

**CHESTERFIELD COUNTY FIRST STEPS**

**December 31, 2008**

**Chesterfield  
Vision 2013**



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## **Our vision:**

**Every child in Chesterfield County will enter school healthy and ready to learn.**

## **Mission / Values**

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### **Mission**

The mission of Chesterfield County First Steps is to facilitate, design and implement sustainable programs and services in collaboration with local partners for children from birth to age 6 and their families so every child will enter school ready to learn.

To accomplish this, the Partnership Board provides leadership to achieve this vision by:

- Funding services to achieve desired results
- Advocating for policy change at local, state and national levels
- Acting as a catalyst and leader for coordinating and integrating existing resources
- Building community capacity and infrastructure to support families.

### **Values**

As it makes decisions and determines future directions, the Partnership holds to these values:

- Readiness to learn includes physical, mental, social, emotional and developmental well-being
- We are committed to the success of all children in our community
- We support the role of parents as the child's first and best teachers
- Our community's participation is essential to our success
- The Partnership and the community are mutually accountable to children.



## **Operating Guidelines / Issues, Results and Strategies**

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### **Operating Guidelines**

The work of the Partnership, in all of its roles, is shaped by the following guidelines, developed with the participation of the community:

- Responsiveness to the needs of all children, including children with disabilities and other special needs
- Culturally competent approaches
- Prevention and early intervention
- Partnership and collaboration
- Support of innovative programs and promising practices
- Prioritization, allocation and leveraging of resources for maximum results
- Promotion of no-cost and low-cost solutions
- Community and intergenerational solutions
- Promotion of evidence-based practices that improve service quality
- Measurable and sustainable results



### **Issues, Results and Strategies**

Chesterfield County First Steps has adopted the principles of results-based accountability to guide its activities. This approach bases planning and evaluation on the results the Partnership's wishes to achieve for children and families. Ensuring that every child achieves school readiness requires that **five core issue areas** be addressed:

1. Enhancing early care and education
2. Improving children's learning and social-emotional health
3. Promoting parent and family development and resources
4. Improving organizational development
5. Engaging the community in more effective collaboration around early childhood needs and awareness

In the results-based accountability approach, each issue area is examined in terms of:

- **Desired Results:** What conditions do we want to improve for children and families?
- **Priority Strategies:** What can we do that we think will work?
- **Indicators:** What can we measure to evaluate whether what we are doing is working?



## **Issue 1: Early Care and Education**

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### **Rationale:**

The 40-year High/Scope Preschool Study suggests that high-quality learning sets children up for success in school, work and life. That research shows that investing \$1 in a child's success early on saves \$17 down the road, with tangible results measured in lower crime, fewer single parents and higher individual earnings and educational levels.

Research has consistently found that overall administrative practices are crucial for ensuring high-quality outcomes for children and families. Without quality systems in place at the organization level, high-quality interactions and learning environments at the classroom level cannot be sustained.

A report by the NC Smart Start Evaluation Team concludes "children who attend higher-quality centers score significantly higher on measures of skills and abilities deemed important for success in kindergarten than children from lower-quality centers."

### **Goals:**

1. Increase availability of quality child-care choices for parents, as measured by increasing numbers of child-care providers operating at higher levels of quality
2. Increase the number of child-care workers achieving progress toward early-education certification and continued professional development

3. Improve the quality of the physical and learning environments in child-care settings of all types;
4. Ensure effective transitions from preschool to kindergarten by creating awareness and knowledge for parents about the importance of home activities relating to literacy and hands-on learning leading up to kindergarten;
5. Expand public and private partnerships in 4K; and
6. Increase the number of child-care vouchers available families for quality child care;

### **Need Statement:**

The 2008 Needs Assessment indicates that child-care providers in the county lack networking and leveraging of current resources. Child-care directors reported having inadequate resources to appropriately equip the classrooms with furniture, curricula and other educational materials. Seventy-one percent of the lead teachers representing the 13 centers responding to the Needs Assessment survey had no formal education beyond high school. Fifty-seven percent (17 of 30) child-care centers in the county are registered and are required to meet only basic health, fire and safety requirements.



Only 30 percent (4 of 13) of centers responding to the survey participate in the ABC enhancement program— a higher standard of care.

**Chesterfield County First Steps**



**Strategies**

State Funding Priority Level	Private Funding Priority Level	Target Population	Strategy/Program	Projected Outputs	Projected Outcomes
High		4-6 child-care providers serving infants, toddlers and preschoolers	<p><b>Technical assistance</b> provided by a qualified early-childhood specialist.</p> <p>Plan of Action developed based on Pre- Environmental Rating Scale scores.</p> <p>On-site visits provide program-specific support to help sites achieve improvement plan goals.</p>	<p>4-6 child-care facilities serving infants, toddlers and preschoolers will receive technical assistance visits.</p> <p>4-6 Plans of Action developed.</p> <p>24 on-site annual visits per center.</p> <p>100 children enrolled in participating child-care facilities.</p>	<p>75% of participating facilities with improved ERS scores as measured by pre- and post- scales administered by a qualified early-childhood specialist.</p> <p>75% of participating facilities will show improvement as measured by completion of at least 50% of Plan of Action Goals.</p> <p>50% of participating facilities will acquire increased DSS Licensure Status.</p> <p>50% of participating facilities will show an increase in ABC level as measured by pre-program and post-program status.</p>
High		4-6 child-care directors	<p><b>Professional Development/ Leadership Symposium</b> will offer research-based and relevant training for child-care directors on operating systems and procedures, community resources, supporting education for teachers, performing staff evaluations, etc.</p>	<p>3 training sessions.</p> <p>3 directors participating in training.</p> <p>5 hours obtained in Program Administration.</p>	<p>75% of participating child-care directors will develop a portfolio to serve as a manual for managing a quality center.</p> <p>75% of participating child-care directors who develop a portfolio to serve as a manual for managing a quality center will implement 10 procedures as outlined in their manual.</p>
High		30 child-care staff	<p><b>Early Childhood Training-</b> Research-based training will be provided to child-care staff on a variety of topics such as growth and development, curriculum, health and safety, etc.</p>	<p>At least 3 training sessions offered to 80% of child-care staff who attend training.</p> <p>15 hours total state-approved.</p> <p>CEUs available.</p>	<p>75% of child-care staff attending training will identify one or more ways to use the training as measured by a survey completed at the close of each training session.</p>



**Strategies (continued)**

State Funding Priority Level	Private Funding Priority Level	Target Population	Strategy/Program	Projected Outputs	Projected Outcomes
Low		Rising kindergarteners who have 1 or more of the following risk factors: developmental delays; eligible for free or reduced-cost lunch; live in a home where English is not the primary language; live in a home with low parental educational levels; or live with someone other than their parents.	<p><b>School Transition - Countdown to Kindergarten</b> will include the following components:</p> <p><b>Public Awareness</b> Practical tools and articles are distributed through the news media, the Internet and community locations to help parents and communities prepare children for kindergarten.</p> <p><b>Kindergarten Home Visitation</b> A certified local kindergarten teacher and teacher assistant provide home visits to introduce readiness activities and provide to each family a Transition Toolkit with books, puzzles, clay, blocks and other materials to be used in the home.</p> <p><b>Countdown Celebration</b> Participating children, their families and teachers celebrate the child's progress and the beginning of kindergarten at a special group event.</p>	<p>10 to 20 children with their parents.</p> <p>Up to 8 home visits per child.</p> <p>10-20 Transition Toolkits distributed.</p>	<p>90% of participating families will complete at least 7 of the 8 home visits.</p> <p>90% of participants will show increased skills as demonstrated by the CTK evaluations.</p>
High		Families with pre-kindergarten children.	<p><b>Kindergarten readiness checklist development</b> Working collaboratively with local kindergarten teachers, a kindergarten readiness checklist will be developed to assist parents in preparing their children for school.</p> <p><b>The checklist will be distributed</b> through a variety of sources such as the news media, the Internet and community locations to help parents and child-care providers prepare children for kindergarten.</p>	<p>A task force will be convened to develop the checklist.</p> <p>3 or more venues will be utilized to distribute the checklist to families of young children.</p>	<p>95% of parents utilizing the checklist who respond to a survey will report that they feel the checklist was helpful in preparing their child for kindergarten.</p>



**Strategies (continued)**

<b>State Funding Priority Level</b>	<b>Private Funding Priority Level</b>	<b>Target Population</b>	<b>Strategy/Program</b>	<b>Projected Outputs</b>	<b>Projected Outcomes</b>
High		4-6 child-care facilities	<p><b>Classroom enhancement grants</b> - Non-cash grants will be offered to provide immediate and tangible improvements in classrooms.</p> <p>Classroom products will be selected based on the centers' pre-ERS assessment and Plan of Action to enhance the learning environments for young children.</p>	<p>5 child-care facilities receiving enhancement grants.</p> <p>4 child-care facilities with at least 1 classroom receiving an enhancement grant.</p> <p>5 Plans of Action developed.</p> <p>100 children enrolled in participating child-care facilities</p>	<p>75% of participating classrooms will show an improvement in ERS "Space and Furnishings" subscale score as measured by pre- and post scales administered by a qualified early-childhood specialist.</p>
Mid-Low		<p>6 child-care providers</p> <p>35 parents</p> <p>20 students</p>	<p><b>Resource Center/Lending Library</b> offers a wide variety of multicultural and educational materials for infants, toddlers and preschoolers.</p> <p>Parents, child-care providers and students can borrow items for use with children to enhance their cognitive and motor development.</p>	<p>6 child-care providers will check out materials for use in their classrooms/FCCHs.</p> <p>35 parents will check out materials for use with children at home.</p> <p>20 EC education students will check out materials to use in class assignments and projects.</p>	<p>75% of child-care providers, parents or students who utilize the Resource Center will check out materials or resources at least 4 times during the year.</p> <p>75% of child-care providers, parents or students who utilize the Resource Center at least 4 times during the year will report by survey that they have used at least 2 different types of materials or resources to enhance activities for children in their care.</p>
High (Fund 60)		20 children	<p><b>CDEPP Pre-Kindergarten Program</b>, state-funded community based, voluntary pre-kindergarten initiative designed to prepare at-risk 4-year-olds for success in school. Programs will meet high quality standards.</p> <p>The Creative Curriculum will be used to provide developmentally appropriate early education, including approaches for literacy, mathematical concepts, problem-solving and fine and gross motor skills.</p>	<p>2 CDEPP Pre-Kindergarten classes offered.</p> <p>2 child-care facilities offering CDEPP pre-kindergarten classes.</p> <p>20 CDEPP pre-kindergarten slots available.</p> <p>20 children served.</p>	<p>75% of children attending CDEPP pre-school kindergarten classes who attend for at least 6 months.</p>



## **Issue 2: Children’s Learning and Social-Emotional Health**

**Rationale:**

Caregivers promote healthy development by working to support social-emotional wellness in all young children and making every effort to prevent the occurrence or escalation of social-emotional problems in children at-risk. Caregivers identify and work to remediate problems that surface, and, when necessary, refer children and their families to appropriate services. (Adapted from “Zero to Three, 2004.”)

**Goal:**

Strengthen the capacity of child-care programs to improve the social and emotional development of young children as a means of preventing challenging behaviors and improving school readiness.

**Need Statement:**

According to the 2007 South Carolina School Readiness Assessment (SCRA) approximately 30% of children in the county were assessed as “not ready” in three of the five areas on the Personal and Social Readiness Assessment. These areas of concern included social problem-solving, self control and interacting with others. Furthermore, the 2008 Chesterfield County First Steps Indicator Report highlighted the fact that mental-health services are very rarely available to child-care settings in the county. Of the 13 centers responding to the 2008 Needs Assessment survey, six centers indicated that they had a total of 20 children with behavioral issues, and five centers indicated they had a total of 11 children with emotional issues.

**Strategies**

<b>State Funding Priority Level</b>	<b>Private Funding Priority Level</b>	<b>Target Population</b>	<b>Strategy/Program</b>	<b>Projected Outputs</b>	<b>Projected Outcomes</b>
	High	40 Caregivers of Children birth to five	A qualified early childhood specialist will provide a series of 4 trainings on social emotional development based on the Center for Social Emotional Foundations for Early Learning model.	4 workshops offered 40 teachers will complete the series attending at least 3 of the 4 workshops and participating in on-site technical assistance visits.	75% of teachers completing at least 3 of the 4 trainings will show an increase in knowledge as measured by training module evaluation forms.



## **Issue 3: Parent and Family Development and Resources**

### **Rationale:**

According to the 2008 Chesterfield County First Steps Indicator Report, “living in poverty-level conditions is significantly associated with a variety of physical, mental, emotional, social and economic ills. Being born poor puts one at a disadvantage from the day conceived. Poverty status is one of six major indicators of a



community’s, family’s and child’s well-being. Children most likely to be living in poor families include Black and Hispanic children, those living in single-mother families and those under age 6.”

Furthermore, “children in poor families score lower on standardized tests of verbal ability and have lower cognitive skills such as reading, number skills, problem-solving, creativity and memory than children in families above the poverty line. The effects of poverty on children below the age of 5 are particularly detrimental, being associated with fewer total years of schooling, school failure, increased dropout rates, physical health problems and lower nutritional status. Kindergartners in the lowest fifth of socioeconomic status statistically watch 40% more television per week, read less and are less likely to own a computer compared with their more economically advantaged peers.”

### **Goals:**

Help families with risk factors such as low income, teen parents or domestic violence learn parenting strategies designed to increase desired behaviors in children by using attention and rewards, clear communication, effective discipline, problem-solving and limit-setting.

Provide assistance with the cost of child-care to low-income families with young children in which the parents need child-care in order to work or further their education.

Supporting emerging literacy by ncreasing the number of books available in the homes of young children from low-income families in Chesterfield County.

### **Need Statement:**

According the 2008 Chesterfield County First Steps Indicator Report, in 2000, more than half (1,775 of 3,522) of children younger than 6 were living in poverty-level conditions in Chesterfield County. Data indicate that little progress has occurred in lifting children out of poverty in Chesterfield County over the past five years.

The report further shows that during 2007, only 73 families in Chesterfield County received ABC vouchers to assist with the cost of child-care, while more than 600 families with children younger than 5 would have qualified to receive the vouchers.

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**Strategies**

<b>State Funding Priority Level</b>	<b>Private Funding Priority Level</b>	<b>Target Population</b>	<b>Strategy/Program</b>	<b>Projected Outputs</b>	<b>Projected Outcomes</b>
High		Parents of young children on Temporary Aide to Needy Families (TANF) program, Parents of young children with active CPS cases Domestic violence families First-time or teen parents	<p><b>Strengthening Families Program</b> will offer 2 ½ hours of group sessions once per week for 14 weeks.</p> <p>Four facilitators will teach each the sessions (2 for parent; 2 for children).</p> <p>Training sessions will include lecture, discussion, demonstration, role-playing, audio-visuals, charts, homework, peer support, etc.</p> <p>Parent training sessions will focus on parenting skills.</p> <p>Child training sessions will focus learning through puppet shows, discussions, games and exercises.</p> <p>Family training sessions will focus on combining parent and child sessions and focus on the week’s curriculum.</p>	<p>1 14-week series of Strengthening Families Program (3-5).</p> <p>10-15 families will participate in group sessions.</p> <p>15-20 children will be impacted by the Strengthening Families Program.</p>	<p>85% of parents in Strengthening Families will experience an increase in knowledge and parenting skills as measured by changes in pre- and post test provided by the Strengthening Families Program.</p> <p>90% of the families referred by Social Services participating in Strengthening Families will have no new cases of abuse or neglect as substantiated by the Department of Social Services.</p> <p>90% (32 of 36) will experience an improvement in family relations as measured by facilitator observations using evaluation tools provided by Strengthening Families program.</p>





**Strategies (continued)**

State Funding Priority Level	Private Funding Priority Level	Target Population	Strategy/Program	Projected Outputs	Projected Outcomes
Mid		Low-income families with young children needing child-care in order to work or further their education who are at or below 75% of the state median household income.	<p><b>Child-Care Subsidy for Families</b> provides funding for both child-care subsidy purchase of care and subsidy administration for families not eligible through TANF or special needs, earning less than 75% of the state median income.</p> <p>A trained parent counselor will provide education regarding child-care quality.</p>	<p>20 families with young children served by a parent counselor.</p> <p>20 children in families receiving subsidy.</p> <p>6 child-care facilities where children receive subsidy.</p>	<p>At least of 90% of children receiving subsidies will be enrolled in an ABC enhanced facility.</p> <p>At least 64% of parents served by the parent counselor who respond to a follow-up survey will report using at least 2 quality indicators when making a decision about child care.</p>
High		Children younger than 5.	<p><b>Imagination Library book program</b> - An age appropriate book delivered by mail each month to disadvantaged homes.</p>	<p>300 disadvantaged children under 5 identified and referred</p> <p>1 book distributed monthly per child</p>	<p>85% of children served will remained enrolled for at least 1 year.</p> <p>90% will report an increase in the number of books in the home.</p> <p>87% will report an increase in literacy practices as measured by the Success by Six tool.</p>





## **Issue 4: Organizational Development**

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### **Rationale:**

Effective organizational leadership requires an engaged and well-informed board of directors operating within the framework of appropriate bylaws and up-to-date policies and procedures.

### **Goals:**

The Board of Directors will examine its size and composition to improve efficiency and effectiveness.

Chesterfield County First Steps will review and update its HR policies and Employee Manual.

Board members will review and update the organization's bylaws.

### **Need Statement:**

During the strategic planning process, the Chesterfield County First Steps Partnership identified several areas of its current operation that were in need of attention.

Fifty-five percent of board members responding to an organizational survey indicated concern regarding the size of the board of directors as it relates to effective governance. Eighty-eight percent noted concern regarding periodic review of policies, procedures and bylaws, with 89% showing concern about the board's familiarity with its current bylaws.



## Chesterfield County First Steps



### Strategies

State Funding Priority Level	Private Funding Priority Level	Target Population	Strategy/Program	Projected Outputs	Projected Outcomes
No Funding Required		CCFS Partnership Board of Directors	Board size will be gradually decreased by attrition. Board Development Committee will develop a plan for multiple-category representation and submit its recommendation to the Board for approval.	7 members reduced by attrition. 7 multiple-category members.	By June 30, 2013, Board membership will range from 12-18 members.
No Funding Required		CCFS Partnership Board of Directors	Personnel Committee will develop a new Employee Manual and present it to the Board of Directors for approval.	1 manual developed.	An Employee Manual will be developed and adopted by the Board by February 2009.
No Funding Required		CCFS Partnership Board of Directors	Executive Committee will present a section of the bylaws at each board meeting until all are reviewed, discussed and recommended updates noted.	6 meetings. 1-2 sections reviewed at each meeting.	All sections of the current bylaws will be reviewed by November 2009.



## **Issue 5: Community Collaboration and Awareness**

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### **Rationale:**

The Chesterfield County First Steps 2008 Needs Assessment identified a multitude of challenges that affect the well-being and eventual school readiness of young children in Chesterfield County. The magnitude of these challenges combined with limited financial resources necessitates a collaborative, communitywide effort. Working with community partners and raising awareness in the community provides a foundation for change both now and in the future.

### **Goals:**

Raise the community awareness of issues affecting young children and their readiness for success in school.

Improve access to services for families with children who have or are at risk of developmental delays or disabilities.

Reduce the risk of lead exposure for young children in Chesterfield County.

### **Need Statement:**

According to the Chesterfield County First Steps 2008 Indicator Reports:

- Education is a major means to reduce poverty and increase the well-being of the entire population, including Chesterfield

County's young children. Providing the kind of education that is culturally compatible with its residents' learning needs and interests is a major challenge for Chesterfield educators. Continuous public-service announcements that promote the value and benefits of education are going to be needed for at least the next decade.

- Nine centers indicated that they had a total of 29 children with communication disorders such as a speech or language impairment. Six centers indicated that they had a total of 20 children with behavioral issues. Six centers indicated that they had a total of 16 children with a developmental delay. Five centers indicated they had a total of 11 children with emotional issues. Two centers indicated they also had children with a sensory impairment (total of three children), and one center had a child with a physical or orthopedic impairment.
- Elevated exposure to lead can cause serious health effects, particularly by disrupting normal neurological development in young children. Lead exposure typically occurs in and around a house as a result of deteriorating lead-based paint, lead-contaminated dust and/or lead-contaminated soil. Thirty-six percent of Chesterfield County's children younger than 5 are at risk for lead hazards. Chesterfield County has an estimated 3,500 housing units with low-income residents who are at potential risk from lead hazards.



**Strategies**

State Funding Priority Level	Private Funding Priority Level	Target Population	Strategy/Program	Projected Outputs	Projected Outcomes
No Funding Required		Families with young children.	<b>Public awareness and educational articles</b> addressing the needs of young children will be written and distributed via the local newspaper, the partnership Web site and other local media.	10 articles published.	Child service organizations will collaborate to develop a cohesive message to the community.
No Funding Required		Child-care providers and parents caring for children with or at risk for developmental delays.	<b>A Resource Directory</b> for children/families with developmental delays will be updated through interagency collaboration.  The resource directory will be placed at child-care facilities and child-service organizations for distribution to families caring for children with or at risk for developmental delays.	1 resource directory published.  200 copies of the resource directory distributed to local child-care facilities.  30 copies of the resource directory distributed to local child-service organizations.	90% of child-care providers and local child-service organizations distributing the resource directory to parents will agree or strongly agree that the resource directory has been a useful tool in helping families access needed services.
Mid		Families in high-risk neighborhoods.	<b>Lead Exposure Reduction</b> - Working collaboratively with other lead-reduction programs, families in areas identified as at high risk for lead exposure will receive information and training on ways to identify and reduce lead poisoning.	40 families who receive information or training.  60 children in families receiving information or training.  3 communities identified as high-risk areas.	Families in 100% of communities identified as high-risk areas for lead exposure will receive information or training on ways to identify and reduce lead poisoning.