Background
Building a healthy future for Pennsylvania begins with ensuring that its youngest residents have a strong foundation. Research shows that a child’s brain grows fastest between birth to age three than in any other point in their lives, and providing nurturing, supportive relationships as well as high-quality early learning experiences can further support and accelerate that healthy cognitive, social, and emotional development – setting infants and toddlers up for future success in school and beyond. Access to high-quality early care and education programs and other family-supportive policies not only helps improve the health and well-being of babies and toddlers, but also provides important economic, education, and social benefits for families of young children.

About the Ready to Start Task Force
In September 2018, Governor Tom Wolf announced the launch of the “Ready to Start” Task Force focused on developing a four-year framework of strategies to address health, human services, and education policy for infants and toddlers ages zero to three in Pennsylvania. The Ready to Start Task Force was led by six co-chairs appointed by the Governor:

- **Jodi Askins**, Executive Director of PennAEYC, representing advocates and providers;
- **Maureen Cronin**, Executive Director of The Arc of Pennsylvania; representing children with disabilities and their families;
- **Nyanda Finley De Santos**, parent and Director of Family and Community Engagement at Community Services for Children’s Head Start Program, representing parents and community partners;
- **Janet Haas, M.D.**, Chair of the William Penn Foundation Board of Directors, representing philanthropic and business entities;
- **Dr. Valerie Kinloch**, Dean of the University of Pittsburgh School of Education, representing child development and education; and
- **David Rubin, M.D., MSCE**, Director of Population Health Innovation and PolicyLab at Children’s Hospital of Philadelphia (CHOP), representing health and research.

Four members of the Wolf Administration also supported the work of the Task Force:

- **Dr. Rachel Levine**, Secretary of the Pennsylvania Department of Health (DOH);
- **Teresa Miller**, Secretary of the Pennsylvania Department of Human Services (DHS);
- **Suzann Morris**, Deputy Secretary of the Office of Child Development and Early Learning (OCDEL); and
- **Dr. Loren Robinson**, Deputy Secretary for Health Promotion and Disease Prevention, DOH.

Regional Task Force Meetings
The Ready to Start Task Force co-chairs facilitated six regional roundtable listening discussions with members of the Administration and stakeholders throughout the commonwealth from October through December 2018. Approximately 150 stakeholders participated in these six sessions, representing early childhood care and education providers, healthcare practitioners, research organizations, workforce development, state and local government, foundations, employers, and community-based organizations.

At each regional listening session, stakeholders were asked to provide feedback focused on three guiding questions:

1. *How can we improve health outcomes of infants, toddlers, and their families?*
2. *How can we strengthen the home environment for infants, toddlers, and their families?*
3. *How can we prepare infants and toddlers for future school success?*
In addition to these face-to-face Task Force meetings, the Governor invited the public to share their ideas and thoughts through an online feedback form.

Key Themes and Initial Findings from the Task Force Regional Listening Sessions
This initial report provides a summary of the key themes and findings shared with Ready to Start Task Force co-chairs and members of the Administration during regional listening sessions as well as through the online feedback survey. Priorities and key themes identified consistently during stakeholder-led discussions include:

- **Priority #1: Ensuring Access to High-Quality Care for All Children and Families, Especially Those with Greatest Needs**
  Limited availability of high-quality care and supports was identified as an issue at all six Task Force meetings, with many participants sharing a vision for universal access to services and supports for all families, regardless of income, with personalized approaches that help both infants/toddlers and their caregivers thrive. Participants also focused on the ways in which multiple systems often fail to effectively engage families by conflating “availability” with “accessibility” and taking a siloed approach to what should ideally be intersectional, cross-systems work. Participants also noted the limited availability of high-quality services, including evidence-based home-visiting models, Birth to Three Early Intervention programs, as well as specialized services, within the region and statewide. The challenges posed by a myriad of entry points to services, and a need to ease referrals and supports for young children and families once they are “in,” instead of putting the burden on families to figure out how to navigate complex health, human services, and education systems, were identified as priorities by stakeholders. Discussions also centered on a need to ensure that programs and efforts are linguistically and culturally appropriate, especially for families with greatest needs, including marginalized families, undocumented/immigrant families, families of color, and children who are dual/multiple language learners.

- **Priority #2: Improving System Quality and Capacity**
  At every regional listening session, stakeholders highlighted the significant strains on the current systems, including wait lists for infant rooms, Early Intervention services, and other critical health, human services, and education programs. Many participants noted inconsistent and often long wait times for follow-up appointments, programs, and services that result from a lack of providers and specialists within many communities. This was especially true for mental health, pediatric developmental and psychiatric services, high-quality childcare, and Early Intervention services for infants and toddlers, including a shortage of therapists (speech, occupational, and physical). Participants in all regions talked about the many challenges – both emotional and financial – facing early care and education workers, including low compensation and difficult working conditions. In each stop, stakeholders discussed connections between compensation and other investments with recruitment, retention, and promotion of effective early childhood educators.

- **Priority #3: Need for Better Coordination and Alignment of Services and Supports**
  Task Force participants identified a need for increased collaboration and better alignment of services and supports to improve outcomes for young children, families, and communities. At each listening session, stakeholders talked about the need to take a more integrated approach by better connecting systems, from home visiting to Early Intervention to high-quality early childhood education, and beyond, as well as integrate behavioral health and other services within multiple settings, including primary care and early care/education. Stakeholders representing education, health care, and human services identified a critical need for improving collaboration and information sharing within and between sectors, especially as it relates to behavioral health and mental health issues for mothers and caretakers, with systems moving beyond the current
siloed status quo to a more consistent, effective, cross-sector approach, especially as it relates to case management and data sharing. Participants in all regional stakeholder sessions also highlighted the need to provide care and supports centered on the child and family, including navigation supports, that help moms and families understand services available in their community and more successfully access information and resources throughout sectors and systems, including health insurance (CHIP), social services, etc.

- **Priority #4: Importance of Outreach, Education, and Awareness**
  Every Task Force meeting included discussion about the importance of building meaningful partnerships with parents, families, and communities. Stakeholders called for more effective outreach, education, and awareness efforts on the part of all systems and sectors – both public and private – including the value of tailored and responsive messaging. Participants also identified a need for more proactive engagement and education, including comprehensive K-12 health education, to position future parents and caregivers for success. Finally, the Task Force heard from individuals in every region about the need to overcome stigma and other barriers that often accompany publicly-funded services, supports, and interventions.

- **Priority #5: Addressing the Needs of the Whole Child and Whole Family**
  The importance of providing comprehensive health supports for all infants, toddlers, and their caregivers – including mental and behavioral health – was frequently identified as part of a coordinated strategy to support healthy development for all children. Task Force participants called for state agencies to examine barriers to participation in publicly-funded nutrition programs, such as SNAP and WIC, as well as providing multi-generational supports for families. Strengthening pre- and post-partum care for women, including providing wraparound services and supports from peers, practitioners, and community-based organizations, was also identified as a need. Providing safe, healthy environments where infants and toddlers live, learn, play, and receive care was also identified as foundational for ensuring a strong start. Participants identified challenges like environmental toxins, including lead, as well as impacts of trauma and violence, hunger and food insecurity, and homelessness. Many individuals also noted the significant impacts the opioid crisis has had on infants and toddlers and their families, including increasing trends of grandparents raising grandchildren, and the growing need to address maternal opiate use disorder (OUD) and neonatal abstinence syndrome (NAS). Access to reliable, safe, affordable transportation was also identified as a key barrier in both rural and urban settings.

- **Priority #6: Helping Infants and Toddlers Get a Strong Start for School**
  Across the commonwealth, stakeholders highlighted the integral connections between health and education outcomes for infants and toddlers. Participants in each region emphasized the need to promote early literacy, with a goal for all children to be reading on grade level before fourth grade. Representatives from early childhood, K-12, and postsecondary education also called for improved alignment between education systems, including efforts to elevate early care/education professionals with their colleagues in the K-12 system. Early Intervention was also identified as a key component to help infants and toddlers with disabilities be ready for school, with stakeholders calling for integration with early care and education services.

**Next Steps**
This summary identifies initial findings and key themes that Ready to Start Task Force members heard from stakeholders during six regional listening sessions as well as from individuals who shared feedback through an online survey. The priorities and themes outlined in this document will be used to inform a final report with specific strategies and other findings to inform a four-year framework for advancing the well-being of Pennsylvania’s youngest residents and their families, which is expected to be published in early 2019. This report will include recommendations and findings for state policymakers – including the Governor and General Assembly – as well as other information for partners in health care, human services, education, philanthropy, business, and communities.