

FINAL REPORT
(Healthy Tomorrow Partnership for Children Program Grant)

1. PROJECT IDENTIFICATION

Project Title: Improving School Readiness in Washington State through Reach Out and Read

Project Number: H17MC11287

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FINAL REPORT AND ABSTRACT

NARRATIVE:

1. PURPOSE OF PROJECT AND RELATIONSHIP TO MATERNAL AND CHILD HEALTH (MCH) PROGRAMS:

Purpose:

The primary purpose of this project was to integrate Reach Out and Read into Washington's state and local school readiness efforts so that vulnerable children are better prepared to learn when they enter kindergarten. Reach Out and Read (ROR) is an evidenced based school readiness program which addresses all aspects of early childhood comprehensive systems: it is implemented within the medical home; promotes nurturing parent-child relationships; educates and supports parents; and enhances early literacy skills. This project was created to harness the enthusiasm for Reach Out and Read and implement it as a community-based, collaborative strategy to enhance school readiness in Washington State.

The Need:

Early brain and child development research clearly demonstrate the long term health, educational and economic benefits of optimal support for young children and families (Shonkoff & Phillips, 2000) (Rolnick & Grunewald, March 2003). Despite this, at the time the project was developed, about half of Washington's children continued to arrive at kindergarten unprepared (Pavelcheck, 2005) (Bill and Melinda Gates Foundation, 2005). While there was increasing interest in investing in young children, the public and political will to translate research into the policies and programs which will help children arrive at school ready for success were not yet in place (Shonkoff & Phillips, 2000). ROR is a cost-effective, proven program which can help build the systemic cross-discipline efforts needed to improve outcomes for children. Promoting school readiness in the first five

years is a prevention strategy which supports families and communities in order to improve child health and developmental outcomes at kindergarten entry. Successful efforts help “level the playing field” for vulnerable children, enhance their chances for optimal health and development, and greatly improve their likelihood of achieving educational and life success.

Too few children in Washington State, and across the nation, arrive at kindergarten ready for success in school. This has lifelong health and educational consequences, as well as personal and societal implications. Children who start kindergarten behind rarely catch up with their peers; and interventions later in life are more expensive and less effective than those in early childhood (Shonkoff & Phillips, 2000). According to a 2004 survey of kindergarten teachers, less than half of all children in Washington State arrived at kindergarten with the skills they need for success (Pavelcheck, 2005). This project was created to serve young children in Washington State at risk for arriving at kindergarten unprepared for success in school. The target group for ROR is children living in poverty between the ages of six months and five years. Studies find that there is limited time spent reading aloud in lower income families, indicating multiple potential barriers to book use. These barriers may include the lack of discretionary income, low parental literacy, cultural beliefs, and family stresses that do not allow time for reading aloud. Research findings point to a dire need for literacy support for poor families.

There is now widespread recognition that too few children are arriving at school ready to succeed, and several needs assessments were done in Washington State to better understand the status of young children. First, a comprehensive early childhood needs assessment was completed in Washington State in 2005 through the Early Childhood Comprehensive Systems Grant to the Washington State Department of Health, Office of Maternal and Child Health. This needs assessment addressed five critical areas: 1) access to health insurance and medical homes; 2) social-emotional

development and mental health; 3) early education and child care, 4) parenting education, and 5) family support (Organizational Research Services and Sells, 2005). Four overarching system gaps were identified: 1) fragmentation, with multiple separate systems; 2) funding gaps; 3) challenges to focused policy guidance and decision-making; and 4) lack of public understanding of the importance of early childhood and early childhood services.

Almost simultaneously, the Bill and Melinda Gates Foundation embarked on a strategic planning effort related to their investments in Washington State. Their needs assessment and evaluation process culminated in a new Early Learning Strategy, announced in 2005 (Bill and Melinda Gates Foundation, 2005). The Foundation noted that many children “begin life with measurable indicators of socio-economic disadvantage, or ‘risk factors’,” and found that in “Washington State, 23 percent of all children age 0–5—more than 109,000 statewide—are born with two or more of these risk factors, poverty being the most prevalent.” The Foundation then announced a 10-year strategy for investment in early learning in Washington State. Working with public and private partners, the Foundation began investing in two demonstration communities, (White Center and East Yakima); promising models; and statewide efforts to build and support the necessary infrastructure so all children have access to early learning opportunities and the greatest chance at success in school and life.

Additionally at this time, a Parent Needs Assessment was conducted for the Washington State Department of Early Learning (Golan, 2008). This statewide telephone survey assessed parent interests and desires related to early learning. The survey found that *Washington parents trust health care providers the most as a source of early learning information*. Further, the 2nd most desired topic parents want information about is “*ways to support child’s early reading skills*.” Finally, the survey found that half of all children younger than 6 across the state are regularly cared for only by their

parent or guardian. Therefore, the health care system is likely the only venue that has contact with almost every young family in Washington State.

A community-based needs assessment was released describing baseline data for the White Center and East Yakima communities in which Thrive By Five Washington and the Gates Foundation are investing (Paulsell, 2008). This confirmed anticipated risk factors such as poverty, low maternal education, and linguistic challenges. It also demonstrated that within these communities most children lack skills needed for success in kindergarten, and that most are not being read to regularly at home. Despite the poverty, almost all children in these communities were shown to have health insurance, and had received a checkup in the past year. This confirms that doctors' offices are a reliable point of contact for these families. (See Table 1) Therefore the children and families in these early learning demonstration communities are examples of ready populations in which to implement and sustain Reach Out and Read.

Each of these assessments confirmed that there is a broad need to enhance school readiness in Washington State, and significant interest in doing so. While there is much convergence between these efforts and potential for significant policy and program changes over time, the efforts are all in the early stages of implementation. The need for public-private partnerships for both funding and implementation, and for statewide processes which support local community efforts, are highlighted throughout. Finally, the data support the ability of doctors to connect with families around early learning, and the desire of parents to have them do so. Taken together, these needs assessments support a community-based strategy to implement Reach Out and Read as a public health/population based approach to school readiness.

The most important reason to implement this project was that Washington State was "ready" to start taking Reach Out and Read to scale and build statewide capacity to improve school readiness. At

the project's inception, there were 11 peer-reviewed research studies showing that Reach Out and Read improves outcomes for children and families (Golova, 1999) (High P. , 1998) (High P. , 2000) (Jones, 2000) (Mendelsohn, 2001) (Needleman, 2005) (Needlman, 1991) (Sanders, 2000) (Sharif, 2002) (Silverstein, 2002) (Weitzman, 2004). (Since then four more have been added, see www.reachoutandread.org for details). Implementing and expanding programs which are cost effective and can achieve desired outcomes is a necessary part of school readiness efforts. The educational community and other advocates for early learning were not as aware of Reach Out and Read as they should be, given its potential impact. This project was intended to increase visibility and integration, benefiting children and improving school readiness.

Collaboration with Maternal Child Health and the American Academy of Pediatrics:

This project was designed to build on the tremendous momentum around early learning in Washington State. Specific efforts to engage doctors through Docs For Tots Washington State and the pilot expansion of Reach Out and Read have been successful. It was recognized nationally that there was a need to further engage pediatricians and the AAP in school readiness (High, 2008). Combining the national interest of the AAP and MCHB in early childhood systems with the interest of local doctors, the Washington Chapter AAP, and Washington's Title V MCH program, means the health community was ready. There was significant potential for this project's public health approach to influence developing early childhood systems in Washington. This will help ensure connections with doctors and health alongside the engagement of business, philanthropy and government.

This project was intentionally integrated with the Kids Matter/Early Childhood Comprehensive Systems grant in the Washington State Department of Health, Office of Maternal and Child Health (Organizational Research Services and Sells, 2005). It is an outcomes-based framework addressing: health insurance/medical home; social emotional development and mental health; early education and

child care; parenting information; and family support. The Reach Out and Read program itself directly addresses many components of the KM framework. Further, this project's state-local integration is directly modeled on the Kids Matter approach of providing statewide technical assistance to local communities. The KM/ECCS lead will serve on the Advisory Council for the project, and the Project Director will participate in KM/ECCS steering committee meetings.

The ROR pilot project that this project was based on demonstrated success in partnering with the Washington Chapter of the AAP (WCAAP). The Project Director entered this project with a multi-year history of connecting WCAAP with early learning efforts in Washington State through Kids Matter and Docs For Tots Washington State, and she has been a member of the state AAP chapter for over 20 years. She also served as the WCAAP Chapter CATCH Facilitator for 5 years, before becoming the District VIII CATCH Facilitator. The Project Director participated in quarterly WCAAP Trustee meetings to further strengthen this partnership. She current co-chairs the Early Learning Committee, and the Chapter has supported Reach Out and Read through advocacy for state policy during this project's evolution. Many AAP members, including several trustees of the Chapter, participate in Reach Out and Read in their practices.

A Healthy Tomorrow Partnership for Children Approach:

The purpose of the Healthy Tomorrows program is to stimulate innovative community-based programs that employ prevention strategies to promote access to health care for children and their families. This project was planned to provide preventive services to children and families through the integration of Reach Out and Read (ROR) into the medical home within community partnerships, using a public health approach. By design, this project directly addressed all four intents of the Healthy Tomorrows Partnership for Children grants:

1) A community-based initiative and program that improves child development for vulnerable children and their families. Reach Out and Read is an inexpensive, proven program delivered within the context of the medical home, which by definition is family-centered and culturally competent. ROR focuses its resources on children in low-income families and those most at risk for school failure. The Reach Out and Read programs are community-based assets that are part of early learning systems.

2) A collaboration among community organizations, agencies, businesses, and families. Reach Out and Read inspires partnerships between all of these entities in order to recruit, support and grow the program within local communities. Programs are supported by public and private partners at the local, state and national levels.

3) Pediatricians are involved in a community-based service program. ROR is delivered directly by pediatricians and other primary care providers. Pediatricians and their ROR practices develop and maintain relationships with community-based services, such as local libraries, and family literacy programs.

4) Community and statewide cross-discipline partnerships are created. This project integrated Reach Out and Read with local and statewide partnerships whose goal is to support children and families and enhance school readiness. The project was integrated into Washington State's Early Childhood Comprehensive Systems work, known as Kids Matter, and into the Washington State Early Learning Plan which it evolved into. The project directly partnered health professionals with early learning and education professionals; working with social services, government, and business to create systems and implement programs to assure healthy children and families.

2. GOALS AND OBJECTIVES:

The overall goal of this HTPC project was to improve school readiness in Washington State by the expansion and integration of Reach Out and Read (ROR) within community level early learning efforts. This project had four objectives to help achieve this goal:

1. **Access:** Increase access to Reach Out and Read programs throughout Washington State, raising the total annual number of individual family visits from 80,000 to 130,000 over 5 years (Revised to 170,000 during the project).
2. **Quality:** Enhance the quality of Reach Out and Read programs across Washington State, by piloting, implementing, and sustaining an effective training and technical assistance program to support quality within local ROR programs.
3. **Integration:** Facilitate the integration of Reach Out and Read into early childhood systems, and early learning initiatives, so that by the end of five years ROR is a standard part of early learning services and systems in Washington State at the local and state levels.
4. **Sustainability:** Assure the sustainability of Reach Out and Read programs and supports, so that ROR Washington State is an effective and ongoing part of local and state early learning systems in Washington State.

3. METHODOLOGY

This project was designed to use the evidence-based, proven Reach Out and Read program at the practice, community, and statewide level as a preventive, collaborative school readiness strategy which helps children reach kindergarten ready for success in school and life.

The Reach Out and Read program model: Unlike traditional childhood literacy programs, ROR is designed to take advantage of the existing structure of pediatric primary care, in which parents of

young children have regular one-to-one, developmentally focused visits with children’s doctors during the first years of their child’s life. Children routinely see their doctors for “well-child” visits ten times between the ages of six months through five years. For many families, especially for families living in poverty, these are the earliest, and often only, regular contacts with a child development professional. Books are new, carefully chosen and developmentally appropriate – starting with chewable board books for babies and moving up to more complex storybooks for preschoolers. ROR reinforces the parents’ role as the first and most important teacher, and gives parents the knowledge, skills and books to help their children succeed.

Reach Out and Read builds upon the special relationship between doctors and parents of young children, to encourage parents to read aloud to their children daily. Pediatricians, family physicians and other primary care providers convey to parents the importance of books and reading in their children’s lives. Research shows that being read to early and often creates a strong foundation for later learning and ultimate success in school. Being read to also promotes a love of books and reading in young children.

The Reach Out and Read model includes three components (1) Children’s doctors are trained in the theories of early literacy development and specific strategies to promote literacy in children. During well-child visits they use this knowledge to give parents “anticipatory guidance” about the importance of reading aloud. Doctors demonstrate how even parents who themselves cannot read can share books, tell stories about the pictures, and teach their child a love of books by linking the books to parental love and attention. Parents are given age-appropriate advice about books and reading as pediatricians encourage frequent reading at home. (2) Children’s doctors give families a new book to take home at every checkup from six months through five years. These books are carefully chosen based on developmental and cultural appropriateness. Children will start school with a library of up to

ten books in their homes. (3) Waiting rooms are “literacy rich,” such as with books and library information, so that each visit to the doctor promotes literacy. In some offices, trained volunteers read stories to children while they wait, modeling for parents.

In order to create and sustain a community-based initiative with the Reach Out and Read program model at its core, this project was designed to use a public health approach to engage primary care physicians in a direct services which enhance school readiness, focusing on four objectives: access, quality, integration and sustainability. These were stated in the application as follows:

Objective 1: Access. We will increase access to Reach Out and Read programs throughout Washington State, raising the total annual number of visits from 80,000 to 130,000 over 5 years. Our strategy is to recruit medical practices to become Reach Out and Read sites. The activities we will undertake to achieve this objective include:

1. Increase awareness about, and visibility of, Reach Out and Read
2. Recruit pediatric and family practices who serve low-income and at-risk families
3. Provide technical assistance and training for application and program implementation

Objective 2: Quality. We will enhance the quality of Reach Out and Read programs across Washington State by piloting, implementing, and sustaining an effective training and technical assistance program to support quality within local ROR programs. Our strategy is to enhance training and technical assistance programs to assure fidelity of the model and high quality programs. The activities we will undertake to achieve this objective include:

1. Improve initial practice training processes for program implementation
2. Implement provider self-assessment process post training
3. Create program-to-program peer learning and support networks in the state
4. Partner with National ROR and other states on quality efforts

Objective 3: Integration. We will facilitate the integration of Reach Out and Read into early childhood systems, and early learning initiatives, so that by the end of five years ROR is a standard part of early learning services and systems in Washington State. Our strategy is to collaborate with state and local early learning partnerships to facilitate ROR integration through policy and program activities. The activities we will undertake to achieve this objective include:

1. Use the Kids Matter framework and efforts to integrate Reach Out and Read into state and local early childhood systems (Kids Matter is the ECCS plan in Washington)
2. Sustain and grow relationship with public and private statewide partners, including Washington State Department of Early Learning and Thrive By Five Washington
3. Sustain and grow partnerships with early learning coalitions at the county or regional level

Objective 4: Sustainability. We will assure the sustainability of ROR programs and supports, so that ROR Washington State is an effective and ongoing part of the early learning system in Washington state. Our strategy is to integrate ROR into early childhood systems to assure sustainability through public and private partnerships. The activities we will undertake to achieve this objective include:

1. Build systems partnerships to support Reach Out and Read
2. Develop statewide public and private funding resources and strategies
3. Provide statewide connections and technical assistance which enhance local program fundraising capacity

4. EVALUATION

The evaluation of this project was based on the goals and four objectives outlined. We monitored both process measures and outcomes related to the specific objectives. Some of the data were collected from the medical practices with which we partnered, other information is based on the

direct activities and outcomes of project staff partnership and other efforts.

For the Access objective, we gather data about services provided through online progress reports submitted every 6 months by each ROR program. The information requested includes: number of Reach Out and Read well-child visits provided by the program, number of books given to families, and demographic information about the families served. Programs also report how many medical providers have been trained in the ROR model and how many are actively participating. We analyze this data for each individual program, and across the entire network of program to assess progress over time.

For the Quality objective, we developed and implemented a new quality rating and improvement system for our programs as part of a statewide technical assistance and professional development system. Data were obtained through observation, technical assistance provided by our staff during site visits, and other communication with the medical practices. Each year we set goals in the process, and used a continuous quality improvement lens for both our internal development processes and our work with the medical practices. Ultimately this led to a program quality evaluation process, and the results of this work are outlined in the Outcomes Section.

The Integration and Sustainability objectives became intertwined, through a series of strategic partnerships over time. Each year we set goals, and documented progress in fundraising, policy, and partnerships, and the ultimate status of this work after five years is outlined in the Outcomes Section.

5. RESULTS/OUTCOMES

The overall goal of this HTPCP project was to improve school readiness in Washington State by the expansion and integration of Reach Out and Read within community level early learning efforts. Our project met or exceeded expectations for accomplishments in all goal areas: access, quality, sustainability and integration.

1. **Access:** Increase access to Reach Out and Read programs throughout Washington State, raising the total annual number of individual family visits from 80,000 to 130,000 over 5 years.

We vastly exceeded our growth goal, growing from approximately 80,000 well-child Reach Out and Read visits with families per year at baseline to 183,651 visits in 2013! We doubled our original visit increase goal of 50,000 visits per year, growing services delivered by more than 100,000 well-child checkups per year. Over time we adjusted the goal upward over the grant period to 170,000/year, and we still surpassed that by 13,651. Including 9 new programs not yet reporting, we now have a total of 165 programs across Washington State. Program geographic diversity increased as well, growing from 16 to 31 of Washington's 39 counties. We are particularly pleased that our growth is touching hard-to-reach populations and some of the most vulnerable children in the state. To achieve this, we have focused growth predominately through Community Health Centers, Tribal/IHS/Urban Indian programs, and military facilities; but we have programs in all types of medical settings that care for children. We are now serving an estimated 100,000 children and their families, about 20% of Washington's population of children birth through 5. We have successfully reached an oversampling of those children furthest from opportunity; of those we serve 65% are living in low-income families, 45% are children of color, and 28% have a home language other than English.

2. **Quality:** Enhance the quality of Reach Out and Read programs across Washington State by piloting, implementing and sustaining an effective training and technical assistance program to support quality within local Reach Out and Read programs.

Delivering high quality programs is fundamental to achieving Reach Out and Read's intended outcomes. With 15 peer-reviewed, published studies to date proving that the model works when implemented with fidelity, focusing on program delivery quality is the key to producing parental behavior change and increasing children's kindergarten readiness. Notably, during the past five years

we developed and implemented a new quality rating and improvement system for our programs as part of a statewide technical assistance and professional development system. This quality assessment process enables us to assess each program based on four elements of quality: Medical Providers, Books, Literacy-Rich Environment, and Systems, and then give an overall quality rating at a specific point in time. First, baseline ratings were established, and then the expectation is that all programs will have a quality rating that is re-evaluated at least once per year. The ratings enable us to look at quality at the individual program level, and across our network of programs. These quality assessments determine the level of technical assistance to be provided, as resources allow.

Over time we continuously evaluated and improved the tools and processes within our quality system. As we expanded our program staff, we developed new training processes to support their ability to effectively use the tools to monitor and support quality, and to assure inter-rater reliability within our team by using defined metrics. Once the baseline ratings were in place, and assessment tools and documentation processes refined, program staff could facilitate more specific quality improvement efforts. Staff partnered with each clinic with identified challenges to develop individualized quality improvement plans. These plans define action steps for reaching the characteristics displayed by high quality programs, including timelines and milestones. Reach Out and Read staff is then charged with providing support to the practice as needed, and actively monitoring progress. We are seeing excellent results from our quality system. In the last year we have increased the number of programs with our highest quality rating by 35% and reduced the number with the lowest rating by 46%.

3. **Integration:** Facilitate the integration of Reach Out and Read into early childhood systems, and early learning initiatives, so that by the end of five years Reach Out and Read is a standard part of early learning services and systems in Washington State at local and state levels.

The evolution of early learning in Washington State and nationally is truly astounding over the past five years. Throughout it all, Reach Out and Read has been an active leader and collaborator, helping to both shape and participate in the evolving national, state, and local efforts. We have partnered with the leading public and private partners involved in early learning to plan and implement policies and strategies to improve school readiness systematically across Washington State.

Reach Out and Read is now embedded within major state policy and planning documents. Washington's original Early Childhood Comprehensive Systems framework, Kids Matter, evolved into the Washington State Early Learning Plan. Washington's Early Learning Partnership (a new entity composed of the three lead agencies of the Washington State Department of Early Learning, Thrive by Five Washington, and the Office of Superintendent of Public Instruction) and early learning communities across the state use the Early Learning Plan as a guide for action. Each year since its release the EL Partnership has identified key strategies within the plan. Each year, Early Literacy including Reach Out and Read has been identified as a priority Early Learning Plan strategy for the state.

At the local level, we have partnered with Early Learning Coalitions, Washington's evolving local public-private partnerships for early learning. We work directly with several United Ways, and they are also leaders in most early learning coalitions. In the past few years the National Campaign for Grade Level Reading has spurred action in four communities, many of which are embarking on collective impact, cradle-to-career initiatives. Reach Out and Read is connected at some level with all of these. Within King County, Washington's largest county, Reach Out and Read is identified as a key strategy in the Birth-3rd grade Action Plan of the Road Map Region, a nationally recognized cradle to career initiative that won a federal Race to the Top grant. Thus, Reach Out and Read has become a highly respected partner and integral part of Washington's state and local early learning and education

efforts. This is now codified into the key policy documents guiding the public and private sector as they work together to build integrated systems to enhance outcomes for children and families.

4. **Sustainability:** Assure the sustainability of Reach Out and Read programs and supports so that Reach Out and Read Washington State is an effective and ongoing part of local and state early learning systems in Washington State.

Our integration strategy above is really the core approach to sustainability, and so over time we have begun to talk about these together. But from a purely fiscal point of view, a significant part of our sustainability strategy is raising awareness about the vigorous evidence base for Reach Out and Read, its low cost, and the potential for scale. Our Reach Out and Read programmatic funding strategy is a public-private, national, state and local funding model which integrates Reach Out and Read into state and local early learning systems. Since Reach Out and Read Washington State launched in 2007, we have raised over \$3.6 million dollars, including \$1.1 million in public funding. We have obtained state general funding as a budget line item for 5 consecutive years, and both state agencies and legislators are increasingly aware of and supportive of Reach Out and Read. Major private sector funders including the Bill & Melinda Gates Foundation and the Boeing Company have been repeat funders, creating stability and inspiring other funders.

Another significant strategy is using statewide strategies to leverage local investments. We provide technical assistance to facilitate and support required local fundraising, such as connections with service groups. This engages local funders in partnerships with Reach Out and Read programs, assures local commitment, enhances sustainability, and further diversifies funding resources for the programs. We have partnered with Early Learning Coalitions and United Ways, and this has been a source of funding for local programs that we hope will continue to increase. We continue to work hard to attract and sustain aligned funding from public and private sources so that Reach Out and Read and

doctors can become integral, effective partners in the early learning system in Washington State.

Recognizing that a key part of sustainability is having a highly functioning organization, we have strategically developed our project and organization over time. Starting with 2 part time consultant staff (one being the Project Director), this project has evolved into a highly effective Regional Office of the our national organization. We now have 6.0 FTE working for Reach Out and Read Washington State. Each year we set goals and metrics for the coming year, and the framework and support from this Healthy Tomorrows Grant over 5 years has been absolutely key to our overall success.

5. Additional Lessons Learned

This project was extraordinarily successful, achieving all the objectives of the grant. We have learned that what we set out to do is possible, and is desired by families, doctors, communities, and early learning system partners. We can increase access, quality, and systems connections simultaneously. We have developed effective systems that are now ready to be taken to scale in Washington State. Many elements can be replicated in other states, and this has already started to happen. Systems change takes time—but this project demonstrates how one systems-focused strategy can accomplish many goals, and can be done rapidly by leveraging the infrastructure of the health care system. This is particularly remarkable given the economic recession which hit right near the start of this project, and from which the nation is only beginning to emerge. We are thrilled with the results, but also impatient for further progress. The needs remain great, and the potential is tremendous. So we will close this report with a few broader comments about this work and the early learning system in general.

We have learned, both through this project and through the broader environment, that it is possible to change both public and political will, and to begin to drive systems change in early

learning, and with Reach Out and Read specifically. At the same time, it is clear that improving outcomes for children will require huge shifts as a nation into a prevention-focused, population-based, interdisciplinary, long term approach. This, in turn, has very real fiscal, political, and strategic challenges. This project provides clear evidence that substantive progress can be made at the population level with focused strategy and investment. Reach Out and Read is a systems-change vehicle that truly has the potential to change individual children's lives immediately, while contributing rapidly to population level improvements in child outcomes, and helping build an integrated early childhood system that strengthens families.

Over the course of this five year project, the world really has changed. The current national, state, and local momentum in early learning is nothing short of astounding—with early learning being highlighted in the national agenda. Simultaneously, the increasing recognition of the importance of health and health systems within early childhood is very encouraging. At the same time, outcomes for kids generally, and the gaps of opportunity between groups of children more specifically, remain sobering; having not really changed substantially in decades.

The momentum in early learning is a huge opportunity that we must capitalize on as a nation, as states, and as communities. At the same time, that very momentum can unintentionally create challenges for work like this project. The context of potential support for early learning is better than ever, but competition is higher than ever as well. The focus on important strategies such as expansion of preschool, systemic strategies to improve child care quality, and national expansion of home visiting program are all examples of progress toward developing an early childhood system. But as these programs receive federal funding, become more visible, increase in size, have more staff, and are adopted by the advocacy community, they become the major early learning focus for the nation. This in turn drives state and local attention. This can all leverage important progress at multiple levels. But

this can also make it hard to simultaneously draw attention to the need to engage in the important work of leveraging the health care system to support parents and early learning. And because a cross-system strategy that involves health may feel more nebulous to education and other systems, and requires much cross-sector, cross-agency collaboration for which there is not much precedent at a large scale, it is inherently difficult work to move forward.

We hope the success of this project will help encourage the Maternal Child Health Bureau and Title V Programs, the American Academy of Pediatrics, and our partners within and outside of the health care world to continue to embrace partnerships across systems to improve outcomes for young children. There is much to celebrate—and much more to be done!

6. PUBLICATIONS/PRODUCTS

The following list shows the main products, developed or utilized by the project

1. Website: <http://www.reachoutandreadwa.org/>
2. Report: *The Power of Parents and the Influence of Children's Doctors: Reach Out and Read in the First Five Years*. Found at <http://www.reachoutandreadwa.org>
3. Multiple comprehensive reports on Reach Out and Read Washington State's programs, services, and impact submitted to the Washington State Department of Early Learning.
4. Electronic Monthly Program Newsletters
5. Electronic Monthly General Newsletters
6. Four TV feature segments on New Day Northwest, a network morning show in Seattle Washington.
7. Reach Out and Read Washington introductory video:
<https://www.youtube.com/watch?v=DpB7uSepy1Q>

7. DISSEMINATION/UTILIZATION OF RESULTS

We created a project website in the first year, which we regularly updated with media and programmatic information. We have a monthly e-newsletter for our programs and another for our broad partnership audience. We have a Facebook page. We attracted media stories in print, radio and TV, and we have shared these by posting on the web, in our newsletter, and/or on Facebook. Likewise our colleagues in our national Reach Out and Read office regularly post and share information on the web and via newsletters. See <http://reachoutandreadwa.org/>. Our work has been actively shared with the Reach Out and Read network, and our quality system has become a model for replication across the nation.

8. FUTURE PLANS/SUSTAINABILITY

Sustainability is a key objective of this project, which has grown from an idea into a leading regional office for Reach Out and Read nationally. Please see Sustainability in the Outcomes Section for more detail. We will continue to help support systemic approaches to expansion of high quality programs across the Northwest and the nation. Within Washington State, Reach Out and Read and doctors have become an integral part of the early learning system, helping bridge the areas of parenting support, health, and early learning systems. We will continue to capitalize on the current national, state, and local momentum in early childhood health and development. This project—now a statewide initiative with national impact—has a unique role to play in partnership with the MCH program and the Washington Chapter of the AAP. We seek to continue to expand and strengthen partnerships with our colleagues here and across the country, so that collectively we can replicate proven programs and build the systems that will truly help all children be ready for success in kindergarten and beyond.

Future Plans

Based on the success of this project over five years, continued expansion of this work to full-scale is warranted, and a primary goal. At the same time, there is tremendous opportunity to use Reach Out and Read as a mechanism to spur development of an integrated early childhood system. In Washington State the current status of integration across early learning / literacy strategies, early childhood system building, medical home, and home visiting efforts in local communities has only begun. There is much work still needed to achieve system integration accompanied by the ability to serve all children (or at least all of those at risk) broadly, while serving some children and families more intensively.

Our state-level Early Learning Partnership composed of the Washington State Department of Early Learning, the Office of Superintendent of Public Instruction (state Department of Education), and Thrive by Five Washington (a non-profit public-private partnership) facilitated development of the Washington State Early Learning Plan (ELP) in collaboration with community stakeholders. This Plan provides a roadmap for the Partnership and the state Early Learning Advisory Council to build Washington's early learning system in coordination with 10 regional early learning coalitions. Prioritized strategies in the ELP include: early literacy and Reach Out and Read; state local-coordination; and home visiting. Further, the Washington State Library and public libraries across the state work together via the Early Learning Public Library Partnership, facilitating library connections with early learning systems. With the recent addition of the Washington State Department of Health to the Partnership, there is new opportunity to further strengthen health-early learning connections in Washington.

There are also several strong “cradle to career” community impact initiatives in Washington State, all of which are connected with the national Grade Level Reading Campaign. Reach Out and

Read is embedded within the Birth-3rd grade strategy in these initiatives, as we strive to grow a statewide network of early literacy programs in doctors' offices that support parents, while aligning with state and community early learning systems, and facilitating doctors' ability to refer families to libraries. Readily scalable, Reach Out and Read could be offered to all children through the health care system with a low per child cost and big impact, within an integrated service portfolio that includes home visiting for those with more intensive needs. Leveraging Reach Out and Read, medical home, and home visiting together with connections to libraries within communities would greatly strengthen an integrated system of early literacy and parenting supports during the first 1000 days of life. With statewide strategies playing out in local communities, there is much activity. There is great interest and potential in Washington State to leverage them together into a high quality, sustainable, integrated system.

We would like to see the development of a national-state-local initiative which focuses on parents and young children and drives improved outcomes by strategically connecting early learning/literacy strategies, early childhood system building, home visiting, and the health care system. There is tremendous momentum in all of these areas around the country, and Reach Out and Read addresses outcomes identified by HRSA's Bright Futures Guidelines (Hagan, 2008) and federal ECCS and Home Visiting initiatives; including school readiness, well child visits, and the medical home. Experience has demonstrated that national attention to early learning and health care drives state policy, public and private investment, and community action. Examples include efforts of the President, federal agencies, Congress, and private funders. Intentionality in focus, funding, and strategy from the national level will enable state and local partners to build from current momentum, demonstrate success, and implement systemic strategies which could be replicated across the nation. On the flip side, failure to reach a broader population of the youngest children and families with

evidence-based services ignores the scope of the need as well as the brain science about the first years of life, and makes later investments in preschool and K-12 less effective.

More specifically, from the perspective of a pediatrician and early learning systems leader in Washington State, there is tremendous immediate opportunity for impact by engaging physicians and the health care system more fully in early childhood initiatives. Doctors are trusted by parents and, more than anyone else, have access to young children and families; especially those who are low-income or otherwise at risk for poor outcomes. Reach Out and Read nationally, and particularly in Washington State, is poised to help bridge disciplines into a more fully integrated approach to supporting young children and families. The children of this country need us to implement strategic systemic change in order to reduce the opportunity and achievement gap. We should use current momentum to think big, and to act.

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ANNOTATION

Reach Out and Read is an evidence-based program within the medical home which increases parent-child reading, and improves early literacy outcomes so that vulnerable children are better prepared to learn when they enter kindergarten. This project integrated Reach Out and Read into Washington's school readiness efforts. Objectives were achieved in four areas: (1) Access: Services increased from approximately 80,000 well-child visits with families per year to 183,651 visits. At project end, we were serving an estimated 100,000 children and their families; 65% living in low-income families, 45% children of color, and 28% with a home language other than English. (2) Quality: We implemented an effective training and technical assistance program to assess, monitor, and support quality within programs. (3) Integration: Reach Out and Read is now embedded and prioritized within the Washington State Early Learning Plan. (4) Sustainability: The project has become a regional office of the national organization, supported by public and private funding.

KEY WORDS

Early childhood development
Medical home
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Reading
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