identified within each center's Quality Improvement Plan. As a condition of participation, the center director must participate regularly in the center's on-site visits and in at least 50% of staff training provided. Child care staff from QE centers shall be required to attend relevant training as a condition of their centers' participation. SCFS TA staff shall make every effort to register content-specific consultation as provider training as appropriate. Trainings offered to client providers shall be attended by the partnership's technical assistance provider(s).

Partnerships shall provide at least eight (8) hours of high-quality, certified training (stemming directly from the provider's Quality Improvement Plan) to each 601 center staffer. At least half of this training shall relate to a best-practice curriculum model (Creative Curriculum, High Scope, Montessori or other First Steps-approved curriculum).

d) Workforce Development

Each First Steps-funded QE plan shall incorporate a workforce development component. All participating staff shall be provided with information about the state's T.E.A.C.H. (Teacher Education and Compensation Helps) scholarship program and provide (and/or connected with) case management designed to assist each in his/her advancement along South Carolina's Early Childhood Career Lattice.

e) Certification of Technical Assistance Providers Via CCCCC

Each First Steps-funded technical assistance provider must demonstrate his/her professional competence through:

- Certification as a South Carolina Technical Assistance Provider through the Center for Child Care Career Development (CCCCD). TA shall be limited to the provision of types/categories of service for which they maintain current certification.
- Participation in ongoing professional development with a total of 30 clock hours of training every 3 years. Half of this training shall be in early education and half in technical assistance, i.e., reflective practice, Quality Improvement Plans, and Environment Rating Scales.

Additionally, each First Steps funded TA provider must document the completion of orientation to: 1) SC Childcare Licensing, 2) the ABC Quality Program, and 3) the South Carolina Child Care Inclusion Collaborative within the past two years.

3) ASSESSMENT AND DATA SUBMISSION:

Timely submission of technical assistance visits and assessments into the FSDC is expected of all QE strategies. Partnerships shall ensure the submission of complete center data for each focus provider within 30 days of program initiation, and maintain current center, enrollment, and staff information within the FSDC.

Each focus classroom (i.e., classrooms visited regularly by the TA provider) and/or home-based provider benefiting from First Steps QE funding shall receive a baseline assessment with the appropriate Environment Rating Scale (ERS) within 90 days of the initiation of technical assistance, with a post assessment conducted 6-9 months later (prior to the end of the program year), and annually thereafter in the event that a single classroom or home-based provider is served across fiscal multiple fiscal years. In the event that technical assistance is provided on a center-wide basis (entailing three or more focus classrooms), at least 1/3 of all classrooms shall be assessed according to the timeline above.

Environment assessments must be conducted by assessors who have:

- 1) Completed at least 3 days of training from the Environment Rating Scale Institute (ERSI, Chapel Hill, NC) in the appropriate ER scale.
- 2) Participated as required in any ERS reliability measures established by SC First Steps.
- 3) Participated in bi-annual online ERS Refresher training or additional ERS training through the ERSI within the past three years.

Partnerships whose QE strategies entail assistance and/or coaching in the administrative arena shall likewise incorporate pre- and post- assessments using the Program Administration Scale (PAS).

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS CHILD CARE TRAINING (605)

REQUIREMENTS FOR FY16:

1) TARGETING:

First Steps-funded Child Care Training strategies shall, in all instances, be considered part of a larger quality enhancement effort and support providers in one or more of the following:

- a. Advancement along the CCCCD career lattice,
- b. Advancement within the ABC quality system,
- c. Improvement on an approved measure of program quality, and/or
- d. A topic-specific focus based on Regional TA Coordination meetings.

2) STRATEGY INTEGRATION:

Accordingly, each Partnership training strategy shall be explicitly integrated with either (or some combination of):

a) The Partnership's own Quality Enhancement Strategy

Partnerships operating a 605 (training) strategy in conjunction with a 601 (quality enhancement) strategy shall explicitly integrate the two in order to maximize service intensity and affect demonstrable quality improvements. In this event, Partnerships shall provide at least eight (8) hours of high-quality, certified training (stemming directly from the provider's Quality Improvement Plan) to each 601 center staffer. At least half of this training shall relate to a best-practice curriculum model (Creative Curriculum, High Scope, Montessori or other First Steps-approved curriculum).

- AND/OR -

b) A regional/community-based quality enhancement effort.

Partnerships offering 605 (training) strategies in the absence of a 601 (quality enhancement) strategy shall be required to demonstrate their explicit integration of this strategy with the training and/or technical assistance offerings of a community partner organization, or one or more neighboring First Steps Partnerships, or in consultation with publicly-funded early care and education programs such as First Steps 4K. Formal integration plans shall be developed for submission to SCFS that demonstrate the parties' efforts to ensure maximization of resources and avoid duplication of effort.

- AND/OR -

c) A Training/Coaching Plan centered around a research-based curriculum or model, with SCFS approval.

- Trainer and coaches must be certified in proposed curriculum/model
- Reflective practice principles must be employed
- A training and coaching plan shall include pre- and post-assessments, individual goal setting and periodic reviews with all staff and centers participating in this training/coaching program.

3) SERVICE DELIVERY:

a) In all cases, Partnerships shall:

- Base training upon a local needs assessment process to include input derived from a local directors' network or - if none exists - a called, countywide directors meeting to assess need.
- Actively coordinate any funded training with other state and local entities providing training
- Emphasize multi-session trainings (as opposed to isolated, stand-alone workshops)
- Incorporate measurable training objectives and at least one form of follow-up. At minimum, partnerships shall conduct a follow-up post assessment questionnaire to each training participant within one month following training, using a format obtained from the certified trainer or curriculum model. Other recommendations for training follow-up include:
 - Director-guided technical assistance supported by the partnership
 - Learning community of staff designed to discuss and support work in classroom
 - On-site visits by original training provider
 - Completion of interim assignments between meetings of multi-session trainings
 - Visit to a model center exemplifying training principlesPartnerships should share information from training follow-up activities with the original trainer(s) to improve practice, arrange for additional training opportunities or refer to CCR&R for follow-up TA.
- Prioritize trainings linked to infant-toddler care and staff-child interactions
- Post all publicly available training opportunities on the CCCCD website and other widely accessible training calendars.

b) Certification by the Center for Child Care Career Development (CCCCD)

All training shall be, with the exception of health/safety topics, certified with the Center for Child Care Career Development (CCCCD).

c) Charging Participants for Training

If utilized, participant fees proposed in association with state-funded training opportunities shall be nominal and must be either: a) detailed in the partnership's renewal application, or b) approved in advance by SC First Steps.

d) Random Evaluation

In partnership with the SC Center for Child Care Career Development, SC First Steps may – on a randomized basis - distribute follow-up training evaluations to selected training participants.

4) DATA COLLECTION:

Child Care Training strategies are not required to submit participant data within the First Steps Data Collection system (FSDC). However, starting in FY16 partnerships will use the FSDC to track follow-up visits and other consultation activities with child care providers.

At minimum, partnerships are expected to keep an electronic record of training attendees, their participation in training sessions and follow-up, and the child care providers they represent, and submit all required information to CCCCD for participants to receive DSS credit hours.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS CHILD CARE SCHOLARSHIPS (703)

REQUIREMENTS FOR FY16:

Unlike federal child care vouchers designed to enable low-income parents to seek and maintain employment, First Steps-funded child care scholarships are granted in an effort to promote the healthy development and school readiness of participating children.

1) TARGETING:

a) Targeting Clients At-Risk Of Early School Failure

Each First Steps-funded scholarship client shall possess two or more Board-identified risk factors:

- A preschool-aged child has been abused
- A preschool-aged child has been neglected
- A preschool-aged child has been placed in foster care
- Eligibility for the Supplemental Nutrition Assistance Program (SNAP, e.g. Food Stamps) or Free School Lunches (130% of federal poverty level or below – with first priority given to TANF-eligible clients whose annual family income levels fall at 50% of federal poverty level or below)
- Eligibility for services under the Individuals with Disabilities Education Act, Parts B (Preschool Special Education, ages 3-5) or C (BabyNet, ages 0-3)
- A preschool aged child with a developmental delay as documented by a physician or standardized assessment
- Teenage mother/primary caregiver (at the time of the focus child's birth)
- Low maternal/primary caregiver education (less than high school graduation at the time of focus child's birth)
- A preschool-aged child has been exposed to the substance abuse of a caregiver
- A preschool-aged child has been exposed to parental/caregiver depression
- A preschool-aged child has been exposed to parental/caregiver mental illness
- A preschool-aged child has been exposed to parental/caregiver intellectual disability
- A preschool-aged child has been exposed to domestic violence within the home
- Low birth weight (under 5.5 lbs.) in association with serious medical complications
- English is not primary language spoken in the home, when combined with one or more additional risk factors
- Single parent household and has need of other services
- Transient/numerous family relocations and/or homeless

b) Clients participating in the Nurse Family Partnership strategy (in which participating mothers are selected during pregnancy) may be considered presumptively eligible for scholarship support with priority to clients with the lowest family incomes.

c) In the event that unique and/or emergency circumstances warrant, Partnerships may offer scholarships to children who do not meet the risk definition above, given prior written authorization from SC First Steps.

2) SERVICE DELIVERY:

a) Administration and Use

First Steps funded scholarships may be administered "in-house" by the Partnership or via DSS.

b) Non-Supplantation

First Steps funds shall not be used to supplant – or in place of – other forms of public funding available to clients' families for the provision of child care tuition. Current or transitional TANF clients must be referred to the SC Department of Social Services for enrollment the ABC voucher program. Age- and income-eligible clients shall be made aware of their service delivery options via Head Start, preschool programs available through the local school district, and the First Steps 4K program.

c) Developmental Screening

First Steps partnerships funding child care scholarships shall ensure the completion of the age-appropriate developmental screening Ages and Stages Questionnaire – 3rd Edition for each scholarship recipient – with results to be shared with parents. Additional screenings, such as health screenings and the ASQ:SE, are encouraged. Screenings may be conducted by the partnership, the child care provider, or another community partner as local needs and resources dictate. Children with suspected delays will be referred (as appropriate) to either BabyNet or their local school district for additional evaluation.

d) Monitoring

Partnerships operating in-house scholarships must:

- Collect daily attendance data from each center receiving scholarships, at least monthly, to determine if scholarship funds are being used appropriately;
- Conduct unannounced monitoring visits to each center to verify child enrollment and family eligibility at least monthly; and
- Set scholarship reimbursement rates consistent with the local market, not to exceed the maximum reimbursement rates of the ABC voucher program (unless authorization by SC First Steps is on file).

Partnerships contracting scholarships through DSS must:

- Review monthly scholarship reports from DSS to ensure all scholarship funds are being used and that qualified applicants are connected to a provider and receiving services in a timely manner (i.e., no “pending” scholarships);
- Conduct unannounced monitoring visits to each center to verify child enrollment and family eligibility at least monthly.

e) Eligible Providers

Given First Steps’ readiness mission Partnership-funding scholarships shall be limited to use within high quality settings (independent of their chosen method of administration). These programs – to be selected via competitive process – are defined as meeting any one of the following criteria:

- Active participation in a First Steps quality enhancement strategy;
- Exceeding minimum licensing requirements (participation in the ABC Quality Program at Level B or higher); or
- An aggregate Environment Rating Scale rating of 4.0 or higher.

The Partnership Board may – upon the provision of written consent from SCFS - waive this requirement in the event that programs meeting this definition are geographically distant or unavailable to individual recipients.

f) Integration with Other Readiness Interventions

Partnerships are strongly encouraged to integrate the provision of scholarships with additional First Steps (or partner organization) evidence-based strategies and may require participation in these additional services as a condition of funding at the discretion of the Partnership Board.

g) Parent Training

Child care scholarship parents/guardians shall receive at least one hour of training on the benefits of high quality child care.

3) DATA COLLECTION:

Regardless of whether partnerships operate child care scholarships in-house or through DSS, partnerships must enter client demographic data, scholarship and provider information, service dates, screenings, training attendance, and connections to other partnership or community services within the First Steps Data Collection system (FSDC).

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS FOUR YEAR OLD KINDERGARTEN

Full Day 4K (314), Half Day 4K (316), and Extended Day/Half to Full Day 4K (317)

REQUIREMENTS FOR FY16:

Independent of vendor, First Steps funded 4K classrooms shall adhere to the following student enrollment criteria during FY16 (2015-16 school year):

- Each student must be four-years-old on or before September 1, 2015.
- Each student must qualify for enrollment on the basis of at least one of the following factors:
 - Eligibility for free- or reduced-price school lunches;
 - Eligibility for Medicaid;
 - Qualification for services under IDEA Part B as the result of a documented disability or developmental delay

In the event that more students seek to enroll than available space permits, students qualifying for service on the basis of income (free- or reduced price lunch or Medicaid) shall be prioritized (at the time of acceptance) on the basis of family income as expressed as a percentage of the federal poverty guidelines, with the lowest family incomes given highest priority.

Public four-year-old kindergarten programs receiving First Steps funding shall be responsible for the entry of complete student data within the PowerSchool data system. Client data entry into the First Steps Data Collection system (FSDC) is not required.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS COUNTDOWN TO KINDERGARTEN (406)

REQUIREMENTS FOR FY16:

Countdown to Kindergarten is a summer home visitation strategy designed to link incoming kindergartners and their families with the individual who serve as their kindergarten teacher during the coming year.

1) TARGETING:

Targeting Clients At-Risk Of Early School Failure

Countdown to Kindergarten (CTK) shall be targeted toward families of children most likely to experience early school failure. Given the program's unique role in supporting school transition, several additional risk factors are associated with eligibility for this service. (CTK-specific transition risk factors are noted in italic text in the list below, and do not extend to other First Steps-funded strategies.)

At least 60% of CTK clients shall be identified on the basis of two (2) or more of the readiness risk factors below (with 100% of client families possessing at least one risk factor at the time of enrollment):

- A preschool-aged child has been abused
- A preschool-aged child has been neglected
- A preschool-aged child has been placed in foster care
- Eligibility for the Supplemental Nutrition Assistance Program (SNAP, e.g. Food Stamps) or Free School Lunches (130% of federal poverty level or below – with first priority given to TANF-eligible clients whose annual family income levels fall at 50% of federal poverty level or below)
- Eligibility for services under the Individuals with Disabilities Education Act, Parts B (Preschool Special Education, ages 3-5) or C (BabyNet, ages 0-3)
- A preschool aged child with a developmental delay as documented by a physician or standardized assessment
- Teenage mother/primary caregiver (at the time of the focus child's birth)

- Low maternal/primary caregiver education (less than high school graduation at the time of focus child's birth)
- A preschool-aged child has been exposed to the substance abuse of a caregiver
- A preschool-aged child has been exposed to parental/caregiver depression
- A preschool-aged child has been exposed to parental/caregiver mental illness
- A preschool-aged child has been exposed to parental/caregiver intellectual disability
- A preschool-aged child has been exposed to domestic violence within the home
- Low birth weight (under 5.5 lbs.) in association with serious medical complications
- English is not primary language spoken in the home, when combined with one or more additional risk factors
- Single parent household and has need of other services
- Transient/numerous family relocations and/or homeless

Additional CTK Transition Risk Factors:

- *An incoming kindergartner who has had an older sibling retained in/before the 3rd grade*
- *An incoming kindergartner who has been recommended for service on the basis of significant social/emotional and/or behavioral difficulties – or those of an older sibling.*
- *An incoming kindergartner who has never been served within a full-time preschool program out of his/her home. (Note that this final factor may be considered in conjunction with one or more additional risks but may not be used to determine eligibility in isolation.)*

2) SERVICE DELIVERY:

a) Adherence to the Countdown to Kindergarten Curriculum

While the CTK curriculum offers substantial opportunity for personalization by individual teachers, each must adhere to its general format and ensure the delivery of each published lesson.

b) Placement within the Classroom of the Home Visitor

Countdown to Kindergarten is explicitly designed to connect children and families to the teachers with whom they will be working during the coming year. Accordingly, Partnerships must take steps to ensure the placement of CTK client children in the classrooms of their home visitors.

The CTK curriculum must – without exception – include a meeting with the child's teacher at the school where the child will be attending kindergarten.

c) Curriculum Training

Any teacher who has not attended training on the updated Countdown Curriculum (initially utilized during Summer 2009) must do so prior to the beginning of the program.

3) DATA SUBMISSION AND FISCAL ADMINISTRATION:

a) Outcomes and Data Requirements

The Partnership will be responsible for meeting all data requirements of SCFS within 30 days of receiving data from the teachers. CTK client and program information must be entered into the First Steps Data Collection system (FSDC).

b) Partnership Match Requirement

Partnerships agree to meet the SCFS match requirements for CTK.

c) Fiscal Administration and Teacher Payment

The Partnership will be responsible for ensuring that each CTK teacher adheres (in all regards) to his/her CTK Memorandum of Agreement.

Visits performed before July 1 must be invoiced no later than July 16. Visits performed on or after July 1 must be invoiced no later than August 20. In order to receive payment, teachers must submit all paperwork required by the Partnership and have completed the required number of home visits. If all home visits are not completed, the Partnership may adjust teacher payments accordingly, though teacher pay may not be docked as the result of an "attempted visit" in which the family was available for participation. The Partnership must clearly mark the last invoice as "FINAL". Payments will be made within 30 days after invoice approval.

FIRST STEPS PROGRAM ACCOUNTABILITY STANDARDS

Other Strategies

REQUIREMENTS FOR FY16:

In the event that a partnership wishes to propose a strategy not detailed herein, the following standards apply:

1. Strategy Approval:

- a) The partnership will submit, as part of its annual Renewal Plan submission to SCFS, a detailed explanation of the proposed strategy, chosen curriculum or program model, its rationale (why is the strategy is being proposed), research basis (as appropriate), projected per-client cost and proposed evaluation methodology. Strategies will be expected to follow chosen curriculum and program models with fidelity.
- b) The partnership shall be provided individualized technical assistance upon request in an effort to support and strengthen the proposal, if needed.
- c) If a new strategy, the Program and Grants Committee of the Board of Trustees shall conduct a programmatic review the proposal, and either: a) recommend the proposal for approval by the state board, or b) return the proposal to the partnership with recommendations for improvement.
- d) Upon approval by the Program and Grants Committee, the strategy will be presented to the full Board for final approval.

2. Strategy Implementation:

Partnership strategies will be expected to meet the strategy's goals and objectives as stated in the partnership's Renewal Plan, using output and outcome data as specified in its board-approved Renewal Plan as evidence of achievement.

Additionally, partnerships shall ensure non-prevalent strategies meet the following criteria:

- a) Target children most in need of services, using board-approved risk factors in absence of specific targeting criteria within the chosen program model
- b) Deliver services with fidelity to the chosen curriculum or program model
- c) Use qualified staff that meet the minimum education and training requirements of the chosen curriculum or program model
- d) Maintain detailed data collection records, and enter timely data in the First Steps Data Collection System (FSDC), if required. The State Office of First Steps will notify partnerships what data needs to be entered in the FSDC.

ATTACHMENT 1:

PAT Essential Requirements with Measurement Criteria

2014 Parents as Teachers Essential Requirements © 2014, Parents as Teachers National Center, Inc. ParentsAsTeachers.org Page 1

The following are the essential requirements for an organization to become and remain a Parents as Teachers affiliate with approval to implement the PAT model. Implementation and service delivery data that address the essential requirements are reported at the end of each program year on the Affiliate Performance Report (APR)¹. New affiliates' intentions to comply with these requirements are initially demonstrated through the Affiliate Plan.

Essential Requirements	Measurement Criteria
1. Affiliates provide at least two years of services to families with children between prenatal and kindergarten entry.	Your affiliate is designed to provide at least two years of services to families with children between prenatal and kindergarten entry.
2. The minimum qualifications for parent educators are a high school diploma or GED and two years previous supervised work experience with young children and/or parents.	100% of your affiliate's parent educators (PEs) have at least a high school diploma, GED or equivalent degree in countries outside the US.
3. Each affiliate has an advisory committee that meets at least every 6 months (can be part of a larger committee, community network or coalition as long as the group includes a regular focus on the Parents as Teachers affiliate).	Your affiliate conducted 2 advisory committee meetings during the program year covered by the most recent APR.
4. Each month, parent educators working more than .5 FTE participate in a minimum of two hours of individual reflective supervision and a minimum of two hours of staff meetings and parent educators working .5 FTE or less participate in a minimum of one hour of reflective supervision and two hours of staff meetings. <input type="checkbox"/> <i>In order to support high quality services to families, this requirement includes supervisors who carry a caseload.</i>	100% of parent educators working more than .5 FTE who were employed the full program year received at least 18 hours of reflective supervision during the program year covered by the most recent APR. 100% of parent educators working .5FTE or less who were employed the full program year received at least 9 hours of reflective supervision during the program year covered by the most recent APR. At least 18 hours of staff meetings occurred during the program year covered by the most recent APR.
5. Each supervisor, mentor or lead parent educator is assigned no more than 12 parent educators, regardless of whether the parent educators are full-time or part-time employees. <input type="checkbox"/> <i>The number of PEs assigned to the supervisors is adjusted proportionately when</i>	100% of your affiliate's 1.0 FTE supervisors are assigned a maximum of 12 PEs.

<p><i>the supervisor is not full-time. For example, a .75 FTE supervisor would have a maximum of 9 PEs; a .5 FTE would have a maximum of 6 PEs; a .25 FTE would have a maximum of 3 PEs.</i></p>	
<p>6. All new parent educators in an organization who will deliver Parents as Teachers services to families attend the Foundational and Model Implementation Trainings before delivering Parents as Teachers; new supervisors attend at least the Model Implementation Training.</p>	<p>100% of PEs and supervisors have attended the required PAT trainings.</p>
<p>7. Parent educators obtain competency-based professional development and training and renew certification with the national office annually.</p>	<p>100% of model affiliate PEs are up to date with their certification.</p>
<p>8. Parent educators complete and document a family-centered assessment within 90 days of enrollment and then at least annually thereafter, using an assessment that addresses the Parent as Teachers required areas.</p>	<p>At least 60% of families enrolled more than 90 days had an initial family-centered assessment completed within 90 days of enrollment during the program year covered by the most recent APR.</p> <p>At least 60% of families that received at least 1 personal visit had a family-centered assessment completed in the program year covered by the most recent APR.</p>
<p>9. Parent educators develop and document goals with each family they serve.</p>	<p>At least 60% of the families that received at least 1 personal visit had at least 1 documented goal during the program year covered by the most recent APR.</p>
<p>10. Parent educators use the foundational visit plans and planning guide from the curriculum to design and deliver personal visits to families.</p>	<p>PEs consistently used the foundational visit plans and planning guide from the curriculum to design and deliver visits to families.</p>
<p>11. Families with 1 or fewer high needs characteristics receive at least 12 personal visits annually and families with 2 or more high needs characteristics receive at least 24 personal visits annually.</p>	<p>At least 60% of families with 1 or fewer high needs received at least 75% of the required number of visits in the program year covered by the most recent APR.</p> <p>At least 60% of families with 2 or more high needs receive at least 75% of the required number of visits in the program year covered by the most recent APR.</p>
<p>12. Full-time 1st year parent educators complete no more than 48 visits per month during their first year and full-time parent educators in their 2nd year and beyond complete no more than 60 visits per month. <input type="checkbox"/> <i>The number of visits completed monthly is adjusted proportionately when a parent educator is part time. In addition, a number of factors need to be considered when establishing the maximum number of visits completed monthly, including parent educators' total responsibilities, travel time for visits, data collection responsibilities and program supports.</i></p>	<p>Full time 1st year PEs complete no more than 48 visits per month in the program year covered by the most recent APR.</p> <p>Full time PEs in their 2nd year and beyond complete no more than 60 visits per month in the program year covered by the most recent APR.</p>

13. Affiliates deliver at least 12 group connections across the program year.	Your affiliate delivered at least 9 of the 12 (75%) required group connections in the program year covered by the most recent APR.
14. Screening takes place within 90 days of enrollment for children 4 months or older and then at least annually thereafter (infants enrolled prior to 4 months of age are screened prior to 7 months of age). A complete screening includes developmental screening using PAT approved screening tools, along with completion of a health review that includes a record of hearing, vision, and general health status. Developmental domains that require screening include language, intellectual, social-emotional & motor development.	<p>At least 60% of the children enrolled at age 4 months or older had a complete initial screening within 90 days of enrollment in the program year covered by the most recent APR.</p> <p>At least 60% of the of children enrolled prior to age 4 months and who reached 7 months of age before the end of the program year had a complete initial screening prior to 7 months of age in the program year covered by the most recent APR.</p> <p>At least 60% of children received a complete a screening in the program year covered by the most recent APR.</p>
15. Parent educators connect families to resources that help them reach their goals and address their needs.	At least 60% of families that received at least 1 personal visit were connected by their PE to at least 1 community resource in the program year covered by the most recent APR.
16. At least annually, the affiliate gathers and summarizes feedback from families about the services they've received, using the results for program improvement.	Your affiliate gathered and summarized feedback from families about the services they have received at least once during the program year covered by the most recent APR and used the results for program improvement.
17. The affiliate annually reports data on service delivery and program implementation through the APR; affiliates use data in an ongoing way for purposes of continuous quality improvement.	Your affiliate submitted the most recent APR.

ATTACHMENT 2:



ESSS Program Standards

Save the Children has instituted the following standards to guide partners to implement effective, high quality **Early Steps to School Success** programs. To ensure continuous quality improvement, **Early Steps** sites are measured against these standards on a quarterly basis.

Early Steps is made up 2 components – the Pre-birth - 3 Home Visiting component and the 3-5 Book Bag Exchange that together provide early childhood education services to 50 children pre-birth to five years of age and education services to their parents and/or other caregivers. **Early Steps** services also include Parent-Child Groups, Transition Support, Community Collaboration, and Staff Training and Support.

Pre-Birth - 3 Home Visiting Component

- 20 children are enrolled in the Home Visiting component. This includes pregnant women and children ages birth to 3.
 - The youngest and the neediest children in the community have priority for enrollment. Early Steps defines “youngest” as pregnant women and children less than 12 months of age. Each program is encouraged to define “neediest” as it applies to its own community.
- Each family receives a minimum of 2 regularly scheduled home visits per month.
 - Home visits support the development of strong parent/child relationships that nurture language and learning.
 - Home visits typically last about an hour.
- Missed visits are expected to be made up. Each family is expected to receive an average of 2* visits per month in any given period. In any 2 month period, each family should receive 4* visits; in any 3 month period there should be 6* visits.
- All children participate in the Book Bag Exchange at each visit. Information regarding the number of times the child is read to or engaged in a literacy-based activity is collected at each visit.
- Early Steps is a full 12-month program. Home visits are provided on a year-round basis.

3-5 Book Bag Exchange Component

- 30 3-5 year olds are enrolled in the 3-5 Book Bag Exchange component.
 - Children transitioning from the Home Visiting component must be given priority for enrollment in the 3-5 Book Bag Exchange.
- The program partners with Head Start, preschool or community child care providers to provide the 3-5 Book Bag Exchange.

- A weekly exchange of book bags occurs throughout the entire school year for children enrolled in the 3-5 Book Bag Exchange. Book sharing and literacy activities done in the home is tracked.
- The Book Bag Exchange includes a weekly 'read aloud'.

“Transition to School” Support

- Coordinators actively engage parents in transition activities that connect children to the preschool or kindergarten they will attend and prepare children and parents for successful transition at 3 and again at 5.

Parent-Child Groups

- Monthly, Parent/child support and education groups led by trained early childhood staff are held in schools and community settings.

Community Connections

- Partnerships are established with community program, local schools and other community agencies to promote awareness and build local resource connections to support the program and families. Regular contacts are made to build and nurture these relationships.

Staff Training and Support

- STC provides Early Steps sites with ongoing, high- quality professional development including: 1-2 group trainings per year; regular coaching visits by an Early Childhood Program Specialist; monthly training calls and webcasts; regional trainings; and opportunities for pursuing early childhood degrees and certifications. Coordinators are expected to plan monthly site visits with the Early Childhood Specialist that include 1-2 home visits, a file review, recent training follow-up and a meeting with the Site Supervisor.

Supervisory Expectations for Partners

- Participate in orientation and training activities, site visits and program implementation support from Save the Children staff and its contractors, and in an ongoing program evaluation.
- Hire an Early Childhood Coordinator whose language reflects that of the population being served. Ex. An Early Childhood Coordinator who provides services to families who are monolingual Spanish, must be bilingual.
- Provide adequate space and supplies to the ECC. This must include:
 - A computer with wireless internet access
 - An accessible telephone and readily available telephone line
 - Space for parent/child group meetings/events
 - Adequate storage space
 - Access to purchasing appropriate infant/toddler supplies and materials within district guidelines and budget codes

- Provide an orientation to the Early Childhood Coordinator (ECC) upon hire that includes:
 - Information on school benefits including leave and health insurance
 - Information on completing time sheets
 - Information on submitting for mileage reimbursement monthly
 - Information on district policies for reporting child abuse and neglect

- Utilize the ECC for ESSS functions only. ECC responsibilities do not include acting as a substitute teacher at any given time during the school day, assisting with bus or lunch duties, running sports or other extra-curricular activities, using preparation/planning time for other non-early childhood activities (e.g., monitoring assemblies, assisting with non-early childhood related classroom activities).

- Provide an environment that provides the ECC with a flexible schedule to accommodate the needs of families with young children receiving services in a home-based environment. This may include making evening or weekend visits/groups and providing services on days that schools are closed.

- Provide ongoing supervision and support to the ECC that must include:
 - Regular meetings between the ECC and Site Supervisor
 - Observation by the Site Supervisor of at least 2 home visits per year conducted by the ECC
 - Observation by the Site Supervisor of at least 1 parent/child group per year conducted by the ECC
 - Regular meetings between Save the Children ESSS Program Specialist and Site Supervisor
 - An annual review of the ECC's performance completed by their supervisor.

- Conduct a quality check (*Parent Satisfaction Survey*) with **all** families semi-annually.

- Monthly, Site Supervisors will compare mileage reimbursement requests, and sign-in/sign-out logs with home visit documentation (*Family Planning Forms*) signed by parents.

- Notify Save the Children when there are changes or issues at the site that affect ongoing supervision, management, and/or continuity or quality of regular programming.

- Participate in a Program Quality Assessment (PQA) at the site at least every two years.

Initial: 2010
 Reviewed/Revised: 2012, 2014, 1/30/2015

**ATTACHMENT D: FY16 Grant Renewal by Strategy/Effectiveness Review
(June 18, 2015)**

Program and Grants Committee
FY16 Renewal Summary
June 9, 2015

209 Strategies Proposed for FY16

- 145 Strategies with uniform performance standards recommended for approval (9 new)
- 30 Strategies with customized performance standards recommended for approval (7 new)
- 24 Recommended for conditional approval (14%)
- 10 Presented for information only (funded by non-FS sources)

- 12 Discontinued from FY15 (Note that in order to depict a three-year history the recommendations grid also contains a number of “previously discontinued” strategies.)

Conditional Approval Codes

1. **HOME VISIT INTENSITY: Did not meet threshold for average visits per month (2.0 for PAT and ESSS, 6 for PCH).**

No counties cited

2. **HOME VISIT DURATION: Did not meet threshold for AVERAGE VISIT DURATION (45 min for PAT and ESSS, 30 min for PCH).**

No counties cited

3. **(A) HOME VISIT ASSESSMENT: Fewer than 75% of clients received KIPS assessments at appropriate intervals, per FY14 Program Standards.**

2 Counties/ 2 Strategies: Barnwell, Marlboro

(B) HOME VISIT ASSESSMENT: Fewer than 75% of clients received ACIRI assessments at appropriate intervals, per FY14 Program Standards.

2 Counties/ 2 Strategies: Jasper, Lee

4. **DOLLY PARTON IMAGINATION LIBRARY (212) 92% BOOKS: Did not meet threshold of 92% expenditures devoted to book procurement.**

No counties cited

5. **STAFF CERTIFICATIONS: Required staff certifications not on file with SCFS. Home visitation: current certification in the program model, current certification in KIPS. Child care quality enhancement: certification as a technical assistance provider with CCCCD.**

No counties cited

6. **CHILD CARE INTENSITY: Did not meet threshold for average T.A. visits per month (2.0)**

4 Counties / 4 Strategies: Dorchester, Kershaw, Marion, York

7. **CHILD CARE ASSESSMENT: Fewer than 90% of providers received an ERS during the program year**

No counties cited

8. **FAMILY LITERACY: Did not adequately track client data in the First Steps Data System.**

No counties cited

9. **CLIENT TARGETING: Did not meet threshold for risk factor targeting for newly enrolled clients in FY15.**

No counties cited

10. **COST PER VISIT: Exceeded maximum cost per visit of \$150**

No counties cited

11. **MAINTENANCE T.A. REQUIRED: Strategies in this category have had prior conditional approvals for which ongoing TA is recommended. Approval is conditional upon on-site TA for Continuous Quality Improvement along with ongoing TA to the Partnership Board.**

No counties cited

12. **SCHOLARSHIP SCREENING: Did not ensure that First Steps child care scholarship or Home Visiting clients received a developmental screening during FY15.**

6 Counties/ 7 Strategies: Barnwell, Chester, Dorchester, Marlboro, Sumter (2), York

13. **(A) PENDING SCHOLARSHIPS: Partnerships with DSS-administered scholarships did not connect all of their purchased scholarships during the program year.**

No counties cited

(B) PROVIDER STANDARDS: Did not connect scholarships to child care providers that meet standards, nor did partnership seek waiver of these requirements.

1 County / 1 Strategy: Marlboro

14. **PROJECTED VS. ACTUAL SERVED: Did not serve at least 75% of projected clients during the program year in a strategy.**

8 Counties/ 8 Strategies: Abbeville, Chester, Charleston, Dorchester, Greenville, Greenwood, Jasper, Lee

FYI: STRATEGIES with customized performance standards: Approval

19 Counties / 30 Strategies (7 new): Abbeville, Barnwell, Beaufort, Charleston(2), Chesterfield (3), Colleton (1), Darlington (3), Dorchester (2), Georgetown, Greenville (2), Greenwood, Lancaster (2), Lee, Lexington, McCormick (3), Newberry, Pickens (2), Saluda, and Spartanburg.

NOTE: Board committee review for 7 NEW strategies as per program standards:

Beaufort, Colleton, Darlington, Dorchester, Georgetown, Pickens, Spartanburg (see attached descriptions for detail on program evaluation plans).

First Steps' annual partnership renewal process is labor intensive for both the Partnerships and state staff. Below is a partial list of the data system reports utilized to track Partnership compliance.

Home Visitation Reports:

- 2 Visit Intensity Reports: number of risk factors, frequency of visits, duration of visits, number of months in the program, number and percentage of exited cases
- Risk Factor Report: detail on types of risk factors
- KIPS/ACIRI Report
- Retention Report: clients served for 9 or more months continuously during the current year or at any point in time
- Dashboard Report: newly enrolled clients who are pregnant women or children under 36 months
- Connections Report: connections to other early childhood interventions besides home visitation
- ASQ Report

Scholarship Reports:

- Scholarship Report: number of risk factors, type of scholarship, assigned child care provider
- Connections Report: connections to other early childhood interventions besides scholarships
- ASQ Report
- Risk Factor Report: detail on types of risk factors

Child Care Reports:

- Intensity Report: frequency of visits, duration of visits
- ERS Report: ITERS, ECERS, FDCRS assessments

CTK:

- Countdown to Kindergarten Report: risk factors, number of visits, placement in the home visitor's K classroom
- Risk Factor Report: detail on types of risk factors

County Name	Strategy Code	Strategy Name	Recommendation for FY 12	FY12 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 13	FY13 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 14	FY14 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 15	FY15 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 16	FY16 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Comments
Abbeville	2012	Parents as Teachers	Conditional Approval	1, 3A, 3B	Approval		Approval		Approval		Approval		
Abbeville	2082	Fatherhood	Approval		Approval		Approval		Approval: Board Committee Review per program standards and H3428		Conditional Approval	14	
Abbeville	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Aiken	2012	Parents as Teachers	Conditional Approval	3A, 3B	Conditional Approval	3A	Approval		Approval		Approval		
Aiken	4062	Countdown To Kindergarten	Approval		Discontinued		Previously Discontinued		Approval		Approval		
Aiken	6012	Child Care Quality Enhancement	Approval		Approval		Conditional Approval	7	Approval		Approval		
Aiken	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Aiken	7032	Child Care Scholarships	Conditional Approval	9	Approval		Conditional Approval	12	Approval		Approval		
Aiken	9022	Non-Home-based Healthcare Services	Approval		Approval		Approval		Discontinued		Discontinued		
Aiken	3444	Early Education - Public 4K	Approval		Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Aiken		Governance									Notification	15A	
Allendale	2012	Parents as Teachers	Conditional Approval	3B (67%)	Approval		Approval		Approval		Approval		
Allendale	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Allendale	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Allendale	7031	Child Care Scholarships	Approval		Approval		Approval		Approval		Approval		
Allendale	7064	Child Care Scholarships - Endowed	Approval		Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Anderson	2111	Family Literacy Model Programs	Approval		Approval		Approval		Approval		Approval		
Anderson	2141	NFP (DHEC District 1)			Approval		Approval		Approval		Approval		
Anderson	2142	NFP					Approval		Approval		Approval		
Anderson	3161	Early Education - Public 4K	Approval		Approval		Approval		Approval		Approval		
Anderson	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Anderson	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Anderson	6042	Child Care Quality Enhancement	Approval		Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Bamberg	2011	Parents as Teachers	Conditional Approval	3A, 3B	Approval		Approval		Approval		Approval		
Bamberg	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Bamberg	7031	Child Care Scholarships	Approval		Approval		Approval		Approval		Approval		Note: TA waiver needed
Bamberg		Governance									Notification	15B	
Barnwell	2122	Imagination Library	Conditional Approval	3A, 3B							For Information Only		
Barnwell	2131	Early Steps	Conditional Approval	3A, 3B	Conditional Approval	1, 3A	Conditional Approval	1, 3A	Conditional Approval	3A, 11	Conditional Approval	3A	KIPS
Barnwell	6012	Child Care Quality Enhancement	Approval		Conditional Approval	7	Conditional Approval	7	Conditional Approval	7, 11	Approval		Suspended mid-year, new TA to be hired
Barnwell	6052	Child Care Training	Approval		Approval		Approval		Conditional Approval	11	Approval		
Barnwell	7052	Child Care Scholarships - Endowed	Conditional Approval	9	Conditional Approval	12	Approval		Conditional Approval	9	Conditional Approval	12	
Barnwell	7032-DCF	Child Care Scholarships							Approval		For Information Only		
Barnwell	8022	Community Education							For Information Only		For Information Only		

County Name	Strategy Code	Strategy Name	Recommendation for FY 12	FY12 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 13	FY13 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 14	FY14 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 15	FY15 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 16	FY16 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Comments
Bamwell	4062	Countdown to Kindergarten	Discontinued		Approval		Discontinued		Previously Discontinued		Approval	NEW	
Beaufort	2012	Parents as Teachers	Approval		Approval		Conditional Approval	1,3A	Approval		Approval		
Beaufort	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Approval		Approval		
Beaufort	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Beaufort	8022	Community Education									Conditional Approval - New Non-Prevalent	NEW	
Berkeley	2011	Parents as Teachers	Approval		Approval		Approval		Approval		Approval		
Berkeley	2122	Imagination Library			Approval	New Strategy	Approval		Approval		Approval		
Berkeley	2444	Nurse-Family Partnership	New Strategy/Approval		Approval		Approval		Discontinued		Previously Discontinued		
Berkeley	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Berkeley	7031	Child Care Scholarships	Discontinued		Approval	New Strategy	Approval		Approval		Approval	Note: TA waiver needed	
Berkeley	9092	Early Identification and Referral					Approval		Approval		Approval		
Calhoun	2012	Parents as Teachers	Conditional Approval	3B (66.67%)	Approval		Approval		Approval		Approval		
Calhoun	2122	Imagination Library	Approval		For Information Only		For Information Only		For Information Only		For Information Only		
Calhoun	4062	Countdown to Kindergarten	Added during FY12		Approval		Conditional Approval	9	Approval		Approval		
Charleston	2012	Parents as Teachers	Conditional Approval	3A (71.1%), 3B (61.67%)	Approval		Approval		Approval		Approval		
Charleston	2012	Parents as Teachers - Early Head Start	For Information Only		For Information Only		For Information Only		For Information Only		For Information Only		
Charleston	2040	Trident Literacy									Approval	Begun mid-year FY 15	
Charleston	2042	Raising A Reader							Approval; Board Committee Review per program standards and H3428	New Non-Prevalent	Approval		
Charleston	2141	Nurse-Family Partnership	Approval		For Information Only		For Information Only		For Information Only		For Information Only		
Charleston	2142	Nurse-Family Partnership					Approval		Approval		Approval		
Charleston	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Approval		Approval		
Charleston	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Charleston	7032	Child Care Scholarships	Approval		Conditional Approval	9	Approval		Approval		Discontinued		
Charleston	9092	Early Identification and Referral			Approval		Approval		Approval		Conditional Approval	14	
Charleston	7062	Child Care Scholarships-Endowed	Approval		For Information Only		Discontinued		Previously Discontinued		Previously Discontinued		
Cherokee	2122	Imagination Library	Approval		Approval		Approval		Approval		Approval		
Cherokee	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Cherokee	7031-7032	Child Care Scholarships	Approval		Approval		Conditional Approval	12	Conditional Approval	13	Approval		
Cherokee	4062	Countdown to Kindergarten									Approval	NEW	
Chester	2012	Parents as Teachers	Conditional Approval	3A	Approval		Conditional Approval	1	Conditional Approval	3B, 11	Conditional Approval	12	ASQ:SE
Chester	6052	Child Care Training	Approval		Approval		Approval		Approval		Conditional Approval	14	
Chester		Governance									Notification	15C	

County Name	Strategy Code	Strategy Name	Recommendation for FY 12	FY12 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 13	FY13 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 14	FY14 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 15	FY15 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 16	FY16 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Comments
Chesterfield	2032	Incredible Years - Parent Training	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Chesterfield	2122	Dolly Parton Imagination Library	Approval		Approval		Approval		Approval		Approval		
Chesterfield	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Discontinued		
Chesterfield	9032	Nutrition Program - Backpacks			Approval	New Strategy	Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Chesterfield	9062	Resource Center									Approval	Begun mid-year FY 15	
Chesterfield	2022	MOTHEREAD	Approval		Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Clarendon	2011	Parents as Teachers	Conditional Approval	3A (56.52%), 3B (36.84%)	Conditional Approval	3A	Conditional Approval	9	Conditional Approval	3A, 3B, 11	Approval		
Clarendon	2122	Imagination Library	Approval		Approval		Approval		Approval		Approval		
Clarendon	4062	Countdown to Kindergarten	Approval		Discontinued		Approval		Conditional Approval	9	Approval		
Clarendon	6052	Child Care Training	Approval		Conditional Approval	Strategy inactive during FY12	Approval		Approval		Approval		
Colleton	2012	Parents As Teachers							Approval	New Strategy	Approval	Begun mid-year FY 15	
Colleton	2032	Parent Training - new mom hospital bags									Approval	New	
Colleton	2141	Nurse Family Partnership	Approval	11	Approval		Approval		Approval		Approval		
Colleton	3474	Early Education - Public 4K	Approval	11	Approval		Approval	Pending 4K funding decision	Previously Discontinued		Previously Discontinued		
Colleton	4062	Countdown to Kindergarten	Approval	11	Approval		Approval		Approval		Approval		
Colleton	6052	Child Care Training	Discontinued		Approval		Approval		Approval		Approval		
Colleton	7031	Child Care Scholarships								New Strategy - begun March 2015	Approval		
Darlington	2012	Parents as Teachers	Conditional Approval	1,3A,3B	Approval		Approval		Approval		Approval		
Darlington	2022	MOTHEREAD			Approval	New Strategy	Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Darlington	2032	Parent Training							Approval; Board Committee Review per program standards and H3428	New Non-Prevalent	Approval		
Darlington	3444	Early Education - Full Day Public 4K	Approval		Approval		Approval	Pending 4K funding decision	Previously Discontinued		Previously Discontinued		
Darlington	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Darlington	2041	Reach Out and Read									Conditional Approval - New Non-Prevalent	NEW	
Darlington	9002	Early Identification and Referral			Approval	New Strategy	Discontinued		Previously Discontinued		Previously Discontinued		
Dillon	2012	Parents as Teachers	Approval		Approval		Approval		Approval		Approval		
Dillon	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Dorchester	2012	Parents as Teachers			Approval	New Strategy	Approval		Approval		Approval		
Dorchester	2042	Literacy							Approval; Board Committee Review per program standards and H3428		Conditional Approval	14	
Dorchester	2141	Nurse Family Partnership			Approval		Approval		Approval		Approval		
Dorchester	2061	Parent-Child Home	Conditional Approval	1	Approval		Approval		Approval		Conditional Approval	12	ASQ
Dorchester	3444	Early Education - Half Day Public 4K	Approval	11	Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Dorchester	3474	Early Education - Extended Day 4K	Approval	11	Approval		Discontinued		Previously Discontinued		Previously Discontinued		

County Name	Strategy Code	Strategy Name	Recommendation for FY 12	FY12 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 13	FY13 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 14	FY14 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 15	FY15 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 16	FY16 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Comments
Dorchester	4062	Countdown to Kindergarten	Approval	11	Approval		Approval		Approval		Approval		
Dorchester	6012	Quality Counts							Approval; Board Committee Review per program standards and H3428	New Non-Prevalent	Approval	6	
Dorchester	6042	Child Care Quality Enhancement	Approval	new strategy and in process of hiring TA, 11	Conditional Approval	Strategy inactive during FY12	Approval		Discontinued		Previously Discontinued		
Dorchester	6052	Child Care Training	Approval	11	Approval		Approval		Approval		Approval		
Dorchester	8022	Community Education									Conditional Approval - New Non-Prevalent	NEW	
Dorchester	9092	Early Identification and Referral			Approval	New Strategy	Approval		Approval		Approval		
Dorchester		Governance									Notification	15D	
Edgefield	2082	Fatherhood			Conditional Approval	Non-Prevalent	Approval		Discontinued		Previously Discontinued		
Edgefield	2111	Family Literacy Model Programs	Approval		Approval		Approval		Approval		Approval		
Edgefield	2122	Imagination Library	For Information Only		For Information Only		For Information Only		For Information Only		For Information Only		
Edgefield	2141	Nurse-Family Partnership	Approval		Approval		Approval		Approval		Approval		
Edgefield	4062	Countdown to Kindergarten					Approval		Approval		Approval		
Edgefield	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Edgefield	7032	Child Care Scholarships	Approval		Approval		Approval		Approval		Approval		
Edgefield	4042	Summer Readiness	Approval		Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Edgefield	6042	Child Care Quality Enhancement	Approval		Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Edgefield	7062	Child Care Scholarships - Endowed	Approval		For Information Only		Discontinued		Previously Discontinued		Previously Discontinued		
Fairfield	2012	Parents as Teachers	Conditional Approval	3A, 3B	Approval		Approval		Approval		Approval		
Fairfield	2122	Imagination Library			Approval		Approval		Approval		Approval		
Fairfield	4062	Countdown to Kindergarten			Approval		Approval		Approval		Approval		
Fairfield	6012	Child Care Quality Enhancement							Approval	New Strategy	Approval		
Fairfield	7032	Child Care Scholarships	Approval		Approval		Approval		Approval		Approval		
Fairfield	9092	Early Identification							Approval	New Strategy	Approval		
Florence	2061	Parent Child Home Program	Conditional Approval	1, 9	Approval		Conditional Approval	1	Conditional Approval	3A,3B,9	Approval		
Florence	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Conditional Approval	5,6,14	Approval		
Florence	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Florence	7031-7032	Child Care Scholarships	Conditional Approval	9	Approval		Approval		Conditional Approval		Approval		
Florence	7051	Child Care Scholarships - Endowed	Approval		Approval		Approval		Approval		Approval		
Florence		Partnership Performance									Notification		
Florence		Governance									Notification	15A	
Georgetown	2084	Library-Based Programs	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Discontinued		
Georgetown	7032	Child Care Scholarships	Approval		Approval		Approval		Discontinued		Previously Discontinued		
Georgetown	9092	Early Identification and Referral			Approval	New Strategy	Approval		Approval		Approval		

County Name	Strategy Code	Strategy Name	Recommendation for FY 12	FY12 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 13	FY13 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 14	FY14 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 15	FY15 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 16	FY16 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Comments
Georgetown	2032	Child and Family Development									Conditional Approval - New Non-Prevalent	NEW	
Greenville	2040	BabySteps	For Information Only		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Greenville	2040	Play and Learn	Approval		Approval		Approval		Discontinued		Previously Discontinued		
Greenville	2140	Nurse Family Partnership			For Information Only		Approval		Approval		Approval		
Greenville	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Conditional Approval	14	
Greenville	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Greenville	7032	Child Care Scholarships	Approval		Approval	Pending entry of ASQ scores	Approval		Approval		Approval		
Greenville	8022	Community Education			Conditional Approval	Non-Prevalent	Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Greenville	2442	Nurse Family Partnership			Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Greenwood	2012	Parents as Teachers	Conditional Approval	1, 3B (70%)	Approval		Conditional Approval	1	Conditional Approval	3B	Approval		
Greenwood	2082	Fatherhood					Approval	New Non-Prevalent	Approval; Board Committee Review per program standards and H3428		Conditional Approval	14	
Greenwood	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Hampton	2012	Parents as Teachers	Conditional Approval	1, 3A, 3B	Conditional Approval	1, 3A, 3B	Approval		Approval		Approval		
Hampton	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Hampton	7031	Child Care Scholarships	Approval		Approval		Approval		Approval		Approval		
Hampton	9092	Early Identification			Approval	New Strategy	Approval		Approval		Approval		
Horry	2012	Parents as Teachers	Approval		Conditional Approval	1,3A,3B	Conditional	1, 3A,3B	Approval		Approval		
Horry	2141	NFP	Approval		Approval		Approval		Approval		Approval		
Horry	2142	Nurse Family Partnership							Approval		Approval		
Horry	3442	Preschool Expansion					Approval	New Non-Prevalent	Pending due to 4K expansion		Discontinued due to 4K expansion to Horry		
Horry	2042	Raising A Reader			Conditional Approval	Non-Prevalent	Discontinued		Previously Discontinued		Previously Discontinued		
Horry	6012	Child Care Quality Enhancement	Approval		Approval		Discontinued		Approval	New Strategy	Approval		
Horry	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Horry	7031	Child Care Scholarships									Approval	Begun in March	
Horry	7032	Child Care Scholarships	Approval		Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Horry	9092	Early Identification			Approval	New Strategy	Discontinued		Previously Discontinued		Previously Discontinued		
Jasper	2012	Parents as Teachers	Approval		Approval		Approval		Approval		Conditional Approval	3B	ACIRI
Jasper	2122	Imagination Library	Approval		Approval		Approval		Approval		Approval		
Jasper	4062	Countdown to Kindergarten	Approval		Conditional Approval	Strategy inactive during FY12	Approval		Approval		Approval		
Jasper	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Jasper	7031	Child Care Scholarships									Approval	New	
Jasper	9092	Early Identification							Approval	New Strategy	Conditional Approval	14	
Kershaw	2012	Parents as Teachers	New Strategy/Approval		Approval		Approval		Approval		Approval		
Kershaw	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Approval		Approval	6	

County Name	Strategy Code	Strategy Name	Recommendation for FY 12	FY12 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 13	FY13 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 14	FY14 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 15	FY15 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 16	FY16 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Comments
Kershaw	6062	Child Care Training	Approval		Approval		Approval		Discontinued		Previously Discontinued		
Kershaw	9092	Early Identification							Approval	New Strategy	Approval		
Lancaster	2042	Incredible Years -Parent Training and Parent Resource Center	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Lancaster	2122	Imagination Library	Approval		Approval		Approval		For Information Only		For Information Only		
Lancaster	3444	Early Education - Full Day Private 4K	Approval		Approval		Approval		Approval		Discontinued		
Lancaster	3212	Early Head-Start- Child Care Partnership									Approval	NEW	
Lancaster	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Lancaster	6042	Child Care Quality Enhancement	Approval		Approval		Approval		Discontinued		Previously Discontinued		
Lancaster	6062	Child Care Training	Approval		Approval		Approval		Approval		Discontinued		
Lancaster	9032	Nutrition Program - Backpacks			For Information Only		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Lancaster	9092	Early Identification and Referral			Approval	New Strategy	Approval		Approval		Approval		
Laurens	2011	Parents as Teachers	Conditional Approval	1	Approval		Approval		Approval		Approval		
Laurens	2042	Parents as Teachers			Approval		Approval		Approval		Discontinued		
Laurens	2444	Family Literacy Model Programs	Approval		Approval		Approval		Approval		Discontinued		
Laurens	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Laurens	6012	Child Care Quality Enhancement	Approval		Approval		Conditional Approval	7	Approval		Approval	Temporarily suspended due to loss of staff in Oct. 2014	
Laurens	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Laurens	7032	Child Care Scholarships	Conditional Approval	9	Approval		Approval		Approval		Approval		
Laurens	7062	Child Care Scholarships - Endowed	Conditional Approval	9	For Information Only		Approval		Discontinued		Previously Discontinued		
Lee	2012	Parents as Teachers	Approval		Approval		Conditional	1,3A	Approval		Conditional Approval	3B	ACIRI
Lee	2131	Early Steps	Approval		Approval		Conditional	1,3A	Approval		Approval		
Lee	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Lee	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Lee	7031, 7032	Child Care Scholarships	Approval		Approval		Approval		Approval		Conditional Approval	14 (missing data)	
Lee	8022	Community Education							Approval; Board Committee Review per program standards and H3428	New Non-Prevalent	Approval		
Lexington	2011	Parents as Teachers	Approval		Approval		Approval		Approval		Approval		
Lexington	2032	New Moms Hospital Bags	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Lexington	2142	Nurse-Family Partnership	Approval		Approval		Approval		Approval		Approval		
Lexington	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Lexington	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Approval		Approval	Temporarily suspended due to loss of staff in Feb. 2015.	
Lexington	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Marion	6012	Child Care Quality Enhancement	Conditional Approval	7	Approval		Approval		Conditional Approval	5,6	Conditional Approval	6	

County Name	Strategy Code	Strategy Name	Recommendation for FY 12	FY12 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 13	FY13 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 14	FY14 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 15	FY15 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 16	FY16 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Comments
Marion	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Marion	7031	Scholarships					Approval		Approval		Approval		
Marion	2042	Parents as Teachers	Conditional Approval	3A,3B	Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Marion		Partnership Performance									Notification		
Marion		Governance									Notification	15A	
Marlboro	2012	Parents as Teachers	Conditional Approval	3A,3B,9	Approval		Conditional	1,3A,3B	Conditional Approval	3A,3B, 11	Conditional Approval	3A, 12	KIPS, ASQ-SE
Marlboro	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Marlboro	7032	Child Care Scholarships	Conditional Approval	9	Approval		Conditional	12	Approval		Conditional Approval	13B	
McCormick	2011	Parents as Teachers	Conditional Approval	3B (72.73%)	Approval		Approval		Approval		Approval		
McCormick	2042	Reach Out and Read	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
McCormick	2092	Library Based Programs	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
McCormick	2141	Nurse-Family Partnership	Approval		Approval		Approval		Approval		Approval		
McCormick	3181	Early Education for Children under 4	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
McCormick	7032	Scholarships			Approval	New Strategy	Approval		Approval		Approval		
Newberry	2011	Parents as Teachers	Approval		Conditional Approval	3B	Approval		Approval		Approval		
Newberry	2091	Library Outreach	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Newberry	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Newberry	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Newberry	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Approval		Approval		
Oconee	2031	POPS: Principles of Parenting Successfully	Approval		Approval		Approval		Approval		Approval		
Oconee	2042	TV OFF NEURONS ON	Approval		Approval		Approval		Discontinued		Previously Discontinued		
Oconee	3444	Early Education - Full-Day Public 4K	Approval		Approval		Approval		Pending due to 4K expansion		Discontinued		
Oconee	4062	Countdown to Kindergarten	Approval		Approval		Approval		Approval		Approval		
Oconee	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Oconee	7032	Child Care Scholarships									Approval	NEW	
Orangeburg	2131	Early Steps	Added during FY12		Conditional Approval	1, 3A, 9	Approval		Conditional Approval	1,9	Approval		
Orangeburg	2122	Imagination Library	For Information Only		For Information Only		For Information Only		For Information Only		Approval		
Orangeburg	4062	Countdown to Kindergarten							Approval		Approval		
Orangeburg	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Approval		Approval		
Orangeburg	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Orangeburg	7031, 7032	Child Care Scholarships	Approval		Approval		Approval		Approval		Approval		
Pickens	2011	Parents as Teachers	Approval		Approval		Approval		Approval		Approval		

County Name	Strategy Code	Strategy Name	Recommendation for FY 12	FY12 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 13	FY13 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 14	FY14 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 15	FY15 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Recommendation for FY 16	FY16 Corrective Action Plan Components (Rationale Codes + Add'l Actions Needed)	Comments
Pickens	2042	Book Flood	Approval		Approval		Approval		Approval; Board Committee Review per program standards and H3428		Approval		
Pickens	2070	Healthy Families	Approval		Approval		Approval		Discontinued		Previously Discontinued		
Pickens	2111	Family Literacy Model Programs	Approval		Approval		Approval		Approval		Approval		
Pickens	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Approval		Discontinued		
Pickens	6052	Child Care Training							Approval		Approval		
Pickens	7032	Child Care Scholarships									Approval	NEW	
Pickens	8022	Community Education									Conditional Approval - New Non-Prevalent	NEW	
Pickens	9092	Early Identification and Referral			Approval	New Strategy	Approval		Approval		Approval		
Richland	2012	Parents as Teachers	Conditional Approval	3A (19.23%), 3B (26.67%)	Approval		Approval		Conditional Approval	3B	Approval		
Richland	2141	Nurse-Family Partnership	Approval		For Information Only		For Information Only		For Information Only		For Information Only		
Richland	3210, 3211, 3212	Early Head Start	Approval		Approval		Approval		Approval		Approval		
Richland	6012	Child Care Quality Enhancement	Approval		Approval		Approval		Approval		Approval		
Richland	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Richland	9024	Nurse Consultant	Approval		Approval		Approval		Discontinued		Previously Discontinued		
Saluda	2042	Parents as Teachers	Conditional Approval	3A (42.86%), 3B (70%)	Approval		Approval		Discontinued		Previously Discontinued		
Saluda	2032	Triple P					Approval	New Non-Prevalent	Approval; Board Committee Review per program standards and H3428		Approval		
Saluda	2112	Family Literacy			Approval	New Strategy	Approval		Approval		Approval		
Saluda	4062	Countdown to Kindergarten							Approval	New Strategy	Approval		
Saluda	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Saluda	6012	Child Care Quality Enhancement	Approval		Approval		Discontinued		Previously Discontinued		Approval	NEW	
Saluda	7032	Child Care Scholarships									Approval	NEW	
Spartanburg	2140	Nurse-Family Partnership	For Information Only		For Information Only		For Information Only		For Information Only		For Information Only		
Spartanburg	2142	Nurse-Family Partnership	For Information Only						Approval		Approval		
Spartanburg	3210-3211-3212	Early Head Start	Approval		Approval		Approval		Approval		Approval		
Spartanburg	6012	Child Care Quality Rating System	Approval		Approval		Approval		Approval		Approval	Data to be entered into FSDC system	
Spartanburg	6012	Childcare Quality Enhancement (CSA)	Approval		Approval		Discontinued		Previously Discontinued		Previously Discontinued		
Spartanburg	8022	Community Education									Approval	New Strategy	
Spartanburg		Partnership Performance									Notification		
Sumter	2011	Parents as Teachers	Conditional Approval	3A (68.12%), 3B (66.67%), 5	Conditional Approval	3B	Approval		Approval		Conditional Approval	12	ASQ,SE
Sumter	2122	Imagination Library	Approval		Approval		Approval		Conditional Approval	14	Approval		
Sumter	6052	Child Care Training	Approval		Approval		Approval		Approval		Approval		
Sumter	7031	Child Care Scholarships	Conditional Approval	No data, large balance of unallocated scholarships	Approval		Approval		Conditional Approval	13,14	Conditional Approval	12	

ATTACHMENT E: Board of Trustees Minutes
(April 10, 2014)

South Carolina First Steps Board of Trustees
3rd Floor Senate Conference Room, SC Statehouse
April 10, 2014
Minutes

Members Present:

Lewis Smoak
Judith Aughtry
Lisa Van Riper (by telephone)
Reece Yandle (by telephone)
Jennifer McConnell
Julia Ellen Davis
Julie Hussey
Rep. Jerry Govan
Rep. Rita Allison
Linda O'Quinn
Rick Noble

Non-Voting Members Present:

Rosemary Wilson
Mary Lynn Diggs
Hewlan Blivens
Jennifer Buster
Tim Ervolina
Anne Marie Dwyer
Sarah Crawford

Staff and Others Present:

Susan DeVenny
Betty Gardiner
Leesa Benngio
Debbie Robertson
Mary Anne Mathews
Linda Leonard
Dan Wuori
Dave Wilson
Desiree Watson
Russell Brown

Mr. Smoak welcomed the Board and noted the presence of a quorum and asked new Trustees Jennifer McConnell and Hewlan Belvins of the State Library to introduce themselves.

The Board unanimously approved the December 2013 minutes.

Ms. DeVenny gave an overview of the SC Read In, held earlier in the day. Over 1,600 children and adults attended the statehouse event. Governor Haley issued a proclamation marking the Week of the Young Child. As a part of the day, First Steps trustees were also invited to view a new documentary, "When the Bough Breaks," produced by the Education Oversight Committee and directed by Bud Ferrillo. Mr. Ferrillo, who also produced "The Corridor of Shame," directed the viewing. Copies will be made available at a later date.

Mr. Smoak call on Ms. Davis to present a report from the Program and Grants Committee. On behalf of her committee, Ms. Davis reviewed the proposed FY14 Program and Accountability Standards, reviewed by the committee twice during March and April. The Board unanimously approved the standards document as recommended by committee.

Mr. Smoak called on Ms. Van Riper for a report from the Strategic Planning and Evaluation Committee. Ms. Van Riper noted that the committee had met with representatives of the board's external contractor (Compass Evaluation) on March 21, 2014 to review a proposed evaluation plan. Ms. Van Riper noted that, per recommendations of the Legislative Audit Council (and as included in H.3428), the 2014 evaluation will focus on the legislative goals of the First Steps initiative. This audit will and be supplemented by additional external reviews of each prevalent program investment. Ms. Van Riper noted this section of the bill. Dr. Wuori called the Board's attention to their Board packets for an excerpt from Compass' presentation to the committee. Ms. Van Riper detailed the schedule of the external evaluation as pursuant to the FY14 general appropriations bill.

Mr. Smoak called on Ms. Aughtry for a report from the Finance and Administration Committee. Ms. Aughtry reported that the committee met on Thursday, March 27, 2014. On behalf of the committee, Ms. Aughtry reviewed two action items for the board's consideration. Ms. Aughtry reviewed draft FY15 Partnership allocations. Mr. Noble noted that the proposed allocations include one-time funding like FY14, which may not be sustainable into FY16. Ms. DeVenny reported that staff plan technical assistance on this point to ensure partnerships are planning ahead. Representative Allison suggested that state allocations might be supplemented by private fundraising. Rep. Govan agreed that this funding could create an issue in future years, but noted that this is similar to the funding challenge faced by the General Assembly each year. The Board unanimously approved the committee recommendation, with Mr. Noble abstaining as related to Richland County First Steps.

Ms. Aughtry reviewed waiver requests from partnerships exceeding the 8% administrative overhead cap and/or failing to achieve the required 15% match. Ms. Aughtry noted that given the small size of local partnership budgets that the 8% cap presents an ongoing challenge. Ms. Aughtry noted that the LAC recommendation for an external review of partnership administrative costs had been incorporated in the bill (H3428). Mr. Brown reviewed the list of partnerships requesting waivers and a summary of their rationale, then responded to trustee questions.

Upon a motion from Mr. Govan and a second by Ms. O'Quinn, the partnership administrative waivers were approved unanimously.

Ms. Hussey made a motion that match waivers be granted this year, but asked for a report in future years to note whether partnerships accepted technical assistance in this area. The motion was seconded by Ms. Davis and the Board adopted the match waivers unanimously.

Ms. DeVenny began her director's report, noting Mr. Smoak's Week of the Young Child op-ed, which appeared in Columbia newspaper The State. Ms. DeVenny briefly reviewed the content of "When the Bough Breaks." Several Trustees commented on the positive nature of the film, which highlighted several First Steps programs, including Nurse Family Partnership, Parents as Teachers, and Early Steps to School Success.

Ms. DeVenny asked Ms. Hussey to introduce Dave Wilson and Desiree Watson of McAllister Communications. Mr. Wilson described McAllister's recent work to assist with communications training for partnerships, launch social media accounts, and overhaul of the scfirststeps.org website.

Ms. DeVenny provided the Board with a brief legislative update, noting that Read to Succeed passed the Senate with an amendment that would expand 4K statewide using the CDEPP model. The First Steps bill has passed out of the full House and is currently before the Senate Education Committee. Ms. DeVenny asked Ms. Kristie Musick for a brief BabyNet update. Ms. Musick noted the BRIDGES data system has launched, providing the state with the opportunity for first-ever full electronic education records for students who are served by Part C. BRIDGES will also enable enhanced tracking of system costs.

Ms. DeVenny asked Dr. Wuori to provide a brief update on the state's expanded four-year-old kindergarten program. Dr. Wuori reviewed the First Steps 4k impact for the year, noting an increase in both student and provider enrollment by 120% during FY14.

There being no further business the meeting was adjourned.

ATTACHMENT F: Board of Trustees Minutes
(March 19, 2015)



South Carolina First Steps Board of Trustees

March 19, 2015, 2pm
Parks, Recreation, Tourism Conference Room
Statehouse Grounds

Meeting Minutes

Members Present (22):

Ken Wingate, Chair
Superintendent Molly Spearman
Representative Rita Allison
Senator Mike Fair
Julie Hussey, Vice-Chair
Lisa Van Riper, Secretary
Judith Aughtry
Julia-Ellen Davis
Walter Fleming
Reece Yandle
Susan Alford
Evelyn Patterson
Rick Noble
Mary Lynn Diggs
Sue Williams
Alexia Newman
Tim Holt
Roger Pryor
Christian Soura (by teleconference)
Tracy Lamb (by teleconference)
Beverly Buscemi (by teleconference)
Jennifer McConnell (by teleconference)

Members Absent (2):

Senator Joel Lourie – Excused
Representative Jerry Govan – Excused

Others Present:

Rep. Gary Clary – SC House Legislative Oversight Committee
Rep. Joe Jefferson – SC House Legislative Oversight Committee
Ryan Brown- SC Department of Education
Dave Wilson – McAlister Communications
Leslie Anderson – Leslie Anderson Consulting
Bunnie Ward – SC Education Oversight Committee
Dana Yow – SC Education Oversight Committee
Jim Riddle - Lexington County First Steps

Patti Wilkes - Fairfield County First Steps
Mark Barnes – SC First Steps
Dorothy Priester - Cherokee County First Steps
Sally Cauthen - Senate Education
Martha Strickland - SC First Steps
Anthony Broughton - SC First Steps
LaDrica Christian - SC First Steps
Marley Via – SC First Steps
Kristine Jenkins - SC First Steps
Cassandra Johnson - SC First Steps
Barbara Black - SC First Steps
Debbie Robertson - SC First Steps
Rodney Jenkins – Richland County First Steps
Joy Mazur - SC First Steps
Rosemary Wilson – SC Department of Health and Environmental Control
Penny Danielson – SC Department of Education
Kristie Musick - SC First Steps BabyNet
Megan Branham – Children’s Trust
Whitney Tucker - Children’s Trust
Lisa Dial - Senator Fair’s Office
Pierce McNair – House Education Committee
Betty Gardiner – SC First Steps
Mellanie Jinnette – SC Department of Education
Callison Richardson – United Way of the Midlands
Linda Leonard – SC First Steps
Mary Anne Mathews - SC First Steps
Cindy Bagwell – NC Department of Public Instruction

Welcome and Introductions

Mr. Wingate welcomed the Board and called the meeting to order at 2pm. He noted the presence of a quorum and reminded those gathered that the meeting was being held in compliance with the SC Freedom of Information Act.

Mr. Wingate welcomed Rep. Gary Clary and Rep. Joe Jefferson, both members of the South Carolina House Legislative Oversight Subcommittee currently reviewing SC First Steps. He welcomed Susan Alford, the new director of the SC Department of Social Services and Superintendent Molly Spearman.

Mr. Wingate provided a brief chairman’s report, noting that Act 287 has downsized and restructured the Board. He thanked board members for their participation in an important collaborative process. He introduced the Draft Principles of Engagement Document provided with the Board materials. Mr. Wingate reviewed the Board’s strategic planning mandate, noting that the Board’s new strategic plan will be a major focus for the coming year.

He reviewed the Board’s decision to begin use of a consent agenda, noting that it is a tool for efficiency but not an effort to “fast forward” through major discussion items. He encouraged members to “pull out” items that they wish to discuss.

He reviewed the agenda and laid out expectations related to the time allocated to each.

Superintendent Spearman Presentation

Mr. Wingate introduced Superintendent Molly Spearman to provide remarks to the board. Supt. Spearman introduced herself and thanked the Board members for their longstanding commitment to early childhood education. She shared the Profile of the Ready Graduate, noting that it was a set of goals related to college, career, and citizen readiness that all SC stakeholders should be working toward. The Department will be setting targets for college and career readiness and measuring progress toward them. She expressed her appreciation for the work of First Steps and pledged a strong collaboration between the organizations.

North Carolina Department of Public Instruction Presentation: Dr. Cindy Bagwell

Ms. DeVenny noted that NC leads the 10-state Kindergarten Entry Assessment collaborative, of which SC is a collaborating state. Ms. DeVenny noted that the Program and Grants Committee had reviewed a presentation about the NC work, and determined it to be useful for the board to preview as they continue their work on the assessment of school readiness.

Ms. DeVenny introduced Dr. Cindy Bagwell of the NC Department of Public Instruction, who joined by telephone. Before Dr. Bagwell's remarks, the Board viewed several minutes of a video about NC's new formative assessment process. Dr. Bagwell gave a report about NC's pilot work to develop both a kindergarten entry assessment and a formative assessment process designed to support students and teachers through the third grade. The Kindergarten Entry Assessment is completed during the first 60 days of school, after which time students transition into an ongoing K-3 formative assessment process.

After Dr. Bagwell's presentation, Julia-Ellen Davis led the Board through conversation related to their opinions and desires related to a school readiness assessment for SC children. The notes below were taken during the ensuing discussion.

- ***Ms. Davis asked: What do we want a school readiness assessment to provide for students?***
 - Want the child to be able to succeed: provide feedback, affirmation, direction
 - Time for one-on-one time with teacher, relationship building. A comfortable time for students.
 - Want to convey information with sensitivity, positivity
 - If we aren't doing this for students, then who are we doing it for?
 - Provide motivation and a hunger for learning
 - Provide snapshot of strengths and weaknesses (to teacher for instructional planning)
 - A measure of student growth

- ***Ms. Davis asked: What do we want a school readiness assessment to provide for parents?***
 - What should they expect of their child? Information to inform against objective range.
 - Results provided to compare against milestones
 - Help develop a relationship of trust
 - Bridge of communication...two way conversation between parents and teachers
 - Parent friendly in its delivery, help parents to understand. Uses accessible language.
 - Letting parents know what their children need - insight as to what they can do to support their child's areas of weakness

- Sensitivity to range of normal (don't let parenting be competitive)
- Establishing communication and relationships
- ***Ms. Davis asked: What do we want a school readiness assessment to provide for teachers?***
 - Snapshot of where the child is at that moment. In context that it is just for that moment.
 - Flexibility.
 - Opportunity to document progression in all areas.
 - Encourage risk-taking in children, help work on their weaknesses.
 - Assessment process needs to be sensitive to teacher overload.
 - Should not be punitive to teachers.
 - Tool that isn't influenced by student behavior. Some unable to focus, sit down and "be assessed."
 - Help inform/drive instruction.
 - The only thing we assess is content knowledge...Needs to measure characteristics and skills like integrity and perseverance. Approaches to learning.
 - Give teachers flexibility to reinforce important attributes like caring, integrity.
- ***Ms. Davis asked: What do we want a school readiness assessment to provide for policymakers?***
 - Data that allows them to make important decisions as they are setting policy.
 - Help them understand the goals by age group and how do children measure up?
 - Confidence that assessments are accurate.
- ***Ms. Davis asked: What do we want a school readiness assessment to provide for doctors and others who support students?***
 - Is there a way to use assessment broadly to inform other key stakeholders?
 - Is there a way to gather information from stakeholders such as pediatricians?

Ms. Davis thanked the Board for their input, and noted that she would work to collect additional feedback from those who were unable to be present, and would provide an update at the next board meeting.

Committee Reports

1. Strategic Planning and Evaluation Committee (Chair, Lisa VanRiper)

Ms. Van Riper reported that the Compass Evaluation is complete and now prepared for transmission to the Board and General Assembly. Mr. Wingate reminded those gathered that the report is an external process, that the Board and staff are not connected to its completion or release. He requested that First Steps convey a sense of urgency to the evaluators and external panel regarding release.

Mr. Wingate introduced Leslie Anderson for an update on the strategic planning process. Ms. Anderson reviewed the values, assumptions, timeline and key phases of the proposed strategic planning process. The plan will be designed to gather ample feedback from stakeholder groups statewide and to develop interagency recommendations designed to advance the state's entire early childhood system. Mr. Wingate notified the Board that he will be calling for a May strategic planning work session and asked trustees to prioritize their participation.

The process will begin with an electronic stakeholder survey in the coming weeks. This will be followed by a series of regional stakeholder meetings loosely constructed around the Education and Economic Development Act's Regional Education Centers.

2. Program and Grants Committee (Chair, Julia-Ellen Davis)

Ms. Davis reviewed a new strategy request from Colleton County, which requests using \$35,000 in unspent carry forward to begin a childcare scholarship strategy. **After review, Ms. Davis made a motion to approve the strategy, with a second by Mr. Flemming. The strategy request was approved unanimously.**

3. Finance and Administration Committee (Chair, Judith Aughtry)

Ms. Aughtry led the Board through two options related to FY16 partnership planning allocations:

- Option A would hold the partnerships at their existing FY15 levels, while
- Option B would entail an update of the formula's demographic data, which would result in fluctuations to 30 partnerships (those above the \$138,000 minimum).

Mr. Noble noted his conflict of interest as a local partnership director.

Walter Fleming made a motion to adopt Option A, which would keep partnerships at their FY15 levels. Ms. Van Riper seconded the motion. The Board adopted the motion, with Ms. Aughtry voting against the motion and Mr. Noble and Ms. Diggs abstaining.

Mr. Noble distributed a document he prepared depicting fluctuations to partnerships' budgets under Options A and B. Mr. Wingate asked that Mr. Noble's document be included as an attachment to the minutes (attached.)

Mr. Mark Barnes reviewed the monthly finance report.

Mr. Noble requested that IRS Form 990 be removed from the consent agenda. He called trustees' attention to the fact that he is listed as an interested party as the Director of Richland County First Steps and noted that the amount listed as an allocation to RCFS is not his salary, nor the exact amount of the partnership's allocation.

The Board unanimously adopted the draft IRS Form 990 as presented.

Ms. Davis requested that the Program and Grants committee's action items (FY16 partnership standards and new strategy requests) be pulled from the consent agenda for action. The Board unanimously adopted both items.

Upon a motion by Mr. Noble, the remainder of the consent agenda was tabled. The Board voted to adopt this motion. Items requiring Board approval in order to become part of the official record of the meeting will be discussed at the next regularly scheduled Board meeting.

Chairman's Closing Remarks

Mr. Wingate asked the board to expect a specially-called work session on the strategic plan, and asked trustees to be prepared for a few extended sessions during the next few months to enable full discussion on the board's strategic plan.

With no further business, the meeting was adjourned at 4:45pm.

SACRIFICE % BY DONOR CPS

	Allocation	Option 1	Sacrifice	Option 1 Sacrifice %	Option 2	Sacrifice	Option 2 Sacrifice %
Abbeville							
Aiken	\$ 405,754	\$ 379,278	\$ 26,476	6.53%	\$ 389,079	\$ 16,675	4.11%
Allendale							
Anderson	\$ 447,685	\$ 421,770	\$ 25,915	5.79%	\$ 429,287	\$ 18,398	4.11%
Bamberg							
Bamwell							
Beaufort	\$ 355,102	\$ 347,533	\$ 7,569	2.13%	\$ 340,509	\$ 14,593	4.11%
Berkeley	\$ 499,197	\$ 460,808	\$ 38,389	7.69%	\$ 478,682	\$ 20,515	4.11%
Calhoun							
Charleston	\$ 721,266	\$ 691,660	\$ 29,606	4.10%	\$ 691,624	\$ 29,642	4.11%
Cherokee	\$ 200,633	\$ 193,680	\$ 6,953	3.47%	\$ 192,388	\$ 8,245	4.11%
Chester	\$ 145,203	\$ 143,766	\$ 1,437	0.99%	\$ 139,236	\$ 5,967	4.11%
Chesterfield	\$ 173,312	\$ 164,844	\$ 8,468	4.89%	\$ 166,190	\$ 7,122	4.11%
Clarendon	\$ 140,809	\$ 138,000	\$ 2,809	1.99%			0.00%
Colleton	\$ 152,714	\$ 151,958	\$ 756	0.50%	\$ 146,438	\$ 6,276	4.11%
Darlington	\$ 227,441	\$ 215,197	\$ 12,244	5.38%	\$ 218,094	\$ 9,347	4.11%
Dillon	\$ 168,079	\$ 168,384	\$ (305)	-0.18%	\$ 161,172	\$ 6,907	4.11%
Dorchester	\$ 352,382	\$ 331,636	\$ 20,746	5.89%	\$ 337,901	\$ 14,481	4.11%
Edgefield							
Fairfield							
Florence	\$ 403,861	\$ 374,706	\$ 29,155	7.22%	\$ 387,264	\$ 16,597	4.11%
Georgetown	\$ 168,856	\$ 161,572	\$ 7,284	4.31%	\$ 161,917	\$ 6,939	4.11%
Greenville	\$ 1,037,653	\$ 996,431	\$ 41,222	3.97%	\$ 995,009	\$ 42,644	4.11%
Greenwood	\$ 222,154	\$ 207,998	\$ 14,156	6.37%	\$ 213,024	\$ 9,130	4.11%
Hampton							
Horry	\$ 591,951	\$ 568,076	\$ 23,875	4.03%	\$ 567,624	\$ 24,327	4.11%
Jasper							
Kershaw	\$ 191,953	\$ 184,273	\$ 7,680	4.00%	\$ 184,064	\$ 7,889	4.11%
Lancaster	\$ 221,736	\$ 217,269	\$ 4,467	2.01%	\$ 212,624	\$ 9,112	4.11%
Laurens	\$ 211,797	\$ 201,981	\$ 9,816	4.63%	\$ 203,093	\$ 8,704	4.11%
Lee							
Lexington	\$ 624,611	\$ 605,320	\$ 19,291	3.09%	\$ 598,942	\$ 25,669	4.11%
Marion	\$ 160,309	\$ 151,447	\$ 8,862	5.53%	\$ 153,721	\$ 6,588	4.11%
Marlboro	\$ 140,792	\$ 138,000	\$ 2,792	1.98%			0.00%
McCormick							
Newberry	\$ 143,350	\$ 138,000	\$ 5,350	3.73%			0.00%
Oconee	\$ 195,069	\$ 191,721	\$ 3,348	1.72%	\$ 187,052	\$ 8,017	4.11%
Orangeburg	\$ 296,799	\$ 298,541	\$ (1,742)	-0.59%	\$ 284,601	\$ 12,198	4.11%
Pickens	\$ 266,193	\$ 250,427	\$ 15,766	5.92%	\$ 255,253	\$ 10,940	4.11%
Richland	\$ 814,490	\$ 791,345	\$ 23,145	2.84%	\$ 781,017	\$ 33,473	4.11%
Saluda							
Spartanburg	\$ 685,538	\$ 657,246	\$ 28,292	4.13%	\$ 657,365	\$ 28,173	4.11%
Sumter	\$ 333,332	\$ 323,901	\$ 9,431	2.83%	\$ 319,633	\$ 13,699	4.11%
Union							
Williamsburg	\$ 142,946	\$ 145,529	\$ (2,583)	-1.81%			0.00%
York	\$ 515,653	\$ 486,966	\$ 28,687	5.56%	\$ 494,461	\$ 21,192	4.11%

Notes:

Formula Allocation only indicates 12 CPs requiring subsidies to meet the \$138,000 minimum level

Using Options 1

- 16 (highlighted yellow) CPs are currently at the minimum level of \$138,000 - FY 15 Allocation
- 3 (highlighted red) of the 16 CPs received additional funds per the FY 16 Formual Allocation - now losing from last yr
- Sacrifice percentages of change from Formual Allocations are not consistent throughout the CPs

Using Options 2

- 17 CPs are at the minimum level of \$138,000
- 1 CP lost \$7,529 from last year's allocation, which move them to the minimum level of \$138,000, even though their FY 16 Formual Allocation (\$142,946) is above the minimum level
- Sacrifice percentages of change from Formual Allocations are consistent throughout the CPs

ATTACHMENT G:

2014 Annual Report



Getting children ready for school.

SOUTH CAROLINA

2014 ANNUAL REPORT



2014 BOARD of TRUSTEES

Mr. Ken Wingate, Chair
Governor's Designee

Ms. Lisa Van Riper, Secretary
Parent of a Young Child

The Honorable Mike Fair
SC Senate

The Honorable Joel Lourie
SC Senate

The Honorable Rita Allison
SC House of Representatives

The Honorable Jerry Govan
SC House of Representatives

Ms. Mellanie Jinnette
Superintendent of Education's Designee

Rev. Reece Yandle
Early Childhood Educator

Ms. Judith Aughtry
Parent of a Young Child

Ms. Tracy Lamb
Business Community

Mr. Roger Pryor
Child Care Provider

Mr. Rick Noble
Early Childhood Educator

Ms. Julia-Ellen Davis
Early Childhood Educator

Ms. Jennifer McConnell
Child Care Provider

Mr. Timothy Holt
Business Community

Ms. Alexia Newman
Medical/Child Care and Development

Ms. Evelyn Patterson
Early Childhood Educator

Mr. Walter Fleming, Jr.
Business Community

Ms. Julie Hussey
Parent of Young Child

Ms. Mary Lynne Diggs
SC Head Start Collaboration Office

Ms. Catherine Templeton
SC Department of Health & Environmental Control

Mr. Tony Keck
SC Department of Health & Human Services

Dr. Beverly Buscemi
SC Department of Disabilities & Special Needs

Ms. Amber Gillum
SC Department of Social Services

Ms. Sue Williams
The Children's Trust of South Carolina

DIRECTOR'S MESSAGE



In my journeys across South Carolina, families tell me why they choose to live and work in the Palmetto State. Among the many reasons cited: our friendly people, our quality of life, our beautiful mountains and beaches, our productive farms and businesses. However, it is our commitment to children and families that stands out most.

Across the nation, few states can top South Carolina's commitment to very young children.

In 2014, our elected leaders expanded four year-old kindergarten, put additional attention on the needs of very young children, and reauthorized First Steps –our state's early childhood initiative focused on increasing school readiness. Built over 15 years, First Steps' public-private partnerships have harnessed assets locally and at the state level to ensure parents have the tools they seek to prepare their children for school success. In addition, this year the legislature created South Carolina's first legal "school readiness" definition and added new preK and K assessments to help guide instruction. Finally, with added resources focused on early reading through Read to Succeed, South Carolina aims to close the achievement gap for our students.

"And how are the children?" is a legendary greeting among the Masai people. The condition of children denotes the condition of a state and nation. In South Carolina, we always want the answer to be, "The children are well." Many thanks to our elected leaders, volunteers, staff and partners for working together to ensure we place children at the front when making decisions about the future of South Carolina.

Many thanks for your support of our youngest learners,

A handwritten signature in blue ink that reads "Susan".

Susan DeVenny
Director

ABOUT FIRST STEPS

As the state's comprehensive school readiness initiative, SC First Steps helps parents prepare their young children for school and life success.

Why We Need to Start Early

Investing in strong early learning experiences for kids makes good sense. We know from brain research that 90% of the brain's full potential is formed by age four. We have a great opportunity to help families and caregivers during this critical window. Studies show that positive early experiences for young children help shape their long-term success, while also saving taxpayer dollars in long-term education and social impact costs.

How First Steps Can Help

In each of South Carolina's 46 counties, First Steps expands early learning services available for young children, their families and caregivers. These services fall in six important areas:



How You Can Find Us

Each county is served by a local First Steps Partnership, whose local board of directors and staff are in place to meet the school readiness needs of the community. First Steps provides funding and technical assistance to the state's network of independent, non-profit First Steps Local Partnerships so that services are available to the children who need them.

According to a recent report by Compass Evaluation & Research, through this network "First Steps often and in many ways reaches beyond a circle of agencies and administrators to engage local community stakeholders such as parents, educators, and the Community of Faith in investing in early childhood, with investments

occurring on the family, caregiver, and neighborhood level. It is these investments that often make the difference for at-risk and high-need children, as these children often require attention and support from multiple sources.”

BabyNet

SC First Steps works with other agency and community partners to offer BabyNet, South Carolina’s early intervention program under Part C of the federal Individuals with Disabilities Education Act (IDEA). BabyNet provides early intervention services to infants and toddlers (birth-36 months) with identified disabilities and/or developmental delays.



Home Visitation Programs

We also sponsor two nationally-acclaimed, evidence-based home visitation programs for families in South Carolina: Nurse-Family Partnership (NFP) and Parents as Teachers (PAT).



Private-Public 4K Expansion

In 2014, we began our 8th year of service to SC’s eligible 4-year olds, through our First Steps 4K program. This year, the Legislature expanded this vital preschool program to serve low income children in 61 of the state’s school districts.



MEASURING OUTCOMES

Each of the six color blocks of the First Steps logo represents a core area of service, outlining our comprehensive strategy to prepare children for longterm school success. With **measurable outcomes across each of its six school readiness strategy areas**, First Steps is getting results.



Healthy Start

We begin with a focus on providing a healthy start to life. This includes prenatal and post-partum services for both mother and baby. In 2007, First Steps collaborated with key philanthropic and agency partners to bring Nurse-Family Partnership to SC having a significant impact on reducing premature births and Medicaid costs.



Family Strengthening

Our home visitation strategies, such as Parents as Teachers, Parent-Child Home and Early Steps to School Success, are helping parents understand their responsibilities to care for and be positive models for their children. As a result of First Steps' intervention and parenting support, 66% of clients initially assessed at "low" levels of parenting have achieved moderate or high levels of parenting skill.



Early Intervention

According to recent federal evaluations, outcomes for clients participating in BabyNet early intervention programs are above national averages. Babynet matches the special needs of infants and toddlers who have disabilities and/or developmental delays with customized, community-based resources.



Quality Childcare

Quality childcare starts with quality childcare providers. Our quality enhancement and training strategies lead to improved teacher-student interaction, which research shows has a significant impact on a child's development and success in school.



Early Education

Private-public partnerships through First Steps 4K (CDEPP) have led to significant cost efficiencies in the delivery of publicly funded 4K. One recent analysis suggests First Steps is achieving comparable results, without the need for costly capital construction, for 80 cents on the dollar.



School Transition

Each of the corresponding blocks of services leads ultimately to the goal of transitioning children successfully to school. Programs like Countdown to Kindergarten and From Day One to Grade One are ultimately preparing children for school success.

HEALTHY START



School readiness starts with healthy children. First Steps is the state sponsor of **Nurse-Family Partnership (NFP)**, an evidence-based home visitation program matching nurse home visitors with first-time, low-income mothers. A recent birth-outcome analysis conducted by DHEC's Bureau of Maternal Child Health showed low-income mothers receiving this evidence-based nurse home visitation program were:



- **63% less likely** to require admission to a **neonatal intensive care unit (NICU)**
- **Half as likely** to be **born pre-term** (less than 37 weeks)
- **Half as likely** to be born at a **low birth weight**



Independent research suggests that 52% of SC children born at an extremely low birth weight fall into one or more categories of school failure (retention, achievement) by the third grade, making preventative programs such as NFP critical to improving early school success.



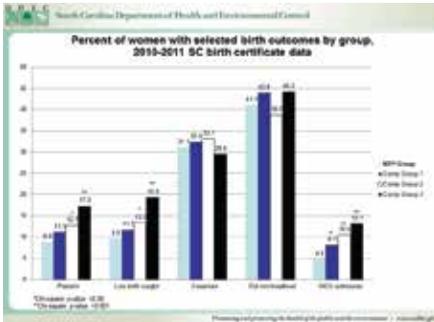
Brought to South Carolina by SC First Steps and The Duke Endowment in 2008, Nurse Family Partnership has a large collaborative footprint in 2014, serving South Carolina mothers in more than 20 counties from nine regionally-based hubs. Since inception, South Carolina NFP has:



- Served **more than 2,700 low-income mothers** and their babies
- Delivered **more than 55,000 nurse home visits**
- Grown from an original client capacity of 600 to **more than 1,200 slots**.



EXTERNAL ASSESSMENT OF NFP OUTCOMES: Birth Outcomes for SC NFP Clients Delivering Live Births in 2010-2011 (SC DHEC, Maternal Child Health Bureau - February 2013)



Conclusions

- NFP participants differ substantially in terms of risk factors compared to potentially eligible non-participants, even in the same geographic areas.
 - DHEC sites, live births in 2010-2011
- After accounting for these differences, these NFP participants have significantly lower prevalence of LBW, PTB, and NICU admissions.

- NFP Group
- Comparison Group 1: All Medicaid Births
- Comparison Group 2: Medicaid Births at Hospitals Where NFP Clients Delivered
- Comparison Group 3: Medicaid Births at Hospitals Where NFP Clients Delivered
 - with Clients Matched on Mother's Race, Mother's Education and WIC Status

Program Model	2014
<p>Nurse-Family Partnership (NFP)</p> <p>Nurses paired with first-time mom prenatally to age 2; training, support and referral</p>	<p>847 mothers 19 counties 11,937 visits</p>
<p>Healthy Families</p> <p>In-home visits by family support workers provide parents with childhood developmental information in an effort to prevent abuse.</p>	<p>25 children 26 families 298 visits</p>

FAMILY STRENGTHENING



Families are a child's first and best teachers. First Steps supports parents statewide as they prepare their children for school success. As the state sponsor of **Parents as Teachers**, South Carolina's largest evidence-based parent education program, the state First Steps office serves as the PAT statewide technical assistance structure to all PAT programs at no cost to schools or communities.



In addition, First Steps underwrites additional parenting models including **Parent-Child Home** and **Early Steps to School Success**. Since inception, First Steps has delivered **more than half a million parent education home visits** to help parents prepare children for school.



- In 2007, the SC First Steps Board of Trustees created **comprehensive, statewide program fidelity standards** that often exceed those of the national, evidence-based models on which they are based.



- **Evaluation Notes Significant Improvements in Parenting:** In a recent external evaluation, **66% of parents** who initially scored at a low level of parenting skill **improved their abilities to moderate or high levels** after participation in a First Steps parent education program. (HighScope, Keys to Interactive Parenting Scale Analysis, 2010)



- **Evaluation Notes Significant Improvements in Interactive Literacy:** Both parents and children participating in First Steps family strengthening programs demonstrate **improvements in early literacy**, with **parents increasing their use/demonstration of key early literacy strategies by 32%** (pre to post) and **children increasing their own demonstration of these behaviors by 33%**. (HighScope, Adult-Child Interactive Reading Inventory Analysis, 2010)



Home Visitation Includes

- Personal Visits with Families
- Child Developmental Screening & Assessment
- Community Resource & Referral



"Under First Steps' leadership, Parents as Teachers in South Carolina has set the national example in fidelity and accountability. We hold you up to other states doing home visitation as an example of how it can be done right."

*- Scott Hippert, CEO,
Parents as Teachers
National Office*

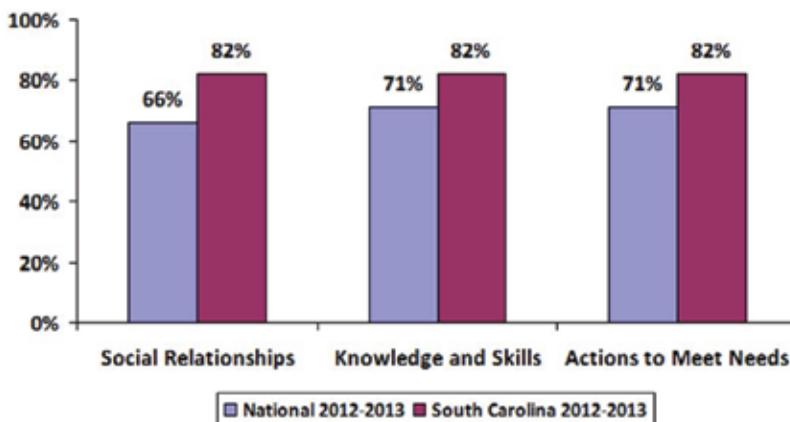
Program Model	2014
<p>Parents as Teachers (PAT) Parent mentor trained to enhance effective parent-child interaction, developmental parenting skills, and literacy for children 0-5. Developmental screenings, validated curriculum, and assessment.</p>	<p>1,388 families 1,497 children 24,694 visits 31 counties</p>
<p>Parent-Child Home (PCH) Parent mentor trained to support effective early literacy behaviors in children ages 0-5</p>	<p>140 families 134 children 6,683 visits 3 counties</p>
<p>Save the Children Early Steps to School Success Community and school tied to home visitor and literacy activities; assessment and mentoring, group meetings augment program.</p>	<p>189 families 213 children 3,565 visits 4 counties</p>

EARLY INTERVENTION



Finding and serving our state's children with developmental delays as early as possible can reduce later remediation and can help children prepare for school success along with their typically developing peers. South Carolina's BabyNet Early Intervention System provides special education services to infants and toddlers with disabilities and developmental delays. The **program's outcomes consistently meet or exceed national averages** on measures of **key school readiness skills**.

Part C Early Intervention National and State Percentages
for Summary Statement 1





During SC FY13:

- 82% of enrolled children increased their **demonstration of positive social emotional skills** (16% above the national average of 66%)
- 82% increased their **acquisition and use of knowledge and skills** including **early language** (11% above the national average of 71%)
- 82% of BabyNet clients **increased their ability to use actions to meet their personal needs** (11% above the national average of 71%)
- 59% of children were **functioning within age expectations** by the time they exited BabyNet in the **use of appropriate behaviors to meet their needs and demonstrating positive social-emotional skills** - both key prerequisites to school success.

QUALITY CHILDCARE



Two-thirds of SC mothers with young children depend on child care providers to help care for their children during the work day. Since a child's brain is forming rapidly during these early years, child care teachers are significant partners to families in helping children develop to be successful in school.



According to an independent analysis by the HighScope Educational Research Foundation, **child care providers** participating in First Steps' quality improvement programs made **statistically significant gains** in **each of seven domains** quality measured.



During FY14, First Steps:

- Provided quality-enhancement programming in **202 SC child care settings**, enrolling **7,164 children**.
- Made **3,370 on-site, provider visits**.
- Provided **1,408 accredited child care training hours** to **5,137 child care teachers, directors and staff**.
- Provided preschool scholarships to **596 children**, in **148 qualified private settings**.



To enhance school readiness outcomes, First Steps works with partners in support of **QUALITY CHILD CARE** at state and local levels.



Table 35. Pre and Post Early Childhood Environmental Rating Scale (ECERS) Scores for Child Care Centers Participating in First Steps Child Care Quality Enhancement

ECERS Scale	Overall	Length of Participation (Months)							
		0-5		6-12		> 12			
		Mean	N	Mean	N	Mean	N	Mean	N
Overall Score	Pre	3.74	146	3.88	9	3.90	69	3.55	68
	Post	4.55	**	4.91	**	4.68	**	4.28	**
Space and Furnishings	Pre	3.84	125	3.92	9	4.08	61	3.57	55
	Post	4.67	**	4.68	*	4.77	**	4.56	**
Personal Care Routines	Pre	3.50	124	3.31	8	3.37	61	3.66	55
	Post	4.00	**	4.68	**	3.95	**	3.95	**
Language-Reasoning	Pre	3.97	124	4.24	9	4.16	60	3.72	55
	Post	4.77	**	4.72	**	4.93	**	4.62	**
Activities	Pre	3.08	125	3.70	9	3.21	61	2.79	55
	Post	4.21	**	4.68	**	4.40	**	3.93	**
Interaction	Pre	4.64	125	4.96	9	4.69	61	4.54	55
	Post	5.26	**	5.37	**	5.22	**	5.20	**
Program Structure	Pre	3.93	125	4.76	9	4.28	61	3.41	55
	Post	4.70	**	5.44	**	4.97	**	4.27	**
Parents and Staff	Pre	4.67	66	5.0	4	4.71	37	4.57	25
	Post	5.16	**	5.9	**	5.07	*	5.18	*

Note. ** p < .01; * p < .05; † p < .05; ‡ p < .10; — p > .10

Intensive Quality Enhancement Strategies

17	Counties
202	Centers Enrolling 7,164 children
3,370	Technical Assistance Visits Completed
7,601	Technical Assistance Visit Hours
13.9%	Average Improvement in Center Quality (Measured Pre -Post using the Environmental Rating Scales)



2001 to 2014		Average Per Year
Providers served	4,123	295
Children enrolled in centers served by First Steps	179,312	12,808
2008 to 2014		Average Per Year
Child care quality assessments administered	1,911	137
Assessment improvement pre- to post (7 point scale - 2014 figure)		.97
Technical assistance visits to providers by First Steps	23,072	3,845
Technical assistance hours	48,536	8,089

EARLY EDUCATION



Quality prekindergarten can improve a child's success in school, particularly for low-income or disadvantaged students. Since the creation of the public-private 4K model in 2006-2007, First Steps has **served more than 4,900 four-year-olds in private, community- and faith-based preschool settings.**



First Steps partners with high-quality private and community-based preschools to offer full-day four-year-old kindergarten for families in eligible counties.



Approved programs focus on developmental and learning supports that children must have in order to be ready for school, incorporate research-based curriculums, ongoing assessment, and parenting education.



After 8 years as a pilot program, First Steps 4K was codified in June 2014 as part of the Read to Succeed/4K Expansion Act. First Steps 4K program utilizes a public-private service delivery model to give families in 61 of the state's school districts the ability to choose a public school or a community-based program for their eligible children.



Eligible children must be four on or before September 1, reside in one of the specified school districts, and qualify for free- or reduced-price lunch or Medicaid. The 4K program in South Carolina is jointly administered by SC First Steps (private and community-based schools) and the SC Department of Education (public schools).



Assessing Early Literacy

- During August and September of 2014, First Steps provided professional development to **more than 300 teachers and center directors** on the use of mClass Circle, the state's new school readiness assessment focused on early literacy.
- More than **99% of First Steps private 4K students were successfully assessed** during the first 45 days of the 2014-2015 school year.
- All First Steps 4K students will **participate in pre- and post-testing**, exceeding the minimum requirement established by the SC Department of Education.

PROGRAM YEAR	CHILDREN SERVED	PROVIDERS
2006-07 (FY 07)	309	40
2007-08 (FY 08)	482	48
2008-09 (FY 09)	459	40
2009-10 (FY 10)	524	39
2010-11 (FY 11)	549	36
2011-12 (FY 12)	577	43
2012-13 (FY 13)	601	42
2013-14 (FY 14)	1402	93
2014-15 (FY 15) anticipated	1800	145

SCHOOL TRANSITION



In 2003, SC communities reported a lack of school transition services for children. In response, First Steps collaborated with local, state and national partners to create **Countdown to Kindergarten (CTK)**. This home visitation program matches families of **high-risk rising kindergartners with their upcoming 5K teachers** during the summer before school entry. Teachers complete six visits with each family, centered on classroom and curriculum expectations.



- In 2009 the High/Scope Educational Research Foundation completed an external review of Countdown to Kindergarten, noting the strategy's potential to powerfully shape both subsequent interaction and classroom practice. Researchers noted that:



- *"Over 75% of home visitors reported making **some or a great deal of change in their instruction, experiences, practices, activities on the first day of school and the methods by which they communicate with parents** as a direct result of their CTK experience."*



- *"All participants, whether home visitor or parents, report the **significant impact this strategy has on professional practice, parent-teacher relationships, and parent participation in and child attitudes toward kindergarten.**" (Further Steps to School Readiness-HighScope Educational Research Foundation, 2010)*



- In 2013, **100% of participating teachers reported that Countdown to Kindergarten parents were as or more involved than non-participating parents**. This included involvement in activities such as parent/teacher conferences, attending school events and activities, maintaining contact with teachers, and volunteering in classroom or school activities.



During the summer of 2014, First Steps served 867 children, 863 families, and delivered 5,079 Countdown to Kindergarten home visits.

FIRST STEPS' SCHOOL TRANSITION IMPACT

9,316 families served since 2004

55,603 teacher visits since 2004



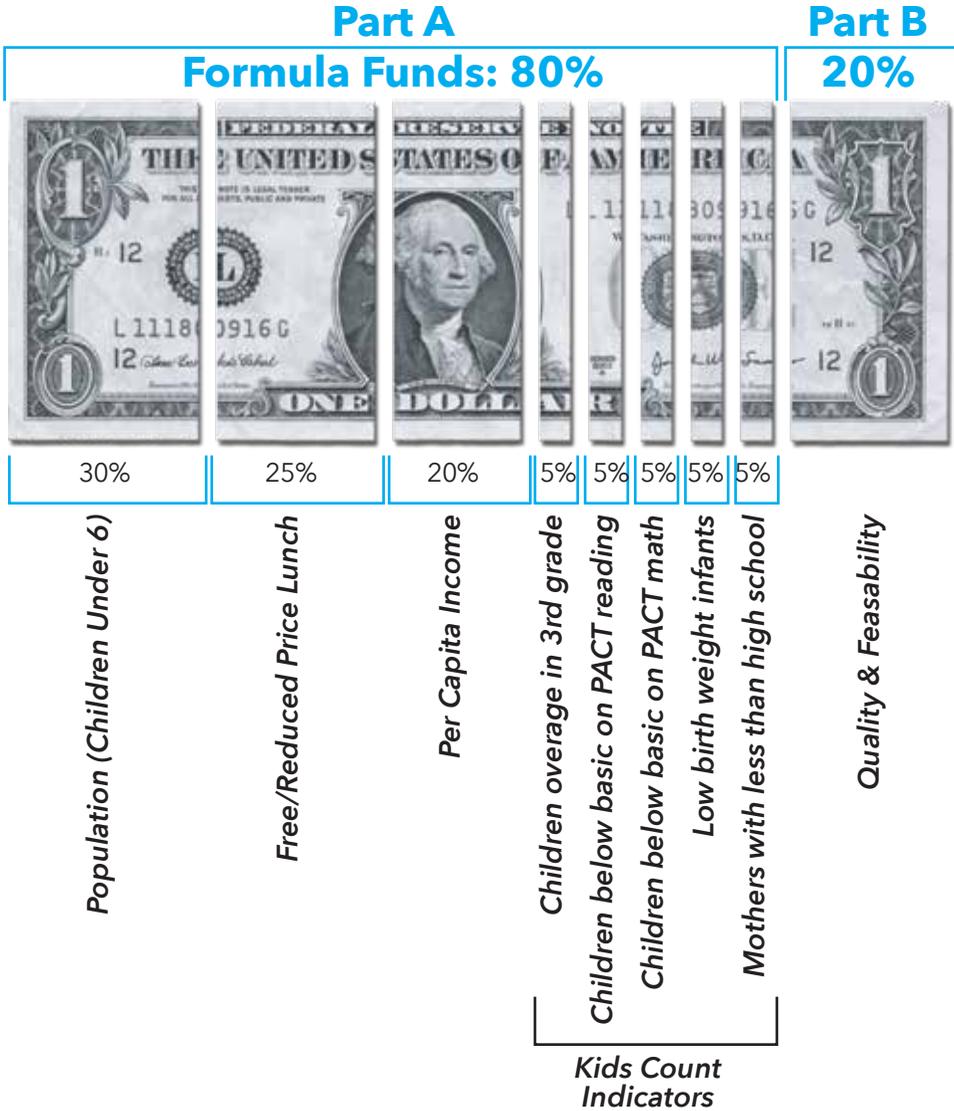
*In 2007, First Steps' Countdown to Kindergarten program was recognized as a promising state practice by the National Governor's Association in their report, Building the **Foundation for Bright Futures**.*

"Countdown is the greatest thing that's ever happened to children in South Carolina. The relationships built over the summer between the teacher and families created a trust and support that has helped the children blossom in kindergarten. The only way to break the cycle is to model for parents how effectively they can work with their own children through reading and playing and learning with hands on materials."

-Gayle Troutman, Kindergarten Teacher, Burnside Elementary School

Allocation of Resources

The First Steps Board of Trustees funds the operations of local First Steps Partnerships through an annual grant process. The amount of funding provided to each county is determined via the funding formula, which takes a variety of demographic and economic risk factors into account.



FINANCIAL ACCOUNTABILITY

Program Revenues **FY 2014**

Federal Grants	\$5,978,733
Medicaid Reimbursements	\$863,404
Local & Private Grants	\$230,239
Reimbursement from SC Dept. of Education	\$927,536
Total Program Revenues	\$7,999,912

General Revenues

State Appropriations	\$27,225,789
Interest Income	\$176,927
Total General Revenues	\$27,402,716

Total Revenues **\$35,402,628**

Expenses

Allocations to Other Entities	\$20,152,537
Contractual Services	\$7,487,576
Salaries	\$3,061,135
Employer Fringe Benefits	\$1,018,488
Rent & Leases	\$240,520
Materials	\$123,505
Travel	\$153,716
Equipment	53,406

Total Expenditures **\$32,290,883**

Increase in Net Position	\$3,111,745
Net Position Beginning Balance	\$2,231,343

Net Position Ending Balance **\$5,343,088**



Getting children ready for school.

SOUTH CAROLINA

LEGISLATIVE GOALS

1. **Provide parents with access to the support** they might seek and want to strengthen their families and to promote the optimal development of their preschool children;
2. **Increase comprehensive services** so children have reduced risk for major physical, developmental, and learning problems;
3. **Promote high quality preschool programs** that provide a healthy environment that will promote normal growth and development;
4. **Provide services** so all children receive the protection, nutrition, and health care needed to thrive in the early years of life so they arrive at school ready to succeed; and
5. **Mobilize communities** to focus efforts on providing enhanced services to support families and their young children so as to enable every child to reach school healthy and ready to succeed.



Getting children ready for school.

SOUTH CAROLINA

SCFirstSteps.org

ATTACHMENT H: Board of Trustees Minutes

(June 18, 2015)



South Carolina First Steps to School Readiness
Board of Trustees
June 18, 2015

MINUTES

Members Present (16):

Ken Wingate, Chair
Julie Hussey, Vice Chair
Lisa Van Riper, Secretary
Rep. Rita Allison
Rick Noble
Julia-Ellen Davis
Mary Lynn Diggs
Roger Pryor
Reece Yandle
Superintendent Molly Spearman
Alexia Newman
Sue Williams
Christian Soura
Judith Aughtry
Walter Fleming
Evelyn Patterson

Members Absent (8):

Senator Mike Fair
Senator Gerald Malloy
Representative Jerry Govan
Dr. Beverly Buscemi
Susan Alford
Katherine Heigel
Tracy Lamb
Jennifer McConnell

Others Present:

Susan DeVenny
Dr. Dan Wuori
Mark Barnes
Debbie Robertson
Amber Gillum
David Goodell
Rosemary Wilson
Dr. Joe Saunders
Pierce McNair
Barbara Black
Mary Anne Mathews
Bunnie Ward
Kate McGrath

Dr. Bill Brown
Penny Danielson
Kimberly Jordan
Jim Riddle
Christie Duke
Kristie Musick
Charles Appleby
Jennifer Dobson
LaMyra Sanders
Dorothy Priester
Martha Strickland
Ginger Ryall
Christine Willis
Betty Gardiner

Mr. Wingate called the meeting to order at 1:05 pm and reminded those in attendance that the meeting was being held in compliance with the SC Freedom of Information Act. Mr. Wingate asked the Board to pause to observe a moment of silence in memory of those killed in the shootings at Emanuel AME Church in Charleston, SC.

Mr. Wingate noted the presence of a quorum and called for the adoption of the consent agenda, containing the following items:

- Meeting minutes of January 15, 2015
- Meeting minutes of February 18, 2015
- Meeting minutes of March 19, 2015
- Meeting minutes of May 29, 2015
- Finance and Administration Committee Recommendation (FY16 Budget)
- Program and Grants Committee Recommendation (FY16 Partnership Grant Renewals)

The consent agenda was adopted unanimously.

Chairman's Report:

Mr. Wingate called Board members' attention to the Principles of Engagement document reviewed previously and moved for its final adoption.

The Board unanimously adopted the Principles of Engagement. Mr. Wingate asked that printed copies be provided for signature at the August 20 Board meeting.

Mr. Wingate referenced the ongoing summer site visit process, during which each First Steps partnership will be visited by a delegation of state Board and office staff. A number of Trustees discussed their positive experiences having visited local communities. Several preliminary themes seemed to be emerging from these visits, including a need for assistance in communication/marketing and additional training in use of the finance and data systems. Mr. Wingate reported having met with 15 Executive Directors in the prior month and encouraged Trustees to participate in as many remaining visits as possible.

Mr. Wingate noted that he will be working with the Governor, House and Senate to ensure that trustee terms are current and that this may lead to upcoming transitions as vacant seats are filled and new Trustees are appointed.

Finance and Administration Committee:

Ms. Aughtry noted that the committee's recommended budget had been previously distributed and was adopted as part of the consent agenda. She called on Mr. Barnes to provide a brief update on the state budget as related to First Steps. Mr. Barnes reported that the General Assembly was yet to complete its final FY16 budget and has passed a continuing resolution to ensure the ongoing operation of state government in the absence of passage by July 1. Mr. Barnes reported that both the House and Senate budget plans included increased funding for local partnerships and BabyNet.

Program and Grants Committee:

Ms. Davis reviewed the legislative charge to develop and adopt a parent-friendly description of school readiness and described the committee's process of developing its recommended draft - which included a wide array of state, local and national stakeholders, including a survey of SC kindergarten teachers. Ms. Davis reviewed the committee's recommendation, which includes:

- 1) A description of essential readiness skills, phrased in family friendly "I can" statements,
- 2) Connections between school readiness and the Profile of the Ready Graduate, and
- 3) Descriptions of ready schools, caregivers and communities.

Superintendent Spearman praised the committee for its efforts to connect readiness to the Profile of the Ready Graduate and described its importance within the Department of Education's own planning. Ms. Diggs reminded the Board of Head Start's federal school readiness description.

The Board unanimously adopted the readiness description, which will also be considered under Act 287 of 2014 by the SC Board of Education.

Penny Danielson of the SC Department of Education provided a brief overview of the early literacy assessments proposed for use in 4K and 5K during 2015-2016. Assuming passage of Senate proviso language as part of the General Appropriations Act for FY16, 4K classrooms will have the choice of three potential assessment options (MyIGDIS, Pals Pre-K, and Teaching Strategies GOLD). 5K classrooms statewide will utilize the Developmental Reading Assessment (DRA).

Ms. Davis reminded the Board of its legal obligation to develop a list of evidence-based programming for use by local partnerships. This will be a collaborative, multi-month process what may require formal legislative promulgation. Ms. Davis brought forward a recommendation from the committee that the preliminary list begin with recognition of 17 evidence-based home visitation models acknowledged by the U.S. Department of Health and Human Services' Home Visiting Evidence of Effectiveness (HomVEE) clearinghouse. These models have been rigorously evaluated and are acknowledged nationally as meeting the highest standard of evidence. These models are:

- Child FIRST

- Early Head Start - Home Visiting
- Early Intervention Program for Adolescent Mothers
- Early Start (New Zealand)
- Family Check-Up
- Family Spirit
- Healthy Families America (HFA)
- Healthy Steps
- Home Instruction for Parents of Preschool Youngsters (HIPPIY)
- Maternal Early Childhood Sustained Home Visiting Program (MESCH)
- Minding the Baby
- Nurse Family Partnership (NFP)
- Oklahoma Community-Based Family Resource and Support Program (PDF - 91 KB)
- Parents as Teachers (PAT)
- Play and Learning Strategies (PALS) Infant (PDF - 96 KB)
- SafeCare Augmented

The Board unanimously adopted the committee's recommendation.

Strategic Planning and Evaluation:

Ms. Van Riper updated the Board on the ongoing strategic planning process and introduced committee draft mission, vision and values statements to the Board. After a short discussion, Ms. Van Riper asked Trustees to pass along suggested revisions to Dr. Wuori for subsequent review by the Board.

Ms. Van Riper also reviewed the committee's proposed response to the 2015 Compass Evaluation, required by Act 287 of 2014. The report contained two overarching recommendations to the Board:

- 1. Review and refine [First Steps'] evaluation design to align with new evaluative and accountability requirements.*
- 2. Consider discussions and strategies for ongoing systems development.*

As pertains to reviewing and refining evaluation systems to align with new evaluative and accountability requirements the committee recommended a proposed evaluation timeline for both prevalent programs and the next systemic review required by statute. The proposed cycle, which begins immediately with the development of a research methodology for Parents as Teachers is as follows:

	<u>To Be Evaluated During:</u>
1. Parents as Teachers - \$3.97M	FY16-FY17
2. Child Care - \$4.43M	FY17-FY18
(Quality Enhancement - \$1.89M)	
(Training - \$1.39M)	
(Scholarships - \$1.15M)	
3. General System Review	FY19-FY20

Additionally, the committee noted that it anticipates a comprehensive review of First Steps' data systems and data requirements, stemming from the current strategic planning process.

As pertains to systems development, the Committee noted that this is the goal of the Board's current strategic planning process. A well-articulated process is underway that will comprehensively meet the intent of this recommendation, with a final report anticipated in December of 2015.

After discussion, the Board unanimously adopted the committee recommendations as presented.

Director's Report:

Ms. DeVenny noted her written Director's Report and thanked state and local staff for their hard work throughout the FY16 Partnership Grant Renewal Process. She provided a brief update on the Countdown to Kindergarten program and invited the Board to join staff on Friday, August 7 at EdVenture Children's Museum for the 12th annual Countdown to Kindergarten Celebration. Ms. DeVenny called on Jim Riddle of Lexington County First Steps to provide a brief update on his work to pilot a Countdown to Kindergarten program targeted at underserved Latino families.

New Business:

Mr. Noble requested that a portion of the August 20 Board meeting be dedicated to discussion of recent ED survey data.

Mr. Wingate recognized local partnership directors in attendance and asked each to reflect briefly on the site visit process and other recent meetings. Mr. Riddle expressed his thanks to Trustee Roger Pryor for attending the Lexington County site visit and reported his excitement with the process. Kimberly Jordan thanked Mr. Wingate for his participation in a recent regional meeting of executive directors. LaMyra Sanders of Orangeburg expressed her thanks to Ms. Davis and Ms. DeVenny for their site visit participation and Dorothy Priester provided a brief update on the "Talk to Me!" campaign, which continues to attract community partners in Cherokee County.

Upon a motion by Rep. Allison and a second by Ms. Van Riper the Board went into Executive Session at 3:10 pm to discuss a personnel matter.

The Board exited executive session at 3:29 pm. No action was taken.

Upon a motion from Mr. Noble and a second by Mr. Pryor, the Board adjourned at 3:30 pm.

ATTACHMENT I: Executive Summary of Compass Evaluation

March 2015

Continuing Steps to School Readiness: The Compass Report on the Evaluation of South Carolina First Steps to School Readiness

Compass Evaluation and Research of Durham, NC was contracted by the SC First Steps Board of Trustees pursuant to South Carolina Section 59-125-160 to “assess the extent to which First Steps has been successful in meeting its five legislative goals and articulate the relative ‘value add’ (or lack thereof) of SC’s maintenance of a statewide early childhood coordination and service delivery structure.” The evaluation team finds that:

1. **First Steps’ public-private structure and model of shared governance generate a high degree of value-added at both the state and local levels.**

Compass cites multiple examples of value-added by the First Steps initiative, including:

- Systems efficiencies such as non-duplication of services,
- Leveraging of available resources to support community needs, and
- Benefits that **accrue** to multiple family members.

2. **First Steps is finding and serving the state’s most high-need clients.**

Echoing previous evaluations, Compass notes First Steps’ **considerable success “in finding and serving the state’s most high-risk children and families**, with evidence suggesting a large percentage of current clients possess two or more readiness risk factors.”

3. **First Steps is meeting legislated goals.**

First Steps is investing “in multiple **efficient and evidence-based strategies** for ensuring children have reduced risk for major physical, developmental, and learning problems and can enter school healthy and ready to succeed. For example, children’s pre-literacy skills are being addressed through family strengthening programs and available **data suggest progress in child and family outcomes.**”

4. **First Steps has a statewide fiscal and programmatic accountability structure in place to guide and provide oversight to local partnerships. This structure supports the translation of state-level priorities into practice.**

Evaluators note that “First Steps has developed and implements processes to track expenditures and to regularly communicate with local partnerships regarding their expenditures, to ensure fiscal accountability, full expenditure of funds, and important internal control measures.” In regards to program implementation, “the team **commends First Steps on the development and use of Program Accountability Standards,**” which they find to be “comprehensive and aligned with best practices.”

5. **At the state and local levels, First Steps serves as the “battery” powering many of the state’s key early childhood conversations and practices.**

Discussing the initiative’s collaborative, state and local, public and private structure, Compass notes that “First Steps often and in many ways reaches beyond a circle of agencies and administrators to **engage local community stakeholders such as parents, educators, and the Community of Faith in investing in early childhood**, with investments occurring on the family, caregiver, and neighborhood level. It is these investments that often make the difference for at-risk and high-need children, as these children often require attention and support from multiple sources.”

The evaluators recommend that First Steps:

1. **Review and refine its evaluation design to align with new evaluative and accountability requirements.**

Given updated statutory requirements, “the nature of this recommendation is to ensure a comprehensive system of evaluation exists, with associated opportunities for technical assistance, training, and data quality reviews. These opportunities also can be used to expand or enhance existing monitoring efforts, to **ensure high quality and verified data are available for evaluation and accountability** purposes.”

2. **Consider discussions and strategies for ongoing systems development.** “The data collected in this evaluation might allow state and local partnerships to engage in deeper conversation regarding what it means to have an early childhood system, how such a system might be conceptualized, and the different benefits that may result from continuing strengthening and development of the system.”

ATTACHMENT J: BabyNet LAC Status Report

October 2015

Recommendation	Status
<p>1. The General Assembly should appropriate all BabyNet funding directly to First Steps to increase accountability for the lead agency with regard to partner agencies and providers.</p>	<p>REQUIRES LEGISLATIVE ACTION</p> <p>Consolidation of funds, consistent with this recommendation, was requested by First Steps in FY12 and FY13 legislative sessions. BabyNet funds formerly allocated to DHEC and SC School for the Deaf and the Blind were transferred during FY12, via proviso 89.122, and codified within the FY13 General Appropriations Act.</p> <p>Proviso 89.125 of the FY13 General Appropriations Act charged First Steps with developing a template to provide uniform fiscal reporting across all BabyNet agencies in lieu of a consolidated appropriation. Common fiscal reporting across all state agency BabyNet partners is now underway, with the requirement extended into FY16 via Proviso 117.99.</p> <p>First Steps published BabyNet’s first interagency fiscal statement in January 2014 and its second in January 2015. These summaries are the first comprehensive, inter-agency financial statements in the program’s history, and will serve as the basis for both the state’s federal maintenance of effort and the inter-agency budget request established in §44-7-2570(C).</p>
<p>2. First Steps should comply with §44-7-2570 (C) of the South Carolina Code of Laws.</p> <p>South Carolina Code of Laws, Article 21, SECTION 44-7-2570. Fees for services; insurance.</p> <p>(A) Families must not be charged for early intervention services provided pursuant to this article.</p> <p>(B) Nothing in this section relieves public or private insurance programs, or other persons or agencies required by law to provide or pay for early intervention services, from their financial or legal responsibilities.</p> <p>(C) Pursuant to Subchapter VIII, Chapter 33, Title 20, U. S. Code Annotated, all financial resources from federal, state, local, and private sources must be coordinated to fund early intervention services. A joint funding plan must be submitted by the department to the Joint Legislative Committee on Children on or before August first of each year. The individual components of the plan as they relate to</p>	<p>ONGOING</p> <p>SC First Steps meets regularly with BabyNet partner agencies for the purpose of reviewing agency expenditure reports, discussing system needs, and discussing the interagency budget request required under §44-7-2570(C). A BabyNet Think Tank has been seated to give input on both the December 31 BabyNet report to the General Assembly required pursuant to Proviso 1.96 and an inter-agency budget request planned for January 2016. This budget request will be provided to both legislative staff and the Joint Legislative and Citizen’s Committee on Children.</p> <p>Per #1 above, the requirement for common, interagency fiscal reporting has been extended into FY16 via Proviso 117.99</p>

<p><i>individual agencies must be incorporated annually into each affected agency's budget request.</i></p>	
<p>3. If the General Assembly does not enact recommendation 1 to appropriate all BabyNet funds through First Steps, it should make specific line-item appropriations to state agencies for the BabyNet program.</p>	<p>REQUIRES LEGISLATIVE ACTION</p> <p>Provisos requiring uniform fiscal reporting by all agency BabyNet partners (since FY14) will inform budget needs for FY17.</p> <p>First Steps' FY16 budget separates "BabyNet" appropriations into a distinct budget section, which now includes the funding previously allocated directly to the SC School for the Deaf and the Blind and DHEC. The budget of the Department of Disabilities and Special Needs, likewise, contains a distinct "BabyNet" line item.</p> <p>As part of the interagency budget request for FY17, SC First Steps will be requesting that line items be established for the South Carolina Departments of Health and Human Services, and Mental Health.</p>
<p>4. First Steps should develop and annually implement a formal methodology to calculate the extent of its compliance with federal regulation 34 CFR 303.124.</p>	<p>ONGOING</p> <p>The interagency expenditure reporting established in FY13 and extended into FY16 via proviso 117.99 has codified this process via uniform fiscal submissions from each agency. A common reporting template is in use by the Lead Agency and all BabyNet Participating State Agencies, and a final report for FY15 will be submitted to legislative staff in January 2016 and will be posted to the First Steps website.</p>
<p>5. First Steps should prepare and publish each year a financial statement for the complete BabyNet system, including all expenditures and all sources of revenue.</p>	<p>ONGOING</p> <p>Proviso 117.99 (FY15) requires uniform fiscal submissions from each partner agency. The BabyNet FY14 interagency financial statement will be published by SC First Steps in January 2016.</p>
<p>6. First Steps should contract with independent accountants to audit its annual financial statements for the BabyNet program. The annual audits should follow generally accepted government auditing standards, including the provision of reasonable assurance that the statements are accurate, that internal controls to prevent fraud and abuse are adequate, and that BabyNet funds</p>	<p>By agreement with agency partners, the FY16 interagency expenditure report will be independently audited if sufficient resources are available to underwrite such a review.</p>

Recommendations of the SC Legislative Audit Council for the BabyNet Early Intervention System, October 20, 2015

<p>have not been spent on non-BabyNet activities.</p>	
<p>7. When drafting contracts between First Steps and BabyNet service providers, First Steps should have them reviewed by procurement and legal staff.</p>	<p>ONGOING</p> <p>All contracts are reviewed annually by First Steps procurement staff and external legal counsel.</p>
<p>8. First Steps should review contracts between other state agencies and BabyNet service providers before they are finalized.</p>	<p>ONGOING</p> <p>All BabyNet state agency partners have been asked for their subcontracts, per LAC recommendation and September 2011 federal regulation. As Lead Agency for BabyNet, South Carolina First Steps continues to work with the BabyNet participating state agencies to ensure fulfillment of this recommendation.</p>
<p>9. First Steps should require all invoices submitted by BabyNet service providers to contain the signature of the parent/guardian of the child receiving the services.</p>	<p>COMPLETED</p> <p>This recommendation was implemented in November 2011. All provider invoices now require additional documentation, including parent or guardian signature at the time of service. Service verification is monitored through periodic audit of provider records.</p>
<p>10. First Steps should establish a policy of using Medicaid rates for similar services reimbursed with BabyNet early intervention funds.</p>	<p>COMPLETED</p> <p>This recommendation was implemented in September 2011. For like services, the established BabyNet rate does not exceed the Medicaid fee for service rate as established by the SC Department of Health and Human Services.</p>
<p>11. The General Assembly should amend state law to authorize First Steps to charge a sliding fee, based on family income and size, to families with children in the BabyNet program.</p>	<p>REQUIRES LEGISLATIVE ACTION</p> <p>Section 44-7-2570 currently prohibits changing families for Part C services. First Steps staff have met with the previous system administrator and Lead Agency staff of other states, who caution sliding fee administration may be costly, potentially offsetting the fiscal benefit of implementing such a system. However, administration of a family cost participation fee is less costly. South Carolina First Steps will continue to monitor the number of children eligible for Medicaid to determine if any potential revenues from use of such a model is cost efficient and make recommendations to the General Assembly accordingly.</p>

<p>12. First Steps should continue the use of federally-funded technical assistance regarding its General Supervision function and increase the use of assistance in other priority areas where improvement is needed.</p>	<p>ONGOING</p> <p>Beginning in September 2009, the BabyNet and First Steps staff, Interagency Coordinating Council and legislative staff have been in ongoing contact with technical assistants provided via the U.S. Department of Education, whose assistance has been key to the restructuring of the BabyNet General Supervision system cited to First Steps as a longstanding area of need.</p> <p>As a result of this external facilitation and lead agency study, First Steps issued initial findings of non-compliance in October 2011, and state-to-local determinations of performance in June 2012.</p> <p>Additional areas of technical assistance have included re-design of the intake and eligibility process, redesign of the service delivery model, use of implementation science for sustainable change, incorporation of child outcomes in the Individualized Family Service Plan process, development of policies and procedures compliant with current federal regulations, and implementation of fiscal monitoring requirements of recipients and sub-recipients of federal Part C funds. Monthly TA visits are underway to assist the state in addressing the new federal requirements for a State Systemic Improvement Plan as part of OSEP’s Results-Driven Accountability process.</p>
<p>13. First Steps staff should continue to collect child results data and, when appropriate, use it to make program improvement decisions.</p>	<p>ONGOING</p> <p>This recommendation matches an existing federal requirement; implementation was initiated in August 2006. South Carolina continues to rank at or above national averages for child outcomes.</p>
<p>14. First Steps should develop and implement a comprehensive plan to regularly monitor BabyNet service provider performance.</p>	<p>ONGOING</p> <p>A provider audit process has been developed and piloted, in association with Kerr and Company. The process is being refined in collaboration with First Steps staff for use system-wide.</p> <p>South Carolina BabyNet “findings of non-compliance” were first issued to service coordination vendors in October 2011 for FFY 2010 and to Service Coordination vendors beginning with FFY 2013.</p>

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<p>15. First Steps should not renew a BabyNet service provider’s contract without first measuring the provider’s performance over the course of the current contract.</p>	<p>ONGOING</p> <p>Modifications to the BabyTrac system in 2011 allowed BabyNet to track service delivery compliance by vendor. Initial notice of non-compliance to BabyNet Service Providers (based on a full year of performance) will begin with FFY 2013 data, and findings issued annually thereafter.</p>
<p>16. First Steps should review the BabyNet provider performance monitoring processes of other state agencies in South Carolina to ensure consistency with any comprehensive provider performance monitoring plan developed by First Steps.</p>	<p>ONGOING</p> <p>Sample file review data was pulled and evaluated from state agency partners in November 2011. Additional performance monitoring processes were developed with technical assistance from US Department of Education, National Data Accountability Center, National Early Childhood Technical assistance Center, and MidSouth Regional Resource Center now includes mechanisms for monitoring of specific federal requirements. The new data system will enable additional review through real-time access to BabyNet electronic educational records, service coordinator and service provider logs, invoicing and payment status, and compliance and results performance indicators.</p>
<p>17. First Steps should research low-cost methods of creating printed materials as well as radio and TV public service advertisements to increase public awareness about BabyNet.</p>	<p>COMPLETED</p> <p>Enhanced child find materials were developed in July 2011, disseminated through state and local partners, service vendors. In addition, First Steps implemented a new local partnership strategy which adds capacity for child screening and public information. The strategy was implemented by 7 First Steps county partnerships in July 2012 and renewed in July 2013. Public service announcements were developed and finalized in August 2012. These 15- and 30-second public service announcements were developed by Family Connection and released in September 2012: http://www.youtube.com/watch?v=9c14dZ1HsAA http://www.youtube.com/watch?v=NFgpErlZXd4</p>
<p>18. First Steps should contact state pediatric, neo-natal, and other associations to investigate offering training to doctors, nurses, and others regarding the referral of children to BabyNet.</p>	<p>ONGOING</p> <p>-Roadmap to Developmental Screening materials were developed in English and Spanish (in collaboration with South Carolina's ACT Early Team) and distributed to all pediatricians and family practitioners across South Carolina in April 2012; -New public awareness, Child Find, and personnel development materials were</p>

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	<p>developed and distributed in fall 2012 (English and Spanish);</p> <ul style="list-style-type: none"> -Local outreach and information sharing has been enhanced via First Steps Early Intervention and Screening strategy (implemented in 7 counties during FY13, renewed in FY14); - New BabyNet orientation video was developed and made available to families and partners beginning November 2012; -BabyNet staff have made system and policy presentations to USC Pediatric Residents (February 2013) and Early Childhood Comprehensive Systems (March 2013) groups.
19. First Steps should update the BabyNet website to increase its readability and usefulness.	<p>ONGOING</p> <p>The BabyNet website has been updated monthly since August 2011. In addition, the 211 system has been connected to website to ease referral and parental self-identification of community level resources, in collaboration with Family Connections.</p>
20. First Steps should track and publically report the age in months at which children are referred to the BabyNet program.	<p>ONGOING</p> <p>This data is now available through the BRIDGES data and electronic record system.</p>
21. First Steps should track and publically report the age in months of first BabyNet service.	<p>ONGOING</p> <p>This data is now available through the BRIDGES data and electronic record system.</p>
22. First Steps should continue to conduct outreach, training, and technical assistance to increase the number of service providers available in South Carolina.	<p>ONGOING</p> <p>Geographic provider shortages have been identified by system partners. Root cause analysis and proposed solutions are in process with agency and technical assistance partners. Access to provider reports has been developed as part of the contract with SCBCB/DSIT, in order to determine areas where children are waiting for service, and catchment areas of where provider shortages exist.</p>
23. First Steps should develop or obtain a data system that allows for the monitoring of BabyNet children’s transition conferences and plans.	<p>ONGOING</p> <p>Pre-release testing of the BRIDGES data and electronic educational record system was completed in summer 2013; training for 1650 system staff began October 2013, and the BRIDGES system was launched in March 2014. Phase</p>

	two of training was completed in June 2014. BabyNet Service Providers will begin billing of BabyNet Service Funds through BRIDGES in September 2014.
24. First Steps should develop or obtain a data system that allows for the creation and dissemination of electronic versions of children's Individualized Family Service Plans.	ONGOING The BRIDGES data and electronic educational record system includes the Individualized Family Service Plan.

ATTACHMENT K: FY16 Partnership Renewal Grant Application

April 2015

Required Attachments (Please check all that apply to your Partnership):

For all Partnerships:

- Signed copy of the partnership's complete FY16 Budget Spending Plan (BSP), including the summary page and all program pages. **Your FY16 BSP must accurately reflect the contents of your FY16 Renewal Plan – if not, your partnership's Renewal Plan may not be considered for approval.**
- Board minutes, signed by the Board Chair and Executive Director, reflecting approval of the partnership's FY16 Renewal Plan and FY16 Budget Spending Plan. **Note no carry-forward should be budgeted in the renewal BSP.**
- Board minutes reflecting review of FY15 projected and actual data.
- Signed Form: *FY16 Fiscal Signatories*
- Board minutes reflecting adoption of authorized fiscal signatories for FY16
- Resource Development Plan
- Written process to accept donations

For Partnerships contracting with one or more school districts:

- Letter from school board chair(s) certifying:
 - o the need for First Steps funding for the 2015-2016 school year;
 - o that partnership funds will be used to supplement, not supplant, other federal/state/local funding; and
 - o what matching resources will be provided to the partnership's strategy(ies).

For Partnerships funding Early Education strategies in one or more school districts:

- Letter from school district confirming:
 - that the Power School file of each child enrolled in a First Steps funded 4K classroom during FY15 (2014-15) has been flagged to reflect (as appropriate) that his/her classroom was fully/partially funded by SCFS, and
 - the need for First Steps funding to provide/maintain services to children qualifying for free- or reduced-lunch and/or Medicaid during FY16 (2015-16)

Explanation for Strategies Discontinued for FY16

This form should be completed for each activity that is discontinued.

A discontinued strategy is any approved strategy for FY15 that will not be continued in FY16.

NOTE: Discontinued strategies must still collect/enter data as described in the document, *2014-15 Strategy Performance Standards and Data Sources*. SCFS TAs will be checking data in the FSDC for discontinued strategies. Non-Prevalent/Other strategies that are being discontinued for 2015-16 should also report their results for 2014-15 using the form provided later in this document.

- 1. Name of Strategy:**

- 2. Why have you decided to discontinue this strategy?**

- 3. Please provide projected to serve numbers for FY15, based on your FY15 Renewal Plan and what is entered in the FSDC.**

- 4. Please provide actual served numbers for FY15.**

- 5. Please describe any differences between projected and actual.**

- 6. Please describe expenses charged to this activity in FY15 if there are no service numbers. Were any expenses cost allocated to this activity?**

- 7. At what point did you determine the strategy needed to be discontinued?**

- 8. What challenges and barriers prevented you from being successful?**

- 9. What new approaches did you implement this year to try to make the strategy successful?**

FY15 CHILD CARE TRAINING STRATEGY DATA SUMMARY

(Complete this form for all training either hosted or sponsored/co-sponsored by your partnership)

July 1, 2014– June 30, 2015 (include training sessions planned through June 30)

Name and Date(s) of Training Session	CCCCD Topic Area(s) A-F (see below)	Age Group Targeted (Infant/Toddler, Preschool, or All)	# CCCCC Certified Training Hrs. per Participant	# CCCCC Registered Training Hrs. per Participant	Follow-up Provided? Yes or No	Name of Organization(s) Providing Training, Including the County Partnership if Applicable	Integrated with 601 (Y/N) if Applicable	Attendance			
								Total Attendance	County teachers from QE/601 Facilities	County teachers from non-QE Facilities	Teachers from outside your county
									(if known)	(if known)	(if known)
*TOTAL Training Hours						*TOTAL Attendance			(if known)	(if known)	(if known)
How does the above summary differ from your FY15 Child Care Training Plan?											

CCCCD Topic Area Codes: A=Growth and Development; B=Curriculum; C=Child Guidance; D=Professional Development; E=Health and Safety; F=Program Administration

Non-Prevalent/Other Strategy Performance Summary and Data Collection

For partnership strategies classified as “non-prevalent/other” within First Steps Program Standards, please complete the following form for each non-prevalent strategy. Copy/paste the table as needed.

Check one:

- Continuing strategies: Complete the entire form.
- Discontinued strategies: Complete the form and enter “N/A” for any changes for 2015-16
- New strategies: Complete the form and enter “N/A” for 2014-15 results, and for changes for 2015-16

STRATEGY NAME PROGRAM CODE	Indicate the data sources used/to be used for this strategy:	
	<input type="checkbox"/> FSDC Cases Data (check all that apply): <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 30%;"> <input type="checkbox"/> Client consent/SSNs <input type="checkbox"/> Scholarships/Interventions/Referrals </div> <div style="width: 30%;"> <input type="checkbox"/> Case Information (entry/exit dates, risk factors) <input type="checkbox"/> Screenings and/or Assessments (please specify): </div> <div style="width: 30%;"> <input type="checkbox"/> Home Visits/Group Meetings </div> </div>	
	<input type="checkbox"/> FSDC Child Care Provider Data	
	<input type="checkbox"/> FSDC Outputs Data	
	<input type="checkbox"/> Other data system provided by the program model (specify):	
<input type="checkbox"/> In-house Data (please specify what is collected):		
Goal 1 (specify):	Data Source(s) to demonstrate achievement of Goal 1 and where they are located (FSDC, in-house, etc.):	
Goal 1 Objectives, Output and Outcome Measures, and Assessment Tools Used (specify):		
Goal 1 Results for 2014-15:		
Any changes to Goal 1, Objectives, Outcome Measures and Assessment Tools for 2015-16:		
Goal 2 (specify):	Data Source(s) to demonstrate achievement of Goal 2 and where they are located (FSDC, in-house, etc.):	

	Goal 2 Objectives, Output and Outcome Measures, and Assessment Tools Used (specify):	
	Goal 2 Results for 2014-15:	
	Any changes to Goal 2, Objectives, Outcome Measures and Assessment Tools for 2015-16:	
	Goal 3 (specify):	Data Source(s) to demonstrate achievement of Goal 3 and where they are located (FSDC, in-house, etc.):
	Goal 3 Objectives, Output and Outcome Measures, and Assessment Tools Used (specify):	
	Goal 3 Results for 2014-15:	
	Any changes to Goal 3, Objectives, Outcome Measures and Assessment Tools for 2015-16:	

Copy/paste the above table as needed.

GOVERNANCE

Please complete this chart for FY15.

Did the Partnership conduct board elections in FY15?	Did your Partnership conduct a board orientation in FY15?
---	--

<input type="checkbox"/> Yes, date of board election: <input type="checkbox"/> No, explain:	<input type="checkbox"/> Yes, date: <input type="checkbox"/> No, explain: Percentage of board members having participated in a board orientation: %
--	---

How often does the Partnership Board conduct its meetings?	Does your Partnership Board have approved Conflict of Interest (COI) and Whistleblower policies?
---	---

<input type="checkbox"/> Monthly <input type="checkbox"/> Every other month <input type="checkbox"/> Once a quarter <input type="checkbox"/> Twice a year <input type="checkbox"/> Other, specify: How many times has your full board met in 2014-15?	<input type="checkbox"/> Yes COI, adoption date: <input type="checkbox"/> Yes Whistleblower, adoption date: <input type="checkbox"/> No, explain:
--	---

Describe your Partnership Board composition.

Total # of current board members:

Does your board have any vacancies? Yes No
 If yes, please indicate which position categories are currently vacant:

of board members currently serving with expired terms:

Does the Partnership Board have a committee structure? (check all that apply)

Executive Committee
 Finance/Budget Committee
 Parenting Family Strengthening Committee
 Child Care Committee
 Grants Committee
 Other, specify:
 No Committees

List the names of your Board officers beside their correct title.

<input type="checkbox"/> Chair _____	How many consecutive years has the Chair been serving as Chair? _____
<input type="checkbox"/> Past Chair _____	
<input type="checkbox"/> Vice Chair _____	
<input type="checkbox"/> Secretary _____	
<input type="checkbox"/> Treasurer _____	
<input type="checkbox"/> Asst. Treasurer _____	
<input type="checkbox"/> Asst. Secretary _____	
<input type="checkbox"/> Other _____	

FY16 Local Partnership Board Official Approval Signatures

COUNTY: _____

DATE: _____

Board Chairperson NAME (PRINT):	
TITLE:	Board Chair
SIGNATURE:	

Executive Director (<i>Must be designated by board</i>) NAME (PRINT):	
TITLE:	Executive Director
LIMITATION:	<i>[Please choose an option for each]</i>
Budget Re-Allocation Form	\$ _____ amount or <input type="checkbox"/> no limitations
Invoice Payment Authorization Form	NO CHANGES ALLOWED. Limitation amount set by SCFS.
Contract Authorization	\$ _____ amount or <input type="checkbox"/> no limitations
SIGNATURE:	

Board Member #1 NAME (PRINT):	
TITLE:	
SIGNATURE:	

Board Member #2 NAME (PRINT):	
TITLE:	
SIGNATURE:	

Local partnerships (LP) may choose to require the Board Chair's signature, a Board member's signature or to delegate authority to the Executive Director either entirely or up to a specified amount of funding. LP re-allocation forms will not be approved by SCFS without at least one of the above signatures. The LP board shall determine how many members have signature authority. **Please send a completed copy of this form and a copy of the LP board minutes approving the above authorizations with your renewal plan.**

REMEMBER: Send a copy of this form to your **RFM**



[[Insert Name]] County First Steps

Priority Goals for Fiscal Year 2016

Board Chair:
[[Insert name]]
Executive Director:
[[Insert name]]

Contact Information:
[[Insert street address]]
[[Insert city, state zip]]
Phone: [[Insert phone]] FAX: [[Insert fax]]
Email: [[Insert email]]
Web Site: [[Insert web address]]

FINAL DEADLINE FOR SUBMISSION: 5:00pm, Wednesday, September 30, 2015

1. Email this signed document to your assigned SCFS Technical Assistant (TA) and provide a copy to Dana Gray, dgray@scfirststeps.org

By signing below, the Board Chair and Executive Director each attest that:

- These priority goals for 2015-16 are the result of collaborative discussions with partnership board members, staff, and partners; the [[Insert Name]] County First Steps Partnership's SCFS TA; and other SCFS staff as appropriate using the SCFS template, ***Partnership Reflection and Planning***.
- These priority goals have been approved by the partnership's SCFS TA.
- The [[Insert Name]] County First Steps Partnership Board met on [[DATE]] and voted to approve the enclosed document. Meeting minutes reflecting this action are attached.

Printed Name of Board Chair

Signature of Board Chair

Date

Printed Name of Executive Director

Signature of Executive Director

Date

SECTION 10. Section 59-152-50

(2) review the local partnerships' plans and budgets in order to provide technical assistance and recommendations regarding local grant proposals and improvement in meeting statewide and local goals;
(3) provide technical assistance, consultation, and support to local partnerships to facilitate their success including, but not limited to, model programs, strategic planning, leadership development, best practice, successful strategies, collaboration, financing, and evaluation;

SECTION 12. Section 59-152-70

(F) As a condition of receiving state funds, each local partnership must be subject to performance reviews by South Carolina First Steps, including, but not limited to, local board functioning and collaboration and compliance with state standards and fiscal accountability.

SECTION 19. Section 59-125-160

(A) The South Carolina First Steps to School Readiness Board of Trustees shall establish internal evaluation policies and procedures for local partnerships for an annual review of the functioning of the partnership, implementation of strategies, and progress toward the interim goals and benchmarks.

**[[Insert Name]] County First Steps Partnership
Priority Goals for 2015-16**

Goal	Area*	Objectives: measurable outcomes that will demonstrate progress towards the Goal

*Governance, Resource Development, Finance/Operations, Strategy Performance, Core Functions, or Other

Make sure your priority goals address:

- All issues of compliance with SC First Steps Program Standards for your partnership's strategies
- All issues of compliance with SC First Steps Partnership Standards (Governance and Operations, Fiscal Accountability, Collaboration/Community Engagement, and Resource Development)
- Identifying and serving children and families most at risk
- Increasing access and/or improving quality of services

ATTACHMENT L: Board Roster

October 2015



Board of Trustees -October 2015

SALUTATION	FIRST	LAST	CATEGORY	APPOINTMENT BY	ORIGINAL APPOINTMENT DATE	CURRENT APPOINTMENT DATE
Mr.	Kenneth	Wingate	Governor Designee	Haley	9/3/2014	9/3/2014
Senator	Michael L.	Fair	Senate	Sanford	3/2/2005	3/2/2005
Representative	Rita	Allison	House	Sanford	12/9/2008	12/9/2008
Senator	Gerald	Malloy	Senate	Courson	3/26/2015	3/26/2015
Representative	Jerry N.	Govan	House	Owens	1/22/2013	1/22/2013
Ms.	Molly	Spearman	Superintendent of Education	Virtue of Position	1/14/2015	1/14/2015
Ms.	Mary Lynne	Diggs	Head Start Collaboration Office	Virtue of Position	6/18/2014	6/18/2014
Ms.	Sue	Williams	Children's Trust of SC, CEO	Virtue of Position	6/18/2014	6/18/2014
Ms.	Susan	Alford	DSS, Director	Virtue of Position	2/12/2015	2/12/2015
Ms.	Catherine	Heigel	DHEC	Virtue of Position	6/18/2015	6/18/2015
Mr.	Christian	Soura	DHHS, Director	Virtue of Position	3/5/2015	3/5/2015
Dr.	Beverly	Buscemi	DDSN, Director	Virtue of Position	6/18/2014	6/18/2014
Ms.	Tracy	Lamb	Business Community	Haley	8/14/2014	8/14/2014
Mr.	Walter	Fleming, Jr.	Business Community	McConnell	9/13/2010	9/13/2010
Ms.	Alexia	Newman	Business Community	Lucas	9/15/2014	9/15/2014
Mr.	Timothy	Holt	Business Community	Lucas	10/8/2014	10/8/2014
Mr.	Roger	Pryor, Jr.	Child Care Provider	Haley	9/1/2014	9/1/2014
Ms.	Jennifer	McConnell	Child Care Provider	Courson	2/20/2014	2/20/2014
Ms.	Evelyn	Patterson	Early Childhood Educator	Sanford	3/1/2010	3/1/2010
Mr.	Rick	Noble	Early Childhood Educator	Courson	10/8/2013	10/8/2013
Ms.	Julia-Ellen	Davis	Early Childhood Educator	Harrell	5/18/2007	7/29/2011
Ms.	Lisa	Van Riper	Parent of Young Child	Sanford	7/8/2003	7/25/2005
Ms.	Julie	Hussey	Parent of Young Child	McConnell	12/10/2010	12/10/2010
Ms.	Judith	Aughtry	Parent of Young Child	Harrell	1/1/2004	7/29/2011
Ms.	Amy	Williams	Medical Provider	Haley	7/1/2015	7/1/2015