

Contents

OPERATIONAL GUIDELINES	3
Operations and Governance	6
Fiscal Accountability	9
Core Functions	11
Resource Development	14
General Program Guidelines	15
PARENTING PROGRAMS	17
Family Café	18
Parents as Teachers	21
Motheread/Fatheread	27
Parent Child+	31
Library Based and Other Learning Programs	36
Dolly Parton Imagination Library	38
Early Steps to School Success	40
Raising a Reader	44
Home Instruction for Parents of Preschool Youngsters (HIPPY)	47
Supporting Care Providers Through Visits (SCPV)	52
LENA Home (Language ENvironment Analysis)	56
LENA Start (Language ENvironment Analysis)	60
Attachment and Biobehavioral Catch-Up - Infant	64
Incredible Years – Parents and Babies	68
Incredible Years – Toddler Basic	72
Incredible Years – Preschool Basic	77
Positive Parenting Program (Triple P) – Level 2	82
Positive Parenting Program (Triple P) – Level 3	85
Positive Parenting Program (Triple P) - Level 4	88
Nurturing Parenting – Nurturing Skills for Families (Secondary Prevention)	92
Nurturing Parenting – Parents & Their Infants, Toddlers & Preschoolers (Tertiary Prevention)	97
Nurturing Parenting – Parents & Their Infants, Toddlers & Preschoolers (Comprehensive Program)	103
Nurturing Parenting – Nurturing Fathers	109
Strengthening Families Infant and Toddler	115
Strengthening Families Preschool	120
Supplements to Evidence-Based Programs	125
EARLY CARE AND EDUCATION PROGRAMS	127
Early Head Start	128

Enhanced Early Education with Enrichment Activities	130
Enhanced Early Education with Onsite Tutoring	132
Enhanced Early Education with Parent Workshops	135
Early Education Program Support	138
Early Education Program Operation	142
Child Care Technical Assistance and Coaching	146
Child Care Training	150
Nutrition and Physical Activity Self-Assessment for Child Care (Go NAPSACC)	153
LENA Grow	156
Quality Counts (developed by Spartanburg First Steps)	159
Child Care Scholarships	164
SCHOOL TRANSITIONS PROGRAMS	166
Other School Transition Programming	167
Countdown to Kindergarten	169
Countdown to Kindergarten – 4K	172
HEALTH PROGRAMS	175
Nurse Family Partnership	176
Reach Out and Read	178
Health Services Coordination and Other Health Programming	180
Early Intervention and Referral	182
HealthySteps	185
Family Connects	189
APPENDICES	192
Appendix A: Formula Funding Reduction Levels	193
Appendix B: Consent and Authorization Forms	194
Appendix C: Essential Requirements for Parents as Teachers (201)	199
Appendix D: Farly Steps to School Success Guidelines from Save the Children	206

OPERATIONAL GUIDELINES

This document outlines the guidelines for local First Steps Partnerships with regard to programmatic, operational, financial, and administrative activities of the partnership. This document will be attached to the 2022-2023 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 program and operational guidelines (Section 59-152-160(A)).

Operational Guidelines

Operational guidelines are organized into the following sub-sections:

- Operations and Governance
- Fiscal Accountability
- Core Functions
- Resource Development

Additionally, operational guidelines reference the partnership's annual grant agreement with SC First Steps, the SC First Steps Finance and Administration 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.

Operational guidelines and supporting documents will be reviewed with board members and staff on at least an annual basis.

Program Guidelines

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

- 1. Parenting
- 2. Early Care and Education
- 3. School Transitions
- 4. Health

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

All programs are classified (at minimum) as one of the following:

- Evidence-Based Program Strategy
- Evidence-Informed Program Strategy
- High-Intensity Program Strategy

Local Partnerships are encouraged to provide at least one Evidence-Based and High-Intensity Program Strategy.

Monitoring and Compliance

On behalf of the First Steps Board of Trustees, the State Office of First Steps will monitor local partnerships 59-152-160(A)).

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 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 59-152-160

(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.

Local partnerships will receive an on-site monitoring visit from the State Office of First Steps at least once every four years. Each year, the local partnerships to be monitored will be selected using a weighted formula. The purpose of the monitoring visits are to ensure programmatic and operational standards are being followed and provide an opportunity for coaching and relationship building.

Review of the Formula Funding Grant

The State Office of First Steps will provide feedback to local partnerships regarding partnership functioning and performance, including progress toward achieving the objectives within the partnership's Comprehensive Strategic Plan. This feedback occurs as part of the three-year grant cycle which includes an Interim Progress Report (IPR) each year and a full Formula Funding Grant Application every three years. (For FY25, it will be a two-year cycle, FY26 will be an IPR, and FY27 will be the first year of the three-year cycle.) The first year of the grant cycle aligns with the Needs Assessment and Comprehensive Strategic Planning process required by statute every three years. IPRs will be used to assess progress toward achieving the objectives within the partnership's Comprehensive Strategic Plan.

Corrective Action Plans

Unmet minimum requirements for formula grant funding that correspond to Section 59-152-90 and Section 59-152 70 of the First Steps legislation, to include findings of non-compliance with program or operational guidelines, will become part of a state board-approved Corrective Action Plan to the Local Partnership. Unmet qualifications that are not resolved within the timeframe specified in the partnership's Corrective Action Plan may result in a future non-compliance penalty to the Local Partnership's funding amount, to be determined by the state board as specified in the Formula Funding Reduction Levels Policy (See Appendix A)

Operations and Governance

Operations

At minimum, the Local Partnership Board and Staff shall:

- Exercise appropriate operational stewardship by adhering to the practices and procedures outlined in the SC First Steps Legislation (Section 59-152-70(6)), local partnership by- laws, local partnership grant agreement, and SC First Steps Finance and Administration Operations Manual.
- 2. Comply with all contractual and legislative deadlines for submitting documents to the State Office of First Steps, including but not limited to:
 - An Annual Report by October 1 (Section 59-152-70(A)(8));
 - An annual Formula Funding Grant Application by the published deadline (Section 59- 152-90(B)),
 - A Needs and Resources Assessment every three years (Section 59-152-70(A)(5));
 - And A three-year Comprehensive Strategic Plan (Section 59-152-70(A)(2)).
- 3. Participate and cooperate fully in all internal and independent evaluations of the First Steps initiative (Section 59-125-160(A-C)).
- 4. Partnerships must complete program and vendor registration for all funded strategies identified through the formula grant application process and enter projected to serve numbers for each strategy no later than July 15 of the program year. For programs approved through the targeted and competitive grant process, program and vendor registration must be completed within 10 business days from the date of the signed grant amendment.
- 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 and operational guidelines for that strategy. Partnership and vendor staff are expected to adhere to the standard for timely data submission, based on the date of service, within 5 days for case level data (enrollment, home visits, group connections, assessments, etc.) and 30 days for programs that utilize the outputs data reporting (childcare training, DPIL, NFP, etc.).
- 6. In order for services to be provided, where case-level data is input into FSDC, consent must be obtained using the required consent form in Appendix B. If an individual refuses to sign the consent form, then services cannot be provided. The consent form contains the minimum, required information to create a case in FSDC. Cases must be marked as consented in FSDC, along with the date that consent was obtained. Signed consent forms must be kept on file at the local partnership.
 - a. Sometimes, additional program-specific enrollment or consent forms may be required by the program model.
 - b. If consent is revoked by a family at any time, notify state office in writing by forwarding notification to Beth Kienzlen, Database Administrator, at bkienzlen@scfirststeps.org
 - c. Consent will need to be re-signed by families annually.
- 7. On the consent form identified in Appendix B, the following sections are optional for clients to agree to: Authorization for Data Sharing; Consent to be Contacted; Media Release. Services can be provided if clients do not agree to these. Clients' agreement or disagreement to these provisions must be marked in FSDC. Signed forms must be kept on file at the local partnership. In FY24, use with all newly and currently enrolled program participants within 90 days of the fiscal year.
- 8. SC First Steps reserves the right to view partnership and vendor data in the system at any time, including but not limited to the following data checkpoints: 10 business days after Quarter 1 (Oct. 14); 10 business days after Quarter 2 (Jan. 15); 10 business days after Quarter 3 (April 14); and 10 business. days after Quarter 4 (July 14). Data will be used to evaluate overall program performance and sustainability.
- Make every effort to participate in scheduled meetings and teleconferences/webinars with SC First Steps. In the event the partnership executive director is unable to attend, a board member or staff member should attend if possible. Partnerships are responsible for the content presented.
 - The local partnership board and staff shall not unlawfully discriminate against any person or category of persons for services or employment.
 - The local partnership shall comply will all applicable federal and state laws and regulations regarding employee discrimination and workplace policies, as outlined in the partnership's annual grant agreement

- with SC First Steps.
- The local partnership board and staff shall prohibit preferential treatment and nepotism with regard to hiring, supervision, and promotion. Per the Conflict-of-Interest Policy, no immediate family member may work under a partnership employee's supervision or chain of command.
- The partnership shall have human resource policies adopted by the partnership board that adhere to the HR Policy Template approved by the First Steps Board of Trustees.
- Partnerships shall provide to all partnership employees a copy of the partnership's current human resource
 policies, Whistleblower Policy and the SC First Steps Conflict of Interest policy. It is recommended that
 these policies be reviewed with staff. It is also recommended that COI and Whistleblower policies be shared
 with staff of vendor-operated programs.
- The partnership shall abide by the Dual Partnership Employment policy contained in the partnership's grant agreement with SCFS.
- 10. Partnerships and all its employees, agents, contractors, and representatives shall safeguard confidential information and comply with all Confidentiality/Safeguarding Information requirements contained in the partnership's grant agreement with SCFS. Per the partnership grant agreement, partnership employees shall sign annually the Confidentiality Form attached to the partnership grant agreement, and it is recommended that partnership board members and vendor staff also sign a Confidentiality Form annually.
- 11. Local partnership boards are required to submit all executive director hiring and compensation recommendations. or approval by the First Steps Board of Trustees. Local Partnerships are also required to submit executive director annual evaluations for review by the First Steps Board of Trustees.
 - The partnership board must approve all starting compensation and compensation increase requests
 related to the partnership's executive director. Once, they approve the request, it must be submitted to
 the First Steps Board of Trustees for final approval prior to implementation according to the guidelines
 established by the First Steps Board of Trustees (per SC Statutes).

Governance and Oversight

The local partnership board shall:

- 1. Operate in accordance with local partnership bylaws, the current First Steps legislation, and with all applicable state and federal laws pertaining to non-profit organizations and ensure the partnership board and staff meet all requirements to maintain the partnership's non-profit status with the IRS.
- 2. Maintain continuous Directors' and Officers' Liability, Comprehensive General Liability (including bodily injury, property damage, personal injury, and sexual abuse and molestation rider), and Workers' Compensation Employee Liability insurance with the corresponding limits of liability listed in the partnership's annual grant agreement.
- 3. Provide Planning and Oversight
 - Coordinate a collaborative effort at the county or multicounty level to identify area needs related to the First Steps legislative goals, and develop a strategic long-term plan (i.e., Comprehensive Strategic Plan) for meeting those needs (Section 12. Section 59-152-70(A)(2)). The partnership's Comprehensive Strategic Plan should align with the priorities identified in the state strategic plan adopted by the SC First Steps Board, as well as the state board's adopted readiness benchmarks (Profile of the Ready Kindergartner) and the First Steps legislative goals. Per Section 59-152-70, Comprehensive Strategic Plans shall include the three core functions of local partnerships (local portal, community convener, and support for state level priorities). Comprehensive Strategic Plans shall be for three years' duration, to align with legislative requirements for updating community needs and resources assessments every three years. Local partnership Comprehensive Strategic Plans, as well as any annual updates, are to be posted to the SC First Steps web site by December 1 each year, per First Steps legislation (Section 59-152-70(A)(8)). To meet this requirement, future Comprehensive Strategic Plans will be due to SC First Steps on or before November 1 in the year in which the partnership's current plan expires.
 - Oversee program strategies in accordance with SC First Steps Partnership and Operational Guidelines, 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).
- Local Partnerships have the option to become multicounty partnerships. If partnerships choose to
 form a multicounty partnership, the local partnership boards shall submit a joint proposal to the SC
 First Steps Board of Trustees. This proposal must include, but is not limited to, a plan to ensure each
 county is equally represented on the partnership board. No multicounty partnership may be
 established or separated without prior approval by the SC First Steps Board of Trustees. (Section 59152-70(E)
- 4. Ensure effective board functioning:
 - Meet at least once per quarter with quorum, with one board meeting designated as the Annual Meeting documented by meeting minutes.
 - Maintain all current approved policies/procedures/standards for conducting meetings and elections and disclosing records comparable to those provided for in the Freedom of Information Act and IRS disclosure requirements.
 - Maintain records of meeting announcements, sign-in sheets and minutes for all full board and committee meetings. Electronic copies of board minutes for the prior fiscal year will be submitted to SCFS, on behalf of the state board, by July 15 Section 59-152-70(A)(7)).
 - Follow the Records Retention Policy/Schedule contained in their grant agreement with SCFS, as well
 as the retention policy for Corporate Records contained in the partnership by-laws.
 - Review, adopt, and sign an Annual Board Member Agreement that at minimum includes an annually reviewed and adopted:
 - a. Conflict of Interest Policy (must align to the policy contained in the partnership's current year grant agreement with SCFS). Prior to every vote taken by the board, members must abstain from voting if the issue being considered would result in a conflict of interest. The abstention must be noted in the minutes of the meeting (Section 59-152-60(G)).
 - b. Conflict of Interest Disclosure Forms must be completed annually, and as undisclosed conflicts occur during the grant year, by all board and staff and kept on file at the local partnership.
 - c. Confidentiality Form (contained in annual grant agreement).
 - d. Whistleblower Policy.
 - e. Attendance Policy outlining minimum board meeting attendance requirements, to include definitions of unexcused and excused absences and no more than three (3) consecutive unexcused absences, per partnership bylaws.
- 5. Practice Ongoing Board Development/New Member Orientation:
 - Use Board Matrix/Planning Documents/Board Evaluation Tools to annually assess the composition and functioning of the board to identify gaps and develop recruitment strategies.
 Partnership boards must abide by the composition requirements contained in the First Steps legislation (Section 59-152-60(C))
 - Hold annual elections for partnership board officers (Chair, Vice Chair, Secretary, Treasurer). Officer terms are for one year. Board chair and vice chair terms cannot exceed 4 years (4 consecutive, oneyear terms).
 - Ensure elected Board Members adhere to a current term on the board not to exceed 8
 consecutive years (2 consecutive four-year terms) and all board members regularly attend
 meetings in accordance with SC Statute and local partnership By-Laws. Appointed Board
 Members serve four-year terms with no term limits. A break in board service for elected
 Board Members must be at least six (6) months.
 - Provide new members a comprehensive board orientation that addresses, at minimum:
 - a. First Steps mission/vision, structure, policies/procedures/standards for operation.
 - b. Local partnership administrative, financial and planning documents, including a summary of current program strategies.
 - c. Nonprofit Board Member Roles and Responsibilities.
 - Publish board member rosters in the Partnership's Annual Report and ensure they are reported annually to the partnership's legislative delegation and be on file with the Office of First Steps (Section 59-152-60(A).

Fiscal Accountability

- 1. The local partnership board and staff shall exercise appropriate fiscal stewardship, including the use of private and non-state funds, by adhering to the policies and procedures outlined in the SC First Steps Legislation (Section 59-152-150(A)), local partnership by-laws, local partnership grant agreement, and SC First Steps Finance and Administration Operations Manual.
- 2. All private and non-state funds sought by local partnerships must be used exclusively for meeting the goals and purpose of First Steps as specified by SC Statute (59-152-20, 59-152-30).
- 3. 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. The local partnership board and staff shall comply with requirements for limiting administrative expenditures to at or below the rate established by the SC First Steps Board of Trustees. The maximum administrative rate for local partnerships, set by the SC First Steps Board of Trustees effective July 1, 2017, is 13% of expenditures of state funds allocated to the local partnership by SC First Steps.
- 4. The local partnership board and staff shall comply with fiscal policies set by the SC First Steps Board of Trustees for state funding of evidence-based and evidence-informed programs, per First Steps legislative requirements.
- 5. 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. Partnerships shall monitor their formula allocated budget and expenditures closely to estimate the partnership's projected carry forward budget and submit a plan for how carry forward will be used in the next fiscal year as part of the partnership's board-approved Formula Funding grant application. The SC First Steps Finance Office will certify and notify partnerships of all prior fiscal year available carry forward budgets between October 1st and October 15th. Each partnership must submit budget reallocation requests to OFS before December 31 to add all carry forward to its Budget Spending Plan. Partnerships whose certified carry forward amount is 15% or more than its original formula allocated budget OR have changed their use of carry forward funds since their last approved budget change, must submit updated board minutes reflecting these changes.
 - For the first year, Partnerships whose certified carry forward budget exceeds 15% of the prior fiscal year's
 formula allocated budget will receive a corrective action plan AND must submit written justification to their
 SC First Steps Program Officer with a plan to be approved by the SC First Steps Board of Trustees
 (Program and Grants Committee) to reduce their amount of carry forward budget to under 15% for the next
 fiscal year.
 - For the second consecutive fiscal year, Partnerships whose carry forward budget exceeds 15% will remain
 under corrective action plan AND will be subject to potential withholding of their excess carry forward funds
 at the discretion of the SC First Steps Board of Trustees.
- 6. The local partnership staff should process vendor invoices for payments upon receipt, obtain board member signature according to the SC First Steps Finance and Administration Operations Manual and immediately forward to the contracted finance manager for payment. Fees and/or penalties due to late payments are unacceptable and will be captured in a separate model code and monitored by SC First Steps Finance staff.
- 7. The local partnership board and staff shall exercise appropriate stewardship and due care in the selection, implementation, and monitoring of all contractors and the administration of all contracts. It is the partnership's responsibility to ensure contractors comply will all programmatic and financial requirements contained in the partnership and program guidelines, partnership grant agreement with SC First Steps, and the SC First Steps Finance and Administration Operations Manual.
- 8. Financial reports should be presented at all local partnership board meetings.
- 9. The local partnership board and staff should review internal financial controls annually.
- 10. The local partnership board and staff shall adhere to the fiscal calendar deadlines outlined in the SC First Steps Finance and Administration Operations Manual. In summary, funds must be obligated by June 30, invoices and reallocations submitted by July 31, and documentation of in-kind match submitted by July 31. Local partnerships must adhere to the SC First Steps written financial year-end closing process. Books will be closed on August 15 and any changes after then will be applied to the next fiscal year.

- 11. Local partnerships shall submit a 12-week time allocation study for executive directors and staff with shared costs across programs, administration, and core services by April 15 on an annual basis.
- 12. The local partnership board and staff shall respond in a timely manner to all requests from the contracted finance manager. The contracted finance manager shall support local partnerships' financial operations as outlined in its contract with SC First Steps.
- 13. A financial audit shall be conducted annually to include implementing a corrective action plan to address issues, concerns, or recommendations in the identified area of partnerships activities as called for in the audit. The local partnership board and staff shall respond in a timely manner to requests from the independent contracted auditors. The auditor shall periodically conduct on-site visits to the local partnership to test internal procedures and controls.
- 14. For equipment or furnishing costing \$1,000 or more, the partnership shall implement controls and procedures contained in its partnership grant agreement (13: Title to Equipment). This equipment and furnishing must be coded-classified in accordance with the SC First Steps Finance and Administration Operations Manual, Chapter 5, Model Titles and Codes, Equipment and Furnishing Purchased, code 5401.
- 15. Local Partnerships will adhere to the Procurement Guidelines as established by the SC First Steps Board of Trustees.

Core Functions

- o A First Steps Partnership Board shall, among its other powers and duties:
 - coordinate a collaborative effort at the county or multicounty level which will bring the community together
 to identify the area needs related to the goals of First Steps to School Readiness; develop a strategic longterm plan for meeting those needs; develop specific initiatives to implement the elements of the plan; and
 integrate service delivery where possible; and
 coordinate and oversee the implementation of the comprehensive strategic plan including, but not limited to,
 direct service provision, contracting for service provision, and organization and management of volunteer
 programs.
- Effective July 1, 2016, each partnership's comprehensive plan shall include the following core functions:
 - service as a local portal connecting families of preschool children to community-based services they may need or desire to ensure the school readiness of their children.
 - serve as a community convener around the needs of preschool children and their families, to include
 mobilizing 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.
 - support of state-level school readiness priorities as determined by the State Board In addition, partnerships will:
 - conduct a needs assessment every 3 years; and
 - collect information and submit an annual report by October first to the First Steps to School Readiness
 Board of Trustees, and otherwise participate in the annual review and the three-year evaluation of operations
 and programs. Before December 1, 2017, and annually before December first thereafter, the Office of South
 Carolina First Steps shall publish each local partnership's comprehensive strategic plan and annual report
 on the office's website. Reports must include, but not be limited to:
 - determination of the current level and data pertaining to the delivery and effectiveness of services for young children and their families, including the numbers of preschool children and their families served.
 - ii. strategic goals for increased availability, accessibility, quality, and efficiency of activities and services for young children and their families which will enable children to reach school ready to succeed, monitoring of progress toward strategic goals.
 - iii. report on implementation activities.
 - iv. recommendations for changes to the strategic plan which may include new areas of implementation.
 - v. evaluation and report of program effectiveness and client satisfaction before, during, and after the implementation of the strategic plan, where available; and
 - vi. estimation of cost savings attributable to increased efficiency and effectiveness of delivery of services to young children and their families, where available.
- o Local Partnerships will maintain data collection records on Core Function and Community Education/Outreach activities. SC First Steps will provide a template for annual reporting of Core Function outputs.
 - i. Core Functions numbers served will be counted as connections with program participants (rather than encounters with community members).
 - ii. Meaningful core functions activities, events and connections are defined as those connections that impact the early childhood community where possible program participants can be referred for early childhood services and promote the health, safety, and school readiness priorities for children 0-5 years old, including but not limited to distribution of books, early learning materials and health/nutrition materials.
 - iii. Cases Data entry may be required if Core Function activities are to include ongoing services to children and families.
 - iv. In order to count individuals for reporting in the Core Functions numbers served, Local Partnerships must collect contact information (phone, text, mail, and/or email) from potential program participants.
 - v. Core Functions activities will focus only on external community engagement. The external community is defined as those are not directly involved with the interworking and governing of the local partnership.
- o The local partnership board shall update its community Needs and Resources Assessment every three years, in accordance with First Steps legislation (Section 59-152-70(A (5)) as a basis for community-wide planning efforts to support at-risk children and the partnership's Comprehensive Strategic Plan. This document shall be

- submitted to SCFS by December 31 of the year in which the previous needs and resources assessment expires.
- Within the Formula Funding Grant Application and Budget Spending Plan, the partnership must provide information regarding the activities to be funded in support of Core Functions. Local partnerships are to appropriate not more than 12% of state funds for these purposes.
- Partnerships providing or seeking to provide services within another First Steps partnership's designated coverage area are required to communicate and collaborate with the affected partnership(s) and to document these collaborative efforts formally.

Core Function Categories

Local Portal Activities

Effective July 1, 2016, the local partnership shall serve as a local portal connecting families of preschool children to community-based services they may need or desire to ensure the school readiness of their children (Section 59-152-70(4)(a)). These services shall be represented in the partnership's Comprehensive Strategic Plan and include, at minimum:

- Accessibility Dedicated physical space within the partnership's county and with appropriate signage that is
 accessible to the public and clients they serve. Additionally, this official Local Partnership address must have a
 set weekly schedule and publicized hours. The Local Partnership shall adhere to publicized office hours.
- Responsiveness to requests for assistance Phone access must be available during regular business hours each
 week that includes voice mail and the capability to receive and return messages (phone, text, email, etc.) in a
 timely manner.
- Referrals Activities must include, but are not limited to:
 - i. Maintaining an up-to-date inventory of available programs and services for referring families. An up-to-date list of community resources should be available to clients, community partners, and the state office of First Steps at all times; including, providing local/regional resource directories (print and/or online) of local partnerships programs/services and community resources.
 - ii. Sharing information about the First Five SC portal with families and receiving applications and referrals from First Five SC portal.
 - iii. Partnership staff and volunteers who provide these services shall possess the requisite knowledge of and relationships with providers to connect families.
 - iv. Making referrals by phone, online resources, and/or social media for children 0-5 and families not enrolled in First Steps services.
 - v. Connecting to services and programs not provided by First Steps (E.g. Benefit Bank; Medicaid; Parent and Family Resource Center; Federal & State Emergency Aid; Disaster Assistance); etc.)
- Developmental Screenings Provide developmental screenings to prioritize family's needs and referrals for children 0-5 and families not enrolled in First Steps services.

Community Convener and Mobilizing the Community

As a component of community mobilization, starting July 1, 2016, local partnerships shall serve as a **community convener around the needs of preschool children and their families** (Section 59-152-70(4)(b)). This function shall be represented in the partnership's Comprehensive Strategic Plan and include, at minimum:

- The partnership board should identify one or more unmet needs impacting preschool children and their families from: their most recent Needs and Resources Assessment; and/or school readiness priorities outlined in the SC First Steps Board's Strategic Plan.
- The partnership leading or serving as a collaborating partner in establishing and coordinating a community-wide effort to address the identified need(s), with the active involvement of partnership board members and staff.
- Local Team Meetings: it is recommended that the local partnership convene, at least annually, a meeting between partnership staff and a member of the SCFS local partnership Program Officer team, including (if applicable) representatives from state First Steps programs located within the partnership's service area, for the purpose of improving coordination and collaboration across state and local First Steps programs and with other programs and services in the community (Section 59-152-70 (A)(4)(c)). Partnerships are encouraged to expand these meetings to include representatives from partner organizations and other community stakeholders. Activities may include but are not limited to:

- i. Convening of state and community partnerships, local 4K, and First Steps 4K
- ii. Advocating for the well-being of children 0--5 through meeting with legislative members and other local and state entities within the county
- iii. Public forums (i.e. surveys, focus groups, trainings) targeting parents, other community agencies, and/or school districts and teachers
- Goals and objectives for the partnership's role as a community convener, as determined by the partnership board and Executive Director. Progress reports documenting the success of convener activities should be made available to the partnership board and the public at least quarterly.
- o Participation in local/county/regional coalitions, committees etc. of child-serving agencies and organizations

The local partnership board and staff shall participate in and document efforts to mobilize communities (all stakeholder groups including but not limited to: families, community leaders, businesses, faith-based organizations, civic organizations, elected officials and government agencies, health care entities, school personnel and other early childhood agencies/organizations) 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 (Section 8. Section 59-152-30(5)). Community action may include but is not limited to: developing and distributing public education materials that promote the partnership's mission, available programs, and community resources; and sponsoring and/or cosponsoring community events that promote school readiness.

- Community Education and Outreach Plan
 - The local partnership board shall develop an annual Community Education and Outreach Plan to raise awareness, knowledge, engagement, participation and support for early childhood programs and services, including First Steps and in support of required Core Functions Partnerships shall engage in online and social media and to have a social media policy as a part of their plan.
 - Plan components include:
 - Increasing awareness and engagement of target audiences in supporting early childhood programs and the Profile of the Ready Kindergartner
 - ii. Supporting the partnership's core function as a local portal
 - iii. Supporting the partnership's core function as a community convener
 - iv. Supporting the partnership's core function to address one or more state-level school readiness priorities.
 - v. Increasing the knowledge and skills, and/or changing behaviors of target audiences in one or more areas of school readiness, child development best practices, etc. Refer to the Community Education and Outreach Plan Template for additional strategies/activities and examples.
 - vi. Outreach to target audiences to increase their participation in programs and services supporting children 0-5 and their families.
 - vii. Designating a point of contact to access lead information for potentially eligible families from First Five SC
 - viii. Increasing financial and other support for early childhood programs and services
 - ix. Engaging target audiences in working to improve community performance on school readiness benchmarks (Profile of the Ready Kindergartner, Palmetto Basics) and/or the state's readiness assessment.

Supporting State Level Priorities

Effective July 1, 2016, the local partnership shall support the state-level school readiness priorities as determined by the State Board (Section 12. Section 59-152-70(A)(c)). These priorities shall be represented in the partnership's Comprehensive Strategic Plan and must include:

- Increasing community awareness, education and outreach for programs and activities based on school readiness benchmarks as established by the State Board (Section 1. Section 59 -152- 32(A((2)), e.g., Profile of the Ready Kindergartner and the South Carolina Early Learning Standards
- Programs and activities based on priorities in the SC First Steps Strategic Plan approved by the state First Steps board and legislative goals of SC First Steps (Section 1. Section 59 -152- 32(A((2))
- o Support and collaboration with state First Steps programs, including First Steps 4K programs.
- Supporting the implementation of the Kindergarten Readiness Assessment (KRA) to include sharing local school
 district KRA results with stakeholders, including teachers and parents of programs supported with First Steps

- funds (Section 1. Section 59 -152-33(D))
- o Other state level priorities as determined by the State Board
- Utilizing First Five county level log-ins to respond to all applications within five (5) business days and identify potential clients and generate recruitment plans to increase enrollment for First Steps programs
- Encouraging families to utilize First Five SC to access publicly funded resources that promote the well-being of children.

Resource Development

1. The local partnership board shall engage in resource development responsibilities that maximize the use of in-kind (volunteers, goods, services, and facilities) and cash contributions to the partnership. Partnerships must document a minimum 15% match (cash and/or in-kind) to state funds appropriated to the partnership in the current fiscal year by SC First Steps (Section 59-152-130(A)). While the Board of SC First Steps may or may not choose to grant a 15% match waiver for a first-year request, the Board will not grant a 15% match waiver for 2 consecutive years. If the Board of Trustees does not grant a match waiver, the State Office of First Steps will recapture from the local partnership's current year state funds the amount equal to the matching funds due, but not raised to meet the 15% match requirement at the conclusion of the prior fiscal year.

Responsibilities include:

- Develop and submit an updated Resource Development Plan annually as part of the local partnership's Formula Funding Grant Application, 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 acknowledgment 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 Finance and Administration Operations Manual and provide timely submission of in-kind documentation to the Finance Manager. All in-kind documentation and budget reallocations of in- kind funds must comply with fiscal year-end deadlines (Section 59-152-130(B)).

General Program Guidelines

- Implement program strategies in accordance with SC First Steps Partnership and Program Guidelines, 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).
- 2. Program strategies, including those funded by private and non-state funds, must support one or more First Steps goals (Section 59-152-90(C)(c); Section 59-152-150(C)) and address unmet needs identified in the partnership's needs and resource assessment and Comprehensive Strategic Plan. Partnership funds granted by the SC First Steps Board must comply with provisions for use of grant funds contained in the First Steps legislation (Section 59-152-100(A)).
- 3. Program strategies must utilize the SC First Steps to School Readiness benchmarks and objectives (Profile of the Ready Kindergartner) (Section 59-152-90(C)(b)).
- 4. At least 75% of state funds appropriated for programs must be used by the local partnership for "evidence-based" programs. Not more than 25% of state funds appropriated for programs to a local partnership may be used for "evidence-informed" programs (Section 59-152-100(B)). Per First Steps legislation, this provision is based upon the list of evidence-based and evidence-informed programs adopted by the SC First Steps Board of Trustees, posted to the SC First Steps web site.
- 5. Program strategies must be adequately resourced (staff, funding).
- 6. Partnerships must closely monitor program vendors/contractors to ensure compliance with operational guidelines. Partnerships should review contract provisions and the scope of work each year to ensure all program model components and operational guidelines are addressed. Vendor contracts for program strategies shall include as an attachment, the applicable current year's First Steps program guidelines for that strategy.
- 7. State funds appropriated for Partnership services are intended for use within the geographical boundaries of each individual partnership. Partnership strategies may on a limited basis and with approval by the partnership's board serve clients not geographically located within the partnership's service area if strong justification exists for such services to be provided. Examples include but are not limited to: high-risk families living just outside the county but within close proximity to partnership programs; and child care providers not located within the county but serving a substantial number of high-risk children from the partnership's service area. In such cases, partnership staff are required to inform, coordinate, and collaborate with the local First Steps partnership in which the client is located.
- 8. Partnership executive directors and staff must ensure complete and accurate data is collected to measure program results and client satisfaction, including accurate and complete data entered in the First Steps Data Collection System as required.
- 9. Program strategies using local district resources within a school district must be conducted only with approval of the district's board of trustees (Section 59-152-100(D)).
- 10. Partnership staff and volunteers who work directly with children shall be subject to SLED checks prior to hiring. Contractors must be able to provide this documentation upon request.
- 11. Per the partnership's grant agreement with SC First Steps, partnerships are responsible for reporting suspected child abuse, neglect, or dependency, as defined and required by applicable law.
- 12. Partnerships shall keep a waiting list of all program applicants who cannot be served due to the program's reaching its service capacity.

SC FIRST STEPS APPROVED RISK FACTORS:

*Child is defined as a preschool-aged child from the prenatal stage to entry into five-year-old kindergarten. (Section 59-152-25(E))

First Steps Risk Factors

The child has been abused.

The child has been neglected.

The child is in foster care or kinship care.

The child or family is enrolled in or eligible for Temporary Assistance for Needy Families (TANF).

The child or family is enrolled in or eligible for Supplemental Nutrition Assistance Program (SNAP).

The child or family is enrolled in or eligible for Women, Infants, and Children Nutrition Program (WIC).

The child has a disability or developmental delay as documented by a physician or standardized assessment (not a screening tool).

The child is blind or visually impaired.

The child is deaf or hearing impaired.

The child is eligible for IDEA Part B or Part C.

The child's mother or primary caregiver was 20 years old or younger at the time of the child's birth.

The child's mother or primary caregiver did not have a high school diploma or GED at the time of the child's birth.

The child's parent or caregiver has had a substance abuse issue during the child's lifetime.

The child's parent or caregiver has had depression or another mental health condition during the child's lifetime.

The child's parent or caregiver has an intellectual disability.

The child has been exposed to domestic violence within their family.

The child had a low birth weight (under 5.5 lbs) with serious medical complications.

English is not the primary language spoken in the child's home.

The child has a single parent or caregiver.

The child is experiencing homelessness.

The child has experienced numerous family relocations or transiency.

The child has a parent who is currently incarcerated or has been incarcerated within the last 12 months.

The child has experienced the death of a parent, caregiver, or sibling.

The child's parent or caregiver is currently serving in the military away from home or has returned home from military duty within the last two years.

The child is an immigrant or refugee.

The child has a parent or caregiver who was born in another country and entered the U.S. within the last five years.

The child has been removed from child care or preschool for behavioral reasons.

The child is enrolled in or eligible for Medicaid.

The child's parent or caregiver is eligible for Medicaid and is either pregnant or within one year after giving birth.

PARENTING PROGRAMS

Program Name		Code	185
	Family Café		
Program Area	Parenting	•	

Program Description

Cafés are structured discussion groups that use the principles of adult learning and family support. They are highly sustainable with training reinforcement, institutional support, and a commitment to an approach that engages and affirms parents as leaders. Participants leave Family Cafés feeling inspired, energized, and excited to put into practice what they've learned.

The foundation of the Family Café is created through the utilization of Protective Factors. These factors are seen as positive countering events and have been known to reduce incidences of child abuse and neglect. Family Café in a Box Protective Factors are:

- · Resilience: Parent Resilience
- Relationships: Positive Social Connections
- Support: Concrete Support in Times of Need
- Knowledge: Knowledge of Parenting and Child Development
- Communication: Social and Emotional Competent

The Family Café is a Peer-to-Peer model, and all sessions should be facilitated by a partnership staff or team member who has completed curriculum training sponsored by Be Strong Families.

All activities will come from the Be Strong Family Café in a Box curriculum.

Local partnerships funding Family Café shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. The following guideline includes both the expected Measurement Criteria for Family Café and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	□Yes	□Yes	□Healthy and Safe
□Children	⊠No	⊠No	☑Actively Supported by Their Families and Communities
⊠Adults			□Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	Prenatal to kindergarten entry.	
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?

Group Connections		
*Group Connection Criteria 1: Duration	Group Connections should last at least 2 hours.	
*Group Connection Criteria 2: Frequency 1	Minimum of 7 sessions per cohort.	
Group Connection Criteria 2: Frequency 2	Minimum or 2 cohorts a year.	
Group Connection Criteria 3: Group Size	Minimum of 10 families per cohort.	

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria At least 75% of participating families (minimum of 10 families per		
cohort) must complete 7 sessions.		

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Group Facilitator	Maximum Number	N/A
_	-	of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma
		Level	or GED
*Required Certifications and/or	The Family Café is a Pee	r-to-Peer model, and all	sessions should be
Training	facilitated by a partnersh	ip staff or team membe	er who has completed
	curriculum training spons		
	completed through Be St	•	•
	certificate of completion	to the Family Café Prog	gram Lead.
	Being a parent of a young		
	reflection practices; however, it is not a requirement.		
	Each staff member should have knowledge of both the language and		
NOTE: At least one (1) partnership facili	culture of the community served. acilitator must be trained in the Family Café model by Be Strong Families and		
must submit certification of training con		e Fairilly Gate Hiddel by	be Strong Families and
Thust submit certification of training con	ipietion.		
Program Role	Program Lead	Maximum Number	N/A
i rogram noic	1 Togram Lead	of Cases	14,71
KITS Related Job Title or Role	Program Manager	Minimum Education	High School diploma
	- 3	Level	or GED
*Required Certifications and/or			
Training	Strong Families and submit certification of training completion.		
	, , , , , , , , , , , , , , , , , , , ,		
	Each staff member should have knowledge of both the language and		
	culture of the community served.		

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
Assessment 1: Be Strong National Office Evaluation		
Be Strong Evaluation Criteria 1	A pre-assessment using the Be Strong National Office Evaluation shall be	
	completed during the first session.	
Be Strong Evaluation Criteria 2	2 A post-assessment using the Be Strong National Office Evaluation shall	
	be completed during the final session (7 th session or greater).	
Be Strong Evaluation Criteria 3	Evaluations must be submitted to SCFS State Office within 10 days of	
	assessment.	

Referral Criteria: What are this program's requirements for client referrals and connections?

Referral Criteria 1: Referrals	Partnership staff and/or team members shall maintain (within the designated First Steps Data Collection System) referral records to include information on the outcome/disposition of each First Steps-initiated referral.
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System	
	within 5 days of service.	
Other Criteria 2	Café facilitators must:	
	 maintain attendance records, sign-in sheets, a list of community advocates attending each session, and materials provided. serve meals and provide childcare at each session. provide incentives. 	
Other Criteria 3	Cohorts will also be serviced by community advocates at every session. Community advocates should attend each session for the purpose of sharing information and community resources with program participants.	
	Community advocates may include but are not limited to: officials from publicly funded agencies and entities, nonprofits, school district personnel, etc.	
	Community advocates must distribute materials regarding community resources and support services.	
Other Criteria 4	Monthly staff meetings will be held by program supervisors to support implementation and debrief on the project. The meeting agenda will include reports on program outcomes, implementation successes, and challenges, and the level of resources needed.	
Other Criteria 5	Meals are served and childcare is provided at each session.	

Program Name		Code	201
	Parents as Teachers		
Program Area	Parenting		

Program Description

Parents as Teachers promotes the early development and health of children by supporting and engaging their parents and caregivers. As a result of its presence in communities, children receive developmental screenings, parents have access to resources, and families gain the opportunity to participate in home visits and group socialization. All children in the home under age 6 shall be served by the program.

Local partnerships funding Parents as Teachers (PAT) 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 maintaining PAT affiliate status, meeting the 21 Essential Requirements of the Evidence Based Model, all required PAT National Center Quality Standards along with a few SC-specific additions. First Steps' home visitation strategies are designed to equip adults with the knowledge and skills necessary to promote the school readiness, healthy development, and long-term success of their preschoolaged children.

The following guideline includes both the expected Measurement Criteria for PAT National Center and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection R	Requirements		
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	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?		
Visits (Home or Site):		
*Visit Criteria 1: Duration	Visits should last a minimum of 45 minutes.	

Note: In households in which two or more preschool-aged children reside, parent educators 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.

*Visit Criteria 2: Frequency 1	All families shall be offered no less than two visits per month. (ER 12)			
Note: An average of 1.8 visits is the minimum threshold and 2.5 or more is considered outstanding intensity.				
*Visit Criteria 2: Frequency 2	All families should receive a minimum of 24 visits per program year.			
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 su	uitable to delivery of parenting services such that integrity of the session			
and confidentiality of families is maintain	ned.			
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.			
Group Connections				
*Group Connection Criteria 1: Duration Group connections should last 1 – 2 hours.				
*Group Connection Criteria 2: Frequer	rncy Families shall be offered at least one group connection activity per			
-	month per program year. (ER14)			
Group Connection Criteria 3: Group S	Group Connection Criteria 3: Group Size Varies.			
Note: To count a group connection, at lea	ast one family must attend. The families in attendance may or may not			
already be enrolled in PAT services. For e	already be enrolled in PAT services. For example, a family may be in attendance as part of the affiliate's			
recruitment efforts. *All Group Connection	ons must be documented using the Group Connection Planning Guides			

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

and Records. (ER 14)

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria	75% of families must be retained for nine or more consecutive months	
	of program participation.	
Note: Families "on hold" for 2 or more months are considered withdrawn, and their enrollment period starts over if		
they choose to re-enroll.		

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Parent Educator	Maximum Number	18
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or			eriCorps members, must
Training		of a high school diplon	
		us supervised work exp	perience with young
	children and/or p		
	-	ators must document s	•
	I	tion in PAT's Foundatio	
	Implementation T as Model Certifie		st identify staff member
		` '	clude children aged 3-5
		in the Foundational 2 (· ·
	 Each parent educ 	ator shall successfully	complete his/her annual
	recertification and	d an additional twenty l	nours of professional
	development. (ER	88)	
	 Each parent educ 	ator shall complete tra	ining in ASQ-3, ASQ:SE-2,
	LSP, ACIRI and H	FPI.	

• All training (for both program and individual staff members) must be documented on-site.

Note:

- First-year parent educators working 32 or more hours per week should serve a minimum of ten (10) families and no more than fifteen (15).
- Second year, and beyond experienced parent educators working 32 or more hours per week should serve a minimum of fifteen (15) families and no more than eighteen (18).
- First year parent educators working less than 32 hours per week should serve a minimum of eight (8) families and no more than twelve (12).
- Second year, and beyond experienced parent educators working less than 32 hours per week should serve a minimum of ten (10) families and no more than fifteen (15).

Program Role	Supervisor	Maximum Number	10
		of Cases	
KITS Related Job Title or Role	Program Manager	Minimum Education	Bachelors or four-year
		Level	degree
*Required Certifications and/or	 All lead parent ed 	lucators and superviso	rs in SC, including
Training	AmeriCorps mem	nbers, must have five ye	ears of related
			children and/or parents
		egree in early childhood	d education or closely
	related field.		
			one or more individuals
			rvisors shall attend the
		riculum and Model Imp	•
		the New Supervisor's	
	-	•	rvisors must document
	•	letion of/initial certification	
		Model Implementation	
			clude children aged 3-5
		in the Foundational 2 (
		ator and/or supervisor	
			and an additional twenty
	•	onal development. (ER	•
		educator and/or super	•
		ASQ:SE-2, LSP, ACIRI a	
	- ,	oth program and individ	dual staff members)
	must be docume	nted on-site.	

Note: Each supervisor or lead parent educator may be assigned up to 12 Parent Educators, regardless of whether the parent educators are full or part time employees. (ER 5)

Supervisors/Lead Parent Educators who are also serving families should serve up to 5 families depending on the number of parent educators supervised. For example, a Supervisor/ Lead Parent Educator that supervises 5 or more parent educators may serve 0 families.

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ-3. 80% is the minimum requirement for	
	compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	

	from an outside source in the First Steps Data System. Rescreen at the
	next designated age.
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,
	the parent educator shall collaborate with parents/guardians to seek the
	consensual provision of these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district for
	additional diagnostic evaluation. Referrals shall be documented in the First Steps Data Collection System.
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more
AGQ 6 GIRCHA 6	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child's
	development, and rescreen the child at the next designated age.
Note: A child is exempt from being sc	
	ved from the home of the participating parent.
	by an outside agency and supporting documentation is provided. If
	is not provided, child must be screened.
	byNet, or other specialized intervention services based on a previously
diagnoses, Scr	eenings must resume when all intervention services have ended.
*Screening 2: Ages and Stages Quest	onnaire: Social and Emotional-2 (ASQ:SE-2)
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of
AGQ.GE 2 Officina 1	enrollment using the ASQ:SE-2. 80% is the minimum requirement for
	compliance.
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the
·	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,
	supporting documentation must be requested and saved to the child's file,
	and enter the scores into the First Steps Data System. Note the scores are
	from an outside source in the First Steps Data System. Rescreen at the
100.05.00 %	next designated age.
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall
	collaborate with parents/guardians to seek the consensual provision of these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district for
	additional diagnostic evaluation. Referrals shall be documented in the First
	Steps Data Collection System.
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more
	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child, and rescreen
	the child at the next designated age.
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages
	regardless of developmental screening results and/or a documented delay
Notes A shild is successful.	in which the child is receiving services.
Note: A child is exempt from being sc	
has been removed from the ho was acrosped by an outside as	· · · · · · · · · · · · · · · · · · ·
 was screened by an outside ag provided, child must be screen 	ency and supporting documentation is provided. If documentation is not
provided, crilla must be screen	cu.
*Screening 3: Health Screenings	
Health Screenings Criteria	All PAT affiliates shall document health screening outcomes.
)

*Assessment 1: Life Skills Progressio LSP Criteria	All participating families will have an initial LSP completed by the 3 rd visit and then completed every 6 months thereafter until the family exits the program. The LSP is completed on the focus parent/ caregiver and is used for parent educators' information only.
	All participating families will have an initial LSP completed by the 3 rd visit and then completed every 6 months thereafter until the family exits the program. The LSP is completed on the focus parent/ caregiver and is used for parent educators' information only.
*A	
*Assessment 2: Healthy Family Paren	
HFPI Criteria	All parenting programs shall complete, at minimum, baseline and post assessments of the primary adult identified within each enrolled case using the Healthy Families Parenting Inventory (HFPI). The baseline HFPI is encouraged to be completed at the first visit but must be within 45 days of enrollment and every six months thereafter until program exit. (ER 21)
*Assessment3: Adult Child Interactive	e Reading Inventory (ACIRI)
ACIRI Criteria 1	Each family containing children aged 30 months or older shall have the focus adult and the focus child's interactive literacy behaviors assessed by a trained evaluator.
ACIRI Criteria 2	 The goal is 100% of eligible, child participants be screened using the ACIRI. 80% is the minimum requirement for compliance: For newly enrolled families a Pre-ACIRI shall be completed within 45 days of enrollment if the child is 30 months or older. For currently enrolled children a Pre-ACIRI shall be completed immediately after the child's 30-month birthday (within 15 days after).
ACIRI Criteria 3	 A Post ACIRI will be completed 6 months after the Pre-ACIRI for each child. If the Post ACIRI 6-month due date falls into the next program year it must be completed in that program year. If the Pre-ACIRI is completed by March of the current program year the Post ACIRI must be completed before the end of the current program year. When this occurs the next ACIRI due will be the Annual ACIRI. The Annual ACIRI must also be completed on the anniversary of the Pre-ACIRI.
ACIRI Criteria 4	For the 2 nd and subsequent program years of enrollment the annual ACIRI will be completed during the Pre-ACIRI anniversary month every year thereafter until the family exits the program.
ACIRI Criteria 5	Regardless of how long a family has been served, or how long it has been since the family last received an ACIRI assessment, it is important to complete a Post ACIRI for the focus parent and the focus child before exiting the family from the program, if possible.

Referral Criteria: What are this program's requirements for client referrals and connections? Referral Criteria 1: Referrals Parent educators shall seek to ensure that each participating family connects with a pediatric medical home and other community services as		
	appropriate. facilitators shall ensure active collaboration with other parenting and family es, refer families to these services as necessary, and follow up to ensure that established.	
*Referral Criteria 2: Connections The goal is 100% of participants served should have at least one success connection per program year. 80% is the minimum requirement for compliance.		

Other Criteria: Are there other progr	ram criteria that exist?	
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within five (5) days of service. Data entries will be checked quarterly (Quarterly Progress Reports) to ensure model fidelity.	
*Other Criteria 2	All PAT affiliates shall complete as a second outcome, the American Academy of Pediatrics' Bright Futures schedule of recommended dates for well-child visits as documented in the PAT Child Health Record. This will be entered into the First Steps Data Collection System to determine the percentage of children who received the last recommended well-child visit on the Bright Futures Schedule (ER 21).	
Other Criteria 3	First Steps Local Partnerships implementing Parents as Teachers are required to maintain formal affiliate status with the Parents as Teachers National Center.	
Other Criteria 4	Site Supervisors are required to participate in monthly meetings hosted by the Parents as Teachers South Carolina Office and/or the National Center.	
Other Criteria 5	All affiliates must use the most updated forms from the Model Implementation workspace, PAT records tab which can be downloaded from the PAT ebiz portal.	
Other Criteria 6	Parent educators must use the foundational visit plans, planning guide, and personal visit records from the curriculum to design and deliver personal visits to families and complete personal visit record.	
Other Criteria 7	Each affiliate must have an advisory committee that meets at least twice within the program year (can be part of a larger committee, community network or coalition if the group includes a regular focus on the Parents as Teachers affiliate). (ER 3)	
Other Criteria 8	The affiliate confirms that it is designed to be able to provide at least two years of services to families with age-eligible children. (ER 1)	
Other Criteria 9	Each participating First Steps Partnership PAT program shall convene a monthly staff meeting of all pertinent program personnel and 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 part-time and full-time parent educators. (ER4)	
Other Criteria 10	Reflective Supervision: Full-time parent educators shall participate in individualized reflective supervision meetings at a minimum of 2 Hours per month. A minimum of 18 hours during the program year is expected. • Part-time parent educators shall participate at a minimum of one hour of reflective supervision per month. (ER4) • Supervisors who provide home visits to families as a parent educator must also engage in reflective supervision.	

Program Name		Code	202
	Motheread/Fatheread		
Program Area	Parenting		

Program Description

Motheread/Fatheread is a literacy intervention used to improve literacy outcomes for children by increasing the quality and frequency of parent—child shared reading activities in the home. Adults and children can learn to use the power of literacy to discover more about themselves, their families, and their communities. Curricula includes classes for parents, other adults, early childhood professionals, adult educators, and childcare instructors. Group meetings must adhere to the Motheread/Fatheread Teacher's Guide.

Partnerships funding Motheread/Fatheread shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting Motheread/Fatheread requirements along with a few SC First Steps specific additions. The following guideline includes both the Motheread/Fatheread compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	⊠Yes	□Yes	⊠Healthy and Safe
□Children	□No	⊠No	⊠Actively Supported by Their Families and Communities
⊠Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	Prenatal to kindergarten entry.	
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?		
Group Connections		
Group Connection Criteria 1: Duration Group connections should be 1-2 hours.		
Note: Group meetings must adhere to the Motheread/Fatheread Teacher's Guide.		
*Group Connection Criteria 2: Frequency Groups last 8 to 10 weeks.		
Group Connection Criteria 3: Group Size All groups must range between 5 to 15 participants.		

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the end		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?

Retention Criteria	75% of families must have completed at minimum 20 hours of
	instruction.

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Group Facilitator	Maximum Number	15
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma
		Level	or GED
*Required Certifications and/or	All program staff in SC must possess at least a high school		
Training			
	degree in early childhood education or a closely related field.		
	Motheread/Fatheread group facilitators must complete the		
	three-day Motheread Institute before implementing the program		
	with a training emphasis on birth to 5 population.		
	All program staff will be trained in the Ages and Stages		
	Questionnaire Third Edition (ASQ-3) and Ages and Stages		
	Questionnaire: Social and Emotional (ASQ:SE-2) Developmental		
	Screenings.		

	How are program participants screened and/or assessed?
*Screening 1: Ages and Stages Quest	ionnaire Third Edition (ASQ-3)
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of
	enrollment using the ASQ-3. 80% is the minimum requirement for
	compliance.
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,
	supporting documentation must be requested and saved to the child's file,
	and enter the scores into the First Steps Data System. Note the scores are
	from an outside source in the First Steps Data System. Rescreen at the
	next designated age.
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,
·	the parent educator shall collaborate with parents/guardians to seek the
	consensual provision of these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district for
	additional diagnostic evaluation. Referrals shall be documented in the
	First Steps Data Collection System.
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more
710 4 0 0111011111	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child's
	development, and rescreen the child at the next designated age.
Note: A child is exempt from being so	
	ved from the home of the participating parent.
	by an outside agency and supporting documentation is provided. If
	is not provided, child must be screened.
	byNet, or other specialized intervention services based on a previously
	eenings must resume when all intervention services have ended.
diagnoses. oci	comingo mastrosamo vinen an intervention services have chaca.
*Screening 2: Ages and Stages Quest	ionnaire: Social and Emotional-2 (ASQ:SE-2)
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of
AUQ.OL Z OIREIIA I	enrollment using the ASQ:SE-2. 80% is the minimum requirement for
	compliance.
	compilance.

ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the	
	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall	
	collaborate with parents/guardians to seek the consensual provision of	
	these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the	
	First Steps Data Collection System.	
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more	
7.00.02 2 0.110.110	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child, and rescreen	
	the child at the next designated age.	
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages	
7.00.02 2 3116114 0	regardless of developmental screening results and/or a documented delay	
	in which the child is receiving services.	
Note: A child is exempt from being sc		
 has been removed from the ho 		
	pency and supporting documentation is provided. If documentation is not	
provided, child must be screen	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
provided, dring made be derech		
*Assessment 1: Test of Adult Basic E	ducation (TABE)	
TABE Criteria	All group facilitators must 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). The testing schedule	
	should align with adult education assessment policy as set by SCDE.	
Note: This is only required if the progr	am is delivered within a Family Literacy Program.	

Referral Criteria: What are this program's requirements for client referrals and connections?				
Referral Criteria 1: Referrals	Referral Criteria 1: Referrals Group facilitators shall maintain (within the designated First Steps Data Collection System) referral records to include information on the outcome/disposition of each First Steps-initiated referral.			
	acilitators shall ensure active collaboration with other parenting and family s, refer families to these services as necessary, and follow up to ensure that established.			
*Referral Criteria 2: Connections The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.				

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within	
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	Other assessments of the Motheread/Fatheread Program shall be	
	administered in accordance with instruction in the Motheread/Fatheread	
	Teacher's Guide. They include the "Daily Out of Class Record Log" and "End	
	of Class Evaluation Form".	

Other Criteria 3	First Steps programs shall administer client satisfaction surveys at least
	annually, and use data collected to improve model fidelity.

Program Name		Code	206
	Parent Child+		
Program Area	Parenting		

Program Description

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.

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.

The following guideline includes both the Parent Child+ compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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.		
Age Criteria 2	At least 70% of enrolled families must contain a child between 16-36	
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 Director of Parenting 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 should 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	*Visit Criteria 2: Frequency 2 A minimum of 23 weeks or 46 home visits annually across a period	
	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	on 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.		

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?	
Retention Criteria	75% of families must be retained for a minimum of 23 weeks or 46
	home visits annually across a period of two years (46 weeks/92 visits
	total).

Workforce Criteria: Who are the service providers implementing this program?

Early Learning	Maximum Number	16
Specialists (ELS)	of Cases	
Service Provider	Minimum Education	High School diploma or
	Level	GED
 All PC+ ELS must possess at least a high school diploma or 		
	•	
	_	nguage and cultural
	•	
	•	
	_	
	ner screenings and ass	essments being
• `	. •	luai statt members)
must be docume	nted on-site	
Program Role Site Coordinator Maximum Number N/A		N1 / A
Site Coordinator		N/A
Cita Cumaminan		High Cabaal dialamaa ay
Site Supervisor		High School diploma or GED
- Dortnarahina mus		
		,
, , ,		
,	mende that community	v-hased site
		-
	Specialists (ELS) Service Provider All PC+ ELS must equivalency with two-year degree ifield and docume training prior to the member, a high sometiment of the packground with the packg	Specialists (ELS) Service Provider Minimum Education Level All PC+ ELS must possess at least a high equivalency with two years of related su two-year degree in early childhood education field and document successful completing training prior to their first home visit. If remember, a high school diploma or equiving the PC+ ELS, from the community share a lab background with the family. Each PC+ ELS shall be trained and super coordinator approved by the PC+ Nation. All PC+ ELS shall complete training in AS ACIRI and any other screenings and asse administered. All training (for both program and individed must be documented on-site. Site Coordinator Maximum Number of Cases. Site Supervisor Minimum Education Level Partnerships must employ at least one So by the PC+ National Center or a certified serving 60 or more families employing a

Parent Child+ training.	2 years of supervisory experience and/or or supervised working experience in the field is recommended. All staff providing supervision and/or program oversite must have completed the Parent Child+ training.
-------------------------	--

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Quest		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ-3. 80% is the minimum requirement for	
	compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 16, 20, 24, 30, 36, 42, and 48 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
122.2011.1	next designated age.	
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,	
	the parent educator shall collaborate with parents/guardians to seek the	
	consensual provision of these results to:	
	i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the First	
	Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
7.00 0 official	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being screened if the child:		
 has been removed from the home of the participating parent. 		
	by an outside agency and supporting documentation is provided. If	
	is not provided, child must be screened.	
_	byNet, or other specialized intervention services based on a previously	
diagnoses. Scr	eenings must resume when all intervention services have ended.	
*Corooning 2: Ages and Ctages Occast	ionnaira: Social and Emotional 2 (ASO:SE 2)	
*Screening 2: Ages and Stages Quest ASQ:SE-2 Criteria 1	ionnaire: Social and Emotional-2 (ASQ:SE-2) The goal is 100% of children participants be screened within 60 days of	
ASQ.SE-2 CITIERIA I	enrollment using the ASQ:SE-2. 80% is the minimum requirement for	
	compliance.	
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the	
//oq.or z omena z	following ages: 18, 24, 30, 36, and 48 months of age.	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall	
	collaborate with parents/guardians to seek the consensual provision of	
	these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district) for	
	additional diagnostic evaluation. Referrals shall be documented in the First	
	Steps Data Collection System.	

100.07.00.1.7	
ASQ:SE-2 Criteria 5 ASQ:SE-2 Criteria 6	If a child scores in the monitoring range on the ASQ:SE-2 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child, and rescreen the child at the next designated age. ASQ:SE-2 will be completed on every child at the designated ages
ASQ.SE-2 Criteria 6	regardless of developmental screening results and/or a documented delay in which the child is receiving services.
Note: A child is exempt from being so	reened if the child:
has been removed from the ho	
	gency and supporting documentation is provided. If documentation is not
provided, child must be screen	· · · · · · · · · · · · · · · · · · ·
provided, crina must be screen	cu.
*Assessment 1: Life Skills Progression	n (I SD)
LSP Criteria	All participating families will have an initial LSP completed by the 3 rd visit
LSF Citteria	and then completed every 6 months thereafter until the family exits the program. The LSP is completed on the focus parent/ caregiver and is used for ELSs information only.
*Assessment 2: Parent Involvement in	
PIEL Criteria	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.
Note: Families enrolled prior to August 2023 will continue to be assessed using PICCOLO, CBT, and PACT until they exit the program.	
*Assessment 3: Adult Child Interactiv	
ACIRI Criteria 1	Each family containing children aged 30 months or older shall have the focus adult and the focus child's interactive literacy behaviors assessed by a trained evaluator.
ACIRI Criteria 2	The goal is 100% of eligible, child participants be screened using the ACIRI. 80% is the minimum requirement for compliance: • For newly enrolled families a Pre-ACIRI shall be completed within 45 days of enrollment if the child is 30 months or older. • For currently enrolled children a Pre-ACIRI shall be completed immediately after the child's 30-month birthday (within 15 days after).
ACIRI Criteria 3	 A Post ACIRI will be completed 6 months after the Pre-ACIRI for each child. If the Post ACIRI 6-month due date falls into the next program year it must be completed in that program year. If the Pre-ACIRI is completed by March of the current program year the Post ACIRI must be completed before the end of the current program year. When this occurs the next ACIRI due will be the Annual ACIRI. The Annual ACIRI must also be completed on the anniversary of the Pre-ACIRI.
ACIRI Criteria 4	For the 2 nd and subsequent program years of enrollment the annual ACIRI
	will be completed during the Pre-ACIRI anniversary month every year thereafter until the family exits the program.
ACIRI Criteria 5	Regardless of how long a family has been served, or how long it has been since the family last received an ACIRI assessment, it is important to complete a Post ACIRI for the focus parent and the focus child before exiting the family from the program, if possible.

Note: PICCOLO (families enrolled prior to 8/1/2023) 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.

*Assessment 4: 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.		
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.	
	compliance.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within five (5) days of service. Data entries will be checked quarterly (Quarterly Progress Reports) to ensure model fidelity.	
*Other Criteria 2	 ELSs 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: 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 3	Each participating PC+ program shall convene a supervisory meeting of all pertinent program personnel, ELSs, 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 4	Report all required data within the national PC+ Management Information System.	

Program Name		Code	209
	Library Based and Other Learning Programs		
Program Area	Parenting	•	

First Steps library based, and other learning programs, connects librarians with child care programs and preschool classrooms, providing books, storytelling, and staff training. These programs can look different for each partnership, based on family, provider, and community needs.

All partnerships must submit a "library-based and other learning programs" implementation plan to include a description of the program and its components. This plan will be submitted to the Program and Grants subcommittee for approval prior to implementation.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	□Yes	□Yes	☐Healthy and Safe	
⊠Children	⊠No	⊠No		
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers			,	
Data Collection Re	equirements			
In KITS: □Client	-level ⊠Mor	nthly outputs		
If monthly outputs	If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes ⊠No			
If yes, client-level data required by model elsewhere, then name of external data system(s):				
If Yes, Monthly Outputs Data Required				
⊠Books Read			□Total Number of Health Screenings	
⊠Literacy Kits Given			□Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)		d) [☐Total Number of One-on-One Client Visit Hours	
⊠Families Served (unduplicated)		· [□Group Meetings, Trainings, Events: Number of Sessions	
⊠Adult Family Members Served (unduplicated)		1 1 1 1	□Group Meetings, Trainings, Events: Number of Hours	
□Providers Served (e.g., Schools, Centers)			□Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)			□Other (please specify):	
	(Totale (piedde apeoliy).	

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	Prenatal to kindergarten entry.		

Service Criteria: How is this program implemented?

Visits (Home or Site):

Visit Criteria 2: Frequency | 1 per month.

Note: Visits are determined by program design but should include at least monthly engagement (or the equivalent of monthly with the number of visits during the program year) with children and/or families.

Engagement activities include, but are not limited to:

- Storytime at library or by librarian at child care programs.
- Art, music, or other supplemental activities to existing library programming.
- Special programming for a specific purpose (e.g., Kindergarten or 4K readiness).

Reach Criteria: What are this program's goals for client reach				
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end			
	of the program year.			

Workforce Criteria: Who are the service providers implementing this program?					
Program Role	Activity Provider	Maximum Number	N/A		
		of Cases			
KITS Related Job Title or Role	Service Provider	Minimum Education	No diploma or degree		
		Level			
*Required Certifications and/or	Expertise in the topic area that he/she is delivering training as				
Training	determined by their educational qualifications and experience.				

Other Criteria: Are there other program criteria that exist?			
Other Criteria 1 A connection to the library will be established either through program			
delivery or connecting participating families with the local library.			
Other Criteria 2	Programs that connect with child care programs can provide literacy		
	training for teachers and staff.		

Program Name		Code	212
	Dolly Parton Imagination Library		
Program Area	Parenting		

Dolly Parton's Imagination Library is program dedicated to inspiring a love of reading by gifting books free of charge to children from birth to age five. With the understanding that DPIL enrollment is open to all age-eligible children, partnerships are encouraged to target DPIL enrollment to children 3 and under. DPIL studies indicate that longer program participation is associated with stronger home literacy environments and greater frequency of parents reading to children.

Unit of Service	Evidence	High Intensity?	Expected First Steps' Child-Level Outcomes	
	Based?			
□Families	⊠Yes	□Yes	☐ Healthy and Safe	
⊠Children	□No	⊠No	⊠Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection R	Requirements			
In KITS: □Clier	nt-level ⊠M	Ionthly outputs		
If monthly outputs in KITS, is client-level data required			d by model elsewhere? □Yes ⊠No	
If yes, client-level data required by model elsewhere, then name of external data system(s):				
If Yes, Monthly Outputs Data Required			Outputs Data Required	
⊠Books Distribu	□ Books Distributed □ Referrals Made			
			□Total Number of Health Screenings	
□Literacy Kits Given			□Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)		ted)	□Total Number of One-on-One Client Visit Hours	
□Families Served (unduplicated)			□Group Meetings, Trainings, Events: Number of Sessions	
□Adult Family Members Served (unduplicated)		(unduplicated)	☐Group Meetings, Trainings, Events: Number of Hours	
□Providers Served (e.g., Schools, Centers)		, Centers)	☐Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)		ted)	□Other (please specify):	

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	Prenatal to kindergarten entry.		
Note: Partnerships are encouraged to target DPIL enrollment to children 3 and under.			

Reach Criteria: What are this program's goals for client reach			
*Reach Criteria1: Projected to Serve	· · · · · · · · · · · · · · · · · · ·		
	of the program year.		
Reach Criteria 2:	Because DPIL incorporates a low-intensity, passive service delivery model, it should be used to supplement more comprehensive forms of service. 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 programs or scholarships may be linked for credit.		

Other Criteria: Are there other program criteria that exist?

*Other Criteria 1	Partnerships administering an Imagination Library strategy must devote 75% or more of strategy funds to the procurement of books. Programs seeking a waiver of this 25% cap on non-book related spending must petition the State Board of Trustees, providing a detailed accounting of all strategy-related spending.		
*Other Criteria 2	Due to DPIL's requirement that services be provided to any age-eligible child within the partnership's service area – i.e., the partnership may not restrict DPIL enrollment to children at risk for not being ready for school - a cash match of at least 25% is required for state funds committed to the DPIL strategy for the procurement of books.		

Program Name		Code	213
	Early Steps to School Success		
Program Area	Parenting		

Save the Children's Early Steps to School Success (ESSS) Program is designed to provide high-quality, early childhood development services to young children and families living in under-resourced and underserved communities. Key components include home visits that focus on healthy pregnancy and early childhood development; a book bag exchange; fostering positive connections between families and schools; supporting school transitions; and connecting families to services and resources.

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 First Steps specific additions.

The following guideline includes both the ESSS compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?			
Age			
Age Criteria	100% of newly enrolled families will contain an expectant mother and/or		
	a child under 36 months of age.		
Note: Supplemental group meetings and transition activities may be incorporated for children older than 36			
months.			
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 im	plemented?	
Visits (Home or Site):		
*Visit Criteria 1: Duration	Visits should last a minimum of 60 minutes.	
*Visit Criteria 2: Frequency	All families shall be offered no less than two visits per month.	
Note: Programs shall match the intensity of their service delivery to the specific needs of each family and the		
caseload requirements of the ESSS home visitor.		
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. Regardless of location, all visits must be one-on-one.		
	At a family's discretion and supervisor approval virtual and	
t	elecommunication visits will also be considered acceptable and	
	count as a home visit. The reason must be documented in the Home	
\	/isit Record.	
Group Connections		
*Group Connection Criteria 1: Duration Group connections should last at least 1 hour.		
*Group Connection Criteria 2: Frequence	cy Families shall be offered at least one group connection activity per	
	month (at least twelve group connection activities per year) for	
	parents receiving home visits and those participating in the three-	
	year-old book bag exchange.	
Group Connection Criteria 3: Group Size	The recommended size for parent-child groups is up to 50 children,	
	prenatal to 5 years and their parent(s).	

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the en		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria 75% of families must be retained for nine or more months of program		
	participation.	

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	ESS Home Visitor	Maximum Number	20
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or	All home visitors must ha	•	•
Training	equivalency and two years' previous supervised work experience with young children and/or parents. Successful completion of model required 16-hour training must be documented prior to their first home visit. Each home visitor must successfully complete at least four hours 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 onsite by each Partnership. Each home visitor shall complete training in ASQ-3, ASQ:SE-2, and HFPI.		
Program Role	Supervisor	Maximum Number of Cases	N/A
KITS Related Job Title or Role	Program Manager	Minimum Education Level	Bachelors or four-year degree
*Required Certifications and/or Training	Supervisors must have a bachelor's degree and experience in early education, child health and/or development, home visiting, staff supervision, and working with families and children.		

Annual training (for both the program and individual staff members) must be documented onsite by each Partnership.
Each supervisor shall complete training in ASQ-3, ASQ:SE-2, and HFPI.

Screening and Assessment Criteria:	How are program participants screened and/or assessed?
*Screening 1: Ages and Stages Quest	
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of
	enrollment using the ASQ-3. 80% is the minimum requirement for
	compliance.
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the
7.00 0 0.110112 =	following ages: 4, 8, 12, 16, 20, 24, 30, and 36 months of age.
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,
Ace o chiena o	supporting documentation must be requested and saved to the child's file,
	and enter the scores into the First Steps Data System. Note the scores are
	from an outside source in the First Steps Data System. Rescreen at the
	next designated age.
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,
Acq o chiena i	the parent educator shall collaborate with parents/guardians to seek the
	consensual provision of these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district) for
	additional diagnostic evaluation. Referrals shall be documented in the
	First Steps Data Collection System.
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more
Ace o chiena o	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child's
	development, and rescreen the child at the next designated age.
Note: A child is exempt from being so	
	ved from the home of the participating parent.
	by an outside agency and supporting documentation is provided. If
	is not provided, child must be screened.
	byNet, or other specialized intervention services based on a previously
	eenings must resume when all intervention services have ended.
g	
*Screening 2: Ages and Stages Quest	ionnaire: Social and Emotional-2 (ASQ:SE-2)
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of
·	enrollment using the ASQ:SE-2. 80% is the minimum requirement for
	compliance.
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the
	following ages: 6, 12, 18, 24, 30, and 36 months of age.
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,
	supporting documentation must be requested and saved to the child's file,
	and enter the scores into the First Steps Data System. Note the scores are
	from an outside source in the First Steps Data System. Rescreen at the
	next designated age.
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall
·	collaborate with parents/guardians to seek the consensual provision of
	these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district) for
	additional diagnostic evaluation. Referrals should be entered in the First
	Steps Data Collection System within 5 days of developmental screening.
	A2

ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child, and rescreen the child at the next designated age.
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages regardless of developmental screening results and/or a documented delay in which the child is receiving services.
Note: A child is exempt from being screened if the child:	

- has been removed from the home of the participating parent.
- was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened.

*Assessment: Healthy Family Parenting Inventory (HFPI)		
HFPI Criteria	All parenting programs shall complete, at minimum, baseline and post assessments of the primary adult identified within each enrolled case using the Healthy Families Parenting Inventory (HFPI). The baseline HFPI is encouraged to be completed at the first visit but must be within 45 days of enrollment and every six months thereafter until program exit.	

	ram's requirements for client referrals and connections?	
Referral Criteria 1: Referrals	Parent educators 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.		
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	· · · · · · · · · · · · · · · · · · ·	
	five (5) days of service. Data entries will be checked quarterly (Quarterly	
	Progress Reports) to ensure model fidelity.	
*Other Criteria 2	ESSS home visitors shall provide services to families for 12 months in a	
	program year	
Other Criteria 3	Family Goal Plans must be made within 3 months of the enrollment and	
	updated at least semi-annually to gauge progress and goal attainment.	
Other Criteria 4	First Steps programs shall administer client satisfaction surveys at least	
	annually, and use data collected for program improvement.	
Other Criteria 5	Each ESSS program shall convene a supervisory meeting of all pertinent program/staff (to include those staff members providing both supervision and direct service to families) no less than quarterly to review recruitment, guideline compliance, programmatic data and other issues related to strategy success.	

Program Name		Code	218
	Raising a Reader		
Program Area	Parenting		

The mission of Raising a Reader (RAR) is to engage families in a routine of daily "book-cuddling" with their children to foster healthy brain development, parent-child bonding, and early literacy skills critical for school success. RAR-Enhanced has been shown to be effective in increasing children's oral language and reading comprehension when implemented in conjunction with parent literacy training.

Central components include informal professional development for early childhood educators, a weekly book rotation, parent engagement, child-driven literacy experiences, and library connections. It is intended to be implemented as a family literacy supplement to a center- or home-based early learning and development program such as Head Start/Early Head Start, childcare, home visitation, or family literacy.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
⊠Families	⊠Yes	⊠Yes	☐Healthy and Safe	
□Children	□No	□No	⊠Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection Requirements				
In KITS: ⊠Client-level □Monthly outputs				
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No If yes, client-level data required by model elsewhere, then name of external data system(s):				

Targeting Criteria: Who does this program target?			
Age			
Age Criteria	Prenatal to kindergarten entry.		
Note: With the understanding that RAR enrollment is open to all age-eligible children (birth to kindergarten entry)			
partnerships are encouraged to target RA	AR-enrollment to children 3 and under.		
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	*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 V	Visits should last a minimum of 45 minutes.			
*Visit Criteria 2: Frequency V	Weekly			
Note: Program Year as defined by a Local Partnership.				
Visit Criteria 3: Location Home, childcare center/classrooms or incorporated with a high inter				
parenting program.				
Group Connections				
*Group Connection Criteria 1: Duratio	on Group connections should last 1 hour.			
*Group Connection Criteria 2: Frequence	Families shall be offered at least 5 sessions during the program			
	year.			

*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria RAR is ongoing with no specific time frame for center involvement;		
families are eligible for RAR for as long as their child(ren) are enrolle		
	the host program.	

Workforce Criteria: Who are the service providers implementing this program?				
Program Role	RAR Implementer	Maximum Number	N/A	
		of Cases		
KITS Related Job Title or Role	Service Provider	Minimum Education	No diploma or degree	
		Level		
*Required Certifications and/or	All implementers must attend two trainings conducted by the			
Training	coordinator. Training must include a kickoff orientation and implementer			
	skill building training outlined in affiliate agreement. Implementers must			
	receive onsite coaching at least once per year as part of a coordinator			
	visit. Appropriate personnel should also be trained in any screenings or			
	assessments used by the program.			
Program Role	RAR Coordinator	Maximum Number	N/A	
		of Cases		
KITS Related Job Title or Role	Program Manager	Minimum Education	No diploma or degree	
		Level		
*Required Certifications and/or	RAR- coordinators must attend an RAR National Coordinator Training.			
Training				
	The RAR parent survey, site rubric and/or other tools can be used to			
	assess implementation of the RAR program.			

*Assessment 1: Parent Survey (Pre-assessment)				
Pre-assessment Criteria	to be administered to determine behavior change in parents and children from the list of appropriate assessment; DIBELS, PPVT, Creative Curriculum, and PALS.			
Note: Pre-assessment should be com	Note: Pre-assessment should be completed with all parents at a baseline during the time of enrollment			
*Assessment 2: Parent Survey (Post-assessment)				
*Assessment 2: Parent Survey (Post-	assessment)			

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

*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

Other Criteria: Are there other progr	am criteria that exist?	
*Other Criteria 1	1	
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	Partnerships and their group facilitators shall ensure active collaboration	
	with other parenting and family support services in their communities, refer	
	families to services as necessary, and follow up as feasible to ensure that	
	appropriate connections have been established.	
Other Criteria 3	Each local partnership must secure and maintain affiliate status throughout	
	the duration program. Services are to be delivered following program	
	guidelines and include parent literacy components.	
Other Criteria 4	he RAR Online Affiliate Network is available to Affiliates via a password-	
	protected area of Raising A Reader's web site. This network enables	
	Affiliates to share best practices, access Raising A Reader tools and	
	templates, view newsletters and sustainability archives, and see the most	
	up-to-date RAR calendar.	
Other Criteria 5	Programs are also encouraged, but are not required, to use the Adult-Child	
	Interactive Reading Inventory (ACIRI) as a means of assessing both parent	
	and child changes in literacy behaviors.	
Other Criteria 6	First Steps programs shall administer client satisfaction surveys at least	
	annually, and use data collected for program improvement.	

Program Name		Code	225
	Home Instruction for Parents of Preschool Youngsters (HIPPY)		
Program Area	Parenting		

HIPPY (Home Instruction for Parents of Preschool Youngsters) is a home visiting program that supports parents in their role as a child's first teacher. Every week for 30 weeks, a trained AmeriCorps parent educator will visit families of young child in their homes. Visits are guided by curriculum designed to equip parents with the skills and tool necessary to succeed in their role as their child's first teacher.

While the program is designed for 4-year-old children, it is also beneficial for low-income families, parents and caregivers with limited education, families with a history of child abuse and/or involvement with the child welfare system, and families experiencing language barriers.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection F	Data Collection Requirements		
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Children that are 4 years of age.	
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 should last a minimum of 45 – 60 minutes.	
*Visit Criteria 2: Frequency	30 weekly visits.	
Visit Criteria 3: Location	Home visitors meet with parents in person, preferably in their home. At a family's discretion, supervisor and Program Coordinator approval occasional virtual visits will also be considered acceptable and count as a home visit.	
Group Connections		
*Group Connection Criteria 1: Durat	ation Group connections should last 2 hours.	
*Group Connection Criteria 2: Freque	ency 6 sessions during the program year.	
Note: Sessions should begin within 6 – 8	8 weeks after home visits have started.	
Group Connection Criteria 3: Group S	Size N/A	
Group Connection Criteria	, , , , , , , , , , , , , , , , , , ,	
Requireme	ents prior to the first group meeting.	

•	Group meetings offer educational enrichment, information and activities that meet the needs of the parents.
•	Group meetings must have required documentation provided by HIPPY: Group Meeting Attendance Form and Group Meeting Evaluation.
•	Enrichment activities are provided for children during group meetings.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the e		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria	75% of families must be retained for a minimum of 26 weeks or more of	
	program participation.	

Retention Criteria	75% of families must be retained for a minimum of 26 weeks or more of		
	program participation.		
Workforce Criteria: Who are the service	providers implementing th	ie program?	
Program Role	AmeriCorps/ HIPPY	Maximum Number	8 - 10
1 Togram Note	Parent Educator	of Cases	0 10
KITS Related Job Title or Role	AmeriCorp Member	Minimum Education Level	High School diploma or GED
*Required Certifications and/or	Each HIPPY parei	nt educator must atten	_
Training	P		3
Note: Only AmeriCorps members (HIPP	 HIPPY parent educators receive weekly role play training based on the weekly lesson. HIPPY parent educators must be HIPPY parents, former HIPPY parents, or are knowledgeable of the language and culture of the community served. HIPPY parent educators must be able to read, write and speak well in the language of the curriculum they will use with assigned parents. A professional development plan based on performance evaluations and career goals must be established for each HIPPY parent educator. Each parent educator shall complete training in ASQ-3 and ASQ:SE-2. All training (for both program and individual staff members) must be documented on-site. 		
visits. No other services can be offered u			
	111000/ 0:: 0		A1/A
Program Role	HIPPY Site 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	 All supervisors in SC, including AmeriCorps members, must have five years of related supervised work experience with young children and/or parents and a four-year degree in early childhood education or closely related field. The Local Partnership must attend HIPPY preservice training through HIPPY National. Each supervisor shall complete training in ASQ-3 and ASQ:SE-2. All training (for both program and individual staff members) must be documented on-site. 		

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ-3. 80% is the minimum requirement for	
	compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,	
Alog o omena o	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,	
ASQ-3 Citteria 4	the parent educator shall collaborate with parents/guardians to seek the	
	· · ·	
	consensual provision of these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the	
100.00 %	First Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being so		
	ved from the home of the participating parent.	
	by an outside agency and supporting documentation is provided. If	
	is not provided, child must be screened.	
	byNet, or other specialized intervention services based on a previously	
diagnoses. Scr	eenings must resume when all intervention services have ended.	
	ionnaire: Social and Emotional-2 (ASQ:SE-2)	
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ:SE-2. 80% is the minimum requirement for	
	compliance.	
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the	
	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall	
7.0 2.0 2 2 0.110.112 1	collaborate with parents/guardians to seek the consensual provision of	
	these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the First	
	•	
ASO-SE-2 Critoria 5	Steps Data Collection System.	
ASQ:SE-2 Criteria 5	Steps Data Collection System. If a child scores in the monitoring range on the ASQ:SE-2 in one or more	
ASQ:SE-2 Criteria 5	Steps Data Collection System.	

	completed at the 26th week visit (or sooner if a family leaves the program prior to week 26).		
Post-Assessment Criteria	Post-assessment using the HIPPY Survey of Parenting Involvement is		
*Assessment 3: Post-Assessment			
	of Parenting Involvement at the first visit.		
Pre-assessment Criteria	All HIPPY parent educators shall complete, at minimum, the HIPPY Survey		
*Assessment 2: Retrospective Pre-as	sessment		
	Winter and Spring checkpoints.		
Teaching Strategies GOLD® Criteria	All SCFS, 4K children will be assessed by their 4K teacher by the Fall,		
*Assessment 1: Teaching Strategies (GOLD®		
provided, china macros concern			
provided, child must be screen			
	pency and supporting documentation is provided. If documentation is not		
 has been removed from the ho 			
Note: A child is exempt from being sc	in which the child is receiving services.		
	regardless of developmental screening results and/or a documented delay		
ASQ:SE-2 Criteria 6	, , , , , , , , , , , , , , , , , , , ,		
	the child at the next designated age		
	the areas of possible concern, continue monitoring the child, and rescreen		

Success Criteria: How is success in	this program defined for participants?
Success Criteria	 80% of HIPPY families will demonstrate improvement by pre and post surveys Measurement Tool(s): National HIPPY Network pre/post parent inventory. Definition School Readiness: Responding agree/strongly agree to both questions: I read to my child more NOW than BEFORE participating in HIPPY. I talk with my child more NOW than BEFORE participating in HIPPY.

Referral Criteria: What are this prog	ram's requirements for client referrals and connections?	
Referral Criteria 1: Referrals	Parent educators shall seek to ensure that each participating family connects with a pediatric medical home and other community services as appropriate.	
	Note: Local Partnerships or HIPPY Parent Educators shall utilize the Survey of Parenting Involvement assessment	
	to refer/link families to additional interventions as necessary and beneficial - either simultaneously or as part of a	
planned, multi- year service continuum.		
*Referral Criteria 2: Connections	Referral Criteria 2: Connections The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

Other Criteria: Are there other program criteria that exist?			
*Other Criteria 1 All data must be entered within the First Steps Data Collection System Step Data Collection System System Step Data Collection System Syste			
	5 days of service. Data entries will be checked quarterly (Quarterly Progress		
	Reports) to ensure model fidelity.		
Other Criteria 2 HIPPY Parent Educators will monitor records at least twice a month to			
	ensure parents are working with their children five days per week and that		
	the average number of minutes worked per day is reasonable for the age of		
	the child.		

	If the number of minutes is consistently much less or greater than the average 15-20 minutes per day, determine the cause and if a referral, or other intervention, is needed.
	When monitoring records, a reviewer must target a minimum of 10% of enrolled families' weekly packets randomly selected files. When completing the review: Pull Pages from 10% randomly selected files, AND/OR A note indicates the reason for each missing page.
Other Criteria 3	Home visitor successfully instructs assigned parents (not children) in the effective utilization of the curriculum by completely role playing each activity packet each week using the 5R format: rapport, review, role play, referrals, and reminders.
Other Criteria 4	Supervisors hold a weekly staff meeting with program staff to provide reflective supervision and weekly individualized reflective supervision meetings to review client recruitment and retention, guideline compliance, and programmatic data reviews.

Program Name		Code	226
	Supporting Care Providers Through Visits (SCPV)		
Program Area	Parenting	•	

Offers childcare providers research-informed information and evidence-informed practices that are supportive and educational. In addition to helping care providers better serve families, the SCPV curriculum offers materials (Parent Pages) to help parents be better teachers in the home.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	□Yes	⊠Yes	⊠Healthy and Safe
□Children	⊠No	□No	☑Actively Supported by Their Families and Communities
□Adults			☑Arrive at School Ready to Reach Their Highest Potential
⊠Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Birth to kindergarten entry.	
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 t		
	time of enrollment.	
*Risk Factor Criteria 3	, ,	
	Monitored Family, Friends and Neighbors Providers.	

Service Criteria: How is this program implemented?			
Visits (Home or Site):			
*Visit Criteria 1: Duration	Visits should last a minimum of 45 minutes.		
*Visit Criteria 2: Frequency 1	All providers shall be offered not less than two visits per month.		
Note: An average of 1.8 visits is the minimum threshold and 2.5 or more is considered outstanding intensity.			
*Visit Criteria 2: Frequency 2	All providers should receive a minimum of 24 visits per program year.		
Visit Criteria 3: Location	on Child care provider home.		
Group Connections			
*Group Connection Criteria 1: Durat	tion Group connections should last 1 – 2 hours.		
*Group Connection Criteria 2: Freque	ncy At least 1 per month.		

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the end		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria	75% of family home providers must be retained for nine or more months	
	of program participation.	

Note: Family home providers cannot be in the program form more than 3 years.

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Parent Educator	Maximum Number	5
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or Training	 All parent educators in SC must have a minimum of a high school diploma or equivalency and two years' previous supervised work experience with young children and/or parents. All parent educators must document successful completion of/initial certification in PAT's Foundational and Model Implementation Training and the Supporting Care Providers through Visits (SCPV) Curriculum. Each parent educator shall complete training in ASQ-3 and ERSI FCCERS. All training (for both program and individual staff members) must be documented on-site. 		
Program Role	Supervisor	Maximum Number of Cases	N/A
KITS Related Job Title or Role	Program Manager	Minimum Education	Bachelors or four-year
		Level	degree
*Required Certifications and/or Training	 All supervisors in SC must have five years of related supervised work experience with young children and/or parents and a four-year degree in early childhood education or closely related field. All program managers must document successful completion of/initial certification in PAT's Foundational and Model Implementation Training and the Supporting Care Providers through Visits (SCPV) Curriculum. Each program manager shall complete training in ASQ-3 and ERSI FCCERS. All training (for both program and individual staff members) must be documented on-site. 		

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	Each provider educator shall ensure the opportunity for child	
	developmental screening using the ASQ-3 is made available to all	
	participating childcare providers and/or consenting parents with 90 days	
	of enrollment and annually thereafter.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.	
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider	

	ii. either BabyNet (ages 0-3) or the child's zoned school district) for	
	additional diagnostic evaluation. Referrals shall be documented in the First	
	Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being sc		
	ved from the home of the participating parent.	
	by an outside agency and supporting documentation is provided. If	
	is not provided, child must be screened.	
	byNet, or other specialized intervention services based on a previously	
diagnoses. Screenings must resume when all intervention services have ended.		
*Screening 2: Developmental Screenings		
Developmental Screenings Criteria	Developmental screenings must be conducted on at least 80% of eligible	
	clients with consent for services is provided.	
	·	
*Assessment 1: Pre-Care Provider Su	rvey	
Pre-Care Survey Criteria	100% providers will complete during enrollment or at first visit.	
*Assessment 2: Post-Care Provider Survey		
Post-Care Survey Criteria	100% providers will complete at the end of the program year or at the time	
•	of discontinuation of services.	
*Assessment 3: Family Child Care Environment Rating Scale (FCCERS-3)		
FCCERS-3 Criteria 1	Each provider should receive a baseline assessment with the FCCERS (or	
	other approved assessment) within 90 days of initiation of service.	
FCCERS-3 Criteria 2	Each provider should receive a post assessment with the FCCERS (or other	
	approved assessment) at the end of the program year or earlier if a	
	provider leaves the program (at least six months following the initial	
	assessment), and annually thereafter if a home-based provider is served	
	across multiple program years.	

Other Criteria: Are there other progr	am criteria that exist?	
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within	
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	2 Goal setting and curriculum delivery should be informed by provider	
	response to the Vision for Growth and General Practice and Activity	
	Information sections of the Care Provider Survey.	
Other Criteria 3	Providers should participate in activities with their children and apply child	
	development strategies as outlined in goal setting sessions.	
Other Criteria 4	Partnerships and their provider educators shall ensure active collaboration	
	between parenting family support services and the surrounding community.	
	Provider educators will provide information to childcare and FFN providers to	
	facilitate family referrals to service as necessary and follow up as feasible to	
	ensure that appropriate connections have been established.	
Other Criteria 5	Provider educators shall include discussion of their SCPV work during their	
	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.	
Other Criteria 6	The program coordinator evaluates each home visitor's performance at least	
	three (3) times a year, based on home visits, group and staff meeting	
	observations.	

Other Criteria 7	The program coordinator establishes a weekly schedule to train staff in the
	curriculum to include child development concepts and terminology utilizing
	the Coordinator Guide.
Other Criteria 8	A minimum of 50% of the incentive funding received by the Partnership must
	be used to directly benefit the participating child care providers and parents.
	The remaining funds are available to the Partnership to help with the cost of
	delivering services. The program coordinator evaluates each home visitor's
	performance at least three (3) times a year, based on home visits, group and
	staff meeting observations.
Other Criteria 9	SCPV grant funds are intended to purchase program and curriculum
	materials or other program related items such as books, educational toys, art
	supplies, rugs, chairs, etc. Capital expenses are not permitted. For
	playground equipment such as swing sets, it cannot be anything that
	requires installation or fixed attachment to the ground or a structure.
	However, outdoor items like balls, hula hoops, games, etc. are acceptable.
	Materials purchased must be aligned with provider needs as indicated during
	visits or by the Pre or Post Care Provider Survey, environmental assessment
	(FCCERS) and/or other approved assessment.

Program Name		Code	224
	LENA Home (Language ENvironment Analysis)		
Program Area	Parenting		

Language Environment Analysis (LENA) Home is a parenting intervention that combines 13 interactive parenting sessions with an innovative LENA "talk pedometer" technology. The program is designed for families with young children showing low levels of vocabulary and communication. The LENA Home program provides an outline curriculum to be implemented for the home visits. LENA Home technology has been proven to be a success by researchers, clinicians, interventionist worldwide. LENA Home was designed as a supplement for other parenting home visitation programs curriculum, but it can be implemented as a stand-alone strategy.

Local Partnerships that are currently operating LENA Home may continue implementing, however LENA Home is prohibited to any new Local Partnerships.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			☑Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	2 months to kindergarten entry.	
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 should last between 15 and 20 minutes. Note: The topic sequence includes four core sessions and up to nine language enrichment sessions. Sessions cover foundational topics like dialogic reading and songs and rhymes, as well as how to use LENA technology. *Visit Criteria 2: Frequency | 12 weekly visits. Note: It is recommended that each participating family complete at least six LENA Days and at least nine LENA Home coaching sessions, either weekly or every other week. As per the implementation method that demonstrated desired outcomes, the LENA strategy is to be implemented, at a minimum, as a, 3-month intensive feedback and support program for parents utilizing LENA for in-home audio recording and reports. Home visits are to be conducted weekly.

Feedback and support during implementation must include (a) LENA-based feedback reports based on 10 recordings for parents regarding their home language environments, (b) educational materials providing

information to parents on improving their child's language environment, and (c) coaching support by a trained staff member			
Visit Criteria 3: Location LENA Home Coaching sessions can be delivered in home or in person			
	during home visits as well as virtually or in a hybrid setting.		
Note: Visits can be conducted via telephone, on an as needed basis, with parents understanding that they will			
return to in-home or in-person visits after the need is resolved.			

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the e		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria 75% of families must be retained for at least 10 weeks of program		
	participation.	

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	LENA Home Parent	Maximum Number	6 - 12
	Educator	of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	Associates or two-year
		Level	degree
*Required Certifications and/or	LENA requires online training (in the form of a webinar) to review the		
Training	LENA program. Because the LENA training is relatively brief and		
	because the curriculum is in the form of a brief outline, it is strongly recommended that staff implementing LENA Home also have at least two years of experience in home visitation.		
	All service providers mus	t complete training in A	ASQ-3 and ASQ:SE-2.

	How are program participants screened and/or assessed?	
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ-3. 80% is the minimum requirement for compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.	
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the First Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age.	
Note: A child is exempt from being screened if the child:		
has been removed from the home of the participating parent.		

was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended. *Screening 2: Ages and Stages Questionnaire: Social and Emotional-2 (ASQ:SE-2) ASQ:SE-2 Criteria 1 The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ:SE-2. 80% is the minimum requirement for Children will be screened using the ASQ:SE-2 on or approximately the ASQ:SE-2 Criteria 2 following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age. If an outside agency has completed a developmental screening for a child, ASQ:SE-2 Criteria 3 supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall ASQ:SE-2 Criteria 4 collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the First Steps Data Collection System. If a child scores in the monitoring range on the ASQ:SE-2 in one or more ASQ:SE-2 Criteria 5 categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child, and rescreen the child at the next designated age. ASQ:SE-2 will be completed on every child at the designated ages ASQ:SE-2 Criteria 6 regardless of developmental screening results and/or a documented delay in which the child is receiving services. **Note:** A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. *Assessment 1: LENA Snapshot **LENA Snapshot Criteria** Each client shall be assessed using the LENA Snapshot as outlined in the LENA Home manual. LENA's language assessment (Snapshot) is to be administered as prescribed in the LENA Home Outline of Coaching Sessions. It is to be administered no more than once per month. The recommended schedule is at Sessions #2, #5, and #8. There is an option to continue to offer the Snapshot to families on a monthly basis. through age 36 months. *Assessment 2: Home Language Environment **Home Language Environment** Parent surveys, provided by LENA, that assess child language-focused Criteria questionnaires are administered, at a minimum, at baseline (just after recruitment) and then at 3-month intervals. Measures of the home language environments are obtained with the LENA software. They include standardized scores for the number of adult words spoken near the children daily (AWC), the number of conversational turns (CTs) engaged in with the children daily, and time spent reading daily.

Success Criteria: How is success in	this program defined for participants?		
Success Criteria 1	Measured via LENA Developmental Snapshot:		
	 Greater increase in conversational turns as family income increases Greater increase in conversational turns among children from English-speaking homes compared to their peers from non-English speaking homes Significant increase in child vocalizations from the beginning to the end of the school year Greater child vocalization correlated with greater input from peers and engaging in more conversational turn-taking with adults Greater conversational turns at 18 months predictive of greater emotional communication at 30 months Conversational turn counts for children ages 18 to 24 months predicted IQ, expressive and receptive language skills, and verbal comprehension at 9 to 13 years of age 		
Success Criteria 2	Increase in parent knowledge of high-quality parent-child interactions and		
	language development.		

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals	Parent educators shall seek to ensure that each participating family	
	connects with a pediatric medical home and other community services as	
	appropriate.	
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within	
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	LENA Home is prohibited to be implemented as a new program to	
	partnerships.	

Program Name		Code	227
	LENA Start (Language ENvironment Analysis)		
Program Area	Parenting		

Language Environment Analysis (LENA) Start is a group-based parenting intervention intended for parents of young children that has been shown to improve children's language ability. In the case of parents with below average ratings on automated language measures, implementation of the LENA program showed significant improvement.

LENA Start was designed to supplement other parenting home visitation programs, but it can be implemented as a stand-along strategy.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
⊠Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?			
Age			
Age Criteria	Birth to 3 years old.		
Note: Specifically, families also facing various barriers such as limited education, poverty, language and/or			
isolation			
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?		
Group Connections		
*Group Connection Criteria 1: Duration	Group connections should last 1 hour.	
*Group Connection Criteria 2: Frequency 10 weekly sessions.		
Note: Group sessions are to be conducted weekly and/or with no more than 2 weeks between visits. In addition, to ensure that parents receive the appropriate dosage sessions should be held no more than 14 days apart for ~5 months.		
Group Connection Criteria 3: Group Size 15 – 20 families.		
Group Connection Criteria 4: Requirement	Feedback and support for parents during implementation must include (a) LENA-based feedback reports (based on 5 recordings beginning with week 3), (b) educational materials on how parents can improve their child's language environment, and (c) coaching by a trained staff member.	

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the en		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria 75% of families must be retained for 10 sessions of program		
	participation.	

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	LENA Start Session	Maximum Number	15 - 20
	Coordinator	of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	No diploma or degree
		Level	
*Required Certifications and/or		es online training (in th	
Training		NA Start program and h	
			g is relatively brief and
		in the form of a brief or	
		at starr implementing t f experience in home vi	ENA Start also have at
	meeting delivery.	i experience in nome vi	sitation and/or group
		shall complete training	g in ASQ-3 and ASQ:SE-
	2.	onan complete training	, / to Q o u.i.u / to Q.io L
	 All training (for both) 	oth program and individ	dual staff members)
	must be docume		,
Program Role	LENA Start Program	Maximum Number	N/A
	Coordinator	of Cases	
KITS Related Job Title or Role	Program Manager	Minimum Education	Bachelors or four-year
*Daminad Oantifications and/on	A II	Level	degree
*Required Certifications and/or Training			rs of related supervised d/or parents and a four-
Training			or closely related field.
		ds a Program Director.	
			on of asynchronous and
	synchronous sessions for a total of 5 hours. Each partner will be		
	,	Implementation Specia	•
	training and supports program implementation. Ongoing		
	guidance and support are provided to both Program Directors		
	and Session Coordinators.		
	Each program manager shall complete training in ASQ-3 and		
	ASQ:SE-2.		
	All training (for both program and individual staff members)		
	must be documented on-site.		

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1 The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ-3. 80% is the minimum requirement for compliance.		
ASQ-3 Criteria 2 Children will be screened using the ASQ-3 on or approximately the following ages: 4, 8, 12, 16, 20, 24, 30, and 36 months of age.		

ASQ-3 Criteria 3 ASQ-3 Criteria 4	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If a developmental screening indicates a possible developmental delay,	
Aog o ontena 4	the parent educator shall collaborate with parents/guardians to seek the	
	consensual provision of these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district) for	
	additional diagnostic evaluation. Referrals shall be documented in the First	
	Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being so		
	ved from the home of the participating parent.	
	by an outside agency and supporting documentation is provided. If	
documentation	is not provided, child must be screened.	
is receiving Bal	byNet, or other specialized intervention services based on a previously	
diagnoses. Scr	eenings must resume when all intervention services have ended.	
	ionnaire: Social and Emotional-2 (ASQ:SE-2)	
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ:SE-2. 80% is the minimum requirement for compliance.	
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the	
ASQ.SE 2 Officia 2	following ages: 6, 12, 18, 24, 30, and 36 months of age.	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall	
	collaborate with parents/guardians to seek the consensual provision of	
	these results to: i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district) for	
	additional diagnostic evaluation. Referrals shall be documented in the First	
	Steps Data Collection System.	
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child, and rescreen	
	the child at the next designated age.	
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages	
	regardless of developmental screening results and/or a documented delay	
Notes A shild is average from the	in which the child is receiving services.	
Note: A child is exempt from being so	reenea II (NE CNIIA:	

- has been removed from the home of the participating parent.
- was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened.

*Assessment 1: LENA Snapshot	*Assessment 1: LENA Snapshot			
LENA Snapshot Criteria	Each client shall be assessed using the LENA Snapshot as outlined in the LENA Home manual. LENA's language assessment (Snapshot) is to be administered as prescribed in the LENA Home Outline of Coaching Sessions. It is to be administered no more than once per month. The recommended schedule is at Sessions #2, #5, and #8. There is an option to continue to offer the Snapshot to families on a monthly basis, through age 36 months.			
*Assessment 2: Home Language Envi	ronment			
Home Language Environment	Parent surveys, provided by LENA, that assess child language-focused			
Criteria	questionnaires are administered, at a minimum, at baseline (just after recruitment) and then at 3-month intervals.			
	Measures of the home language environments are obtained with the LENA software. They include standardized scores for the number of adult words spoken near the children daily (AWC), the number of conversational turns (CTs) engaged in with the children daily, and time spent reading daily.			

Success Criteria: How is success in this program defined for participants?		
Success Criteria 1 Greater gains in LENA Developmental Snapshot percentile ranks, adult of count, and conversational turns. Average graduation rate of 71% based attending a minimum of 7 sessions (core sessions 1-4 and 3 remaining sessions) and submitting 6 valid LENA Day recordings.		
Success Criteria 2	2 Greater increases in SPEAK scores.	
Success Criteria 3	Increase in parent knowledge (of high-quality parent-child interactions and language development).	

Referral Criteria: What are this prog	Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals	Group coordinators shall seek to ensure that each participating family		
	connects with a pediatric medical home and other community services as		
	appropriate.		
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.		
	сотприансе.		

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1 All data must be entered within the First Steps Data Collection System with		
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	Materials purchased through LENA include the Start Coordinator Guides,	
	Parent Resource Bag (which includes the parent workbook), child vests,	
	LENA devices, device dock, Hub Software, and LENA Online subscription.	
	Materials provided by the partner organization outside of their contract with	
	LENA include Windows Laptops (for coordinator use during LENA sessions),	
	10 age-appropriate books given to each family served (1 per week, with the	
	intention of fostering reading with the child), labels, and storage of LENA	
	devices, child vests, and family materials (such as books).	

Program Name		Code	231
	Attachment and Biobehavioral Catch-Up - Infant		
Program Area	Parenting		

The Attachment and Biobehavioral Catch-up (ABC) is a home-visiting parenting program developed by Dr. Mary Dozier to help caregivers nurture and respond sensitively to their infants and toddlers to foster their development and form strong and healthy relationships.

Partnerships funding Attachment and Biobehavioral Catch-up – Infant shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting SCIMHA's requirements as our state hub for the model along with a few SC First Steps specific additions.

The following guideline includes both the ABC-Infant compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	□Actively Supported by Their Families and Communities
□Adults			□Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection F	Requirements		
	•		lonthly outputs if implementation is through a vendor.
•	·	•	by model elsewhere? ⊠Yes □No
If yes, client-level data required by model elsewhere, then name of external data ABC portal.		nen name of external data system(s): University of Delaware	
		If Yes, Monthly (Outputs Data Required
□Books Distributed			⊠Referrals Made
□Books Read			☑Total Number of Health Screenings
□Literacy Kits Given			☑Total Number of One-on-One Client Visits
⊠Children 0-5 Served (unduplicated)		ted)	☑Total Number of One-on-One Client Visit Hours
⊠Families Served (unduplicated)			□Group Meetings, Trainings, Events: Number of Sessions
□Adult Family Members Served (unduplicated)			□Group Meetings, Trainings, Events: Number of Hours
□Providers Served (e.g., Schools, Centers)		Centers)	□Group Meetings, Trainings, Events: Total Attendance
□Classrooms Served (unduplicated)		ed)	□Other (please specify):

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 6 – 24 months of age.	
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 should last at least 60 minutes.		
*Visit Criteria 2: Frequency	10 weekly sessions.		
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 maintai	ned.		
Visit Criteria 3: Location 2	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.		

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria 75% of families must be retained for 10 sessions of program		
	participation.	

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role		Maximum Number of Cases	15
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	 Two years of related supervised work experience with young children and/or parents or, two-year degree in early childhood development or closely related field. Document successful completion of the initial training during ABC – infant certification process from model developers before starting to see family clients. Complete the official recertification process every 2 years to ensure model fidelity. Be overseen by at least one certified ABC Supervisor approved by the model developers during their training to become a certified coach. After certification is completed, ABC parent coach shall receive reflective supervision from their regular supervisor and are invited to participate in SCIMHA's ABC community of practice for additional support. Each parent educator shall complete training in ASQ-3, ASQ:SE-2, and any other screenings and assessments required by the model. All training (for both program and individual staff members) must be documented on-site. 		
Program Role	Supervisor	Maximum Number	N/A
WITO Deleted Joh Title on Dele	Cita Cumaminan	of Cases	High Cabaal diploses as
KITS Related Job Title or Role	Site Supervisor	Minimum Education Level	High School diploma or GED
*Required Certifications and/or			
Training	experience in the field is recommended. Site supervisors are		

•	encouraged to at least attend the initial training during their staff ABC – infant certification process from model developers to familiarize themselves with the program. Each lead parent educator and/or supervisor shall complete training in ASQ-3, ASQ:SE-2, and any other screenings and assessments required by the model. All training (for both program and individual staff members) must be documented on-site.
---	---

Screening and Assessment Criteria: How are program participants screened and/or assessed?

*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ-3. 80% is the minimum requirement for	
	compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,	
·	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,	
·	the parent educator shall collaborate with parents/guardians to seek the	
	consensual provision of these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the	
	First Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being so	reened if the child:	
	ved from the home of the participating parent.	
was screened l	by an outside agency and supporting documentation is provided. If	
documentation	is not provided, child must be screened.	
is receiving Bal	byNet, or other specialized intervention services based on a previously	
diagnoses. Scr	eenings must resume when all intervention services have ended.	
*Screening 2: Ages and Stages Quest	ionnaire: Social and Emotional-2 (ASQ:SE-2)	
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ:SE-2. 80% is the minimum requirement for	
	compliance.	
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the	
	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall	
	collaborate with parents/guardians to seek the consensual provision of	
	these results to:	
	66	

	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the	
	First Steps Data Collection System.	
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child, and rescreen	
	the child at the next designated age.	
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages	
	regardless of developmental screening results and/or a documented delay	
	in which the child is receiving services.	
Note: A child is exempt from being so	reened if the child:	
 has been removed from the ho 	ome of the participating parent.	
 was screened by an outside ag 	gency and supporting documentation is provided. If documentation is not	
provided, child must be screen	ed.	
Screening 3: Adverse Childhood Expe	rience	
Adverse Childhood Experience	ABC voluntary tool recommended for caregivers to complete before first	
Criteria	session.	
Screening 4: Center for Epidemiologic	Studies Depression Scale (CES-D)	
CES-D Criteria	ABC voluntary tool recommended for caregivers to complete before first	
	session and after session 10.	
*Assessment 1: Infant Crying and sen	ni-structural play assessment	
Infant Crying Criteria	100% of enrolled families will complete this assessment before session 1	
	and after session 10.	

Referral Criteria: What are this program's requirements for client referrals and connections?			
Referral Criteria 1: Referrals	Parent educators shall seek to ensure that each participating family		
	connects with a pediatric medical home and other community services as		
	appropriate.		
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful		
	connection per program year. 80% is the minimum requirement for		
	compliance.		

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within	
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	

Program Name		Code	235
	Incredible Years – Parents and Babies		
Program Area	Parenting		

Incredible Years®(IY) Parents and Babies is an evidence-based parenting program for families with children ages birth - 1 year of age. The program seeks to prevent and treat a child's behavior problems by enhancing their social, emotional, and academic competence.

This 9-12 week session program focuses on teaching parents how to provide nurturing parenting to babies including offering physical, tactile, verbal, and visual stimulation, coping with crying babies, safety proofing one's house, and understanding the developmental needs of babies. Parents will learn about managing issues such as crying babies, feeding, and diapering problems, and leaders will take advantage of the babies' presence in the group to set up practices (for example, baby massage). The curriculum uses Dr. Webster-Stratton's book Incredible Babies as the text for parents. The IY Baby Parenting Program (with accessories) must be used.

Partnerships funding IY shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting IY requirements along with a few SC First Steps specific additions. The following guideline includes both the IY compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	Prenatal to 12 months.	
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 t		
	time of enrollment.	

Service Criteria: How is this program implemented?		
Group Connections		
*Group Connection Criteria 1: Duration	Group connections should last 2 hours.	
*Group Connection Criteria 2: Frequency	9-12 weekly sessions.	
Group Connection Criteria 3: Group Size	8-10 families	
Notes		

Note:

- Each group must be operated by two trained group facilitators.
- Group facilitators must adhere to the Incredible Years materials/curriculum when implementing group sessions.

• Curriculum structure and materials outline expectations for planning, delivery, follow-up, and monitoring program activities.

Reach Criteria: What are this program's goals for client reach *Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the end of the program year.

Retention Criteria: What are this program's goals for client retention? Retention Criteria 75% of families must complete a minimum of 9 sessions. Note: Group leaders must provide make up sessions when a family is unable to attend a session.

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Group Facilitator	Maximum Number of Cases	10
KITS Related Job Title or Role	Service Provider	Minimum Education Level	Some college credit
*Required Certifications and/or Training	Baby Parent Group Leader Training (ages 0-1) is a 2, full-day training in person or five day 3 hours daily online. This training will prepare group leaders to implement our Baby Parenting Program. Each group facilitator shall complete training in ASQ-3, ASQ:SE-2, and ACIRI. All training (for both program and individual staff members) must be documented on-site.		
Program Role	Lead Group Facilitator	Maximum Number of Cases	10
KITS Related Job Title or Role	Site Supervisor	Minimum Education Level	Masters
*Required Certifications and/or Training	Baby Parent Group Leader Training (ages 0-1) is a 2, full-day training in person or five day 3 hours daily online. This training will prepare group leaders to implement our Baby Parenting Program. Each group facilitator shall complete training in ASQ-3, ASQ:SE-2, and ACIRI. All training (for both program and individual staff members) must be documented on-site.		

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ-3. 80% is the minimum requirement for	
	compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 4, 8, and 12 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.	

ASQ-3 Criteria 4	the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district for
	additional diagnostic evaluation. Referrals shall be documented in the
	First Steps Data Collection System.
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more
	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child's
	development, and rescreen the child at the next designated age.
Note: A child is exempt from being so	
	ved from the home of the participating parent.
	by an outside agency and supporting documentation is provided. If
	is not provided, child must be screened.
	byNet, or other specialized intervention services based on a previously eenings must resume when all intervention services have ended.
diagnoses. Sci	eenings must resume when an intervention services have ended.
*Screening 2: Ages and Stages Quest	ionnaire: Social and Emotional-2 (ASQ:SE-2)
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of
ASQ.SE 2 Official	enrollment using the ASQ:SE-2. 80% is the minimum requirement for
	compliance.
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the
7.04.01 1 0.110.1111	following ages: 6 and 12 months of age.
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,
7.04.01 = 00.12	supporting documentation must be requested and saved to the child's file,
	and enter the scores into the First Steps Data System. Note the scores are
	from an outside source in the First Steps Data System. Rescreen at the
	next designated age.
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall
	collaborate with parents/guardians to seek the consensual provision of
	these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district) for
	additional diagnostic evaluation. Referrals shall be documented in the First
	Steps Data Collection System.
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more
	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child, and rescreen
ASQ:SE-2 Criteria 6	the child at the next designated age. ASQ:SE-2 will be completed on every child at the designated ages
ASQ.SE-2 Chiena 6	regardless of developmental screening results and/or a documented delay
	in which the child is receiving services.
Note: A child is exempt from being so	Ü
	ome of the participating parent.
	gency and supporting documentation is provided. If documentation is not
provided, child must be screen	, , , ,
provided, crind must be screen	icu.
*Assessment: Healthy Family Parenti	ng Inventory (HFPI)
HFPI Criteria	All parenting programs shall complete, at minimum, baseline and post
in i ontena	assessments of the primary adult identified within each enrolled case
	using the Healthy Families Parenting Inventory (HFPI). The baseline HFPI
	assing the reality is a senting inventory (in ii). The buseline in iii

is encouraged to be completed at the first visit but must be within 45 days
of enrollment and every six months thereafter until program exit.

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals	Group facilitators 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.		
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within	
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	Group facilitators should have ongoing consultation and coaching as they	
	lead their group, especially before they become certified in the Basic	
	Program. Our recommended consultation schedule is for Group Facilitators	
	to have site calls with an IY trainer or mentor while they are leading groups	
	until the point that they become accredited as group facilitators.	
Other Criteria 2	Supervisors will hold a weekly staff meeting to provide reflective supervision	
	and weekly individualized reflective supervision meetings to review client	
	recruitment and retention, guideline compliance, and programmatic data	
	reviews.	
Other Criteria 3	Group facilitators collect weekly parent evaluations.	
Note: Group leaders must complete session checklists and evaluations after each group session.		
Other Criteria 4	Group facilitators collect a post-group final evaluation.	
Other Criteria 5	Local Partnership must administer client satisfaction surveys at least	
	annually.	

Program Name		Code	236
	Incredible Years – Toddler Basic		
Program Area	Parenting		

Incredible Years®(IY) Toddler Basic is an evidence-based parenting program for families with children ages 1 – 3 years of age. The program seeks to prevent and treat a child's behavior problems by enhancing their social, emotional, and academic competence. Curriculum outcomes may include but are not limited to improved child social skills, emotional literacy, self-regulation, problem solving, school readiness, improved parenting skills and parent-child-teacher relationships. The IY Toddler Parenting Program (Basic) curriculum must be used.

Partnerships funding IY shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting IY requirements along with a few SC First Steps specific additions. The following guideline includes both the IY compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe	
□Children	□No	□No	⊠Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection F	Data Collection Requirements			
In KITS: ⊠Clie	In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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 progra	am target?
Age	
Age Criteria	1 – 3 years old.
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?		
Group Connections		
*Group Connection Criteria 1: Duration	Group connections should last 2 – 3 hours.	
*Group Connection Criteria 2: Frequency	13-14 weekly sessions.	
Group Connection Criteria 3: Group Size 12-14 families		
A		

Note:

- Each group must be operated by two trained group facilitators.
- Group facilitators must adhere to the Incredible Years materials/curriculum when implementing group sessions.
- Curriculum structure and materials outline expectations for planning, delivery, follow-up, and monitoring program activities.

Reach Criteria: What are this program's goals for client reach

*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end		
	of the program year.		

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria	75% of families must complete a minimum of 13 sessions.	
Note: Group leaders must provide make up sessions when a family is unable to attend a session.		

Workforce Criteria: Who are the service	providers implementing th	nis program?		
Program Role	Group Facilitator	Maximum Number	14	
•	•	of Cases		
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED	
*Required Certifications and/or				
Training	person or five day 3 hours daily online. This training equips group facilitators to lead Toddler and Preschool Basic protocols. This training will prepare group leaders to lead three different basic parenting programs: (1) Toddler Parenting Program (ages 1-3 years) which is 13 weekly sessions; (2) Preschool Parenting Program (ages 3-6 years) which is 18-20 sessions. The training teaches the following content: child-directed play, academic, persistence, social and emotional coaching, praise and encouragement, predictable routines, effective limit setting, nonphysical discipline alternatives, teaching children to problem solve, and supporting children's education. The training will also teach how to use this program as a prevention program in elementary schools and preschools. This program may be used by professionals (such as therapists and parent educators from psychology, social work, education, nursing, pediatrics, and psychiatry) who are working with families of young children diagnosed with Oppositional Defiant Disorder or ADHD or aggressive behavior problems or anxiety and internalizing problems (ages 3-8 years), or with higher risk socioeconomically disadvantaged families, as well as court-ordered families, foster parents, and teenage parents. Each group facilitator shall complete training in ASQ-3, ASQ:SE-2, and ACIRI.			
	All training (for both prog documented on-site.		<u> </u>	
Program Role	Lead Group Facilitator	Maximum Number of Cases	14	
KITS Related Job Title or Role	Site Supervisor	Minimum Education Level	Masters	
*Required Certifications and/or Training				

which is 13 weekly sessions; (2) Preschool Parenting Program (ages 3-6 years) which is 18-20 sessions.

The training teaches the following content: child-directed play, academic, persistence, social and emotional coaching, praise and encouragement, predictable routines, effective limit setting, nonphysical discipline alternatives, teaching children to problem solve, and supporting children's education. The training will also teach how to use this program as a prevention program in elementary schools and preschools.

This program may be used by professionals (such as therapists and parent educators from psychology, social work, education, nursing, pediatrics, and psychiatry) who are working with families of young children diagnosed with Oppositional Defiant Disorder or ADHD or aggressive behavior problems or anxiety and internalizing problems (ages 3-8 years), or with higher risk socioeconomically disadvantaged families, as well as court-ordered families, foster parents, and teenage parents.

Each group facilitator shall complete training in ASQ-3, ASQ:SE-2, and ACIRI.

All training (for both program and individual staff members) must be documented on-site.

Screening and Assessment Criteria: How are program participants screened and/or assessed?			
*Screening 1: Ages and Stages Quest	*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of		
	enrollment using the ASQ-3. 80% is the minimum requirement for		
400 2 Oritania 0	compliance.		
ASQ-3 Criteria 2	, , , , , , , , , , , , , , , , , , ,		
	following ages: 12, 16, 20, 24, 30, and 36 months of age.		
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file,		
	and enter the scores into the First Steps Data System. Note the scores are		
	from an outside source in the First Steps Data System. Rescreen at the		
	next designated age.		
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,		
	the parent educator shall collaborate with parents/guardians to seek the		
	consensual provision of these results to:		
	i. child's pediatric care provider		
	ii. either BabyNet (ages 0-3) or the child's zoned school district for		
	additional diagnostic evaluation. Referrals shall be documented in the		
First Steps Data Collection System.			
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more		
	categories and/or if there is a parental concern on the screening		
	questionnaire, the parent educator will recommend activities to assist with		
	the areas of possible concern, continue monitoring the child's		
	development, and rescreen the child at the next designated age.		
Note: A child is exempt from being so	Note: A child is exempt from being screened if the child:		
	 has been removed from the home of the participating parent. 		
nae seemene nem me neme of the participating parent.			

 was screened l 	by an outside agency and supporting documentation is provided. If				
documentation is not provided, child must be screened.					
 is receiving BabyNet, or other specialized intervention services based on a previously 					
diagnoses. Scr	diagnoses. Screenings must resume when all intervention services have ended.				
	ionnaire: Social and Emotional-2 (ASQ:SE-2)				
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of				
	enrollment using the ASQ:SE-2. 80% is the minimum requirement for				
	compliance.				
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the				
	following ages: 12, 18, 24, 30, and 36 months of age.				
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,				
	supporting documentation must be requested and saved to the child's file,				
	and enter the scores into the First Steps Data System. Note the scores are				
	from an outside source in the First Steps Data System. Rescreen at the				
	next designated age.				
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall				
	collaborate with parents/guardians to seek the consensual provision of				
	these results to:				
	i. child's pediatric care provider				
	ii. either BabyNet (ages 0-3) or the child's zoned school district for				
	additional diagnostic evaluation. Referrals shall be documented in the				
	First Steps Data Collection System.				
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more				
	categories and/or if there is a parental concern on the screening				
	questionnaire, the parent educator will recommend activities to assist with				
	the areas of possible concern, continue monitoring the child, and rescreen				
the child at the next designated age.					
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages				
	regardless of developmental screening results and/or a documented delay				
Note: A child is exempt from being so	in which the child is receiving services.				
•					
has been removed from the ho was sereeped by an outside as	· · · · · · · · · · · · · · · · · · ·				
provided, child must be screen	gency and supporting documentation is provided. If documentation is not				
provided, crilla must be screen	eu.				
*Assessment: Healthy Family Parenting Inventory (HFPI)					
HFPI Criteria	All parenting programs shall complete, at minimum, baseline and post				
Till I Officeria	assessments of the primary adult identified within each enrolled case				
	using the Healthy Families Parenting Inventory (HFPI). The baseline HFPI				
	is encouraged to be completed at the first visit but must be within 45 days				
	of enrollment and every six months thereafter until program exit.				
	or official and every of months thereafter until program exit.				

Referral Criteria: What are this program's requirements for client referrals and connections?			
Referral Criteria 1: Referrals Group facilitators shall seek to ensure that each participating family connects with a pediatric medical home and other community services as appropriate.			
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.		

*Other Criteria 1	All data must be entered within the First Steps Data Collection System within 5 days of service. Data entries will be checked quarterly (Quarterly Progress Reports) to ensure model fidelity.
Other Criteria 2	Group facilitators should have ongoing consultation and coaching as they lead their group, especially before they become certified in the Basic Program. Our recommended consultation schedule is for Group Facilitators to have site calls with an IY trainer or mentor while they are leading groups until the point that they become accredited as group facilitators.
Other Criteria 2 Supervisors will hold a weekly staff meeting to provide reflective supervi and weekly individualized reflective supervision meetings to review clien recruitment and retention, guideline compliance, and programmatic data reviews.	
Other Criteria 3	Group facilitators collect weekly parent evaluations.
Note: Group leaders must complete	session checklists and evaluations after each group session.
Other Criteria 4	Group facilitators collect a post-group final evaluation.
Other Criteria 5	Local Partnership must administer client satisfaction surveys at least annually.

Program Name		Code	237
	Incredible Years - Preschool Basic		
Program Area	Parenting		

Incredible Years®(IY) Preschool Basic is an evidence-based parenting program for families with children ages 3 - 6 years of age. (Children over 5 years of age cannot be served by SC First Steps.) The program seeks to prevent and treat a child's behavior problems by enhancing their social, emotional, and academic competence. Curriculum outcomes may include but are not limited to: improved child social skills, emotional literacy, self-regulation, problem solving, school readiness, improved parenting skills and parent-child-teacher relationships. The IY Preschool Parenting Program (Basic) curriculum must be used.

Partnerships funding IY shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting IY requirements along with a few SC First Steps specific additions. The following guideline includes both the IY compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	⊠Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	3 years to kindergarten entry.	
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?		
Group Connections		
*Group Connection Criteria 1: Duration Group connections should last 2 - 3 hours.		
*Group Connection Criteria 2: Frequency 18 - 20 weekly sessions.		
Group Connection Criteria 3: Group Size 12 - 14 families		
·		

Note:

- Each group must be operated by two trained group facilitators.
- Group facilitators must adhere to the Incredible Years materials/curriculum when implementing group sessions.
- 3. Curriculum structure and materials outline expectations for planning, delivery, follow-up, and monitoring program activities.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria 75% of families must complete a minimum of 18 sessions.		
Note: Group leaders must provide make up sessions when a family is unable to attend a session.		

Workforce Critoria: Who are the corrige	providere implementing th	via program?	
Workforce Criteria: Who are the service Program Role	· · · · · · · · · · · · · · · · · · ·	Maximum Number	14
r Togram Kole	Group r acilitator	of Cases	14
KITS Related Job Title or Role	Service Provider	Minimum Education Level	Some college credit
*Required Certifications and/or	Basic Parent Group Lead		is a 3. full-day training in
*Required Certifications and/or Training	Basic Parent Group Leader Training (ages 2-8) is a 3, full-day training in person or five day 3 hours daily online. This training equips group facilitators to lead Toddler and Preschool Basic protocols. This training will prepare group leaders to lead three different basic parenting programs: (1) Toddler Parenting Program (ages 1-3 years) which is 13 weekly sessions; (2) Preschool Parenting Program (ages 3-6 years) which is 18-20 sessions. The training teaches the following content: child-directed play, academic, persistence, social and emotional coaching, praise and encouragement, predictable routines, effective limit setting, nonphysical discipline alternatives, teaching children to problem solve, and supporting children's education. The training will also teach how to use this program as a prevention program in elementary schools and preschools. This program may be used by professionals (such as therapists and parent educators from psychology, social work, education, nursing, pediatrics, and psychiatry) who are working with families of young children diagnosed with Oppositional Defiant Disorder or ADHD or aggressive behavior problems or anxiety and internalizing problems (ages 3-8 years), or with higher risk socioeconomically disadvantaged families, as well as court-ordered families, foster		
	parents, and teenage pa Each group facilitator sha		ASO-3 ASO:SF-2 and
	ACIRI.	an complete training in	, 104 0, 1104.0E 2, unu
	All training (for both prog documented on-site.	ram and individual sta	ff members) must be
Program Role	Lead Group Facilitator	Maximum Number of Cases	14
KITS Related Job Title or Role	Program Manager	Minimum Education Level	Masters
*Required Certifications and/or	Basic Parent Group Lead	• • • • • • • • • • • • • • • • • • • •	
Training	person or five day 3 hour		
	facilitators to lead Toddle	er and Preschool Basic	protocols.

This training will prepare group leaders to lead three different basic parenting programs: (1) Toddler Parenting Program (ages 1-3 years) which is 13 weekly sessions; (2) Preschool Parenting Program (ages 3-6 years) which is 18-20 sessions.

The training teaches the following content: child-directed play, academic, persistence, social and emotional coaching, praise and encouragement, predictable routines, effective limit setting, nonphysical discipline alternatives, teaching children to problem solve, and supporting children's education. The training will also teach how to use this program as a prevention program in elementary schools and preschools.

This program may be used by professionals (such as therapists and parent educators from psychology, social work, education, nursing, pediatrics, and psychiatry) who are working with families of young children diagnosed with Oppositional Defiant Disorder or ADHD or aggressive behavior problems or anxiety and internalizing problems (ages 3-8 years), or with higher risk socioeconomically disadvantaged families, as well as court-ordered families, foster parents, and teenage parents.

Each group facilitator shall complete training in ASQ-3, ASQ:SE-2, and ACIRI.

All training (for both program and individual staff members) must be documented on-site.

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ-3. 80% is the minimum requirement for	
	compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 36, 42, 48, 54, and 60 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,	
	the parent educator shall collaborate with parents/guardians to seek the	
	consensual provision of these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the	
	First Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being screened if the child:		

has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended. *Screening 2: Ages and Stages Questionnaire: Social and Emotional-2 (ASQ:SE-2) ASQ:SE-2 Criteria 1 The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ:SE-2. 80% is the minimum requirement for compliance. Children will be screened using the ASQ:SE-2 on or approximately the ASQ:SE-2 Criteria 2 following ages: 36, 48, and 60 months of age. If an outside agency has completed a developmental screening for a child, ASQ:SE-2 Criteria 3 supporting documentation must be requested and saved to the child's file. and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall ASQ:SE-2 Criteria 4 collaborate with parents/quardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the First Steps Data Collection System. If a child scores in the monitoring range on the ASQ:SE-2 in one or more ASQ:SE-2 Criteria 5 categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child, and rescreen the child at the next designated age. ASQ:SE-2 will be completed on every child at the designated ages ASQ:SE-2 Criteria 7 regardless of developmental screening results and/or a documented delay in which the child is receiving services. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened.

*Assessment: Healthy Family Parenting Inventory (HFPI) HFPI Criteria All parenting programs shall complete, at minimum, baseline and post assessments of the primary adult identified within each enrolled case using the Healthy Families Parenting Inventory (HFPI). The baseline HFPI is encouraged to be completed at the first visit but must be within 45 days of enrollment and every six months thereafter until program exit.

Referral Criteria: What are this program's requirements for client referrals and connections?			
Referral Criteria 1: Referrals	Group facilitators shall seek to ensure that each participating family connects with a pediatric medical home and other community services as		
	appropriate.		
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.		

*Other Criteria 1	All data must be entered within the First Steps Data Collection System within
	5 days of service. Data entries will be checked quarterly (Quarterly Progress
	Reports) to ensure model fidelity.
Other Criteria 2	Group facilitators should have ongoing consultation and coaching as they
	lead their group, especially before they become certified in the Basic
	Program. Our recommended consultation schedule is for Group Facilitators
	to have site calls with an IY trainer or mentor while they are leading groups
	until the point that they become accredited as group facilitators.
Other Criteria 2	Supervisors will hold a weekly staff meeting to provide reflective supervision
	and weekly individualized reflective supervision meetings to review client
	recruitment and retention, guideline compliance, and programmatic data
	reviews.
Other Criteria 3	Group facilitators collect weekly parent evaluations.
Note: Group leaders must complete	session checklists and evaluations after each group session.
Other Criteria 4 Group facilitators collect a post-group final evaluation.	
Other Criteria 5	Local Partnership must administer client satisfaction surveys at least
	annually.

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

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:

- 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.

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.

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.

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.

Unit of Service	Evidence	High Intensity?	Expected First Steps' Child-Level Outcomes	
	Based?			
□Families	⊠Yes	□Yes	☐ Healthy and Safe	
□Children	□No	⊠No	⊠Actively Supported by Their Families and Communities	
⊠Adults			☐ Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection F	Requirements			
In KITS: □Clie	nt-level ⊠M	onthly outputs		
If monthly output	s in KITS, is clie	nt-level data required	d by model elsewhere? □Yes ⊠No	
If yes, client-level	data required by	y model elsewhere, t	hen name of external data system(s):	
If Yes, Monthly Out			Outputs Data Required	
□Books Distributed			⊠ Referrals Made	
□Books Read			□Total Number of Health Screenings	
□Literacy Kits Given			⊠Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)			⊠Total Number of One-on-One Client Visit Hours	
⊠Families Served (unduplicated)			☑ Group Meetings, Trainings, Events: Number of Sessions	
⊠Adult Family Members Served (unduplicated)			☑ Group Meetings, Trainings, Events: Number of Hours	
□Providers Served (e.g., Schools, Centers)			☑Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)		•	□Other (please specify):	
			,	

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 should 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: Visits should last a minimum of 90 minutes.			
*Group Connection Criteria 2: 1 – 3 seminars			
Frequency			
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.			

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the		
	of the program year.	

Workforce Criteria: Who are the service	providers implementing th	nic program?	
Program Role	· · · ·	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		
Program Role	Supervisor Maximum Number N/A of Cases		
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 oversite must have completed both training and accreditation in the Triple P – Level 2.		

Referral Criteria 1: Referrals	Parent educators 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		Code	239
	Positive Parenting Program (Triple P) – Level 3		
Program Area	Parenting		

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:

- 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.

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.

Level 3 is a brief program designed to deal with a specific problem behavior or issue. It offers targeted counseling for parents and caregivers of a child with mild to moderate behavioral difficulties. It can be delivered as:

- Primary Care Triple P: A brief face-to-face or telephone intervention with a provider (80-120 minutes over 1-4 sessions). It uses tip sheets and Positive Parenting Booklet to reinforce strategies.
- Triple P Discussion Groups: Two-hour small group sessions. Each discussion group can be taken as a stand-alone session or as part of a series. There are five topics for parents of children under 12 (Dealing with disobedience; Managing fighting and aggression; Developing good bedtime routines; Hassle-free shopping with children, and Hassle-free mealtimes with children).

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.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	⊠Yes	□Yes	☐ Healthy and Safe	
□Children	□No	⊠No	✓ Actively Supported by Their Families and Communities	
⊠Adults			☐ Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection F	Requirements			
In KITS: □Clier	nt-level ⊠M	lonthly outputs		
If monthly output	s in KITS, is clier	nt-level data required	d by model elsewhere? □Yes ⊠No	
If yes, client-level	data required by	y model elsewhere, t	hen name of external data system(s):	
		If Yes, Monthly	Outputs Data Required	
□Books Distributed			⊠ Referrals Made	
□Books Read			□Total Number of Health Screenings	
□Literacy Kits Given			⊠Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)		ted)	⊠Total Number of One-on-One Client Visit Hours	
⊠Families Served (unduplicated)			⊠Group Meetings, Trainings, Events: Number of Sessions	
⊠Adult Family Members Served (unduplicated)		(unduplicated)	⊠Group Meetings, Trainings, Events: Number of Hours	
□Providers Served (e.g., Schools, Centers)		Centers)	⊠Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)		•	□Other (please specify):	

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Parent or caregiver of a child prenatal to kindergarten entry.	
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 Triple P			
*Visit Criteria 1: Duration Vis	sits should last 15 - 30 minutes.		
*Visit Criteria 2: Frequency 1 -	- 4 consultations.		
Visit Criteria 3: Location In	Visit Criteria 3: Location In person or virtual.		
Note: Intake forms (provided with the Triple	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 Discussion Groups			
*Group Connection Criteria 1: Duration Group connections should last 2 hours.			
*Group Connection Criteria 2: Frequency 1 - 4			
Group Connection Criteria 3: Group Size Maximum of 12 participants.			
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.			

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the er		
	of the program year.	

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Triple P Practitioner	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or	Triple P practitioners mus	•	
Training	family functioning. They		
	in the Triple P – Level 3 before delivering services. All training and		
	materials to deliver the program must be obtained through Triple P		
	America.		
Program Role	Supervisor	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Site Supervisor	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or	, , , , , , , , , , , , , , , , , , , ,		
Training	' ' ' ' ' ' ' ' ' '		
	and/or program oversite must have completed both training and		
	accreditation in the Triple	. D. I	

Referral Criteria: What are this program's requirements for client referrals and connections?	
Referral Criteria 1: Referrals Parent educators 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 in the appropriate level; the training and	
	accreditation takes 6 to 8 weeks to be completed.	

Program Name		Code	222
	Positive Parenting Program (Triple P) - Level 4		
Program Area	Parenting		

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:

- 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.

Level 4 is designed for parents of children with severe behavioral difficulties or for motivated parents interested in gaining a more in-depth understanding of Positive Parenting. It covers Triple P's 17 core positive parenting skills that can be adapted to a wide range of parenting situations.

Delivered as:

- Group Triple P Groups of no more than 12 parents attend five sessions and are supported with three
 phone counseling/catch-up sessions at home. Uses DVDs and workbook to engage parents and reinforce
 strategies.
- Standard Triple P For parents who need intensive support. Individual counseling delivered over ten (1 hour) sessions. Uses DVD, workbook.

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.

Unit of Service	Evidence	High Intensity?	Expected First Steps' Child-Level Outcomes
	Based?		
□Families	⊠Yes	⊠Yes	☐Healthy and Safe
□Children	□No	□No	⊠Actively Supported by Their Families and Communities
⊠Adults			☐ Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Parent or caregiver of a child age prenatal to kindergarten entry.	
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.	

Standard Triple P	
*Visit Criteria 1: Duration	Visits should last a minimum of 60 minutes.
*Visit Criteria 2: Frequency	Weekly for 10 sessions.
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.

Sessions can be delivered over more than one visit to allow adequate time to meet all components of the Session Checklists.

Group Triple P		
*Group Connection Criteria 1: Duration	Group connections should last 2 hours.	
*Group Connection Criteria 2: Frequency	Weekly: Five group session in weeks #1, #2, #3, #4, and #8 and	
	three individual consultations in weeks #5, #6, and #7.	
Group Connection Criteria 3: Group Size	Maximum of 12.	

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.

Sessions can be delivered over more than one visit to allow adequate time to meet all components of the Session Checklists.

Reach Criteria: What are this program's goals for client reach *Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the end of the program year.

Retention Criteria: What are this program's goals for client retention? Retention Criteria 75% of families must be retained for program completion.

W 16 0: : W :			
Workforce Criteria: Who are the service			
Program Role	Triple P Practitioner	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or	Triple P practitioners must have a background in child development or		
Training	family functioning. They	<u> </u>	•
9	in the Triple P – Level 4 b	•	•
	materials to deliver the p	•	•
	America.	rogram mast be obtain	ed tillodgil Triple i
	America.		
	Ctoff mount alon commists	training in ACO 2 ACO	CC 2 and any other
	Staff must also complete training in ASQ-3, ASQ:SE-2 and any other		
	Triple P required assessr	nents.	
Program Role	Supervisor	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Program Manager	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or	Triple P practitioners must have a background in child development or		
Training	' '		
9	in the Triple P – Level 4 before delivering services. All training and		
	materials to deliver the program must be obtained through Triple P		
	America.		
	America.		

Staff must also complete training in ASQ-3, ASQ:SE-2 and any other
Triple P required assessments.

*Corponing 1. Ages and Characa Corporate	How are program participants screened and/or assessed?
"Screening 1: Ages and Stages Quest	ionnaire Third Edition (ASQ-3)
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of
	enrollment using the ASQ-3. 80% is the minimum requirement for
	compliance.
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the
·	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,
	supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the
	next designated age.
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,
	the parent educator shall collaborate with parents/guardians to seek the
	consensual provision of these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district for
	additional diagnostic evaluation. Referrals shall be documented in the
	First Steps Data Collection System.
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more
	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child's
	development, and rescreen the child at the next designated age.
Note: A child is exempt from being so	
	ved from the home of the participating parent.
	by an outside agency and supporting documentation is provided. If
	n is not provided, child must be screened.
	byNet, or other specialized intervention services based on a previously
diagnoses. Scr	eenings must resume when all intervention services have ended.
· · · · · · · · · · · · · · · · · · ·	ionnaire: Social and Emotional-2 (ASQ:SE-2)
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of
	enrollment using the ASQ:SE-2. 80% is the minimum requirement for
	compliance.
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the
	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file,
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file,
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are
ASQ:SE-2 Criteria 3 ASQ:SE-2 Criteria 4	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the
	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.
·	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall
	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to:
·	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider
	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for
·	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the
ASQ:SE-2 Criteria 4	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the First Steps Data Collection System.
	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the

	questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child, and rescreen the child at the next designated age
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages regardless of developmental screening results and/or a documented delay in which the child is receiving services.
N - 4 - 6 A - 1 - 1 - 1 4	

Note: A child is exempt from being screened if the child:

- has been removed from the home of the participating parent.
- was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened.

*Assessment 1: Strengths and Difficulties Questionnaire and Impact Supplement (SDQ-IS) SDQ-IS Criteria All participants shall complete, at minimum, baseline and post assessment of the Strengths and Difficulties Questionnaire and Impact Supplement (2 to 4 Years; SDQ-IS). The initial SDQ-IS should be completed within 45 days of enrollment if the child is at least 2 years of age. If the child is less than 2 years old at enrollment, the initial SDQ-IS should be done immediately after (not before) the child's 2-year birthday. *Assessment 2: Parenting Scale Parenting Scale Criteria All participants shall complete, at minimum, a baseline and post assessments of the Parenting Scale (available through Triple P Provider

Network website). The baseline assessment is to be completed within 45 days of enrollment in the program. Scoring software (ASRA) is also

available through the Triple P Provider Network website.

Note: The SDQ-IS and the Parenting Scale are considered minimally sufficient assessments for implementation fidelity of Triple P. Other assessments are suggested. These include the Being a Parent Scale, Parent Problem Checklist, Relationship Quality Index, Depression Anxiety Stress Scales, and the Family Assessment device – General Functioning Scale. It is recommended that these measures be administered prior to Session 1 and immediately following termination.

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals	Parent educators shall seek to ensure that each participating family connects with a pediatric medical home and other community services as	
	appropriate.	
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	*Other Criteria 1 All data must be entered within the First Steps Data Collection System within	
5 days of service. Data entries will be checked quarterly (Quarterly Progress		
Reports) to ensure model fidelity.		
Other Criteria 2	Obtain Triple P accreditation in the appropriate level; the training and	
	accreditation takes 6 to 8 weeks to be completed.	

Program Name		Code	240
	Nurturing Parenting – Nurturing Skills for Families (Secondary		
	Prevention)		
Program Area	Parenting		

The First Steps funded Nurturing Parenting Program (NPP) strategy is designed to empower individuals and families with new knowledge, beliefs, strategies, and skills to make good and healthy lifestyle choices with home visitation and/or group-based parenting groups through prevention education, prevention intervention, and comprehensive programs.

Nurturing Skills for Families is an innovative model of the Nurturing Programs that is designed to provide flexibility to meet the needs of families with children ranging in age from Prenatal to 5 years old. Competency-based instruction helps parents learn the basic skills of Nurturing Parenting, a proven evidenced based program. Programs must use the Nurturing Skills for Families curriculum.

Partnerships funding NPP shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting NPP requirements along with a few SC First Steps specific additions. The following guideline includes both the NPP compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	⊠Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Prenatal to kindergarten entry.	
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 should last 90 minutes.	
*Visit Criteria 2: Frequency	28 sessions.	
Visit Criteria 3: Location	In the home.	
Group Connections		
*Group Connection Criteria 1: Duration	on Group connections should last 2 1/2 hours.	
*Group Connection Criteria 2: Frequen	cy 14 sessions.	
Group Connection Criteria 3: Group Size	ze N/A	

Note: Curriculum includes:

- Children's Sessions Children's sessions are built around developmental activities that foster positive parent-child interactions and other approaches to learning as specified by NPP curriculum.
- Parenting sessions Parenting sessions provide detailed training in child growth, healthy development, and positive interactions with children.
- Family sessions Family sessions incorporate experiential exercises that allow parents and children to practice what they learned in either their parenting or children's sessions.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Retention Criteria: What are this program's goals for client retention? Retention Criteria 75% of families must be retained for model delivery program duration.

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Home Visitor	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training			
Program Role	Group Facilitator	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	diploma with two degree in early ch document succes Program training training emphasis If an AmeriCorps	oildhood education or a ssful completion of Numby by certified national ce s on birth to 5 population member is recruited, a	experience or two-year closely related field and rturing Parenting ertified trainer with a

		enting Program training emphasis on birth	
	 All program staff will be trained in the ASQ-3 and ASQ:SE-2 developmental Screenings. 		
	All program staff will be trained in the Adult-Adolescent Parenting Inventory (AAPI), the Nurturing Skills Competency Scale (NSCS), and the Family Nurturing Plan (FNP).		
	All group facilitators will be trained in the adult and children's curriculum.		
Note: Two group facilitators are required children's group.	I for the adult group and tw	vo group facilitators are	e required for the
Program Role	Program Coordinator	Maximum Number of Cases	16
KITS Related Job Title or Role	Program Manager	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	 All supervisors in SC must possess at least a high school diploma with two years of related work experience or two-year degree in early childhood education or a closely related field and document successful completion of Nurturing Parenting Program training by certified national certified trainer with a training emphasis on birth to 5 population. All program staff will be trained in the ASQ-3 and ASQ:SE-2 developmental Screenings. All program staff will be trained in the Adult-Adolescent Parenting Inventory (AAPI), the Nurturing Skills Competency Scale (NSCS), and the Family Nurturing Plan (FNP). All group facilitators will be trained in the adult and children's 		
	curriculum.		

Screening and Assessment Criteria:	How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Quest	*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of		
	enrollment using the ASQ-3. 80% is the minimum requirement for		
	compliance.		
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the		
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.		
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.		
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider		

	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the	
	First Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being so		
	ved from the home of the participating parent.	
	by an outside agency and supporting documentation is provided. If	
	is not provided, child must be screened.	
	byNet, or other specialized intervention services based on a previously	
_	eenings must resume when all intervention services have ended.	
alagnooco. col	comingo muot recume when an intervention convices have ended.	
*Screening 2: Ages and Stages Quest	ionnaire: Social and Emotional-2 (ASQ:SE-2)	
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
AGG. OF 2 STRETTE 1	enrollment using the ASQ:SE-2. 80% is the minimum requirement for	
	compliance.	
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the	
ASQ.SE-Z UITIERIA Z		
ACO-05 2 O-ita-i- 2	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall	
	collaborate with parents/guardians to seek the consensual provision of	
	these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the First	
	Steps Data Collection System.	
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more	
·	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child, and rescreen	
	the child at the next designated age.	
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages	
AOQ.OL 2 Ontena o	regardless of developmental screening results and/or a documented delay	
	in which the child is receiving services.	
Note: A child is exempt from being so		
,	ome of the participating parent.	
	, , , , , , , , , , , , , , , , , , , ,	
was screened by an outside agency and supporting documentation is provided. If documentation is not		
provided, child must be screer	leu.	
A		
Assessment 1: Adult-Adolescent Pare		
AAPI Criteria 1	Parents will complete the Adult-Adolescent Parenting Inventory (AAPI) to	
	assess the child rearing attitudes of the parents, with a pretest at intake,	
	and a posttest annually or prior to exiting the program. AAPI assessment	
1		
	will be utilized with all families.	
AAPI Criteria 2		

	agencies private NPP Assessing Parenting.com account. Parents and facilitator meet to review the results of the assessments.
Assessment 2: Nurturing Skills Comp	etency Scale (NSCS)
	Parents will complete the Nurturing Skills Competency Scale (NSCS) to assess their knowledge of parenting skills, and to collect demographic information. This assessment will be completed as a pretest at intake before starting program services, and a posttest annually or prior to exiting the program. The Long Version of the NSCS assessment will be utilized with all families.

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals 1	Program staff shall seek to ensure that each participating family connects	
	with a pediatric medical home and other community services as appropriate.	
Referral Criteria 1: Referrals 2	Facilitators will use the results of the NSCS to refer/connect families to	
	additional interventions as necessary and beneficial-either simultaneously	
	or as part of a planned, multi- year service continuum.	
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

Other Criteria: Are there other progr	am criteria that exist?
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within 5 days of service. Data entries will be checked quarterly (Quarterly Progress Reports) to ensure model fidelity.
Other Criteria 2	The Family Nurturing Journal (FNJ) is a document the PARENTS USE to monitor their progress in learning the program competencies. Parents know the lesson competencies they are responsible for learning as well as the home practice assignment they are to complete between classes. To monitor their progress, parents keep a weekly journal of the changes going on in them, their children, and their family.
Other Criteria 3	All program staff shall develop and complete for each family, a well-documented Family Goal Plan by session 4 of the group-based, the individualized services weekly session, and/or the home visitation sessions and subsequently update these plans with each family two sessions before they exit the program.
Other Criteria 4	Supervisors will hold a weekly staff meeting with program staff to provide reflective supervision and individualized reflective supervision meetings to review client recruitment and retention, standards compliance, and programmatic data reviews. All supervisors will develop staff meeting agendas and meeting minutes to be kept in the partnership's programmatic files.
Other Criteria 5	Supervisors shall attend/observe home visits with each program staff member at least twice each program year and observe parenting groups bimonthly. Results will be used to improve model fidelity, staff meeting agenda items, and reflective supervision.
Other Criteria 6	First Steps programs shall administer client satisfaction surveys at least annually, and use data collected to improve model fidelity.

Program Name		Code	241
	Nurturing Parenting – Parents & Their Infants, Toddlers &		
	Preschoolers (Tertiary Prevention)		
Program Area	Parenting		

The First Steps funded Nurturing Parenting Program (NPP) strategy is designed to empower individuals and families with new knowledge, beliefs, strategies, and skills to make good and healthy lifestyle choices with home visitation and/or group-based parenting groups through prevention education, prevention intervention, and comprehensive programs.

Parents & Their Infants, Toddlers & Preschoolers – is an evidence-based program that provides intense group and individual home/parent sessions to families receiving services from DSS. Parents attend 16 group sessions each lasting 2 1/2 hours. Families also receive individual home/parent sessions between the group sessions to ensure the knowledge and skills presented in the group sessions are being implemented in the home.

Partnerships funding NPP shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting NPP requirements along with a few SC First Steps specific additions. The following guideline includes both the NPP compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection F	Data Collection Requirements		
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	Prenatal to kindergarten entry.	
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 should last 60 - 90 minutes.	
*Visit Criteria 2: Frequency 7 sessions.		
Visit Criteria 3: Location In the home.		
N. T. I.	(01:11	

Note: The Individual Home/Parent Sessions occur (Children must be present for individual parent sessions):

- prior to group session 1 to conduct the pre-test assessments
- prior to group session 2 to review the pre-test assessment results
- between group sessions 14 and 15 to complete post-test assessments and,

- between group sessions 15 and 16 to review post-test results
- The remaining three individual home/parent sessions are scheduled throughout the program based on parents needs in learning the competencies presented in the program.

P	han anna marana marana anna anna anna baranana baranana marana barana anna barana anna anna barana anna an		
Group Conn	Group Connections		
*Group Connection Criteria 1: Duration		Group connections should last 2 1/2 hours.	
*Group Connection Criteria 2: Frequency		16 weekly sessions.	
Group Connection Criteria 3: Group Size		Maximum of 14.	

Note: Curriculum includes:

- Children's Sessions Children's sessions are built around developmental activities that foster positive parent-child interactions and other approaches to learning as specified by NPP curriculum.
- Parenting sessions Parenting sessions provide detailed training in child growth, healthy development, and positive interactions with children.
- Family sessions Family sessions incorporate experiential exercises that allow parents and children to practice what they learned in either their parenting or children's sessions.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria 75% of families must be retained for model delivery program duration.		

Workforce Criteria: Who are the service	providers implementing th	is program?	
Program Role		Maximum Number of Cases	14
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training			least a high school experience or two-year closely related field and turing Parenting extified trainer with a on. high school diploma is on of the certification in g by national certified to 5 population. SQ-3 and ASQ:SE-2 dult-Adolescent g Skills Competency nal (FNJ), and the Family
Program Role	Group Facilitator - Child	Maximum Number of Cases	14

KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
KITO Related 505 Title of Role	Gervice Frovider	Level	GED
*Required Certifications and/or Training Note: Two group facilitators are required children's group.	 All program staff in SC must possess at least a high school diploma with two years of related work experience or two-year degree in early childhood education or a closely related field and document successful completion of Nurturing Parenting Program training by certified national certified trainer with a training emphasis on birth to 5 population. All program staff will be trained in the ASQ-3 and ASQ:SE-2 developmental Screenings. All program staff will be trained in the Adult-Adolescent Parenting Inventory (AAPI), the Nurturing Skills Competency Scale (NSCS), and the Family Nurturing Plan (FNP). All group facilitators will be trained in the adult and children's curriculum. d for the adult group and two group facilitators are required for the 		
<u> </u>			
Program Role	Program 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	 All supervisors in SC must possess at least a high school diploma with two years of related work experience or two-year degree in early childhood education or a closely related field and document successful completion of Nurturing Parenting Program training by certified national certified trainer with a training emphasis on birth to 5 population. All program staff will be trained in the ASQ-3 and ASQ:SE-2 developmental Screenings. All program staff will be trained in the Adult-Adolescent Parenting Inventory (AAPI), the Nurturing Skills Competency Scale (NSCS), and the Family Nurturing Plan (FNP). 		

Screening and Assessment Criteria: How are program participants screened and/or assessed?			
*Screening 1: Ages and Stages Quest	*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of		
	enrollment using the ASQ-3. 80% is the minimum requirement for		
	compliance.		
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the		
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.		
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.		
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to:		

	· 190 0 1 1	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the	
400 00 '1 ' 5	First Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being so		
	ved from the home of the participating parent.	
	by an outside agency and supporting documentation is provided. If	
	is not provided, child must be screened.	
_	byNet, or other specialized intervention services based on a previously	
diagnoses. Scr	eenings must resume when all intervention services have ended.	
*Screening 2: Ages and Stages Quest	ionnaire: Social and Emotional-2 (ASQ:SE-2)	
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ:SE-2. 80% is the minimum requirement for	
	compliance.	
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the	
	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall	
·	collaborate with parents/guardians to seek the consensual provision of	
	these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the First	
	Steps Data Collection System.	
ASO:SE-2 Criteria 5		
AGQ.GE 2 GIRCHA G	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child, and rescreen	
	the child at the next designated age	
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages	
ASQ.SE-2 Citiena 6	regardless of developmental screening results and/or a documented delay	
Note: A shild is exempt from heirs a	in which the child is receiving services.	
Note: A child is exempt from being so		
has been removed from the home of the participating parent.		
	gency and supporting documentation is provided. If documentation is not	
provided, child must be screen	ea.	
Assessment 1: Adult-Adolescent Pare	enting Inventory (AAPI)	
AAPI Criteria 1	Parents will complete the Adult-Adolescent Parenting Inventory (AAPI) to	
AAFI CIILEIId I	assess the child rearing attitudes of the parents, with a pretest prior to	
	group session 1 at intake during the first home visit. AAPI assessment will	
	be utilized with all families. The service provider must enter Pre AAPI	
	scores for each adult in each family from the Adult-Adolescent Parenting	
	Inventory (AAPI) into your agency's private NPP Assessing Parenting.com	

	account. Parents and facilitators meet to review the results of the
	assessments.
AAPI Criteria 2	Parents will complete the post-test between group sessions 14 and 15 or prior to exiting the program. AAPI assessment will be utilized with all families. The service provider must enter Post AAPI scores for each adult in each family from the Adult-Adolescent Parenting Inventory (AAPI) into your agency's private NPP Assessing Parenting.com account. Parents and facilitator meet to review the results of the assessments.
Assessment 2: Nurturing Skills Comp	etency Scale (NSCS)
NSCS Criteria	Parents will complete the Nurturing Skills Competency Scale (NSCS) to assess their knowledge of parenting skills, and to collect demographic information. This assessment will be completed as a pretest at intake before starting program services, and a posttest annually or prior to exiting the program. The Long Version of the NSCS assessment will be utilized with all families.

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals 1	Program staff shall seek to ensure that each participating family connects	
	with a pediatric medical home and other community services as appropriate.	
Referral Criteria 1: Referrals 2	Facilitators will use the results of the NSCS to refer/connect families to	
	additional interventions as necessary and beneficial-either simultaneously	
	or as part of a planned, multi- year service continuum.	
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

Other Criteria: Are there other progr	am criteria that exist?
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within
	5 days of service. Data entries will be checked quarterly (Quarterly Progress
	Reports) to ensure model fidelity.
Other Criteria 2	The Family Nurturing Journal (FNJ) is a document the PARENTS USE to
	monitor their progress in learning the program competencies. Parents know
	the lesson competencies they are responsible for learning as well as the
	home practice assignment they are to complete between classes. To
	monitor their progress, parents keep a weekly journal of the changes going
	on in them, their children, and their family.
Other Criteria 3	All program staff shall develop and complete for each family, a well-
	documented Family Goal Plan by session 4 of the group-based, the
	individualized services weekly session, and/or the home visitation sessions
	and subsequently update these plans with each family two sessions before
	they exit the program.
Other Criteria 4	Supervisors will hold a weekly staff meeting with program staff to provide
	reflective supervision and individualized reflective supervision meetings to
	review client recruitment and retention, standards compliance, and
	programmatic data reviews. All supervisors will develop staff meeting
	agendas and meeting minutes to be kept in the partnership's programmatic
Other Oritaria F	files.
Other Criteria 5	Supervisors shall attend/observe home visits with each program staff
	member at least twice each program year and observe parenting groups bi-
	monthly. Results will be used to improve model fidelity, staff meeting
Oth on Oritaria	agenda items, and reflective supervision.
Other Criteria 6	First Steps programs shall administer client satisfaction surveys at least
	annually, and use data collected to improve model fidelity.

Program Name		Code	242
	Nurturing Parenting – Parents & Their Infants, Toddlers &		
	Preschoolers (Comprehensive Program)		
Program Area	Parenting		

The First Steps funded Nurturing Parenting Program (NPP) strategy is designed to empower individuals and families with new knowledge, beliefs, strategies, and skills to make good and healthy lifestyle choices with home visitation and/or group-based parenting groups through prevention education, prevention intervention, and comprehensive programs.

Groups: Twenty-seven 2½ hour sessions meet one day a week for 27 weeks. Parents and children meet concurrently in two separate groups. Two facilitators run parents' group; two facilitators plus two volunteers run the children's group. Parents and children engage in a 30-minute Nurturing Time with games, songs, snacks and more.

Home: Fifty-five 1 ½ hour sessions meet one day a week for 55 consecutive weeks. Parents, children, and the Home Visitor work together for 30 minutes having fun and practicing skills. Parents and the Home Visitor work together for the first hour teaching nurturing parenting ideas and techniques.

The Nurturing Book for Babies and Children is utilized as the guide to build parent-child attachment. Each home visit lasts 90 minutes and 30 of the minutes is devoted to positive parent-child interaction.

The NPP adult and child Comprehensive-Parents and Their Infants, Toddlers, and Preschoolers curriculum must be used.

Partnerships funding NPP shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting NPP requirements along with a few SC First Steps specific additions. The following guideline includes both the NPP compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Prenatal to kindergarten entry.	
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 \	/isits should 90 minutes.		
*Visit Criteria 2: Frequency 5	55 weekly visits.		
Visit Criteria 3: Location In the home.			
Note: Parents, children and the home visitor should spend at least 30 minutes having fun and practicing skills.			
The first hour should be teaching nurturing parenting ideas and techniques.			
Group Connections			
*Group Connection Criteria 1: Duration Group connections should last 2 1/2 hours.			
*Group Connection Criteria 2: Frequency 27 weekly sessions.			
Group Connection Criteria 3: Group Siz	Group Connection Criteria 3: Group Size Maximum of 15.		

Note: Curriculum includes:

- Children's Sessions Children's sessions are built around developmental activities that foster positive parent-child interactions and other approaches to learning as specified by NPP curriculum.
- Parenting sessions Parenting sessions provide detailed training in child growth, healthy development, and positive interactions with children.
- Family sessions Family sessions incorporate experiential exercises that allow parents and children to practice what they learned in either their parenting or children's sessions.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the end		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
*Retention Criteria 75% of families must be retained for model delivery program duration.		

Program Role	Home Visitor	Maximum Number of Cases	15
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diplom GED
*Required Certifications and/or Training	diploma with two degree in early che document success Program training training emphasis If an AmeriCorps required along with Nurturing Partrainer with a trainer with a t	will be trained in the Adory (AAPI), the Nurturing Framily Nurturing Jour	experience or two-year closely related field ruring Parenting extified trainer with a on. high school diploma on of the certification by national certified to 5 population. SQ-3 and ASQ:SE-2 dult-Adolescent g Skills Competency

Program Role	Group Facilitator - Adult	Maximum Number of Cases	15
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	diploma with two degree in early ch document succes Program training training emphasis All program staff developmental So All program staff Parenting Invento Scale (NSCS), and	f in SC must possess at least a high school of years of related work experience or two-year hildhood education or a closely related field and essful completion of Nurturing Parenting by certified national certified trainer with a is on birth to 5 population. f will be trained in the ASQ-3 and ASQ:SE-2	
Program Role	Group Facilitator - Child	Maximum Number of Cases	15
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	 All program staff in SC must possess at least a high school diploma with two years of related work experience or two-year degree in early childhood education or a closely related field and document successful completion of Nurturing Parenting Program training by certified national certified trainer with a training emphasis on birth to 5 population. All program staff will be trained in the ASQ-3 and ASQ:SE-2 developmental Screenings. All program staff will be trained in the Adult-Adolescent Parenting Inventory (AAPI), the Nurturing Skills Competency Scale (NSCS), and the Family Nurturing Plan (FNP). All group facilitators will be trained in the adult and children's curriculum. 		
Note: Two group facilitators are required children's group.	I for the adult group and tw	o group facilitators are	e required for the
Program Role	Program 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	All supervisors in SC must possess at least a high school diploma with two years of related work experience or two-year degree in early childhood education or a closely related field and document successful completion of Nurturing Parenting		

Program training by certified national certified trainer with a training emphasis on birth to 5 population.
 All program staff will be trained in the ASQ-3 and ASQ:SE-2 developmental Screenings.
 All program staff will be trained in the Adult-Adolescent Parenting Inventory (AAPI), the Nurturing Skills Competency Scale (NSCS), and the Family Nurturing Plan (FNP).

	How are program participants screened and/or assessed?	
*Screening 1: Ages and Stages Quest		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
	enrollment using the ASQ-3. 80% is the minimum requirement for	
	compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.	
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the First Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age.	
Note: A child is exempt from being so		
has been remo	ved from the home of the participating parent.	
 was screened l 	by an outside agency and supporting documentation is provided. If	
documentation	n is not provided, child must be screened.	
	byNet, or other specialized intervention services based on a previously eenings must resume when all intervention services have ended.	
*Corooning 2: Agos and Stages Overst	ionnaire: Social and Emotional-2 (ASQ:SE-2)	
• • • • • • • • • • • • • • • • • • • •		
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ:SE-2. 80% is the minimum requirement for compliance.	
ASQ:SE-2 Criteria 2	2 Children will be screened using the ASQ:SE-2 on or approximately the following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.	

ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall
	collaborate with parents/guardians to seek the consensual provision of
	these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district for
	additional diagnostic evaluation. Referrals shall be documented in the
	First Steps Data Collection System.
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more
	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child, and rescreen
	the child at the next designated age
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages
	regardless of developmental screening results and/or a documented delay
	in which the child is receiving services.
Note: A child is exempt from being screened if the child:	

- A child is exempt from being screened if the child:has been removed from the home of the participating parent.
- was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened.

Assessment 1: Adult-Adolescent Parenting Inventory (AAPI)		
AAPI Criteria 1	Parents will complete the Adult-Adolescent Parenting Inventory (AAPI) to assess the child rearing attitudes of the parents, with a pretest at intake during the first home visit. AAPI assessment will be utilized with all families. The service provider must enter Pre AAPI scores for each adult in each family from the Adult-Adolescent Parenting Inventory (AAPI) into your agency's private NPP Assessing Parenting.com account. Parents and facilitators meet to review the results of the assessments.	
AAPI Criteria 2	Parents will complete the post-test between group sessions 14 and 15 or prior to exiting the program. AAPI assessment will be utilized with all families. The service provider must enter Post AAPI scores for each adult in each family from the Adult-Adolescent Parenting Inventory (AAPI) into your agency's private NPP Assessing Parenting.com account. Parents and facilitator meet to review the results of the assessments.	
Assessment 2: Nurturing Skills Competency Scale (NSCS)		
NSCS Criteria	Parents will complete the Nurturing Skills Competency Scale (NSCS) to assess their knowledge of parenting skills, and to collect demographic information. This assessment will be completed as a pretest at intake before starting program services, and a posttest annually or prior to exiting the program. The Long Version of the NSCS assessment will be utilized with all families.	

Referral Criteria: What are this program's requirements for client referrals and connections?	
Referral Criteria 1: Referrals 1	Program staff shall seek to ensure that each participating family connects
	with a pediatric medical home and other community services as appropriate.
Referral Criteria 1: Referrals 2	Facilitators will use the results of the NSCS to refer/connect families to
	additional interventions as necessary and beneficial-either simultaneously
	or as part of a planned, multi- year service continuum.
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.
	compilatioe.

*Other Criteria 1	All data must be entered within the First Steps Data Collection System within
	5 days of service. Data entries will be checked quarterly (Quarterly Progress Reports) to ensure model fidelity.
Other Criteria 2	1 /
	home practice assignment they are to complete between classes. To monitor their progress, parents keep a weekly journal of the changes going on in them, their children, and their family.
Other Criteria 3	All program staff shall develop and complete for each family, a well-documented Family Goal Plan by session 4 of the group-based, the individualized services weekly session, and/or the home visitation sessions and subsequently update these plans with each family two sessions before they exit the program.
Other Criteria 4	Supervisors will hold a weekly staff meeting with program staff to provide reflective supervision and individualized reflective supervision meetings to review client recruitment and retention, standards compliance, and programmatic data reviews. All supervisors will develop staff meeting agendas and meeting minutes to be kept in the partnership's programmatic files.
Other Criteria 5	Supervisors shall attend/observe home visits with each program staff member at least twice each program year and observe parenting groups bimonthly. Results will be used to improve model fidelity, staff meeting agenda items, and reflective supervision.
Other Criteria 6	First Steps programs shall administer client satisfaction surveys at least annually, and use data collected to improve model fidelity.

Program Name		Code	243
	Nurturing Parenting – Nurturing Fathers		
Program Area	Parenting		

The Nurturing Father's Program (NFP) is an evidence - based, 13-week group-based program designed to teach parenting and nurturing skills to men. Each 2 ½ hour class provides proven, effective skills for healthy family relationships and child development. The group of 8 to 16 fathers meets weekly for 2½ hours.

To implement the NFP program, you must use the NFP Facilitator Manual and Workbooks as specified in the NFP guidelines.

The Nurturing Parenting Children's curriculum may be used to supplement group sessions for children.

Partnerships funding NPP shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting NPP requirements along with a few SC First Steps specific additions. The following guideline includes both the NPP compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	Prenatal to kindergarten entry.	
Risk Factors		
*Risk Factor Criteria 1	· ·	
	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?	
Group Connections	
*Group Connection Criteria 1: Duration Group connections should last 2 1/2 hours.	
*Group Connection Criteria 2: Frequency 13 weekly sessions.	
Group Connection Criteria 3: Group Size Maximum of 16.	
Note: Curriculum includos:	

Note: Curriculum includes:

- Children's Sessions Children's sessions are built around developmental activities that foster positive parent-child interactions and other approaches to learning as specified by NPP curriculum.
- Parenting sessions Parenting sessions provide detailed training in child growth, healthy development, and positive interactions with children.

• Family sessions – Family sessions incorporate experiential exercises that allow parents and children to practice what they learned in either their parenting or children's sessions.

Reach Criteria: What are this program's goals for client reach *Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the end of the program year.

Retention Criteria: What are this program's goals for client retention? *Retention Criteria 75% of families must be retained for 13 weeks.

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Group Facilitator - Adult	Maximum Number	16
	-	of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	 All program staff in SC must possess at least a high school diploma with two years of related work experience or two-year degree in early childhood education or a closely related field and document successful completion of Nurturing Fathers Program training by certified national certified trainer with a training emphasis on birth to 5 population. All program staff will be trained in the ASQ-3 and ASQ:SE-2 developmental Screenings. All program staff will be trained in the Adult-Adolescent Parenting Inventory (AAPI), the Nurturing Skills Competency Scale (NSCS), and the Family Nurturing Plan (FNP). All group facilitators will be trained in the adult and children's curriculum. 		
Program Role	Group Facilitator - Child	Maximum Number	15
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	All program staff in SC must possess at least a high school		

	 All program staff will be trained in the Adult-Adolescent
	Parenting Inventory (AAPI), the Nurturing Skills Competency
	Scale (NSCS), and the Family Nurturing Plan (FNP).
	 All group facilitators will be trained in the adult and children's
	curriculum.
AL L. T. C. TILL	

Note: Two group facilitators are required for the adult group and two group facilitators are required for the children's group.

Program Role	Program Coordinator	Maximum Number	N/A
	l regram cooramator	of Cases	,
KITS Related Job Title or Role	Site Supervisor	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or Training	diploma with two degree in early ch document succes Program training training emphasis All program staff developmental So All program staff Parenting Inventor	ssful completion of Nur by certified national ce s on birth to 5 populations will be trained in the As	experience or two-year closely related field and cturing Parenting rtified trainer with a on. SQ-3 and ASQ:SE-2 dult-Adolescent g Skills Competency

Screening and Assessment Criteria:	How are program participants screened and/or assessed?
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)	
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ-3. 80% is the minimum requirement for compliance.
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the First Steps Data Collection System.
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age.
Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent.	

111

- was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended. *Screening 2: Ages and Stages Questionnaire: Social and Emotional-2 (ASQ:SE-2) ASO:SE-2 Criteria 1 The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ:SE-2. 80% is the minimum requirement for compliance. ASQ:SE-2 Criteria 2 Children will be screened using the ASQ:SE-2 on or approximately the following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age. ASQ:SE-2 Criteria 3 If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file. and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals shall be documented in the First Steps Data Collection System. If a child scores in the monitoring range on the ASQ:SE-2 in one or more ASQ:SE-2 Criteria 5 categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child, and rescreen the child at the next designated age ASQ:SE-2 will be completed on every child at the designated ages ASQ:SE-2 Criteria 6 regardless of developmental screening results and/or a documented delay in which the child is receiving services. **Note:** A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. Assessment 1: Adult-Adolescent Parenting Inventory (AAPI) Parents will complete the Adult-Adolescent Parenting Inventory (AAPI) to **AAPI Criteria 1** assess the child rearing attitudes of the parents, with a pretest at intake during the first home visit. AAPI assessment will be utilized with all families. The service provider must enter Pre AAPI scores for each adult in each family from the Adult-Adolescent Parenting Inventory (AAPI) into your agency's private NPP Assessing Parenting.com account. Parents
- AAPI Criteria 1
 Parents will complete the Adult-Adolescent Parenting Inventory (AAPI) to assess the child rearing attitudes of the parents, with a pretest at intake during the first home visit. AAPI assessment will be utilized with all families. The service provider must enter Pre AAPI scores for each adult in each family from the Adult-Adolescent Parenting Inventory (AAPI) into your agency's private NPP Assessing Parenting.com account. Parents and facilitators meet to review the results of the assessments.

 AAPI Criteria 2
 Parents will complete the post-test between group sessions 14 and 15 or prior to exiting the program. AAPI assessment will be utilized with all families. The service provider must enter Post AAPI scores for each adult in each family from the Adult-Adolescent Parenting Inventory (AAPI) into your agency's private NPP Assessing Parenting.com account. Parents and facilitator meet to review the results of the assessments.

Assessment 2: Nurturing Skills Competency Scale (NSCS)	
NSCS Criteria Parents will complete the Nurturing Skills Competency Scale (NSCS) to	
	assess their knowledge of parenting skills, and to collect demographic
	information. This assessment will be completed as a pretest at intake
	before starting program services, and a posttest annually or prior to exiting
	the program. The Long Version of the NSCS assessment will be utilized
	with all families.

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals 1	Program staff shall seek to ensure that each participating family connects	
	with a pediatric medical home and other community services as appropriate.	
Referral Criteria 1: Referrals 2	Facilitators will use the results of the NSCS to refer/connect families to	
	additional interventions as necessary and beneficial-either simultaneously	
	or as part of a planned, multi- year service continuum.	
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

Other Criteria: Are there other progr	am criteria that exist?	
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within	
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	 Two (2) comprehensive Facilitator's Manuals with step-by-step instructions for achieving specific learning objectives during each 2½ hour weekly group meeting. Twenty (20) companion Father's Journals, an interactive workbook completed by each group member to enhance their knowledge and growth. A set of charts/posters to be used as teaching aids. An audio tape with prerecorded guided visualization activities. Evaluation forms and certificates of achievement. 	
Other Criteria 3	The Family Nurturing Journal (FNJ) is a document the PARENTS USE to	
	monitor their progress in learning the program competencies. Parents know	
	the lesson competencies they are responsible for learning as well as the	
	home practice assignment they are to complete between classes. To	
	monitor their progress, parents keep a weekly journal of the changes going	
Other Criteria 4	on in them, their children, and their family. All program staff shall develop and complete for each family, a well-	
Other Criteria 4	documented Family Goal Plan by session 4 of the group-based, the	
	individualized services weekly session, and/or the home visitation sessions	
	and subsequently update these plans with each family two sessions before	
	they exit the program.	
Other Criteria 5		
	files.	
Other Criteria 6	Supervisors shall attend/observe home visits with each program staff	
	member at least twice each program year and observe parenting groups bi-	
	monthly. Results will be used to improve model fidelity, staff meeting	
Other Criteria 7	agenda items, and reflective supervision.	
Other Criteria /	First Steps programs shall administer client satisfaction surveys at least annually, and use data collected to improve model fidelity.	
	allitually, and use data collected to improve model fidelity.	

Program Name		Code	246
	Strengthening Families Infant and Toddler		
Program Area	Parenting		

The Strengthening Families Program (SFP) is a nationally and internationally recognized parenting and family strengthening program for high-risk families. The program curriculum includes:

- Children's sessions Children's sessions are built around developmental activities that foster positive parent-child interactions and other approaches to learning as specified by SFP curriculum.
- Parenting sessions Parenting sessions provide detailed training in child growth, healthy development, and positive interactions with children.
- Family sessions Family sessions incorporate experiential exercises that allow parents and children to practice what they learned in either their parenting or children's sessions.

By participating in SF's 14-session parent training program, families have shown significant improvement in parenting skills, family relationships, problem behaviors, delinquency and alcohol and drug abuse in children, social competencies, and school performance.

Partnerships funding SFP shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting SFP requirements along with a few SC First Steps specific additions. The following guideline includes both the SFP compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Prenatal to 3 years.	
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?	
Group Connections	
*Group Connection Criteria 1: Duration	Group connections should last 2.5 hours.
*Group Connection Criteria 2: Frequency	14 weekly sessions.
Group Connection Criteria 3: Group Size	4 – 14 families

Note: Programs shall offer group-based services to includes dinner together, parent class and children's class, and family time to close the session. The duration of family sessions will span over 14 weeks.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria	75% of families must be retained for a minimum of 14 weeks.	

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Program Coordinator	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Site Supervisor	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	Each Strengthening Families program coordinator shall attend a two-to-three-day training covering the following topics: • background of Strengthening Families as evidence-based strategy recruitment and retention of families • overview of the curriculum • facilitation groups (practical requirements and strategies for delivering group) • ethical situations • specific instruction and practical experience implementing Strengthening Families. In addition, each program coordinator shall be trained to lead both parenting and children's sessions. 2 years of supervisory experience and/or or supervised working experience in the field is recommended. All staff providing supervision and/or program oversite must have completed the SFP training. Staff must also complete training in ASQ-3 and ASQ:SE-2.		
Program Role	Group Leader - Adult	Maximum Number of Cases	14
KITS Related Job Title or Role	Service Provider	Minimum Education Level	High School diploma or GED
*Required Certifications and/or Training	 Each Strengthening Families program coordinator shall attend a two-to-three-day training covering the following topics: background of Strengthening Families as evidence-based strategy recruitment and retention of families overview of the curriculum facilitation groups (practical requirements and strategies for delivering group) ethical situations specific instruction and practical experience implementing Strengthening Families. In addition, each program coordinator shall be trained to lead both parenting and children's sessions. Staff must also complete training in ASQ-3 and ASQ:SE-2. 		

Program Role	Group Leader - Children	Maximum Number	14
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or	Each Strengthening Fami	ilies program coordinat	or shall attend a two-to-
Training	three-day training coverir	ng the following topics:	
Note: Program must have at least four o	 background of Strengthening Families as evidence-based strategy recruitment and retention of families overview of the curriculum facilitation groups (practical requirements and strategies for delivering group) ethical situations specific instruction and practical experience implementing Strengthening Families. In addition, each program coordinator shall be trained to lead both parenting and children's sessions. Staff must also complete training in ASQ-3 and ASQ:SE-2. 		milies Its and strategies for Ence implementing rained to lead both ASQ:SE-2.

Note: Program must have at least four effective group leaders, two to run the children's groups and two for the parent's groups, and a program or site coordinator.

Screening and Assessment Criteria: How are program participants screened and/or assessed?			
*Screening 1: Ages and Stages Quest	ionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened by session 5 using		
the ASQ-3. 80% is the minimum requirement for compliance.			
ASQ-3 Criteria 2	ASQ-3 Criteria 2 Children will be screened using the ASQ-3 on or approximately the		
	following ages: 4, 8, 12, 16, 20, 24, 30, and 36 months of age.		
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,		
	supporting documentation must be requested and saved to the child's file,		
	and enter the scores into the First Steps Data System. Note the scores are		
	from an outside source in the First Steps Data System. Rescreen at the		
	next designated age.		
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,		
the parent educator shall collaborate with parents/guardians to seek the			
consensual provision of these results to:			
i. child's pediatric care provider			
ii. either BabyNet (ages 0-3) or the child's zoned school district for			
additional diagnostic evaluation. Referrals shall be documented in the			
First Steps Data Collection System.			
ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more			
	categories and/or if there is a parental concern on the screening		
questionnaire, the parent educator will recommend activities to assist with			
the areas of possible concern, continue monitoring the child's			
development, and rescreen the child at the next designated age.			
Note: A child is exempt from being so	reened if the child:		
has been remo	ved from the home of the participating parent.		
 was screened by an outside agency and supporting documentation is provided. If 			
documentation is not provided, child must be screened.			
is receiving Bal	byNet, or other specialized intervention services based on a previously		
diagnoses. Scr	eenings must resume when all intervention services have ended.		
*Screening 2: Ages and Stages Quest	ionnaire: Social and Emotional-2 (ASQ:SE-2)		

ASQ:SE-2 Criteria 1 The goal is 100% of children participants be screened by sessis the ASQ:SE-2 Criteria 2 Children will be screened using the ASQ:SE-2 on or approximat following ages: 6, 12, 18, 24, 30, and 36 months of age. If an outside agency has completed a developmental screening supporting documentation must be requested and saved to the and enter the scores into the First Steps Data System. Note the from an outside source in the First Steps Data System. Rescrenxt designated age. ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual protesser results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 Will be completed on every child at the designated age regardless of developmental screening results and/or a documin which the child is receiving services. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. Assessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions	
ASQ:SE-2 Criteria 2 ASQ:SE-2 Criteria 3 ASQ:SE-2 Criteria 3 If an outside agency has completed a developmental screening supporting documentation must be requested and saved to the and enter the scores into the First Steps Data System. Note the from an outside source in the First Steps Data System. Note the from an outside source in the First Steps Data System. Rescrenext designated age. ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual protection these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a document of the child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentating provided, child must be screened. Assessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Assessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	•
ASQ:SE-2 Criteria 3 If an outside agency has completed a developmental screening supporting documentation must be requested and saved to the and enter the scores into the First Steps Data System. Note the from an outside source in the First Steps Data System. Note the from an outside source in the First Steps Data System. Rescreen the ASQ:SE-2 Criteria If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual protense results to:	
ASQ:SE-2 Criteria 3 If an outside agency has completed a developmental screening supporting documentation must be requested and saved to the and enter the scores into the First Steps Data System. Note the from an outside source in the First Steps Data System. Rescrenext designated age. ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual prothese results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a document which the child is receiving services. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentating provided, child must be screened. Assessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Assessment 2: Post-Test Post-Test Post-Test Post-Test Post-Test Assessment should be completed the week after the 14-week family sessions	ely the
supporting documentation must be requested and saved to the and enter the scores into the First Steps Data System. Note the from an outside source in the First Steps Data System. Rescre next designated age. If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual prothese results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a document in which the child is receiving services. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation provided, child must be screened. Assessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Assessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	
and enter the scores into the First Steps Data System. Note the from an outside source in the First Steps Data System. Rescrenext designated age. ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual prothese results to:	
from an outside source in the First Steps Data System. Rescrenext designated age. ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual prothese results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a document in which the child is receiving services. Iote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentatic provided, child must be screened. Insessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Assessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	child's file,
from an outside source in the First Steps Data System. Rescrenext designated age. ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual prothese results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a document in which the child is receiving services. Iote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentatic provided, child must be screened. Insessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Insessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	scores are
ASQ:SE-2 Criteria 4 ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual pro these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a document in which the child is receiving services. Interval 4 child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentating provided, child must be screened. Assessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Assessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	
ASQ:SE-2 Criteria 4 If the ASQ:SE-2 indicates a possible delay, the parent educator collaborate with parents/guardians to seek the consensual pro these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated agregardless of developmental screening results and/or a document in which the child is receiving services. Iote: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentating provided, child must be screened. Insessment 1: Retrospective Pre-Test Pre-Test Criteria	
collaborate with parents/guardians to seek the consensual prothese results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documente First Steps Data Collection System. ASQ:SE-2 Criteria 5 ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screenin questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a document of the child is receiving services. Iote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentating provided, child must be screened. Assessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Assessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	shall
these results to:	
i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documenter First Steps Data Collection System. ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screenin questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a documin which the child is receiving services. Ote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation provided, child must be screened. Ssessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Ssessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	7131011 01
ii. either BabyNet (ages 0-3) or the child's zoned school district additional diagnostic evaluation. Referrals shall be documented First Steps Data Collection System. ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Will be completed on every child at the designated agregardless of developmental screening results and/or a documin which the child is receiving services. Iote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentating provided, child must be screened. Inserting I	
additional diagnostic evaluation. Referrals shall be documented First Steps Data Collection System. ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Will be completed on every child at the designated agregardless of developmental screening results and/or a documin which the child is receiving services. Ote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentating provided, child must be screened. Ssessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Ssessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	_
First Steps Data Collection System. ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screenin questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a docum in which the child is receiving services. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. Seessment 1: Retrospective Pre-Test Pre-Test Criteria	
ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screenin questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a docum in which the child is receiving services. Iote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. Issessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions In the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionness the child.	d in the
ASQ:SE-2 Criteria 5 If a child scores in the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screenin questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a docum in which the child is receiving services. Iote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. Issessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions In the monitoring range on the ASQ:SE-2 in one categories and/or if there is a parental concern on the screening questionness the child.	
categories and/or if there is a parental concern on the screenin questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated age regardless of developmental screening results and/or a docum in which the child is receiving services. Iote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. Issessment 1: Retrospective Pre-Test Pre-Test Criteria	or more
questionnaire, the parent educator will recommend activities to the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6	
the areas of possible concern, continue monitoring the child, at the child at the next designated age. ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated agregardless of developmental screening results and/or a documin which the child is receiving services. Ote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. Seessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions Seessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	•
ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated agregardless of developmental screening results and/or a documin which the child is receiving services. ote: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation provided, child must be screened. seessment 1: Retrospective Pre-Test	
ASQ:SE-2 Criteria 6 ASQ:SE-2 will be completed on every child at the designated agregardless of developmental screening results and/or a documin which the child is receiving services. Ote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. Seessment 1: Retrospective Pre-Test Pre-Test Criteria	u rescreen
regardless of developmental screening results and/or a documin which the child is receiving services. ote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. ssessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions ssessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	
in which the child is receiving services. ote: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentati provided, child must be screened. ssessment 1: Retrospective Pre-Test Pre-Test Criteria	
 ote: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation provided, child must be screened. ssessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions ssessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions 	ented delay
 has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation provided, child must be screened. ssessment 1: Retrospective Pre-Test Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions ssessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	
was screened by an outside agency and supporting documentation is provided. If documentation provided, child must be screened. Seessment 1: Retrospective Pre-Test	
was screened by an outside agency and supporting documentation is provided. If documentation provided, child must be screened. Seessment 1: Retrospective Pre-Test	
provided, child must be screened. Seessment 1: Retrospective Pre-Test Pre-Test Criteria	on is not
Assessment 1: Retrospective Pre-Test Pre-Test Criteria	311 13 1101
Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions ssessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	
Pre-Test Criteria Assessment should be completed the week prior to the beginn 14-week family sessions ssessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week family sessions	
14-week family sessions ssessment 2: Post-Test Post-Test Criteria	ng of the
ssessment 2: Post-Test Post-Test Criteria Assessment should be completed the week after the 14-week f	ng or the
Post-Test Criteria Assessment should be completed the week after the 14-week to	
Post-Test Criteria Assessment should be completed the week after the 14-week f	
· · · · · · · · · · · · · · · · · · ·	••
sessions have ended.	amily
eferral Criteria: What are this program's requirements for client referrals and connections?	
Referral Criteria 1: Referrals Parent educators shall seek to ensure that each participating fan	ilv
connects with a pediatric medical home and other community se	•
appropriate.	1.000 03
	ou occeptul
*Referral Criteria 2: Connections The goal is 100% of participants served should have at least one	
connection per program year. 80% is the minimum requirement f	or
compliance.	
Other Criteria: Are there other program criteria that exist?	

Other Criteria: Are there other progr	Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within		
	5 days of service. Data entries will be checked quarterly (Quarterly Progress		
	Reports) to ensure model fidelity.		
Other Criteria 2	Partnerships and their group facilitators shall ensure active collaboration		
	with other parenting and family support services in their communities, refer		
	families to services as necessary, and follow up as feasible to ensure that		
	appropriate connections have been established.		

Other Criteria 3	Strengthening families program group facilitators must complete Participant Progress forms following each session.
Other Criteria 4	Supervisors hold a weekly staff meeting with program staff to provide reflective supervision and weekly individualized reflective supervision meetings to review client recruitment and retention, guideline compliance, and programmatic data reviews.

Program Name		Code	247
	Strengthening Families Preschool		
Program Area	Parenting		

The Strengthening Families Program (SFP) is a nationally and internationally recognized parenting and family strengthening program for high-risk families. The program curriculum includes:

- Children's sessions Children's sessions are built around developmental activities that foster positive parent-child interactions and other approaches to learning as specified by SFP curriculum.
- Parenting sessions Parenting sessions provide detailed training in child growth, healthy development, and positive interactions with children.
- Family sessions Family sessions incorporate experiential exercises that allow parents and children to practice what they learned in either their parenting or children's sessions.

By participating in SF's 14-session parent training program, families have shown significant improvement in parenting skills, family relationships, problem behaviors, delinquency and alcohol and drug abuse in children, social competencies, and school performance.

Partnerships funding SFP shall work in collaboration with SC First Steps to ensure full compliance with national model guidelines. Fidelity of implementation in SC includes meeting SFP requirements along with a few SC First Steps specific additions. The following guideline includes both the SFP compliance standards and SC First Steps minimum requirements.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	⊠Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection I	Requirements		
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	3 years to kindergarten entry.	
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?		
Group Connections		
*Group Connection Criteria 1: Duration Group connections should last 2.5 hours.		
*Group Connection Criteria 2: Frequency 14 weekly sessions.		
Group Connection Criteria 3: Group Size 4 – 14 families		

Note: Programs shall offer group-based services to includes dinner together, parent class and children's class, and family time to close the session. The duration of family sessions will span over 14 weeks.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria 75% of families must be retained for a minimum of 14 weeks.		

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Program Coordinator	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Site Supervisor	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or	Each Strengthening Fami	ilies program coordinat	or shall attend a two-to-
Training	three-day training coverir	ng the following topics:	
	 background of St 	rengthening Families a	s evidence-based
	strategy recruitm	ent and retention of far	nilies
	overview of the c		
		s (practical requiremen	ts and strategies for
	delivering group)	- (I	
	ethical situations		
		on and practical experie	ence implementing
	Strengthening Fa		9
	In addition, each program		rained to lead both
	parenting and children's		amed to lead both
	2 years of supervisory ex	nerience and/or or sun	ervised working
	experience in the field is recommended. All staff providing supervision and/or program oversite must have completed the SFP training.		
	and, or program oversite	must have completed t	ine of the training.
	Staff must also complete	training in ASO-3 and	ASO:SF-2
	otan mast also complete training in Acq o and Acq.oc 2.		
Program Role	Group Leader - Adult	Maximum Number	14
1109.4	oroup zoddor yrddir	of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
TATO Related 505 Title 51 Role	dervice i rovider	Level	GED
*Required Certifications and/or	Each Strengthening Fami		
Training	three-day training covering		or orial atteria a two to
9	_	rengthening Families a	s evidence-hased
		ent and retention of far	
	overview of the c		······co
		s (practical requiremen	ts and strategies for
	delivering group)	3 (practical requirement	ts and strategies for
	ethical situations		
	 specific instruction and practical experience implementing 		
	Strengthening Families.		
	In addition, each program coordinator shall be trained to lead both		
	parenting and children's sessions.		
	parenting and children's	ocogiono.	
	Staff must also complete	training in ACO 2 and	A CO: CF 2

Program Role	Group Leader - Children	Maximum Number	14
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or Training	strategy recruitm overview of the control facilitation group delivering group) ethical situations specific instruction Strengthening Fall addition, each program parenting and children's strengthening strengthening and children's strengthening and childrengthening and children's strengthening and childre	ng the following topics: rengthening Families a ent and retention of far urriculum is (practical requirement) on and practical experience in coordinator shall be topessions.	s evidence-based milies ats and strategies for ence implementing rained to lead both
Natas Draggeon must have at least faur of	Staff must also complete		

Note: Program must have at least four effective group leaders, two to run the children's groups and two for the parent's groups, and a program or site coordinator.

Screening and Assessment Criteria:	How are program participants screened and/or assessed?	
*Screening 1: Ages and Stages Quest		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened by session 5 using	
	the ASQ-3. 80% is the minimum requirement for compliance.	
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the	
	following ages: 36, 42, 48, 54, and 60 months of age.	
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System. Rescreen at the	
	next designated age.	
ASQ-3 Criteria 4	If a developmental screening indicates a possible developmental delay,	
	the parent educator shall collaborate with parents/guardians to seek the	
	consensual provision of these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	additional diagnostic evaluation. Referrals shall be documented in the	
	First Steps Data Collection System.	
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more	
	categories and/or if there is a parental concern on the screening	
	questionnaire, the parent educator will recommend activities to assist with	
	the areas of possible concern, continue monitoring the child's	
	development, and rescreen the child at the next designated age.	
Note: A child is exempt from being so		
	ved from the home of the participating parent.	
 was screened by an outside agency and supporting documentation is provided. If 		
	is not provided, child must be screened.	
 is receiving BabyNet, or other specialized intervention services based on a previously 		
diagnoses. Scr	eenings must resume when all intervention services have ended.	
#0 · 0 · 1 · 10 · 0		
*Screening 2: Ages and Stages Questionnaire: Social and Emotional-2 (ASQ:SE-2)		

ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened by session 9 using
	the ASQ:SE-2. 80% is the minimum requirement for compliance.
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the
	following ages: 36, 48, and 60 months of age.
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,
	supporting documentation must be requested and saved to the child's file,
	and enter the scores into the First Steps Data System. Note the scores are
	from an outside source in the First Steps Data System. Rescreen at the
	next designated age.
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall
	collaborate with parents/guardians to seek the consensual provision of
	these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district for
	additional diagnostic evaluation. Referrals shall be documented in the
	First Steps Data Collection System.
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more
	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child, and rescreen
	the child at the next designated age.
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages
	regardless of developmental screening results and/or a documented delay
	in which the child is receiving services.
Note: A child is exempt from being sc	
 has been removed from the ho 	, , , , , , , , , , , , , , , , , , , ,
	ency and supporting documentation is provided. If documentation is not
provided, child must be screen	ed.
Assessment 1: Retrospective Pre-Tes	
Pre-Test Criteria	Assessment should be completed the week prior to the beginning of the
	14-week family sessions
Assessment 2: Post-Test	
Post-Test Criteria	Assessment should be completed the week after the 14-week family
	sessions have ended.

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals	Parent educators shall seek to ensure that each participating family connects with a pediatric medical home and other community services as appropriate.	
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within	
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	Partnerships and their group facilitators shall ensure active collaboration with other parenting and family support services in their communities, refer families to services as necessary, and follow up as feasible to ensure that appropriate connections have been established.	

Other Criteria 3	Strengthening families program group facilitators must complete Participant Progress forms following each session.
Other Criteria 4	Supervisors hold a weekly staff meeting with program staff to provide reflective supervision and weekly individualized reflective supervision meetings to review client recruitment and retention, guideline compliance, and programmatic data reviews.

Program Name		Code	250
	Supplements to Evidence-Based Programs		
Program Area	Parenting		

Sometimes strategies that have met SCFS evidence-based criteria can be supported by supplemental resources and activities. Although they are not a part of implementation fidelity, these resources and activities can support the evidence-based strategies in important ways. Examples are incentives for program participation and providing developmentally appropriate activities for children while families engage in evidence-based strategies. Typically, Supplemental-to-Evidence-Based (STEB) strategies are implemented when the evidence-based strategy is funded by another entity.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes		
□Families	□Yes	□Yes	⊠Healthy and Safe		
⊠Children	⊠No	⊠No	⊠Actively Supported by Their Families and Communities		
		△INO			
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential		
□Providers					
Data Collection F	Requirements				
In KITS: □Clier	nt-level ⊠M	onthly outputs			
If monthly output	ts in KITS, is clie	nt-level data required	by model elsewhere? □Yes □No		
If yes, client-level	I data required b	y model elsewhere, th	nen name of external data system(s):		
		If Yes, Monthly	Outputs Data Required		
⊠Books Distribu	⊠Books Distributed ⊠Referrals Made				
⊠Books Read			☑Total Number of Health Screenings		
⊠Literacy Kits Given			⊠Total Number of One-on-One Client Visits		
⊠Children 0-5 Served (unduplicated)		ted)	☑Total Number of One-on-One Client Visit Hours		
⊠Families Served (unduplicated)			☑Group Meetings, Trainings, Events: Number of Sessions		
⊠Adult Family Members Served (unduplicated)		(unduplicated)	☑Group Meetings, Trainings, Events: Number of Hours		
□Providers Served (e.g., Schools, Centers)		, Centers)	⊠Group Meetings, Trainings, Events: Total Attendance		
□Classrooms Served (unduplicated)		ted)	□Other (please specify):		
	, .	•			

Targeting Criteria: Who does this program target?			
Age			
Age Criteria Prenatal to kindergarten entry.			
Note: Must be enrolled in an evidence-based program.			

Other Criteria: Are there other program criteria that exist?				
*Other Criteria 1	All partnerships must submit a STEB implementation plan to include a description of the program and its components. This plan will be submitted to the Program and Grants subcommittee for approval prior to implementation.			
Other Criteria 2				
	intensity, evidence-based strategy.			
Other Criteria 3	Each Partnership shall justify how the STEB strategy activities and/or resources supports and/or enhances the evidence-based strategy in key ways.			

EARLY CARE AND EDUCATION PROGRAMS

Program Name		Code	321
	Early Head Start		
Program Area	Early Care and Education		

The Office of Head Start awards grants to public and private agencies on a competitive basis to provide comprehensive services to specific communities. First Steps Local Partnerships Early Head Start (EHS) grantees, in compliance with federal requirements, operate EHS programs that serve infants and toddlers under the age of 3, and pregnant women. EHS programs provide intensive comprehensive child development and family support services to low-income infants and toddlers and their families, and to pregnant women and their families. Program options for Early Head Start that Local Partnerships offer include:

- Home-based services: The full range of Early Head Start services are provided through weekly home visits
 to each enrolled child and family. The home visitor provides child-focused visits that promote the parents'
 ability to support their child's development. These visits last about an hour and a half each. About twice
 per month, the program offers opportunities for parents and children to come together as a group for
 learning, discussion, and social activity.
- Center-based services: Education and child development services are delivered primarily in classroom settings, which are located in an Early Head Start center, school, or child care center. Staff members also visit family homes at least twice per year.

Early Head Start programs operated by Local Partnerships must comply with comply with all federally mandated policies, reporting requirements, and performance standards established by the Office of Head Start.

Unit of Service	Evidence	High Intensity?	Expected First Steps' Child-Level Outcomes		
	Based?				
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe		
□Children	□No	□No	⊠Actively Supported by Their Families and Communities		
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential		
□Providers					
Data Collection F	Requirements				
In KITS: □Clier	nt-level ⊠A	nnual outputs			
If monthly output	ts in KITS, is clie	nt-level data required	by model elsewhere? □Yes ⊠No		
If yes, client-leve	data required by	y model elsewhere, th	nen name of external data system(s):		
		If Yes, Annual C	Outputs Data Required		
□Books Distributed					
□Books Read]	□Total Number of Health Screenings		
□Literacy Kits Given			☑Total Number of One-on-One Client Visits		
⊠Children 0-5 Served (unduplicated)		ted)	⊠Total Number of One-on-One Client Visit Hours		
⊠Families Served (unduplicated)			☐ Group Meetings, Trainings, Events: Number of Sessions		
⊠Adult Family Members Served (unduplicated)		(unduplicated)	☑ Group Meetings, Trainings, Events: Number of Hours		
⊠Providers Served (e.g., Schools, Centers)		, Centers)	⊠Group Meetings, Trainings, Events: Total Attendance		
□Classrooms Served (unduplicated)		ted)	⊠Other (please specify): Number of Home Based and		
	` '	Number of Center Based			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Prenatal to 3 years old	

Service Criteria: How is this program implemented?		
Visits (Home or Site):		
Visit Criteria The facilities used by an Early Head Start program must meet Early F		
Start requirements and SC Department of Social Services (SC DSS)		
	licensing requirements. When licensing requirements vary from Early	
Head Start requirements, the most stringent provision takes precedence		

Reach Criteria: What are this program's goals for client reach			
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the			
	of the program year.		

Other Criteria: Are there other program criteria that exist?			
*Other Criteria 1 All data must be entered within the First Steps Data Collection Sys			
	Annually. Data entries will be checked quarterly (Quarterly Progress		
Reports) to ensure model fidelity.			
Other Criteria 2	Local Partnership operated EHS programs must comply with comply		
with all federally mandated policies, reporting requirements, and			
	performance standards established by the Office of Head Start.		
Other Criteria 3 Local Partnership operated EHS programs must comply with all			
programmatic, reporting, and licensing criteria established by SC DS			

Program Name		Code	322
	Enhanced Early Education with Enrichment Activities		
Program Area	Early Care and Education		

Enhanced Early Education strategies seek to enhance services offered by early childhood classrooms (age 3 through entrance into kindergarten) through supplemental materials, books, and in-person supports. These enhancement resources provide important support to students and their families, and are not otherwise provided by the school district, childcare provider, or other entity.

Enhanced Early Education with Enrichment Activities are targeted, planned, "hands on" experiences where students can extend their classroom learning to improve or enhance skills and knowledge.

All partnerships must submit an implementation plan to include a description of the program and its components. This plan will be submitted to the Program and Grants subcommittee for approval prior to implementation.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	⊠Yes	□Yes	☐Healthy and Safe	
⊠Children	□No	⊠No	☐ Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection F	Requirements			
In KITS: □Clie	nt-level ⊠M	Ionthly outputs		
If monthly output	s in KITS, is clie	nt-level data required	by model elsewhere? □Yes ⊠No	
If yes, client-level	data required by	y model elsewhere, th	nen name of external data system(s):	
			Outputs Data Required	
⊠Books Distributed			⊠Referrals Made	
□Books Read			□Total Number of Health Screenings	
□Literacy Kits Given			□Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)			□Total Number of One-on-One Client Visit Hours	
⊠Families Served (unduplicated)			□Group Meetings, Trainings, Events: Number of Sessions	
□Adult Family Members Served (unduplicated)		(unduplicated)	☐Group Meetings, Trainings, Events: Number of Hours	
⊠Providers Served (e.g., Schools, Centers)		s, Centers)	□Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)		ed)	☑ Other (please specify): Enrichment Activities: Number of	
		3	Sessions and Number of Hours	

Targeting Criteria: Who does this program target?		
Age		
Age Criteria 3K to kindergarten entry.		
Note: Children enrolled in early education classrooms.		

Service Criteria: How is this program implemented?			
Visits (Home or Site):			
*Visit Criteria 1: Frequency	*Visit Criteria 1: Frequency Frequency will be determined by need. The Local Partnership will develop enrichment activity content and determine frequency using input derived from participating school administrators, teachers, and families.		

Visit Criteria 2: Location	Enrichment Activities must occur in-person at the early education site or	
	as an off-site field trip sponsored by the Local Partnerships.	

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Enrichment Activity	Maximum Number	N/A
	Facilitator	of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	No diploma or degree
		Level	
*Required Certifications and/or	Expertise in the topic area that he/she is delivering. Training as		
Training	determined by their educational qualifications and experience.		

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 quarterly (Quarterly Progress Reports)	
	to ensure model fidelity.	
Other Criteria 2: Book and	,	
Materials Distribution	distribution to the focus classrooms. Materials and books distribution are	
	defined as the following:	
	Materials Distribution: Partnerships purchase supplemental materials for	
	early childhood classrooms to enhance and support learning activities.	
	Materials may also be distributed to children to take home to extend	
	classroom learning in the home environment.	
	Book Distribution: Partnerships may distribute take-home books to children	
	in focus classroom to promote shared reading time and foster healthy brain	
	development, parent-child bonding, and early literacy skills.	
Note: This component of the strated	gy requires bi-monthly check ins with the classroom teachers and/or school	
	als distributed are aligned to classroom learning. Materials and books must	
receive prior approval by the classro	om teacher before purchase and distribution. If the local partnership has a	
Child Care Technical Assistance stra	ategy, it is recommended that the local partnership child care technical	
assistance provider is involved in the	e selection of materials and books to the classroom in coordination with the	
classroom teacher.		
Other Criteria 3	If Enhanced Early Education takes place in a school district setting, SC First	
	Steps funds shall not be used to supplant – or in place of – any other	
	resources or materials that would otherwise be provided by the school	
	district. A letter from the school district must be provided annually stating	
	that school district funds would not otherwise be spent on providing the	
	materials and services delivered by the First Steps Local Partnerships	
	through the Enhanced Early Education strategy.	
Other Criteria 4	When enrichment activities are a component of the Enhanced Early	
	Education strategy, the Partnership shall:	
	Utilize a needs assessment process to develop and implement	
	enrichment curriculum. Input should be derived from school	
	administrators, teachers, and families.	
	Consult classroom teachers to determine and specify the focus of	
	enrichment activities. Enrichment activities must mirror the needs of	
	students in the classrooms and align with classroom learning.	
	 Incorporate measurable objectives to help monitor onsite activities. 	
	131	

Other Criteria 5	Client satisfaction surveys (e.g., families served, early childhood teachers
	whose classrooms receive services, or principals/directors of child care
	providers) will be administered at least annually.

Program Name		Code	323
	Enhanced Early Education with Onsite Tutoring		
Program Area	Early Care and Education		

Enhanced Early Education strategies seek to enhance services offered by early childhood classrooms (3K through entrance into 5K classrooms) through supplemental materials, books, and in-person supports. These enhancement resources provide important support to students and their families, and are not otherwise provided by the school district, childcare provider, or other entity.

In the Enhanced Early Education with Onsite Tutoring strategy, tutoring is defined as one-on-one or small group instruction that supports early childhood classroom instruction delivered by a qualified early education professional.

All partnerships must submit an implementation plan to include a description of the program and its components. This plan will be submitted to the Program and Grants subcommittee for approval prior to implementation.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	⊠Yes	⊠Yes	□Healthy and Safe
⊠Children	□No	□No	□Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection F	Requirements		
In KITS: □Clier	nt-level ⊠M	onthly outputs	
			d by model elsewhere? □Yes ⊠No
If yes, client-level	data required by	/ model elsewhere, t	hen name of external data system(s):
		If Yes, Monthly	Outputs Data Required
⊠Books Distributed			⊠Referrals Made
□Books Read			□Total Number of Health Screenings
□Literacy Kits Given			⊠Total Number of One-on-One Client Visits
⊠Children 0-5 Served (unduplicated)			⊠Total Number of One-on-One Client Visit Hours
⊠Families Served (unduplicated)			☑Group Meetings, Trainings, Events: Number of Sessions
□Adult Family Members Served (unduplicated)		unduplicated)	☑Group Meetings, Trainings, Events: Number of Hours
☑Providers Served (e.g., Schools, Centers)		Centers)	☑Group Meetings, Trainings, Events: Total Attendance
□Classrooms Served (unduplicated)		ed)	□Other (please specify):

Targeting Criteria: Who does this program target?			
Age			
Age Criteria 3K to kindergarten entry.			
Note: Children enrolled in early education classrooms.			

Service Criteria: How is this program implemented?		
Visits (Home or Site):		
*Visit Criteria 1: Duration	Minimum of 1 hour.	
*Visit Criteria 2: Frequency 1	Tutors will provide one-on-one or small group sessions at least once a	
	week to participating children.	
Visit Criteria 3: Frequency 2 Tutors will meet with classroom teacher at least bi-monthly to children's progress and plan for future tutoring sessions based student needs. Tutor and/or Executive Director may also meet school administrator.		
Visit Criteria 4: Location	Visits must occur in-person at the early education site. Visits may be supplemented, but not replaced, by additional phone consultation, email correspondence, and/or shorter drop in visits.	

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Workforce Criteria: Who are the service providers implementing this program?				
Program Role	Onsite Early Education	Maximum Number	N/A	
	Tutor	of Cases		
KITS Related Job Title or Role	Service Provider	Minimum Education	Associates or two-year	
		Level	degree	
*Required Certifications and/or Training	field At least two years Education A partnership ma Steps Program O work or school qu Early Care and Ed	e in Early Childhood Ed s' experience in the field y seek a waiver in writing fficer if an individual do ualifications. If approve lucation team will assist ding and training of the	ng from their SC First bes not meet the above ed, the SC First Steps st the partnership in	

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
Assessments		
Assessment Criteria An appropriate pre-and post-assessment, and/or ongoing assessment,		
	measuring student learning or growth should be administered at the	
	beginning and at the conclusion of the school year	

Success Criteria: How is success in this program defined for participants?		
Success Criteria Child receiving onsite tutoring services should show growth on		
classroom assessment tools and/or improvement in mastery of learning concepts to prepare him/her for kindergarten.		

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 quarterly (Quarterly Progress		
	Reports) to ensure model fidelity.		
Other Criteria 2 Enrolled students must be prioritized by the classroom teach			
	need of services and support as identified by student assessment		
	information (ex., Teaching Strategies GOLD, Measure of Academic		
	Progress Test (MAP), the Phonological Awareness Literacy Screening		

	(PALs), World- Class Instructional Design and Assessment (WIDA) scores) and/or other federal- or state-approved assessment(s)).		
Other Criteria 3: Book and Materials	Enhanced Early Education strategies include materials and resource		
Distribution	distribution to the focus classrooms. Materials and books distribution		
	are defined as the following:		
	and domined do une none number		
	Materials Distribution: Partnerships purchase supplemental materials		
	for early childhood classrooms to enhance and support learning		
	activities. Materials may also be distributed to children to take home to		
	extend classroom learning in the home environment.		
	Book Distribution: Partnerships may distribute take-home books to		
	children in focus classroom to promote shared reading time and foster		
	healthy brain development, parent-child bonding, and early literacy skills.		
Note: This component of the strategy requires bi-monthly check ins with the classroom teachers and/or school			
	distributed are aligned to classroom learning. Materials and books must		
	teacher before purchase and distribution. If the local partnership has a		
	y, it is recommended that the local partnership child care technical		
classroom teacher.	ection of materials and books to the classroom in coordination with the		
Other Criteria 4	If Enhanced Early Education takes place in a school district setting, SC		
Other Criteria 4	First Steps funds shall not be used to supplant – or in place of – any		
	other resources or materials that would otherwise be provided by the		
	school district. A letter from the school district must be provided		
	annually stating that school district funds would not otherwise be spent		
	on providing the materials and services delivered by the First Steps		
	Local Partnerships through the Enhanced Early Education strategy.		
Other Criteria 5	Tutoring support must adhere to the research-based curriculum model		
	used by the classroom. The classroom teacher shall determine and		
	specify the focus of the tutoring session based on the specific need-		
	areas of the child.		
Other Criteria 6	Client satisfaction surveys (e.g., families served, early childhood		
	teachers whose classrooms receive services, or principals/directors of		
	child care providers) will be administered at least annually.		

Program Name		Code	324
	Enhanced Early Education with Parent Workshops		
Program Area	Early Care and Education		

Enhanced Early Education strategies seek to enhance services offered by early childhood classrooms (3K through entrance into 5K classrooms) through supplemental materials, books, and in-person supports. These enhancement resources provide important support to students and their families, and are not otherwise provided by the school district, childcare provider, or other entity.

In the Enhanced Early Education with Parent Workshops strategy, parents and caregivers of children in early education programs are trained on and provided strategies to support their child's learning and development at home. These program guidelines detail the specific service delivery, assessment, and data submission requirements of operating Enhanced Early Education with Parent Workshops.

All partnerships must submit an implementation plan to include a description of the program and its components. This plan will be submitted to the Program and Grants subcommittee for approval prior to implementation.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	⊠Yes	⊠Yes	☐Healthy and Safe	
⊠Children	□No	□No	□Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection F	Requirements			
In KITS: □Clier	nt-level ⊠M	onthly outputs		
•	·	•	by model elsewhere? □Yes ⊠No	
If yes, client-level data required by model elsewhere, then name of external data system(s):				
		1614		
If Yes, Monthly Outputs Data Required			Outputs Data Required	
⊠Books Distributed			⊠Referrals Made	
□Books Read]	□Total Number of Health Screenings	
□Literacy Kits Given			☑Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)		ed)	☑Total Number of One-on-One Client Visit Hours	
⊠Families Served (unduplicated)			☑Group Meetings, Trainings, Events: Number of Sessions	
□Adult Family Members Served (unduplicated)		(unduplicated)	☑Group Meetings, Trainings, Events: Number of Hours	
⊠Providers Served (e.g., Schools, Centers)		, Centers)	☑Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)		ed)	□Other (please specify):	

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	3K to kindergarten entry.	
Note: Children enrolled in early education classrooms.		

Service Criteria: How is this program implemented?		
Visits (Home or Site):		
*Visit Criteria 1: Duration Minimum of 1 hour.		

Visit Criteria 2: Frequency	Frequency will be determined by need. The Local Partnership will
	develop parent workshops content and determine frequency using input
	derived from participating school administrators, teachers, and families.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the		
	of the program year.	

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Parent Workshop	Maximum Number	N/A
	Facilitator	of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	No diploma or degree
		Level	
*Required Certifications and/or	Expertise in the topic area that he/she is delivering. Training determined		
Training	by their educational qualifications and experience.		

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 quarterly (Quarterly Progress
	Reports) to ensure model fidelity.
Other Criteria 2: Book and Materials	Enhanced Early Education strategies include materials and resource
Distribution	distribution to the focus classrooms. Materials and books distribution
	are defined as the following:
	Materials Distribution: Partnerships purchase supplemental materials
	for early childhood classrooms to enhance and support learning
	activities. Materials may also be distributed to children to take home to
	extend classroom learning in the home environment.
	Book Distribution: Partnerships may distribute take-home books to
	children in focus classroom to promote shared reading time and foster
	healthy brain development, parent-child bonding, and early literacy skills.
	equires bi-monthly check ins with the classroom teachers and/or school
	distributed are aligned to classroom learning. Materials and books must
	teacher before purchase and distribution. If the local partnership has a
	y, it is recommended that the local partnership child care technical
classroom teacher.	ection of materials and books to the classroom in coordination with the
Other Criteria 3	If Enhanced Early Education takes place in a school district setting, SC
Other Officials	First Steps funds shall not be used to supplant – or in place of – any
	other resources or materials that would otherwise be provided by the
	school district. A letter from the school district must be provided
	annually stating that school district funds would not otherwise be spent
	on providing the materials and services delivered by the First Steps
	Local Partnerships through the Enhanced Early Education strategy.
Other Criteria 4	In all cases the Partnership shall:
	a. Develop workshops using input derived from participating school
	administrators, teachers, and families.
	b. Incorporate measurable objectives and at least one form of follow-up
Other Criteria 5	Client satisfaction surveys (e.g., families served, early childhood
	teachers whose classrooms receive services, or principals/directors of
	child care providers) will be administered at least annually.

Program Name		Code	330
	Early Education Program Support		
Program Area	Early Care and Education		

Through Early Education Program Support, Local Partnerships partner with licensed child care programs to provide operational oversight and/or funding, including support for staff salaries, benefits, and classroom materials.

Child Care programs supported by Local Partnerships programs must be licensed by SC Department of Social Services (SC DSS), and it is strongly recommended that the child care programs be rated by the state's existing child care quality infrastructure, ABQ Quality.

The child care program and the Local Partnership must have a contract in place which must be submitted to SC First Steps prior to the implementation of services.

All partnerships must submit an implementation plan to include a description of the program and its components. This plan will be submitted to the Program and Grants subcommittee for approval prior to implementation.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	⊠Yes	⊠Yes	⊠Healthy and Safe
□Children	□No	□No	☑Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
⊠Providers			
Data Collection R	Requirements		
In KITS: □Clier	nt-level ⊠M	onthly outputs	
			d by model elsewhere? □Yes □No
If yes, client-level	data required by	y model elsewhere, t	then name of external data system(s):
		If Yes, Monthly	Outputs Data Required
⊠Books Distributed			⊠Referrals Made
□Books Read			
□Literacy Kits Given			□Total Number of One-on-One Client Visits
⊠Children 0-5 Served (unduplicated)		ed)	□Total Number of One-on-One Client Visit Hours
⊠Families Served (unduplicated)			□Group Meetings, Trainings, Events: Number of Sessions
□Adult Family Members Served (unduplicated)		(unduplicated)	☐Group Meetings, Trainings, Events: Number of Hours
□Providers Served (e.g., Schools, Centers)		, Centers)	☐Group Meetings, Trainings, Events: Total Attendance
□Classrooms Served (unduplicated)		ted)	□Other (please specify):

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Birth to kindergarten entry.	

Service Criteria: How is this program implemented?	
Visits (Home or Site):	

Visit Criteria: Frequency	Local Partnerships partnering with licensed child care programs to
	provide operational oversight and/or funding must conduct monitoring
	visits to the child care program at least monthly

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria	75% of families must be retained for nine or more months of program	
	participation.	

Workforce Criteria: Who are the service providers implementing this program?		
Required Certifications and/or	Requirements for Caregivers: Workforce criteria for any person whose	
Training	duties include direct care, supervision, and guidance of children in a	
	child care facility are included in SECTION 63-13-30 of South Carolina	
	Child Care Licensing Law. The Local Partnership and/or child care	
	program may require additional qualifications and experience for the	
	staff.	

*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3) ASQ-3 Criteria 1 The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ-3. 80% is the minimum requirement for compliance. ASQ-3 Criteria 2 Children will be screened using the ASQ-3 on approximately the following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age. ASQ-3 Criteria 3 If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.	Screening and Assessment Criteria: How are program participants screened and/or assessed?		
ASQ-3 Criteria 1 The goal is 100% of children participants be screened within 60 days of enrollment using the ASQ-3. 80% is the minimum requirement for compliance. ASQ-3 Criteria 2 Children will be screened using the ASQ-3 on or approximately the following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age. ASQ-3 Criteria 3 If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
compliance. ASQ-3 Criteria 2 Children will be screened using the ASQ-3 on or approximately the following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age. ASQ-3 Criteria 3 If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
ASQ-3 Criteria 2 ASQ-3 Criteria 3 ASQ-3 Criteria 3 If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.		enrollment using the ASQ-3. 80% is the minimum requirement for	
following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age. ASQ-3 Criteria 3 If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
ASQ-3 Criteria 3 If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.	ASQ-3 Criteria 2		
supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to:	ASQ-3 Criteria 3		
from an outside source in the First Steps Data System. Rescreen at the next designated age. ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.		· • • • • • • • • • • • • • • • • • • •	
ASQ-3 Criteria 4 If a developmental screening indicates a possible developmental delay, the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.		' '	
the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to: i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.	ASO-3 Criteria 4		
consensual provision of these results to:	Aog o ontena 4		
i. child's pediatric care provider ii. either BabyNet (ages 0-3) or the child's zoned school district for additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: In has been removed from the home of the participating parent. In was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. In is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: I has been removed from the home of the participating parent. Was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. Is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.		ii. either BabyNet (ages 0-3) or the child's zoned school district for	
ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: I has been removed from the home of the participating parent. Was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. Is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.		additional diagnostic evaluation. Referrals should be entered in the First	
categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: • has been removed from the home of the participating parent. • was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.	ASQ-3 Criteria 5		
the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.		,	
development, and rescreen the child at the next designated age. Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
Note: A child is exempt from being screened if the child: has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.		, · · · · · · · · · · · · · · · · · · ·	
 has been removed from the home of the participating parent. was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended. 			
 was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened. is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended. 			
documentation is not provided, child must be screened. • is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended.			
 is receiving BabyNet, or other specialized intervention services based on a previously diagnoses. Screenings must resume when all intervention services have ended. 			
diagnoses. Screenings must resume when all intervention services have ended.	· · · · · · · · · · · · · · · · · · ·		
*Coveraging 2: Ages and Charge Overstiannaine: Copiel and Emptional 2 (ACO:CE 2)			
'Screening 2: Ages and Stages Questionnaire: Social and Emotional-2 (ASQ:SE-2)	*Screening 2: Ages and Stages Questionnaire: Social and Emotional-2 (ASQ:SE-2)		

ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of
	enrollment using the ASQ:SE-2. 80% is the minimum requirement for
	compliance.
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the
	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,
	supporting documentation must be requested and saved to the child's file,
	and enter the scores into the First Steps Data System. Note the scores are
	from an outside source in the First Steps Data System. Rescreen at the
	next designated age.
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall
	collaborate with parents/guardians to seek the consensual provision of
	these results to:
	i. child's pediatric care provider
	ii. either BabyNet (ages 0-3) or the child's zoned school district for
	additional diagnostic evaluation. Referrals should be entered in the First
	Steps Data Collection System
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more
	categories and/or if there is a parental concern on the screening
	questionnaire, the parent educator will recommend activities to assist with
	the areas of possible concern, continue monitoring the child, and rescreen
	the child at the next designated age
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages
	regardless of developmental screening results and/or a documented delay
	in which the child is receiving services.
Niakan A alattat ta annuara farana la disarra	

- Note: A child is exempt from being screened if the child:

 has been removed from the home of the participating parent.

 was screened by an outside agency and supporting documentation is provided. If documentation is not provided, child must be screened.

Success Criteria: How is success in this program defined for participants?		
Success Criteria Program's advancement within South Carolina's existing quality		
	infrastructure (the ABC Quality Rating and Improvement System) and/or its	
	improvement on an approved program quality measure.	

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals	Participating families should connect with a pediatric medical home and	
	other community services as appropriate.	
*Referral Criteria 2: Connections	a 2: Connections The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

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 quarterly (Quarterly Progress Reports)	
	to ensure model fidelity.	
Other Criteria 2	The partnership between the child care program and the Local Partnership must have a contract in place which must be submitted to SC First Steps prior to the implementation of services. The contract must contain, at minimum:	
	 The parties in agreement, and their roles Detailed and specific outline of the arrangement, including scope of services, target audience, delivery expectations, and time limit (if any) on the agreement 	

	 Payment details, or details of services and obligations of each party Evaluation of performance and delivery Consequences for failing to live up to expectations Conditions for ending or canceling the contract (if any) Conditions for changing the contract Signatures, date 	
Other Criteria 3	Child care programs that are supported by Local Partnerships must comply with all programmatic, reporting, and licensing criteria established by SC DSS and/or ABC Quality.	

Program Name		Code	331
	Early Education Program Operation		
Program Area	Early Care and Education		

Early Education programs operated by SC First Steps Local Partnerships provide high quality child care to preschool children. These programs must be licensed by SC Department of Social Services (SC DSS), and it is strongly recommended that programs be rated by the state's existing child care quality infrastructure, ABQ Quality. Early Education programs operated by SC First Steps Local Partnerships shall place particular emphasis on fidelity to researched-based instructional models and developmentally appropriate practices that support school readiness of participating children.

Local Partnerships that operate Early Education programs must submit their child care program policy and procedure manual to SC First Steps at the time of their Formula Funding Grant Application submission.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	⊠Yes	⊠Yes	⊠Healthy and Safe	
⊠Children	□No	□No	⊠Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection R	Requirements			
In KITS: ⊠Clier	nt-level ⊠M	onthly outputs		
If monthly output	s in KITS, is clie	nt-level data required	by model elsewhere? □Yes □No	
If yes, client-level	data required by	y model elsewhere, th	nen name of external data system(s):	
			Outputs Data Required	
⊠Books Distributed] [□Referrals Made	
□Books Read]	☐ Total Number of Health Screenings	
□Literacy Kits Given]	□Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)		ted) [□Total Number of One-on-One Client Visit Hours	
⊠Families Served (unduplicated)) [☐Group Meetings, Trainings, Events: Number of Sessions	
⊠Adult Family Members Served (unduplicated)		(unduplicated) [□Group Meetings, Trainings, Events: Number of Hours	
□Providers Served (e.g., Schools, Centers)		, Centers) [□Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)		ted)	⊠Other (please specify): Number of Classroom Volunteers	

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Birth to kindergarten entry.	

Service Criteria: How is this program implemented?		
Program Operation Requirements		
General Program Operation Criteria 1	Child care programs operated by Local First Steps Partnerships shall provide high-quality; developmentally appropriate educational services to preschool children. Educational services are defined to include all domains of development: cognitive, physical, emotional, social, cultural, and non-cognitive.	

General Program Operation Criteria 2	All child care programs operated by First Steps Local Partnerships are	
	required to be licensed through SC DSS and shall be operated in	
	compliance with all SC DSS child care licensing regulations.	
General Program Operation Criteria 3	It is strongly recommended that all child care programs are enrolled in	
	South Carolina's existing child care quality infrastructure, the ABC	
	Quality Rating and Improvement System.	
General Program Operation Criteria 4	Local Partnerships operating a child care program must inform the SC	
	First Steps Early Care and Education Team Leader within one (1)	
	business day of any founded regulatory violations, contacts with law	
	enforcement, the issuance of a provisional license, and/or reports of Out	
	of Home Abuse and Neglect (OHAN) occurring during the contract	
	period. Programs must resolve all regulatory violation(s) with	
	SCDSS/Child Care Regulatory to the satisfaction of South Carolina First	
	Steps.	
Enrollment and Disenrollment		
Enrollment	Enrollment for child care programs must be open and non-	
	discriminatory. Should the number of eligible students seeking	
	enrollment exceed the number of spaces available, acceptances must	
	be prioritized in accordance with SC First Steps risk factors.	
Suspension or Disenrollment of a	Developmentally appropriate behavior management techniques should	
Child	be always utilized. Suspension should be used sparingly and as a last	
	resort. Disenrollment will be considered under extraordinary	
	circumstances and only with thorough documentation of both the	
	circumstances surrounding the request and the child care program's	
	sustained and active efforts to resolve these issues in partnership with	
	the child's parent(s) or guardian(s).	
	If suspension or disenrollment occurs, the Local Partnership must	
	inform the Early Education Team Leader within one (1) business day.	

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the		
	of the program year.	

Workforce Criteria: Who are the service providers implementing this program?		
Required Certifications and/or	Requirements for Caregivers: Workforce criteria for any person whose	
Training	duties include direct care, supervision, and guidance of children in a	
	child care facility are included in SECTION 63-13-30 of South Carolina	
	<u>Child Care Licensing Law</u> . The Local Partnership and/or child care	
	program may require additional qualifications and experience for the	
	staff.	

Screening and Assessment Criteria: How are program participants screened and/or assessed?			
*Screening 1: Ages and Stages Quest	*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)		
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of		
	enrollment using the ASQ-3. 80% is the minimum requirement for		
	compliance.		
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the		
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.		
ASQ-3 Criteria 3	If an outside agency has completed a developmental screening for a child, supporting documentation must be requested and saved to the child's file, and enter the scores into the First Steps Data System. Note the scores are from an outside source in the First Steps Data System. Rescreen at the next designated age.		

r	andomly selected, shall receive an assessment with the appropriate	
	For each participating child care provider, 50% of the classrooms, to be	
*Assessment 1: Environmental Rating		
provided, child must be screen	· · · · · · · · · · · · · · · · · · ·	
 was screened by an outside ag 	gency and supporting documentation is provided. If documentation is not	
	ome of the participating parent.	
Note: A child is exempt from being sc		
	in which the child is receiving services.	
	regardless of developmental screening results and/or a documented delay	
ASQ:SE-2 Criteria 6	ASQ:SE-2 will be completed on every child at the designated ages	
	the child at the next designated age.	
	the areas of possible concern, continue monitoring the child, and rescreen	
	questionnaire, the parent educator will recommend activities to assist with	
	categories and/or if there is a parental concern on the screening	
ASQ:SE-2 Criteria 5	If a child scores in the monitoring range on the ASQ:SE-2 in one or more	
	Steps Data Collection System	
	additional diagnostic evaluation. Referrals should be entered in the First	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	i. child's pediatric care provider	
	these results to:	
- - -= =	collaborate with parents/guardians to seek the consensual provision of	
ASQ:SE-2 Criteria 4	If the ASQ:SE-2 indicates a possible delay, the parent educator shall	
	next designated age.	
	from an outside source in the First Steps Data System. Rescreen at the	
	and enter the scores into the First Steps Data System. Note the scores are	
	supporting documentation must be requested and saved to the child's file,	
ASQ:SE-2 Criteria 3	If an outside agency has completed a developmental screening for a child,	
- 10 4 10	following ages: 6, 12, 18, 24, 30, 36, 48, and 60 months of age.	
ASQ:SE-2 Criteria 2	Children will be screened using the ASQ:SE-2 on or approximately the	
	compliance.	
110 4102 2 01110110	enrollment using the ASQ:SE-2. 80% is the minimum requirement for	
ASQ:SE-2 Criteria 1	The goal is 100% of children participants be screened within 60 days of	
*Screening 2: Ages and Stages Ouest	ionnaire: Social and Emotional-2 (ASQ:SE-2)	
	~	
	eenings must resume when all intervention services have ended.	
	byNet, or other specialized intervention services based on a previously	
	is not provided, child must be screened.	
	by an outside agency and supporting documentation is provided. If	
	ved from the home of the participating parent.	
Note: A child is exempt from being so		
	development, and rescreen the child at the next designated age.	
	the areas of possible concern, continue monitoring the child's	
	questionnaire, the parent educator will recommend activities to assist with	
·	categories and/or if there is a parental concern on the screening	
ASQ-3 Criteria 5		
	Steps Data Collection System	
	additional diagnostic evaluation. Referrals should be entered in the First	
	ii. either BabyNet (ages 0-3) or the child's zoned school district for	
	i. child's pediatric care provider	
	the parent educator shall collaborate with parents/guardians to seek the consensual provision of these results to:	
	Line parent educator shall collaborate with parents/dilardians to seek the	

ERS Criteria 2	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 online ERS Refresher training or additional ERS training through the ERSI within the past three years.		
*Assessment 2: Student Learning/G	*Assessment 2: Student Learning/Growth		
Student Learning Criteria	An appropriate pre-and post-assessment, and/or ongoing observational assessment (ex., Teaching Strategies GOLD), measuring student learning or growth is required for all enrolled students. Assessment choice must be submitted with the Formula Grant Application and approved by the Early Care and Education Team Leader.		

Success Criteria: How is success in this program defined for participants?		
Success Criteria 1 Child care program's advancement within South Carolina's existing quality		
	infrastructure (the ABC Quality Rating and Improvement System) and/or its	
	improvement on an approved program quality measure.	
Success Criteria 2	Child care provider improvement on the required Environment Rating Scales	
	(from baseline to post assessment).	

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals	Participating families should connect with a pediatric medical home and	
	other community services as appropriate.	
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful	
	connection per program year. 80% is the minimum requirement for	
	compliance.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1 All client level data must be entered within the First Steps Data Collecti		
	System within 5 days of service. Outputs data must be entered monthly.	
	Data entries will be checked quarterly (Quarterly Progress Reports) to ensure	
	model fidelity.	
Other Criteria 2	Child care program must comply with all programmatic, reporting, and	
	licensing criteria established by SC DSS and/or ABC Quality.	
Other Criteria 3	Local Partnerships must provide their child care program policy and	
	procedure manual to the SC First Steps Early Care and Education Team	
	Leader with the Formula Funding Grant Application.	
Other Criteria 4	Client satisfaction surveys for enrolled families served must be administered	
	at least annually. The data collected should be used for program	
	improvement.	

Program Name		Code	601
	Child Care Technical Assistance and Coaching		
Program Area	Early Care and Education		

The SC First Steps Child Care Technical Assistance and Coaching program is intended to produce measurable improvements in the quality of care and education provided to young children by providing on-site coaching and technical assistance tailored to the needs of local child care providers. The program is classroom-focused quality improvement strategy.

Success is determined by a child care program's advancement within South Carolina's existing quality infrastructure (the ABC Quality Rating and Improvement System) and/or its improvement on an approved program quality measure.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	⊠Yes	□Yes	⊠Healthy and Safe
□Children	□No	⊠No	☑Actively Supported by Their Families and Communities
□Adults			☑Arrive at School Ready to Reach Their Highest Potential
⊠Providers			
Data Collection Requirements			
In KITS: □Client-level □Monthly outputs □Child Care Provider			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this progra	im target?
*Child Care Provider Criteria	 Each participating child care provide shall be identified via competitive application with priority to providers: Located within the school attendance zone of (and/or enrolling primarily children attending) an individual elementary school rated "Below Average" or "Unsatisfactory" during the preceding three-year period or; In which 10% or more of enrolled students are SC Child Care Scholarships recipients or; Participating in a publicly-funding early care and education program (such as First Steps 4K). All participating child care programs, centers, faith-based, family home, and group home, must be licensed or registered with the SC Department of Social Services (SC DSS). Registered family home providers receiving SC 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.
	 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 gross income at or below 85% of the
	state median income level.

 Centers participating in First Steps-funded technical assistance and coaching projects must permit the on-site delivery of "natural environment" services/therapies to children eligible
 under the Individuals with Disabilities Education Act (IDEA). It is strongly recommended that participant directors and classroom staff complete, or plan to complete, ECD 101 (or comparable coursework) as a condition of participation. Documentation of staff education levels and certifications are to
be entered in the FSDC.

Service Criteria: How is this program implemented?		
Visits		
*Visit Criteria 1: Duration	Visits should be no less than one hour.	
*Visit Criteria 2: Frequency	cy Technical assistants are required to provide on-site	
	consultation/coaching at least twice monthly as part of their technical	
	assistance services, via employee or contracted staff.	
Note: Two or more visits to the same sit	e on a single day shall be considered a single visit of increased duration.	
Visit Criteria 3: Location	Visits must occur in-person at the child care provider site. They may	
	entail meeting with the administrator, an individual classroom visit,	
	and/or multiple classroom visits. Visits may be supplemented, but not	
	replaced, by additional phone consultation, email correspondence,	
	and/or shorter drop in visits.	

Reach Criteria: What are this program's goals for client reach?		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the		
	of the program year.	

Retention Criteria: What are this program's goals for client retention?		
Retention Criteria	The SC First Steps Child Care Technical Assistance and Coaching program emphasizes a relationship-based technical assistance approach to support the professional growth and development of the child care provider staff. It is strongly recommended that SC First Steps Technical Assistance and Coaching programs commit to working with a child care provider for two to three fiscal years, contingent upon both parties adhering to the Memorandum of Agreement.	

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Technical Assistance	Maximum Number	Varies based on
	Provider	of Cases	provider size
KITS Related Job Title or Role	Certified Technical	Minimum Education	Associates or two-year
	Assistance Provider	Level	degree
Required Certifications and/or Training	field At least two years Education A partnership ma Steps Program O work or school que Early Care and Educational onboard Participation in o 30 clock hours of	ualifications. In those c lucation team will assist rding and training of the ngoing professional de	d of Early Childhood ng from their SC First bes not meet the above ases, the SC First Steps at the partnership in e new staff member. velopment with a total of Half of this training shall

reflective practice, Quality Improvement Plans, and Environment
Rating Scales.

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Assessment: Environmental Rating	Scale Assessment (ERS)	
ERS Criteria 1	Each focus classroom (i.e., classrooms visited regularly by the TA provider) and/or home-based provider benefiting from SC First Steps QE funding shall receive a baseline assessment with the appropriate ERS within 90 days of the initiation of technical assistance, with a post assessment conducted at least 6 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.	
ERS Criteria 2	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.	
ERS Criteria 3	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 online ERS Refresher training or additional ERS training through the ERSI within the past three years.	
ERS Criteria 4	The baseline and post assessments must be completed by an assessor who meets the criteria listed above and is not the assigned TA provider for the classroom.	
Conservation Harris and Servation	this was august defined for a switch august 2	
Success Criteria: How is success in Success Criteria 1	this program defined for participants? Child care provider advancement in South Carolina's quality rating and improvement system, ABC Quality.	
Success Criteria 2	Child care provider improvement on the required Environment Rating Scales (from baseline to post assessment).	
Other Criteria: Are there other progr *Other Criteria 1	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. When onboarding a new provider to the QE strategy, an orientation period is recommended to conduct baseline assessments, provide training on the appropriate Environment Rating Scale (ERS), and build rapport with staff.	
Other Criteria 2	Pre and post child care program (director and teachers) standardized satisfaction surveys of early educators who received technical assistance must be administered. The data collected should be used for program improvement.	
Other Criteria 3	Quality Improvement Plans – Technical Assistants will develop detailed Quality Improvement Plans (QIP) in partnership with each child care provider. The minimum components of Quality Improvement Plans are the following: • Data from the baseline assessment of the classroom(s) served by the appropriate Environmental Rating Scale (ERS) • Goals and objectives for the classroom(s) and/or provider based on data from the baseline assessment(s) that are specific, actionable, measurable, and time-bound • Strategies that the Technical Assistant will use to support the director, teacher(s), and/or staff	

Professional development/training options for director, teacher(s), and/or staff Child Care Technical Assistance and Coaching strategies shall collaborate with other agencies and organizations serving providers, in order to coordinate and enhance services. Partnerships working with providers that are participants in First Steps 4K and/or receive technical assistance support from other state programs should develop the classroom's QIP and provide services in coordination with the other partner organizations' technical assistants assigned to the provider. Note: Technical Assistants must use the standardized Quality Improvement Plan template provided by SC First Steps. Other Criteria 4 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. Equipment and materials funds will be awarded at intervals as commitments are actively demonstrated and changes are put in place; with no more than 35-40% of allocation spent before improvement is demonstrated via the center's Quality Improvement Plan(s). Other Criteria 5 Integration with Child Care Training - Partnerships shall offer at least eight (8) hours of high-quality, certified training (stemming directly from the provider's Quality Improvement Plan(s)) to each early childhood professional on staff. Training will be based on needs identified within the Quality Improvement Plan(s). The child care provider director must participate regularly in on-site TA and coaching visits and in at least 50% of staff training provided. Child care teaching staff shall be required to attend relevant training as a condition of their providers' participation. Trainings offered to client providers shall be attended by the partnership's technical assistance provider(s). All participating staff shall be provided with information about the state's Other Criteria 6 T.E.A.C.H. (Teacher Education and Compensation Helps) scholarship program and provided (and/or connected with) case management designed to assist each in his/her advancement along South Carolina's Early Childhood Career Lattice.

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

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.

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 <u>SC Endeavors Registry</u>. DSS Licensing staff reviews the Learning Record/DSS Official Transcript to ensure annual training requirements were met.

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.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes		
□Families	⊠Yes	□Yes	⊠Healthy and Safe		
□Children	□No	⊠No	☐ Actively Supported by Their Families and Communities		
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential		
⊠Providers					
Data Collection F	Requirements				
In KITS: □Clie	nt-level ⊠M	Ionthly outputs			
If monthly output	s in KITS, is clie	nt-level data required	by model elsewhere? □Yes □No		
If yes, client-level	data required by	y model elsewhere, th	nen name of external data system(s):		
If Yes, Monthly			Outputs Data Required		
□Books Distributed]	□Referrals Made		
□Books Read]	□Total Number of Health Screenings		
□Literacy Kits Given]	□Total Number of One-on-One Client Visits		
⊠Children 0-5 Served (unduplicated)		ted)	□Total Number of One-on-One Client Visit Hours		
□Families Served (unduplicated)			☑ Group Meetings, Trainings, Events: Number of Sessions		
□Adult Family Members Served (unduplicated)		(unduplicated)	☑Group Meetings, Trainings, Events: Number of Hours		
⊠Providers Served (e.g., Schools, Centers)		s, Centers)	⊠Group Meetings, Trainings, Events: Total Attendance		
⊠Classrooms Served (unduplicated)		ted) [□Other (please specify):		

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:	

	 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
VI 1: 2 1: 1 2 =	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
Viole Official C. Location	and the Local Partnership ability to accommodate the needs of
	programs.
Design of Training	
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
	areas to include Child Growth and Development, Curriculum, Child Guidance, Health and Safety, Nutrition, Special Needs, Professional
	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
	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
Standalone Training	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.
Standalone Training	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.
Standalone Training Note: CPR and first aid training will not	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.
Standalone Training Note: CPR and first aid training will not	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. count in the 15-hour SC DSS requirement. Series of trainings/cohort is multiple trainings on a content area and/or curriculum accruing over a period of time. Conference hosted by an early childhood organization that provides
Note: CPR and first aid training will not Series of Trainings/Cohort	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. count in the 15-hour SC DSS requirement. Series of trainings/cohort is multiple trainings on a content area and/or curriculum accruing over a period of time. Conference hosted by an early childhood organization that provides breakout sessions over the course of a day or multiple days covering
Note: CPR and first aid training will not Series of Trainings/Cohort	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. count in the 15-hour SC DSS requirement. Series of trainings/cohort is multiple trainings on a content area and/or curriculum accruing over a period of time. 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
Note: CPR and first aid training will not Series of Trainings/Cohort	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. count in the 15-hour SC DSS requirement. Series of trainings/cohort is multiple trainings on a content area and/or curriculum accruing over a period of time. 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
Standalone Training Note: CPR and first aid training will not series of Trainings/Cohort	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. Count in the 15-hour SC DSS requirement. Series of trainings/cohort is multiple trainings on a content area and/or curriculum accruing over a period of time. 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
Standalone Training Note: CPR and first aid training will note Series of Trainings/Cohort	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. count in the 15-hour SC DSS requirement. Series of trainings/cohort is multiple trainings on a content area and/or curriculum accruing over a period of time. 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

Reach Criteria: What are this program's goals for client reach?		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve chil		
	providers and certified training hours by the end of the program year.	

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	Maximum Number	N/A
	Trainor	of Cases	
KITS Related Job Title or Role	e Other Minimum Education Bachelors or four-year		Bachelors or four-year
		Level	degree
Required Certifications and/or	Certified Trainers are required by SC Endeavors to complete		
Training	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 progr	
*Other Criteria 1	All data must be entered within the First Steps Data Collection System
	monthly. Data entries will be checked quarterly (Quarterly Progress Reports) 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.
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.
Other Criteria 6	The SC Endeavors certified trainer must include one to two measurable
	training objectives for each hour of training, administer a pre and post
	assessment, 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.

Program Name		Code	610
	Nutrition and Physical Activity Self-Assessment for Child Care (Go NAPSACC)		
Program Area	Early Care and Education		

First Steps' Child Care Technical Assistance strategies are intended to produce measurable improvements in the quality of care provided to young children, as measured by a program's advancement within South Carolina's existing quality infrastructure (the ABC Quality Rating and Improvement System) and/or its improvement on an approved program quality measure. GO NAPSACC is an add-on assessment and training program that can be completed as part of ongoing Quality Enhancement or Quality Counts programs.

Go NAPSACC centers on seven focus areas, all aimed at improving the health of young children. The seven focus areas are: child nutrition, breastfeeding and infant feeding, farm to ECE, oral health, infant and child physical activity, outdoor play and learning, and screen time. Go NAPSACC is a 5-step process through which child care program assess current practices, create an action plan for change, put the plans into action, take part in training, and reassess to celebrate progress with the guidance and support of technical assistance programs and certified trainings.

All partnerships must submit an implementation plan to include a description of how they are implementing the Go NAPSACC program in coordination with their Child Care Coaching and Technical Assistance or Quality Counts programs. This plan will be submitted with the Formula Funding Grant application.

Unit of Service	Evidence	High Intensity?	Expected First Steps' Child-Level Outcomes	
	Based?			
□Families	⊠Yes -	□Yes	⊠Healthy and Safe	
□Children	Expenditures	⊠No	☑Actively Supported by Their Families and Communities	
□Adults	shall be considered		☑Arrive at School Ready to Reach Their Highest Potential	
⊠Providers	evidence-			
	based when			
	connected			
	with a Child			
	Care Technical			
	Assistance			
	strategy.			
	□No			
Data Collection F	Requirements			
In KITS: □Client-level ☑Monthly outputs		•		
If monthly outputs in KITS, is client-level data require				
If yes, client-level data required by model elsewhere,		y model elsewhere, t	hen name of external data system(s):	
•			Outputs Data Required	
☐Books Distribut	ted		⊠Referrals Made	
□Books Read			☑Total Number of Health Screenings	
□Literacy Kits Given			□Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)		,	□Total Number of One-on-One Client Visit Hours	
⊠Families Served (unduplicated)			☑Group Meetings, Trainings, Events: Number of Sessions	
⊠Adult Family Members Served (unduplicated)		` ' /	☑Group Meetings, Trainings, Events: Number of Hours	
□Providers Served (e.g., Schools, Centers)		,	☑Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Se	rved (unduplicat	ted)	□Other (please specify):	

Targeting Criteria: Who does this program target?		
Child Care Provider Criteria	Child care programs participating in Child Care Coaching and Technical Assistance or Quality Counts programs with First Steps Local Partnerships.	

Service Criteria: How is this program in	nplemented?
Program Operation Requirements	
General Program Operation Criteria	The Go NAPSACC model is completely online allowing Technical Assistance Providers (TAPs) to onboard child care programs and track their progress throughout implementation. Child care programs will have access to the online portal to complete assessments, set goals, document progress towards goals, and complete trainings. All trainings are also included as certified offerings through SC Endeavors.
	All focus areas and goals within the focus areas are designed to align with ABC Quality standards.
	The model suggests that child care programs complete assessments at the start of the school year, set goals, and work towards those goals over the course of the year. Post- assessment and setting of new goals should occur at the end of the school year.

Reach Criteria: What are this program's	goals for client reach
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end
	of the program year.

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Child Care Technical	Maximum Number	N/A
	Assistance Provider	of Cases	
KITS Related Job Title or Role	Certified Technical	Minimum Education	Associates or two-year
	Assistance Provider	Level	degree
Required Certifications and/or	 Associate 	es degree in Early Child	hood Education or a
Training	related field		
		wo years' experience in	the field of Early
	Childhood Ed		
	· · · · · · · · · · · · · · · · · · ·		r in writing from their SC
	•	ogram Officer if an ind	
			ons. In those cases, the
			tion team will assist the
			and training of the new
	staff member		
	•	0 0.	ional development with a
		•	ery 3 years. Half of this
		be in early education a	
	· ·	e., reflective practice, Q	•
	Plans, and En	vironment Rating Scale	es.

Other Criteria: Are there other progr	am criteria that exist?
*Other Criteria 1	All data must be entered within the First Steps Data Collection System monthly. Data entries will be checked quarterly (Quarterly Progress Reports) to ensure model fidelity.
Other Criteria 2	The Go NAPSACC implementation requirements for TAPs are as follows:
	1. TAPs complete the Go NAPSACC implementation training provided by Go NAPSACC.
	2. TAPS will onboard child care programs and connect them with the online portal.
	3. TAPs will assist programs in completion of their self-assessment tool and identifying goals for improvement.
	4. TAPs will provide support and guide programs to trainings that are
	specific to the goals they have set and through the
	materials and resources provided by Go NAPSACC
	5. TAPs will monitor provider progress through the online portal and in-
	person visits (as prescribed by guidelines).

Program Name		Code	611
	LENA Grow		
Program Area	Early Care and Education		

First Steps' Child Care Technical Assistance strategies are intended to produce measurable improvements in the quality of care provided young children, as demonstrated by a program's advancement within South Carolina's existing quality infrastructure (the ABC Quality Rating and Improvement System) and/or its improvement on an approved program quality measure. LENA Grow is a supplemental support strategy that can be completed as part of ongoing Child Care Technical Assistance or Quality Counts programs.

LENA Grow is a data-driven, practice-based professional development program powered by LENA's "talk pedometer" technology to help early childhood educators improve classroom language environments equitably.

Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
⊠Yes -	□Yes	□Healthy and Safe	
	⊠No	□ Actively Supported by Their Families and Communities	
considered		⊠Arrive at School Ready to Reach Their Highest Potential	
evidence-			
Care			
Technical			
_			
	• •		
If monthly outputs in KITS, is client-level data require			
data required by	y model elsewhere, t	hen name of external data system(s):	
	If Ves Monthly	Outpute Data Pequired	
ted	ii Tes, Monthly	□Referrals Made	
□Books Distributed □Books Read		□Total Number of Health Screenings	
□Literacy Kits Given		□Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)		□Total Number of One-on-One Client Visit Hours	
□Families Served (unduplicated)		☐Group Meetings, Trainings, Events: Number of Sessions	
□Adult Family Members Served (unduplicated)		□Group Meetings, Trainings, Events: Number of Hours	
☑Providers Served (e.g., Schools, Centers)		Group Meetings, Trainings, Events: Total Attendance	
⊠Classrooms Served (unduplicated)		☑ Other (please specify): Number of Staff Participating	
	Based? Syes - Expenditures shall be considered evidence-based when connected with a Child Care Technical Assistance strategy. No Requirements It-level Motes in KITS, is client data required by ted iven erved (unduplicated) tembers Served (ed (e.g., Schools)	Based? Yes -	

Targeting Criteria: Who does this progra	ım target?
Child Care Provider Criteria	Child care programs participating in Child Care Coaching and Technical Assistance or Quality Counts programs with First Steps Local Partnerships.

Service Criteria: How is this program in	inlemented?
Visits	ipiernentea.
Visit Criteria 1: Duration	Coaching session should be 30-60 minutes.
Visit Criteria 2: Frequency 1	The program is delivered in a five-week sequence consisting of the following: • 5-week Reflective Feedback Cycle: Each week consists of a LENA Day, coaching session, and practice days. Feedback is supported by use of LENA Online, LENA Reports, and Coach and Teacher guides. • LENA Days: During a LENA Day, children wear the LENA device, so that teachers' interactive talk can be captured and measured. Data from this day is turned into a LENA report that is shared during the coaching session, enabling teachers to reflect on their practice and classroom equity. • Weekly Coaching and Feedback: Coaches use a strengths-based approach to ask questions and learn more about the teachers' experience. Then, teachers review the objective data from their own LENA Day. Reports show how much talk and interaction each child received, enabling teachers to reflect on their progress and set a clear goal for their next LENA Day. Coaches also introduce and model strategies that help increase talk during daily classroom routines. • Practice Days: These are the days between the coaching session and the next LENA Day. On these days, teachers practice what they've learned and work toward achieving their goal so that they will show measurable improvement on their next LENA Day.
Visit Criteria 2: Frequency 2	LENA Day: Once a week for the entirety of the day.
	Coaching Session: Once a week for the teacher(s) utilizing data from feedback reports and research-based strategies, reflection, and goal setting. Teachers practice strategies to work toward achieving their goal so they will show measurable improvement on their next LENA Day.
Visit Criteria 3: Location	LENA Days: In-person at the child care program.
	Coaching sessions: In-person, virtual, or hybrid conducted in a one-on-
	one or group format.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the		
	of the program year.	

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Child Care Technical	Maximum Number	N/A
	Assistance Provider	of Cases	
KITS Related Job Title or Role	Certified Technical	Minimum Education	Associates or two-year
	Assistance Provider	Level	degree
Required Certifications and/or	 Associates degre 	e in Early Childhood Education or a related	
Training	field		
	 At least two years 	s' experience in the field	d of Early Childhood
	Education		

 A partnership may seek a waiver in writing from their SC First
Steps Program Officer if an individual does not meet the above
work or school qualifications. In those cases, the SC First Steps
Early Care and Education team will assist the partnership in
additional onboarding and training of the new staff member.
 LENA provides all training and ongoing support virtually. Each
partner will be assigned a LENA Implementation Specialist, who
delivers training and supports program implementation.
 Ongoing guidance and support are provided to both Program
Managers and Coaches via the LENA Library and LENA Online.
More information can be found on the LENA Grow training site

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 quarterly (Quarterly Progress Reports)	
	to ensure model fidelity.	
Other Criteria 2	Materials: The LENA Grow Classroom sequence is procured through an	
	annual partnership agreement and includes everything needed to complete	
	the program. Materials are shipped directly to the participating classroom.	
	They include a Teacher Guide, The 14 Talking Tips and Conversation Starter	
	Posters, and LENA devices and clothing. Devices and clothing are easily	
	returned to LENA at the end of the sequence using a provided shipping label.	
	Coach Guides, LENA Online Subscription, and Ongoing Implementation	
	Support are provided with the partnership agreement. Additional Coach	
	Guides, Teacher Guides, and Posters are available for purchase. Access to	
	internet/cell service and a computer is necessary to use LENA Online.	

Program Name		Code	612
	Quality Counts (developed by Spartanburg First Steps)		
Program Area	Early Care and Education		

Quality Counts is a community-based, locally developed child care quality improvement strategy created and implemented by Spartanburg County First Steps. Quality Counts is designed to build and sustain high quality in early care and education programs using relationship-based technical assistance, mentoring, specialized training, and a director network.

Quality Counts is based upon a Continuous Quality Improvement (CQI) loop, which begins with a participating child care center/program's assessment using five standards: 1) Learning Environment, 2) Teacher: Child ratios and Group Size, 3) Staff Qualifications, 4) Program Management, and 5) Family Engagement. The total score of the assessment is then translated into a star rating level and programs are rated on a 1-5 star scale. Program success is measured by the center/program's progress in the five standards and advancement in their star rating level.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	⊠Yes	□Yes	⊠Healthy and Safe
□Children	□No	⊠No	☑Actively Supported by Their Families and Communities
□Adults			☑Arrive at School Ready to Reach Their Highest Potential
⊠Providers			
Data Collection Requirements			
In KITS: □Client-level □Monthly outputs □Child Care Provider			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this progra	am target?		
*Child Care Provider Criteria	Each participating child care provide shall be identified via competitive application with priority to providers:		
	 Located within the school attendance zone of (and/or enrolling primarily children attending) an individual elementary school rated "Below Average" or "Unsatisfactory" during the preceding three-year period or; In which 10% or more of enrolled students are SC Child Care Scholarships recipients or; Participating in a publicly-funding early care and education program (such as First Steps 4K). All participating child care programs, centers, faith-based, family home, and group home, must be licensed or registered with the 		
	 SC Department of Social Services (SC DSS). Registered family home providers receiving SC 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. 		
	 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 gross income at or below 85% of the state median income level.
 Centers participating in First Steps-funded technical assistance and coaching projects must permit the on-site delivery of "natural environment" services/therapies to children eligible under the Individuals with Disabilities Education Act (IDEA).
 It is strongly recommended that participant directors and classroom staff complete, or plan to complete, ECD 101 (or comparable coursework) as a condition of participation. Documentation of staff education levels and certifications are to be entered in the FSDC.

Service Criteria: How is this program implemented?			
Visits			
*Visit Criteria 1: Duration	Visits may span several hours in duration (no less than one hour) and entail multiple individual classroom visits.		
*Visit Criteria 2: Frequency	The following visit frequency is required for each star level: • 1-2 Star: 2-3 visits per month		
	 3 Star: Bi-weekly (2 visits per month) 4 Star: Monthly 5 Star: 1 visit per quarter (or more if requested by the program director) and phone call every 6 weeks 		
Visit Criteria 3: Location	Visits must occur in-person at the child care provider site. They may entail meeting with the administrator, an individual classroom visit, and/or multiple classroom visits. Visits may be supplemented, but not replaced, by additional phone consultation, email correspondence, and/or shorter drop in visits.		

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Workforce Criteria: Who are the service providers implementing this program?				
Program Role	Child Care Technical	Maximum Number	Varies based on	
	Assistance Provider	of Cases	provider size	
KITS Related Job Title or Role	Certified Technical	Minimum Education	Bachelors or four-year	
	Assistance Provider	Level	degree	
Required Certifications and/or	 5 years of experience 	ence in an Early Childhood setting		
Training	 4 year degree in E 	Early Childhood or a related field (if qualification		
	is not met, candidate my hold an Associates' Degree in Early			
	Childhood or related field and be working toward completion of 4 year degree).			
	 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	e, Quality Improvement	Plans, and Environment	
	Rating Scales.			

	: How are program participants screened and/or assessed?
*Assessment: Environmental Rating	
ERS Criteria 1	For each participating child care center, 50% of the classrooms, to be
	randomly selected, shall receive a baseline assessment with the appropriate
	Environment Rating Scale (ERS) within 2-4 weeks of enrollment in Quality
	Counts. Technical Assistance begins after the ERS assessments are
	complete and a Quality Improvement Plan (QIP) is developed.
ERS Criteria 2	Future ERS assessments will be completed according to the following
	schedule, as part of Quality Counts' five standard comprehensive
	assessment:
	Center/programs rated one to three stars will be assessed in the appropriate FRS event 12 months.
	the appropriate ERS every 12 months. • Center/programs rated four stars have a choice to be
	assessed in the appropriate ERS every 12 months OR every 18
	months.
	Center/programs rated five stars will be assessed in the
	appropriate ERS every 18 months.
ERS Criteria 3	Environment assessments must be conducted by assessors who have:
	1) Completed live introductory training and 4 days of guided practice
	observations at ERSI headquarters in Chapel Hill, NC on the appropriate ERS
	scale and has scored an average of 85% or higher over three consecutive
	days in the appropriate ERS scale.
	2) Participate in recertification reliability for 3-4 days at ERSI headquarters in
FDC Ouitouio 4	Chapel Hill, NC, every 18-24 months, with an average score of 85% or higher.
ERS Criteria 4	The baseline, post assessments, and the star rating determination must be
	completed by an assessor who meets the criteria listed above, has been
	trained on the Quality Counts model, and is not the assigned TA provider for the classroom.
	THE Classicom.
Success Criteria: How is success in	this program defined for participants?
Success Criteria 1	Child care provider advancement in South Carolina's quality rating and
	improvement system, ABC Quality.
Success Criteria 2	Child care provider improvement on the required Environment Rating Scales
	(from baseline to post assessment).
	,
Other Criteria: Are there other progr	am criteria that exist?
*Other Criteria 1	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.
Other Criteria 2	Pre and post satisfaction surveys of director and early educators who
	received technical assistance must be administered. The data collected by
	SC First Steps should be used for program improvement
Other Criteria 3	Quality Improvement Plans - Quality Counts TAs implementing Quality
	Counts will develop detailed Quality Improvement Plans for the child care
	center/program in partnership with each director after the center/program
	receives its star rating. These plans should be updated on an ongoing basis
	with records of site visits, deadlines, and completion dates for when goals are accomplished.
	are accomplished.
	Priority will be made to address regulatory issues and/or other serious
	issues of health and safety. The minimum components of
	Quality Improvement Plans are the following:
	A program vision statement developed at the initial planning
1	
	meeting between the center/program director and the

partnership Executive Director or the Quality Counts Program Director. Goals and action steps for the center/program based on data from the initial assessment that addresses the five Quality Counts standards that are specific, actionable, measurable, and time-bound. Goals may be program-wide or individualized by classroom. Trainings, strategies, and resources that the Technical Assistant will use to support the director, teacher(s), and/or staff. Quality Counts strategies shall collaborate and coordinate services with other agencies serving the center/program, including in developing the Quality Improvement Plan. Note: Technical Assistants must use the standardized Quality Improvement Plan template provided by SC First Steps. Other Criteria 4 **Director Network** - All center/program directors must participate in quarterly networking meetings coordinated and facilitated by the local partnership. Topics will be based on trends across center/programs, Quality Counts standards, Quality Improvement Plans, and self-identified needs of directors. Other Criteria 5 Integration with Child Care Training - Partnerships shall offer at least eight (8) hours of high-quality, certified training (stemming directly from the provider's Quality Improvement Plan(s)) to each director, teacher and teaching assistant. Specified trainings for individual center/programs may be offered as determined by the Technical Assistant. One training session, to take place after initial comprehensive assessment and star rating determination, must address the Environment Rating Scales. Training will be based on needs identified within the Quality Improvement Plan(s). The child care provider director must participate regularly in on-site TA and coaching visits and in at least 50% of staff training provided. Child care teaching staff shall be required to attend relevant training as a condition of their child care programs' participation. Trainings offered to client providers shall be attended by the partnership's technical assistance provider(s). Quality Counts TA staff shall make every effort to register content-specific consultation as center/program training as appropriate. Other Criteria 6 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 provided (and/or connected with) case management designed to assist each in his/her advancement along South Carolina's Early Childhood Career Lattice. Other Criteria 7 Quality Improvement Grant: A Quality Improvement Grant to center/programs, if provided, may not exceed \$5,000 annually for each center/program served, without the approval of SC First Steps. In all cases, purchases must be aligned with classroom needs as indicated by the

	environment assessment and the center/program's current Quality Improvement Plan.
Other Criteria 8	If a center/program demonstrates no growth in their cumulative star rating
	points in two years of program participation, the center/program will be
	terminated from the Quality Counts program.

Program Name		Code	703
	Child Care Scholarships		
Program Area	Early Care and Education		

Through SC Department of Social Services (SC DSS) - funded child care scholarships distributed by SC First Steps Local Partnerships, eligible children receive tuition-free enrollment at quality child care programs. These Child Care Scholarships are part of a special voucher category designated by SC DSS exclusively for SC First Steps families. To qualify for a scholarship, client parents or caregivers must be enrolled in an evidence-based program through a Local Partnership.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families ⊠Children □Adults □Providers		□Yes ⊠No	□ Healthy and Safe □ Actively Supported by Their Families and Communities ☑ Arrive at School Ready to Reach Their Highest Potential
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Birth to kindergarten entry.	
Note: All clients must participate in a First Steps evidence-based program.		
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?		
Criteria		
*Criteria 1	Scholarships connected to DSS via the Local Partnership must limit use to providers who are enrolled in the ABC Quality program and accept SC Vouchers.	
Criteria 2	Child care scholarship parents/guardians who are new to the program in the current fiscal year shall receive at least one hour of training on the benefits of high-quality child care.	

*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end	
	of the program year.	

Screening and Assessment Criteria: How are program participants screened and/or assessed?			
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3)			
ASQ-3 Criteria 1	The goal is 100% of children participants be screened within 60 days of		
	enrollment using the ASQ-3. 80% is the minimum requirement for		
	compliance.		
ASQ-3 Criteria 2	Children will be screened using the ASQ-3 on or approximately the		
	following ages: 4, 8, 12, 16, 20, 24, 30, 36, 42, 48, 54, and 60 months of age.		
ASQ-3 Criteria 3 If an outside agency has completed a developmental screening for a supporting documentation must be requested and saved to the child' and enter the scores into the First Steps Data System. Note the score from an outside source in the First Steps Data System. Rescreen at t next designated age			
ASQ-3 Criteria 5	If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age.		
Note: A child is exempt from being screened if the child:			
additional diagnostic evaluation. Referrals should be entered in the First Steps Data Collection System ASQ-3 Criteria 5 If a child scores in the monitoring range on the ASQ-3 in one or more categories and/or if there is a parental concern on the screening questionnaire, the parent educator will recommend activities to assist with the areas of possible concern, continue monitoring the child's development, and rescreen the child at the next designated age.			

Referral Criteria: What are this program's requirements for client referrals and connections?		
*Referral Criteria: Connections The goal is 100% of participants served should have at least one successful		
	connection per program year. 80% is the minimum requirement for compliance.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1 All data must be entered within the First Steps Data Collection System w		
	5 days of service. Data entries will be checked quarterly (Quarterly Progress	
	Reports) to ensure model fidelity.	
Other Criteria 2	SC 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 in the SC Voucher. 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.	

SCHOOL TRANSITIONS PROGRAMS

Program Name		Code	401
	Other School Transition Programming		
Program Area	School Transitions		

Other School Transition Programming is 4K or 5K school transition programming designed to support children and families as the target child transitions to school. They can look different for each partnership, based on family, school, and community needs.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	□Yes	⊠Yes	☐ Healthy and Safe	
⊠Children	⊠No	□No	☑Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection F	Requirements			
In KITS: □Clie	nt-level □M	Ionthly outputs (bas	ed on program model outlined)	
If monthly output	s in KITS, is clie	nt-level data required	by model elsewhere? □Yes □No	
If yes, client-level data required by model elsewhere,		y model elsewhere, th	nen name of external data system(s):	
If Yes, Monthl		If Yes, Monthly	Outputs Data Required	
□Books Distributed]	⊒Referrals Made	
□Books Read]	☐Total Number of Health Screenings	
□Literacy Kits Given]	□Total Number of One-on-One Client Visits	
□Children 0-5 Served (unduplicated)		ted)	□Total Number of One-on-One Client Visit Hours	
□Families Served (unduplicated)]	□Group Meetings, Trainings, Events: Number of Sessions	
□Adult Family Members Served (unduplicated)		(unduplicated)	□Group Meetings, Trainings, Events: Number of Hours	
□Providers Served (e.g., Schools, Centers)		, Centers)	□Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)		ted) [□Other (please specify):	

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Children entering a publicly funded 4K or 5K program in the upcoming school year.	
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 Visits are determined by program design but should include at least		
	monthly engagement (or the equivalent of monthly with the number of	
	visits during the program year) with children and/or families.	
*Visit Criteria 2	All partnerships must submit an implementation plan to include a	
	description of the program and its components. This plan will be	

submitted to the Program and Grants subcommittee for approval prior
to implementation.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve 1	*Reach Criteria: Projected to Serve 1 Local Partnerships must reach 75% of their projected to serve.	
*Reach Criteria: Projected to Serve 2 Deadline for entering Projected to Serve is March 31 of the same ye		
	program implementation.	

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Service Provider	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	Select one
		Level	
*Required Certifications and/or	Expertise in the topic that he/she is delivering. Training as determined		
Training	by their educational qualifications and experience.		

Program Name		Code	406
	Countdown to Kindergarten		
Program Area	School Transitions		

Countdown to Kindergarten is a summer school transition strategy designed to link incoming kindergartners and their families with the individual who will serve as their kindergarten teacher or kindergarten teaching assistant during the coming year.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	□Yes	⊠Yes	☐ Healthy and Safe	
⊠Children	⊠No	□No	☑Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection Requirements				
In KITS: ⊠Client-level □Monthly outputs				
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	Children entering a kindergarten (5K) program in the upcoming school		
	year.		
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.		

Visits (Home or Site):		
*Visit Criteria 1: Duration	Visits should last a minimum of 45 minutes.	
*Visit Criteria 2: Frequency 1	6 total visits.	
Note: Visits are one-on-one (one Countd	own Teacher, one child, and one or more parents/caregivers)	
*Visit Criteria 2: Frequency 2	The Countdown family personal visits can be scheduled flexibly, based upon the family and Countdown Teacher's schedules. The family personal visits must be made the summer before the child enters kindergarten. No more than one personal visit can be made per day and no more than 3 personal visits per week.	
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, elementary school, 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, and, in all instances, parents/caregivers must attend all personal visits and for their duration.

Visit Criteria 3: Location 2	The CTK curriculum must – without exception – include 1 meeting of
	parent(s)/caregiver(s) with the child's teacher at the school where the
	child will be attending kindergarten.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve 1	Local Partnerships must reach 50% of their projected to serve.	
*Reach Criteria: Projected to Serve 2	Deadline for entering Projected to Serve is March 31 of the same year as program implementation.	
*Reach Criteria: Projected to Serve 3	80% of children served must receive services by the child's soon to be kindergarten teacher or teacher assistant.	
Note: Exceptions can be made on a case-by-case basis, in the event of unusual circumstances that result in lower than 80% student-Countdown Teacher match.		

Retention Criteria: What are this program's goals for client retention? Retention Criteria 75% of families must be retained for six visits.

Workforce Criteria: Who are the service	providers implementing th	nie program?	
Program Role	Countdown to	Maximum Number	N/A
•	Kindergarten Teacher	of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or
		Level	GED
*Required Certifications and/or	100% of Countdown teachers must successfully complete the		
Training	Countdown to Kindergarten Online Teacher Training. Training is		
	available in late spring and can be completed online and on a		
	flexible schedule. Personal visits must not begin until successful		
	completion of the program final exam.		
	Countdown teachers must be certified teachers or teaching		
	assistants in the	state of SC.	

	· · · · · · · · · · · · · · · · · · ·			
Screening and Assessment Criteria: How are program participants screened and/or assessed?				
*Assessment 1: Parent Satisfaction Survey				
Parent Survey Criteria 1	At least 60% of parents should complete the satisfaction survey.			
Parent Survey Criteria 2	The online parent survey should be administered during the 5 th or 6 th personal visit.			
	personal visit.			
*Assessment 2: Teacher Satisfaction	Survey			
Teacher Survey Criteria 1	All Countdown teachers are expected to complete the survey.			
Teacher Survey Criteria 2	The online teacher survey should be completed following the Countdown			
teacher's completion of all personal visits.				

Other Criteria: Are there other progr	am criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System by		
	September 15 th of the program calendar year.		
Other Criteria 2	Data entry must indicate if a child received Countdown with Supports for		
	Multilingual Learners or Countdown with Supports for Students with		
	Disabilities.		
Other Criteria 3: Supports for Multilingual Learner Families	 A specialist fluent in the family's home language (Multilingual Specialist) collaborates with the Kindergarten Teacher to assure that the transition to kindergarten is smooth. The role of the Multilingual Specialist is to build trust with the family, support the family's relationships with the Kindergarten Teacher and school, and assist in helping the family secure needed resources. 		

	 Within the first 6 weeks of the start of school, the Multilingual Specialist makes two follow-up visits to assure that family needs are met and the transition to kindergarten has been smooth. When available, toolkit books will be provided to the family in their home language, in addition to English.
Other Criteria 4: Supports for Students with Disabilities	 The role of the Disabilities Specialist is to build trust with the family, support the family's relationships with the Kindergarten Teacher and school, and assist in helping the family secure needed resources. A specialist with training in and experience with young children with disabilities (Disabilities Specialist) will collaborate with the Kindergarten Teacher to assure that the transition to kindergarten is smooth. Within the first 6 weeks of the start of school, the Disabilities Specialist makes two follow-up phone calls to the family to assure their needs are met and the transition to kindergarten has been smooth. One valuable resource for support students with disabilities is Family Connection of South Carolina. Disabilities Specialists and Countdown Teachers working with children with disabilities are encouraged to explore their offerings. If adaptative materials of the toolkit are needed to accommodate the disability, every effort should be made to provide them.

Program Name		Code	407
	Countdown to Kindergarten – 4K		
Program Area	School Transitions		

visits and for their duration.

Countdown to Kindergarten is a summer school transition strategy designed to link incoming 4K students and their families with the individual who will serve as their 4K teacher or 4K teaching assistant during the coming year.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	□Yes	⊠Yes	☐ Healthy and Safe
⊠Children	⊠No	□No	⊠Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection Requirements			
In KITS: ⊠Client-level □Monthly outputs			
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □No			
If yes, client-level data required by model elsewhere, then name of external data system(s):			

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Children entering a publicly funded 4K program in the upcoming school	
	year.	
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 im Visits (Home or Site):	
*Visit Criteria 1: Duration	Visits should last a minimum of 45 minutes.
*Visit Criteria 2: Frequency 1	6 total visits.
Note: Visits are one-on-one (one Counto	lown Teacher, one child, and one or more parents/caregivers)
*Visit Criteria 2: Frequency 2 The Countdown family personal visits can be scheduled flexibly upon the family and Countdown Teacher's schedules. The family personal visits must be made the summer before the child enter kindergarten. No more than one personal visit can be made per no more than 3 personal visits per week.	
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 alternat location (a childcare center, family resource center, elementary so 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, and, in all instances, parents/caregivers must attend all personal	

The CTK curriculum must – without exception – include 1 meeting of
parent(s)/caregiver(s) with the child's teacher at the school where the
child will be attending 4K.

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve 1 Local Partnerships must reach 50% of their projected to serve.		
*Reach Criteria: Projected to Serve 2	Deadline for entering Projected to Serve is March 31 of the same year as	
	program implementation.	
*Reach Criteria: Projected to Serve 3	80% of children served must receive services by the child's soon to be	
	4K teacher or teacher assistant.	
Note: Exceptions can be made on a case-by-case basis, in the event of unusual circumstances that result in lower		
than 80% student-Countdown Teacher match.		

Retention Criteria: What are this program's goals for client retention? Retention Criteria 75% of families must be retained for six visits.

Workforce Criteria: Who are the service providers implementing this program?				
Program Role	Countdown to	Maximum Number	N/A	
	Kindergarten – 4K	of Cases		
	Teacher			
KITS Related Job Title or Role	Service Provider	Minimum Education	High School diploma or	
		Level	GED	
*Required Certifications and/or	 100% of Countdo 	wn teachers must succ	cessfully complete the	
Training	Countdown to Kir	ndergarten-4K Online To	eacher Training. Training	
	is available in late	e spring and can be cor	npleted online and on a	
	flexible schedule.	. Personal visits must n	ot begin until successful	
	completion of the program final exam.			
	 Countdown teachers must be certified teachers or teaching 		eachers or teaching	
	assistants in the	state of SC.		

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Assessment 1: Parent Satisfaction Survey		
Parent Survey Criteria 1 At least 60% of parents should complete the satisfaction survey.		
Parent Survey Criteria 2	The online parent survey should be administered during the 5 th or 6 th	
	personal visit.	
*Assessment 2: Teacher Satisfaction Survey		
Teacher Survey Criteria 1 All Countdown teachers are expected to complete the survey.		
Teacher Survey Criteria 2	The online teacher survey should be completed following the Countdown	
	teacher's completion of all personal visits.	

Other Criteria: Are there other program criteria that exist?			
*Other Criteria 1	All data must be entered within the First Steps Data Collection System by		
	September 15 th of the program calendar year.		
Other Criteria 2	Data entry must indicate if a child received Countdown with Supports for		
	Multilingual Learners or Countdown with Supports for Students with		
	Disabilities.		
Other Criteria 3: Supports for Multilingual Learner Families	 A specialist fluent in the family's home language (Multilingual Specialist) collaborates with the 4K Teacher to assure that the transition to 4K is smooth. The role of the Multilingual Specialist is to build trust with the family, support the family's relationships with the 4K Teacher and school, and assist in helping the family secure needed resources. 		

	 Within the first 6 weeks of the start of school, the Multilingual Specialist makes two follow-up visits to assure that family needs are met and the transition to 4K has been smooth. When available, toolkit books will be provided to the family in their home language, in addition to English.
Other Criteria 4: Supports for	 The role of the disabilities specialist is to build trust with the family,
Students with Disabilities	support the family's relationships with the 4K teacher and school,
	and assist in helping the family secure needed resources.
	 A specialist with training in and experience with young children with
	disabilities will collaborate with the 4K teacher to assure that the
	transition to 4K is smooth.
	 Within the first 6 weeks of the start of school, the disabilities
	specialist makes two follow-up phone calls to the family to assure
	their needs are met and the transition to 4K has been smooth.
	 One valuable resource for support students with disabilities is Family
	Connection of South Carolina. Disabilities Specialists and
	Countdown Teachers working with children with disabilities are
	encouraged to explore their offerings.
	 If adaptative materials of the toolkit are needed to accommodate the
	disability, every effort should be made to provide them.

HEALTH PROGRAMS

Program Name		Code	214
	Nurse Family Partnership		
Program Area	Health		

Nurse-Family Partnership (NFP) is a community health program designed to provide first-time moms with a supportive, caring relationship with their nurse through regular home visits from pregnancy to their child's second birthday. NFP strives to improve pregnancy outcomes, child health and development, and the economic self-sufficiency of the family.

Nurse home visitors use input from parents, nursing experience, nursing practice, and model-specific resources to promote low-income, first-time mothers' health during pregnancy, care of their child, and own personal growth and development.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
⊠Families	⊠Yes	⊠Yes	⊠Healthy and Safe	
□Children	□No	□No	☑ Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection F	Requirements			
In KITS: □Clie	nt-level ⊠Q	uarterly outputs		
If monthly output	ts in KITS, is clie	nt-level data required	l by model elsewhere? ⊠Yes □No	
If yes, client-level data required by model elsewhere, then name of external data system(s):			hen name of external data system(s): Efforts to Outcomes	
Data System (NFP Proprietary)				
If Yes, Monthly Out			Outputs Data Required	
□Books Distributed			⊠ Referrals Made	
□Books Read]	□Total Number of Health Screenings	
□Literacy Kits Given			⊠Total Number of One-on-One Client Visits	
⊠Children 0-5 Served (unduplicated)			⊠Total Number of One-on-One Client Visit Hours	
⊠Families Served (unduplicated)			□Group Meetings, Trainings, Events: Number of Sessions	
⊠Adult Family Members Served (unduplicated)		(unduplicated)	□Group Meetings, Trainings, Events: Number of Hours	
□Providers Served (e.g., Schools, Centers)		, Centers)	□Group Meetings, Trainings, Events: Total Attendance	
□Classrooms Served (unduplicated)		•	□Other (please specify):	
, , ,				

Targeting Criteria: Who does this program target?		
Age		
Age Criteria	Clients will be enrolled in the program prior to the end of the birthing	
	individual's 28th week of pregnancy.	
Risk Factors		
Risk Factor Criteria 1	Medicaid eligible and/or a family income that does not exceed 185% of	
	the federal poverty definition.	
Risk Factor Criteria 2	First-time mother.	

Service Criteria: How is this program im	nplemented?
Visits (Home or Site):	
Visit Criteria 1: Duration	60-90 minute sessions.

	Bi-weekly during pregnancy, monthly post-delivery, and as needed based on family needs.
Visit Criteria 3: Location	In-person or virtual.

Reach Criteria: What are this program's	goals for client reach
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end
	of the program year.

Retention Criteria: What are this program's goals for client retention? Retention Criteria | Services are delivered until the child is 2 years old.

Workforce Criteria: Who are the service	providers implementing th	nis program?	
Program Role	Nurse Home Visitor	Maximum Number	25
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	Bachelors or four-year
		Level	degree
Required Certifications and/or	Training is provided by N	urse Family Partnershi _l	o's national office and
Training	includes:		
		20 hours (22 for super	,
			s of face-to-face learning
	and practice		:
		e: 10 hours virtual learn	_
		d professional developı I Education: 20-30 addi	
			health, goal setting, and
	intimate parti		riealtii, goai settiiig, alid
	manate parti	ici violerioe	
	Additional education thro	ough the University of C	olorado:
		aregiving (6 hours)	
	 DANCE F 	undamentals (Dyadic A	ssessment of Natural
		ld Experiences), 24 cla	
	,	Colorado through the P	
		n after Keys to Caregivi	ng and about 9 months
	post-hire.		
	N 0 :		N1/A
Program Role	Nurse Supervisor	Maximum Number of Cases	N/A
KITS Related Job Title or Role	Site Supervisor	Minimum Education	Bachelors or four-year
KITS Related Job Title of Role	Site Supervisor	Level	degree
Required Certifications and/or	All trainings for nurse ho		degree
Training	Additional Supervisor Tra	-	
Tuming			n in Denver. Occurs 4-6
	months after Unit		
		ultation with a NFP Nur	se Consultant

Referral Criteria: What are this prog	ram's requirements for client referrals and connections?
Referral Criteria	Referrals are made based on family needs as determined by screenings and
	nurse evaluation.

Other Criteria: Are there other progr	am criteria that exist?
*Other Criteria 1	All data must be entered within the First Steps Data Collection Quarterly.

Other Criteria 2	NFP will be delivered according to program model guidelines including adherence to the 19 Nurse-Family Partnership Model Elements.
Other Criteria 3	Local partnerships will work with agency(ies) delivering NFP services to obtain written consent, for evaluation purposes only, from all clients receiving NFP services.

Program Name		Code	219
	Reach Out and Read		
Program Area	Health		

Reach Out and Read (ROR) is a nonprofit organization that seeks to improve family literacy through pediatric care settings. The program gives young children in low-income families a foundation for success by incorporating books into pediatric care settings and encouraging families to read aloud together. Intended outcomes are more frequent reading at home and improvements in children's language development.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
□Families	⊠Yes	□Yes	⊠Healthy and Safe
⊠Children	□No	⊠No	⊠Actively Supported by Their Families and Communities
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection F	Requirements		
In KITS: ⊠Clier	nt-level ⊠S	emiannual outputs	
If monthly output	s in KITS, is clie	nt-level data required	l by model elsewhere? □Yes ⊠No
If yes, client-level	data required by	y model elsewhere, t	hen name of external data system(s):
		If Yes, Monthly	Outputs Data Required
⊠Books Distribu	ted		□Referrals Made
□Books Read			□Total Number of Health Screenings
□Literacy Kits Gi	ven		□Total Number of One-on-One Client Visits
⊠Children 0-5 Se	erved (unduplica	ted)	□Total Number of One-on-One Client Visit Hours
□Families Serve	d (unduplicated)		□Group Meetings, Trainings, Events: Number of Sessions
□Adult Family M	lembers Served	(unduplicated)	□Group Meetings, Trainings, Events: Number of Hours
□Providers Serve	ed (e.g., Schools	, Centers)	□Group Meetings, Trainings, Events: Total Attendance
□Classrooms Se	rved (unduplicat		□Other (please specify):

Targeting Criteria: Who does this progra	am target?
Age	
Age Criteria	Prenatal to kindergarten entry.
Note: Patient in participating clinics.	
Risk Factors	
Risk Factor Criteria	Low-income and low literacy families.

Reach Criteria: What are this program's	goals for client reach
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end
	of the program year.

Other Criteria 1 All data must be entered within the First Steps Data Collection System. Data is usually received in March and September. Other Criteria 2: Client Responsibility • Clinic must be engaged, assessed for readiness in partnership with RC Carolinas office, and then apply for and be approved by the Reach Out and Read National Center. • In the application phase, clinics will identify a Medical Champion—the pediatric care MD, DO, NP, or PA who will champion the cause and: a. Ensure that Reach Out and Read best practices are implemented throughout the pediatric or family practice department. b. Foster discussion of and create support for efficient systems (book delivery to the exam room). c. Assure compliance with requisite online training by provider staff. d. Share relevant information with medical providers on early literacy and language development and Provider Bulletins that Reach Out and Read makes available from time to time. e. Act as the medical "face" of the program; connect with the executive leadership of the health center, clinic, or practice. • Clinic must follow all expectations of Reach Out and Read, including provider training, collecting routine data, and determining how books we be supplied. • Clinic/community partners must communicate with ROR of the
Clinic must be engaged, assessed for readiness in partnership with RC Carolinas office, and then apply for and be approved by the Reach Out and Read National Center. In the application phase, clinics will identify a Medical Champion—the pediatric care MD, DO, NP, or PA who will champion the cause and: a. Ensure that Reach Out and Read best practices are implemented throughout the pediatric or family practice department. b. Foster discussion of and create support for efficient systems (book delivery to the exam room). c. Assure compliance with requisite online training by provider staff. d. Share relevant information with medical providers on early literacy and language development and Provider Bulletins that Reach Out and Read makes available from time to time. e. Act as the medical "face" of the program; connect with the executive leadership of the health center, clinic, or practice. Clinic must follow all expectations of Reach Out and Read, including provider training, collecting routine data, and determining how books we be supplied.
Carolinas office, and then apply for and be approved by the Reach Out and Read National Center. In the application phase, clinics will identify a Medical Champion—the pediatric care MD, DO, NP, or PA who will champion the cause and: a. Ensure that Reach Out and Read best practices are implemented throughout the pediatric or family practice department. b. Foster discussion of and create support for efficient systems (book delivery to the exam room). c. Assure compliance with requisite online training by provider staff. d. Share relevant information with medical providers on early literacy and language development and Provider Bulletins that Reach Out and Read makes available from time to time. e. Act as the medical "face" of the program; connect with the executive leadership of the health center, clinic, or practice. Clinic must follow all expectations of Reach Out and Read, including provider training, collecting routine data, and determining how books view be supplied.
Carolinas to: a. Comply with all ROR intervention requirements and agreement as outlined in MOA. b. Communication with RORC team about program integration, including and funding available for programs. In the application phase, clinics will also identify the Program Coordinator—a staff member familiar with the clinic, staff, and patient population, and who will: a. Support the Medical Consultant and is responsible for administrative aspects. b. Order the books. c. Track the number of books distributed. d. Help to complete the semi-annual Progress Reports. e. Ensue a literacy-rich environment. f. Coordinate volunteer readers (if any).

Program Name		Code	901
	Health Services Coordination and Other Health Programming		
Program Area	Health		

Health Services Coordination and Other Health Programs are designed to coordinate services for children and families with community partners. Implementation of these programs are partnership specific.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	□Yes	□Yes	⊠Healthy and Safe	
⊠Children	⊠No	⊠No	⊠Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection F	Requirements			
In KITS: □Clie	nt-level ⊠M	Ionthly outputs		
If monthly output	ts in KITS, is clie	nt-level data required	by model elsewhere? □Yes ⊠No	
If yes, client-leve	data required b	y model elsewhere, th	nen name of external data system(s):	
		If Yes, Monthly	Outputs Data Required	
□Books Distributed □			⊠Referrals Made	
□Books Read			⊠Total Number of Health Screenings	
□Literacy Kits Given ⊠Total Number			⊠Total Number of One-on-One Client Visits, if applicable	
		ted)	⊠Total Number of One-on-One Client Visit Hours, if	
	⊠Families Served (unduplicated)		applicable	
⊠Adult Family M	⊠Adult Family Members Served (unduplicated)		☐ Group Meetings, Trainings, Events: Number of Sessions, if	
□Providers Served (e.g., Schools, Centers)		, Centers)	applicable	
□Classrooms Served (unduplicated)		ted)	⊠Group Meetings, Trainings, Events: Number of Hours, if	
(ŕ	applicable	
			⊠Group Meetings, Trainings, Events: Total Attendance, if	
			applicable.	
□Other (please specify):				

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 Prenatal to kindergarten entry.				

Service Criteria: How is this program implemented?				
Visits (Home or Site):				
Visit Criteria 1	Visits are determined by program design but should include at least			
monthly engagement (or the equivalent of monthly with the number				
	visits during the program year) with children and/or families.			
Visit Criteria 2 All partnerships must submit a "other health programs" impleme				
plan to include a description of the program and its component				
	plan will be submitted to the Program and Grants subcommittee for			
approval prior to implementation.				

Reach Criteria: What are this program's goals for client reach

*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end
	of the program year.

Workforce Criteria: Who are the service providers implementing this program?					
Program Role	Activity Provider	Maximum Number	N/A		
		of Cases			
KITS Related Job Title or Role	Service Provider	Minimum Education	Select one		
		Level			
*Required Certifications and/or	Experience in the topic that he/she is delivering. Training as determined				
Training	by their educational qualifications and experiences.				

Other Criteria: Are there other program criteria that exist?					
*Other Criteria 1	All data must be entered within the First Steps Data Collection System. Data entries will be checked quarterly (Quarterly Progress Reports) to ensure model fidelity.				

Program Name		Code	909
	Early Intervention and Referral		
Program Area	Health		

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

Important components are: 1) surveillance using validated screening tools (systematic monitoring through repeated screenings over time and as necessary to assure that screening results are current and accurate), and 2) navigational support (guiding families through institutional processes to obtain needed services).

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes	
□Families	⊠Yes	□Yes	⊠Healthy and Safe	
⊠Children	□No	⊠No	⊠Actively Supported by Their Families and Communities	
□Adults			⊠Arrive at School Ready to Reach Their Highest Potential	
□Providers				
Data Collection Requirements				
In KITS: ⊠Client-level □Monthly outputs				
If monthly outputs in KITS, is client-level data required by model elsewhere? □Yes □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	Prenatal to kindergarten entry.			
Risk Factors				
*Risk Factor Criteria	100% of families must have suspected delays in development.			

Reach Criteria: What are this program's goals for client reach				
*Reach Criteria: Projected to Serve	Local Partnerships must reach 75% of their projected to serve by the end			
of the program year.				

Workforce Criteria: Who are the service providers implementing this program?					
Program Role	Program Staff	Maximum Number	N/A		
		of Cases			
KITS Related Job Title or Role	Service Provider	Minimum Education	Associates or two-year		
		Level	degree		
*Required Certifications and/or	All Partnership staff involved in provision of developmental screening,				
Training					
	development of initial Individualized Family Service Plans and, for				
	children three to five years of age, Individual Education Plans shall:				
	Possess the minimum qualifications of an Associates Degree				
	and 3 years experience (course work contributions i.e.				
	psychology, sociology, data management, etc.).				
	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				
		r qualified personnel.	,		

 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.
 When possible, attend regional BabyNet Coordination
Team/Local Early Intervention system (LEIS) meetings.

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
*Screening 1: Ages and Stages Questionnaire Third Edition (ASQ-3) or other developmental screener		
Screener Criteria 1	Any child ages birth to 5 years with suspected delays in development will	
	be screened using an age-appropriate developmental screening tool (e.g.	
	Ages & Stages III, Ages and Stages SE-2, Parent Evaluation of	
	Developmental Status, Battelle Developmental Inventory-2 Screener.	
Screener Criteria 2	If an outside agency has completed a developmental screening for a child,	
	supporting documentation must be requested and saved to the child's file,	
	and enter the scores into the First Steps Data System. Note the scores are	
	from an outside source in the First Steps Data System.	
Screener Criteria 3	If a developmental screening indicates a possible developmental delay,	
	the program staff shall collaborate with parents/guardians to seek the	
	consensual provision of these results to:	
	i. child's pediatric care provider	
	ii. either BabyNet (ages 0-3) or the child's zoned school district) for	
0	additional diagnostic evaluation.	
Screener Criteria 4	Referrals should be entered in the First Steps Data Collection System	
	within 5 days of developmental screening. Partnerships and their staff 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.	
	appropriate connections have been established.	
*Screening 2: Modified Checklist for A	Autism in Children (M-CHAT)	
M-CHAT Criteria	The Modified Checklist for Autism in Toddlers (M-CHAT), a validated	
in orbit official	autism development screening tool for toddlers between 16 and 30	
	months of age, is to be administered at 18 and 24 months of age.	
*Screening 3: Health Screenings		
Health Screenings Criteria	Additional screenings, functional hearing and vison assessments, and/or	
	use of milestone checklists, are encouraged for comprehensive	
	screenings. All assessments administered shall be documented and	
	administered in accordance with assessment instructions.	

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria 1: Referrals	Program staff shall seek to ensure that each participating family connects with a pediatric medical home and other community services as appropriate.	
	Program staff shall utilize client risk factors, as well as screening/assessment results and results of client interactions, to refer and connect clients to services they may need or want in order to strengthen their families and provide optimal development for their preschool children.	
*Referral Criteria 2: Connections	The goal is 100% of participants served should have at least one successful connection per program year. 80% is the minimum requirement for compliance.	

Other Criteria: Are there other progr	
*Other Criteria 1	All data must be entered within the First Steps Data Collection System within
	5 days of service. Data entries will be checked quarterly (Quarterly Progress
	Reports) to ensure model fidelity.
Other Criteria 2: Coordination	For children aged 0 to 34.5 months:
with BabyNet and/or School District Systems	In the event that a developmental screening or assessment indicates a possible developmental delay, the Partnership shall refer the family to the local BabyNet System Point of Entry Office. The referral must be made as soon as possible, but no later than 7 days after the possible delay has been identified. No consent is required to make the referral, but a conversation with the family prior to making the referral usually helps facilitate the process.
	For children 34.5 to 60 months: In the event that a developmental screening) indicates a possible developmental delay, the Partnership shall refer the family to the local school district to determine eligibility for IDEA Part B services. Written parental consent is required.
	In those cases, in which the child is between the ages of 30 and 34.5 months referrals to both the local BabyNet System Point of Entry Office AND the local school are recommended. • Ideally, the local BabyNet System Point of Entry Office, with parental consent, will notify the Partnership of each child's BabyNet eligibility status. In the case in which children were determined to be ineligible for BabyNet, Partnership staff shall connect the family to facilitate referral to appropriate local early learning resources, including but not limited to:First Steps Local Partnership services • Help Me Grow • Early Head Start
	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 six years of age within the partnership's service area, with family consent.

Program Name		Code	910
	HealthySteps		
Program Area	Health		

HealthySteps is an evidence-based, team-based pediatric primary care program that serves children birth to three. The program model consists of 8 core components that promote the health, well-being, and school readiness of babies and toddlers, with an emphasis on families living in low-income communities.

The program is led by the HealthySteps Specialist, who joins the pediatric primary care team to ensure universal screening, successful interventions, referrals, and overall familial health. The HealthySteps Model consists of the following 8 Core Components: 1) Child Development, Socio-emotional, and Behavioral Screening; 2) Screening for Family Needs (i.e., maternal depression, other risk factors, social determinants of health); 3) Child development support line (i.e., phone, text, email, online portal); 4) Child Development and Behavior Consults; 5) Care Coordination and Systems Navigation; 6) Positive Parenting Guidance and Information; 7) Early Learning Resources; and 8) Ongoing Preventive Team Based Well-Child Visits.

Unit of Service	Evidence	High Intensity?	Expected First Steps' Child-Level Outcomes		
Offic of Service	Based?	riigii iiiteiisity:	Expected i fist steps offind Level outcomes		
□Families	⊠Yes	⊠Yes (Tiers 2	⊠Healthy and Safe		
⊠Children	□No	and 3)	☑Actively Supported by Their Families and Communities		
□Adults		□No	⊠Arrive at School Ready to Reach Their Highest Potential		
□Providers					
Data Collection F	Requirements				
In KITS: □Clie	nt-level ⊠M	Ionthly outputs			
If monthly output	s in KITS, is clie	nt-level data required	by model elsewhere? ⊠Yes □No		
		y model elsewhere, th	nen name of external data system(s): Welly – HealthySteps		
data managemer	data management system.				
	If Yes, Monthly Outputs Data Required				
□Books Distributed			⊠Referrals Made		
□Books Read			☑Total Number of Health Screenings		
□Literacy Kits Given			□Total Number of One-on-One Client Visits		
⊠Children 0-5 Served (unduplicated)		ted)	☐ Total Number of One-on-One Client Visit Hours		
□Families Served (unduplicated)		[□Group Meetings, Trainings, Events: Number of Sessions		
□Adult Family Members Served (unduplicated)		(unduplicated)	□Group Meetings, Trainings, Events: Number of Hours		
□Providers Served (e.g., Schools, Centers)		, Centers)	□Group Meetings, Trainings, Events: Total Attendance		
□Classrooms Served (unduplicated)		· _	☑Other (please specify): Other Program Specific		
, , ,			Screenings		

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 Birth to 3 years old.		

Service Criteria: How is this program implemented?		
Visits (Home or Site):		
Visit Criteria As outlined in the HealthySteps model standards, dependent on family		
needs.		

Reach Criteria: What are this program's goals for client reach		
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the en		
of the program year.		

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Healthy Steps	Maximum Number	N/A
	Specialist	of Cases	
KITS Related Job Title or Role	Other	Minimum Education	Bachelors or four-year
		Level	degree
*Required Certifications and/or	The HealthySteps Specialist should be an individual with early childhood		
Training	development experience (i.e., social workers, psychologists, early		
	childhood educators, nurses), preferably with an infant and early		
	childhood mental health/development background. Trainings specific to		
	the HealthySteps model will be provided by the HealthySteps National		
	Office as part of the HealthySteps Institute and ongoing technical		
	assistance.		

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
Screenings		
Screenings Criteria Developmental, social-emotional, autism and maternal depression		
screenings are critical components of the HealthySteps model		

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria: Referrals Given the risk factor profile of clients/families served by First Steps, it is expected that most clients will be connected to services in addition to this		
	program.	

Other Criteria: Are there other progr	am criteria that evict?	
*Other Criteria 1	All data must be entered within the First Steps Data Collection System. Data entries will be checked quarterly (Quarterly Progress Reports) to ensure model fidelity.	
Other Criteria 2: Clinic Responsibilities	 Clinics must be assessed for readiness in partnership with the HealthySteps National Office, and then apply for and be approved by the HealthySteps National Office Clinics must follow all expectations of HealthySteps National Office, including: HealthySteps Institute training developing and maintaining an implementation plan achieving fidelity annual site reporting Clinics/community partners must communicate with the Health Steps National Office to: complete an initial consultation and practice assessment comply with all HealthySteps intervention requirements and agreements, as outlined in MOA continue consultation regarding fidelity and sustainability finalize implementation plan provide annual reports In the application phase, clinics will identify a Physician Champion (pediatric care MD or NP who will champion the cause) and ensure that HealthySteps (HS) best practices are implemented throughout the pediatric or family practice department. 	

- b. ensure that most, preferably all, team members attend Healthy Steps Institute training.
- Clinics will obtain written consent that allows a Healthy Steps Specialist to share the clients Protected Health Information with the SC Office of Revenue and Fiscal Affairs and SC First Steps for evaluation purposes only from all clients receiving Healthy Steps services.
- Clinics will share clinic-level outcomes with SC First Steps, including, but not limited to, agreed upon HEDIS metrics, upon request.

• HealthySteps Specialists

- a. Identify and hire a HealthySteps Specialist (HSS) —a staff member with early childhood development experience (i.e., social workers, psychologists, early childhood educators, nurses), preferably with an infant and early childhood mental health/development background with support from the Local First Steps Partnership.
- The HSS (and any other provider) will enter all data for children receiving Healthy Steps services, to include the patient's medical record or electronic health record number, into Welly, the Healthy Steps data management system. Training will be provided on Welly by HealthySteps national office.
- c. The HSS, in coordination with, and supervision from, the Medical Provider will:
 - (i) Support the medical practice and be responsible for administrative aspects of fulfilling the HS model.
 - (ii) Participate fully in the HealthySteps Institute and become certified in the HSS model.
 - (iii) Carry out all HSS duties to include tier 1, tier 2, and tier 3 services, as needed, for all families with children 0-3 in the clinic.
 - (iv) Maintain connections with community agencies for referrals and consulting.
 - (v) Participate in regular HS team meetings as scheduled, to include reflective supervision meetings with identified responsible parties.
 - (vi) Complete all reporting requirements for both Healthy Steps National and SCFS.

Other Criteria 3: Local Partnership Responsibilities

- Support the HSS with making up-to-date referrals to community and consulting resources that support HS families
- Collect and review output and qualitative data from the quarterly and annual HS reports.
- Participate in monthly SCFS HS team meetings, and other statewide meetings, to discuss progress and provide support across implementing sites.
- Support Healthy Steps families through the HSS with wrap around services to include, but not limited to:
 - a. making referrals and connections to community resources, community convening of pediatric healthcare service providers (Community Café's)
 - b. mobilizing community support to ensure consistent and coordinated pediatric medical care

C.	increased well-child visits, immunization, and oral health	ation, and oral health
	recommendations.	

- d. improved access to screening, identification, and referral for needed health, early intervention, and/or disability services.
- Assist and support the HSS in eliminating barriers and other challenges associated with program implementation based on report reviews and team meetings.
- Prioritize the implementation of other services, focusing on South Carolina's Birth through Five Plan strategies, Reach Out and Read, and others, to health care providers partnering in Healthy Steps.

Program Name		Code	911
	Family Connects		
Program Area	Health		

Family Connects is a nurse-based approach to supporting newborns and their families through nurse home visits, connecting families to services in the community, and supporting families with an individual approach to care. All families with children birth up to 6 months are eligible for services. Family Connects works with communities to establish implementation and sustainability plans, help establish community networks, and provides training for nurses who will conduct home visits.

Unit of Service	Evidence Based?	High Intensity?	Expected First Steps' Child-Level Outcomes
⊠Families	⊠Yes	□Yes	⊠Healthy and Safe
□Children	□No	⊠No	☑Actively Supported by Their Families and Communities
□Adults			☐ Arrive at School Ready to Reach Their Highest Potential
□Providers			
Data Collection F	Requirements		
In KITS: □Clie	nt-level ⊠N	Ionthly outputs	
If monthly output	s in KITS, is clie	nt-level data required	by model elsewhere? ⊠Yes □No
			nen name of external data system(s): Family Connects
database; hospit	al system electro	onic health records.	
If Yes, Monthl		If Yes, Monthly	Outputs Data Required
□Books Distributed]	⊠Referrals Made
□Books Read]	□Total Number of Health Screenings
□Literacy Kits Given]	⊠Total Number of One-on-One Client Visits
⊠Children 0-5 Served (unduplicated)		ted)	□Total Number of One-on-One Client Visit Hours
⊠Families Served (unduplicated)			□Group Meetings, Trainings, Events: Number of Sessions
□Adult Family Members Served (unduplicated)		(unduplicated)	□Group Meetings, Trainings, Events: Number of Hours
□Providers Served (e.g., Schools, Centers)		, Centers)	□Group Meetings, Trainings, Events: Total Attendance
□Classrooms Served (unduplicated)		•	□Other (please specify):

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 Birth to 6 months old.	

Service Criteria: How is this program implemented?		
Visits (Home or Site):		
Visit Criteria 1: Duration	The home visit should be 90-120 minutes.	
Visit Criteria 2: Frequency	Visit Criteria 2: Frequency One introductory visit in the hospital. One home visit scheduled within weeks of birth of child. Additional visits (1-2) can be scheduled based on family need.	
Visit Criteria 3: Location	Participants home.	

Reach Criteria: What are this program's goals for client reach	
*Reach Criteria: Projected to Serve Local Partnerships must reach 75% of their projected to serve by the er	
of the program year.	

Workforce Criteria: Who are the service providers implementing this program?			
Program Role	Nurse Home Visitor	Maximum Number	N/A
		of Cases	
KITS Related Job Title or Role	Service Provider	Minimum Education	Bachelors or four-year
		Level	degree
*Required Certifications and/or Training	Nurse home visitors and with an active license in t require, that nurse home degree and that nurse su hold a master's degree.	heir state. FCI recomm visitors and data mana	ends, but does not gers hold a bachelor's
	Nurse home visitors and training of the Family Con included as part of the Fa	nnects model. In-servic	e training is also
Note: Community alignment specialists must hold a bachelor's degree, although a master's degree is preferred, and program support coordinators must hold a high school diploma, although a bachelor's degree is preferred.			

Screening and Assessment Criteria: How are program participants screened and/or assessed?		
Screening: Family Connects Screening Tool		
Screenings Criteria Caregiver, child, and environment screening tool proprietary to Family		
	Connects International.	

Referral Criteria: What are this program's requirements for client referrals and connections?		
Referral Criteria: Referrals Nurses shall refer and connect families to services that they need may nee		
	or want to strengthen their families and provide optimal development for	
	their preschool children.	
Referral Criteria: Connections	50% of families served must have at least one successful connection per	
	program year.	

Other Criteria: Are there other program criteria that exist?		
*Other Criteria 1	All data must be entered within the First Steps Data Collection System. Data	
	entries will be checked quarterly (Quarterly Progress Reports) to ensure	
	model fidelity.	
Other Criteria 2: Partner	Establishing a Family Connects Site:	
Responsibilities	a. To establish a Family Connects site, a partnership must	
	establish a relationship with a medical/healthcare system.	
	b. The Family Connects site must be engaged, assessed for readiness in partnership with Family Connects International and then apply for and be certified by the	
	Family Connects International Office. Start-up to certification is usually a 2-year process.	
	c. FC Sites must follow the expectations of Family	
	Connects International, including FCI training, developing and maintaining an Implementation Plan, achieving	
	fidelity, and data monitoring and reporting.	
	d. Sites will also identify several key positions to lead the	
	Family Connects Program: An Executive Director (can be	
	% time), A Community Alignment Specialist, Nursing	
	Supervisor, Nurse Home Visitor(s), and other support staff	
	as needed, including a partnership with a Medical Director (MD).	

	 e. FCI also requires that program sites include a community alignment specialist to identify community resources and align the program with those resources. f. Family Connects can be housed in a variety of settings, but usually includes a nurse supervisor and nurse home visitors, a community alignment specialist, and other roles depending on the size of the delivery area. 		
	 Site/community partners must communicate with Family Connects International to: a. Develop and maintain a community advisory board (CAB). b. Develop a plan for implementation. c. Comply with all FCI intervention requirements and agreements, as outlined in MOA. d. Continue consultation regarding fidelity and sustainability. e. Finalize implementation plan. 		
	 f. Provide annual reports. Clinics will obtain written consent for evaluation purposes only from all clients receiving Family Connects services. 		
Other Criteria 3: Local Partnership Responsibilities	 Collect and review output data from the monthly and annual Family Connects reports and provide data to SC First Steps. Assist and support the Family Connects staff in eliminating barriers and other challenges associated with program implementation based on report reviews and team meetings. 		

APPENDICES

Appendix A: Formula Funding Reduction Levels

FORMULA FUNDING REDUCTION LEVELS

At any time during the year a Local Partnership may come under a Corrective Action Plan (CAP). As these processes take place, there is a wide variety of possible outcomes over different periods of time. Once a Local Partnership is moved to a level where there is a financial impact, their Allocation will be impacted in that period as appropriate for the specific situation. A Local Partnership may move through multiple levels in a single year or period and the impact may occur at that time without waiting until a future period depending on the specific situation. At least two times during each year a formal review will take place that might generate a CAP, but a CAP with a financial penalty could occur at any time depending on the specific situation and the violation.

Any financial penalty would not normally be a surprise to the Local Partnership as it would be part of an ongoing CAP or other action. If there is a financial penalty accessed by the Board of Trustees, each Local Partnership is welcome to request time either in a meeting of the appropriate Committee, or of the Board of Trustees to reconsider its actions.

SATISFACTORY

- Successful Operations
 - No Corrective Action Plans
 - o Can apply for Targeted and Competitive Grants

UN-SATISFACTORY

Level 1 Under Corrective Action Plan

- Have established a Corrective Action Plan and is working on completing it successfully:
- Must have a direct conversation with the full local partnership Board by either the Chief Partnership
 Officer or the Chair of the Programs and Grants Committee
- Cannot be awarded a Targeted or Competitive Grant
- No change in Formula Funding

Level 2 Failure to Complete or Create a Corrective Action Plan

- Have established a Corrective Action Plan and is not meeting their plan requirements or have not established a Corrective Action Plan as required.
- Cannot be awarded a Targeted or Competitive Grant
- Certain issues require a reduction in funding. Includes:
 - Failure to meet match two years in a row
 - Failure to meet the 15% Carryforward Requirement two years in a row
 - Additional failures in specific situations recommended by First Steps Staff based on ongoing or repeat Corrective Action Plans (appropriate percentage to be determined)
- o Reductions can be as much as 5% of the total formula funding
- Must be Approved by Board of Trustees
- Impact on services to children will be minimized by identifying and funding alternative delivery sources to the best of the Board's ability

Level 3 Default on Grant Agreement and First Steps Policies

- Local Partnership exceeds the set administrative rate (per statute)
- Local Partnership is in default of the Grant Agreement and is not adequately correcting the deficiencies (per statute and the Grant Agreement)
- Elimination of Formula Funding
- Approved by Board of Trustees
- o Impact on services to children will be minimized by identifying and funding alternative delivery sources to the best of the Board's ability

Appendix B: Consent and Authorization Forms

CONSENT TO RECEIVE SERVICES AND TO PROVIDE MINIMALLY SUFFICIENT DATA FOR SERVICE PROVISION AND EVALUATION

The program(s) in which you are choosing to voluntarily participate receive funding from South Carolina First Steps, a statewide government and non-profit agency, whose mission is for all children to start school ready to reach their highest potential. To receive money from the South Carolina General Assembly, South Carolina First Steps is required to evaluate the impact of its programs. For this reason, participating families are required to submit certain data that can be used to ensure the program(s)/services meet standards, intended outcomes, and other requirements.

Below, please provide information about you and your child, to include names, age, and contact information. South Carolina First Steps may collect additional information during the program services. This information may include types and amounts of services; dates of program participation; reason for ending services; assessment and screening data; descriptive information about your family. Please be assured that this information will be kept secure and confidential. This information will be maintained in a password-protected database. Only authorized, trained staff will have access to this information. Individual names and/or identities will never appear in any public report. This information will be used only for aggregate reports (statistical analyses about groups of people).

	ror aggregate report	- (0:00:00:00:		ILD INFORMATION			
		Child	s Name		Date of Bir	th/Due Date	
	Last, First, Middle					/	
Gender					unty		
□Male □Female	□Yes □No	Native □Asian	n Indian/Alaska rican American	□Native Hawaiian/Other Pacific Islander □White			
				's Primary Residence			
		Physical S	treet Address		City, Z	p Code	
			CAREC	GIVER INFORMATION			
Parent/Guardian's Name			Relationsl □Parent (biological, adoptive, or step)	nip to Child □Grandparent □Other relative			
		Last, Fi	st, Middle		☐Foster parent	☐Other non-relative	
Gender	Hispanic/Latino		Race (Select	all that Apply)	Date o	Date of Birth	
□Male □Female	□Yes □No	Native □Asian	n Indian/Alaska rican American	□Native Hawaiian/Other Pacific Islander □White	/_ MM / DD	/ / YYYY	
		Email	Address		Primary Contac	Primary Contact Phone Number	
						□Mobile	
					XXX - XXX - XXXX	□Home □Work	
	Annual Household Income Range				y Resides With		
□<\$10,000 □\$20,000-<\$25,000 □\$35,000-<\$40,000 □\$50,000+		☐Both parents	☐Other relative(s)				
□\$10,000-<\$15,000 □\$25,000-<\$30,000 □\$40,000-<\$45,000 □\$15,000-<\$20,000 □\$30,000-<\$35,000 □\$45,000-<\$50,000		□One parent	□Other non-				
_\$15,000-<	\$20,000 🗆 \$30,00	10-<\$35,000		AM(S) FOR CONSENT		relative(s)	
	Program Name			Program Name	Program	n Name	
	Program Name			Program Name		Program Name	
	9			-	5		

- I agree that I am choosing for me, my family, and/or children in my care to voluntarily participate in the program(s) listed above.
- I understand that I can end the services at any time and that leaving does not impact my ability to receive services in the future.
- I understand that I may be asked to sign an additional participation agreement to receive services.
- I understand that if I do not consent, services will not be provided.
- I understand that I must provide a minimal amount of information to South Carolina First Steps and the service providers. The information collected about me, my family, and/or children in my care is used to ensure that state funds are being used effectively and efficiently, and to evaluate the program's reach and impact.
- I give permission for this data to be collected and stored by South Carolina First Steps and its service providers.
- I give permission to South Carolina First Steps to use information about me, my family, and/or children in my care in reports to assist with the evaluation of South Carolina First Steps and its programs.
- I understand that I can choose to withdraw my permission at any time, except to the extent that action has already been taken.

By signing below, I agree that I have read and understand the terms and informati	on contained in this document.	
Signature of Parent/Guardian:	Date:	 Version 1.1 (July 2023)

AUTHORIZATION FOR DATA SHARING

As a condition of receiving money from the South Carolina General Assembly, South Carolina First Steps is required to evaluate the impact of its programs. For these reasons, South Carolina First Steps oftentimes shares a minimal amount of information with other state government agencies, as needed. The purpose of this form is for your permission to share information collected by South Carolina First Steps as with other state government agencies.

3	3		
 I unders Drive, C I unders I unders I unders I unders I unders I unders By signing be my permission that I unders 	rmission is effective immediately and ends five year stand that I may withdraw my permission at any time folumbia, SC 29201). If I do not write to South Carol stand that I may receive services even if I do not autistand that if confidential* data/information is shared stand that confidential* data/information will not be seed secribed above. Stand that confidential* data/information will only be seed that I have read and understand the term to South Carolina First Steps to release my confidential data aformation: name, address, county of residence, gen	te by writing to South Carolina South Calina South Carolina First Steps, this perithorize my information to be shared. d, I have a right to ask for a copy of the eshared other than as required by application and information contained in this dedential* data/information for the limited may include, but is not limited to, data	confidential* data/information. cable state and federal law or for the sary purposes. coument. By signing below, I also give d purposes described above and agree
	Parent/Guardian:	Date:	
First Step receive no By signi the info	consence you with the best possible services, we occasionally some than two text messages per month from Source than two text messages and the Carolina First Steps and its associates:	or you to provide feedback and opinions uth Carolina First Steps. You can opt ou By signing below, I confirm th	s. Within any month, you can plan to it of being contacted at any time. at I have read and understand the to receive phone calls from South
Signatu	e Date	Signature	Date
(i.e. First record ch photos ar drawing c without m By checki Carolina I South Ca	rolina First Steps, to include all South Carolina First Steps 4K, Palmetto Pre-K, First5 SC, First Steps Ame ildren served by its programs. These photos and/or ad/or recordings may appear on the South Carolina for other illustrative graphic material, audio-visual tappy prior examination or approval of the finished produced in the steps. The steps was permission to use such photographs colina First Steps considers the intended use to be in	eriCorps, and the SC Early Childhood Ac recordings may appear on printed or p First Steps website or be used for train be or audio-visual illustration, news repo duct. Steps and any other agencies or organi I understand South Carolina First Step in good taste and appropriate to the go	dvisory Council), may take photos or romotional materials. Additionally, ing. Any photograph, recording, ort, story or article may be used zations associated with South os may give permission only where als of South Carolina First Steps. By
checking person(s) [] YES.I Carolina I	below, I also agree and understand that South Carol in the use of the photographs. agree to the reproduction and release of photograph First Steps as indicated above. do not agree to the reproduction and release of photograph rolina First Steps as indicated above.	lina First Steps will not be required to in	ofs of my child for use by South
Signature	of Parent/Guardian:	Date:	

CONSENTIMIENTO PARA RECIBIR SERVICIOS Y PROPORCIONAR LOS DATOS MÍNIMAMENTE NECESARIOS PARA LA PRESTACIÓN Y EVALUACIÓN DEL SERVICIO

El(los) programa(s) en el(los) que elige participar voluntariamente recibe(n) fondos de South Carolina First Steps, una agencia estatal sin fines de lucro, cuya misión es que todos los niños comiencen la escuela listos para alcanzar su máximo potencial. Para recibir dinero de la Asamblea General de Carolina del Sur, South Carolina First Steps debe evaluar el impacto de sus programas. Por esta razón, las familias participantes deben enviar ciertos datos que pueden usarse para garantizar que el(los) programa(s)/servicios cumplan con los estándares, los resultados previstos y otros requisitos.

A continuación, proporcione información sobre usted y su hijo(a), incluidos los nombres, la edad y la información de contacto. South Carolina First Steps puede recopilar información adicional durante los servicios del programa. Esta información puede incluir tipos y cantidades de servicios, fechas de participación en el programa, motivo para finalizar los servicios, datos de evaluación y detección, información descriptiva sobre su familia. Tenga la seguridad de que esta información se mantendrá segura y confidencial. Esta información se mantendrá en una base de datos protegida por contraseña. Solo el personal capacitado y autorizado tendrá acceso a esta información. Los nombres y/o identidades individuales nunca aparecerán en ningún informe público. Esta información se usará solo para informes globales (análisis estadísticos sobre grupos de personas).

<u> </u>					ÓN DEL NIÑO	grapes de persona	-,
		Nombr	e del niño			Fecha de nacimiento/F	echa de parto
						//	
			nbre, segundo nor			DD / MM /	AAAA
Género	Hispano/latino	Raz	a (Seleccione tod	o lo qu	e corresponda)	Condado	
□Masculino	□Sí		stadounidense/		itivo de Hawái/de otra		
□Femenino	□No	nativo de	e Alaska	-	a del Pacífico		
		□Asiático	roomorioono		anco		
		□ Negro/ai	roamericano	noia pr	incipal del niño		
		Diroco	ión física	пста рг	incipal del fillio	Ciudad, código	noctal
		Direct	ion nsica			Ciddad, Codigo	Jostai
			INFORM	ACIÓN	DEL CUIDADOR		
	N	lombre del pa	dre/madre/tutor			Relación con el niño	
						□Padre/madre	□Abuelo/a
		<u>.</u>				(biológico, adoptivo,	\square Otro familiar
	Apellia	o, primer non	nbre, segundo nor	nbre		padrastro/madrastra)	\square Otro, no familiar
04	11:	D	- (0-1:			☐ Padre/madre de acogida	
Género □Masculino	Hispano/latino □Sí		a (Seleccione tod		•	Fecha de nacin	niento
□Femenino	□No	nativo es	stadounidense/ □Nativo de Hawái/de otra e Alaska isla del Pacífico		, ,		
		□Asiático	: AldSKd			//_ DD / MM /	AAAA
			roamericano		1100		
	D		orreo electrónico			Número telefónico del co	ntacto principal
							□Celular ·
						XXX - XXX - XXXX	□Casa
						XXX - XXX - XXXX	□Trabajo
Rango de ingresos a			s anuales del hog	ar		El niño reside princip	
□<\$10,000 □\$20,000-<\$25,000				□Más de \$50,000	□Ambos padres □Otr		
□\$10,000-<\$1			□\$40,000-<\$4			☐Uno de los padres ☐Otr	o(s), no familiar(es)
□\$15,000-<\$20,000 □\$30,000-<\$35,000 □\$					QUE SE DA EL CONSENT	IMIENTO	
Man	nhra dal program						aromo
	nbre del programa				l programa	Nombre del pro	-
	nbre del programa				l programa	Nombre del pro	

- Acepto que elijo que yo, mi familia y/o los niños bajo mi cuidado participen voluntariamente en el(los) programa(s) mencionado(s)
 anteriormente.
- Entiendo que puedo finalizar los servicios en cualquier momento y que hacerlo no afecta mi capacidad para recibir servicios en el futuro.
- Entiendo que se me puede pedir que firme un acuerdo de participación adicional para recibir servicios.
- Entiendo que si no doy mi consentimiento, los servicios no serán proporcionados.
- Entiendo que debo proporcionar una cantidad mínima de información a South Carolina First Steps y a los proveedores de servicios. La información recopilada sobre mí, mi familia y/o los niños bajo mi cuidado se usa para garantizar que los fondos estatales se usen de manera eficaz y eficiente, y para evaluar el alcance y el impacto del programa.
- Doy permiso para que South Carolina First Steps y sus proveedores de servicios recopilen y almacenen estos datos.
- Doy permiso a South Carolina First Steps para usar información sobre mí, mi familia y/o los niños bajo mi cuidado en informes para ayudar con la evaluación de South Carolina First Steps y sus programas.
- Entiendo que puedo optar por retirar mi permiso en cualquier momento, excepto en la medida en que ya se hayan tomado medidas.

Al firmar a continuación, acepto que he leído y entiendo los términos y la información	n contenida en este documento.
Firma del padre/madre/tutor:	Fecha:

AUTORIZACIÓN PARA EL INTERCAMBIO DE DATOS

Como condición para recibir dinero de la Asamblea General de Carolina del Sur, South Carolina First Steps debe evaluar el impacto de sus programas. Por estas razones, South Carolina First Steps a menudo comparte una cantidad mínima de información con otras agencias gubernamentales estatales, según sea necesario. El propósito de este formulario es su permiso para compartir la información recopilada por South Carolina First Steps con otras agencias gubernamentales estatales.

South Carolina First Steps co	on otras agencias gubernamentales esta	itales.	
Entiendo que puedo ret Rosewood Drive, Colun mencionada anteriorm Entiendo que puedo rec Entiendo que si se com confidenciales*. Entiendo que los datos para los fines descritos	nbia, SC 29201). Si no escribo a South C ente. cibir servicios incluso si no autorizo que nparten datos/información confidenciale /información confidenciales* no se com	escribiendo a South Ca arolina First Steps de (se comparta mi inforn es*, tengo derecho a so npartirán salvo que lo e	rolina First Steps de Carolina del Sur (636 Carolina del Sur, este permiso finaliza en la fecha nación. licitar una copia de los datos/información xijan las leyes estatales y federales aplicables o
ambién doy mi permiso a So Interiormente y acepto que e	outh Carolina First Steps para divulgar m entiendo los derechos descritos anterior	nis datos/información o mente. *Los datos cor	enida en este documento. Al firmar a continuación, confidenciales* para los fines limitados descritos fidenciales pueden incluir, entre otros, datos que encia, género, raza, etnia, fecha de nacimiento.
irma del padre/madre/tutor		Fech	a:
los programas y servicios	s servicios posibles, ocasionalmente en s de South Carolina First Steps y sobre o	portunidades para que	TEN nensajes de texto o llamadas telefónicas sobre usted brinde comentarios y opiniones. En un i First Steps. Puede optar por no ser contactado
	n, confirmo que he leído y entiendo la cepto recibir mensajes de texto de ps y sus asociados:	información ante	uación, confirmo que he leído y entiendo la rior y acepto recibir llamadas telefónicas de rst Steps y sus asociados:
Firma	Fecha	Firma	Fecha
	DIVULGACIÓN DE C	ONTENIDO MULTIMEI	DIA
Carolina First Steps (es d Council), podría tomar for materiales impresos o pr Steps o usarse para capa	ecir, First Steps 4K, Palmetto Pre-K, Firs tos o grabar a los niños que atiende en s omocionales. Además, las fotos y/o gra acitación. Cualquier fotografía, grabación	t5 SC, First Steps Amel sus programas. Estas f baciones pueden aparo n, dibujo u otro materia	otos y/o grabaciones pueden aparecer en ecer en el sitio web de South Carolina First
Carolina First Steps, mi p cuando South Carolina Fi Carolina First Steps. Al m	ermiso para usar dichas fotografías. En rst Steps considere que el uso previsto	tiendo que South Carol demuestre decoro y se entiendo que South Ca	ra agencia u organización asociada con South ina First Steps puede otorgar permiso solo a apropiado para los objetivos de South rolina First Steps no tendrá que incluir ningún
	cción y publicación de fotografías, video o se indicó anteriormente.	s, grabaciones, negativ	os o pruebas de mi hijo(a) para uso de South
	roducción y publicación de fotografías, v s como se indicó anteriormente.	ideos, grabaciones, ne	gativos o pruebas de mi hijo(a) para uso de
Firma del padre/madre/ti	utor:	Fech	a:

Essential Requirements Beginning July 2020

		Essential Requirements		
20	20 Essential Requirements	Measurement Criteria	What Is Different?	What is optimal?1
1.	The affiliate is designed to provide at least two years of services to families with children between prenatal and kindergarten entry. ²	The affiliate confirms that it is designed to be able to provide at least two years of services to families with age-eligible children. ³	Wording refined to clarify that this requirement is about design. See footnote.	It is optimal for the affiliate to be designe to offer more than two years of services.
2.	The minimum qualifications for parent educators are a high school diploma or equivalency and two years' previous supervised work experience with young children and/or parents.	100% of the affiliate's parent educators have at least a high school diploma, GED, or equivalent degree in countries outside the United States.	No change	It is optimal for parent educators to have a bachelor's degree or beyond.
3.	Each affiliate has an advisory committee that meets at least every six months. (It can be part of a larger committee, community network, or coalition as long as the group includes a regular focus on the affiliate).	The affiliate conducts at least two advisory committee meetings during the program year.	No change	It is optimal for an affiliate's advisory committee to meet more than every six months, for example quarterly.
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. In order to support high-quality services to families, this requirement includes supervisors who carry a caseload.	On average, parent educators working more than .5 FTE and supervisors that carry a caseload equivalent to more than .5 FTE receive at least 75% of the required individual reflective supervision hours per month (at least 1.5 hours per month). On average, parent educators working .5 FTE or less and supervisors who carry a caseload equivalent to .5 FTE or less receive at least 75% of the required individual reflective supervision hours per month (at least .75 hours per month). At least 18 hours of staff meetings occur during the program year.	No change	It is optimal for new parent educators to receive additional individual reflective supervision during their first year of employment.

¹ In some cases, there are best practice recommendations beyond the Essential Requirement. The affiliate should make every effort to meet these best practice recommendations. ² Because families can enroll when their children are different ages, not every family may receive at least two years of services.

³ Age eligible refers to the programs design and requirements around who is served. PAT services are able to be delivered to families with children prenatally until kindergarten entry.



	Essential Requirements					
20	020 Essential Requirements	Measurement Criteria	What Is Different?	What is optimal?¹		
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. The number of parent educators assigned to the supervisors is decreased proportionately when the supervisor is not full-time.	100% of an affiliate's 1.0 FTE* supervisors are assigned a maximum of 12 parent educators. The number of parent educators assigned to a supervisor that is not full-time is adjusted proportionately. *1.0 FTE is defined here as 40 hours/week.	Refined measurement criteria to include adjustment in number of parent educators assigned to a supervisor that is not full time. Also defined 1.0 FTE.	It is optimal for the affiliate to maintain a supervisor to parent educator ratio of 1:6 (or less).		
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 both Foundational and Model Implementation Trainings.	100% of parent educators and supervisors have attended the required PAT trainings.	No change			
7.	All parent educators and supervisors who carry a caseload are observed delivering a personal visit at least once during the program year, conducted by a supervisor or lead parent educator using a structured observation tool.	100% of parent educators and supervisors who carry a caseload and who provided full PAT model services for the full program year are observed delivering a personal visit at least once during the program year conducted by a supervisor or lead parent educator using a structured observation tool.	This was changed from a Quality Standard to an Essential Requirement.	It is optimal for parent educators to receive personal visi observations twice annually. It can be beneficial for one of these observations to include development screening.		

What is optimal?1

It is optimal to develop

Essential Requirements | 7

at least one goal with each family within 90

days of enrollment.

What Is Different?

professional development

educators in their second

hours required annually

will increase for parent

The number of

Essential Requirements

100% of model affiliate parent educators are

for recertification for all parent educators. In addition to local training opportunities,

up to date with their certification. Twenty hours of professional development are required

Model Implementation

2020 Essential Requirements

the National Center annually.

8. Parent educators obtain competency-

based professional development and

training and renew certification with

	Essential Requirements		
2020 Essential Requirements	Measurement Criteria	What Is Different?	What is optimal?1
Personal Visit Plans and Personal Visit Planning Guide from the	Parent educators plan for each visit, documenting the planning process in a Foundational Personal Visit Plan or Personal Visit Planning Guide.	No change	
receive at least 12 personal visits annually and families with two or more stressors receive at least 24 personal visits annually.	At least 60% of families with one or fewer stressors receive at least 75% of the required number of visits* in the program year and at least 60% of families with two or more stressors receive at least 75% of the required number of visits in the program year. *As documented by Personal Visit Records.	No change	It is optimal for families to receive more than 75% of the required number of visits.
complete no more than 48 visits per month during their first year and full-time parent educators in their	Full-time first year parent educators complete no more than 48 visits per month. Full-time parent educators in their second year and beyond complete no more than 60 visits per month.	No change	It is optimal for full- time first year parent educators to complete no more than 40 visits per month during their first year and full-time parent educators in their second year and beyond to complete no more than 50 visits per month, with proportionate adjustment when a parent educator is part-time.



	Essential Requirements		
2020 Essential Requirements	Measurement Criteria	What Is Different?	What is optimal?1
14. Affiliates deliver at least 12 group connections across the program year.	The affiliate delivers at least nine (75%) group connections* during the program year. In order to count a group connection, at least one family must have attended. The families in attendance may or may not already be enrolled in PAT services. For example, a family may be in attendance as part of the affiliate's recruitment efforts. *As documented by Group Connection Planning Guides and Records	Measurement criteria updated so that attendance of at least one family is necessary to count a group connection.	
15. Child health review is completed within 90 days of family enrollment or child's birth, and at least annually thereafter. Completion of the <i>Child Health Record</i> , which consists of health status, safety, vision, and hearing elements, constitutes a complete health review.	At least 60% of children receive a complete child health review within 90 days of enrollment or birth and at least 60% of children received a complete annual child health review during the program year.	The option to complete the initial child health review by seven months of age will not be part of this Essential Requirement. The sevenmonth timeframe was related to the functional vision assessment that is no longer part of the Essential Requirement.	It is optimal for enrolled children to also receive instrument based hearing and vision screening.
16. Child developmental screening takes place for all children within 90 days of family enrollment or child's birth, and then at least annually thereafter. Developmental domains that require screening include language, cognitive, social-emotional, and motor development.	At least 60% of children receive a complete child developmental screening within 90 days of enrollment or birth and at least 60% of children receive a complete annual child developmental screening during the program year.	No change	It is optimal for developmental screening to take place at least every six months.



	Essential Requirements				
2020 Essential Requirements	Measurement Criteria	What Is Different?	What is optimal? ¹		
Child developmental surveillance takes place during each personal visit.	Parent educators review the PAT <i>Milestones Record</i> for each enrolled child before the visit and update each enrolled child's record after the visit when there are newly emerging or achieved milestones.	Updated wording clarifies the Milestones are reviewed before the visit and updated following the visit for each child that has a newly emerging or achieved milestone.			
 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 one visit during the program year are connected to at least one community resource during the program year.	No change	It is optimal for families to be connected to multiple community resources each year.		
19. At least annually, the affiliate gathers and summarizes feedback from families about the services they have received through the four model components, using the results for program improvement.	The affiliate gathers and summarizes feedback from families about the services they have received at least once during the program year and uses the results for program improvement.	The addition of "four model components" clarifies that feedback should be obtained about all four components of the PAT model. The PAT Parent Satisfaction Survey will be updated to address all four components of the model.			



	Essential Requirements		
2020 Essential Requirements	Measurement Criteria	What Is Different?	What is optimal? ¹
20. 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, including participating in the Quality Endorsement and Improvement Process every five years.	The affiliate uses the PAT Records (2017 or newer), presented in the Data In Motion Manual through one of the approved options below,* to record and report data on service delivery and program implementation, submits the Affiliate Performance Report (APR) annually, and participates in the Quality Endorsement and Improvement Process when designated by PATNC. *Approved options 1. PAT Penelope 2. PAT Records (2017 or newer version) 3. Data system that has a licensing agreement with PATNC and contains all items in the PAT Records (2017 or newer version) 4. Program specific forms or database that contains all items in the PAT Records)	PAT affiliates must begin using the PAT Records (2017 or newer version) by July 2019. This addition to the Essential Requirement Measurement Criteria clarifies the acceptable options for use of the PAT Records.	
21. Affiliates measure at least two outcomes with eligible families and report summary data and how they are using the data on the APR. One outcome is from a list of PAT approved tools that measure parenting skills, practices, capacity, or stress assessment and the second outcome is from an approved list of measures.	At least 60% of eligible families annually participate in an assessment of parenting skills, practices, capacity, or stress using an approved tool. At least one additional PAT approved outcome measure is assessed and reported for eligible families. Affiliates report in the APR how they are using the data.	Wording updated in the Essential Requirement for clarification.	

Appendix D: Early Steps to School Success Guidelines from Save the Children

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 forsuccessful 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