



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES U.S. DEPARTMENT OF EDUCATION

POLICY STATEMENT ON EXPULSION AND SUSPENSION POLICIES IN EARLY CHILDHOOD SETTINGS

PURPOSE

The purpose of this policy statement is to support families, early childhood programs, and States by providing recommendations from the U.S. Departments of Health and Human Services (HHS) and Education (ED) for preventing and severely limiting expulsion and suspension practices in early childhood settings. Recent data indicate that expulsions and suspensions occur at high rates in preschool settings. This is particularly troubling given that research suggests that school expulsion and suspension practices are associated with negative educational and life outcomes. In addition, stark racial and gender disparities exist in these practices, with young boys of color being suspended and expelled much more frequently than other children. These disturbing trends warrant immediate attention from the early childhood and education fields to prevent, severely limit, and work toward eventually eliminating the expulsion and suspension – and ensure the safety and well-being – of young children in early learning settings.

This joint HHS and ED policy statement aims to:

- Raise awareness about expulsion, suspension, and other exclusionary discipline practices in early childhood settings, including issues of racial/national origin/ethnic and sex disparities and negative outcomes for children associated with expulsion and suspension in the early years;
- Provide recommendations to early childhood programs and States on establishing preventive, disciplinary, suspension, and expulsion policies and administering those policies free of bias and discrimination;
- Provide recommendations on setting goals and using data to monitor progress in preventing, severely limiting, and ultimately eliminating expulsion and suspension practices in early childhood settings;
- Highlight early childhood workforce competencies and evidence-based interventions and approaches that prevent expulsion, suspension, and other exclusionary discipline practices, including early childhood mental health consultation and positive behavior intervention and support strategies;
- Identify free resources to support States, programs, teachers, and providers in addressing children's social-emotional and behavioral health, strengthening family-program relationships,

¹ Early childhood programs or early childhood settings include any program that provides early care and education to young children birth through age five, including, but not limited to private child care, Head Start, and public, private, and faith-based Pre-K/preschool programs.

² Gilliam, W. S. (2005). Prekindergarteners left behind: Expulsion rates in state prekindergarten systems. New York, NY: Foundation for Child Development.

³ U.S Department of Education Office for Civil Rights (2014). Data Snapshot: Early Childhood Education.

⁴ Gilliam, W.S., & Shahar, G. (2006). Preschool and child care expulsion and suspension: Rates and predictors in one state. Infants & Young Children, 19, 228–245.

⁵ Lamont, J. H., Devore, C. D., Allison, M., Ancona, R., Barnett, S. E., Gunther, R., ... & Young, T. (2013). Out-of-school suspension and expulsion. Pediatrics, 131(3), e1000-e1007.

⁶ Petras, H., Masyn, K. E., Buckley, J. A., Ialongo, N. S., & Kellam, S. (2011). Who is most at risk for school removal? A multilevel discrete-time survival analysis of individual- and context-level influences. Journal of Educational Psychology, 103, 223

⁷ American Psychological Association, Zero Tolerance Task Force Report (2008). An evidentiary review and recommendations.

⁸ It should be noted that a long -standing and continuing practice in Head Start is to not expel or suspend any child.

- increasing developmental and behavioral screening and follow-up, and eliminating racial/national origin/ethnic, sex, or disability biases and discrimination in early learning settings; and
- Identify free resources to support families in fostering young children's development, socialemotional and behavioral health, and relationships.

This policy statement is part of a series of Federal actions that aim to prevent, severely reduce, and ultimately eliminate expulsion and suspension in early childhood settings, and more broadly, to improve school climates and discipline across the educational spectrum. This statement follows the January 2014 release of the Department of Education's *Guiding Principles: A Resource Guide for Improving School Climate and Discipline*, which provides recommendations for reducing expulsion, suspension, and disciplinary removals in K-12 settings. The *Guiding Principles* articulated in that practice guide are as follows:

- Create positive climates and focus on prevention;
- Develop clear, appropriate, and consistent expectations and consequences to address disruptive student behaviors; and
- Ensure fairness, equity, and continuous improvement.

Although early childhood settings differ in context from K-12 settings, the *Guiding Principles* are applicable to both, such that focusing on prevention, developing and communicating clear behavioral expectations, and ensuring fairness, equity, and continuous improvement, can and should be applied across settings where children learn. In addition to this policy statement, HHS and ED are working together to raise awareness of the issue, encourage State and local policy development, invest in professional development for the early childhood workforce, disseminate resources to support families, programs, and States, and enforce Federal civil rights law that prohibit discriminatory discipline practices. We want to work toward a goal of ensuring that all children's social-emotional and behavioral health are fostered in an appropriate high-quality early learning program, working toward eventually eliminating expulsion and suspension practices across early learning settings.

OVERVIEW

The beginning years of any child's life are critical for building the early foundation of learning, health and wellness needed for success in school and later in life. During these years, children's brains are developing rapidly, influenced by the experiences, both positive and negative, that they share with their families, caregivers, teachers, peers, and in their communities. A child's early years set the trajectory for the relationships and successes they will experience for the rest of their lives, making it crucial that children's earliest experiences truly foster – and never harm – their development. As such, expulsion and suspension practices in early childhood settings, two stressful and negative experiences young children and their families may encounter in early childhood programs, should be prevented, severely limited, and eventually eliminated. High-quality early childhood programs provide the positive experiences that nurture positive learning and development.

⁹ ED's Office for Civil Rights and HHS' Office for Civil Rights enforce several Federal civil rights laws that prohibit discrimination in early childhood programs receiving Federal financial assistance from their respective departments, including: Title VI of the Civil Rights Act of 1964 (Title VI), 42 U.S.C. §§ 2000d - 2000d-7 (prohibiting discrimination based on race, color, or national origin by recipients of Federal financial assistance); Title IX of the Education Amendments of 1972 (Title IX), 20 U.S.C. §§ 1681 – 1688 (prohibiting discrimination based on sex by recipients of Federal financial assistance); and Section 504 of the Rehabilitation Act of 1973 (Section 504), 29 U.S.C. § 794 (prohibiting discrimination based on disability by recipients of Federal financial assistance. ED, HHS, and the Department of Justice share authority to enforce Title II of the Americans with Disabilities Act, 42 U.S.C. §§ 12131 – 12134, which prohibits discrimination based on disability by state and local governments, regardless of whether they received Federal financial assistance. In addition, the Department of Justice enforces Title III of the American with Disabilities Act, 42 U.S.C. §§ 12181 – 12189, which prohibits disability discrimination in most private early childhood programs.

programs.

10 National Research Council and Institute of Medicine (2000) From Neurons to Neighborhoods: The Science of Early Childhood Development. Committee on Integrating the Science of Early Childhood Development. Jack P. Shonkoff and Deborah A. Phillips, eds. Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education. Washington, D.C.: National Academy Press.

Suspension and expulsion can influence a number of adverse outcomes across development, health, and education. Young students who are expelled or suspended are as much as 10 times more likely to drop out of high school, experience academic failure and grade retention, hold negative school attitudes, and face incarceration than those who are not.^{5,6,7} While much of this research has focused on expulsion and suspension in elementary, middle, and high school settings, there is evidence that expulsion or suspension early in a child's education is associated with expulsion or suspension in later school grades. 11

Not only do these practices have the potential to hinder social-emotional and behavioral development, they also remove children from early learning environments and the corresponding cognitively enriching experiences that contribute to healthy development and academic success later in life. Expulsion and suspension practices may also delay or interfere with the process of identifying and addressing underlying issues, which may include disabilities or mental health issues. Some of these children may have undiagnosed disabilities or behavioral health issues and may be eligible for additional services, but in simply being expelled, they may not receive the evaluations or referrals they need to obtain services. For example, the source of challenging behavior may be communication and language difficulties, skills that can be improved through early assessment and intervention services. In these cases, appropriate evaluation and follow-up services are critical, but less likely if the child is expelled from the system. Finally, expulsions may contribute to increased family stress and burden. In many cases, families of children who are expelled do not receive assistance in identifying an alternative placement, leaving the burden of finding another program entirely to the family. There may be challenges accessing another program, particularly an affordable high-quality program. Even in cases where assistance is offered, often there is a lapse in service which leaves families, especially working families, in difficult situations. 12

Furthermore, if administered in a discriminatory manner, suspensions and expulsions of children may violate Federal civil rights laws. ED and the Department of Justice recently issued guidance explaining the obligation of recipients of Federal financial assistance to administer student discipline without regard to race, color, or national origin. ¹³ In addition, early childhood programs must comply with applicable legal requirements governing the discipline of a child for misconduct caused by, or related to, a child's disability, including, as applicable, implementing reasonable modifications to policies, practices, or procedures to ensure that children with disabilities are not suspended or expelled because of their disability-related behaviors unless a program can demonstrate that making such modifications would result in a fundamental alteration in the nature of a service, program, or activity. ¹⁴ If the child's behavior impedes the child's learning, or that of others, the IEP Team¹⁵ must consider behavioral intervention strategies, including the use of positive behavioral interventions and supports, when developing the initial IEP, or modifying an existing IEP, so as to reduce the need for discipline of a child with disabilities and avoid suspension or expulsion from a preschool program. In addition, preschool children with disabilities aged three through five who are eligible for services under the IDEA are entitled to the same disciplinary protections that apply to all other IDEA-eligible children with disabilities, and may not be subjected to impermissible disciplinary changes of placement for misconduct that is caused by or related to their disability, and must continue to receive educational services consistent with their right to a free appropriate public education (FAPE) under the IDEA. 16

Data released over the past decade have shown high rates of expulsion and suspension in early childhood programs, with variability in rate depending on the setting. ^{2,3,4} For example, a nationally representative

¹¹ Raffaele Mendez, L. (2003). Predictors of suspension and negative school outcomes: A longitudinal investigation. New Directions for Youth Development, 99, 17-33.

¹² Van Egeren, L.A., Kirk, R., Brophy-Herb, H.E., Carlson, J. S., Tableman, B. & Bender, S. (2011). An Interdisciplinary Evaluation Report of Michigan's Child care Expulsion Prevention (CCEP) Initiative. Michigan State University.

¹³ ED Office for Civil Rights and DOJ, Dear Colleague Letter on the Nondiscriminatory Administration of School Discipline, at 3-4 (2014), www.ed.gov/ocr/letters/colleague-201401-title-vi.pdf

³⁴ C.F.R. §§ 104.4, 104.38; 28 C.F.R. § 35.130(b)(1), (7).

¹⁶ 34 CFR §§300.530 through 300.536 (IDEA's disciplinary protections) and 34 CFR §§300.101 and 300.17 (FAPE).

study published in 2005 found that over 10% of preschool teachers in state-funded prekindergarten programs reported expelling at least one preschooler in the past year: a rate more than three times higher than estimates for teachers of K-12 public school students.² A 2006 study examined expulsion in child care programs not participating in a State prekindergarten system, in one State. In these settings, 39% of preschool teachers reported expelling a child in the past year. Experts have suggested that rates are high because early education is voluntary, many programs do not have established policies, and often these programs have less infrastructure and workforce support than do public schools or more structured early education programs, like Head Start. This suggests that established policies and investments in supports for programs may help reduce these rates.

Data also indicate that specific groups of children are being disproportionately expelled and suspended from their early learning settings; a trend that has remained virtually unchanged over the past decade. 2,3,4 Recent data out of ED indicate that African-American boys make up 18% of preschool enrollment, but 48% of preschoolers suspended more than once. Hispanic and African-American boys combined represent 46% of all boys in preschool, but 66% of their same-age peers who are suspended. Analyses of boys, compared to girls, indicated that they make up 79% of preschoolers suspended once, and 82% of preschoolers suspended multiple times.³ Although why these gender and racial disparities exist in early childhood settings has not yet been empirically investigated, research demonstrating similar disparities in school-aged children has found that potential contributors may include uneven or biased implementation of disciplinary policies, discriminatory discipline practices, school racial climates, and under-resourced, inadequate education and training for teachers, especially in self-reflective strategies to identify and correct potential biases in perceptions and practice. 5,7,17,18

To that end, ensuring that the early childhood workforce is adequately trained, supported, and prepared to help all children excel is a key strategy in limiting and eventually eliminating early expulsion and suspension. Unfortunately, many teachers and providers do not have sufficient training and support to meet this goal. The 2012 National Survey of Early Care and Education indicates that only about 20% of teachers and providers serving children under five reported receiving specific training on facilitating children's social and emotional growth in the past year. 19 Other studies have found that early learning teachers report that coping with challenging behavior is their most pressing training need. ^{20,21} Aside from not having adequate support in fostering social-emotional development and appropriately responding to challenging behavior, without enough training in child development, it may be difficult to distinguish behaviors that are inappropriate from those that are developmentally age appropriate. Early childhood experts posit that developmentally inappropriate behavioral expectations may lead to inappropriate labeling of child behavior as challenging or problematic.²² Furthermore, teachers must also be trained to recognize behaviors that may be a manifestation of a child's disability. This training is essential to ensure that children with disabilities receive reasonable modifications for their disabilities and are not impermissibly suspended or expelled for behaviors caused by disabilities. 9,14

Early suspension, expulsion, and other exclusionary discipline practices contribute to setting many young children's educational trajectories in a negative direction from the beginning. This has long-term consequences for children, their families, and the schools that they will later attend. More broadly, there

¹⁷ Gregory, A., Skiba, R. J., & Noguera, P. A. (2010). The Achievement Gap and the Discipline Gap Two Sides of the Same Coin?.? Educational

Researcher, 39(1), 59-68. ¹⁸ Skiba, R. J., Horner, R. H., Chung, C. G., Rausch, M., May, S. L., & Tobin, T. (2011). Race is not neutral: A national investigation of African American and Latino disproportionality in school discipline. School Psychology Review, 40(1), 85.

¹⁹ National Survey of Early Care and Education. http://www.acf.hhs.gov/programs/opre/research/project/national-survey-of-early-care-andeducation-nsece-2010-2014

Yoshikawa, H. & Zigler, E. (2000). Mental health in Head Start: New directions for the twenty-first century. Early Education and Development, 11, 247-264.

²¹ Fox, L. & Smith, B. (2007). Issue Brief: Promoting social, emotional, and behavioral outcomes of young children served under IDEA. Challenging Behavior, Retrived November 24, 2014 from www.challengingbehavior.org/do/resources/documents/brief_promoting.pdf
²² Qi, C. H., & Kaiser, A. P. (2003). Behavior problems of preschool children from low-income families: Review of the literature. Topics in early childhood special education, 23(4), 188-216.

are societal consequences of setting children on a negative path, including exacerbating inequality. Resolving this issue will require an all-hands-on-deck approach and a shared responsibility between families, programs, and government at all levels. The most important steps programs, schools, and States can take in preventing, severely limiting, and ultimately eliminating expulsion and suspension practices in early childhood settings are combining developmentally appropriate and nondiscriminatory discipline procedures and policies, with targeted workforce professional development focused on promoting the social-emotional and behavioral health of all children and enhancing teacher and provider self-reflective capacity to prevent and eliminate biases in practice.

RECOMMENDATIONS FOR EARLY CHILDHOOD PROGRAMS

Develop and Clearly Communicate Preventive Guidance and Discipline Practices: In accordance with the first and second Guiding Principles, programs should establish developmentally appropriate social-emotional and behavioral health promotion practices, and discipline and intervention procedures. These practices and procedures should be clearly communicated to all staff, families, and community partners, and implemented consistently and without bias or discrimination. Preventive and discipline practices should be used as learning opportunities to guide children's appropriate behavioral development. Children's desired behavior should be reinforced and consequences for challenging behavior should be developmentally appropriate and consistent. Programs should pay distinct attention to the developmental appropriateness of both behavioral expectations and consequences for challenging behavior, given the substantial developmental and experiential differences among children birth through age five and the range of what is age-appropriate across this age range. Programs should also pay distinct attention to the language they use in shaping children's behavior and communicating with families. Language commonly used in the criminal justice system, such as the use of "probation plans" or "three strikes and you are out" frameworks, should not be applied to discipline frameworks in early childhood programs (e.g. "three bites and you are out"). These terms connote criminal behavior and inappropriately label children.

Program discipline procedures should provide specific guidance on what teachers and programs will do when presented with challenging behaviors, including specific teacher and staff responses, communication with families and caregivers, and consulting with mental health specialists, school counselors, and the child's medical home. ²³ In addition, if the child is suspected of having a developmental delay, disability, or mental health issue, it may be appropriate to refer the child's parents to the mental health system, the State's early intervention program, or their local school for information regarding evaluation for services under the Individuals with Disabilities Education Act (IDEA) Part B or C programs. These systems can conduct an evaluation, so that if the child is eligible, he or she may receive the appropriate services and supports as soon as possible. Children eligible for services under Part B or C are also likely entitled to protections under Title II and Title III of the ADA, such that programs must make reasonable modifications to their policies, practices, or procedures to ensure that children with disabilities are not suspended or expelled because of their disability-related behaviors. ^{9,14,22,24}

Develop and Clearly Communicate Expulsion, and Suspension Policies: Currently, many early childhood programs do not have suspension or expulsion policies. However, some programs, like Head Start, have a long-standing and continuing practice to prohibit the expulsion or suspension of any child.

²³ The modern medical home is a home base for any child's medical and non-medical care. It is a cultivated partnership between the patient, family, and primary provider in cooperation with specialists and support from the community. A medical home is a home base for any child's medical and non-medical care. http://www.hrsa.gov/healthit/toolbox/Childrenstoolbox/BuildingMedicalHome/whyimportant.html
²⁴ The IDEA Part C program makes early intervention services available to children with disabilities, generally ages birth to age three (and at the State's option, beyond age three until kindergarten), and the IDEA Part B program requires States and their public agencies to make available a free appropriate public education to children with disabilities, beginning at age three and lasting through 21 depending on State law or practice. The IDEA Part B and Part C programs have different eligibility criteria and service requirements. IDEA Part B is codified at 20 U.S.C. 1401 1411-1419 and implementing regulations are at 34 CFR Part 303.

Early childhood programs are strongly encouraged to establish policies that eliminate or severely limit expulsion, suspension, or other exclusionary discipline; these exclusionary measures should be used only as a last resort in extraordinary circumstances where there is a determination of a serious safety threat that cannot otherwise be reduced or eliminated by the provision of reasonable modifications, consistent with the second *Guiding Principle*. Even in such extraordinary cases, the program should assist the child and family in accessing services and an alternative placement through, for example, community-based child care resource and referral agencies. In addition, consistent with the third *Guiding Principle*, early childhood programs must ensure that discipline policies comply with Federal civil rights laws.^{9,14,22}

Should a situation arise where there is documented evidence that all possible interventions and supports recommended by a qualified professional, such as an early childhood mental health consultant, have been exhausted – and it is unanimously determined by the family, teacher, program, and other service providers that another setting is more appropriate for the well-being of the child in question – all parties, including the receiving program, should work together to develop a seamless transition plan and use that plan to implement a smooth transition. If the child has a disability, including children receiving services under Part B of the IDEA, additional procedural safeguards and nondiscrimination requirements apply. When making decisions about transitioning a child and family to another program, specific attention should be paid to ensure that the new program is inclusive and offers a rich social context and opportunities for interactions with socially competent peers to ensure that children can optimize their learning, and develop their social skills alongside their peers in a natural environment. The program transitioning the child should also undergo a self-evaluation and identify systemic reforms and professional development actions they may take to prevent the need for such transitions in the future. The family should be encouraged to inform the child's primary health care provider so that developmental and health evaluations may be conducted and so the health care provider may serve as a coordinating support to the family.

Once appropriate policies and procedures are established, early childhood programs should clearly communicate them with all staff, families, health and mental health consultants, and community partners. Clear communication will enable program administrators, teachers, aides, and other staff to be consistent in their implementation of prevention and intervention strategies as well as their expulsion/suspension practices, and will ensure that all parties share the same information and operate with the same set of assumptions. Clear and consistent policies may reduce the likelihood of inconsistent, ad-hoc, or discriminatory decision-making and help address racial disparities by reducing subjective behavioral judgments that have been shown to contribute to racial discipline disparities in the K-12 context. ²⁸

All programs must ensure that the policies developed, and implementation of those policies, are in accordance with applicable State and Federal statutes. Such statutes include, but are not limited to IDEA, Title II of the Americans with Disabilities Act (ADA), and Section 504 of the Rehabilitation Act.

Access Technical Assistance in Workforce Development to Prevent Expulsion and Suspension:

Teachers and support staff are the most critical ingredients of high-quality early learning programs. Several core program features, facilitated by a strong workforce, can assist in preventing, severely limiting, and ultimately eliminating expulsions and suspensions. In accordance with the first *Guiding*

²⁵ Determinations of safety threats must be based on actual risks, best available objective evidence, and cannot be based on stereotypes or generalizations.

²⁶ For children receiving services under IDEA, Part B, public agencies must comply with applicable requirements, including those in 34 C.F.R. § §§\$300.530 through 300.536, when considering discipline actions against a child with a disability as well as ED's Section 504 regulations. 34 C.F.R. §§ 104.4, 104.38. In addition, public entities must comply with Title II. 28 C.F.R. § 35.130(b)(7). For additional information about IDEA requirements,,, see the June 2009 Questions and Answers on Discipline Procedures, available at http://idea.ed.gov/explore/view/p/%2Croot%2Cdynamic%2CQaCorner%2C7%2C
An inclusive setting is a setting where all children regardless of ability or disability, porticipate fully in processor activities. Learn teaching and the control of the control

²⁷ An inclusive setting is a setting where all children, regardless of ability or disability, participate fully in program activities, learn together, and form meaningful relationships with one another.

²⁸ Skiba, R. J., Chung, C. G., Trachok, M., Baker, T. L., Sheya, A., & Hughes, R. L. (2014). Parsing Disciplinary Disproportionality Contributions of Infraction, Student, and School Characteristics to Out-of-School Suspension and Expulsion. *American Educational Research Journal*, *51*(4), 640-670.

Principle – create positive climates and focus on prevention – programs should strive to build their workforce's capacity in:

- Promoting children's social-emotional and behavioral health and appropriately addressing challenging behavior;
- Forming strong, supportive, nurturing relationships with children;
- Conducting ongoing developmental monitoring, universal developmental and behavioral screenings at recommended ages, and follow-up, as needed;
- Collaborating with community-based service providers, including the child's medical home, and connecting children, families, and staff to additional services and supports as needed;
- Forming strong relationships with parents and families;
- Having a strong understanding of culture and diversity;
- Employing self-reflective strategies and cultural awareness training to prevent and correct all implicit and explicit biases, including racial/national origin/ethnic, sex, or disability biases; and
- Eliminating all discriminatory discipline practices.

To prevent, severely limit, and ultimately eliminate expulsion and suspension practices, all program staff should have a strong set of skills; equally essential, however, is ensuring that they have access to additional support from specialists or consultants, such as early childhood mental health consultants, behavioral specialists, school counselors, or special educators. Such support would provide assistance in conducting more sophisticated evaluations; identifying additional services if needed for children, families, or staff; understanding and responding appropriately to other behavioral determinants in the child's life, such as exposure to traumatic events or stressors; developing evidence-based individualized behavior support plans for children who require them; and building greater capacity in teachers and staff to implement those behavior support plans and engage in self-reflective practice that can help prevent and eliminate potential biases in practice. Early childhood teachers who report regular access to such mental health and behavioral supports, report half the rate of expulsions than do teachers who report no such access. Unfortunately, only about one in five teachers report regular access to behavioral consultants of any type. 26 Practices like early childhood mental health consultation and positive behavior intervention and support, both of which generally consist of staff capacity building paired with external specialized support, have been shown to reduce and prevent expulsion and suspension in early learning and school settings, as well as reduce rates of teacher-rated challenging behaviors in young children. 29,30,31 Appendices 1 and 2 contain additional information on early childhood mental health consultation and positive behavior intervention and support, respectively.

Finally, early childhood programs should promote teacher health and wellness and ensure that teachers work reasonable hours with breaks. Programs should have strong relationships with community-based service providers that can offer teachers additional social services, as needed, including health and mental health supports. Promoting teacher wellness may strengthen teachers' capacity to form strong nurturing relationships with children, as well as reduce teacher job stress, which has been shown to be predictive of preschool expulsions.²⁶

Combined, workforce wellness, preparation and development, and access to expert supports, may assist programs in preventing, severely limiting, and ultimately eliminating expulsion and suspension in early childhood settings.

²⁹ Gilliam, W.S. (2007). Reducing Behavior Problems in Early Care and Education Programs: An Evaluation of Connecticut's Early Childhood Consultation Partnership. IMPACT series, Child Health and Development Institute, Farmington, CT.

³⁰ Hepburn, K.S., Perry, D.F., Shivers, E.M., & Gilliam, W.S. (2013). Early childhood mental health consultation as an evidence-based practice: Where does it stand? *Zero to Three, 33*, 10-19.

³¹ Bradshaw, C., Mitchell, M., & Leaf, P. (in press). Examining the effects of school-wide positive behavioral interventions and supports on student outcomes: Results from a randomized controlled effectiveness trial in elementary schools. *Journal of Positive Behavior Interventions*.

Set Goals and Analyze Data to Assess Progress: ³² Programs will progress at different paces in fully implementing consistent preventive practices, severely limiting, and eventually eliminating expulsion and suspension practices due to program variability in size and access to resources. In accordance with the third *Guiding Principle* – ensure fairness, equity, and continuous improvement – it is important that all programs set their own goals, monitor their data to assess progress, and modify their practices and investments, as needed, to reach their goals. Several types of data can be useful in assessing progress, depending on the specific goal. Some examples of useful data to collect include:

- Percentage of teachers with regular access to a behavioral or mental health consultant;
- Percentage of children who receive developmental and behavioral screenings on regular schedules:
- Percentage of children with challenging behaviors who have received a comprehensive evaluation for services under Part B or Part C;
- Number of behavior incident reports, broken down by child and setting characteristics;
- Number of suspensions and expulsions broken down by race, gender, and disability; and
- Number of suspensions and expulsions broken down by teacher/provider, class/group size, teacher-child ratio, and length of day.

Examples of goals may include:

- Provide professional development on social-emotional and behavioral health to all staff in one year; ensure that 50% of teachers have access to specialists or consultants in two years; ensure that all lead teachers have access to specialists or consultants in three years.
- Adopt a program-wide positive behavior intervention and support framework in one year.
- Reduce the number of total suspensions and expulsions program-wide by 50% in one year; eliminate all expulsions and suspensions, with exceptions only in extraordinary cases, in two years.

Make Use of Free Resources to Enhance Staff Training and Strengthen Family Partnerships: There are several currently and formerly Federally funded resources available free of charge that can assist in preventing, severely limiting, and ultimately eliminating expulsion and suspension. Resources include – but are not limited to – the National Resource Center for Health and Safety in Child Care and Early Education's *Stepping Stones to Caring for Our Children: National Health and Safety Performance Standards*, which can assist programs in establishing disciplinary and expulsion/suspension policies; HHS and ED's *Birth to Five Watch Me Thrive* materials, which can enhance developmental and behavioral screening practices in early learning settings; and materials from the *National Center on Early Childhood Mental Health Consultation, Center for the Social Emotional Foundation for Early Learning (CSEFEL)*, and the *Technical Assistance Center on Social Emotional Intervention (TACSEI)*, which can be used to bolster staff training on social-emotional and behavioral support for very young children. Programs should access and make use of these resources, as appropriate, to aid in their efforts to prevent, severely limit, end eventually eliminate expulsion and suspension practices. Appendices 3 and 4 offer resources for programs/teachers and families, respectively.

RECOMMENDATIONS FOR STATE ACTION

Develop and Clearly Communicate Expulsion and Suspension Policies: States are strongly encouraged to establish statewide policies, applicable across settings, including publicly and privately

³² Note that, in some cases, public preschool programs may already be required to collect this data for purposes of the Civil Rights Data Collection (CRDC). The CRDC is a mandatory data collection, authorized under the statutes and regulations implementing Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and under the Department of Education Organization Act (20 U.S.C. § 3413). The regulations implementing these provisions can be found at 34 CFR 100.6(b); 34 CFR 106.71; and 34 CFR 104.61.

funded early childhood programs, to promote children's social-emotional and behavioral health and eliminate or severely limit the use of expulsion, suspension, and other exclusionary discipline practices; these exclusionary measures should be used only as a last resort in extraordinary circumstances where there is a determination of a serious safety threat²⁵ that cannot otherwise be reduced or eliminated by the provision of reasonable modifications, consistent with the second Guiding Principle. In addition, consistent with the third Guiding Principle, States must ensure that discipline policies comply with Federal civil rights laws. Should a situation arise where there is documented evidence that all possible interventions and supports recommended by a qualified professional have been exhausted and it has been determined that transitioning a child to another program is necessary for the well-being of the child or his or her peers, the State should encourage programs to take a series of documented steps to ensure a smooth transition into another setting that offers a rich social context and opportunities for interactions with socially competent peers so that children's learning and social skills practice is optimized in a natural environment. If the child has a disability and is receiving services under IDEA, the State must ensure that additional applicable procedural safeguards and requirements are met. In addition, the State is responsible for nondiscrimination on the basis of disability in its programs in compliance with Title II of the ADA and Section 504 of the Rehabilitation Act.

These policies may be included in State child care licensing regulations, as some States have begun doing. Many States currently address behavior and discipline in their child care licensing regulations. Adding explicit policies on expulsion and suspension is an important next step.

These policies and procedures should be clearly communicated to all relevant parties, including programs, schools, families, community partners, and others. Under the reauthorized Child Care and Development Block Grant Act of 2014, States are required to disseminate consumer education information to parents, the general public, and child care providers. These efforts must include information about State policies regarding the social-emotional behavioral health of young children, which may include positive behavior intervention and support models, and policies on the expulsion of young children in early childhood programs receiving assistance under the Child Care and Development Fund (CCDF).

Set Goals for Improvement and Analyze Data to Assess Progress: States should work on building capacity to collect and analyze statewide data on expulsions, suspensions, and other exclusionary discipline practices. States are encouraged to coordinate data systems across early childhood programs and track their own information on early childhood workforce professional development or continuing education, access to behavioral or mental health specialists, investments and effects of prevention efforts, and expulsion and suspension from early childhood programs. These systems should also align with K-12 data systems. States are also encouraged to develop roadmaps to eliminating expulsion and suspension, informed by goals and data-driven progress monitoring. Goals may differ across States, but examples may include:

- Incorporate basic training on social-emotional and behavioral health in State entry-level credentials in one year; ensure 50% of community colleges and universities incorporate social-emotional and behavioral health, with guidance on real-world applicability, in teacher preparation programs in two years.
- Ensure that 25% of programs have access to early childhood mental health consultant within one year; ensure that 50% of programs have access to early childhood mental health consultant within two years; ensure that 100% of programs have access to mental health consultant within three years;
- Reduce the number of total suspensions and expulsions statewide by 25% within one year; 50% within two years; and 75% in three years.

Invest in Workforce Preparation and Development: States have a significant role to play in ensuring that the early childhood workforce has a strong knowledge base and skills, and access to behavioral

specialists or mental health consultants, to prevent expulsion, suspension, and other exclusionary discipline practices. The Child Care and Development Block Grant of 2014 directs States to use a percentage of funds on activities that enhance the quality of child care programs. Among the list of allowable quality enhancement activities are behavioral management strategies and training that promotes positive social-emotional development and reduces challenging behaviors and expulsion practices. States can strengthen their workforce through a variety of mechanisms, including:

State Entry-Level Credentials: Many States have established early childhood development credentials for entry-level providers and teachers. By including practice-based professional development in State entry-level credentials, focused on enhancing teacher and provider skills in promoting children's social-emotional and behavioral health and capacity to identify and eliminate biases, States can ensure that new providers, teachers, and support staff have the skills to appropriately support all children, enabling them to play an important role in eliminating expulsion and suspension.

Higher Education: States can work with their local institutions of higher education, including universities and community colleges, to ensure that a strong component of teacher preparation, including coursework and student teaching/internships, includes social-emotional and behavioral health promotion and self-reflection capacity to identify and eliminate biases.

Statewide Early Childhood Mental Health Consultation: States can leverage Federal, State, and private funding to implement statewide early childhood mental health consultation systems so that all early learning programs have access to a knowledgeable early childhood mental health consultant. Several States have funded early childhood mental health consultation systems, and the results of several evaluations of these systems using a variety of evaluative methods indicate strong effectiveness. The What Works publication (2009) outlines several successful statewide systems of early childhood mental health consultation that can serve as models or roadmaps for States interested in developing or expanding their mental health consultation efforts (see Appendix 1).

State Endorsements for Infant, Early Childhood, and Family Mental Health Specialists: Some States have invested in endorsements that recognize a set of knowledge, skills, and competencies in infant and early childhood mental health. In providing a standard set of competencies, these endorsements help ensure a high-quality mental health workforce equipped with the skills to work with very young children and the adults who care for them.

Statewide Models of Positive Behavior Intervention and Supports (PBIS): States can adopt a PBIS framework. Through this, they can plan, implement and sustain a professional development system to enhance the knowledge and skills of the early childhood workforce in meeting the social-emotional and behavioral health needs of young children in inclusive and natural environments. Appendix 2 contains information on program-wide models of positive behavior interventions and supports.

Career Pathways: States can build early childhood career pathways that incorporate progressively advanced capacity in social-emotional and behavioral health promotion and self-reflection to identify and eliminate biases at each step in the career ladder. As with other knowledge and skills, students should demonstrate competencies in such content areas prior to advancement to the next step in their career.

Establish and Implement Policies Regarding Program Quality: Several factors related to the overall quality of early care and education programs are predictive of expulsion, suspension, and other exclusionary discipline practices. These quality factors should be targeted by States to both increase

overall quality of early learning services and reduce or eliminate expulsions, suspensions, and other exclusionary discipline practices. For example, staff qualifications should be high and professional development should be provided on an ongoing basis, including professional developmental that addresses social-emotional and behavioral development and exclusionary discipline practices. Programs should adhere to group sizes and child/adult ratios no greater than those recommended in the National Resource Center for Health and Safety in Child Care and Early Education's *Stepping Stones to Caring for Our Children*. Teachers should use developmentally appropriate, culturally and linguistically responsive practices and evidence-based curricula and create learning environments aligned with the State early learning and development standards. Children should have access to comprehensive services and individual accommodations and supports as needed. Health and safety standards should be implemented and programs should be evaluated to ensure continuous improvement.

Access Free Resources to Develop and Scale Best Practices: Several free resources are available to assist States in eliminating expulsion and suspension in early childhood settings. For example, technical assistance resources from centers such as the previously Federally funded CENTER (CSEFEL) and the Technical Assistance Center on Social Emotional Intervention (TACSEI), offer helpful information for States interested in implementing statewide positive behavior intervention and support strategies; the National Health Consultation offers numerous resources on statewide early childhood mental health consultation systems; the National Center on Culturally Responsive Systems houses materials to enhance cultural responsiveness in educational settings; and National Health and Safety Performance Standards provides guidance on establishing expulsion and suspension policies. Appendix 5 provides several free resources that States can access, as appropriate, to address expulsion and suspension practices.

CONCLUSION

Fostering the social-emotional and behavioral development of all children, and in doing so eliminating expulsion and suspension practices in early childhood settings, depends on strong partnerships between families, programs, and government, serious investments in workforce wellness, preparation and training, and development of appropriate and clearly communicated policies that are implemented consistently and without bias or discrimination across the diversity of young children represented in early learning settings. Those who serve our youngest learners have the responsibility and trust of setting infants, toddlers, and young children on positive trajectories. By reducing and ultimately eliminating expulsion and suspension through nurturing relationships and capacity building, with and on behalf of young children and their families, we can ensure that all of our youngest learners have the tools and experiences they need to thrive.

APPENDIX 1: Early Childhood Mental Health Consultation³³

Early Childhood Mental Health Consultation (ECMHC) is a multi-level preventive intervention that teams mental health professionals with people who work with young children and their families to improve their social-emotional and behavioral health and development. ECMHC builds the capacity of providers and families to understand the powerful influence of their relationships and interactions on young children's development. Children's well-being is improved and mental health problems are prevented and/or reduced as a result of the mental health consultant's partnership with adults in children's lives. ECMHC includes skilled observations, individualized strategies, and early identification of children with and at risk for mental health challenges. The model also includes strengthening of the teacher-family relationship and connecting young children, teachers, and families to additional mental or behavioral health services, as needed. The amount of time a consultant spends with a program/teacher varies depending on need, but most programs range between three and six months, with visits once or twice a week. "Booster" or "follow up" sessions after primary consultation has occurred is common and recommended.

Empirical evidence has found that ECMHC is effective in increasing children's social skills, reducing children's challenging behavior, preventing preschool suspensions and expulsions, improving child-adult relationships, and identifying child concerns early, so that children get the supports they need as soon as possible. In addition, the model has been found effective in reducing teacher stress, burnout, and turnover. Preschool teacher stress and burnout have been previously associated with increased risk of expelling and suspending young children. ¹⁹ The resources below provide information and resources to implement ECMHC:

- Center for Early Childhood Mental Health Consultation http://www.ecmhc.org/
- <u>Early Childhood Mental Health Consultation: Research Synthesis</u> http://csefel.vanderbilt.edu/documents/rs_ecmhc.pdf
- Georgetown University Center for Child and Human Development: Early Childhood Mental <u>Health Consultation</u> http://gucchd.georgetown.edu/67637.html
- <u>Issue Brief: Integrating Early Childhood Mental Health Consultation with the Pyramid Model</u> http://challengingbehavior.fmhi.usf.edu/do/resources/documents/brief_integrating.pdf
- Resource Compendium: What Works? A Study of Effective Early Childhood Mental Health Consultation
 Programs

http://gucchd.georgetown.edu/products/78366.html

- <u>Promotion of Mental Health and Prevention of Mental and Behavioral Disorders</u> http://store.samhsa.gov/shin/content/SVP05-0151/SVP05-0151.pdf
- What Works? A Study of Effective Early Childhood Mental Health Consultation Programs http://gucchdtacenter.georgetown.edu/publications/ECMHCStudy Report.pdf

³³ The resources included in this Policy Statement are examples provided as resources for the reader's convenience. Their inclusion is not intended as an endorsement by ED or HHS. These resources are intended to promote discussion within the community of early childhood learning. The Departments cannot guarantee the accuracy of these resources or that these resources represent all of the relevant and up to date thinking in these areas. The opinions expressed in any of these materials do not necessarily reflect the positions or policies of ED and HHS, and the inclusion of references to these materials should not be construed or interpreted as an endorsement by ED or HHS.

APPENDIX 2: Positive Behavior Intervention and Support (PBIS)33

Program-wide positive behavior intervention and support (PBIS), traditionally practiced in school-based settings, is increasingly being implemented in early childhood settings, with promising results. Program-wide PBIS is a systems approach to establishing the social culture and behavioral supports needed for all children in a school or early childhood program to achieve both social and academic success. It is not a specific curriculum; rather it is a group of effective practices, interventions, and evidence-based implementation supports. PBIS strategies are typically organized into three progressively intensive tiers, with specific interventions being executed across primary, secondary and tertiary tiers. The process is facilitated by a knowledgeable behavioral consultant, who, in partnership with the program team, builds the capacity of school personnel to foster the social-emotional and behavioral development of all students.

There are PBIS frameworks specifically for young children. As an example, the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children provides a tiered intervention framework for supporting social-emotional and behavioral development. The first tier includes practices to promote nurturing and responsive caregiving relationships with the child and high-quality supportive environments. The second tier includes explicit instruction in social skills and emotional regulation for children who require more systematic and focused instruction. The third tier is for children with persistent challenging behaviors that are not responsive to interventions at other tiers and involves implementing a plan of intensive, individualized interventions. The general application of program-wide PBIS in early childhood settings requires programs to establish a team, develop a set of behavioral goals, teach positive behavior, perform functional assessments of challenging behaviors, and use the assessment to construct individualized behavior support plans. For program-wide adoption, programs need administrative support to provide a sustained commitment and ensure training for staff, competent coaching, access to specialists in mental health and behavior, the use of process and outcome data for decision-making, and the development of policies and procedures that support the implementation of a PBIS framework.

In elementary schools, randomized control trials have found that program-wide PBIS reduced discipline referrals and suspensions, and improved fifth grade academic performance.³⁴ Studies have also found that the use of program-wide PBIS was associated with improved perception of school safety, and improvements in the proportion of students at third grade who met the state reading standard.³⁵ The emerging research in early childhood settings is promising. Results from the first randomized control study examining the Pyramid Model in early childhood settings found that children enrolled in the intervention classrooms demonstrated improved social skills and reductions in problem behavior.³⁶ A comparative study found increased positive child behaviors and decreased negative child behaviors in Pyramid Model classrooms, compared to control classrooms.³⁷

The resources below provide information and resources to implement PBIS:

- Center on the Social and Emotional Foundations for Early Learning http://csefel.vanderbilt.edu/
- <u>Technical Assistance Center on Positive Interventions and Supports https://www.pbis.org/</u>
- Technical Assistance Center on Social Emotional Interventions http://challengingbehavior.fmhi.usf.edu/

³⁴ Bradshaw, C., Mitchell, M., & Leaf, P. (in press). Examining the effects of school-wide positive behavioral interventions and supports on student outcomes: Results from a randomized controlled effectiveness trial in elementary schools. Journal of Positive Behavior Interventions.

³⁵ Horner, R., Sugai, G., Smolkowski, K., Todd, A., Nakasato, J., & Esperanza, J., (in press). A Randomized Control Trial of School-wide Positive Behavior Support in Elementary Schools. Journal of Positive Behavior Interventions.

³⁶ Hemmeter, M.L., Synder, P., Fox, L., & Algina, J. (April 2011). Efficacy of a classroom wide model for promoting social-emotional development and preventing challenging behavior. Paper presented at the annual meeting of the American Educational Research Association. New Orleans, LA.

³⁷ Gettinger, M. & Stoiber, K. C. (2006). Functional assessment, collaboration, and evidence-based treatment: Analysis of a team approach for addressing challenging behaviors in young children. *Journal of School Psychology*, 44(3), 231-252.

APPENDIX 3: Resources for Parents and Families³³

Preventing expulsion and suspension will require a strong partnership with families. Programs should treat families as the foremost experts on their children and as such, exchange information relevant to the child's culture, social-emotional and behavioral strengths and concerns, approaches to learning, and strategies that work at home. At a minimum, programs should ensure families have information on:

- Their child's health, behavior and development, especially social-emotional development, during the hours they are in their early learning setting;
- Developmental milestones, healthy development and behavior, and places to go for help;
- Identifying a high-quality early learning program; and
- Communicating with program or school personnel and advocating for their child.

Below are resources to share with families to facilitate this partnership and information sharing:

• Child learning, social-emotional and behavioral development:

- o Family Learning Activities and Games
 - http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/family/for-
 - $\underline{families/Learning\%20Games\%20and\%20Activities/Preschool\%20Learning\%20Activities\%20and\%20Games/home.html$
- o Parents as Teachers
 - http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/family/for-families/Everyday%20Parenting
- o Fostering Children's Behavioral Development
 - http://challengingbehavior.fmhi.usf.edu/do/resources.htm
- o <u>Fostering Children's Social and Emotional Foundations for Early Learning http://csefel.vanderbilt.edu/resources/family.html</u>
- o Backpack Connection Series for Teachers and Caregivers
 - http://challengingbehavior.fmhi.usf.edu/do/resources/backpack.html
- o Parenting Essentials
 - http://www.cdc.gov/parents/essentials/

• Developmental and behavioral milestones, monitoring, and screening:

- o Milestones Moments
 - http://www.cdc.gov/ncbddd/actearly/pdf/parents_pdfs/milestonemomentseng508.pdf
- o Free Tools to Track Your Child's Development
 - http://www.cdc.gov/features/trackmilestones/
- o Birth to Five: Watch Me Thrive For Families
 - http://www.acf.hhs.gov/programs/ecd/child-health-development/watch-me-thrive/families
- o <u>Developmental and Behavioral Screening Passport</u>
 - https://www.acf.hhs.gov/sites/default/files/ecd/screening_passport.pdf
- o Where to go if You're Concerned
 - http://www.cdc.gov/ncbddd/actearly/concerned.html
- o Center for Parent Information and Resources
 - http://www.parentcenterhub.org/
- o <u>Parent Training and Information Centers for Parents of Children with Disabilities</u> http://www.parentcenterhub.org/find-your-center/

• Identifying a high-quality early learning program:

o Child Care Aware

http://www.childcareaware.org/

APPENDIX 4: Resources for Programs, Schools and Staff 33

The following resources offer support for superintendents, program directors, principals, teachers, providers, and other staff to prevent and eliminate expulsions and suspensions in early childhood settings.

• Social-emotional and behavioral health

- o Center on the Social and Emotional Foundations for Early Learning http://csefel.vanderbilt.edu/
- o <u>Technical Assistance Center for Social Emotional Intervention</u> http://challengingbehavior.fmhi.usf.edu/
- o <u>Positive Behavior Intervention Support</u> https://www.pbis.org/
- o <u>Center on Early Childhood Mental Health Consultation</u> http://www.ecmhc.org/
- National Center on Health http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health

• Universal developmental and behavioral screenings

- o <u>Watch Me! Celebrating Milestones and Sharing Concerns- Training for Teachers http://www.cdc.gov/ncbddd/watchmetraining/index.html</u>
- o <u>Birth to Five: Watch Me Thrive!</u> http://www.acf.hhs.gov/programs/ecd/child-health-development/watch-me-thrive
- Learn the Signs. Act Early http://www.cdc.gov/ncbddd/actearly/index.html

• Partnering with community service providers

- o <u>Birth to Five: Watch Me Thrive! Community Guide</u> https://www.acf.hhs.gov/sites/default/files/ecd/communities_guide_march2014.pdf
- o <u>Legacy for Children: Public Domain Evidence-Based Parent Intervention</u> http://www.cdc.gov/ncbddd/childdevelopment/legacy.html
- o <u>Early Childhood Technical Assistance Center</u> http://ectacenter.org/
- Association of University Centers on Disabilities
 http://www.aucd.org/directory/directory.cfm?program=UCEDD

• Forming strong relationships with parents and families

- o National Center on Parent, Family, and Community Engagement: Resources and Guides http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/family/resources.html
- o <u>Family and Provider/Teacher Relationship Quality Measures: User's Manual http://www.acf.hhs.gov/programs/opre/resource/family-and-provider-teacher-relationship-quality-measures-users-manual</u>
- National Association for the Education of Young Children: Engaging Diverse Families http://www.naeyc.org/familyengagement

• Culturally and Linguistically Responsive Practice and Nondiscriminatory Discipline

- o <u>National Center for Cultural and Linguistic Responsiveness</u> http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/cultural-linguistic
- o <u>U.S. Department of Education Office of Civil Rights Data Collection</u> http://wwww.ocrdata.ed.gov
- <u>U.S. Department of Education and Justice Dear Colleague Letter on Nondiscriminatory</u>
 <u>Administration of School Discipline</u>
 http://www.ed.gov/ocr/letters/colleague-201401-title-vi.pdf

APPENDIX 5: Resources for States³³

States play a key role in eliminating expulsion and suspension, by establishing developmentally appropriate policies, investing in the early childhood workforce, and relaying critical information to parents and programs. Below are several free resources States can access to assist in preventing and eliminating expulsion and suspension practices.

- Action Steps for Reducing Suspension and Expulsion in California Schools
 http://www.promoteprevent.org/sites/www.promoteprevent.org/files/resources/California_Action_Steps_May_2011.pdf
- Association of University Centers on Disabilities Research, Education, and Service http://www.aucd.org/template/index.cfm
- Center for Early Childhood Mental Health Consultation http://www.ecmhc.org/
- Early Childhood Mental Health Consultation: Research Synthesis http://csefel.vanderbilt.edu/documents/rs_ecmhc.pdf
- Georgetown University Center for Child and Human Development: Early Childhood Mental <u>Health Consultation</u> http://gucchd.georgetown.edu/67637.html
- National Center for Culturally Responsive Educational Systems http://www.nccrest.org/
- <u>National Clearinghouse on Supportive School Discipline</u> <u>http://supportiveschooldiscipline.org/learn/reference-guides/positive-behavioral-interventions-and-supports-pbis</u>
- <u>Positive Behavior Intervention and Supports State Coordinator Network</u> https://www.pbis.org/pbis-network
- <u>Positive Behavior Interventions and Supports Technical Assistance Center</u> http://www.pbis.org/
- Resource Compendium: What Works? A Study of Effective Early Childhood Mental Health Consultation Programs http://gucchd.georgetown.edu/products/78366.html
- Roadmap to State-wide Implementation of the Pyramid Model http://challengingbehavior.fmhi.usf.edu/do/resources/documents/roadmap_6.pdf
- State Planning Resources: Center on the Social and Emotional Foundations for Early Learning http://csefel.vanderbilt.edu/resources/state_planning.html
- <u>State Planning Resources: Center on the Social and Emotional Foundations for Early Learning http://csefel.vanderbilt.edu/resources/state_planning.html</u>

- State Work and Resources: Technical Assistance Center on Social Emotional Intervention http://challengingbehavior.fmhi.usf.edu/communities/TACSEIstates.htm
- <u>Technical Assistance Center on Social Emotional Intervention</u> http://challengingbehavior.fmhi.usf.edu/
- <u>U.S. Department of Education Office of Civil Rights Data Collection</u> http://wwww.ocrdata.ed.gov
- U.S. Department of Education and Justice Dear Colleague Letter on Nondiscriminatory Administration of School Discipline http://www.ed.gov/ocr/letters/colleague-201401-title-vi.pdf
- What Works? A Study of Effective Early Childhood Mental Health Consultation Programs http://gucchdtacenter.georgetown.edu/publications/ECMHCStudy_Report.pdf