



AGENDA
OCONEE COUNTY FIRST STEPS EXECUTIVE COMMITTEE MEETING

October 6, 2025

10:00 AM

Westminster Depot | 135 E Main St, Westminster, SC 29693

- | | | |
|---------------|--|------------------------------------|
| I. | Welcome & Introductions | Vanessa Earle, Chair |
| II. | Attendance: | Ashley Robertson |
| III. | Quorum Confirmation | Vanessa Earle and Ashley Robertson |
| IV. | Approval of Agenda | Vanessa Earle and Ashley Robertson |
| V. | Approval of August 4, 2025 Meeting Minutes | Vanessa Earle, Chair |
| VI. | Executive Director and Finance Report | Kaylee Osbon |
| VII. | Vote to Accept Reports | Vanessa Earle, Chair |
| VIII. | Old Business: <i>None</i> | |
| IX. | New Business | |
| | a. Upcoming Events | |
| | b. DPIL Discussion | |
| | c. Possible Programs to Add | |
| | d. Additional Discussion | |
| X. | Approval of Reappointment of Vanessa Earle as Board Chair for a Second Term | |
| XI. | Approval of Reappointment of Breanne Alexander as Vice Board Chair for a Second Term | |
| XII. | Approval of Reappointment of Ashley Robertson as Secretary for a Second Term | |
| XIII. | Adjourn | Vanessa Earle, Chair |



Executive Director Report
Kaylee Osbon, MBA
 Office of Oconee County First Steps
 Oconee County, South Carolina

September 23, 2025

GENERAL INFORMATION

Upcoming First Steps Holiday Hours

November 11th: Veterans Day

November 27th-28th: Thanksgiving

Upcoming Events

Community Convening: Cancelled

October 31st: Halloween Events in Westminster and Seneca

If there are any events that you think we should be a part of, please let me know.

PROGRAMS

Nurse Family Partnership

Month	Total Adults Served	Total # of New Enrollments	# of Children Served	# of New Children Served	# of Families receiving referrals	Home Visit Completed	Average Home Visit Length
July	14	1	10	0	7	27	50 Minutes
August	11	0	7	0	4	17	59.12 Minutes

Childcare Scholarships

We are able to offer 12 Childcare Scholarships, and we currently have 10 Childcare Scholarships awarded to families.

They will continue to receive the \$100 stipend from Oconee First Steps until December 2025.

Dolly Parton Imagination Library

We currently serve 1,933 children in Oconee County.

For the month of September:

49 new enrollments

39 Graduation

1,803 Continuing Reading



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 Oconee County, South Carolina

September 23, 2025

Finance Report

South Carolina First Steps to School Readiness					
FY-26 Board Report Category Budget vs Expenses Report					
09/23/2025					
		Category	Budget	Expense	Balance
Expenses					
101 - Administrative Functions			\$52,697.00	\$5,229.34	\$47,467.66
180 - Core Functions			\$45,382.00	\$3,427.11	\$41,954.89
212 - Imagination Library			\$534,871.00	\$17,987.76	\$516,883.24
214 - Nurse Family Partnership			\$116,299.00	\$2,062.94	\$114,236.06
406 - Countdown To Kindergarten			\$9,500.00	\$0.00	\$9,500.00
407 - Count Down to 4-K			\$4,317.00	\$0.00	\$4,317.00
703 - Scholarship Initiatives			\$38,667.00	\$4,322.52	\$34,344.48
Total Expenses			\$801,733.00	\$33,029.67	\$768,703.33
NET SURPLUS/(DEFICIT)			(\$801,733.00)	(\$33,029.67)	\$768,703.33

Changes to Program Catalog for FY27

6 messages

Cordan, Kerry <KCordan@scfirststeps.org>

Tue, Sep 16, 2025 at 2:49 PM

To: "Cordan, Kerry" <KCordan@scfirststeps.org>

Cc: "Vandervliet, Ann" <AVandervliet@scfirststeps.org>, "Wright, Jade" <jwright@scfirststeps.org>, "Fluker, Jessica" <JFluker@scfirststeps.org>, "Sanders, LaMyra" <LSanders@scfirststeps.org>, "Jones, Alexis" <LJones@scfirststeps.org>, "Kilburn, Janice" <JKilburn@scfirststeps.org>, "Beebe, Gina" <GBeebe@scfirststeps.org>, "Roach, Kate" <KRoach@scfirststeps.org>, "Fitzgerald, Kathleen" <KFitzgerald@scfirststeps.org>, "Artz, Jonathan" <JArtz@scfirststeps.org>

Hello Executive Directors-

In advance of Thursday's Board of Trustees meeting, I wanted to notify you of some changes to the Program Catalog that will take affect for FY27. As you know, the Board of Trustees approves the program catalog as well as the Program Guidelines that direct the implementation of programs through First Steps Local Partnerships. As we begin work towards our 5 year goal of 75% of children demonstrating Kindergarten Readiness, we made a concerted effort to review our program list and the impact those programs can make.

In 2024, the Research and Evaluation Team began a systematic review of all literature published on all 46 of our program offerings, an activity that had not been completed since 2017. This work included hundreds of hours of literature searches, title and abstract screenings, full text reviews, and information extraction to understand the evidence base for the programs in our catalog. In addition, the research team reviewed all relevant national clearinghouses for program offerings related to home visiting, parenting, health, and other early childhood arenas. During this time, program leads also provided feedback on program implementation as well as opportunities for alignment with other state and national models.

The evidence- based designation process, as outlined in legislation, was applied to each program in light of the literature review project. We also evaluated each program for the number of partnerships implementing, the number of children served, and the state and/or national technical assistance available for implementing partnerships. As a result of countless hours of review and meetings to discuss the implications of all program catalog changes, the following recommendations were approved by the Program and Grants Committee in August and will be presented at the Board of Trustees meeting this week.

1. **Change from Evidence-based to Evidence Informed:** Dolly Parton Imagination Library, Raising a Reader, Motherread/Fatheread, Nurturing Parenting- Nurturing Fathers, Nurturing Parenting- Nurturing Skills for Families
2. **Removal from Program Catalog-** Enhanced Early Education-Enrichment Activities, LENA Grow, Incredible Years (all populations), LENA Home, LENA Start, Strengthening Families- Infant and Toddler, Other school transitions programming, Program Operation (current implementer may continue)
3. **Remove as Stand-alone Program** (will be included under Child Care Technical Assistance and Coaching)- Child Care TA: TPOT and TPITOS, Go NAPSACC, Quality Counts
4. **Creation of a Pre-literacy Program Area-** to include DPIL, Library Based Programs, Motherread/Fatheread, Raising a Reader, Reach Out and Read
5. **Program Renamed-** Early Ed Program Support to "3K Program Support", Enhanced Early Education- Onsite Tutoring to "Literacy, Early Math, and Preparation for Kindergarten; LEAP for K"

We recognize that the changes will have an impact on your strategic planning and ultimately, program decisions for FY27. As a reminder, you are welcome to implement Evidence-Informed programs, but your budget must reflect 75% of state funds spent on Evidence-Based Programs.

We are committed to supporting you through this process, and welcome the opportunity to help you think through how to plan for FY27. Please reach out with any questions to me and/or your Program Officer. We will also spend some time at the October 28 in-person ED meeting discussing these changes as well as host office hours in October to support your processing and decision making around these changes (details coming soon).

Attached are documents that provide more detail about the reasons for these recommendations, as well as the full evidence-based review project overview.

Thank you for your service to the children and families in your communities. Together, we can achieve our goal of 75% ready!

-Kerry

Kerry McIver Cordan, PhD

INTERIM CHIEF PARTNERSHIP OFFICER|HEALTH PROGRAM MANAGER
(she/her/hers)

Local Partnerships
South Carolina First Steps to School Readiness
[636 Rosewood Drive | Columbia, SC 29201](#)
C: 803-216-4103



Proposed Changes to Program Catalog_presented to PandG_Aug. 21, 2025.pdf
190K

Kaylee Osbon <ocfsdirector@gmail.com>

Wed, Sep 17, 2025 at 10:37 AM

To: Vanessa Earle <Vanessa.Earle@prismahealth.org>, Alice Lee <alee@share.sc.org>, Sharon Jenkins <Sharon.Jenkins@dss.sc.gov>, Sarah Tate <state@faymca.org>, Nivia Miranda <nmiranda@sdcc.org>, Blair Hinson <bhinson@oconeesc.com>, "Breanne M. Alexander" <AlexanBM@dph.sc.gov>, Ashley Robertson <arobertson@sdcc.org>, Lacey Watkins Moore <thebluebirdnest864@gmail.com>

Good morning,

I hope you all are having a great day so far. Please see the below email for updates on DPIL and other programs that the State Office offers. At the next Board meeting we will have a time for questions and discussions on these changes. In the meantime, if you do have a question, please let me know.

Thank you,
Kaylee

Kaylee Osbon, MBA
Executive Director
Oconee County First Steps
135 E Main St, Westminster, SC 29693
Office: 864-784-2834 | www.oconeefirststeps.org

Proposed Changes to the Local Partnership Program Catalog
Presented to the SC First Steps Program and Grants Committee on August 21, 2025

BACKGROUND: The SC First Steps Board of Trustees determines the evidence designation for each program in the SCFS catalog as outlined in Section 59-152-25 of the First Steps Legislation. Criteria for "Evidence-based program" are shown on the Evidence-Based Determination Process document.

PROCESS: In the fall of 2024, SCFS began the process of identifying and reviewing the literature for all programs in the FY24 Program Guidelines in order to examine new literature in the field and update evidence-based determination, as needed. A systematic review of the literature was completed for each program as well as cross-referencing with national clearinghouse evidence-based program lists.

Criteria for evidence-based, as decided by the Evidence Review State Team were:

1. Two or more studies conducted in the US and published in peer-reviewed journals
2. independent analytic samples of study subjects (published studies were not on the same set of children/families)
3. The "program", as defined by the program model, was shown to have a positive effect on the outcomes of interest and relevant to the mission of First Steps(program-specific)
4. No known conflicts of interest

The review process was conducted in 4 phases: Literature Search, Title/Abstract Screening and Full Text Review, Extraction, and Recommendation (see attached for more details of each phase)

EVIDENCE DESIGNATION CHANGE FROM EVIDENCE BASED TO EVIDENCE INFORMED	
Parenting	
Dolly Parton Imagination Library	Although there are peer-reviewed studies that show an impact of participation in Dolly Parton's Imagination Library on children's school readiness, this program does not meet criteria 1B, 1C, and 1D (employs well-trained and competent staff to whom the program provides continual professional development that is relevant to the specific model being delivered; demonstrates strong linkages to other community-based services; operated to ensure program fidelity). Further, this program is not listed as an evidence-based program in a national clearinghouse.
Motheread/Fatheread	This program does not meet criteria 1A for a designation of evidence-based. There is only 1 peer-reviewed study that has been published demonstrating the impact of this program on child- or family-level outcomes. Further, this program is not listed as an evidence-based program in a national clearinghouse.
Nurturing Parenting- Nurturing Fathers	This program does not meet criteria 1A for a designation of evidence-based. There are no peer-reviewed studies that have been published demonstrating the impact of this program on child- or family-level outcomes. Further, this program is not listed as an evidence-based program in a national clearinghouse.
Nurturing Parenting - Nurturing Skills for Families (Secondary Prevention)	This program does not meet criteria 1A for a designation of evidence-based. There is only 1 peer-reviewed study that has been published demonstrating the impact of this program on child- or family-level outcomes. Further, this program is not listed as an evidence-based program in a national clearinghouse

Proposed Changes to the Local Partnership Program Catalog
Presented to the SC First Steps Program and Grants Committee on August 21, 2025

EVIDENCE DESIGNATION CHANGE FROM EVIDENCE BASED TO EVIDENCE INFORMED

Raising a Reader	This program does not meet criteria 1A for a designation of evidence-based. There is only 1 peer-reviewed study that has been published demonstrating the impact of this program on child- or family-level outcomes. Previously, this program was listed as evidence-based when connected to a parent literacy training program. Further, this program is not listed as an evidence-based program in a national clearinghouse.
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CREATION OF A "PRE-LITERACY" PROGRAM AREA

Parenting

Dolly Parton Imagination Library	Move this program from parenting to the category of "pre-literacy" that focuses on programs that provide education on the importance of promoting literacy in the home.
Library Based and Other Learning Programs	Move this program from parenting to the category of "pre-literacy" that focuses on programs that provide education on the importance of promoting literacy in the home.
Motheread/Fatheread	Move this program from parenting to the category of "pre-literacy" that focuses on programs that provide education on the importance of promoting literacy in the home.
Raising a Reader	Move this program from parenting to the category of "pre-literacy" that focuses on programs that provide education on the importance of promoting literacy in the home.

Health

Reach Out and Read	Move this program from health to the category of "pre-literacy" that focuses on programs that provide education on the importance of promoting literacy in the home.
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REMOVE AS A STAND-ALONE PROGRAM

Early Care and Education

Child Care Technical Assistance and Coaching: Teaching Pyramid Observation Tool (TPOT) and Teaching Pyramid Infant-Toddler Observation Scale (TPITOS)	This program will be included in Child Care Technical Assistance and Coaching as an acceptable assessment as these are valid and reliable assessment tools. These tools can be used to provide data that informs a continuous quality improvement plan with a child care provider.
Nutrition and Physical Activity Self-Assessment for Child Care (Go NAPSACC)	This program will be included in Child Care Technical Assistance and Coaching as an acceptable assessment as these are valid and reliable assessment tools. These tools can be used to provide data that informs a continuous quality improvement plan with a child care provider.
Quality Counts (developed by Spartanburg First Steps)	This program will be included in Child Care Technical Assistance and Coaching as an implementation model.

Proposed Changes to the Local Partnership Program Catalog
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REMOVE FROM THE PROGRAM CATALOG	
Early Care and Education	
Early Education Program Operations	Program will be sunset from the list of program options for FY27. Local partnerships that are currently implementing this program (as of FY26) may continue implementing; however, Early Education Program Operation is prohibited to any new Local Partnerships.
Enhanced Early Education - Enrichment Activities	There is not a clear definition of this program in the peer-reviewed literature. The number of children served and the ability to obtain child-level data for this program are limited.
LENA Grow	No counties implemented this program in FY25 and FY26.
Parenting	
Incredible Years - Parents and Babies	This program will be removed from the list of program options for FY27. The number of children served and the number of counties that implement the program is low. Further, the state office does not have the capacity to provide the necessary technical assistance and monitoring to ensure this program is operated to fidelity.
Incredible Years - Preschooler Basic	The number of children served and the number of counties that implement the program is low. Further, the state office does not have the capacity to provide the necessary technical assistance and monitoring to ensure this program is operated to fidelity.
Incredible Years - Toddler Basic	The number of children served and the number of counties that implement the program is low. Further, the state office does not have the capacity to provide the necessary technical assistance and monitoring to ensure this program is operated to fidelity.
LENA Home	The number of children served and the number of counties that implement the program is low. The national office does not support onboarding of new sites using this model.
LENA Start (Language Environment Analysis - Group Based	No counties implemented this program in FY25 and FY26.
Strengthening Families Infant and Toddler	No counties are implementing this program in FY26. Strengthening Families has pulled back on using this curriculum and has shifted the focus onto the Strengthening Families 7-17 curriculum. Further, the state office does not have the capacity or expertise to provide the necessary technical assistance to ensure this program is operated to fidelity. Further, there are no peer-reviewed studies that have been published demonstrating the impact of this program on child- or family-level outcomes. This curriculum is not listed as an evidence-based program in a national clearinghouse.
School Transitions	
Other school transitions programming	The First Steps State Office will review the literature and consider new guidelines that provide a clear definition of this program.

Proposed Changes to the Local Partnership Program Catalog
Presented to the SC First Steps Program and Grants Committee on August 21, 2025

PROGRAM RENAMED	
Early Care and Education	
Early Education Program Support	Program will be renamed: "3K Program Support"
Enhanced Early Education - On-site Tutoring	Program will be renamed "Literacy, Early Math, and Preparation for Kindergarten; LEAP for K"

SCFS Evidence-based Determination Process

FIRST STEP LEGISLATION - SECTION 59-152-25. Definitions.

(A) "Evidence-based program" means a program based on a clear and consistent program model that is designated as such by the South Carolina First Steps to School Readiness Board of Trustees because the program:

- (1)
 - (a) is grounded in published, peer-reviewed research that is linked to determined outcomes;
 - (b) employs well-trained and competent staff to whom the program provides continual professional development that is relevant to the specific model being delivered;
 - (c) demonstrates strong linkages to other community-based services; and
 - (d) is operated to ensure program fidelity; or
- (2) is commonly recognized by experts in the field as such a program.

(1) Procedure for Determining "Evidence Based" Status:

- 1. Is the program/strategy described in a peer reviewed research article evaluated by either a random assignment or quasi-experimental design or from a meta-analysis of multiple single studies?
- 2. Does the research described in the peer-reviewed journal article demonstrate program effectiveness?
- 3. Does the published research describe program implementation as the strategy is currently (or could be) implemented? That is, are strategy accountability standards (or could they be) written so that strategy implementation matches implementation in the research study that demonstrated effectiveness?

Peer-reviewed journals are scholarly journals that only publish articles that have passed through a review process in which an author's peers, recognized researchers in the field, read and evaluate a paper (article) submitted for publication and recommend whether the paper should be published, revised, or rejected.

University libraries provide access to electronic data bases for such articles. They have search options that allow for search refinement of peer reviewed journals only.

Identifying evidence-based qualifying programs entails the following process:

1. Conduct a literature search of the program name in peer-reviewed journals
 - a. Select databases (electronically in university library system) to identify relevant articles in peer-reviewed journals
 - i. Education Full Text (H.W. Wilson)
 - ii. Education Research Complete
 - iii. ERIC
 - iv. MEDLINE
 - v. PsycARTICLES
 - vi. PsycCRITIQUES
 - vii. Psychology and Behavioral Sciences Collection
 - viii. PsycINFO
 - b. Refine the search to “Scholarly (Peer Reviewed) Journals” only
 - c. Search by program name
2. As an additional check, contact program author for possible soon-to-be released articles that meet the criteria above
3. If a strategy is a compilation/combination of other programs, conduct literature search described above for all referenced programs and, if the programs meet the criteria of research design, peer-reviewed journal, and demonstrated effectiveness, determine which components of the program in the partnership strategy are also shown to be effective by the research.

(2) EXAMPLES OF EVIDENCE BASED PROGRAMS RESOURCE LISTS; that is, compilations of programs “commonly recognized by experts in the field”

Promising Practices Network (PPN): An archived (as of June 2014) network, PPN is a group of individuals and organizations dedicated to providing quality evidence-based information about what works to improve the lives of children, families, and communities. It offers research-based information on what works to improve the lives of children and families. RAND researchers and other scientific experts screen the information for scientific credibility and only post items that contain objective, high-quality information. <http://www.promisingpractices.net/>

What Works Clearinghouse: An initiative of the U.S. Department of Education’s Institute of Education Sciences, the What Works Clearinghouse reviews the existing research on different programs, products, practices, and policies in education. Its process in determining “what works” includes whether participants were randomly assigned, the attrition rate of participants, if groups were similar before the intervention began, and if there were confounding factors or concerns with the outcomes. Its goal is to provide educators with the information they need to make evidence-based decisions. <https://ies.ed.gov/ncee/wwc/>

Home Visiting Evidence of Effectiveness (HomVEE): The Department of Health and Human Services launched the HomVEE review to conduct a thorough and transparent review of the home visiting research literature. HomVEE provides an assessment of the evidence of effectiveness for home visiting program models that target families with pregnant women and children from birth to kindergarten entry. Steps of the review are: conduct a broad literature search, screen studies for relevance, prioritize program models for the review, rate the quality of impact studies with eligible designs, assess evidence of effectiveness for each model, review implementation information for each model, and address potential conflicts of interest. <https://homvee.acf.hhs.gov/>

Office of Juvenile Justice and Delinquency Prevention's (OJJDP's) Model Program Guide (MPG): MPG uses expert study reviewers and CrimeSolutions.gov's program review process, scoring instrument, and evidence ratings. Study Reviewers analyze the most rigorous evaluation research available to determine whether there is evidence that the program achieves its goal(s). Up to three studies, representing the most rigorous evaluation research available, are selected to comprise the program's evidence base. The reviewers consider the program's conceptual framework, the study design quality, study outcomes, and program fidelity. <https://www.ojjdp.gov/mpg/>

California Evidence Based Clearinghouse for Child Welfare (CEBC): This clearinghouse provides child welfare professionals with access to vital information about selected child welfare-related programs. Programs are rated by review of published, peer-reviewed research articles using the Scientific Rating Scale. Typically, the raters include the topic expert, and two of the CEBC staff. Each eligible program also is examined to see which child welfare outcome(s) (e.g., safety, permanency, and/or child/family well-being) are addressed in the research evidence for that program. <http://www.cebc4cw.org/>

Substance Abuse and Mental Health Services Administration's (SAMHSA's) National Registry of Evidence Based Programs and Practices (NREPP): This is a searchable online registry of more than 250 interventions supporting mental health promotion, substance abuse prevention, and mental health and substance abuse treatment. Programs are pre-screened to ensure that at least one evaluation study meets the minimum criteria for review. At that point, programs are reviewed based upon rigor, effect size, program fidelity, and its conceptual framework. <https://www.samhsa.gov/nrepp>

Blueprints for Health Youth Development (Blueprints): the mission of Blueprints is to identify outstanding violence and drug prevention programs that meet a high scientific standard of effectiveness. Their three most important factors in determining program

effectiveness are evidence of a deterrent effect with a strong research design, demonstration of a sustained effect, and multiple site replication. Housed at: Center for the Study and Prevention of Violence (CSPV), Institute of Behavioral Science, University of Colorado Boulder - <http://www.blueprintsprograms.com/>

ChildTrends' Lifecourse Interventions to Nurture Kids Successfully (LINKS): Child Trends' What Works is a searchable register of over 700 programs that have had at least one randomized evaluation to assess child or youth outcomes related to education, life skills, and social/emotional, mental, physical, behavioral, or reproductive health. Evaluations of programs consider the population and participants, the program evaluations methodology, its results, and its impacts.

<https://www.childtrends.org/links-syntheses/>

<https://www.childtrends.org/what-works/>

Coalition for Evidence-Based Policy (CEBP): The CEBP sought to increase government effectiveness through the use of rigorous evidence about what works in social interventions. Its purpose was to launch a competition to select and fund low-cost randomized controlled trials (RCTs) that build actionable evidence about "what works" in U.S. social spending. The CEBP ceased operation in 2015, and the Coalition's leadership and core elements of the group's work have been integrated into the Laura and John Arnold Foundation. Its website is no longer updated but remains available.

<http://coalition4evidence.org/>

The Smart Start Resource Guide of Evidence-Based and Evidence-Informed Programs and Practices: This resource guide was developed as a response to North Carolina's legislative requirement that Smart Start funds only be allotted to evidence-based and evidence-informed activities. Systematic searches of the research literature were made to identify articles and reports related to the commonly funded Smart Start activities. The North Carolina Partnership for Children Inc.'s Board of Directors adopted definitions of evidence-based practices: "those that have repeatedly and consistently demonstrated desirable outcomes through application of scientific research methods (replicated experimental, experimental, and quasi experimental)."

<http://www.smartstart.org/evidence-based-resource-guide/>

Evidence Review Project

Project Process

The evidence review project was conducted in multiple phases between May 2024 and August 2025: literature search; title/abstract screening; full-text review; extraction; recommendation.

Phase 1: Literature Search

During phase 1, the Project Lead or a Research Assistant conducted a literature search for each program in peer-reviewed journals. A peer-reviewed journal is a scholarly journal that has published articles that have passed through a standardized review process during which the author's peers read and evaluate the article submitted for publication. Based on the article that was submitted for publication, reviewers will recommend whether the article should be published, revised, or rejected.

To conduct the literature search, a search strategy was created for each program. The search strategy contained keywords related to the population of interest (e.g., "infants," "children," or "early childhood educators"), the program name (e.g., "Parents as Teachers" or "Child Care Scholarships"), and the outcome of interest (e.g., "school readiness"). The search strategy was then input into three databases – ERIC, PsycInfo, and Web of Science – to identify potentially eligible articles for inclusion in the review. These databases were selected because they focus on disciplines such as education, social science, psychology, and health, domains that are relevant to First Steps' outcome domains of interest.

If the search strategy yielded any results, the results were exported and saved. The exported files contained information such as the title of the paper, the authors, the year of publication, the journal in which the paper was published, and a brief description of the paper. The exported files were then uploaded into Covidence, a web-based platform that was used to systematically conduct the evidence review process for each program.

First Steps staff also reviewed evidence-based program resource lists and national clearinghouses (i.e., compilations of programs that are commonly recognized by experts in the field) to identify eligible articles. The evidence-based program resource lists that were searched included:

- **Promising Practices Network (PPN):** An archived (as of June 2014) network, PPN is a group of individuals and organizations dedicated to providing quality evidence-based information about what works to improve the lives of children, families, and communities. It offers research-based information on what works to improve the lives of children and families. RAND researchers and other scientific experts screen the information for scientific credibility and only post items that contain objective, high-quality information.
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participants, if groups were similar before the intervention began, and if there were confounding factors or concerns with the outcomes. Its goal is to provide educators with the information they need to make evidence-based decisions. <https://ies.ed.gov/ncee/wwc/>

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its results, and its impacts. <https://www.childtrends.org/links-syntheses/>
<https://www.childtrends.org/what-works/>

- **Coalition for Evidence-Based Policy (CEBP):** The CEBP sought to increase government effectiveness through the use of rigorous evidence about what works in social interventions. Its purpose was to launch a competition to select and fund low-cost randomized controlled trials (RCTs) that build actionable evidence about “what works” in U.S. social spending. The CEBP ceased operation in 2015, and the Coalition’s leadership and core elements of the group’s work have been integrated into the Laura and John Arnold Foundation. Its website is no longer updated but remains available. <http://coalition4evidence.org/>
- **The Smart Start Resource Guide of Evidence-Based and Evidence-Informed Programs and Practices:** This resource guide was developed as a response to North Carolina’s legislative requirement that Smart Start funds only be allotted to evidence-based and evidence-informed activities. Systematic searches of the research literature were made to identify articles and reports related to the commonly funded Smart Start activities. The North Carolina Partnership for Children Inc.’s Board of Directors adopted definitions of evidence-based practices: “those that have repeatedly and consistently demonstrated desirable outcomes through application of scientific research methods (replicated experimental, experimental, and quasi experimental).” <http://www.smartstart.org/evidence-based-resource-guide/>

Phase 2: Title/Abstract Screening

Within Covidence, each program had at least two reviewers who were assigned to complete the title/abstract screening. During the title/abstract screening, two reviewers independently examined the title and abstract of each article that was uploaded. Reviewers were instructed to vote “yes” if the title and/or abstract includes the name of the program and includes an analysis of the impact of participation in the program on at least one outcome. Reviewers were instructed to vote “no” if the title and/or abstract does not include the name of the program; the article does not examine the impact of participation in the program on at least one outcome; the article is a book chapter, conference abstract, dissertation, or position statement; or if the article is a review paper (e.g., literature review, systematic review). In some instances, the reviewer may be unable to determine whether the article should receive a “yes” or a “no” vote based on the information included in the file. In these instances, the reviewer was instructed to vote “maybe” on the article.

After two reviewers independently reviewed each article, the article had three possible outcomes. If the article received two “yes” votes, the article proceeded to the full-text review. If the article received two “no” votes, the article was excluded from further review. If the article received two differing votes (e.g., one “yes” and one “no” vote, one “yes” and one “maybe” vote), the article was flagged as a conflict. Articles that were flagged as a conflict were resolved through a consensus discussion. During the consensus discussion, the reviewers and Project Lead met to review the article in detail and determine whether the article should be included in the next phase.

Phase 3: Full-Text Review

Within Covidence, each program had at least two reviewers who were assigned to complete the full-text review. For this phase, a member of the review team located the full text of the article and uploaded the PDF into Covidence. Once the PDF of the article was uploaded, two reviewers independently read the article to determine if the article was eligible for inclusion in the extraction phase. To determine eligibility, the reviewer read the article to ensure that the article met the inclusion criteria (i.e., the article studied the identified program within the appropriate population and the article used an appropriate study design to analyze the impact of participation on at least one outcome). Based on their review of the article, the reviewers were instructed to vote “yes” or “no” as to whether the article should be included in the extraction. If a reviewer voted “no,” the reviewer had to select the primary reason for exclusion (e.g., wrong intervention, wrong setting, wrong study design, etc.). Some articles may have been ineligible for multiple reasons; however, reviewers were instructed to identify the primary reason for exclusion.

After two reviewers independently reviewed each article, the article had three possible outcomes. If the article received two “yes” votes, the article proceeded to the extraction phase. If the article received two “no” votes, the article was excluded from further review. If the article received two differing votes (e.g., one “yes” and one “no” vote), the article was flagged as a conflict. Articles that were flagged as a conflict were resolved through a consensus discussion. During the consensus discussion, the reviewers and Project Lead met to review the article in detail and determine whether the article should be included in the next phase.

Phase 4: Extraction

Within Covidence, a standardized extraction template was built for each program. The extraction template included directions on what information was required to be extracted from each article. Information that was extracted from each article included the study methods, sample size, demographic characteristics of the sample, the outcomes of the study, the strengths and limitations of the study, and the study evidence rating.

For the outcomes reported in the study, reviewers were instructed to list the outcome measure, whether the finding was statistically significant, and the direction of the effect. A finding was considered statistically significant if the p -value of the test was less than 0.05. Each outcome was assigned one of three ratings: 1) favorable – a finding showing a statistically significant impact on an outcome measure in a direction that is beneficial for children and parents; 2) no effect – a finding is not statistically significant; or 3) unfavorable or ambiguous – a finding showing a statistically significant impact on an outcome measure in a direction that may indicate potential harm to children and/or parents. These criterion and instructions were adapted from the process that is used during the [HomVEE review process](#).

Further, reviewers were instructed to provide study evidence ratings which assessed the strength of the research behind the outcomes reported. Each article was assigned one of three ratings: 1) high, there is strong evidence to conclude that at least one finding reported in the manuscript is attributable to the intervention that was examined; 2) moderate, there is some

evidence that at least one finding reported in the manuscript is attributable, at least partly, to the intervention that was examined. However, other factors not accounted for in the study might have also contributed to the finding; or 3) low, there is little evidence that the reported finding is attributable, partly or as a whole, to the intervention that was examined. These criterion and instructions were adapted from the process that is used during the [HomVEE review process](#).

During the extraction phase, one reviewer completed the standardized extraction template for each article. Once the extraction template was completed, a second reviewer checked the extraction template for quality assurance. Once the second reviewer completed the quality assurance check, the extraction phase was completed.

Phase 5: Recommendation

After extraction templates were completed for all eligible articles identified for a given program, the Project Lead completed the recommendation template for the Board of Trustees. The recommendation template highlighted which evidence-based criteria were met, the number of studies reviewed, and the findings from each included article. For programs that did not meet the criteria for a designation as “evidence-based,” a justification for why the program should be considered “evidence-informed” was provided. The recommendations for each program will be presented to the Program and Grants Committee of the Board of Trustees on August 21, 2025 and then to the full Board on September 18, 2025. The decisions adopted by the full Board regarding a program’s evidence designation are set to go into effect as of July 1, 2026.

Program Name	Parent Child+	Code	206
Program Area	Parenting		

Program Description
<p>Parent Child+ works one-on-one with families with children ages 16-48 months of age who, despite facing significant life challenges, are committed to building a brighter future for their children and themselves. Over the course of two years, families receive 92 home visits and acquire a library of 46 high quality books and educational toys and 46 curricular guide sheets with tips on vocabulary-building, engaging conversation, skill development, social-emotional development, imaginative play, and literacy, music, and art activities.</p> <p>Partnerships funding Parent Child+ shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting Parent Child+ requirements along with a few SC First Steps specific additions.</p> <p>The following guideline includes both the Parent Child+ compliance standards and SC First Steps minimum requirements.</p>

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
<input checked="" type="checkbox"/> Families <input type="checkbox"/> Children <input type="checkbox"/> Adults <input type="checkbox"/> Providers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Healthy and Safe <input checked="" type="checkbox"/> Actively Supported by Their Families and Communities <input checked="" type="checkbox"/> Arrive at School Ready to Reach Their Highest Potential

Data Collection Requirements
In KITS: <input checked="" type="checkbox"/> Client-level <input type="checkbox"/> Monthly outputs If monthly outputs in KITS, is client-level data required by model elsewhere? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, client-level data required by model elsewhere, then name of external data system(s):

THE CRITERIA OUTLINED BELOW REPRESENT ALL PROGRAM REQUIREMENTS. THOSE MARKED WITH AN ASTERISK (*) ARE USED IN THE ONGOING EVALUATION OF LOCAL PARTNERSHIP PROGRAM PERFORMANCE.

Targeting Criteria: Who does this program target?	
Age	
Age Criteria 1	16 to 48 months.
Note: A family can receive PC+ services as a unit only once (one time PC+ rule). Families can only be re-enrolled with the permission of SC First Steps. All requests, including a detailed justification, must be submitted to the SC First Steps Parenting Programs Manager for approval.	
Risk Factors	
*Risk Factor Criteria 1	100% of families must have at least one First Steps risk factor at the time of enrollment.
*Risk Factor Criteria 2	60% of families must have at least two First Steps risk factors at the time of enrollment.

Service Criteria: How is this program implemented?	
Visits (Home or Site):	
*Visit Criteria 1: Duration	Visits will last a minimum of 30 minutes.
*Visit Criteria 2: Frequency 1	All families shall be offered no less than two visits per week.
*Visit Criteria 2: Frequency 2	A minimum of 23 weeks or 46 home visits annually across a period of two years (46 weeks/92 visits total).
Visit Criteria 3: Location 1	While home-based visitation is 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.
Note: The alternative location must be suitable to delivery of parenting services such that integrity of the session and confidentiality of families is maintained.	
Visit Criteria 3: Location 2	At a family's discretion and supervisor approval virtual and telecommunication visits will also be considered acceptable and count as a home visit. The reason must be documented in the Home Visit Record.

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Early Learning Specialists (ELS)	Maximum Number of Cases	16
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	<ul style="list-style-type: none">NEW HIRES are required to hold a bachelor’s degreeAll PC+ ELS must possess at least a high school diploma or equivalency with two years of related supervised experience, or 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. If recruiting an AmeriCorps member, a high school diploma or equivalency is required.PC+ ELS, from the community share a language and cultural background with the family.Each PC+ ELS shall be trained and supervised by a site coordinator approved by the PC+ National Center.All training (for both program and individual staff members) must be documented on-site		
Program Role	Site Coordinator	Maximum Number of Cases	N/A
KITS Related Job Title or Role	Site Supervisor	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	<ul style="list-style-type: none">Partnerships must employ at least one Site Coordinator trained by the PC+ National Center or a certified local trainer (with sites serving 60 or more families employing a second Site Coordinator).The model recommends that community-based site coordinators have educational, work, and/or life experience relevant to the work and their community.2 years of supervisory experience and/or supervised working experience in the field is recommended. All staff providing supervision and/or program oversight must have completed the Parent Child+ training.		

*Assessment 1: Parent Involvement in Early Learning (PIEL)	
PIEL Criteria 1	All participating families, enrolled August 2023 on shall receive the Parental Involvement in Early Learning (PIEL) within 45 days of enrollment, and every 6 months thereafter until program exit.
PIEL Criteria 2	The goal is 100% of eligible parent/caregiver participants be assessed using the PIEL. 80% is the minimum requirement for compliance.
Note: Families enrolled prior to August 2023 will continue to be assessed using PICCOLO, CBT, and PACT until they exit the program.	
*Assessment 2: Child Behavior Traits (CBT)	

CBT Criteria	Administer the Evaluation of Child Behavior Traits (CBT) as required by program model.
Referral Criteria: What are this program's requirements for client referrals and connections?	
Referral Criteria 1: Referrals	ELS shall seek to ensure that each participating family connects with a pediatric medical home and other community services as appropriate.
Note: Partnerships and their group facilitators shall ensure active collaboration with other parenting and family support services in their communities, refer families to these services as necessary, and follow up to ensure that appropriate connections have been established.	
Other Criteria: Are there other program criteria that exist?	
*Other Criteria 1	<p>ELSSs shall develop well-documented Family Goal Plans with families within 3 months of enrollment, and subsequently update these plans at least semi-annually to gauge progress and goal attainment using the tools listed below based on family program entry date:</p> <ul style="list-style-type: none"> • All participating families, enrolled from August 2023 on shall receive the Parental Involvement in Early Learning (PIEL) to guide family goal setting and evaluate changes in parent behavior, as required. • Families enrolled prior to August 2023 may continue to be assessed using PICCOLO, CBT, and Parent and Child Together (PACT) Observations to guide family goal setting and evaluate changes in parent behavior, as required.
Other Criteria 2	Each participating PC+ program shall convene a supervisory meeting of all pertinent program personnel, ELSSs, and 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.
Other Criteria 3	Report all required data within the national PC+ Management Information System.

Program Name	Positive Parenting Program (Triple P) – Level 2	Code	238
Program Area	Parenting		

Program Description
<p>The Positive Parenting Program (Triple P) is a parent training program designed for parents with children ages 0-12. Triple P parent trainings help parents:</p> <ul style="list-style-type: none"> • Manage misbehavior and encourage positive changes. • Establish rules and routines for their children and family. • Participate in self-care. • Feel confident in their parenting skills. <p>Within each level, there is also a choice of delivery methods. This ensures Triple P is flexible enough to meet the needs of individual and specific communities. It is designed to give parents as much help as they need – but not too much – to prevent over-servicing and encourage self-sufficiency.</p> <p>Level 2 is an introduction to strategies of positive parenting. It can be delivered as Triple P Selected Seminar Series, where parents and caregivers attend any number of three 90-minute seminars (Power of Positive Parenting; Raising Confident, Competent Children; and Raising Resilient Children) with tip sheets provided to all seminar participants, and/or a brief one-on-one consultation of 15–30 minutes with a primary care practitioner, targeting a specific issue. If required, there can be a follow-up visit or phone call.</p> <p>To ensure the delivery of high-quality services and the validity of agency-wide evaluation efforts, partnerships shall ensure that each First Steps-funded strategy is implemented with fidelity to its published, research-based model. The Triple P curriculum will be implemented as outlined in the Triple P Practitioner’s Manual.</p>

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps’ Child-Level Outcomes
<input type="checkbox"/> Families <input type="checkbox"/> Children <input checked="" type="checkbox"/> Adults <input type="checkbox"/> Providers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Healthy and Safe <input checked="" type="checkbox"/> Actively Supported by Their Families and Communities <input type="checkbox"/> Arrive at School Ready to Reach Their Highest Potential
Data Collection Requirements			
In KITS: <input type="checkbox"/> Client-level <input checked="" type="checkbox"/> Monthly outputs If monthly outputs in KITS, is client-level data required by model elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, client-level data required by model elsewhere, then name of external data system(s):			
If Yes, Monthly Outputs Data Required			
<input type="checkbox"/> Books Distributed <input type="checkbox"/> Books Read <input type="checkbox"/> Literacy Kits Given <input checked="" type="checkbox"/> Children 0-5 Served (unduplicated) <input checked="" type="checkbox"/> Families Served (unduplicated) <input checked="" type="checkbox"/> Adult Family Members Served (unduplicated) <input type="checkbox"/> Providers Served (e.g., Schools, Centers) <input type="checkbox"/> Classrooms Served (unduplicated)		<input checked="" type="checkbox"/> Referrals Made <input type="checkbox"/> Total Number of Health Screenings <input checked="" type="checkbox"/> Total Number of One-on-One Client Visits <input checked="" type="checkbox"/> Total Number of One-on-One Client Visit Hours <input checked="" type="checkbox"/> Group Meetings, Trainings, Events: Number of Sessions <input checked="" type="checkbox"/> Group Meetings, Trainings, Events: Number of Hours <input checked="" type="checkbox"/> Group Meetings, Trainings, Events: Total Attendance <input type="checkbox"/> Other (please specify): Click or tap here to enter text.	

THE CRITERIA OUTLINED BELOW REPRESENT ALL PROGRAM REQUIREMENTS. THOSE MARKED WITH AN ASTERISK (*) ARE USED IN THE ONGOING EVALUATION OF LOCAL PARTNERSHIP PROGRAM PERFORMANCE.

Targeting Criteria: Who does this program target?

Age	
Age Criteria	Parent or caregiver of a child prenatal to kindergarten entry.
Note: Newly enrolled families should contain an expectant mother and/or a child under 36 months of age. If unique and/or emergency circumstances warrant, Partnerships may enroll families with children aged three-years or older.	
Risk Factors	
*Risk Factor Criteria 1	100% of families must have at least one First Steps risk factor at the time of enrollment.
*Risk Factor Criteria 2	60% of families must have at least two First Steps risk factors at the time of enrollment.

Service Criteria: How is this program implemented?	
Primary Care Consultation	
*Visit Criteria 1: Duration	Visits will last a minimum of 15 - 30 minutes
*Visit Criteria 2: Frequency	Single consultation to target specific issue. Follow-up if needed.
Visit Criteria 3: Location	In person or virtual.
Note: Intake forms (provided with the Triple P manual, as applicable) must be completed with the parent or caregiver (and, as appropriate, with the child, teacher, etc.) prior to the implementation of Triple P.	
Triple P Selected Seminar Series	
*Group Connection Criteria 1: Duration	Visits will last a minimum of 90 minutes
*Group Connection Criteria 2: Frequency	1 – 3 seminars
Note: Intake forms (provided with the Triple P manual, as applicable) must be completed with the parent or caregiver (and, as appropriate, with the child, teacher, etc.) prior to the implementation of Triple P.	

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Triple P Practitioner	Maximum Number of Cases	N/A
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	Triple P practitioners must have a background in child development or family functioning. They must complete both training and accreditation in the Triple P – Level 2 before delivering services. All training and materials to deliver the program must be obtained through Triple P America.		
Program Role	Supervisor	Maximum Number of Cases	N/A
KITS Related Job Title or Role	Site Supervisor	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	2 years of supervisory experience and/or or supervised working experience in the field is recommended. All staff providing supervision and/or program oversight must have completed both training and accreditation in the Triple P – Level 2.		

Referral Criteria: What are this program's requirements for client referrals and connections?	
Referral Criteria 1: Referrals	Triple P Practitioner shall seek to ensure that each participating family connects with a pediatric medical home and other community services as appropriate.

Other Criteria: Are there other program criteria that exist?	
Other Criteria 1	First Steps programs shall administer client satisfaction surveys at least annually, and use data collected for program improvement.
Other Criteria 2	Obtain Triple P accreditation; the training and accreditation takes 6 to 8 weeks.

Program Name	Child Care Training	Code	605
Program Area	Early Care and Education		

Program Description
<p>SC First Steps Child Care Training programs support child care staff in completing training hours requirements as mandated by the SC Department of Social Service (SC DSS) Child Care Licensing requirements. In addition, Child Care Training is considered part of a Local Partnership's larger child care quality enhancement efforts in the following ways: by promoting child care staff advancement along the SC Endeavors career lattice and by the child care program's improvement in the state's existing quality infrastructure, the ABC Quality Rating and Improvement System.</p> <p>Training hours earned by child care staff shall be documented in SC Endeavors on the Learning Record/DSS Official Transcript which is available to staff by creating an account within the SC Endeavors Registry. DSS Licensing staff reviews the Learning Record/DSS Official Transcript to ensure annual training requirements were met.</p> <p>Each partnership training strategy shall be explicitly integrated with either (or some combination of) the following: (1) The Local Partnership's child care technical assistance strategy; (2) A regional/community-based quality enhancement effort; and/or (3) A training/coaching plan centered on a research-based curriculum or model, with SC First Steps approval.</p>

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
<input type="checkbox"/> Families <input type="checkbox"/> Children <input type="checkbox"/> Adults <input checked="" type="checkbox"/> Providers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Healthy and Safe <input type="checkbox"/> Actively Supported by Their Families and Communities <input checked="" type="checkbox"/> Arrive at School Ready to Reach Their Highest Potential
Data Collection Requirements			
In KITS: <input type="checkbox"/> Client-level <input checked="" type="checkbox"/> Monthly outputs If monthly outputs in KITS, is client-level data required by model elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, client-level data required by model elsewhere, then name of external data system(s):			
If Yes, Monthly Outputs Data Required			
<input type="checkbox"/> Books Distributed <input type="checkbox"/> Books Read <input type="checkbox"/> Literacy Kits Given <input checked="" type="checkbox"/> Children 0-5 Served (unduplicated) <input type="checkbox"/> Families Served (unduplicated) <input type="checkbox"/> Adult Family Members Served (unduplicated) <input checked="" type="checkbox"/> Providers Served (e.g., Schools, Centers) <input checked="" type="checkbox"/> Classrooms Served (unduplicated)		<input type="checkbox"/> Referrals Made <input type="checkbox"/> Total Number of Health Screenings <input type="checkbox"/> Total Number of One-on-One Client Visits <input type="checkbox"/> Total Number of One-on-One Client Visit Hours <input checked="" type="checkbox"/> Group Meetings, Trainings, Events: Number of Sessions <input checked="" type="checkbox"/> Group Meetings, Trainings, Events: Number of Hours <input checked="" type="checkbox"/> Group Meetings, Trainings, Events: Total Attendance <input type="checkbox"/> Other (please specify): Click or tap here to enter text.	

THE CRITERIA OUTLINED BELOW REPRESENT ALL PROGRAM REQUIREMENTS. THOSE MARKED WITH AN ASTERISK (*) ARE USED IN THE ONGOING EVALUATION OF LOCAL PARTNERSHIP PROGRAM PERFORMANCE.

Service Criteria: How is this program implemented?	
Visits	
*Visit Criteria 1: Duration	Duration of annual training hours are aligned to the requirements of SC DSS from January 1 to December 31 of each calendar for the following facility types: <ul style="list-style-type: none"> Child Care Centers - 20 hours for center directors and 15 hours for center staff;

	<ul style="list-style-type: none"> Registered Faith Based Center Care – 20 hours for faith-based center directors and 15 hours for faith-based staff; Group Child Care Home – 15 hours for operators and 10 hours for caregivers; and Family Child Care Home (licensed and registered) – 10 hours for operators and 10 hours for emergency/contact employees.
Visit Criteria 2: Frequency	Frequency will be determined by need. The Local Partnership will develop training plans at the beginning of the fiscal year and determine frequency using input derived from participating school administrators, teachers, and families.
Visit Criteria 3: Location	The training location is based on the local child care programs needs and the Local Partnership ability to accommodate the needs of programs.
Design of Training	
Standalone Training	Standalone training is a one-time training focused on one of the content areas to include Child Growth and Development, Curriculum, Child Guidance, Health and Safety, Nutrition, Special Needs, Professional Development, Program Administration, or other areas approved by the SC DSS, and must include blood-borne pathogens training as required by OSHA.
Note: CPR and first aid training will not count in the 15-hour SC DSS requirement.	
Series of Trainings/Cohort	Series of trainings/cohort is multiple trainings on a content area and/or curriculum accruing over a period of time.
Conference	Conference hosted by an early childhood organization that provides breakout sessions over the course of a day or multiple days covering various content areas. Each breakout session must be at least one hour to receive SC DSS credit hours. A conference may be provided in various formats and settings based on SC Endeavors Conference Tips document (https://scendeavors.org/media/lrad33o2/conference-tips.pdf).

Retention Criteria: What are this program's goals for client retention?	
*Retention Criteria	For training series/cohort for participants to attend 100% of sessions.

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	SC Endeavors Certified Trainor	Maximum Number of Cases	N/A
KITS Related Job Title or Role	Other	Minimum Education Level	Bachelors or four-year degree
Required Certifications and/or Training	Certified Trainers are required by SC Endeavors to complete requirements for certification and maintain certification thereafter (https://scendeavors.org/professional-development/trainer/)		

Success Criteria: How is success in this program defined for participants?	
Success Criteria	Child care provider advancement in South Carolina's quality rating and improvement system, ABC Quality.

Other Criteria: Are there other program criteria that exist?	
*Other Criteria 1	All data must be entered within the First Steps Data Collection System monthly. Data entries will be checked monthly to ensure model fidelity.
Other Criteria 2	The Local Partnership must provide eight (8) hours of high-quality, certified training (stemming directly from the program's Quality Improvement Plan) to each Child Care Training (605) staff if implementing a Child Care Technical Assistance and Coaching strategy.
Other Criteria 3	If utilized, participant fee proposed in association with state-funded training opportunities shall be nominal and must be either: 1) detailed in the partnership's Child Care Training Plan, or 2) approved in advance by SC First Steps.

Other Criteria 4	Local Partnerships are expected to keep an electronic record of training attendees, their participation in training sessions and follow-up, and the child care programs and children served, and submit all required information to SC Endeavors for participants to receive DSS credit hours.
*Other Criteria 5	Local 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, county-wide directors meeting to assess need. Partnerships must convene a directors' meeting at least once per year.
Other Criteria 6	The SC Endeavors certified trainer must include one to two measurable training objectives for each hour of training, administer a post survey (multi-session trainings can have one post-survey covering the full event), and at least one form of follow-up by the Local Partnership.
Other Criteria 7	Local Partnerships will use the FSDC's child care module to track follow-up visits and other consultants' activities with child care programs.