2020 NCIT Community Strategy Assessment

SORENSON IMPACT

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National Collaborative for Infants & Toddlers™
Powered by the Pritzker Children's Initiative

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Executive Summary

Background

In 2018, the J.B. and M.K. Pritzker Family Foundation launched an ambitious model to improve prenatal-to-three (PN-3) outcomes, the National Collaborative for Infants and Toddlers (NCIT). In 2019 and 2020, in partnership with the Sorenson Impact Center, the BUILD Initiative, National Association of Counties Research Foundation, the National League of Cities Institute, the Center for the Study of Social Policy, Child Trends, StriveTogether, and National Institute for Children's Health Quality, the NCIT directed significant capital, resources, and capacity-building to 29 community organizations in 28 communities across the U.S. to improve outcomes for infants, toddlers, and their families with the goal of serving one million infants and toddlers by 2023.

The Sorenson Impact Center (SIC) worked with the Pritzker Children's Initiative (PCI) and its partners to design and implement assessments of the NCIT community strategy in 2019 and 2020. While the 2019 Assessment demonstrated significant progress toward communities' PN-3 goals, systems-building is a long-term, multi-year endeavor. As a result, the 2020 Assessment aims to shed further light on the process and catalytic impact of the NCIT's efforts to build robust PN-3 systems.

The larger story told by the 2020 Assessment is one of a massive, overwhelming need that was met by an equally massive and heavily coordinated response by NCIT communities and their nonprofits, government agencies, and institutions. The onset of the coronavirus pandemic in early 2020, followed by the accelerated calls for racial justice, challenged communities to triage the needs of families and shift resources towards crisis response for much of the year. Learnings contained within the 2020 Assessment are shaped by these transformative events that impacted communities across the nation and the world.

Key findings

As part of the 2020 Assessment, SIC gathered quantitative data and qualitative data to describe the continued impact and learnings of NCIT communities. This report presents insights into communities' common challenges and responses to the events of 2020, conditions that supported success, and the most durable strategies catalyzed by the NCIT. This report consists of individual profiles of each of the 28 communities and 13 Pritzker Fellows, as well as common challenges and lessons-learned across sites and fellows.

Several key findings emerged from the 2020 NCIT Community Strategy Assessment:

Despite massive change and unrest, NCIT communities worked tirelessly to serve infants, toddlers, and their families.
NCIT communities served 277,000 infants and toddlers across 28 cities and counties in 2020. Twenty-five communities remained committed to at least one PN-3 priority set in 2019 while twenty-one added additional priorities in 2020 in response to community needs.

The NCIT created durable systems and infrastructure that could be effectively deployed during a crisis.
Half of NCIT communities (n=14) reported that the systems-building efforts facilitated by the NCIT and its capacity-building partners helped them to secure significant public and private investments for their communities in 2020. Because of their connection to PCI, and the local partnerships, coalitions, and systems development formed as a result of their participation in the NCIT, communities were viewed as trusted infrastructure through which pandemic relief efforts could be coordinated.

Covid-19 and the movement for racial justice resulted in a significant shift in community priorities and resources.
Many communities were forced to shift their initial 2019 and 2020 goals to respond to the pandemic and the movement for racial justice. However, these crises provided new opportunities to draw attention to and address deep-seated systemic issues that have historically impeded PN-3 progress and resulted in disparities across race, health, and socio-economic status. Communities made progress toward culturally-responsive early childhood systems and data-driven strategies to direct resources toward infants, toddlers, and families most in need.

Communities further invested in the expertise and leadership of parents, incorporating their perspectives into program and system strategies.
Communities aimed to better integrate parent voice into their design of PN-3 programs and systems. To support infants and toddlers in more holistic ways, communities broadened their coalitions to include stakeholders supporting efforts to address addiction, housing stability, mental health and employment to improve outcomes for infants, toddlers, and their families.

Communities met the needs of infants, toddlers, and families in innovative ways that will continue to benefit them beyond the pandemic.
2020 demanded remarkable innovation and resiliency from communities as they sought to meet basic needs, create new supports, and expand current services for families. To keep crucial services operational throughout the pandemic, many

programs transitioned to virtual and online formats. While online programs reduced barriers to access for many families, they also highlighted the disparities in broadband and technology access for families and providers. In response, communities worked to close the digital divide, paving the way for virtual service provision beyond the pandemic.

Opportunities for further support

SIC's learnings regarding the sustainability of PN-3 initiatives provide a roadmap to support communities in their efforts to emerge from crisis and advance their PN-3 priorities.

Communities could benefit from additional support navigating the post-pandemic PN-3 landscape.
The inaugural NCIT communities would benefit from continued support for their early childhood systems-building within a changed economic, political, and social landscape. Partners can continue to support NCIT communities to maintain dedicated PN-3 staff, improve data quality and capacity, build cross-sector coalitions, develop state-level leadership, and identify multi-year funding. With a strong foundation developed as part of the NCIT, these communities are poised and ready to reimagine and reset PN-3 systems with a focus on equitable outcomes for whole communities for years to come.

Acknowledgements

Introduction

NCIT timeline and project overview

The National Collaborative for Infants and Toddlers (NCIT), launched by the Pritzker Children's Initiative (PCI), is a group of communities, states, and cross-sector organizations committed to advancing policies and programs to ensure all families have the support they need to give their infants and toddlers a strong foundation for success in school and life. The NCIT Community Strategy is an important component of PCI's broader PN-3 efforts, which involves funding, support, and strategy for states, policymakers, researchers, and other key actors.

In 2018, 28 communities, comprised of twenty-nine grantee organizations, joined the NCIT to advance promising local PN-3 policies and programs. Each NCIT community developed goals to improve outcomes for infants and toddlers in their community. Throughout 2019, communities received support in the form of capacity-building from national partners, which included one-on-one phone calls, connection to other communities in their cohort, access to webinars, trainings, and conferences, and connections to national early childhood experts and best practices. Thirteen of the 28 communities participated in the Pritzker Fellows Program, which provided training and funding for one staff position for two years[1] with the goal of advancing their community's PN-3 priorities.

In March 2020, the Sorenson Impact Center (SIC) provided PCI with the results of its NCIT Community Assessment for 2019. This 2020 Assessment builds on the findings from 2019 and explores effective and durable strategies to advance PN-3 initiatives at the community level. The 2020 Assessment presents the process and progress of the NCIT communities toward PCI's goal to reach one million at-risk infants and toddlers by 2023. This report also discusses the impact of the Covid-19 pandemic and insights into how this crisis presented opportunities for strategic shifts in programs, services, reach, and strategy in NCIT communities.

REVIEW OF 2019 NCIT COMMUNITY PRIORITIES AND PROGRESS

When joining the NCIT in 2018, communities completed an action plan that outlined their PN-3 goals. These goals varied in breadth, depth, and timeline, but each aligned with one of three

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1   Twelve of the thirteen communities received funding for this position. Pierce County, Washington identified a sustainable funding source for their Fellowship position and opted to participate in the programmatic aspects of the Pritzker Fellows program.

focus areas[2] in the Outcomes Framework developed by PCI in partnership with Child Trends. This tool aligned key progress indicators with evidence-based measures for healthy infants, toddlers, and families. Communities then selected indicators from this framework that best aligned with their locally-developed goals. In the event that goals and indicators did not align, communities chose proxy indicators to demonstrate progress toward improving outcomes for infants and toddlers in their community. Data received from communities in the 2019 Assessment were reflective of this data process.

In 2019, half (n=102) of the indicators chosen by communities measured progress toward systems goals, one quarter (n=53) toward community-level goals, and one eighth (n=25) were state-level metrics used to estimate community progress. Communities that made the most progress towards their goals were those that focused on developmental screening and referral, home visiting programs, and the expansion of collaborative partnerships. Communities with goals pertaining to program implementation and expansion also showed promising progress. For systems goals, communities made the most progress when focused on workforce development and data systems. Communities that focused on continuous quality improvement encountered the greatest challenges toward making progress on their goal. Overall, most communities were able to make progress on their systems goals; however, many communities decided to change their goals midyear, which interrupted, delayed, or halted their progress.

2020 Assessment methodology

The NCIT engaged and supported communities with a lighter touch in 2020 than in 2019. The 28 NCIT communities were not asked to set specific goals for their community, nor were they required to provide data to demonstrate their progress using the indicators from the Outcomes Framework or other 2019 proxy indicators. As SIC connected with communities to gather more information for the 2020 Assessment, the team learned that some communities had changed the goals they had previously set. For some, the immediate needs of the Covid-19 pandemic took center stage, while others navigated pressures including shifting community priorities and constrained resources. As a result, the 2020 Assessment includes a broad range of data provided by communities to demonstrate the scope and reach of their PN-3 work over the past year.

Communities that made the most progress towards their goals were those that focused on developmental screening and referral, home visiting programs, and collaborative partnerships.

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2   These focus areas are: high-quality care and learning, supported families, and healthy beginnings.

The SIC team, in collaboration with PCI and other partners, designed a comprehensive plan to collect qualitative and quantitative data for the 2020 Assessment in alignment with the assessment objectives, which are further described in **Appendix A**. SIC collected the following primary data:

◇ **Preliminary Survey**
In June 2020, SIC administered a survey to communities focused on their responses to the Covid-19 pandemic and accelerated calls for racial justice.[3]

◇ **Data Collection Forms**
In December 2020, SIC sent each community an individualized data collection form.[4] Each form was pre-populated with the goals and data shared by the community for the 2019 Assessment, and included sections for communities to provide both qualitative and quantitative data about their reach, goals, and fundraising efforts.[5] While this form served as a follow up for specific goals set in 2019, SIC anticipated that these goals likely changed or evolved in 2020. As a result, communities were also asked to provide additional data and information on new priorities to reflect these shifts and to help communities demonstrate their impact on infants, toddler, and their families.

◇ **Semi-Structured Phone Interviews**
To better understand the context of the strategies, progress, and changes in each community during 2020, SIC conducted twenty-nine interviews with each community grantee organization during October, November, and December 2020.[6] These interviews supported SIC's efforts to understand where communities left off in 2019, where they were headed at the beginning of 2020, and their experiences throughout 2020. SIC also conducted fourteen interviews with Pritzker Fellows in the summer and fall of 2020.[7] This provided information for the Pritzker Fellows Reflection, which is included in this full report, but is also designed to function as a stand-alone reflection of the two-year pilot program.

SIC built upon its existing relationships with NCIT communities for its data collection efforts. In addition, SIC offered each community a thank-you of $1,000 for their participation in

100% participation in the 2020 Assessment from the inaugural 28 NCIT communities.

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3   See **Appendix B** for the 2020 NCIT Preliminary Community Survey and results.
4   See **Appendix C** for the Sample Data Collection Form.
5   The SIC team used Child Trend's conversion formula to calculate the reach when communities mentioned families served or providers served instead of children served in their data. Calculating reach at the mother or family-level assumes one child is 'reached' for every mother served. Reach at the caregiver-level assumes four children are impacted for every caregiver served.
6   See **Appendix D** for the Community Interview Protocol.
7   See **Appendix E** for the Pritzker Fellows Interview Protocol.

2020 Assessment data collection efforts. Several communities expressed appreciation for this acknowledgement of their efforts. If they were not able to accept the payment, communities passed it on to a partner organization serving infants and toddlers. As a result of these efforts, 100% of communities participated in interviews and submitted data collection forms.

LIMITATIONS

As part of the process of community goal-setting in early 2019, communities used the PN-3 Outcomes Framework to identify indicators (metrics) or proxy indicators for data collection. However, adherence to the PN-3 Outcomes Framework was relaxed in the 2020 year-end data collection form for several reasons. Communities were not engaged with capacity-building partners, nor asked to set specific goals aligning to the Outcomes Framework at the beginning of 2020, as they were in 2019. In addition, communities were not required to maintain their PN-3 initiatives and priorities from 2019 into 2020 as a condition of participating in this assessment, and not all communities continued to work toward these same goals.

As a result, **the lack of continuity and comparability of data between the 2019 and 2020 Assessments resulted in a limited ability to determine direct correlations or causality from year to year.** Communities provided these data to the best of their ability; however, due to the pandemic and challenges associated with a lack of data infrastructure, processes, staffing, funding, and analysis capabilities, these numbers could not be de-duplicated (i.e. these figures may include children who have been counted more than once per community).

To address this issue, SIC invited communities to provide updated data that reflected their work in 2020 based on their 2019 indicators as well as provide new data that demonstrated their reach and impact in 2020. The data provided give a broad view of the ways that communities shifted their priorities and resources during the pandemic, how they define impact and progress, and the future directions of their PN-3 work.

Covid-19's Impact on Early Childhood

Key Takeaways:
- ◆ The disruptions associated with Covid-19 pandemic proved to be a defining feature of community-based early childhood work across all 28 communities in 2020.
- ◆ Early data collection efforts by SIC revealed that the majority of communities shifted their PN-3 priorities in response to the pandemic.
- ◆ Communities built on the resources and networks developed during their involvement with the NCIT to better respond to critical community needs during the pandemic.

Covid-19 exacerbated an already tenuous funding and staffing landscape for programs serving infants and toddlers. As the pandemic unfolded, many child care providers closed, forcing child care workers into unemployment and parents to juggle work and childcare in new ways. Families experienced increased stress levels, economic instability, and lack of community resources, affecting wellbeing including rising abuse and trauma cases and fewer routine wellness appointments and vaccinations. One year into the pandemic, parents continue to worry about their child's health and safety as they return to child care facilities, single-parent families and parents of children with special needs continue to bear an especially large burden, and too many families struggle to afford basic necessities. These new realities for infants, toddlers, and their families shifted and reoriented communities' priorities and served as the backdrop of communities' work, and this assessment, in 2020.

Tracking the early impact on NCIT communities

In June 2020, SIC administered a survey to the 28 NCIT communities to better understand how the early stages of the Covid-19 pandemic affected their PN-3 work. SIC presented results of the survey through an online "Lunch and Learn" on July 31, 2020 to communities, PCI, and all NCIT partners.[8] With over 80 percent (n=24) of communities participating, the results of this point-in-time snapshot helped to provide insight into the challenges that communities faced early in the pandemic and the types of responses they enacted.

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8   See **Appendix B** for the 2020 NCIT Preliminary Community Survey and results.

The survey explored how their priorities, staffing, and funding had changed, and how their participation in the NCIT network in 2019 influenced their PN-3 response to the pandemic. SIC also asked communities about resources and supports that had been helpful, how they were addressing issues of racial equity, and the state of their systems-building efforts.

At the time of the survey, the majority of communities reported that Covid-19 had changed or interrupted their work, but that they were still largely focusing on their PN-3 goals and priorities. About half of the communities reported not being able to spend the same amount of resources and energy on their PN-3 priorities, about one quarter reported spending the same amount, and the other quarter reported their priorities had shifted or they were not able to actively work towards them.

While data collection occurred relatively early in the pandemic, about half of communities reported that funding remained about the same. Only one community reported increased funding at that time, while four communities reported their funds had decreased. Communities anticipated that funding could be cut or reallocated in the near future, as the economic realities of the pandemic unfolded. Fortunately, over sixty percent of communities responded that staffing was largely unaffected, with only a handful of communities reporting that personnel or staff time was reallocated away from PN-3 initiatives.

All but a few respondents reported that their early childhood system actors were more aligned on priorities and strategies and that they developed stronger infrastructure due to their participation in the NCIT. In addition, most communities agreed that early childhood actors better understood the importance of applying a racial equity lens to their efforts.

Figure 1. Community responses to June 2020 survey item: "Please indicate the degree to which you agree or disagree with the following statements regarding early childhood system components in your community in the last 3-4 months.
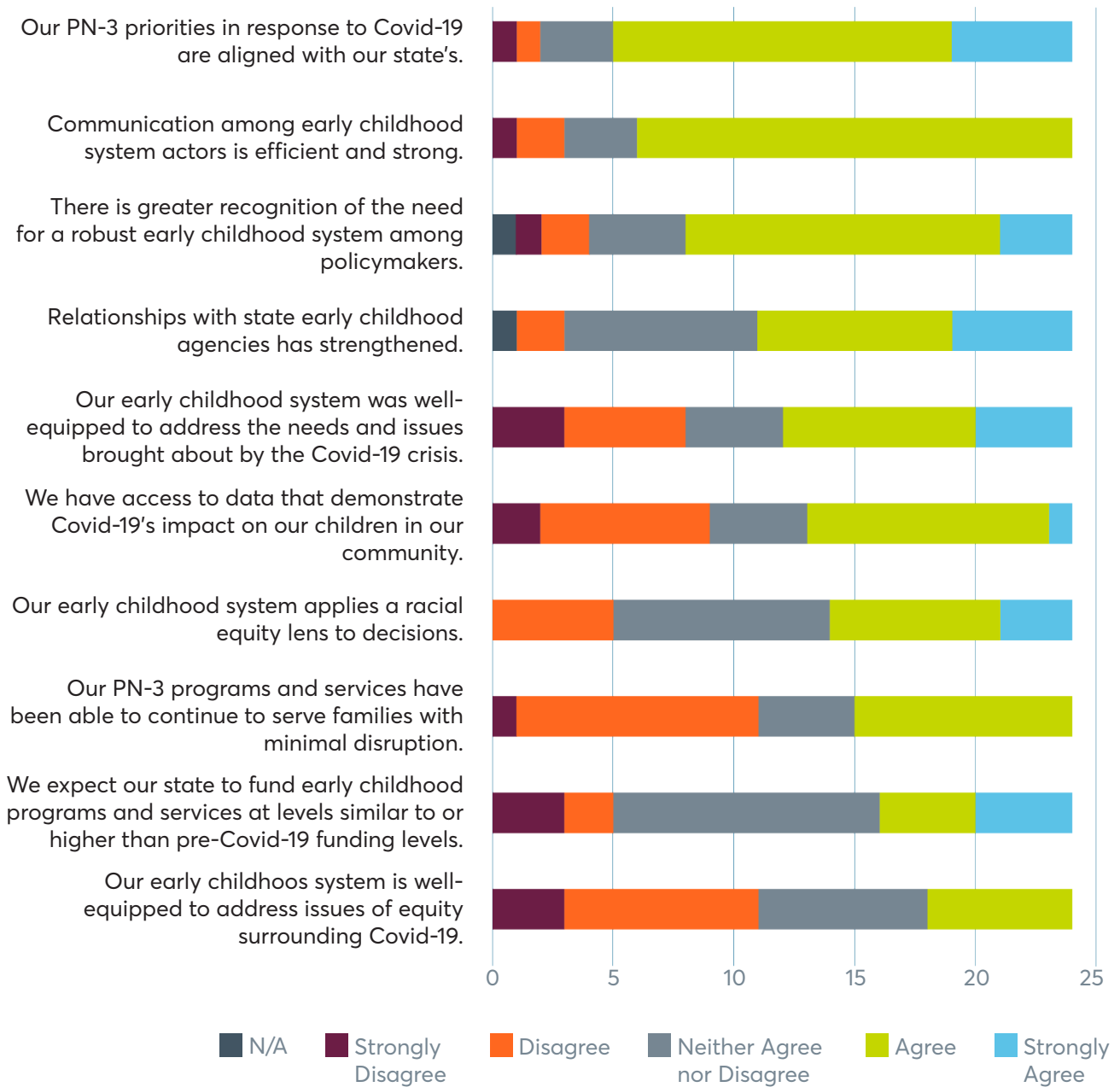
Supportive resources

Communities reported that the most helpful resources for navigating the early stages of the pandemic were those that helped them move from crisis to opportunity and enabled them to connect with community leaders pursuing similar goals. Supports that assisted communities to access localized data and apply for emergency loans or other supports were also named as helpful.

Even with the extremely disruptive nature of the pandemic, NCIT communities reported feeling well-equipped to address community need, thanks to the groundwork and efforts supported by the NCIT in previous years. Existing relationships and proactive policies allowed for quicker and more supportive responses, communities had already-established collaboratives and entities ready to support programs, and leaders created new networks and initiatives to serve providers and families during the crisis.

When asked how their involvement in NCIT had prepared their community and early childhood systems for the challenges faced in 2020, the most common answer from communities was that the partnerships, relationships, and infrastructure cultivated during the 2019 grant period were crucial to their success. An overwhelming majority of communities noted their relationships with health care systems, schools, and families were strengthened as a result of the pandemic. Strong relationships also increased the effectiveness of communities' response to the pandemic. About half of communities also mentioned tools and resources from NCIT and the four capacity-building partners (National League of Cities Institute, National Association of Counties Research Foundation, StriveTogether, and the Center for the Study of Social Policy) as vital to their pandemic response. Eight communities shared they also relied on the peer networks strengthened during their time in the NCIT, for their pandemic response.

> *"The network of providers that were initially part of our Pritzker stakeholders group in the early stages, each of them had their own plans and processes, and they included sharing that information with us. That transparency that was shared across the community – had it not been for the initial grant, I'm not sure we would have developed those relationships to that extent."*

Communities reported that partnerships, relationships, and infrastructure cultivated during the 2019 grant period were crucial to their success.

Figure 2. Number and percent of communities responding to the statement about the state of their community's early childhood system on 2020 year-end data collection forms.

"When Covid-19 hit, our community had a strong foundation to address the crisis in a collaborative way, and meet the needs of infants, toddlers, and families."

36% (10)

7% (2)

11% (3)

46% (13)

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree
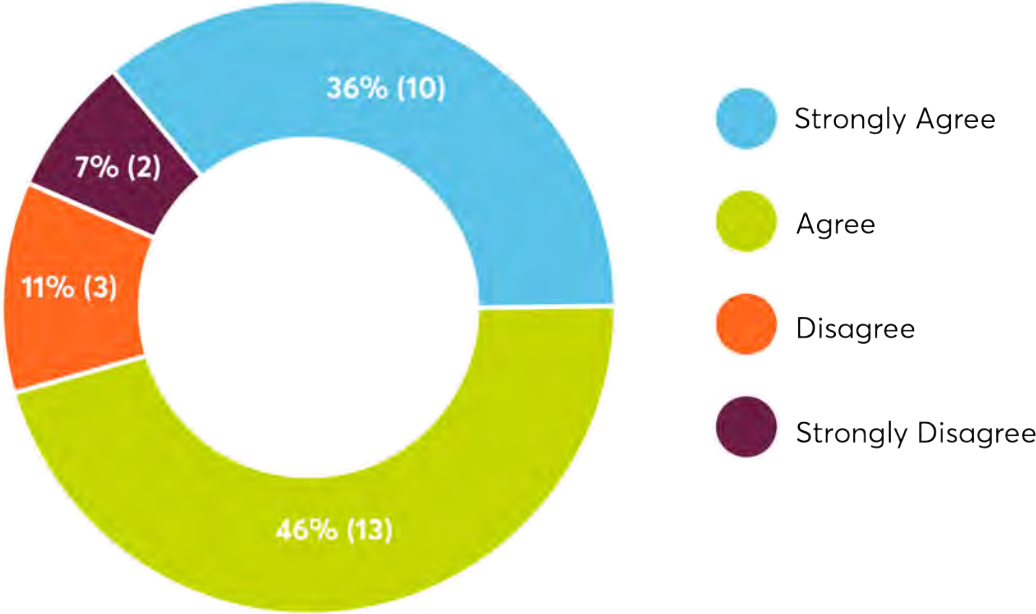
2020 PN-3 Priorities, Goals, and Infants and Toddlers Served

Key Takeaways:
- ◆ Across the 28 communities, 277,000 infants and toddlers were served in 2020.
- ◆ Over 85 percent of communities reported that they were still working toward at least one of their PN-3 goals identified in their 2019 Action Plan.
- ◆ NCIT communities discovered many new and creative ways to reach infants, toddlers, and families over the course of an unprecedented year.

In 2019, communities engaged in a robust goal-setting exercise with their capacity-building partner to develop an Action Plan, which was aligned with the PN-3 Outcomes Framework. In the 2019 NCIT Assessment, SIC reported on each community's 2019 reach, which was defined as an increase in the total number of at-risk infants and toddlers impacted by the community's prenatal-to-three work. In 2020, communities were asked to report whether they were still working towards the same priorities set in their 2019 Action Plans, and any accompanying data. SIC also requested that communities share any new PN-3 priorities for 2020 and provide any data to show the progress and impact of those priorities. As priorities and capacity changed from the beginning of 2019 to 2020, and again throughout 2020, SIC accepted all available data shared by communities, including data that did not align with the Outcomes Framework, in an effort to capture multiple aspects of community impact in 2020.

Despite the turbulent events of 2020, the vast majority of communities remained committed to working on at least one PN-3 priority set in 2019. PN-3 leaders reported that they found ways to participate in the pandemic response effort while still remaining focused on the needs of infants and toddlers. Many NCIT teams also spent 2020 continuing to plan their projects and engage in system-building efforts, giving themselves an even stronger start for the post-pandemic era.

Certainly, many communities identified Covid-specific priorities in 2020, but the majority of communities that set new priorities also identified non-Covid-related priorities, including:
- ◇ Referral and family connection to services
- ◇ Various child care support services
- ◇ Screening and referral

25
communities reported they were still working on at least one priority set in 2019.

21
communities reported new priorities or focus areas in 2020.

◇ Mental health
◇ Kindergarten readiness
◇ Improving data collection and infrastructure
◇ Securing funding and sustainability

Communities used new approaches to serve infants, toddlers, and their families as part of their pandemic response, and some of these strategies will likely become permanent. For example, communities created new methods for families to navigate their fragmented systems during the crisis including pop-up call centers, re-envisioning food and diaper banks as access points for other services, and using child development apps and websites to share service and navigation information. Because the lack of coordinated referral and delivery systems was one of the greatest challenges previously identified by many NCIT respondents in 2019, many communities had to work hard to patch together navigation systems in the midst of a crisis.

While most communities were able to disburse emergency funding to keep child care providers open during the crisis, a handful of teams planned to continue providing financial support to child care providers beyond the pandemic. Six teams mentioned they provided some form of support for Family, Friend, and Neighbor (FFN) providers during 2020 -- including direct funding. Home visiting programs and parent support groups also transitioned online and were widely regarded as more successful than originally anticipated due to the elimination of transportation issues and the convenience and relative comfort of online contact.

Across the 28 communities, 277,000 infants and toddlers were served in 2020.[9,10]

277,000 infants and toddlers were served by NCIT communities in 2020.

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9   Only 8 communities were able to provide disaggregated data at the time of data collection.

10   Due to data limitations, total number served cannot be de-duplicated, thus limiting the comparability of data between the 2019 and 2020 Assessments. For instance, a child served by a home visiting program as well as a diaper bank could be counted twice in the data submitted by the communities..

Table 1. Number of infants and toddlers served, by NCIT community in 2020

Community	Capacity Building Partner	Total Served
Albuquerque	Strive Together	346
Austin	NLCI	22,122
Baltimore	NLCI	7,392
Boone County	NACoRF	2,774
Boston	CSSP	2,651
Chattanooga	NLCI	620
Cleveland	NLCI	1,800
Dauphin County	NACoRF	820
Denver	CSSP	4,807
Denver	NLCI	5,125
Guilford County	CSSP	29,316
Kent County	CSSP	7,985
Los Angeles County	CSSP	204
Memphis	Strive Together	9,186
Minneapolis	NLCI	7,636
Multnomah County	CSSP	5,992
Norwalk	Strive Together	5,786
Onondaga	CSSP	9,368
Orange County	CSSP	101,250
Pierce County	NACoRF	20,318
Pima County	Strive Together	725
Ramsey County	NACoRF	2,804
Salt Lake City	Strive Together	669
Spartanburg	Strive Together	1,738
Tarrant County	NACoRF	16,398
Ventura County	CSSP	4,059
Volusia/Flagler Counties	CSSP	3,457
Washington County	NACoRF	340
Watauga County	NACoRF	584

Communities provided these data to the best of their ability. However, communities experienced challenges with reporting these numbers due to weak pre-existing data infrastructure. Challenges with data include the lack of processes, staff, funding and analytical capabilities as well as the emergence of pandemic-related community needs, which shifted program funding and resources to new priorities.

In addition to reporting the number of infants and toddlers served in 2020, communities quantified their impact in new ways, such as:

◇ Virtual home visiting and screenings conducted over the phone;
◇ Crisis response to provide basic needs and services such as diaper banks and food distribution efforts;
◇ Social media campaigns and webinars focused on pandemic-related PN-3 resources and supports; and
◇ Pandemic-related supports and supplies to child care centers and FFN providers such as cleaning supplies and PPE.

While not as easily quantifiable, communities also identified positive PN-3 impact and early childhood systems-building through strategies including:

◇ Mitigation of spread of Covid-19 in child care centers;
◇ Sustaining the child care sector and child care slots during the pandemic and beyond;
◇ Strategic planning around equitable early childhood systems-building and outcomes; and
◇ Applying the lenses of ACEs and resilience to Covid-19 response efforts

Lessons From the Field: NCIT Community Successes

Key takeaways:

◆ Because of the system-building efforts facilitated by PCI and its capacity-building partners before the pandemic, NCIT communities emerged as trusted infrastructure through which pandemic relief efforts could be coordinated in 2020.

◆ The majority of communities reported that they developed new and stronger relationships with health care systems, schools, housing organizations, businesses, and churches which provided the opportunity to create holistic systems of support for infants, toddlers, and their families.

◆ Programs that were able to effectively transition online and leverage diverse communication channels (i.e. newsletters, phone calls) were able to serve more families compared to those that were not able to do so. Communities worked to close the digital divide for providers and families to facilitate virtual programs and services across income and geography.

◆ Communities strengthened their focus on racial equity; successful approaches centered parent perspectives and used data to further advance equitable service delivery.

PN-3 community strategies and Covid-19

Communities and their systems, providers, and families showed incredible resilience over this past year. The first half of 2020 was largely spent navigating crisis as communities quickly mobilized their organizations, collaboratives, and partnerships to respond to the Covid-19 pandemic.

Remarkably, the majority of communities were able to make progress on the PN-3 priorities they set at the beginning of 2020. Despite its challenges, the pandemic provided an opportunity to meet the needs of infants, toddlers, and their families across systems. To that end, communities often assumed a more active role in supporting family economic stability, such as eviction prevention, and ensuring basic needs, such as with diaper banks. This increased focus on whole-family supports allowed PN-3 priorities to be embedded within multiple programs, services, and systems outside of the traditional early childhood community.

NCIT grantees contributed significantly to their communities' response to the Covid-19 pandemic. While the pandemic brought similar challenges to communities across the country, NCIT grantees assumed a variety of roles to meet the needs of infants, toddlers, and their families. Common themes emerged among communities regarding the tools, resources, and strategies that enabled their crisis response. The majority of communities (n=23) responded that they either agreed or strongly agreed that their systems had a strong foundation for their crisis response, due at least in part to their participation in the NCIT, while only five communities either disagreed or strongly disagreed.

Our assessment uncovered relief measures in which NCIT coalitions participated, as well as community-wide response efforts beyond the NCIT teams. Our data indicates that millions of dollars in CARES Act funding found its way to early childhood systems to support families during 2020. The larger story told by the 2020 Assessment is one of a massive, overwhelming need that was met by an equally massive and heavily coordinated response by nonprofits, government agencies, and community institutions across the nation.[11,12]

Success: systems development

The pandemic brought unanticipated hardships for individuals, families, communities, and our nation as a whole. The chaos created by such an unprecedented event put strain on systems, processes, and resources as governments and community organizations met the physical, mental, economic, and social needs of their communities. However, communities also seized opportunities for change that may not have otherwise occurred. In particular, the pandemic brought renewed attention to the importance of early childhood systems, a fact communities hope to leverage to garner future support and investment in systems and programs.

The vast majority of communities noted their relationships grew in strength and number during the pandemic. Nearly half of communities noted those relationships were with their state and local health care systems and their local public school systems. About a quarter of communities also stated their relationships with families strengthened during the pandemic. Relationships with businesses, housing authorities, and churches were also mentioned by a handful of communities as they worked to ensure family stability and maintain availability of child care.

The vast majority of communities noted their relationships grew in strength and number during 2020.

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11 "Community institution" includes schools, churches, businesses, philanthropists, healthcare systems, and grassroots community organizers.

12 For more about how Covid-19 impacted communities in 2020, see "Covid-19's Impact on Early Childhood."

As was seen nationally, the impact of child care center closures was widespread in communities, drawing more attention to the vital role child care plays in supporting local economies. Due to this, nearly two-thirds of communities noted they now see more awareness of the importance of early childhood systems in their communities. Notably, because of the crisis, businesses and those who indirectly benefit from high-functioning early childhood systems better understand the connection between their success and its dependence on affordable, accessible child care for the workforce.

> *"Through this pandemic, a bright spot has been that county governments, city governments, economic developers, and businesses now have said, 'We need child care more than ever before!' This has elevated the importance of access and availability[...] I think it's now accelerating this conversation, even on a national level."*

About half of communities named strengthening their partnerships and coalitions as their most notable accomplishment of 2020, describing the process of building trust and resiliency within their collaboratives. Similarly, nine communities stated they were proud of their community's response to pandemic. About a quarter of communities mentioned they were proud of the plans they put together for future funding and partnerships, providing some hope on the horizon. Finally, six communities were proud of their work to elevate and incorporate parent voice in their early childhood programs and system.

Success: program innovation

At the start of the pandemic, NCIT communities worked tirelessly to distribute PPE, relief funds, and basic supplies to child care providers. They also offered additional support navigating new pandemic-related protocols and developing plans for businesses to reopen, as well as assistance in applying for and tracking usage of relief funds. A few communities also focused their efforts on supporting FFN care providers, knowing that infants and toddlers were likely to attend these care programs that, since unlicensed, did not have access to the same financial supports as licensed centers. One community worked to get their FFN providers access to grocery stores outside of regular business hours so that they were able to avoid empty shelves and purchase cleaning supplies and formula to remain open.

> *"We also have a Provider Café where during the pandemic there were many opportunities on the federal level as well as the local level for providers to tap into funding to support their*

Nearly two-thirds of communities saw increased awareness of the importance of early childhood systems in their communities.

program and keep them afloat… We want providers to really focus on providing excellent child care, providing quality child care, supporting those families with educational opportunities, but we also need them to take care of their businesses so they can continue to provide that support. So through the Provider Café they have been able to receive some of that education and they are responding in a very positive way."

Communities also swiftly transitioned many programs and services to a virtual format. This approach proved revolutionary for programs such as home visiting and provider trainings. For parent classes and support groups, the virtual format reduced transportation and other accessibility barriers that previously impacted family participation. Providers noticed increased participation from fathers in virtual home visiting, reduced family stress related to unfamiliar visitors in the home, and an increased ability for specialists to respond to new parents' needs and questions in real time.

"I think… Covid might have helped us a bit, pushing us forward and looking at different models for home visitation and tapping into our community… We were really quick to transition to telephone and Zoom home visiting and client connection. It accelerated our linkage to some other technology resources and online training for our home visitors in the community. I think it also accelerated our work raising parent voice. We needed to understand what parents needed. We thought we understood, but we needed to better understand."

Many communities also worked to close the digital divide for families and increase providers' ability to use technology. To overcome the digital divide with providers, communities worked to connect them with laptops, training, and online support opportunities. Half of communities relied on phone calls or text messages, with some conducting developmental screenings over the phone in lieu of in-person pediatric well-child visits, and a quarter of communities mentioned their efforts to get devices or broadband access to families. One community in particular utilized a "digital business card" to introduce their home visiting specialists to families prior to the first visit, which decreased the time between first contact and first visit with families. Although initiated by the pandemic, many communities mentioned they may move toward offering online or virtual services permanently as a way to continue to provide options that best meet the needs of families.

"I actually got tears of joy when we found a local internet provider who wanted to partner up and get Internet to our low-income families. But it was just like a little light at the end of the tunnel to say, 'You know what, there's all this other stuff you don't have, and I'm so sorry about that, and we'll keep working

Virtual formats increased fathers' participation in virtual home visiting, reduced family stress, and increased the ability for specialists to respond to new parents' needs and questions in real time.

hard. But there's this one thing, and someone local who'd willing to take the price down and do something just because it's the right thing to do."

"...Before Covid we were doing navigation in person, and we really wanted to test -- for families who might not be able to spend that extra time to do it in person – what it would be like to follow up with a phone call or a video interaction. You've got to be careful what you wish for, because we got a lot more of that than we had hoped. We know now that we are able to connect with families and have a successful conversation remotely [...] We're learning that when we get back to a model where families can have a choice, that there should be options for them so they can be effective and successful. That's a silver lining that we were able to learn that, I guess."

About half of communities also noted they strengthened system navigation resources for families. This included increasing the use of social media, creating new websites to help families locate services and supports, and engaging existing navigation infrastructure. Communities mentioned using existing program staff as access and referral points to connect families to the larger early childhood system and resources both related and not related to the pandemic. Some staff were re-trained to work as part of a temporary call center for families, while other communities accelerated the launch of call centers that were in the planning process pre-pandemic. One community shifted their home visiting program to first engage with new moms before they gave birth, allowing them to make connections to resources much sooner. Another community repurposed library spaces as technology and service centers for families For the communities that were already working on improving or implementing systems navigation, the pandemic sped up progress on those priorities due to a surge in demand for services from the community.

"I think the coronavirus impacts – both the health impacts and also the economic impacts, the job loss, the risk to housing, the social isolation -- all of those pieces have really highlighted the need for the navigation infrastructure we are putting together. It's brought more urgency to the work we're doing in that area."

Success: addressing equitable systems and outcomes

In addition to the Covid-19 pandemic, the calls for racial justice in the spring and summer months shaped the course of 2020. Although communities found themselves at different stages in their approach to racial equity, the vast majority of communities responded to the protests with commitments to evaluate their

Half of communities continued to integrate parent voice into their early childhood systems.

systems, conduct internal and partner equity assessments, and host trainings for their organizations, collaboratives, and providers.

> *"Having [the protests for racial justice] in the news cycle and in social media so constantly was validating for our predominantly Black city where you see these things, you live these things, you know them, but you see that so many other people around you, maybe not in your community, don't recognize it and don't validate it… So to see a national conversation around this, I think it does do something that's a bit different."*

Communities' racial equity work also often integrated gender, health, and socio-economic equity. Two communities declared racism a public health issue, and others framed maternal health and birth outcomes as racial equity and health equity issues. Communities also aimed to address economic inequities by increasing the quality of care for children from lower income backgrounds.

About half of communities used data to direct services and resources to underserved families. Some of these communities focused on specific zip codes or demographics while others used data to ensure programs reached and served their intended community members. One community created a weighted formula to direct more funds and resources to areas of higher need within their community.

Half of communities worked to integrate parent voice into their early childhood systems, including creating advisory boards, soliciting community feedback via community groups, and training and employing parents to serve as system navigators. One community reported surveying families about their experience engaging with services, and another shared they are paying community elders to help liaise about community need and guide the direction of their early childhood work. By more intentionally incorporating parent perspectives, communities aimed to make systems more responsive to the needs of families, particularly when staff do not reflect the racial, socio-economic, and cultural backgrounds of the people they serve.

> *"One of the benefits of the peer program that the families are creating is we're going to be tracking how well they share information with each other about programs. So aside from Help Me Grow being that connector, we also recognize that parents are able to share information faster between each other in those networks."*

About half of communities used data to direct services and resources to underserved families.

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The vast majority of communities responded to the movement for racial justice with commitments to evaluate their systems, conduct internal and partner equity assessments, and host trainings for their organizations, collaboratives, and providers.

NCIT's Catalytic Investment in Communities

Key takeaways:
- ◆ Communities received a total of $60 million of new investments in 2020, the majority from government sources.
- ◆ Twenty-four communities received new or additional funding in 2020.
- ◆ Had it not been for participation in the NCIT, fourteen communities indicated they may not have been awarded the necessary funding to support their efforts.

PCI's infusion of financial and capacity-building support in NCIT communities catalyzed additional investment in PN-3 priorities at the local level. In total, twenty-four of the twenty-nine NCIT community organizations reported that they received new or additional funding in 2020.[13] Communities reported a total of $60 million received, with $20 million of that coming in the form of CARES Act dollars. Of the twenty-four communities who reported new funding in 2020, fifteen listed more than one source of funding. The average grant period for ongoing funding was 2.5 years, with seven communities reporting funding into 2022, three communities reporting funding into 2023, two communities reporting funding into 2024, and one community reporting funding into 2025. Of particular note are Tarrant County, which received nearly $3 million in funding for 2020-2025 from Substance Abuse and Mental Health Services Administration (SAMSHA) for infant early childhood mental health consultation, and Boston, which received support from StriveTogether for years 2020-2025 to create a family engagement data dashboard. A full breakdown of funding received by communities can be found in n the accompanying 2020 Assessment NCIT community data spreadsheet.

Notably, had it not been for the system-building efforts facilitated by the PCI and its capacity-building partners before the onset of the pandemic, fourteen communities indicated they may not have been allocated the amounts of federal, state, and private funds for their community's pandemic response. Because of their connections to PCI and NCIT, and through the local partnerships built during that relationship, the NCIT

$60 million in private and public funding received by NCIT communities in 2020.

communities were viewed as trusted infrastructure through funds and support could be coordinated. Twelve communities reported they received funding because of the credibility lent to them by their participation in the NCIT.

Roughly half ($25 million) of the funds received by communities in 2020 went to support Covid-related relief efforts for child care providers and families, and nearly a third ($18 million) was used to expand current or new initiatives. The remaining amount of funding was split between systems building initiatives ($9 million) and maintaining or implementing current PN-3 initiatives ($7 million). Seven communities received new funding for racial equity initiatives.

Table 2. Funding received by communities from public and private sources in 2020

Funding Source	Amount	Percentage of Total Funding Received by All Communities
Philanthropy/Private Donations	$7,322,322	12%
Government	$52,922,413	88%

Challenges and Barriers to PN-3 Success

Key Takeaways:
- ◆ The vast majority of communities were forced to dramatically realign their 2020 PN-3 priorities as a result of the Covid-19 pandemic.
- ◆ Lack of data infrastructure and funding support remained unchanged from 2019 as the most common and persistent challenges inhibiting PN-3 success at the local level.
- ◆ Nearly all communities were concerned with the lasting impacts of the Covid-19 pandemic and racial inequities on infant and toddler development and mental health.

Communities faced a variety of challenges over the course of this unprecedented year, which impacted their progress toward their intended priorities set at the beginning of 2020. While some communities had to shift their priorities and resources towards pandemic responses for just a short time, others were forced to delay work on their initiatives, at times without knowing when the work could be resumed. Eleven communities shifted their priorities and another eleven halted their current initiatives and efforts due to the crisis. Fifteen communities also had initiatives or priorities that changed throughout the course of 2020 but not in direct relation to the pandemic.

Gaps in data infrastructure and funding support remained unchanged from 2019 as the most common and persistent challenges facing communities at the local level. Communities differed in their ability to disaggregate their community-level data, with over half of communities saying they lacked the dedicated staff or data infrastructure to collect and analyze disaggregated data from programs and services. The pandemic further complicated communities' ability to collect data and communities worried that this lack of data may make securing future funding for programs difficult. Nearly half of NCIT communities named a lack of long-term funding as a challenge for PN-3 progress, and about a third mentioned a lack of state funding for PN-3 as a significant barrier.

Challenge: systems-level infrastructure and leadership

Communities faced challenges at the federal, state, and local levels as they worked to strengthen their early childhood systems. Nearly one in five communities noted their state

lacked a cohesive early childhood policy and infrastructure, data infrastructure and sharing, and coordination between government agencies. Two-thirds of communities also faced funding issues, including those that noted a lack of long-term funding for systems building. Eight communities also noted a lack of state investment and another eight communities remained concerned about local and federal budget cuts to services in the near future.

Finally, more than a third of communities noted they spent significant time educating and aligning community partners to generate consensus about the importance of early childhood systems. One in five communities noted the added challenges of racism, inequity, and stigma surrounding service access and utilization impede family buy-in and hinder systems building.

Challenge: persistent inequities and trauma

Nearly all communities were concerned with the impacts of the Covid-19 pandemic and racism on infant and toddler development and mental health. Three quarters of communities mentioned the challenges associated with looming economic crises and the ongoing impacts of racism, disparities, and systemic issues.

Communities also expressed concern about the pandemic-related economic crisis and its effect on housing, jobs, and access to food and other basic needs. While the economic impacts of the pandemic may be more easily measured, the well-being and mental health of families and children will be not only more difficult to track, but also likely to outlast the financial toll on families. Many communities shared their concerns over how this traumatic year could negatively impact infant and toddler development and its lasting impacts on kindergarten readiness.

> *"It's almost at this point unquantifiable in terms of the level of economic impact [...] concepts like living paycheck to paycheck, housing instability. I can't even begin to think about the long-term significant impacts."*

> *"I think we'll have a relatively short memory of this time, and we'll assume that if the damage can't be seen it doesn't exist. Especially for very young children, we'll forget that they went through this, and by the time they become kindergartners, we will expect them to have gotten over it, and we'll be unable to see the long-term implications of their reduced socialization and higher stress and the trauma they've experienced."*

Opportunities to Further Sustain PN-3 Efforts

Key takeaways:
- Communities could benefit from additional support to help maintain their dedicated PN-3 staff positions.
- Declines in data quality and availability during the pandemic will likely impact communities' ability to communicate their PN-3 progress and needs in years to come.
- In order to secure broad support for PN-3 priorities, communities would benefit from efforts that connect PN-3 outcomes to those across sectors.
- Communities need strong, coordinated PN-3 leadership at the state level that is eager to learn from local efforts.
- With dramatic shifts in the PN-3 funding landscape as a result of the Covid-19 pandemic, communities could benefit from tailored support to secure sustainable funding for their PN-3 efforts.

While the pandemic presented unique challenges for communities, it also revealed opportunities to strengthen PN-3 systems, services, and priorities. As communities leverage the momentum to improve their early childhood and family support systems, ensuring these initiatives remain sustainable will require significant planning and support.

In its 2019 NCIT Assessment, SIC identified six key elements of sustainable PN-3 work:[14] dedicated PN-3 staff, strong data infrastructures, integration of PN-3 priorities into other policy areas, development of trusting relationships and community buy-in, connection to state-level initiatives, and multi-year funding for PN-3 priorities. This year's assessment provided additional information regarding the ways in which these strategies contributed to PN-3 success as well as ways to support communities in their effort to create sustainable PN-3 strategies.

Support dedicated PN-3 staff

Dedicated PN-3 staff played a key role helping their communities coordinate their crisis response, advance racial

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14   Identification of these key features was supported by the Center for the Study of Social Policy, National Association of Counties Research Foundation, National League of Cities Institute, and StriveTogether.

equity, and pursue their PN-3 agenda in 2020.[15] However, as the Pritzker Fellows Program came to an end in the summer and fall, communities varied in their ability to maintain the fellow's role beyond the support provided by PCI.

While the majority (seven) communities reported that the fellow role would be retained in some capacity and three communities had already hired or planned to hire one or more new dedicated staff focused on PN-3, a handful of communities were unsure or unable to retain the dedicated PN-3 staff position. In addition to the leadership development and capacity-building supports that enabled fellows to help their communities achieve their PN-3 goals faster, communities could benefit from additional support to help maintain their dedicated PN-3 staff positions.

Formalize data and governance infrastructures

Many communities noted the pivotal role that data and governance infrastructure played in 2020. Solid data infrastructure allowed communities to identify issues as they emerged, such as the massive shifts in childcare availability, and empowered communities to advocate for responsive policies, programs, and funding to address the crisis in real time. Reliable data about this crisis holds the promise to provide a better understanding of the historical impacts of the pandemic on current and future generations.

However, data availability and quality experienced a noticeable decline in 2020 due to the pandemic. Communities lamented the lack of cohesive early childhood policy, infrastructure and data sharing across systems and organizations, even in a non-pandemic context, and reported significant challenges collecting and reporting on data during the pandemic. Communities noted that these challenges would likely impact their ability to demonstrate progress and their continued needs in order to secure future funding.

Communities experienced firsthand the ways in which early childhood systems are unprepared for the types of government shutdowns that occurred in 2020, as communities built their services off of the public infrastructure that was abruptly swept into pandemic response efforts. Formalization of infrastructure should therefore continue beyond the best practice of appointing or convening a group of key stakeholders to oversee the work of the project or initiative, and establish permanence by defining the community's process for data collection, reporting, and action in official policies and procedures.

15   Further information on the contributions of dedicated PN-3 staff can be found in the Pritzker Fellows Reflection.

Communities also noted the need for additional funding for dedicated staff focused on data work.

> "The biggest takeaway for me has been that [data] belongs to everybody, everybody has a say in it, everybody has a place in it. Everybody has a role to play in participating in how data is talked about and used and understood -- and how it drives the work forward."

Integrate PN-3 priorities into other policy areas

Creating strong connections between PN-3 issues and a community's current policy priorities increases the durability of PN-3 priorities. Nontraditional PN-3 champions can be found across economic development, planning and zoning, business, housing, transportation, and poverty support services. These cross-sector champions can advocate for PN-3 priorities as part of larger community development efforts while providing additional thought partnership that unlocks new funding opportunities and reduces duplication of efforts. The value of a cross-sector approach to PN-3 was reinforced across nearly every community, as communities integrated the needs of infants, toddlers, and their families into their pandemic response efforts.

Communities could benefit from support helping them connect PN-3 outcomes to future developmental and educational milestones. More support in this area could increase the ability of early childhood advocates to secure the support of other sectors. Additionally, communities should capitalize on the current widespread recognition of the importance of child care and develop messaging about the importance of child care, align with local champions, and connect with businesses to advocate for greater access, affordability, and resources for child care.

Build trusting relationships and community buy-in

NCIT communities were viewed as trusted infrastructure through which pandemic relief efforts could be coordinated in 2020 because of their prior work to cultivate strong relationships and collaboratives with agencies, providers, and families. Eighteen communities noted that the partnerships, relationships, and infrastructure developed during their NCIT work were critical to their crisis response in 2020. Another seventeen communities noted that their NCIT work gave them credibility during the crisis, especially with funders, government agencies and leaders

NCIT communities served as trusted infrastructure through which pandemic relief efforts could be coordinated.

allocating funding for the crisis response, local families and community leaders, and with providers or other stakeholders. NCIT communities noted that, in contrast to their experience, some neighboring communities did not receive funding for crisis response due to their lack of infrastructure and partnerships. These findings highlight the importance of communities' previous work to build meaningful relationships in order to sustain and grow initiatives in times of crisis.

The NCIT can continue to emphasize the importance of relationships in creating sustainable PN-3 strategies. Relationships are vital to changemaking efforts, and the sustainability of local PN-3 initiatives requires bringing together multiple sectors, agencies, and levels of leadership to promote the ongoing exchange of perspectives, resources, and support necessary to create lasting change. In a community initiative, engaging with local government and community leaders is paramount to success and sustainability. The continued support of local government maintains the momentum of a local stakeholder group beyond anticipated milestones on the horizon. And while partnerships with parents and families receiving services are often overlooked, their insight is key to enabling program leaders to design supports that meet the needs of families with infants and toddlers.

Connect to state-level initiatives

NCIT communities found that support and credibility increased when they connected their work to state-level efforts. State connections bring additional experts to the table to discuss best practices, support a bottom-up approach for developing stronger PN-3 programs and policies, and increase the potential to scale innovative work beyond one community. This connection also ensures that communities are not working in isolation.

Twenty-two NCIT communities reported they regularly work with state committees or with state government agencies on PN-3 initiatives. Another thirteen communities reported they regularly collaborate with statewide nonprofits or partnerships on PN-3 work. Six communities reported they had mentored or shared information with other areas in their state regarding their PN-3 projects.

The pandemic created new opportunities for state-level collaboration for some communities; nine communities reported participating with their state on the crisis response. Communities supported state-level efforts to keep child care centers open and FFN providers operational, offered additional social services through a state portal or website, assisted with development of coordinated, pandemic-related guidelines

22 NCIT communities reported they regularly work with state committees or with state government agencies on PN-3 initiatives.

for early childhood providers, and helped develop statewide pandemic response plans. Five communities worked directly with their state legislatures or legislators on bills for PN-3 support. Four communities reported the state incorporated their project in their statewide strategy for the duration of the crisis.

Communities could continue to benefit from development of strong early childhood leadership at the state level, as well as PN-3 champions at the local level. Local PN-3 champions would not only further local investments in early childhood systems and in particular PN-3 initiatives, but would also help elevate successful PN-3 strategies to the state level.

Secure multi-year PN-3 funding support

In 2020, communities encountered new challenges and opportunities as the funding landscape dramatically shifted due to the pandemic. However, twenty-five NCIT communities reported an increase of funding for their PN-3 initiatives and reported that their work with the NCIT played a key role in securing these funds. Communities stated that the Pritzker brand, and their participation in the NCIT, lend credibility to their work for both public and private funders. During their engagement with the NCIT in 2018 and 2019, communities developed key relationships and infrastructure that enabled them to effectively use CARES Act and other relief funds. Going forward, communities could benefit from tailored support to identify and apply for additional support and strategies to build political will for public investment.

During their engagement with the NCIT in 2018 and 2019, communities developed key relationships and infrastructure that enabled them to effectively use CARES Act and other relief funds.

Conclusion and Next Steps for the Inaugural NCIT Communities

Communities faced unprecedented challenges during the course of 2020 and emerged with renewed focus and innovative, equitable, cross-sector, solutions to persistent problems. Participation in the NCIT solidified local leaders and ecosystems that could effectively respond to crisis and support infants, toddlers, and families in need.

While this year increased awareness about the importance of early childhood systems, over half of communities worried about lasting negative impacts of the pandemic on their already-vulnerable early childhood systems and the people they serve. Early childhood system stability and resiliency varied greatly among communities and nearly all experienced a loss of PN-3 focus in systems. A number of communities noted their systems had begun 2020 under-resourced or in triage mode, and feared that the pandemic only exacerbated those issues. In addition, communities remained concerned about how the economic challenges will affect the future of local funding for early childhood systems.

Moving forward, the inaugural NCIT communities would benefit from continued support for early childhood systems-building. Partners can continue to support NCIT communities to maintain dedicated PN-3 staff, improve data quality and capacity, build cross-sector coalitions, develop state-level leadership, and secure multi-year funding. With a strong foundation developed as part of the NCIT, these communities are poised and ready to reimagine and reset PN-3 systems with a focus on equitable outcomes for whole communities for years to come.

Pritzker Fellows Reflection: 2018-2020 Cohort

SORENSON IMPACT

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School of Business
THE UNIVERSITY OF UTAH

National Collaborative for Infants & Toddlers™
Powered by the Pritzker Children's Initiative

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Introduction

The Pritzker Children's Initiative (PCI) supported one dedicated PN-3 staff person over two years in thirteen of the inaugural 28 NCIT communities. The 2019 NCIT Assessment analyses demonstrated that communities with a fellow were more likely to achieve their PN-3 goals than those without the dedicated staff.

This reflection aims to provide insight into the impact that fellows had on their communities and the elements of the fellowship program that contributed to their success. Additionally, due to the nature of this past year, this reflection includes information about how dedicated staff aided communities in their pandemic crisis response. Finally, based on the learnings of the inaugural fellowship program, this document outlines opportunities to further support the development of future PN-3 leaders to achieve the greatest impact.

Reflection Methodology

To complete this reflection, SIC interviewed each fellow between July and November 2020. Each interview lasted approximately one hour. SIC also interviewed Maggie McGlynn, president of McGlynn Leadership in October 2020 in her capacity as Pritzker Fellows Program leadership development consultant. During the community interviews, communities with fellows were also asked additional questions to learn more about the process and impact of hosting a fellow.[1] Responses from these interviews were coded into emerging themes to inform the analysis of outcomes and lessons learned, as well as to complete each fellow's individual profile.

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1   See Appendix E for the Pritzker Fellows Interview Protocol

Inaugural Pritzker Fellowship Program Overview

From Fall 2018 until Fall 2020, the inaugural cohort of Pritzker Fellows worked in thirteen communities across the country. These fellows, with their expertise across the fields of pediatric medicine, social work, early education, and mental health services, were selected to lead their community's unique efforts to advance policies and programs focused on increasing the availability of high quality programs and services for infants and toddlers from birth to age three.

This pilot program aimed to build a network of strong leaders nationwide to lead community-based efforts focused on the first three years of life when rapid periods of brain development are critical for a child's success. Fellows were deeply embedded in communities and worked directly with early childhood leaders, local policymakers, and practitioners to create, implement, and sustain ambitious communitywide PN-3 action plans to support the healthy development of their community's youngest children.

The fellows were also a part of a dynamic cohort who learned from one another, as well as other state and national PN-3 leaders, through participation in the program. The program was coordinated and managed by the Sorenson Impact Center.

Program timeline and structure

Following an application process during Spring and Summer 2018, thirteen communities were selected to participate in the inaugural Pritzker Fellows Program. Fellows were welcomed and trained by their communities, Sorenson Impact Center staff, and their respective capacity-building partner between August and November 2018.[2]

The Pritzker Fellows Program followed a three-month program cycle:
- ◇ Month 1: Leadership Learning Cohort Call facilitated by McGlynn Leadership
  - ● Content and Purpose: Cohort connection, collective reflection, and resiliency-building; adoption of the

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2   Due to turnover, two Fellows started in Summer 2019.

appreciative leadership frame and other tools, such as meeting facilitation, for fellows to operationalize in their daily work.

◇ Month 2: Problem-Solving Cohort Call facilitated by Pritzker Fellows
  ● Content and Purpose: Cohort connection and sharing of expertise; collective problem solving around issues raised by fellows; practicing skills acquired in leadership learning calls in a safe environment with peers.
◇ Month 3: One-on-one calls with the Sorenson Impact Center
  ● Content and Purpose: General check-in with SIC program manager about local work and upcoming events; opportunity to learn about resources in the NCIT network connection to other resources within the NCIT network and for other fellows.

In addition to these supports, fellows completed quarterly reflections to document key pieces and milestones of their work. These reflections encouraged fellows to take note of challenges, opportunities, and lessons learned throughout the fellowship.

At the conclusion of the two year program, each fellow completed a capstone project. This project enabled fellows to clearly communicate the impact of their work during their tenure in this position in their respective communities, including any examples of key accomplishments or products that exist as a result of the fellowship. Each fellow's capstone project focused on an important piece of their work to advance PN-3 objectives during the two years in this position. Due to the nature of the varied work between each NCIT community, each capstone project differed based on the local context. Descriptions of each project are found in the fellows' individual profiles included in this report.

CONVENINGS AND RETREATS

Fellows gathered at key moments during the fellowship to learn, reflect, and grow together.[3]

◇ Inaugural Pritzker Fellows Cohort Convening, November 12 - 14, 2018
  ● Chicago, IL
  ● Coordinated by the Sorenson Impact Center and facilitated by McGlynn Leadership
  ● Purpose:
    + Build relationships within the cohort and with capacity-building partners

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3   The capacity-building schedule was not managed within the Pritzker Fellows Program. Fellows received ongoing capacity-building support from the National Association of Counties Research Foundation, the National League of Cities Institute, and the Center for the Study of Social Policy. This support involved additional convenings and site visits throughout the course of the fellowship. SIC regularly liaised with these capacity-building partners to ensure consistency and transparency in the support of each fellow and community.

- + Develop a sense of shared purpose across the fellowship
- + Adopt a systems-level framework the cohort's work
◇ All-Community Convening: Pre-Session Facilitation Training, April 22-23, 2019
  - ● Salt Lake City, UT
  - ● Coordinated by the Sorenson Impact Center and facilitated by McGlynn Leadership
  - ● Purpose:
    - + Continue to foster and build relationships within the cohort and with capacity-building partners
    - + Shift knowledge to practice in learning about meeting design and facilitation
    - + Prepare each fellow to lead small group conversations and coordinated activities around the possibilities for the future of the PN-3 movement
◇ Fellows Retreat (virtual), May 6-7, 2020
  - ● Facilitated by McGlynn Leadership and supported by the Sorenson Impact Center
  - ● Purpose:
    - + Connect with peers and share messages of impact across the cohort
    - + Identify opportunities for transformation and following inner guidance
    - + Vision forward the next phase of the fellowship
◇ Final Thank You event (virtual), August 20, 2020
  - ● Facilitated by the Sorenson Impact Center
  - ● Purpose:
    - + Celebrate and express gratitude for cohort peers and capacity-building partners
    - + Reflect upon what the group has learned through the work led by the fellows, acknowledge the work that is yet to be done, and hear about fellows' next steps as PN-3 leaders

Program investment

Thirteen communities participated in the inaugural Pritzker Fellows Program. Each community received $65,000 to $75,000 per year to support this dedicated staff position. The Pritzker Family Foundation provided up to $890,000 per year to communities, with a total of $1.78 million throughout the duration of the program. Communities were required to provide matching funds during the program, at a rate of 50% during the first year, and 100% during the second year of the program.[4] Local investments totaled $1.47 million in matching funds across 12 communities throughout the duration of the program.

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4   One county identified a local funding source to underwrite their fellow's salary.

Programmatic support

The inaugural Pritzker Fellows Program, funded by the Pritzker Children's Initiative, was supported by partners across organizations, including:

- ◇ Kathy Stohr, Project Manager, J.B. and M.K. Pritzker Family Foundation
- ◇ Elizabeth VanSant-Webb, Project Manager, Sorenson Impact Center
- ◇ Chad Salvadore, Chief Financial Officer, Sorenson Impact Center
- ◇ Maggie McGlynn, President, McGlynn Leadership
- ◇ capacity-building partners include:
  - National Association of Counties Research Foundation: Tracy Steffek, with additional support from Rashida Brown
  - National League of Cities Institute: Jammie Albert, with additional support from Tonja Rucker
  - Center for the Study of Social Policy: Erin Robinson, with additional support from Ngozi Lawal
- ◇ Additional support provided by Sorenson Impact Center staff: Caroline Ross, Allison Nicholson, Kendall Rathunde, Meredith Muller, Fraser Nelson, and Sonya Erickson.

Learnings from the Inaugural Fellowship

Coordination and alignment in PN-3 system-building work takes significant time, concerted effort, and resources. Dedicated staff are able to maintain a pulse on the PN-3 work occurring in the community, across sectors and groups, and drive forward the strategic PN-3 efforts and initiatives of the community.

Systems-level work that bolsters multi-partner initiatives differs from traditional program-level work and dedicated staff advance system-level workstreams by convening key partners, connecting policy agendas, fostering relationships with decision makers at the local and state levels, and building political and public will. In addition, staff in this position can carry forward strategic elements of the initiative such as action planning and unified messaging or communications.

Eleven communities with fellows stated that having a fellow demonstrated the importance of a dedicated position focused on this work. Communities witnessed this in a number of ways as fellows focused on a broad spectrum of work including:

◇ Building community and family relationships;
◇ Tapping into national networks and sharing best practices;
◇ Creating community relationships and buy-in for the work; and
◇ Taking a broadened focus on holistic supports for families with infants and toddlers.

Overall, all thirteen communities said that the work initiated by the fellow will continue. This indicates that regardless of the retention of the fellow or additional dedicated staff positions, the community's work was catalyzed by the support of a Pritzker Fellow for the two years of the program.

It is worth noting that in interviews with communities for the 2020 Assessment, two communities without fellows mentioned that they felt they would have benefitted from a dedicated staff person focused on their PN-3 work. These communities maintained that dedicated staff would have made a crucial difference in achieving their PN-3 goals.

11 communities with fellows agreed that having a fellow demonstrated the importance of a dedicated position focused on this work.

Impact: strengthening the PN-3 field

The inaugural fellows program advanced PN-3 goals using a cohort model, leadership development, and capacity-building at the community level. Fellows and communities noted that the program's approach generated greater awareness and acceptance of these strategies within the PN-3 field as a whole.

Fellows and communities reported that the capacity-building support and cross-community partnerships generated by the program enhanced their community-level PN-3 work. The program's leadership development training and capacity-building support from the National Association of Counties Research Foundation, National League of Cities Institute, and the Center for the Study of Social Policy provided critical opportunities for ongoing learning and professional development.[5] Fellows also reported that the network and cohort model for the program created intentional communities of practice where leaders could connect and share innovative ideas. Fellows benefitted from the opportunity to leverage best practices and approaches in other communities across the country to advance PN-3 work locally.

> *"When I needed support and advice, it was always there… That was a huge part of the success of this fellowship…All that support that was tied around us. There was no way any of us could fail because of that. There was always somebody there to say, 'Have you thought about this?,' 'Have you talked to this person?,' 'What if you did it this way?,' 'Here's some resources that will help you get back on track.'"*

Impact: bolstering community-centric strategies

INCREASING UNDERSTANDING OF PN-3 ISSUES
Over the course of the two-year fellowship, fellows increased awareness of critical PN-3 issues in their communities. Fellows facilitated discussions and educational opportunities resulting in more frequent discussions of PN-3 strategies from an integrated perspective, including:

◇ The brain science and return on investment in the PN-3 years
◇ The importance of Family, Friend, and Neighbor (FFN) Care
◇ The need for holistic systems to support families and parents within communities
◇ Maternal mental health
◇ Root causes and systemic responses to racial disparities

Fellows benefitted from the opportunity to learn from best practices and approaches in other communities across the country to advance their PN-3 work locally.

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5   This finding is supported in the 2019 Assessment where capacity-building supports and leadership development were identified as key to the success of the program.

- ◇ Connections between homelessness and adverse child outcomes
- ◇ Paid family leave and the importance of parent voice
- ◇ Impacts of Covid-19 and its connection to adverse childhood experiences (ACEs)
- ◇ Importance of strategic planning for early childhood
- ◇ Formation of new partnerships, task forces, and relationships with the business community

Fellows used strategic messaging, inclusion of parent voice, and cross-sector relationship-building to effectively shift PN-3 priorities at the local level. As their work progressed, fellows empowered stakeholders to move these issues forward in years to come. All thirteen communities agreed that the work begun by the fellow will continue, with seven communities maintaining the dedicated staffing position filled by the fellow.

> "We always said the fellow belongs to the community, and that was like a passport into areas we might not have always been invited to…. At one point we thought about housing the fellow at the county, we didn't end up doing it, but we wanted that fellow to be able to be anywhere and work in that community and have that trust. And I think we did achieve it."

DEVELOPING COMMUNITY-CENTERED STRATEGIES
Fellows changed the way that their communities implemented PN-3 priorities by designing strategies and processes that centered the experiences and needs of infants, toddlers and their families. As a result, fellows implemented doula programs and perinatal mental health strategies to address racial disparities in maternal and infant mortality and health, Help Me Grow systems, Family Connects programs, and used evidence-based strategies to support the needs of marginalized communities.

> "In facilitating a community-driven process and a co-design process where I was trying not to make decisions myself, … I'm proud that we are now implementing in a way where people feel like they were a part of that and their voice mattered."

> "Now [we are] putting a value on 'lived experience'--having somebody who doesn't work for an agency, but is going to come share about their life, …[by] giving vouchers and honoring their time…. Now before any meetings are started, the people who have that lived experience are invited to the table at the same time with everybody else. There's not a meeting before a meeting….That's something in our community that wasn't there before….We're really showing people that we value their time because they're just as important as the 'professionals' in the community."

All 13 communities agreed that the work begun by the fellow will continue, with seven communities maintaining the dedicated staffing position filled by the fellow.

COORDINATING COVID-19 PANDEMIC RESPONSES

With the onset of the pandemic, fellows called upon their pre-existing partnerships to support local emergency responses. Fellows ensured that their communities' emergency response efforts included a meaningful focus on the needs of infants and toddlers as they emphasized the importance of child care and resource distribution efforts. Fellows integrated PN-3 needs into the crisis response and management efforts, monitored availability of child care through data collection and outreach efforts, partnered with local government officials to distribute CARES dollars, and coordinated distribution efforts for birthing hospitals, new parents, families, and child care providers.

While improved parent engagement and coordinated PN-3 strategies were sorely needed before the pandemic, the pandemic provided the opportunity to test out innovative approaches that can continue to benefit communities beyond the crisis. Fellows identified opportunities to engage families in new ways including through improved communication efforts, connecting outside of 9am-5pm working hours, and implementing virtual family engagement opportunities. Fellows launched task forces to examine critical issues and new approaches to engagement which will continue to benefit communities.

> *"We needed this system in place before, but Covid really gave us the opportunity to expand and show our state agencies as well as our local partners why we need a coordinated system and why we need it to make sure families don't fall through the cracks. [We need to] make sure that even when the crisis is no longer here that all families can benefit from support…[and] know there is a trusted place you can go to [even after the pandemic]."*

ADVANCING RACIAL EQUITY

Fellows effectively advanced racial equity priorities in their communities and organizations. Fellows used CSSP's Parent Manifesto, COFI trainings, the expertise of parents, and the advice of other fellows cohort members to embed racial equity into their PN-3 strategies.

Fellows noted signs of progress toward racial equity including the reorientation of outreach strategies to connect with families of color, equity assessments to further uncover practices that harm children and families of color, and acknowledgment of the need for the child care workforce to reflect the diversity of young children in their care.

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Fellows ensured that their communities' pandemic response efforts included a meaningful focus on PN-3.

Impact: devleoping PN-3 leaders

OPPORTUNITIES TO DEEPEN EXPERTISE AND CONNECT WITH OTHER PN-3 LEADERS

Fellows developed their expertise and leadership capacity while building on their prior professional experiences. Those new to the early childhood field brought interdisciplinary thinking to the field, contributing their lived experiences and backgrounds in fields such as healthcare, racial justice, project management, brain science, evidence-based practice, and women's health.

During the fellowship, fellows developed skills in grant writing, community engagement and facilitation, and navigation of government systems and regulations, among others. The skills and relationships developed as part of this program have built a strong cohort of PN-3 leaders who can continue to serve the movement for years to come.[6]

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6   To learn more about fellows' next steps, see each fellow's individual profile.

Supporting Future PN-3 Leaders

Drawing on the learnings from the first cohort of fellows, the following recommendations are intended to guide the development and support of future PN-3 leaders.

Recommendations for future fellows

The network and resources provided by the program proved meaningful and useful for fellows. The trainings, webinars, and in-person learning and networking opportunities provided crucial supports to advance PN-3 priorities. Going forward, the program can continue to support fellows to access the program's resources, cultivate relationships with fellows in other communities, and seize opportunities for learning between communities.

Fellows acknowledged that the long-term nature of this work can prove challenging, and progress is often difficult to measure. Fellows emphasized the importance of self-care, reflection, and the importance of connecting with local networks to support wellbeing.

Recommendations for community host organizations

Host organizations play a crucial role in leveraging the expertise of the fellow. To best support their fellow, host organizations should set clear expectations about the fellow's level of authority, responsibilities, and the support available within the organization including an office, desk, and supplies. Staffing and leadership transitions can affect the fellow's ability to advance PN-3 priorities, and host organizations can provide guidance and support during these times. Host organizations can identify multi-year funding to support dedicated staff to demonstrate their vision and commitment to PN-3 strategies.

Within the community, host organizations can align the fellow's work with the organization's goals and accelerate the fellow's efforts by making introductions to key stakeholders, amplifying their work, and helping fellows navigate the community's early childhood landscape.

The long-term nature of systems-building work can prove challenging, and progress is often difficult to measure.

Recommendations for capacity-building partners

Fellows found the support of capacity-building partners to be key to advancing their PN-3 priorities. In particular, fellows appreciated the tools provided for policy development, advocacy, coalition-building, and strategic planning. Fellows benefitted from tailored support and training opportunities that were practical and evidence-based.

Capacity-building partners provided a unique, external, perspective grounded in deep relationships with the communities and fellows. Their support added credibility and depth to fellows' work. At times, the pace and amount of information could be challenging for fellows and fellows benefited from additional time to reflect and integrate the recommendations of partners.

Recommendations for funders and the field

Philanthropy and government play a key role in supporting fellows by investing in the potential of leaders to create change that is responsive to their local context. The support of a funder can lend credibility to local efforts and increase their odds of forming key partnerships necessary for success. Funders can serve as a stabilizing force, transferring institutional knowledge during staff and leadership turnover. Funders elevate the quality of policy and programs by prioritizing data and evidence and encouraging communities to adopt this approach.

While the majority (seven) communities stated the fellow will be retained in some capacity and three communities had already hired or planned to hire one or more new dedicated staff focused on PN-3, three communities already had additional dedicated staff focused on PN-3 and three communities were unsure of their ability or unable to retain the dedicated staff position. Funders can proactively initiate conversations with communities about sustainability of efforts beyond the current funding cycle.

Capacity-building partner support was key to advancing fellows' PN-3 priorities.

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Conclusion

The inaugural cohort of the Pritzker Fellows program demonstrated the value of dedicated staff to advance PN-3 issues at the community level and contributed to important conversations at the national level. This program led to important progress in community-level strategies to address PN-3 issues in everyday contexts as well as during times of crisis. Finally, the program provided fellows with practical tools to help guide their professional trajectories to become effective PN-3 leaders for years to come.

Appendix A: 2020 NCIT Community Assessment Objectives

The primary objectives of the 2020 Assessment were to:

- Estimate the number of infants and toddlers reached by NCIT communities in 2020;
- Assess NCIT community progress toward current and future goals;
- Understand community-based efforts to address Covid-19 and structural racism, and strategies that contributed toward resilient and equitable early childhood systems during crisis;
- Provide cross-community analyses on the catalytic impact of PN-3 efforts across NCIT communities;
- Identify public, private, and philanthropic investments that advanced PN-3 goals within NCIT communities;
- Document connections between communities' work and state-level PN-3 strategies;
- Test the assumptions made in the 2019 Sustainability Document as part of the 2019 NCIT Community Strategy Assessment; and
- Illuminate the most helpful and engaging aspects of the NCIT network.

SIC co-created its methodology and protocols with NCIT partners to ensure usability and relevance in assessment findings for PCI, NCIT movement-building partners, and communities, including:

- Review of key learnings from the 2019 NCIT Assessment to gather preliminary signals and baseline information;
- Engagement in framing discussions to solicit feedback from capacity-building partners;
- Solicitation of feedback from communities about what products or information from the 2020 Assessment would be helpful for them;
- Facilitation of discussions to inquire about all available qualitative and quantitative data collected from communities in 2020 that could be incorporated in the assessment analysis; and
- Iterative engagement with PCI and the BUILD Initiative to share findings and solicit feedback as guidance for further analysis to identify pertinent assessment learnings.

Appendix B: 2020 NCIT Preliminary Community Survey

Sorenson Impact Center administered a survey in June 2020 to the 28 NCIT communities to better understand how Covid-19 had impacted PN-3 initiatives in the beginning months of the pandemic. The objectives of the survey were:

Primary objectives of the survey:
- Identify community's PN-3 priorities at the start of 2020;
- Understand how those have changed due to Covid-19.

Secondary objectives of the survey:
- Identify what support communities have found most useful in responding successfully to Covid-19 and addressing their communities' PN-3 concerns;
- Identify how communities are connected to and aligned with state PN-3 priorities;
- Identify the specific individual aspects in each community we should be tracking.

Survey Results from Selected Questions

Question: Please indicate to what extent you agree or disagree with the following statements about how your participation in the NCIT network in 2019 influenced your PN-3 response to Covid-19.
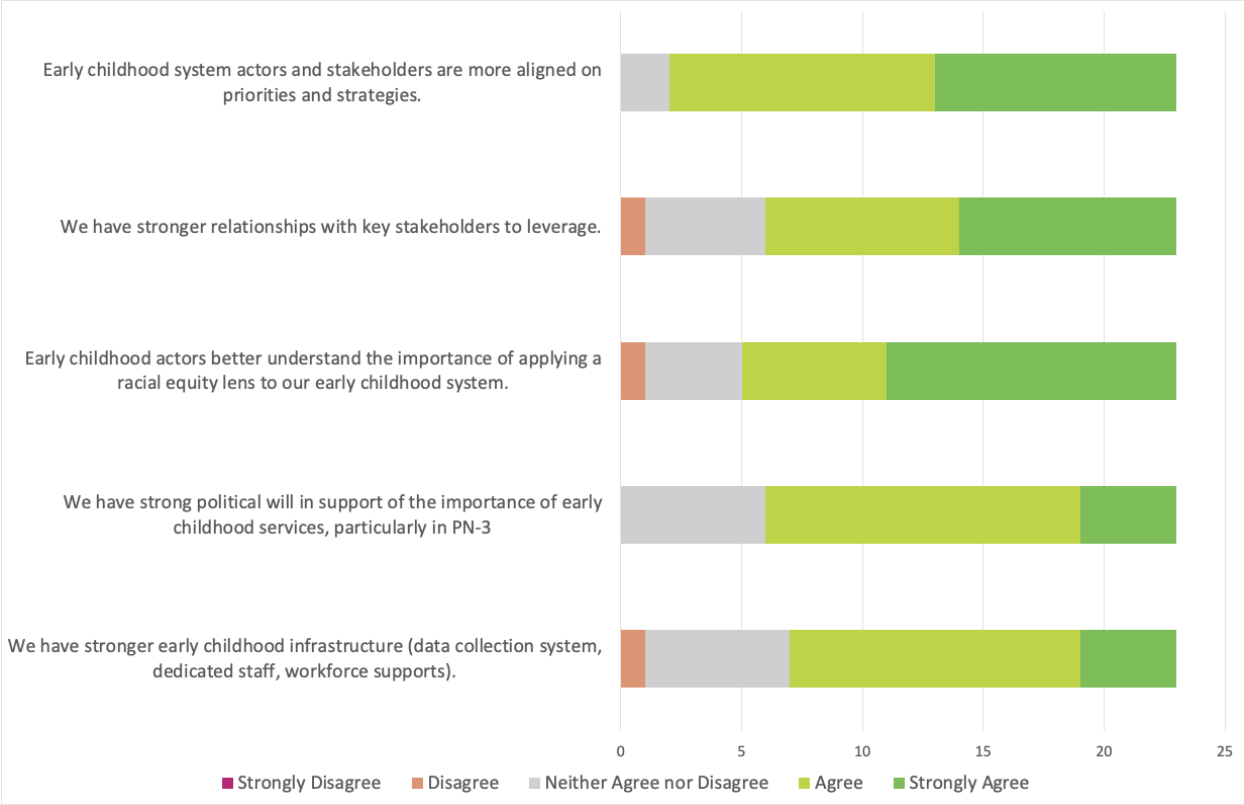
Question: Please indicate the extent to which you have found the following resources helpful in regards to the support your community has benefited from in the last 3-4 months
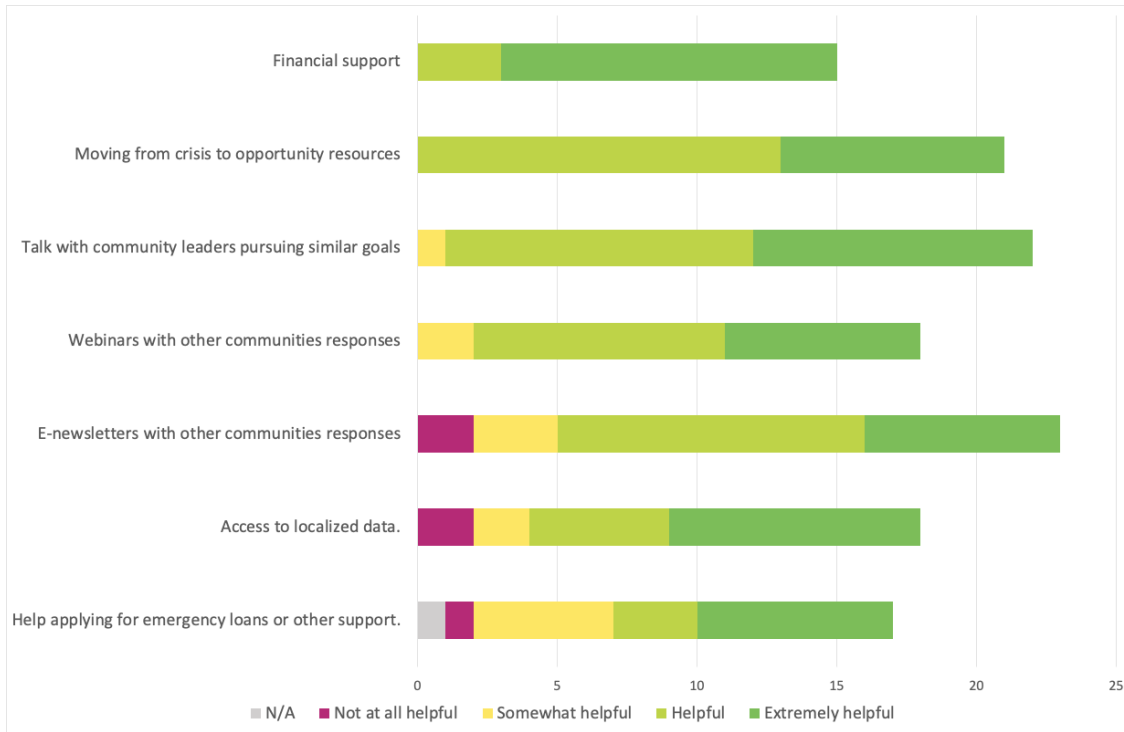
Question: Please indicate the degree to which you agree or disagree with the following statements regarding early childhood system components in your community in the last 3-4 months.
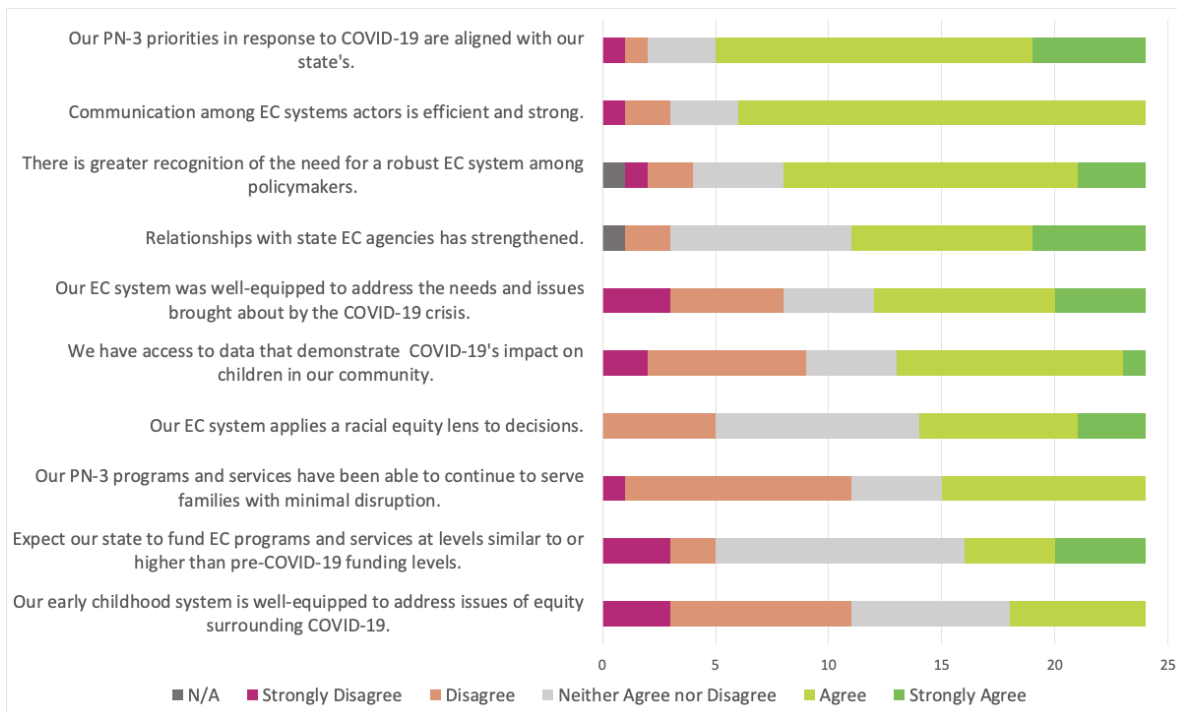
NCIT COMMUNITY SURVEY: 2020 COVID-19 IMPACTS

As a member community of the National Collaborative for Infants and Toddlers (NCIT) 2019 cohort, we thank you for taking the time to share insights into your communities in light of Covid-19. We understand this is a very busy and difficult time, and your work serving infants, toddlers, and their families has never been more important or needed.

The J.B. and M.K. Pritzker Foundation is interested to know about the challenges and opportunities faced by communities during this unprecedented time. On behalf of the Foundation and its partners, Sorenson Impact Center is collecting information from all 28 NCIT communities to better understand how your PN-3 work may have been impacted over the past six months. This survey should take no longer than 10 minutes.

1. Which community are you from?
    a. [Drop-down list of the 28 NCIT communities]

2. What is your agency type? [Select one]
    a. City or county health agency
    b. Other local government agency
    c. Community-based non-profit
    d. Local early childhood collaborative, initiative, or partnership
    e. Other: _____

3. How have your prenatal-to-three priorities changed in light of the Covid-19 pandemic?
    a. They have not changed, and we are devoting the same amount of resources and energy to our priorities.
    b. They have not changed, but we are not able to spend the same amount of resources and energy on them due to new priorities presented from Covid-19. Please explain: _____
    c. They have not changed, but we are not able to actively work towards them at this time. Please explain: _____
    d. Our priorities have shifted. Please explain: _____

4. How did Covid-19 affect funding for your PN-3 initiatives?
    a. Our funds remained the same.
    b. Our funds decreased.
    c. Our funds increased.
    d. Our funds increased for some areas of our work and decreased for other areas of our work.
    e. Other: _____

5. How did Covid-19 affect your staffing resources?
    a. Our staffing was not affected.

b. Personnel and/or staff time was re-allocated away from PN-3 initiatives.

c. More personnel and/or staff time was re-allocated to PN-3 initiatives.

d. Other: _____

6. Please indicate to what extent you agree or disagree with the following statements about how your participation in the NCIT network in 2019 influenced your PN-3 response to Covid-19.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
We have stronger relationships with key stakeholders to leverage.						
Our local early childhood system actors and stakeholders are more aligned on priorities and strategies to meet community needs.						
Our community has strong political will in support of the importance of early childhood services, particularly in PN-3.						
We have a stronger early childhood infrastructure (e.g., data collection system, dedicated staff for coordination efforts, workforce supports).						
Early childhood actors better understand the importance of applying a racial equity lens to our early childhood system.						

7. Please indicate the extent to which you have found the following resources helpful in regards to the support your community has benefited from in the last 3-4 months.

	Not at all Helpful	Somewhat Helpful	Helpful	Extremely Helpful	N/A
Financial support.					

Information on how other communities are responding to Covid-19 via e-newsletters.					
Information on how other communities are responding to Covid-19 via webinars.					
Opportunities to talk with community leaders pursuing goals similar to ours.					
Resources regarding moving from crisis to opportunity.					
Support or guidance in applying for emergency loans or other Covid-related support.					
Access to localized data.					

8. Please indicate the degree to which you agree or disagree with the following statements regarding early childhood system components in your community in the last 3-4 months.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	N/A
Our relationship with our state early childhood agencies has strengthened due to Covid-19.						
Our local prenatal-to-three priorities in response to Covid-19 are aligned with our state's early childhood priorities in response to Covid-19.						
We have access to data that demonstrate how Covid-19 is impacting children in our community.						
With the onset of Covid-19, there is greater recognition of the need for a robust early						

childhood system among policymakers.					
During this time of Covid-19, our prenatal-to-three programs and services have been able to continue to serve families with minimal disruption.					
Communication among early childhood systems actors is efficient and strong.					
Our early childhood system was well-equipped to address the needs and issues brought about by the Covid-19 crisis.					
Our early childhood system is well-equipped to address issues of equity surrounding Covid-19.					
Our early childhood system applies a racial equity lens to decisions.					
We expect our state to fund early childhood programs and services, such as those in our prenatal-to-three initiatives, at levels similar to or higher than pre-Covid-19 funding levels.					

9. Describe your current or emerging race equity goals in your PN-3 initiative that prepare you to address systemic racism and historical inequities in your community. [long form]

10. Describe your community's emergency response to Covid-19 as it relates to early childhood. [long form]

Appendix C: Sample Data Collection Form

2020 Year-end Data Collection
October 2020 | DRAFT

Descriptive text/instructions:
On behalf of the Pritzker Children's Initiative (PCI), Sorenson Impact Center (SIC) would like to thank you for taking the time to share updates on your community's prenatal-to-three work during the past calendar year.

This form is intended to collect updates on your community's PN-3 agenda, and infants and toddlers you served in your community in 2020. The information you provide will accompany the information and stories collected during your interview with SIC this fall, both of which will be used to better understand key drivers of success, lessons learned, and sustainability of your PN-3 initiatives.

We understand 2020 has been a difficult year in many respects, affecting every aspect of communities. Our objective is to understand the arc of communities' PN-3 work from the end of 2019 to where the work lies now, and its direction moving forward. It is okay if your goals have changed from the end of 2019 to now, or anytime in between.

OVERVIEW

Organizational or Prenatal-to-three Collaborative name:

Key partners involved in your prenatal-to-three work:

Mission and vision for infants, toddlers, and their families in your community:

Mission
Vision

SECTION 1: PN-3 AGENDA – 2019 Follow-up

In your 2019 action plan, you stated your community was working towards:	Did you work toward these same priorities in 2020?	
	Yes	No
1. *[priority here]*		
2. *[priority here]*		

If YES, please give an update on these priorities below.

#1: [priority here]

In 2019's year-end data collection form, your community reported the following numbers:
- *(number) estimated 0-3 year olds (method)*
- *(number) estimated 0-3 year olds (method)*

Do you have data that shows your community's progress on this PN-3 priority? **The data does not have to be the same data or correspond with the same indicators you reported in 2019**. If so, please **disaggregate the data** (by race and ethnicity, or socio-economic status, etc.) to the best of your ability.

Space for 2020 numbers here, disaggregated if possible
Space for 2020 numbers here, disaggregated if possible

(Optional) If you'd like, please provide any additional details on this focus area.

#2: [priority here]
Mark the box that describes the most up to date status of this priority at the end of 2020.

Planning	In process	Advanced Implementation	Other (please specify)

(Optional) If you'd like, please provide any additional details on this focus area.

SECTION 2: PN-3 AGENDA – 2020 and new priorities

If your priorities changed or increased in 2020, what were your priorities? (Please add rows as necessary.)

New Priority #1	
New Priority #2	

Do you have data that shows your community's progress on this PN-3 priority? It **does not have to be the same data you reported in 2019**. Please **disaggregate the data** (by race and ethnicity, or socio-economic status, etc.) to the best of your ability.

New Priority #1	*Space for 2020 numbers here, disaggregated if possible*
New Priority #2	*Space for 2020 numbers here, disaggregated if possible*

In addition to the data already provided, please list the additional ways you were able to serve infants and toddlers, such as through diaper banks, virtual home visits, educational developmental campaigns to name a few examples.
Please **disaggregate the data** (by race and ethnicity, or socio-economic status, etc.) to the best of your ability.
Please do not duplicate data listed previously in this form.

Number served	By what method were they served?
(ex: 203)	*(ex: Diaper bank interactions)*

DATA SUPPORT

If you are unable to disaggregate data provided in this form (by race/ethnicity, socio-economic status, or other), what would you need to be able to do so?

SECTION 3: FUNDING

The Pritzker Children's Initiative continues to be interested in additional funding that communities have secured to further PN-3 efforts. Please share any changes in funding, either increases or decreases, your community received in the past year for your PN-3 efforts. This may include funds from your state, county, private dollars, grants, or other sources.

Amount	Source	Years funded	Intended use of funds
Ex: $25,000	[County name]	2020-2022	Expand number of home visitors

SECTION 4: EARLY CHILDHOOD SYSTEMS

When Covid-19 hit, our community had a strong foundation to address the crisis in a collaborative way, and meet the needs of infants, toddlers, and families.

    a. Strongly disagree
    b. Disagree
    c. Agree
    d. Strongly agree

Appendix D: Community Interview Protocol

2020 NCIT Community Interview Overview

The following are community interview objectives and interview questions.
This document may evolve based on feedback from PCI.

In 2020, Sorenson Impact Center (SIC or the Center) will analyze and document communities' continued PN-3 efforts and outcomes, as catalyzed by the investments of the Pritzker Children's Initiative (PCI). Given the onset of the unprecedented global pandemic, SIC will consider communities' progress both in light of and in spite of Covid-19.

The interviews between SIC and each community will take place in late October and early November 2020. SIC will perform qualitative analysis to discover cross-community learnings, and also to inform communities' individual Community Update pages. Interviews will be one-hour in length for all communities that did not have a funded Pritzker Fellow position. For communities that had a funded Pritzker Fellow position, an extra 15 minutes will be added to the interview to allow for Fellows-related questions. To complement the objectives described in the 2020 Assessment Overview document, the **proposed objectives** for these community interviews include:

- Update on communities' 2019 initiatives and priorities, and how those have evolved in light of Covid-19;
- Discover innovative strategies for reaching infants, toddlers and their families, and advancing communities' PN-3 priorities;
- Better understand NCIT's catalytic impact on communities;
- Collect narrative context to accompany communities year-end data collection form;
- Analyze cross-community drivers of success and innovation;
- Learn more about communities sustainability of their PN-3 initiatives amidst a pandemic; and
- Provide the opportunity for communities to represent their work, frame their highlights, and direction of PN-3 work moving forward.

Possible interview questions include:

Question	Assessment Objective
1. As part of your 2019 NCIT participation, your community set pretty specific goals. Tell us about how your PN-3 work has evolved from 2019, and if you're still focused on the same types of issues and goals?	Update from 2019

2. Did you make progress towards or achieve your goals from the beginning of 2020? a. If not, have your priorities changed?	Future PN-3 work

3. In what **new ways** were you able to reach infants, toddlers, and their families in your community this year?
    a. Follow-up prompt if needed: Were there any tools or resources that were particularly beneficial in reaching infants and toddlers this year?
    b. What in your community's crisis response worked well? What presented challenges?
	Estimate reach, Drivers of success

4. In what ways did your involvement in the NCIT prepare your community to address the challenges you've faced in 2020 and beyond?	NCIT catalytic impact, Drivers of success
5. In what ways have you worked with your state on your PN-3 initiatives? (Provide examples)	State connections
6. How have you incorporated an equity focus in your PN-3 initiatives and strategies? (Provide examples)	Equity
7. Looking back over the past two years, what were your greatest challenges in building early childhood systems and supports and what has sustained your initiatives in spite of these challenges? a. How have changes in leadership affected your PN-3 work? (This could be organizational, local elected officials, partners' leadership changes, etc.)	Sustainability
8. What early childhood systems or programs were you able to maintain this past year, in spite of the crises? a. Follow-up prompt if needed: What are the lasting impacts of this crisis on your early childhood system?	Systems building progress, Success stories

9. What funding did your community receive for PN-3 initiatives this past year?
    a. What of this funding is private or public funds? (exact dollar amounts and sources of funds)
    b. Will these funds be used for sustaining or expanding existing PN-3 work, or implementing new PN-3 initiatives?
	Sustainability, NCIT catalytic impact

10. What do you see as the greatest challenges and opportunities for infants, toddlers, and their families in the next few years?	Future PN-3 work
11. Is there anything else you like us to know about your PN-3 initiatives? a. What are you most proud of from this past year?	Community-framed work and highlights

For the organizations that hosted a Pritzker Fellow, **additional interview questions** include:

Question	Fellows Reflection Objective
1. What support do PN-3 leaders need to make the greatest impact?	Collect feedback to inform future support of community PN-3 leaders
2. How has your community been impacted by the work of the Pritzker Fellow?	Provide more context to communities' local PN-3 stories
3. What did you learn from having dedicated PN-3 staff, especially if you did not have this position before?	Understand the impact of dedicated staff
For communities' where the Fellow is not continuing: 4. What changes have you noticed in your PN-3 operations since the end of the Pritzker Fellowship? 5. Do you plan to have a dedicated staff for PN-3 moving forward?	Provide more context to communities' local PN-3 stories
6. What have we not asked about that you would like Sorenson and the Foundation to know about the impact of a Pritzker Fellow on your community?	Fellows program commemoration

Appendix E: Pritzker Fellows Interview Protocol

PRITZKER FELLOWS REFLECTION OVERVIEW AND INTERVIEW PROTOCOL

The inaugural Pritzker Fellows Program will come to an end in the fall of 2020, beginning with the first of the Fellows' contracts ending in August. Communities were offered a no-cost extension of their Fellows' contracts until October 31st, 2020 if they were scheduled to end before that deadline. To document the progress, accomplishments, and learnings of each Fellow and their community, Sorenson Impact Center (SIC) will produce a Pritzker Fellows Reflection report that will be both a stand-alone document and included as a section of the 2020 NCIT Community Strategy Assessment.

OVERVIEW:
SIC will be conducting exit interviews with each of the Fellows. These interviews will serve as a time to commemorate the time spent as a Pritzker Fellow and collect data to inform the Fellows Reflection. The **objectives** of the Reflection include:
- Commemorate the end of the Fellowship by allowing SIC and the Foundation to:
  - thank Fellows for their time and dedication to the work, and sharing with them they are valued;
  - share how the phrase "once a Fellow, always a Fellow" looks in practice post-Fellowship;
  - provide a space for the Fellows to share reflections and achieve closure on their Fellowship; and
  - share any applicable next steps with them;
- Understand specific components of the Fellows Program that made it successful;
- Evaluate the program's impact on individual and PN-3 leadership development;
- Collect feedback to inform future support of community PN-3 leaders;
- Provide more context in assessing communities' PN-3 stories and progress;
- Better understand the impact of dedicated staff during a crisis, particularly as it relates to Covid-19 responses, racial equity, and anti-racism work; and
- Better understand how contractual versus organizational employment arrangements affect Fellows' working conditions.

These interviews will take place towards the end of the Fellow's contract, so that each Fellow is interviewed close to their contract end-date.

Below are **interview questions** aimed at addressing the objectives of the Pritzker Fellows Reflection listed above.

Question	Objective
1. How can PN-3 leaders in communities be best supported?	Collect feedback to inform future support of community PN-3 leaders
2. What areas of growth have you seen in your community in regards to PN-3?	Provide more context to communities' local PN-3 stories
3. In what ways did you and your organization pivot to address the immediate needs of families in children in the face of Covid-19? *OR* Describe your organization's short-term and long-term response to Covid-19. What was your role in those responses?	Understand the impact of dedicated staff during a crisis
4. Over the past two years, how has your community's focus on racial equity in early childhood changed?	Impact of Fellowship on racial equity efforts in communities
5. Within your existing PN-3 structure, whose voices are newly included or newly elevated since you began your work?	Impact of Fellowship on racial equity efforts in communities
6. In what ways did your specific position employment arrangement allow for a successful Fellowship?	Better understand how employment arrangements affect Fellows' working conditions
7. What is your biggest learning from your time as a Fellow, both personally and professionally?	Evaluate program impact on individual and PN-3 leadership development
8. What are you most proud of during your Fellowship?	Evaluate program impact on individual and PN-3 leadership development; Collect feedback to inform future Fellows programs
9. What do you see as your biggest impact from your time as a Fellow?	Evaluate program impact on individual and PN-3 leadership development; Provide more context to communities' local PN-3 stories
10. What are your next steps post-Fellowship? a. How do you see yourself contributing to the PN-3 field moving forward?	Evaluate program impact on individual and PN-3 leadership development; Collect feedback to inform future Fellows programs; and Fellows program commemoration

11. What do you need to feel closure as the Fellows Program comes to an end?	Fellows program commemoration
12. What have we not asked about that you would like Sorenson and the Foundation to know about your time as a Fellow?	Fellows program commemoration

STRUCTURE

The Fellows Reflection will be both a stand-alone document and subsection of the overall 2020 NCIT Assessment product. The Reflection will begin with an introduction that provides background of the inaugural Pritzker Fellows Program and context for the subsequent portions of the document: themes from Pritzker Fellows interviews, an interview with Fellows Program leadership development support, Maggie McGlynn, and the Fellows' capstone projects. The Reflection will also include a summary of Maggie McGlynn's contributions to the Fellows Program over the course of the two years.