

Agency Name:	First Steps		
Agency Code:	H620	Section:	2



Fiscal Year FY 2026-2027

Agency Budget Plan

FORM A - BUDGET PLAN SUMMARY

**OPERATING
REQUESTS**

(FORM B1)

For FY 2026-2027, my agency is (mark "X"):	
☐	Requesting General Fund Appropriations.
☐	Requesting Federal/Other Authorization.
☒	Not requesting any changes.

**NON-RECURRING
REQUESTS**

(FORM B2)

For FY 2026-2027, my agency is (mark "X"):	
☒	Requesting Non-Recurring Appropriations.
☐	Requesting Non-Recurring Federal/Other Authorization.
☐	Not requesting any changes.

**CAPITAL
REQUESTS**

(FORM C)

For FY 2026-2027, my agency is (mark "X"):	
☐	Requesting funding for Capital Projects.
☒	Not requesting any changes.

PROVISOS

(FORM D)

For FY 2026-2027, my agency is (mark "X"):	
☐	Requesting a new proviso and/or substantive changes to existing provisos.
☐	Only requesting technical proviso changes (such as date references).
☒	Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY CONTACT:	Ann Vandervliet	(803) 734-0391	avandervliet@scfirststeps.org
SECONDARY CONTACT:	David O'Kelly	(803) 734-8079	dokelly@scfirststeps.org

I have reviewed and approved the enclosed FY 2026-2027 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<u>Agency Director</u>	<u>Board or Commission Chair</u>
SIGN/DATE:	Ann Vandervliet 9-22-2025	
TYPE/PRINT NAME:	Ann Vandervliet	

This form must be signed by the agency head – not a delegate.

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BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B2 - Non-Recurring	Innovation Investments	5,000,000	0	0	0	5,000,000	0.00	0.00	0.00	0.00	0.00
TOTALS			5,000,000	0	0	0	5,000,000	0.00	0.00	0.00	0.00	0.00

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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	1
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Innovation Investments
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Provide a brief, descriptive title for this request.

AMOUNT	\$5,000,000
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What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply:	
	☐	Change in cost of providing current services to existing program audience
	☐	Change in case load/enrollment under existing program guidelines
	☒	Non-mandated change in eligibility/enrollment for existing program
	☒	Non-mandated program change in service levels or areas
	☐	Proposed establishment of a new program or initiative
	☐	Loss of federal or other external financial support for existing program
	☐	Exhaustion of fund balances previously used to support program
	☐	IT Technology/Security related
	☐	Consulted DTO during development
	☐	HR/Personnel Related
	☒	Request for Non-Recurring Appropriations
	☐	Request for Federal/Other Authorization to spend existing funding
	☐	Related to a Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark “X” for primary applicable Statewide Enterprise Strategic Objective:	
	☒	Education, Training, and Human Development
	☐	Healthy and Safe Families
	☐	Maintaining Safety, Integrity, and Security
	☐	Public Infrastructure and Economic Development
	☐	Government and Citizens

ACCOUNTABILITY OF FUNDS	Additional Innovation Investment funding would support the following strategic priorities. The overarching goal is to ensure at least 75% of South Carolina’s children demonstrate readiness on the Kindergarten Readiness Assessment by 2030. Innovation Investments have been proven to strengthen collaboration between Local Partnerships, achieve administrative efficiencies, and collectively serve more children and families. This in turn increases access and utilization of programs that are both evidence-based and high-intensity.
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency’s accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	These funds would be used to expand Innovation Investments through Local Partnerships willing to work together to reduce administrative costs and collectively serve more children with evidence-based programs.
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What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon

**JUSTIFICATION
OF REQUEST**

New funding provided for Innovation Investments in FY2025-26 increased collaboration between twenty counties, resulting in decreased administrative burden and a significant increase in the number of economically vulnerable children receiving high intensity and evidence-based services. In the first quarter alone the number of children served increased by 11%. Innovation Investments are competitive, with no geographic cap, and they only support programs with substantial and measurable impact. Due to the success of the approach during FY2025-2026, we are asking to maintain and expand programs and services funded this way.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM E – AGENCY COST SAVINGS AND GENERAL FUND REDUCTION
CONTINGENCY PLAN

TITLE	Agency Cost Savings and General Fund Reduction Contingency Plan
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AMOUNT	\$616,180
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What is the General Fund 3% reduction amount? This amount should correspond to the reduction spreadsheet prepared by EBO.

ASSOCIATED FTE REDUCTIONS	No FTEs would be reduced. Any general fund reductions for staffing would be covered by other sources of funds.
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How many FTEs would be reduced in association with this General Fund reduction?

PROGRAM / ACTIVITY IMPACT	The cuts would include the following reductions: The agency would identify \$210,000 in media purchases and other marketing activities charged to the General Fund and either reduce these purchases through vendor contract renegotiations or change the funding to consume other funds instead of general funds. The CDEPP (4K) Program would be reduced by \$406,180, which could result in a reduction of as many as 53 low-income children in the program. Total reduction in Funding of \$616,180.
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What programs or activities are supported by the General Funds identified?

SUMMARY	3% of the recurring General Funds would be $\\$20,539,334 \times .03 = \\$616,180$ and would be broken down as follows. \$210,000 – Reduction in General Fund media purchases and other marketing expenditures \$406,180 – Reduction in CDEPP (4K) payments for full day, 4-year-old kindergarten in private providers throughout the state. \$616,180 - Total Funding Reduction
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Please provide a detailed summary of service delivery impact caused by a reduction in General Fund Appropriations and provide the method of calculation for anticipated reductions. Agencies should prioritize reduction in expenditures that have the least significant impact on service delivery.

AGENCY COST SAVINGS PLANS	N/A
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What measures does the agency plan to implement to reduce its costs and operating expenses by more than \$50,000? Provide a summary of the measures taken and the estimated amount of savings. How does the agency plan to repurpose the savings?