



To: SC First Steps Board of Trustees  
From: Jennifer McConnell, Chair, Program and Grants Committee  
Date: June 8, 2017

**RE: Recommendations pertaining to Evidence-Based Program Requirement**

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Since the March Board meeting, the Program and Grants Committee has met in joint work sessions with a parallel committee of the Executive Directors Leadership Council on 3 occasions:

- Thursday, May 11
- Friday, May 26
- Monday, June 5.

With the support of staff and participation of Executive Directors from around the state, the committee has developed 4 recommendations (attached), designed to complement and build upon the Board's prior work with the University of South Carolina. These recommendations were reviewed and endorsed by the full Executive Director Leadership Council on Tuesday, June 6 and approved as the recommendation of the Program and Grants Committee on Thursday, June 8, 2017.

**RECOMMENDED ACTION:** Approve the joint recommendations of the Program and Grants Committee/Executive Director Leadership Council as the Board's evidence-based program framework. These recommendations will take full effect on July 1, 2018, at which time partnerships will be required to ensure they are expending 75% of state funds appropriated for programs on programs defined as "evidence-based" by the Board.

**Recommendation 1: Expand the Board's draft definition of evidence-based to include quasi-experimental research designs.** Doing so will limit this definition to comparative research designs, but not solely to experimental or randomized control trial designs as proposed by the University of South Carolina. This change was proposed for consideration by Save the Children USA and the University of Nebraska Lincoln, as both rigorous and consistent with the practices of the federal *What Works Clearinghouse* and *Home Visiting Evidence of Effectiveness (HomVEE)* and other reputable outlets.

Importantly, this change is recommended with consideration to both the unique needs of rural communities (see memo from Save the Children/University of Nebraska) and First Steps' ongoing program evaluation needs.

Proposed definition:

At a minimum, an evidence-based program should have the following 5 components:
1. RESEARCH STUDY: Findings of program effectiveness should be demonstrated through at least one well-conducted research study <i>using random assignment or quasi-experimental design that</i> has been published in a peer-reviewed journal for that particular program. <i>The Board may also consider externally conducted research subjected to third-party peer review by SC First Steps.</i>
2. META-ANALYTIC STUDIES: Alternately, there may be findings of significant impact on school-readiness related outcomes from meta-analytic studies (where the results of multiple single studies are combined quantitatively and published in the peer-reviewed literature).
3. IMPLEMENTATION: The staff delivering an evidence-based program at the local level must be specifically trained and qualified to implement the program, and staff must monitor program delivery to ensure fidelity to the program model.
4. PROFESSIONAL DEVELOPMENT: Staff delivering the program must also have support of supervisors or consultants with opportunity for continual professional development activities.
5. COMMUNITY ENGAGEMENT: Finally, as no one program or service can meet all needs that a child and family may face, local providers must have the ability to make linkages to other community services, as needed and as appropriate, during the time of program delivery.

Supplemental review of programs previously classified as evidence-informed will be undertaken to assess their status under this expanded definition, with a goal of review at the August meeting.

**Recommendation 2: Classify Training/Professional Development as Evidence-Based, consistent with the practice of North Carolina Smart Start, in conjunction with strengthened standards language as appropriate.**

The University of SC's initial review did not classify training, given its broad array of potential topics and delivery methods. North Carolina Smart Start classifies training as evidence-based on the basis of meta-analyses shown to improve both participant knowledge and workplace satisfaction. It is important to note that SC law requires 15 hours of annual training for all childcare providers. First Steps is one of the state's most significant providers of this required training, providing 896 individual, certified hours of training during FY16 with a combined attendance of 8,349. While the agency has already established detailed training standards, which emphasize training certified as high-quality through the SC Center for Child Care Career Development, staff will undertake a review of the cited research in an effort to identify further enhancements to the FY19 standards.

**Recommendation 3: Classify child care scholarships as a permissible expenditure only in support of a related evidence-based program.** The University of SC did not classify scholarships as programmatic, noting the broad diversity of settings in which preschool services are provided and the lack of a common program model.

It is the recommendation of the committee that scholarships be excluded from classification as a program unto themselves, and limited to use in support of a companion strategy meeting the evidence-based definition (connecting scholarships to Parents as Teachers services, child-care coaching or intensive professional development, for example). Partnerships will be asked to begin transitioning in this direction during FY18, ensuring that clients rolling off of scholarship services are replaced with clients and/or at provider locations that will make them compliant for FY19. Existing scholarship clients failing to meet this requirement on July 1, 2018 will be grandfathered in, until such time as their services naturally discontinue.

**Recommendation 4: Creation of a Core Services budget category.** First Steps enabling legislation clearly delineates the expectation the partnerships are delivering both programs and a variety of core services (community mobilization, convening, and education, service as a portal for families seeking early childhood services, and support of state-level priorities). The evidence-based practice requirement applies only to state funds "appropriated for programs."

In order to meet the agency's statutory requirements in their entirety, it is necessary for First Steps to delineate a) funds allocated for administrative/overhead costs, as well as 2) funds appropriated on core services and 3) funds appropriated for programs (subject to the EB requirement).

The creation of a core services category within partnership budgets is proposed. This category would be used to underwrite costs related to:

- 1) Community mobilization and education strategies under SECTIONS 59-152-30 (5) and 59-152-70 (a)
- 2) Early screening and referral strategies under SECTION 59-152-30 (4)
- 3) Expenditures related to the partnerships required status as community portals under SECTION 59-152-70 (a)
- 4) Support of state-level priorities identified by the State Board under 59-152-70 (c).
- 5) Nutrition services under SECTION 59-152-30(4)
- 6) Transportation services under SECTION 59-152-160(c)

It is proposed that FY19 serve as a baseline data collection year, during which no specified limits for will be established for core service or program funds – both of which are required by law. This will, by default, define “funds appropriated for programs” as those not expended for core services or administrative overhead and provide the Board the opportunity to collect a year’s worth of data before considering any further restriction.

Partnership PROGRAMS (Programmatic spending subject to 75% requirement)	
CHILD CARE STRATEGIES	CLASSIFICATION
Child Care Coaching/Quality Enhancement	Evidence-Based (USC, RCT)
Child Care Training/Professional Development	Evidence-Based (NC Smart Start, Meta-Analysis)
Child Care Scholarships	N/A – Permissible expenditure within a companion, evidence-based program.
EARLY EDUCATION STRATEGIES	CLASSIFICATION
Early Education for Children Under 4	Evidence-Based (USC, RCT)
Early Head Start	Evidence-Based (USC, RCT)
4-Year-Old Kindergarten (half-day, full-day, extended-day)	Evidence-Based (USC, RCT)
Head Start	Evidence-Based (USC-RCT)
Special Needs 4K	Evidence-Based (USC-RCT)
FAMILY STRENGTHENING/HEALTH	CLASSIFICATION
Healthy Families	Evidence-Based (USC, RCT)
Incredible Years	Evidence-Based (USC, RCT)
Nurse-Family Partnership	Evidence-Based (USC, RCT)
Parents as Teachers	Evidence-Based (USC, RCT)
Parent Child Interaction Therapy	Evidence-Based (USC, RCT)
Reach out and Read	Evidence-Based (USC-RCT)
Triple P	Evidence-Based (USC-RCT)
Early Steps to School Success	Evidence Informed*
Family Literacy Model	Evidence Informed*
Fatherhood Initiatives	Evidence Informed*
Healthy Start	Evidence Informed*
Imagination Library	Evidence Informed*
Library-Based Programs	Evidence Informed*
Mother Read/Father Read	Evidence Informed*
Other Family Literacy	Evidence Informed*
Parent-Child Home	Evidence Informed*
Parent Training	Evidence Informed*
Raising a Reader	Evidence Informed*
SCHOOL TRANSITION	CLASSIFICATION
Countdown to Kindergarten	Evidence Informed*
Partnership CORE SERVICES Service expenditures required and/or authorized by statute.	
SERVICE	STATUTORY AUTHORITY
Community Education/Convening	59-152-30(5), 59-152-70(A)(2), 59-152-70(4)(b)
Family Service Portal	59-152-30(1), 59-152-70(4)(a)
Support of State Level Priorities	59-152-70(4)(c)
Early Intervention and Referral/Screenings	59-152-30(2)(4)
Nutrition Services	59-152-30(4)
Transportation Services	59-152-160(c)