

### Strategic Planning and Evaluation Committee Meeting Wednesday, May 28, 2025 11AM-12PM via Zoom (<u>link to join</u>)

Meeting ID: 873 0000 2784 | Passcode: 064776

Staff Liaison: Dr. Chelsea Richard, Chief of Staff Committee Members: Dr. Amy Williams (Chair); Dave Morley; Janie Neeley All Board Members invited to participate

#### **AGENDA**

- Discuss latest draft of 2025-2030 First Steps strategic plan revised after public comment
- Discuss upcoming committee meeting dates given change in state board meeting change to quarterly schedule
  - o August 27, 2025 Proposed committee meeting
  - September 18, 2025 State Board meeting
  - November 19, 2025 Proposed committee meeting
  - o December 4, 2025 State Board meeting
  - o February 25, 2026 Proposed committee meeting
  - March 19, 2026 State Board meeting
  - o May 27, 2026 Proposed committee meeting
  - June 18, 2026 State Board meeting

#### **ATTACHMENTS**

Latest draft of 2025-2030 strategic plan

#### DRAFT

# Proposed South Carolina First Steps 2025-2030 Strategic Plan

Last Updated: May 23, 2025

#### **OVERALL GOAL**

## At least 75% of South Carolina's children are ready for kindergarten by 2030.

#### **CORE STRATEGIES**

This plan is organized around three core strategies, each supported by measurable tactics:

- 1. Strengthen the First Steps 4K model | Page 2
- 2. Increase access and utilization of evidence-based, high-intensity programs through First Steps local partnerships | Page 3
- 3. Strengthen collaboration and alignment among organizations serving children birth through five | Page 5

#### **KEY COMMITMENTS**

South Carolina First Steps is committed to a strategic plan that is:

- Data-driven
- Collaborative
- Grounded in what we are legally obligated and funded to do
- Focused on serving South Carolina's most economically vulnerable children

#### **KEY CONTEXT**

- **First Steps local partnerships** are required to do a three-year strategic planning cycle. They are currently in the process of developing their next plans, which will span July 1, 2026 through June 30, 2029.
- **Evidence-based programs** are those that have been tested and proven to work. This is a designation determined by the First Steps Board of Trustees.
- **High intensity programs** are those that provide more support, more often, to the people who need it most. This is a designation determined by the First Steps state office.
- The wellbeing of South Carolina's **K-12 education system** depends on the strength of its early childhood system.
- South Carolina's **economic vitality** depends on a strong early childhood system for a thriving workforce.

#### **KEY NUMBERS**

Approximately 280,000 children under age 5 in South Carolina. 42% (118,000) of those children live at or below 185% of the federal poverty line. Source: American Community Survey 2019-2023.

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- 61% of the 56,000 children entering kindergarten each year are not achieving "demonstrating readiness" on the state's kindergarten readiness assessment (KRA). Source: SC Department of Education.
- Approximately 4.5% (5,200) children under age 5 are currently served First Steps-funded programs that are evidence based and high intensity.

#### **STRATEGY 1**

#### Strengthen the First Steps 4K model.

**Current allocation in First Steps budget = \$41.7M (55%).** School year 2023-24: Enrollment = 4,119 served for at least one day through day 180; 28% achieved "demonstrating readiness" on the Kindergarten Readiness Assessment in Fall 2024.

#### **STRATEGY 1 TACTICS**

- 1.1 Reduce student absenteeism in the First Steps 4K program from 57% to less than 20%. School year 2023-24: 4,124 students were served for at least one day through day 220. 57% of them met the Department of Education's definition of chronic absenteeism (absent ≥10% of the school days enrolled in First Steps 4K).
- 1.2 Increase the number of children meeting the kindergarten readiness literacy benchmark on the Teaching Strategies GOLD assessment from 75% to at least 90%. Spring 2024 Checkpoint = Social and Emotional (82%); Physical (85%); Language (78%); Cognitive (77%); Literacy (75%); and Mathematics (68%)
- 1.3 Strengthen the consistency of high-quality teacher-child interactions, classroom environment and instructional support by implementing CLASS assessment in all First Steps 4K classrooms. Institute CLASS assessment, a validated and widely used assessment to monitor quality in those 3 domains, in First Steps 4K classrooms. CLASS training begins fall 2025 for 330 classrooms; initial assessments begin late January 2026. Increase coaching capacity to support. There are currently eighteen 4K coaches providing an average of 4 hours of on-site technical assistance monthly across 46 counties.
- 1.4 Reduce teacher turnover through minimum compensation standards and improved approach to onboarding and continuous training at multiple skill levels from X% to Y%. National preschool turnover rate is estimated at 15-20%. Develop minimum teacher pay guidelines as part of First Steps 4K Provider Agreement. Average hourly salary for individuals working in child care is \$13.71. It is estimated that few teachers receive benefits. Need to determine teacher turnover measurement methodology and baseline.
- 1.5 Increase the percent of First Steps 4K sites participating in ABC Quality achieving a B or better rating from X% to Y%. Baseline: 86% of First Steps 4K sites are enrolled in ABC Quality; X% of those enrolled are at B or higher.

#### **STRATEGY 2**

Increase access and utilization of programs that are both evidence based and high intensity through First Steps local partnerships.

**Current allocation in SC First Steps budget = \$27.6M (38%).** Fiscal Year 2023-2024=60,727 children and/or families served by First Steps funded programs across all types (evidence based, evidence informed, low and high intensity). Of those 60,727 children and/or families, 5,214 children and/or families (roughly 9%) were served by programs that were both evidence based and high intensity. Four percent (4.5%) of all children under age 5 (roughly 118,255 children) were served by a program that is both evidence based and high intensity.

#### **STRATEGY 2 TACTICS**

- 2.1 Increase number of children ages 0-3 served by a local partnership evidence-based, high-intensity program from X to Y. Under review.
- 2.2 Increase the number of children in publicly funded pre-K whose parents are also receiving support through a local partnership's evidence-based, high-intensity program from X to Y. School year 2023-24: HIPPY served 178 children in eighteen First Steps 4K providers across 8 counties. Other high intensity parent education programs offered in other publicly funded pre-K classrooms have not been inventoried.
- 2.3 Strengthen the impact of technical assistance and training provided to child care providers through First Steps Local Partnerships by implementing CLASS assessment in all classrooms. Currently: 133 child care programs served by local partnership child care technical assistance programs in 13 counties. Assessments being used now are Environmental Rating Scales.
- 2.4 Increase program completion rates according to model recommendations. Under review.
- 2.5 Increase the state's investment in evidence based and high intensity programs implemented by local partnerships from \$XM to \$YM. Fiscal year 2023-2024 Recurring State Allocation for First Steps Local Partnerships = \$24.9M (for all program types). \$2.5M non-recurring has been requested for "Innovation Investments." Strengthen Local Partnerships Program Guidelines prioritizing evidence based and high intensity programs that offer strong state and/or national technical assistance and training; add cost per child/family and start up and infrastructure costs to strengthen program selection and overall return on investment. Current Program Guidelines offer 40+ program options with varying degrees of training and technical assistance; and degree of evidence to ensure intended impact; and do not include fiscal insights.
- 2.6 Raise discretionary funding to implement and scale what is working well for achieving higher levels of school readiness from \$XM to \$YM. Fiscal year 2023-2024: First Steps received \$1.3M from the Duke Endowment and Doris Duke Foundation (ending June 2025); \$15,500, Enterprise Mobility Foundation (ending June 2026), In the past we have also received federal money to support pilots (\$1M). Identify best practices and bright spots in South Carolina and other states.
- 2.7 Increase overall awareness of and skills to support emotional, physical and intellectual readiness for young children, why it's important, and utilization of all services. Consumer

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awareness research needed to determine degree of awareness and self-report value of early childhood. Includes important milestone from prenatal care, to bringing a new baby home, to transitioning to kindergarten, and everything in between.

2.8 Increase collaborations that achieve administrative efficiency.

#### **STRATEGY 3**

Strengthen collaboration and alignment between all organizations serving children under age five.

Current allocation for the Early Childhood Advisory Council in SC First Steps budget = \$3.4M (4%).

#### **STRATEGY 3 TACTICS**

- 3.1 Increase the percentage of children with a pediatric medical home from 55% to 80%. A medical home is a comprehensive, coordinated and patient centered approach. 54.7% of children ages 0-5 in SC have a medical home. Source: National Survey of Children's Health, 2022-2023.
- 3.2 Increase the percent of students living in poverty who achieve "demonstrated readiness" on the kindergarten readiness assessment from 30% to 75%. Fall 2024 = 30%. Source: SC Department of Education.
- 3.3 Expand access and utilization of evidence-based home visiting from X% to Y% of eligible children served. Under review.
- Increase utilization rate for the special supplemental nutrition program for Women, Infants and Children (WIC) from 59% to 80%. Coverage rate=58.6% (Q1, FY 2025); Average participation=98,256 women (Oct. 2024-Feb. 2025). Source: SC Department of Public Health.
- 3.5 Increase the number of women accessing adequate or higher prenatal care from 77% to 90%. 77% accessing adequate or adequate plus prenatal care. Source: 2022 birth data from SC Department of Public Health.
- 3.6 **Reduce maltreatment rate among young children by half from 17 per 1,000 to 8 per 1,000.**17 per 1,000 children birth-five victims of child maltreatment in South Carolina. *Source: 2023 data from Administration for Children and Families.*
- 3.7 Increase the number of children receiving a developmental screening ages 9-35 months from 45% to 80%. 45% of children ages 9-35 months in SC received a developmental screening. Source: National Survey of Children's Health, 2022-2023.
- 3.8 **Reduce teacher turnover in all publicly funded preschool settings.** Under review.
- 3.9 Increase the percent of eligible 4-year-old children in publicly funded preschool from X% to Y%. Seventy eight percent (78%) or 4,587 of SC's eligible four-year-old children, living in rural counties, estimated to be served in publicly funded preschool (Head Start, First Steps 4K, CERDEP 4K in public schools). Sixty eight percent (68%) or 19,822 of SC's eligible four-year-old children, living in urban counties, estimated to be served in publicly funded preschool. These numbers do not include four-year-old children in subsidized childcare or locally funded programs.
- 3.10 Track and support utilization of early childhood degrees offered at the state's technical colleges and universities. Under review.

#### **Foundations for Success**

Achieving the goals outlined in this plan will require strengthening key areas of capacity and infrastucture:

- Advanced collaboration among all organizations with funding for children birth to five.
- Research and evaluation capacity, including the development of the Early Childhood Integrated Data System, internal and external evaluators, etc.
- Communications capacity to engage families, providers, and the public.
- State-level fiscal mapping to maximize and ensure best of use of all existing early childhood funding.
- **Modern technology and data systems** to support service delivery, data collection, and decision-making.
- **Focused and effective training** for staff, local partnership staff and board members, and program implementers.
- Updated fiscal and programmatic operating policies to strengthen internal and external operations.
- Regular progress monitoring to track outcomes, inform decision-making, and drive continuous improvement.