



Domain#1: Fostering Shared Language: Improving Data Quality, Reporting, and Dissemination using Developmentally Appropriate Definitions

Goal #1: Enhance data collection, standardized measurement, and facilitation of timely, consistent data sharing across early care and education (ECE) settings to increase quality and transparency of data on exclusionary discipline practices and accountability for discipline outcomes in ECE settings receiving public funding.

Context (Importance and Successful Implementation):

Action Steps:

- Conduct an assessment on what data is currently collected across ECE settings receiving public funding and identify gaps in:
 - Current policies and procedures for standardized reporting
 - Sociodemographic data capture and disaggregation
 - Incident documentation practices
 - Accountability measures, oversight, and enforcement mechanisms
 - Implementation and fidelity of supportive strategies
 - Dissemination, communication, and transparency protocols
 - Cross-sector and interagency/organization collaboration documentation
 - Outcomes measurement and evaluation
- Identify opportunities to incorporate student discipline data from ECE settings in the South Carolina Early Childhood Integrated Data System (SC ECIDS).
- Identify opportunities to link data collection strategies to licensing and quality improvement processes already implemented in private settings.
- Identify what technical assistance and training is needed to support uptake and incentivize voluntary participation among private providers.
- Engage early care providers, educators, teaching staff, and administrators to inform the development of training and technical assistance strategies to increase their understanding of the data and how it can be operationalized.
- Develop a decision-making matrix across early care and education settings containing a written plan and procedures to inform providers, teaching staff, educators, and administrators how to respond when challenging behavior occurs.
- Identify opportunities to integrate screening tools like the Preschool Expulsion Risk Measure (PERM) utilized in Infant and Early Childhood Mental Health Consultation (IECMHC) into all ECE settings receiving public funding to better understand the likelihood of an early learner being removed from an ECE setting as well as provider and educator perception of the child's behavior and their capacity to address it.
- Develop a standardized template for collecting information around persistent challenging behavior containing information on:
 - What the behavior looks like

- Where the behavior occurs
- Who is engaging in the behavior
- What is happening before the behavior
- What is happening because of the behavior
- Why the behavior is continuing
- What factors both inside and outside the ECE setting are influencing the behavior
- What is the response to supportive strategies
- Explore opportunities to strengthen the MTSS reporting infrastructure.
- Formalize standardized team-based problem-solving plans to be developed and enacted before decisions about placement changes are made and train all ECE staff on implementation and monitoring process.
- Invest in the data infrastructure and training needed for ongoing implementation support, monitoring, and dissemination.
- Explore opportunities to develop a state-specific survey module to collect parent/caregiver perceptions of exclusionary discipline practices to minimize gaps in soft-suspensions and expulsions.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Joint Citizens and Legislative Committee on Children, Local School Districts, South Carolina Department of Education, South Carolina Department of Public Health, South Carolina Department of Social Services, South Carolina Early Childhood Advisory Council, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Legislature, South Carolina Revenue and Fiscal Affairs Office, South Carolina School Board Association, South Carolina State Board of Education

Implementation Supporters: Palmetto State Teachers Association, SC Endeavors, South Carolina Association for School Administrators, South Carolina Child Care Inclusion Collaborative, SC Child Care Resource & Referral, South Carolina Early Childhood Association, South Carolina Education Association, South Carolina Infant Mental Health Association, South Carolina Partnerships for Inclusion, South Carolina Program for Infant/Toddler Care, South Carolina Pyramid PIECES

Domain#1: Fostering Shared Language: Improving Data Quality, Reporting, and Dissemination using Developmentally Appropriate Definitions

Goal #2: Enhance tracking of transition data and strengthen closed-loop referral processes across the transitional service continuum¹ to increase data quality and accountability of referral outcomes for early learners at risk of suspension and expulsion in ECE settings receiving public funding.

Context (Importance and Successful Implementation):

Action Steps:

- Examine what referral pathways are formalized across this continuum and how that information is tracked, monitored, and shared.
- Establish a transition framework that captures information on why a child left an ECE setting, where they went, and what behavioral health supports were offered and their efficacy to minimize gaps in transition and post-expulsion trajectories.
- Explore opportunities to equip parents and caregivers with comprehensive summaries of their child's behavioral support history to share context when entering new programs or clinical settings.
- Examine the infrastructure capacity to link longitudinal discipline and placement data across the transitional service continuum with educational outcomes data and interoperability opportunities considering consent and privacy protections (Family Educational Rights and Privacy Act/Health Insurance Portability and Accountability Act).
- Establish a shared framework for outcome measures with consensus around what success looks like and clear accountability responsibilities about who owns specific outcomes for the child.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Local School Districts, South Carolina Early Childhood Advisory Council, South Carolina Department of Education, South Carolina First Steps, South Carolina Department of Health and Human Services (BabyNet), South Carolina Department of Social Services, South Carolina Infant Mental Health Association, South Carolina Head Start Collaboration Office, South Carolina Legislature, South Carolina Revenue and Fiscal Affairs Office, South Carolina School Board Association, South Carolina State Board of Education

Implementation Supporters: AbleSC, Appleseed Legal Justice Center, Arc of South Carolina, Bradshaw Institute for Community Child Health & Advocacy, Family Connection of South Carolina, South Carolina Parent Teacher Association

¹ Transitional Service Continuum: Clinical services, Individuals with Disabilities Education Act (IDEA) Part C/B, Infant and Early Childhood Mental Health Consultation (IECMHC), Behavioral Supports, and Community-Based Services

Domain #2: Aligning Developmentally Appropriate Suspension and Expulsion Policies Across ECE Settings

Goal #1: Increase understanding of the connection between age and developmentally appropriate behavior using a statewide framework for behavioral expectations in ECE settings (3K – 2nd Grade) that distinguishes developmentally appropriate behavior from misbehavior, providing early learning programs and school districts with a template to align policies with age-appropriate supports rather than holding young learners to the same behavioral standards as older students.

Context (Importance and Successful Implementation):

Action Steps:

- Conduct an assessment of ECE policies, standards, and supports across all ECE settings receiving public funding specific to discipline practices, policies, and codes of conduct to develop a resource identifying alignment of developmentally appropriate language, expectations, and standards supporting implementation of strategies to reduce the use of exclusionary discipline practices.
- Work with the South Carolina State Board of Education to draft a model policy to be adapted by local school boards of education.
- Work with local school boards of education to integrate developmentally appropriate practices and procedures in alignment with regulatory and licensing requirements from the South Carolina Department of Social Services, South Carolina First Steps discipline policies, and federal guidance from Head Start into district Codes of Conduct, professional development, and training resources offered to administrators, teachers, and staff.
- Develop and embed strategies to increase disability and diagnostic awareness as well as considerations for students with IEPs/504s into discipline policies and practices across all ECE settings.
- Explore strategies to increase early care provider, educator, teaching staff, and administrator competency in recognizing behavioral manifestations of common early childhood diagnoses.
- Engage parents/caregivers and IECMH providers in strategies to incorporate diagnostic context into collaborative behavioral planning training.
- Conduct a survey on what behavioral intervention strategies and supports are being utilized, how they are operationalized and monitored, how outcomes are measured, and what additional technical assistance and resources are needed for successful implementation across any setting that reaches early learners from 3k-1st grade.
- Develop a communication strategy tailored for parents/caregivers and early learners to understand why a child is removed from an early care/education setting and how they can be successful upon their return.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Family Connection of South Carolina, Joint Citizens and Legislative Committee on Children, Local School Districts, Palmetto State Teachers Association, South Carolina Association of School Administrators, South Carolina Department of Education, South Carolina

Department of Social Services, South Carolina Early Childhood Association, South Carolina Education Association, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Infant Mental Health Association, South Carolina Legislature, South Carolina Parent Teacher Association, South Carolina School Board Association, South Carolina State Board of Education

Implementation Supporters: Academic Alliance of South Carolina, AbleSC, Arc of South Carolina, Behavior Alliance of South Carolina, Disability Rights South Carolina, South Carolina Child Care Inclusion Collaborative, South Carolina Partnerships for Inclusion, South Carolina Pyramid PIECES

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Domain #3: Expanding Evidence Based Interventions: Developmentally Appropriate Social-Emotional and Behavioral Health Promotion Practices

Goal #1: Develop shared resources for evidence-based promotion, prevention, and intervention practices for all adults caring for and educating early learners to ensure the ECE workforce is prepared to support all children and reduce reliance on exclusionary discipline practices.

Context (Importance and Successful Implementation):

Action Steps:

- Develop crosswalk of all evidence-based interventions tied to SC Early Learning Standard domains of development:
 - Approaches to Play and Learning (APL)
 - Emotional and Social Development (ESD)
 - Health and Physical Development (HPD)
 - Language Development and Communication (LDC)
 - Mathematical Thinking and Expression (MTE)
 - Cognitive Development (CD)
- Develop a shared resource for best practices on screen time management at home and in ECE settings.
- Develop and implement cross-sector messaging campaigns tailored to all adults caring for and educating early learners that are accessible, culturally appropriate, and linguistically responsive prioritizing dissemination to communities most impacted by exclusionary discipline practices through trusted channels and partners.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Local School Districts, Palmetto State Teachers Association, South Carolina Association for School Administrators, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina Department of Education, South Carolina Department of Public Health, South Carolina Department of Social Services, South Carolina Early Childhood Association, South Carolina Education Association, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina School Board Association, South Carolina Speech-Language-Hearing Association

Implementation Supporters: AbleSC, Academic Alliance of South Carolina, Behavior Alliance of South Carolina, Family Connection of South Carolina, South Carolina Child Care Inclusion Collaborative, South Carolina Infant Mental Health Association, South Carolina Partnerships for Inclusion, South Carolina Pyramid PIECES

Domain #3: Expanding Evidence Based Interventions: Developmentally Appropriate Social-Emotional and Behavioral Health Promotion Practices

Goal #2: Strengthen school-family partnerships by providing school districts and early learning programs with strategies to include parent and family voices in the local development of behavioral supports, fostering the mutual trust and shared accountability essential for early learner success.

Context (Importance and Successful Implementation):

Action Steps:

- Identify successful programming for fostering and sustaining positive family partnerships in ECE settings and identify pathways to adapt and scale (PEAR Program, Thrive Richland, SCDE Family and Community Engagement Program, Pyramid Model, etc.).
- Increase coordination with home visiting programs and identify formalized pathways to ensure behavioral concerns are shared with ECE providers and educational staff (Parents as Teachers, Early Head Start, Nurse-Family Partnership, etc.).
- Explore opportunities to expand parent and education support network models at the community-level.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: AbleSC, Arc of South Carolina, Children’s Trust of South Carolina, Family Connection of South Carolina, Local School Districts, South Carolina Department of Education, South Carolina Department of Social Services, South Carolina First Steps, South Carolina Infant Mental Health Association, South Carolina Head Start Collaboration Office, South Carolina Parent Teacher Association, South Carolina School Board Association

Implementation Supporters: Academic Alliance of South Carolina, Behavior Alliance of South Carolina, Bradshaw Institute for Community Child Health & Advocacy, Community-Based Organizations, Faith-Based Partners, Palmetto State Teachers Association, South Carolina Association for School Administrators, South Carolina Child Care Inclusion Collaborative, South Carolina Christian Action Council, South Carolina Early Childhood Association, South Carolina Education Association, South Carolina Partnerships for Inclusion, South Carolina Pyramid PIECES, South Carolina Speech-Language-Hearing Association

Domain #3: Expanding Evidence Based Interventions: Developmentally Appropriate Social-Emotional and Behavioral Health Promotion Practices

Goal #3: Enhance the integration of child-centered practices across all ECE settings that foster positive childhood experiences (PCEs) to mediate the effects of adverse childhood experiences and address trauma responses to support the emotional, social, and character development of early learners.

Context (Importance and Successful Implementation):

Action Steps:

- Examine what MTSS approaches and evidence-based promotion, prevention, and tertiary interventions are working well for specialized populations and identify pathways to adapt and scale across the state.
- Identify existing prevention and trauma-informed initiatives and identify pathways to adapt and scale across the state (Handle with Care, Conscious Discipline, Pyramid Model, PBIS, ACEs training, etc.).
- Enhance training efforts for ECE staff to recognize signs of trauma exposure and ACEs and increase awareness of pathways to connect early learners and their families to appropriate support services.
- Scale multi-sector communities of practice across ECE settings to facilitate information sharing on best practices and successful implementation strategies for trauma-informed approaches.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: AbleSC, Academic Alliance of South Carolina, Behavior Alliance of South Carolina, Children’s Trust of South Carolina, Handle With Care: South Carolina, Local School Districts, Palmetto State Teachers Association, SC Endeavors, South Carolina Association for School Administrators, South Carolina Child Care Inclusion Collaborative, SC Child Care Resource & Referral, South Carolina Early Childhood Association, South Carolina Education Association, South Carolina Department of Education, South Carolina Department of Social Services, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Infant Mental Health Association, South Carolina Partnerships for Inclusion, South Carolina Program for Infant/Toddler Care, South Carolina School Board Association

Implementation Supporters: Bradshaw Institute for Community Child Health & Advocacy, Family Connection of South Carolina, South Carolina Child Care Inclusion Collaborative, South Carolina Department of Public Health, South Carolina Parent Teacher Association, South Carolina Pyramid PIECES, South Carolina Speech-Language-Hearing Association, Transition Alliance of South Carolina

Domain #3: Expanding Evidence Based Interventions: Developmentally Appropriate Social-Emotional and Behavioral Health Promotion Practices

Goal #4: Leverage more public and private resources in public ECE settings to increase the sustainability and viability of evidence-based models and ensure resources are allocated to high-need areas and settings through strengthened public/private partnerships and collaboration.

Context (Importance and Successful Implementation):

Action Steps:

- Conduct statewide fiscal mapping of public and private funding streams and economic impact of existing programs and wrap-around support initiatives targeted for parents/caregivers and educators.
- Explore sustainable funding mechanisms to support the data and technical assistance infrastructure needed for ongoing implementation support of programs with demonstrated success.
- Develop, align, and scale communication and education campaigns aimed at educating the public and policymakers about the importance and value of the ECE workforce similar to Recommendation 7 in the 2023 Teacher Recruitment and Retention Task Force Report.
- Develop, align, and scale communication and education campaigns aimed at educating the public and policymakers about the ECE landscape from Pre-K to 1st grade in South Carolina.
- Develop, align, and scale communication and education campaigns aimed at educating the public and policymakers about workforce needs as drivers of exclusionary discipline practices in ECE settings including shared language around suspension, expulsion, and exclusion.
- Develop, align, and scale communication and education campaigns aimed at educating the public and policymakers on education rights specific to IDEA, ADA, and Section 504 in both policy and practice.
- Develop, align, and scale communication and education campaigns aimed at educating policymakers on the funding landscape supporting ECE workforce recruitment, training, and retention strategies.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Children's Trust of South Carolina, Local School Districts, South Carolina Department of Education, South Carolina Department of Social Services, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Infant Mental Health Association, South Carolina School Board Association

Implementation Supporters: Academic Alliance of South Carolina, Behavior Alliance of South Carolina, Philanthropic Partners, South Carolina Child Care Inclusion Collaborative, South Carolina Early Childhood Advisory Council, South Carolina Legislature, South Carolina Partnerships for Inclusion, South Carolina Revenue and Fiscal Affairs Office, South Carolina Pyramid PIECES

Domain #4: Strengthening Collaborative Decision Making Across Clinical, Transitional, and Education Services: Policy Pathways for Collaboration Among Parents/Guardians, Educators, Support Staff, School-Based Behavioral Health Providers, Medical Providers, and Community Partners

Goal #1: Increase the use of shared language reflecting the relationship between developmental delay, disability, and behavioral health so that parents/caregivers better understand their needs and rights as they move between service pathways across ECE settings.

Context (Importance and Successful Implementation):

Action Steps:

- Explore opportunities to scale and expand cross-sector training on the relationship between developmental delay, disability, behavioral health, exposure to trauma, and challenging behavior training across all ECE settings to establish a shared framework (Handle with Care, IECMH Consultation, Circle of Security, Nurturing Parenting, etc.).
- Explore opportunities to scale and expand prevention-based programming and awareness campaigns prioritizing community leaders and trusted sources to maximize network carrying capacity for targeted dissemination.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: AbleSC, Children’s Trust of South Carolina, Family Connection of South Carolina, Local School Districts, Palmetto State Teachers Association, SC Endeavors, South Carolina Association for School Administrators, South Carolina Child Care Inclusion Collaborative, SC Child Care Resource & Referral, South Carolina Early Childhood Association, South Carolina Education Association, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina Department of Children’s Advocacy, South Carolina Department of Education, South Carolina Department of Social Services, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Infant Mental Health Association, South Carolina Parent Teacher Association, South Carolina Pyramid PIECES, South Carolina School Board Association

Implementation Supporters: Arc of South Carolina, Academic Alliance of South Carolina, Bradshaw Institute for Community Child Health & Advocacy, Behavior Alliance of South Carolina, Community-Based Organizations, Faith-Based Partners, South Carolina Child Care Inclusion Collaborative, South Carolina Christian Action Council, South Carolina Department of Public Health, South Carolina Partnerships for Inclusion

Domain #4: Strengthening Collaborative Decision Making Across Clinical, Transitional, and Education Services: Policy Pathways for Collaboration Among Parents/Guardians, Educators, Support Staff, School-Based Behavioral Health Providers, Medical Providers, and Community Partners

Goal #2: Establish sustainable financing pathways that support enhanced coordination of services across the transitional service continuum to:

- Increase access to referrals and assessments for evaluation and supportive services
- Monitor implementation of interventions, accommodations, and services
- Increase collaborative evaluation, implementation monitoring, and planning with transition teams, behavioral support teams, providers, and parents/caregivers

Context (Importance and Successful Implementation):

Action Steps:

- Strengthen infrastructure and funding for behavioral health supports and cross-agency/organizational partnership through formal MOUs inclusive of key partners across the transitional service continuum with accountability measures for children at risk of exclusionary discipline.
- Explore opportunities to align current funding streams to support collaborative service delivery and behavioral intervention planning.
- Explore opportunities to promote the consistent use of social-emotional, developmental, and ACEs screening tools across key entry and transition points across the ECE continuum.
- Develop a template positive behavior support plan form with links to resources embedded in clinical EMR/EHR platforms for healthcare providers to share with parents/caregivers and transition teams.
- Develop clear closed-loop referral protocols, pathways, and response standards across the transitional service continuum with an emphasis on formalizing communication pathways between ECE settings and pediatric/family medicine providers.
- Identify and establish pathways for sustainable funding mechanisms to integrate IECMH consultation into the transition planning process.
- Identify what existing Medicaid-funded services and reimbursement pathways can be leveraged to support the coordination of care across the continuum for services rendered by case/care coordinators, IECMHC professionals, and SLP/OT/PTs.
- Explore opportunities to develop automatic referral processes for early learners who do not meet the eligibility threshold for IDEA Part C/B services.
- Formalize training and shared competency standards across ECE settings the include information about the transitional service continuum, key partners, when and how to refer, and collaboration pathways.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: American Academy of Pediatrics – South Carolina Chapter, Local School Districts, Palmetto State Teachers Association, Pediatricians/Primary Care/Family Medicine Providers, South

Carolina Association for School Administrators, SC Child Care Resource & Referral, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina Department of Children's Advocacy, South Carolina Department of Education, South Carolina Department of Health and Human Services (BabyNet), South Carolina Department of Public Health, South Carolina Department of Social Services, South Carolina Early Childhood Association, South Carolina Education Association, SC Endeavors, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Higher Education Institutions, South Carolina Infant Mental Health Association, South Carolina Legislature, South Carolina School Board Association, South Carolina State Board of Education, South Carolina Technical Colleges

Implementation Supporters: AbleSC, American Physical Therapy Association South Carolina, Bradshaw Institute for Community Child Health & Advocacy, Medicaid Managed Care Organizations, Palmetto State School Counselor Association, School Social Workers Association of South Carolina, South Carolina Child Care Inclusion Collaborative, South Carolina Partnerships for Inclusion, South Carolina Occupational Therapy Association, South Carolina Pyramid PIECES, South Carolina Speech-Language-Hearing Association

Domain #4: Strengthening Collaborative Decision Making Across Clinical, Transitional, and Education Services: Policy Pathways for Collaboration Among Parents/Guardians, Educators, Support Staff, School-Based Behavioral Health Providers, Medical Providers, and Community Partners

Goal #3: Increase parent, caregiver, family engagement in local strategy development efforts focused on strengthening supports across the transitional service continuum, ensuring that services and resources are informed by lived experience and responsive to the real barriers families encounter while navigating systems of care.

Context (Importance and Successful Implementation):

Action Steps:

- Develop a process for families to report concerns around inclusiveness of care/education settings and appropriateness of services/instruction.
- Enhance and increase the visibility of opportunities for families to engage in the transitional service continuum as active partners.
- Develop a template to for ECE providers, educators, and staff to communicate concerns around challenging behavior to parents/caregivers utilizing the Antecedent-Behavior-Consequence (ABC) approach.
- Develop standardized process for notifying parents/caregivers of all decisions made as a result of or to address challenging behavior during meetings when a parent/caregiver is not present.
- Develop shared educational resources across key family-serving agencies and organizations that are accessible and linguistically appropriate so that parents and families understand what resources are available across this continuum, how and when to access them, and what their rights are when their child is at risk of or experiencing exclusion.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: AbleSC, Arc of South Carolina, Disability Rights South Carolina, Family Connection of South Carolina, Local School Districts, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina Department of Children's Advocacy, South Carolina Department of Education, South Carolina Department of Health and Human Services (BabyNet), South Carolina Department of Public Health, South Carolina Department of Social Services, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Parent Teacher Association, South Carolina School Board Association

Implementation Supporters: Appleseed Legal Justice Center, Bradshaw Institute for Community Child Health & Advocacy, Disability Rights South Carolina, South Carolina Child Care Inclusion Collaborative, South Carolina Infant Mental Health Association, South Carolina Partnerships for Inclusion, South Carolina Pyramid PIECES

Domain #4: Strengthening Collaborative Decision Making Across Clinical, Transitional, and Education Services: Policy Pathways for Collaboration Among Parents/Guardians, Educators, Support Staff, School-Based Behavioral Health Providers, Medical Providers, and Community Partners

Goal #4: Strengthen collaboration for referrals and coordination across child serving agencies and ECE settings to ensure placements and transitions do not exacerbate access barriers to receiving services or disrupt continuity of services especially for children in foster care, children experiencing homelessness, children with fetal alcohol spectrum disorder (FASD), and children with disabilities.

Context (Importance and Successful Implementation):

Action Steps:

- Conduct an assessment of current transition processes across child welfare, ECE, early intervention, and behavioral health settings.
- Explore opportunities to designate transition coordinator roles to oversee coordination across agencies.
- Strengthen infrastructure and funding for cross-agency/organizational partnership through formal MOUs.
- Formalize protocols that require clinical service providers be notified of placement changes with defined timeframes.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Local School Districts, South Carolina Department of Children's Advocacy, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina Department of Education, South Carolina Department of Health and Human Services (BabyNet), South Carolina Department of Juvenile Justice, South Carolina Department of Social Services, South Carolina First Steps, South Carolina Foster Parent Association, South Carolina Head Start Collaboration Office, South Carolina Legislature, South Carolina School Board Association, South Carolina State Board of Education

Implementation Supporters: AbleSC, Appleseed Legal Justice Center, Carolina Health Advocacy Medicolegal Partnership (CHAMPS) Clinic, Children's Trust of South Carolina, Disability Rights South Carolina, Handle With Care: South Carolina, Family Connection of South Carolina, South Carolina Infant Mental Health Association

Domain #4: Strengthening Collaborative Decision Making Across Clinical, Transitional, and Education Services: Policy Pathways for Collaboration Among Parents/Guardians, Educators, Support Staff, School-Based Behavioral Health Providers, Medical Providers, and Community Partners

Goal #5: Increase access to timely preventative and specialized clinical care to improve the identification of health conditions before they manifest as behaviors in ECE settings and strengthen bidirectional communication between ECE and medical professionals.

Context (Importance and Successful Implementation):

Action Steps:

- Explore opportunities to scale successful, evidence-based, home-visiting models to connect families with community-based resources and local care providers (Nurse-Family Partnership, Health Families America, HIPPPY, Parents as Teachers, etc.)
- Explore existing school-based partnerships with pediatric and dental providers or co-located services for families enrolled in ECE programs.
- Strengthen ECE-based pathways to connect families to Medicaid enrollment support.
- Conduct an assessment of current waitlists, workforce supply and distribution, and barriers to accessing specialized clinical care and leverage findings to identify high-need sites for home-visiting models to bridge service gaps.
- Strengthen referral pathways to specialists who can evaluate for conditions like FASD.
- Scale efforts to build the workforce for specialists and home-visiting care teams with specialized training in early childhood development.
- Identify opportunities to strengthen the infrastructure to link investments in clinical service delivery models serving young children to long-term health and educational outcomes.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Bradshaw Institute for Community Child Health & Advocacy, Children's Trust of South Carolina, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina Department of Health and Human Services (BabyNet), South Carolina Department of Public Health, South Carolina First Steps, South Carolina Head Start Collaboration Office

Implementation Supporters: American Academy of Pediatrics – South Carolina Chapter, Primary Care/Family Medicine Providers, South Carolina Department of Education, South Carolina Department of Social Services, South Carolina Infant Mental Health Association

Domain #5: Supporting the Early Childhood Workforce: Training, Technical Assistance, and Workforce Development Opportunities

Goal #1: Increase ECE provider and educator knowledge in child development and awareness of developmentally appropriate, resilience-focused behavior management practices to address challenging behavior through partnerships with higher education institutions, technical colleges, and professional organizations.

Context (Importance and Successful Implementation):

Action Steps:

- Scale and expand tailored professional development through different modalities (group training, on-site practice-based coaching, virtual training, train the trainer, etc.) like the Pyramid Model, Conscious Discipline model, and PBIS to increase capacity among ECE providers and educators to promote well-being and social-emotional growth.
- Establish designated time for reflective supervision across all ECE settings.
- Increase opportunities to be trained on restorative practices and establish designated time to implement across all ECE settings.
- Scale and expand access to communities of practice like the *Pyramid Pieces CORE: Connect on Reframing Expectations* to share successful strategies, classroom management practices, and social emotional curricula.
- Increase access to professional development opportunities offering training on culturally and linguistically responsive care and education.
- Align, scale, and expand communication strategies aimed at increasing awareness of and access to social-emotional screening and referral pathways.
- Increase access to opportunities for continued training and education at ECE conferences.
- Scale and expand professional development opportunities aimed at increasing and promoting family engagement in plans to address behavior of early learners across all ECE settings.
- Explore opportunities for collaboration between ECE settings, school districts, and higher education to partner with community-based organizations to engage retired ECE providers and educators to support curriculum design and mentorship models for new providers and educators entering the workforce.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Local School Districts, Palmetto State Teachers Association, South Carolina Association for School Administrators, SC Child Care Resource & Referral, South Carolina Department of Education, South Carolina Department of Social Services, South Carolina Early Childhood Association, South Carolina Education Association, SC Endeavors, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Higher Education Institutions, South Carolina Infant Mental Health Association, South Carolina Parent Teacher Association, South Carolina School Board Association, South Carolina Technical Colleges, South Carolina State Board of Education

Implementation Supporters: Academic Alliance of South Carolina, Behavior Alliance of South Carolina, Community-Based Organizations, Faith-Based Partners, Family Connection of South Carolina, South Carolina Child Care Inclusion Collaborative, South Carolina Christian Action Council, South Carolina Partnerships for Inclusion, South Carolina Pyramid PIECES, South Carolina Speech-Language-Hearing Association

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Domain #5: Supporting the Early Childhood Workforce: Training, Technical Assistance, and Workforce Development Opportunities

Goal #2: Strengthen the ECE and behavioral health workforce with specialized training in infant and early childhood mental health (IECMH) through partnerships with higher education institutions, technical colleges, and professional organizations.

Context (Importance and Successful Implementation):

Action Steps:

- Expand professional development opportunities for ECE program directors, providers, teaching staff, educators, and administrators to understand and the relationship between behavioral health conditions and developmental/behavioral needs.
- Increase access to opportunities to develop a specialization in IECMH and expand access to infant and early childhood mental health consultation (IECMHC).
- Increase the visibility and awareness of centralized resource hubs and referral pathways to connect providers and educators to supportive services.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Local School Districts, Palmetto State Teachers Association, South Carolina Association for School Administrators, SC Child Care Resource & Referral, South Carolina Department of Children’s Advocacy, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina Department of Education, South Carolina Department of Social Services, South Carolina Early Childhood Association, South Carolina Education Association, SC Endeavors, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Higher Education Institutions, South Carolina Infant Mental Health Association, South Carolina Parent Teacher Association, South Carolina School Board Association, South Carolina Technical Colleges, South Carolina State Board of Education

Implementation Supporters: Academic Alliance of South Carolina, Behavior Alliance of South Carolina, Community-Based Organizations, Faith-Based Partners, Family Connection of South Carolina, South Carolina Child Care Inclusion Collaborative, South Carolina Christian Action Council, South Carolina Partnerships for Inclusion, South Carolina Pyramid PIECES, South Carolina Speech-Language-Hearing Association

Domain #6: Promoting Wellness: Caring for Early Care Providers, Educators, and Caregivers

Goal #1: Improve the emotional and psychological well-being of members of the ECE workforce to increase their capacity to respond to challenging behavior with support rather than removal.

Context (Importance and Successful Implementation):

Action Steps:

- Scale and expand access to programs designed to support the well-being of early childhood education providers like the Be Well Care Well Program.
- Conduct a landscape analysis of available supports and services aimed at improving well-being for the ECE workforce and leverage shared partner networks to disseminate information to increase visibility and uptake of successful programs.
- Explore financing pathways for behavioral health support services for the ECE workforce.
- Explore opportunities for collaboration between ECE settings, school districts, and community-based organizations to engage ECE providers and educators to inform program and strategy design.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: Local School Districts, Palmetto State Teachers Association, South Carolina Association for School Administrators, SC Child Care Resource & Referral, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina Department of Education, South Carolina Department of Social Services, South Carolina Early Childhood Association, South Carolina Education Association, SC Endeavors, South Carolina First Steps, South Carolina Head Start Collaboration Office, South Carolina Infant Mental Health Association, South Carolina School Board Association

Implementation Supporters: Academic Alliance of South Carolina, American Physical Therapy Association South Carolina, Behavior Alliance of South Carolina, Family Connection of South Carolina, School Social Workers Association of South Carolina, South Carolina Child Care Inclusion Collaborative, South Carolina Parent Teacher Association, South Carolina Partnerships for Inclusion, South Carolina Pyramid PIECES, South Carolina Occupational Therapy Association, South Carolina Speech-Language-Hearing Association, Transition Alliance of South Carolina

Domain #6: Promoting Wellness: Caring for Early Care Providers, Educators, and Caregivers

Goal #2: Improve the emotional and psychological well-being of parents/caregivers of early learners to increase their capacity to effectively communicate the needs of their child, engage with ECE providers, educators, and staff as active partners, and foster supportive environments across home and ECE settings.

Context (Importance and Successful Implementation):

Action Steps:

- Scale and expand access to programs designed to support the well-being of parents/caregivers of early learners like Family Connection’s Parent-to-Parent support model, SCIMHA’s Child-Parent Psychotherapy services and Circle of Security Parenting program, PASOs Connections for Child Development services, and First Steps Strengthening Families, HIPPPY, Nurturing Parenting, Triple P, and Connected Families programs.
- Conduct a landscape analysis of available supports and services aimed at improving well-being for parents/caregivers of early learners and leverage shared partner networks to disseminate information to increase visibility and uptake of successful programs.
- Explore opportunities for collaboration between parents/caregivers, ECE settings, school districts, and community-based organizations to engage ECE providers and educators to inform program and strategy design.

Implementation Timeline:

- Year 1:
- Year 3:
- Year 5:

Implementation Champions: AbleSC, Arc of South Carolina, Bradshaw Institute for Community Child Health & Advocacy, Children’s Trust of South Carolina, Community-Based Organizations, Faith-Based Partners, Family Connection of South Carolina, Local School Districts, SC Child Care Resource & Referral, South Carolina Christian Action Council, South Carolina Department of Behavioral Health and Developmental Disabilities, South Carolina First Steps, South Carolina Infant Mental Health Association, South Carolina Head Start Collaboration Office, South Carolina Parent Teacher Association

Implementation Supporters: Pediatricians/Primary Care/Family Medicine Providers, South Carolina Department of Children’s Advocacy, South Carolina Department of Education, South Carolina Department of Health and Human Services (BabyNet), South Carolina Department of Public Health, South Carolina Department of Social Services