PDG Evaluation Summary

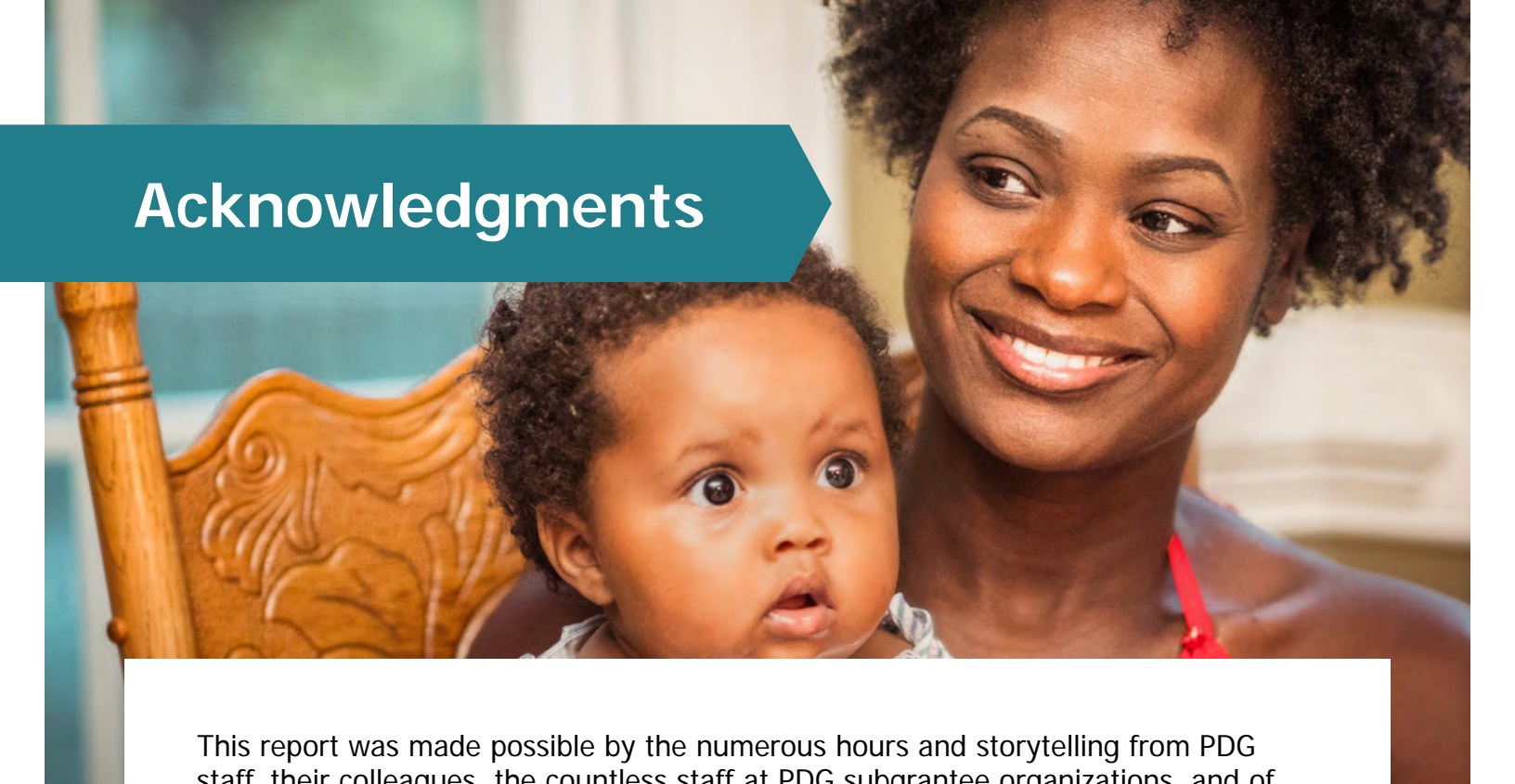**2022 FINDINGS**

CONTENTS

Acknowledgments

This report was made possible by the numerous hours and storytelling from PDG staff, their colleagues, the countless staff at PDG subgrantee organizations, and of course, Minnesota families with young children. Thank you for your openness to share and eagerness to make Minnesota better. We would like to especially thank our Evaluation Advisory Table, made up of extraordinary women, professionals, advocates, and moms from across the state who contributed their expertise and perspective to this evaluation.

A special acknowledgment to our School Readiness Consulting counterparts and their utmost grace and professionalism.

In addition, we would like to extend special thanks to our Improve Group and Child Trends colleagues who provided insights and expertise during the development of the evaluation design and this report, and who contributed to the development (and translation) of the protocols, data collection activities, and analysis. They include Improve Group colleagues and consultants, Moira Gaidzanwa, Kia Her, Zabat Awed, Ozen Guven, and Miraf Kebede, and Child Trends colleagues, Danielle Hegseth, Elizabeth Reddington, Rowan Hilty, Jackson Fojut, Hannah Wodrich, Dayne Ornelas Gonzalez, and Pilar Stoeppelwerth.

About the Minnesota Preschool Development Grant (PDG)

The Minnesota Department of Education applied for and received a three-year $26.7 million implementation grant (also known as a Renewal Grant) in December 2019 to strengthen services for Minnesota pregnant or parenting families with children five years and younger. Minnesota's PDG work is a partnership of the departments of Education, Health, and Human Services, as well as the Children's Cabinet. They seek to achieve the following vision: "By focusing on children facing racial, geographic, and economic inequities, all children in Minnesota will thrive within their families and communities."

The grant centers families through a variety of programs and funding streams. The flagship programs (some referenced in Figure 1) most referenced in this evaluation are:

Figure 1. Visual representation of the main PDG programs
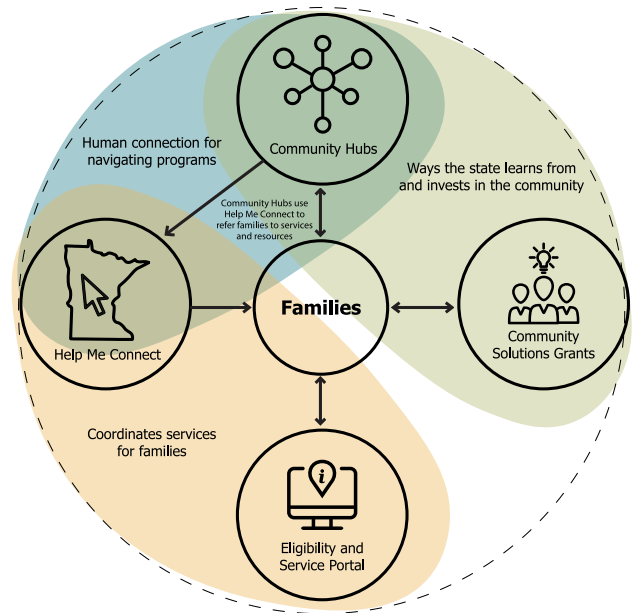
- **Community Resource Hubs**. Thirteen geographically dispersed Hubs that help families with local in-person navigation support, connecting to their network of partner organizations to support families.

- **Community Solutions Grants**. A fund for community-based organizations to support community-based strategies to address community-identified challenges.

- **Help Me Connect**. An online navigator that offers up-to-date information about resources and services closest to where a family lives.

- **Bridge to Benefits**. An electronic assessment tool that helps families identify the services for which they may be eligible.

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Evaluation overview

The evaluation used a culturally responsive and equitable evaluation approach. The following four evaluation questions guided the study in 2022:

1. How well are we doing the work?
2. What were the barriers and enablers that made the difference between successful and disappointing implementation and outcomes?
3. What was learned about how and why change occurred?
4. Who is better off as a result of PDG activities and in what ways?

We conducted primary and secondary data collection using the following sources:

Table 1. Methods and Sources

METHOD	SOURCE
Interviews	Project and agency leads, agency directors, internal state partner staff (n=28)
Workshops (n=3)	Project and agency leads (n=18)
Focus Groups	Families/parents (n=44), subgrantee staff members (n=23)
Document Review	PDG internal documents, memos, reports
Subgrantee/program administrative data analysis	Community Resource Hubs quarterly reporting data, Help Me Connect user analytics

We relied on two main frameworks to guide analysis: the **PDG Guiding Principles** and **The Water of Systems Change**. Each supported analysis of an evaluation question (evaluation questions 1 and 3, respectively).

Findings

Several overarching themes—collaboration, equity, complexity, flexibility and innovation, context, and outcomes for families—emerged across the answers to the evaluation questions. We list the findings below as they relate to the theme. We also note the report chapter where they are described in greater detail to provide context and a section reference.
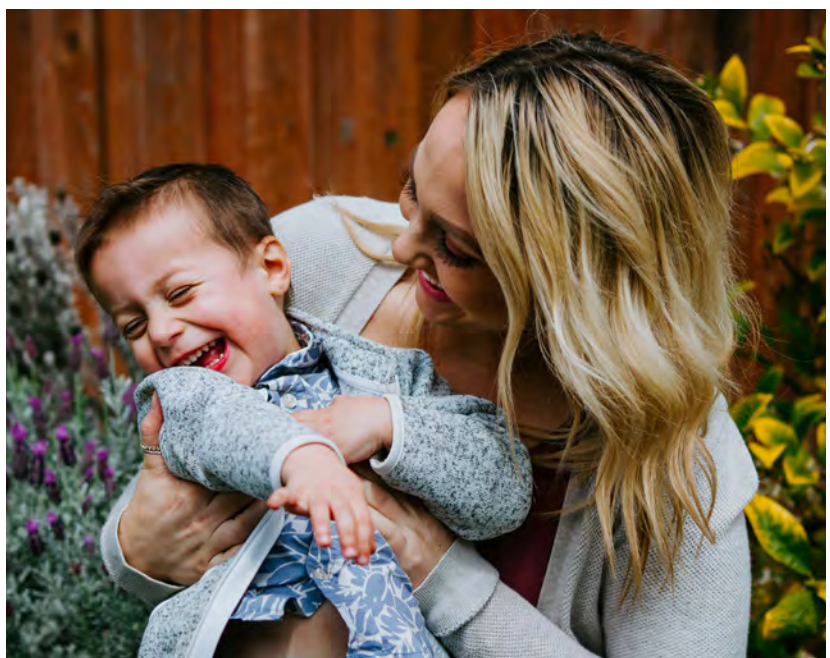
Collaboration

PDG is an exemplar for collaborative practices that lead to changed systems. Relationships across agencies and with community organizations were centered and cultivated an emerging culture of equity and family-centered approaches.

Chapter 1

The guiding principle of **interagency collaboration** was implemented well to excellently. Examples of the principle include internal practices at the state, such as interagency meetings, planning, and communication; better collaboration between state staff; and feedback loops with subgrantees.

Chapter 2

PDG funding has allowed for **dedicated staff and staff time** for collaboration and relationship-building, which is vital for successful interagency collaboration.

Relationship-building and responsive, flexible support from the state, as well as the grant's **community-oriented approach**, have contributed to more mutually beneficial partnerships between the state and subgrantees.

Bureaucratic structures and different priorities, practices, and policies across agencies have **impeded interagency collaboration** and innovation, in particular hindering technical work with shared resources.

Chapter 3

Centering interagency collaboration in state grant processes **helps improve community agencies' access to grant funding** and support.

Coordinating eligibility and streamlined access for families **requires massive financial investment and IT expertise**.

PDG's establishment of **regular and intentional space to collaborate** has helped to support relationships and **connection building between the state and subgrantees** and among subgrantees.

PDG has challenged traditional mental models of siloed, program-specific support to communities through its **interagency agreements and promotion of interagency collaboration**.

Equity

PDG demonstrated widespread commitment to racial and geographic equity through intentional design of funded work.

Chapter 1

The guiding principle of **racial equity** was implemented well. Examples of the principle include Community Solutions funding priorities, prioritization of work with Tribal governments and agencies, the Indigenous evaluation, intentional feedback loops with subgrantees, and translation of program materials.

The guiding principle of **geographic responsiveness** was implemented well. Examples of the principle include distribution of grant funding, improved access to information about local services, and partnerships with local organizations to establish Community Resource Hubs across the state.

The guiding principle of **belonging and inclusion** was implemented well. Examples of the principle include Community Solutions funding priorities, grantee learning communities, flexible grantmaking, the Indigenous evaluation, and programs to diversify the early childhood workforce.

Chapter 3

PDG has shifted state mental models from **"family beneficiaries" to "family partners."**

Centering interagency collaboration in state grant processes helps **improve new community agencies' access to grant funding and support.**

The combination of **increasing access to financial resources and subgrantee-led design** of what to do with those resources creates the conditions for shifting state systems toward greater equity.

The Community Solutions Advisory Council has improved power dynamics between the state and communities due to **shared decision-making in the RFP design and community grantees selection**.

Despite PDG implementing several practices for the state to share power with communities, staff recognize that **more work and time is needed to fundamentally change state culture** and practice.

Just as the state is shifting the power of program design to local organizations, **subgrantees are shifting power to families** who are experts about their own experiences.

By focusing on the Whole Family System, PDG practices and funding worked within the complex state system to start shifting how communities are served. Navigating the complexity was necessary though not without internal challenges

Chapter 1

The **whole family system** guiding principle was implemented well to excellently. Examples of the principle include grant structure (PDG lead agencies represent different aspects of a family's life), parent and caregiver network, and Community Solutions.

The guiding principle of **intersectionality** was implemented poorly. State staff had few examples of the ways PDG design and implementation attended to children and families' intersectional identities and varying experiences. From leadership, examples of the principle include investments and training around early childhood mental health services and implementers' approach toward the complex early childhood system.

Chapter 2

The **grant's complexity created the necessary space for a whole family system** approach that includes the many aspects of and players within the early childhood and family systems.

While critical, **grant complexity has also impeded internal communication** and collaboration and made it more difficult to fully understand PDG and its outcomes.

Flexibility and innovation

Using families first as a guiding star, PDG staff and partners demonstrated the possibilities for finding innovation and flexibility in programs, funding, and collaboration.

Chapter 2

Funding flexibility has allowed the state and subgrantees to carry out the work despite the pandemic and highlighted opportunities for shifting institutionalized state practices to prioritize equity and community.

Staff with a variety of expertise, **learning mindsets**, and interest in innovation and collaboration have **contributed to implementation** and identified new ways of working. Supportive leadership has made this possible.

Chapter 3

Flexibility in policies has supported PDG's ability to be **responsive and adaptable to the current environment** and needs of the communities served.

PDG staff members' mental model—a belief that bureaucracy can change—**has helped to push** project work forward in the face of complex systems and bureaucratic change.

Context

The environment in which PDG implemented work impacted what was accomplished, both supporting and challenging staff.

Chapter 2

The governor's focus on children and family issues and the subsequent support of the Children's Cabinet, coupled with the pandemic heightening cultural awareness of the needs of children and families, has **contributed to prioritization of PDG work**.

Although the state and subgrantees have implemented much of the PDG work successfully **despite COVID-19, pandemic response limited capacity**, slowed progress, and minimized some hoped-for outcomes.

Despite PDG's significant resource investment**, staff capacity remains a challenge**, in part due to the pandemic.

Families accessing the two flagship PDG programs provide preliminary confirmation that PDG efforts are on track in the many years to come to advance equity and support families to thrive.

Community Resource Hubs and Community Solutions **grantees improved the lives of families** in Minnesota.

Organizations were **easy for families to access**.

For the most part, families felt that **services** from local PDG-funded organizations **supported families' backgrounds** (such as their race/ethnicity or family structure).

Families still have frustrations with programs and services.

More service providers, agency staff, and state staff who identify as **Black, Indigenous, and People of Color (BIPOC) are still needed**.

Families have suggestions for state and local leaders to improve families' experiences with early childhood-related services.

Recommendations

1. Prioritize shifting mindsets to **recognize community as a partner** rather than a beneficiary.
2. **Fully staff the work.**
3. **Lean into complexity and the connection-building** required to create systems change.
4. Be willing to **work within bureaucracy** in order to find opportunities for flexibility.
5. **Systematize collaboration** in order to support interagency strategic priorities.
6. Expand **communications pathways** to engage more person-to-person connections.
7. Support **case management software** investment among local organizations.
8. Ensure **categorical eligibility criteria** are designed to be implemented by relevant departments.
9. Invest in a centralized state grants management infrastructure to create a **"common application"** and flexible reporting expectations for grantees.
10. Consider **opportunities for efficiencies in contracting and procurement** with local community organizations and agencies.

Terms used in the report

Bridge to Benefits: An initiative by Children's Defense Fund-Minnesota that provides a common application and screens families for public benefit eligibility.

Community Resource Hubs: A system of 13 geographically dispersed community-based partnerships that help families with local in-person navigation support. Hubs make it easier for families to get what they need, increase access to services, and grow community engagement and support community-developed solutions.

Community Solutions for Healthy Child Development: A grant program that seeks to fund community-driven solutions to improve child development outcomes, reduce racial disparities in children's health and development, and promote racial and geographic equity. Community Solutions grantees include community-based organizations that serve Communities of Color, immigrants, and people with disabilities, as well as American Indian Tribes and community organizations.

Community Solutions Advisory Council: A council of members from communities across Minnesota that advises the Minnesota Department of Health on the Community Solutions grant program.

Evaluation Advisory Table: An Advisory Table of racially and ethnically diverse caregivers and parents who represented both urban, suburban, and rural communities across Minnesota; these 10 women have advised the evaluation team about evaluation practices and processes focused on subgrantees and families.

Help Me Connect: An online navigator that connects families and those working with families to resources and services in their local communities that support healthy child development and family well-being.

Minnesota's Children's Cabinet: A broad interagency partnership that utilizes a whole family approach to support the healthy development of children and families. The Children's Cabinet works to bring efficiency and effectiveness to state government efforts to improve child and youth outcomes. The Children's Cabinet is one of the four main state agency partners on Minnesota's Preschool Development Grant Birth through Five.

Minnesota Department of Education (MDE): A state agency charged with the mission of improving educational achievement for children from pre-K through grade 12, adult education, and library services. MDE is one of the four main state agency partners on Minnesota's Preschool Development Grant Birth through Five and the primary grantee of the federal funding.

Minnesota Department of Health (MDH): A state agency dedicated to protecting, maintaining, and improving the health of all Minnesotans. MDH is one of the four main state agency partners on Minnesota's Preschool Development Grant Birth through Five.

Minnesota Department of Human Services (DHS): A state agency who works with many others to help people meet their basic needs so they can live in dignity and achieve their highest potential. DHS is one of the four main state agency partners on Minnesota's Preschool Development Grant Birth through Five.

Preschool Development Grant Birth through Five (PDG): A federal grant available to states and territories to support early childhood services for children birth to age five. Funds support a needs assessment, strategic planning, family engagement, quality improvement, workforce compensation and supports, and direct services for young children. Minnesota received both a Planning Grant and a three-year Renewal Grant.

Subgrantees: A term used to describe organizations receiving funding and/or supports through Community Resource Hubs or Community Solutions.

Introduction

Minnesota families with young children deserve to thrive. Minnesota state agencies often work in siloes to serve families and young children, approaching programming from the lens of their individual missions. As a result, different departments oversee the education system, child care, and public health, to name a few key areas. While these domains match with each department's work, high quality early childhood development that ensures children can thrive requires a combination of care and education, health, economic and social well-being.

Understanding these challenges, the state applied for a Preschool Development Grant Birth through Five (PDG) intended to reduce fragmentation in statewide systems and address inequities children experience in early childhood. This grant resulted in a partnership of the Minnesota departments of Education, Health, and Human Services, along with the Children's Cabinet, to bring together child- and family-serving systems across the state. Minnesota's PDG work moves beyond the traditional lens of early childhood development—that of providing child care and education—and engages in the web of sectors affecting families and their children.

As part of grant implementation, the state conducted annual evaluations with an external evaluation team to assess implementation and preliminary outcomes of the grant, one piece of several parallel evaluation efforts. This culturally responsive and equitable evaluation, which also applied a systems lens, is intended to monitor progress toward PDG's strategic goals, reveal opportunities for continuous improvement, and provide a structure to share lessons learned.

This report outlines findings related to each of the study's four evaluation questions and recommendations for the future. It focuses on how well the PDG program has been implemented, identifying the barriers and facilitators to successful implementation as well as the drivers of implementation changes. The learnings from the implementation of the PDG grant will influence how Minnesota approaches interagency initiatives in the future, particularly as state government seeks to move to a whole family approach to providing services—even proposing a new Department of Children, Youth, and Families. This report is a resource for state agencies and state legislators who are interested in systems change, equity efforts, and a more comprehensive and collaborative family and early childhood system.

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The Opportunity

The state of Minnesota envisions a world where children thrive within their families and communities. Families that thrive are multifaceted, complex, intersectional and engage with society through economic, educational, health, and other social sectors. This engagement happens as parents and caregivers as well as through a child's experiences. Ascend describes a framework that recognizes these ways in which a "whole family" interacts with the world, calling it Two-Generation Approaches (see Figure 2). While Two-Generation Approaches explain some of the Whole Family System, it doesn't include Minnesota's understanding and value of multi-generational support—such as grandparents—or Indigenous perspectives using Seven Generations. Yet, inequities on nearly all measures of child and family wellbeing exist based on income, race, and geography. These disparities are one of the consequences of a fragmented system for supporting children and families. The PDG grant is intended to address the fragmentation in statewide systems and focus particularly on reducing the disparities children experience in early childhood. Minnesota has taken a whole family systems approach to this work, concentrating on building supports that can create positive change in several areas of wellbeing.

Figure 2. Two-Generation Approaches

The recognition that the early years of a child's life have a considerable impact on their later life outcomes—from academics to health—started emerging in the late 1960s. Born out of the War on Poverty movement, researchers raised connections between poverty in early years and long-lasting consequences on various dimensions of children's future lives, including their adult health status, their performance at school, and future labor market outcomes. Many research studies have also shown that early and continued intervention—like social investments and income support—can curb these trends. High quality early childhood education and care, continuous

access to health care, income support for families most in need, and parenting support to facilitate work and family life can all contribute to lessen the effects of children living in poverty[1]

As Ascend further documents in more recent reports, the six key components of two-generation approaches, "build family well-being by intentionally and simultaneously working with children and the adults in their lives together to access new resources, solve problems, and sharpen existing skills."[2] These six key components, which are founded in research in human development, confirm the key dimensions of a child's—and therefore their family's— life: postsecondary and employment pathways, social capital, health, including mental health, economic assets, early childhood education, and K-12 (see Figure 3).

Figure 3. The six key components of two-generation approaches.
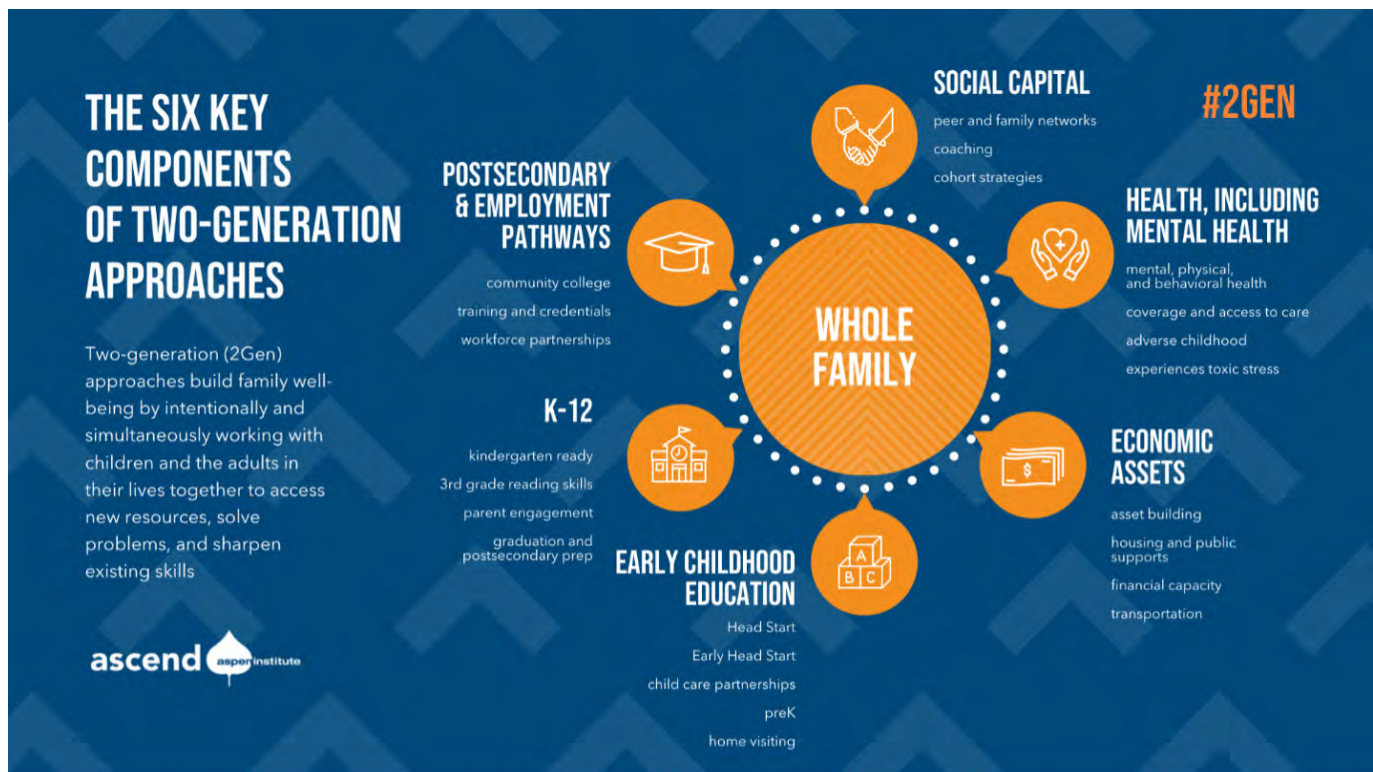
Along these component lines, Minnesota state agencies have each developed various services to serve families and young children, approaching programming from the lens of their respective missions. For example, the Department of Education has rolled out pre-kindergarten programming standards, while the Department of Human Services is charged with licensing

[1] Smeeding T, Thévenot C. Addressing Child Poverty: How Does the United States Compare With Other Nations? Acad Pediatr. 2016 Apr;16(3 Suppl):S67-75. doi: 10.1016/j.acap.2016.01.011. PMID: 27044705; PMCID: PMC6087662. Retrieved February 3, 2023, from: **https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6087662/**

[2] The Two-Gen Approach. Aspen Institute. Retrieved February 23, 2023 from: **https://ascend.aspeninstitute.org/2gen-approach/#:~:text=Two%2Dgeneration%20(2Gen)%20approaches,one%20generation%20to%20the%20next**.

child care providers and the Department of Health supports public health efforts for pre- and post-natal care. While these individual programs fit within each department's work, quality early childhood development that supports thriving children is a result of the combined factors of education, health, and social well-being.

Though individual departments serve a variety of public needs, they are inherently siloed. In becoming more efficient at delivering services specifically within the mission of the department, and in response to legislative mandates, one consequence is a disjointed system of programs and services for the public. As state agencies managing public dollars, implementation of these programs and services are built to reduce risk and be efficient. Unfortunately, this often comes at the cost of increased bureaucracy and complexity for those accessing support. When systems are confusing or require different entry points, parents and caregivers have less choice in how they are served or access services. Efforts like PDG and Gov. Tim Walz' recent budget proposal for supporting children and families, which aims to make Minnesota the best state to raise children, are key to breaking down these silos and creating a simpler and more effective system for families. For example, among the many pieces of the governor's budget plan are proposals to significantly increase funding for several key PDG projects to strengthen equity in children's health and development. These include plans for continuing Community Resource Hubs, Community Solutions, Help Me Connect, and more, and create a new Department of Children, Youth, and Families.[3]

Systems-level changes are needed. Minnesota is commonly at the top of state rankings for overall health, education, and economic outcomes. The state has some of the country's top-ranked public schools, highest average ACT scores, lowest infant mortality rates, and boasts one of the strongest workforces. But underneath the impressive averages lie deep disparities in health, education, and economic outcomes.[4] These disparities exist between racial/ethnic, economic, and geographic groups for families with young children. Structural inequities have a greater influence on outcomes than individual choices or a person's ability to access services, and not all communities are impacted in the same way. Research shows that quality early childhood programming—e.g. home visiting, developmental screenings, Head Start, to name a few—that focuses on setting children and their families up for success in their early years has positive impacts across health, education, and economics into a child's adulthood.[5] Thus, Minnesota has a clear need to prioritize eliminating the disparities seen among young children and their families. The resources available through the PDG grant and aligned federal grant objectives enabled an acceleration of efforts—for example, the Early Childhood Systems Reform, Children's Cabinet and Race to the Top—to change Minnesota systems.

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[3] Retrieved February 3, 2023, from: **https://mn.gov/governor/news/#/detail/appId/1/id/560468**
[4] Rosalsky, G. (2020, June 2). Minneapolis Ranks Near The Bottom For Racial Equality. NPR. Retrieved February 1, 2023, from: **https://www.npr.org/sections/money/2020/06/02/867195676/minneapolis-ranks-near-the-bottom-for-racial-equality**
[5] RolFacilitator 2, Arthur J., and Rob Grunewald. "The Economics of Early Childhood Development." Community Investments (2007): 13-14.

PDG background

The U.S. Department of Health and Human Services allocated funding for PDG grants for states and territories to support services for children five years and younger. The one-year planning and three-year implementation grants support a variety of activities, including "a needs assessment, strategic planning, family engagement, quality improvement, workforce compensation and supports, and direct services for young children."[6] As defined by the federal government, PDG grants aim to:

- Strengthen an integrated early childhood education system.
- Focus on low-income and disadvantaged children to enter school and improve transitions across early childhood into the early elementary grades.
- Increase program operating and cost efficiencies.
- Expand parental choice and involvement.
- Ensure families are linked to needed services.

The Minnesota Department of Education applied for and received a three-year $26.7 million implementation grant (also known as a Renewal Grant) in December 2019 to strengthen services for Minnesota pregnant or parenting families with children five years and younger. Minnesota's PDG work is a partnership of the departments of Education, Health, and Human Services, as well as the Children's Cabinet. The grant initially spanned January 2020-December 2022, and the state received a no-cost extension that allows the grant to continue through December 2023.

Before the current implementation grant, Minnesota received a planning grant that supported listening sessions involving more than 1,300 people across the state, with a focus on those experiencing the greatest barriers to opportunity. State staff engaged key actors in Minnesota's early childhood ecosystem, including early childhood education professionals, early childhood mental health specialists, child welfare professionals, and parents and caregivers. The listening sessions resulted in a needs assessment and strategic plan that aimed to focus the work on the needs of children and their caregivers or guardians. This planning work also involved developing a Program Performance Evaluation plan to assess implementation of the strategic plan.

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[6] Retrieved February 14, 2023, from: **https://www.acf.hhs.gov/ecd/early-learning/preschool-development-grants**

PDG programs

State staff, including project leads, agency leads, internal state partners, and agency directors; the Community Solutions Advisory Council; and subgrantee staff have implemented the PDG work. They seek to achieve the following vision: "By focusing on children facing racial, geographic, and economic inequities, all children in Minnesota will thrive within their families and communities."
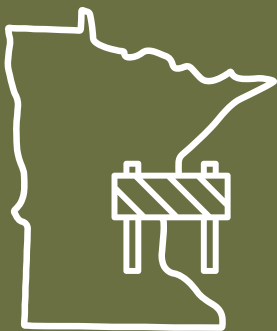
Just as Minnesota started implementing the PDG grant in early 2020, the COVID pandemic shifted all the state's work and community outreach online. While this largely worked well for community organizations and local county partners, it curtailed outreach to families with whom state staff sought to build mutually beneficial and trusting relationships. Families with low incomes in both urban and rural areas did not have reliable and consistent internet service, and online meetings would have placed an unfair burden on them during a stressful time filled with uncertainty. In addition, the murder of George Floyd traumatized the Twin Cities and entire state; the subsequent uprising deepened stress among families while also sensitizing many Minnesotans to existing inequities. The pandemic exacerbated present inequities and further broke down the frayed safety net that families with low incomes need. In addition, many child care providers closed, and many families withdrew children from child care centers.

While Minnesota's PDG grant has supported a variety of strategies and programs, this report most frequently references the flagship programs, many of which are shown in Figure 4, below. These key programs include:

Community Solutions for Healthy Child Development Grants. After years of community advocacy for a better approach to state programs, the state created Community Solutions to fund community-based strategies to address child development and health challenges community-identified by affected communities. The fund supports community-based organizations (called subgrantees in this report) led by Communities of Color, immigrants, and people with disabilities, as well as Tribal Nations and American Indian community organizations. The purposes of the Community Solutions grant program are to:

- Improve child development outcomes related to the wellbeing of children of color and American Indian children from prenatal to grade 3 and their families. This includes, but is not limited to, the goals outlined by the Minnesota Department of Human Services' early childhood systems reform effort.
- Reduce racial disparities in children's health and development from prenatal to grade 3.
- Promote racial and geographic equity.[7]

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[7] "Community Solutions for Healthy Child Development Grants." Community Solutions for Healthy Child Development Grants - MN Dept. of Health, Minnesota Department of Health, 23 Nov. 2022, **https://www.health.state.mn.us/communities/equity/projects/communitysolutions/index.html**.

These organizations are trusted by the communities they serve, and they are best placed to help families navigate services and resources in a community and culturally appropriate manner. A key design element of this program—referenced in the report—is the Community Solutions Advisory Council, made up of racially and ethnically diverse community members who provided oversight on the grants.

Community Resource Hubs. The state implemented a system of 133 geographically dispersed Community Resource Hubs that help families with local in-person navigation support. These Hubs are local organizations, schools, counties, and Tribal Nations (all called subgrantees in this report) who are charged with leveraging and increasing their network of partner organizations to support families. Hubs are intended to make it easier for families to get what they need, increase access to services, and grow community engagement and support community-developed solutions. For example, they help families navigate safety net services like early learning and child care, basic needs, economic assistance, medical and dental assistance, mental health, disability services, and developmental screenings.

Figure 4. Visual representation of the main PDG programs
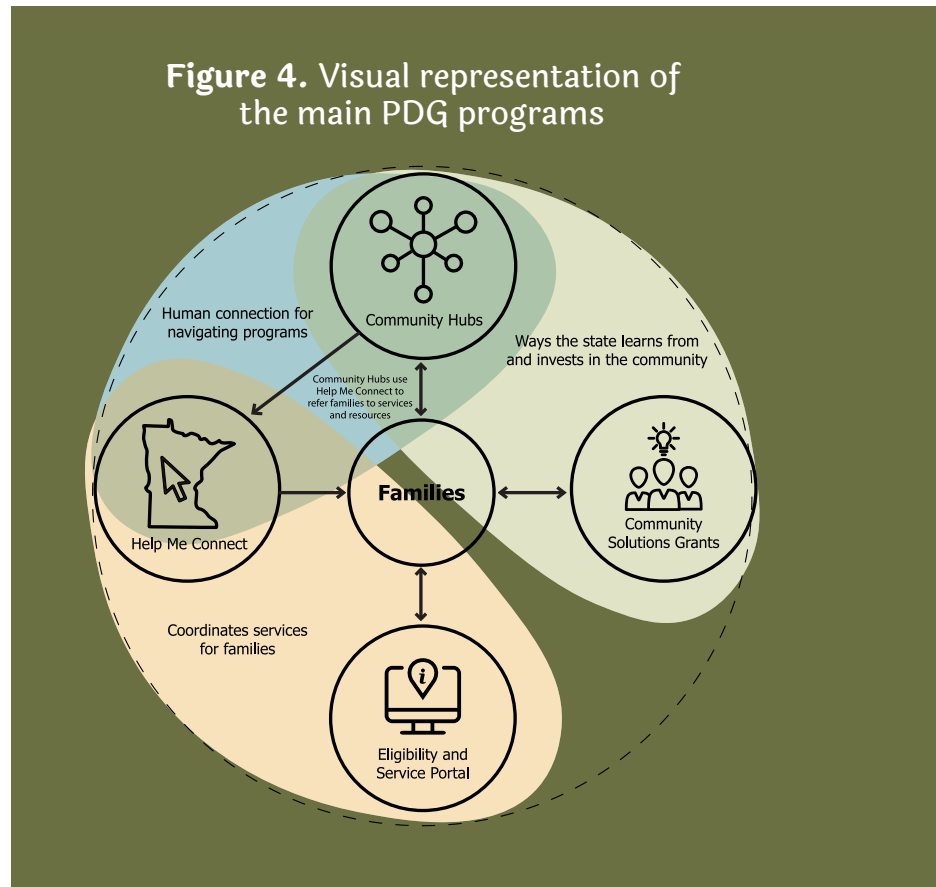
Help Me Connect. Help Me Connect is a website and online navigator that offers up-to-date information about resources and services closest to where a family lives. Community Resource Hubs use Help Me Connect to refer families to services and resources.

Bridge to Benefits. The state and Children's Defense Fund-Minnesota partnered implement Bridge to Benefits in Community Resource Hubs. Bridge to Benefits is an electronic assessment tool that helps families identify the services for which they may be eligible.

Early Childhood Mental Health Consultation. Mental Health Consultation is a prevention service focused on building the adults' capacity to support children's emotional development and decrease mental health challenges[i]. Mental Health Consultation includes a combination of training and, reflective consultation to support adults so they may support the social emotional development of young children. PDG supported the expansion of consultation beyond Parent Aware rated child care, to schools, child welfare, Community Resource Hubs and family, friend and neighbor providers.

Evaluation background

This evaluation focused on implementation of the Minnesota PDG grant over the three-year grant period with a focus on efforts in 2022. As described above, the evaluation intended to monitor progress toward PDG's strategic goals, reveal opportunities for continuous improvement, and provide a structure to advance and share best practices for early childhood development.

Key frameworks

Several frameworks are relevant to understanding the evaluation results: PDG's guiding principles, systems change, and culturally responsive and equitable evaluation.

Guiding principles

Minnesota's PDG implementation is guided by seven key principles (defined in **Chapter 1**). The evaluation assessed the extent to which the state embodied and held these guiding principles throughout grant implementation. The **guiding principles** are:

- Belonging and inclusion
- Geographical responsiveness
- Interagency Collaboration
- Intersectionality
- Racial Equity
- Trauma and healing informed
- Whole family system

Systems change

The evaluation team examined the lessons PDG learned from implementation through the lens of the six conditions of systems change. The concept of systems change lies in the idea that social problems are rooted in a complex interplay of interacting conditions that must be shifted in order to create change. These six main conditions exist, with varying degrees of visibility, in most social and environmental problems. The evaluation assessed the ways PDG met these conditions and what was learned about what structural, relational, and transformative changes will last beyond individual actors in the system. Figure 5, below, shows the conditions and levels at which they support change.

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[11] The Water of Systems Change By: **John Kania** **Mark Kramer** **Peter Senge** p. 340; https://www.fsg.org/resource/water_of_systems_change/

Figure 5: The six conditions of systems change

Structural Change
(explicit)

Relational Change
(semi-explicit)

Transformative Change
(implicit)
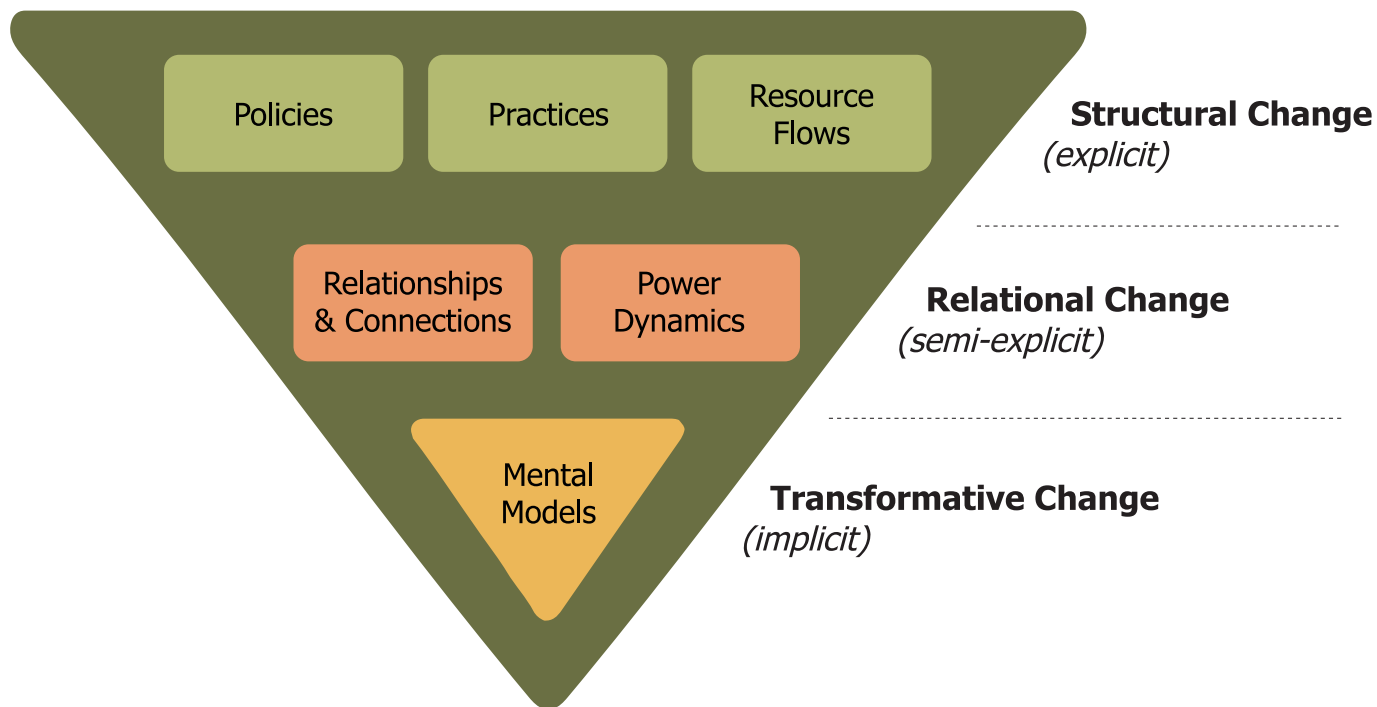
Culturally responsive and equitable evaluation

Like the state of Minnesota, The Improve Group recognizes the crucial need to build and safeguard diversity, equity, and inclusion (DEI) into all our work. In alignment with our commitment to DEI, we have strived to incorporate culturally responsive and equitable evaluation principles in all phases of the PDG evaluation, including decision-making processes, **data collection and analysis, and the interpretation of findings.** We collaborated closely with the PDG leadership team and other key affected groups throughout the evaluation process and, whenever possible, centered the perspectives and experiences of diverse communities and populations that have historically been excluded from decision-making, including Communities of Color, Indigenous people, immigrants, and refugees.

At the start of each annual evaluation cycle, we identified the purpose of the evaluation effort. Through this—and with an intent to keep equity in focus—we determined that the lens of the evaluation was to center inward, at the state level. This aligned well with one of the working orthodoxies to counter—"Grantees and strategies are the evaluand but not the [funder]"—from the Equitable Evaluation Initiative framework.[9] With this purpose in mind, and knowing about other program-level evaluations happening (some of which are described in greater detail below), we structured our equitable evaluation practices to involve key groups in the evaluation process as well as by setting up our evaluation questions to incorporate equity. We implemented the following practices and strategies to ensure a culturally responsive and equitable evaluation process:

Engaging those most affected by the evaluation throughout our work. We met regularly with the agency and project leads and attended the quarterly Community Resource Hubs meetings, using the time for giving updates, prompting reflection on the work, and gathering feedback on the evaluation.

Using a participatory approach through close collaboration with PDG subgrantees.
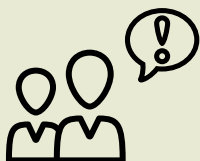
Convening an Evaluation Advisory Table of racially and ethnically diverse caregivers and parents from across the state; these 10 women advised the evaluation team about evaluation practices and processes focused on subgrantees and families.

Engaging an independent consultant who is an experienced qualitative researcher and specializes in culturally responsive and equitable evaluation (CREE). She provided guidance on how to incorporate the CREE principles throughout the evaluation and advised the evaluation team on community engagement and recruitment and analysis.

Including an evaluation question that focused on who **benefitted from** the work and how, ensuring family voices were included.

Please review the **Appendix** for additional detail about how the culturally responsive and equitable evaluation approach showed up in this work, as well as the evaluation team's learnings and reflections from the project.

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[9] Center for Evaluation Innovation, Institute for Foundation and Donor Learning, Dorothy A Johnson Center for Philanthropy, Luminare Group. "Equitable Evaluation Framing Paper." Equitable Evaluation Initiative, July 2017, **www.equitableeval.org**. Retrieved February 14, 2023, from: **https://static1.squarespace.com/static/5a73584b8fd4d2dbcaa08405/t/5fbdb0633c02f22b9dc9 7d37/1606266980696/Equitable+Evaluation+Framework+Framing+Paper_200904.pdf**

Constellation of evaluations

We conducted the evaluation described in this report alongside several parallel evaluations, each with a different focus, that have supported PDG learning at various levels of the system. For example, School Readiness Consulting supported evaluation efforts of specific programs, like Community Resource Hubs. Additionally, Wilder Research and Bowman Performance Consulting advanced Indigenous-based evaluation participatory practices. All evaluation teams shared their learnings with state staff, PDG subgrantees, and families (indirectly, through online publishing). The list of key PDG evaluation activities includes but is not limited to:

The Improve Group and Child Trends conducted the comprehensive, overarching evaluation of how PDG was implemented. The team reviewed PDG program documents, conducted focus groups with subgrantee staff and families, facilitated an Evaluation Advisory Table of parents and providers, and conducted key informant interviews with state agency and project leads, plus PDG internal state partner staff.

School Readiness Consulting produced the 2022 Strategic Refresh (updated needs assessment and strategic plan), **Community Resource Hubs Final Report**, Community Solutions Report, and Evaluation equity training for communities of practice. The organization worked with Community Solutions grantees and Community Resource Hubs to provide technical assistance on organization- or program-level evaluation. They conducted document reviews, interviews, and focus groups.

Wilder Research and Bowman Performance Consulting conducted an Indigenous evaluation with Native Nations and families, as well as Indigenous equity training using a culturally responsive approach to evaluation. This evaluation team worked with American Indian-serving organizations and Tribal governments connected to Community Resource Hubs, Community Solutions, and other Indigenous-focused grant efforts, as well as American Indian families to co-create how the evaluation was conducted. They also created a **Indigenous Evaluation 101 Guidebook**.

Creation in Common conducted focus groups with providers who have used the Help Me Connect system to navigate services for clients, gathering feedback on their experience. A summary report supported findings that allowed for improvements to the website.

Minnesota Analysis and Development (MAD) produced the **Minnesota Preschool Development Grant Sustainability Planning Guide**, a sustainability report based on facilitated conversations with the PDG Children's Cabinet Subcommittee; Community Solutions Advisory Council; and PDG directors and agency leads. MAD also conducted a document review; surveys; and facilitated discussions to collect data.
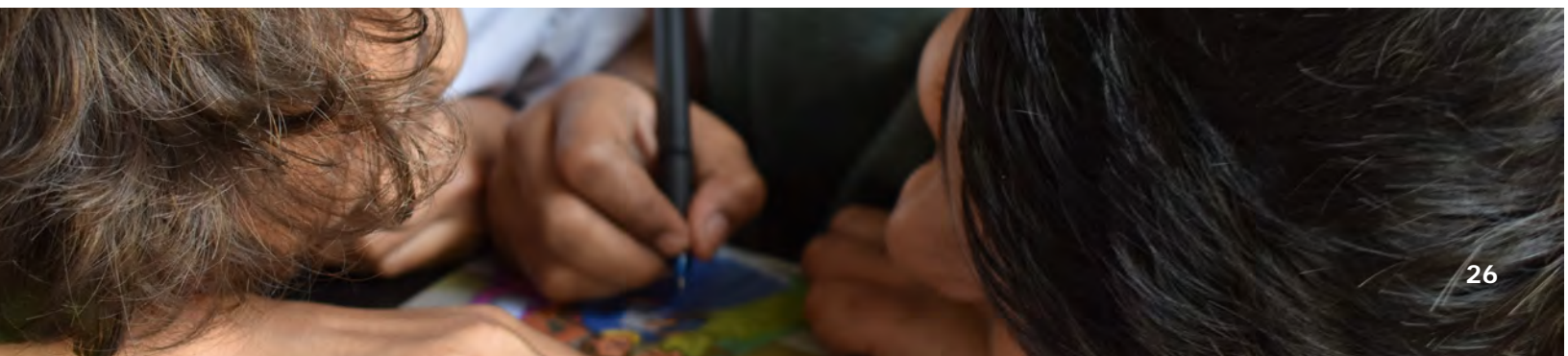
Study design and methodology

This evaluation design was almost exclusively qualitative, relying predominantly on primary data collection with some document review and secondary data analysis of program-level output data. The following section describes the study's evaluation questions, methodology, outreach methods, family participant demographics, analysis approaches, and limitations.

Evaluation questions

The following four evaluation questions guided the evaluation in 2022:

1	2	3	4
How well are we doing the work?	What were the barriers and enablers that made the difference between successful and disappointing implementation and outcomes?	What was learned about how and why change occurred?	Who is better off as a result of PDG activities and in what ways?

Methodology

We describe below the data collection methods and data sources for the evaluation, including the number of participants engaged through each method.

Primary Data Collection

Interviews: Agency leads, Project leads, PDG state partner staff (e.g., finance, contract leads), Agency directors

Workshops: Project and agency leads

Focus groups: Families/parents, Subgrantee staff members

Secondary Data Collection

Document review: PDG internal documents, memos, reports (e.g., Community Solutions grant reports)

Subgrantee/program administrative data analysis: Community Resource Hubs quarterly reporting data, Help Me Connect user analytics

The following table describes the sample for each method and source used in this report. Due to the complexity of the grant, the evaluation team asked state staff to participate in multiple data collection events. Thus, project and agency leads attended three workshop sessions. After the second workshop in June, we asked project and agency leads to participate in follow-up interviews in order to get details on their specific programs. Interviews and workshops included the entire universe of state staff who were funded by or supported PDG activities. We used a convenience sample for subgrantee and family focus groups in order to maximize participation.

Table 2: Number of participants

Interview Method

SOURCES (n=# of sessions)	PARTICIPANTS	TOTAL POSSIBLE
Agency leads	6	6
Project leads	10	12
PDG state partner staff	7	13[10]
Agency directors	5	9

Workshop Method

SOURCES (n=# of sessions)	PARTICIPANTS	TOTAL POSSIBLE
Project and agency leads (n=3)	10-18	18

Focus Groups Method

SOURCES (n=# of sessions)	PARTICIPANTS	TOTAL POSSIBLE
Families/parents: People who speak Spanish	26	*Unknown*
Families/parents: People who speak English	15	*Unknown*
Families/parents: People who speak Hmong	3	*Unknown*
Subgrantee staff members	23	38 subgrantee organizations

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[10] The list of 13 was based on staff who were determined to play a substantial role in PDG without being directly compensated by the grant. Many more staff interact with PDG Leads and Directors in support of the work.

Outreach and recruitment

We describe below our outreach and recruitment approach for state staff, subgrantees, and families.

State staff

For interviews and workshops with state staff, we primarily conducted outreach via email, inviting staff to the upcoming data collection event. Most were able to meet with us, while a few could not due to scheduling conflicts.

Subgrantees

For focus groups with subgrantees, we used a different outreach and recruitment approach. We emailed subgrantee staff from Community Solutions and Community Resource Hub listservs to invite them to participate in a focus group. If we did not hear back, we reached out with up to two additional follow-up emails or phone calls. We contacted a total of 52 subgrantee staff, reaching at least one person from every subgrantee organization, over email. Twenty-three subgrantee staff participated in focus groups. Participants received a $20 gift card after attending a focus group.

Families

To recruit families for focus groups, we called and/or emailed Community Resource Hubs and Community Solutions grantees' staff. We reached out to each subgrantee, except for a small number that did not wish to take part in recruitment. When contacting subgrantees, we shared information about the purpose of the focus groups, the languages in which they would be offered, and information and flyers they could distribute to families (these resources were available in English, Spanish, Hmong, Amharic, and Somali). A community liaison who speaks Amharic and has a connection to a Community Solutions grantee that serves people who speak Amharic conducted phone, email, and in-person outreach and recruitment at that organization. Additionally, an evaluation team member who speaks Spanish connected more intensively with two Community Solutions grantees to hold two focus groups at days and times convenient for the Spanish-speaking families they serve. We also asked Evaluation Advisory Table members to share information about the family focus groups with the families they serve or know who work with PDG subgrantees.

Families received a $50 gift card for participating in a focus group. After families participated in a focus group, they were asked to complete a short optional exit survey that collected demographic information. This survey could be completed in English, Spanish, Hmong, Amharic, or Somali. Results from this exit survey can be found in the **Appendix**.

Family participant demographic characteristics

As described, family focus group participants filled out an optional exit survey that gathered demographic information; we did not collect demographic information for state staff or subgrantees. Of the 44 family focus group participants, 84 percent accessed services or resources through a Community Solutions grantee. Eleven percent experienced a Community Resource Hub, and 5 percent had another connection to PDG work. Data reported from families therefore will more heavily represent experiences with the Community Solutions program.

We offered focus groups in English, Spanish, Hmong, Somali, and Amharic; only English, Spanish, and Hmong were conducted. Fifty-nine percent of families participated in a Spanish-language focus group, while 34 percent joined focus groups in English and 7 percent took part in a focus group in Hmong.

Of all participants, 91 percent identified as people of color. Chart 1 shows the breakdown of participants by race/ethnicity.

Chart 1: Family participant race/ethnicity

Race/Ethnicity	Percent
Hispanic or Latino	59%
White	9%
American Indian or Alaska Native	9%
Multiracial	7%
Asian	7%
Preferred not to answer	5%
Black or African American	5%
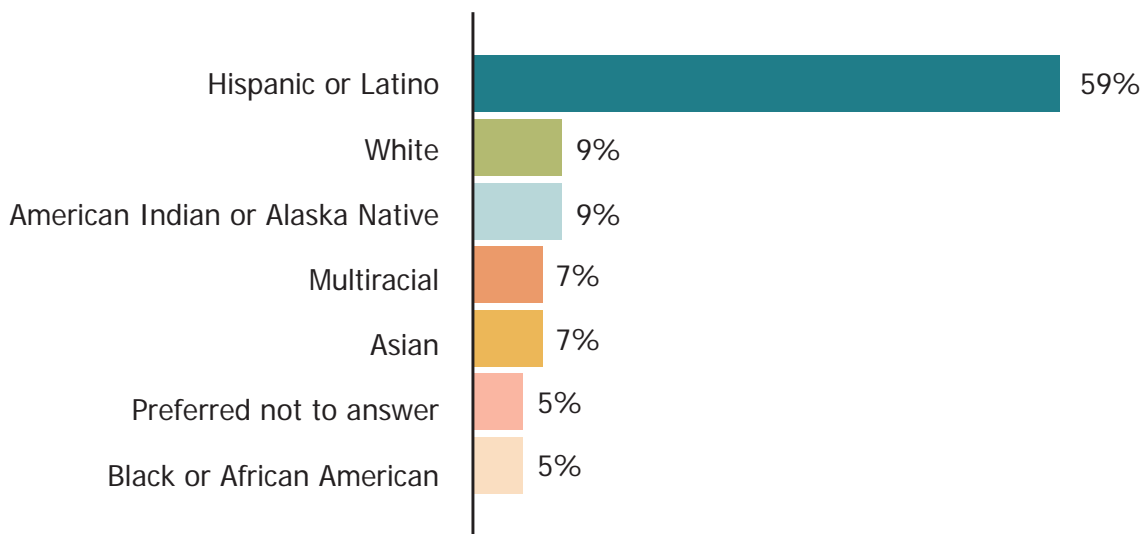
Seventy-three percent of participants live in urban or suburban areas, and 61 percent described their household income level as extremely low, low, or low-medium. A more detailed breakdown of participant demographic information is in the **Appendix**.

Analysis

We used several analytical frameworks and processes to develop findings and recommendations. We describe these frameworks below broken out by evaluation question, as well as our overall analytical approach.

Overarching analytical approaches

The evaluation team used both deductive and inductive analysis approaches. We first organized our data by evaluation questions, and then identified initial themes using the below analytical frameworks. We used an inductive approach to sub-theming within the evaluation question and coded to the deductive frameworks as relevant. Evaluation questions 2 and 4 findings are reported mainly using the inductive themes that arose from the data. However, some mentions of the deductive themes from the other frameworks are referenced to deepen the reader's understanding of the work.

Evaluation question 1: Implementation Rubric

This evaluation assessed how the guiding principles show up in grant implementation and the degree to which each principle advances PDG's goals to make it easier for families to access services. The evaluation team gathered input from PDG leadership to develop an implementation rubric of criteria that generated discussion and helped assess how well PDG staff have integrated the guiding principles into grant work. Each guiding principle received a rating of poor, good, or excellent. Most of the data that informed the ratings came from agency and project lead interviews, though some findings came from subgrantee and family focus groups.

Evaluation question 3: A Systems Change Lens

The evaluation team examined the lessons PDG learned from implementation through the lens of the six conditions of systems change[11]. The evaluation assessed the ways PDG met these conditions and what was learned about what structural, relational, and transformative changes will last beyond individual actors in the system. Data that provided evidence of changes to a particular condition was coded to the condition. The inductive sub-themes were cross referenced with the condition. The findings in this chapter therefore mirror many of the themes in other chapters; however, they are described within the articulation of the lessons and systems that were ultimately affected through PDG.

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[11] The Water of Systems Change By: **John Kania** **Mark Kramer** **Peter Senge** p. 340; **https://www.fsg.org/resource/water_of_ systems_change/**

Limitations

Applying a systems lens means the evaluation relied heavily on the state perspective because agency staff could offer a full picture of the early childhood system. Additionally, we sought to limit the amount of time subgrantees and families who are removed from state work had to put into the study; for example, subgrantees were already being asked to participate in program-level evaluation efforts, and we did not want to overburden them. Despite our intentional efforts to balance our asks with the benefits of the evaluation (e.g., we offered participation incentives), and likely also related to the distant relationship between the state and families, few families participated in the focus groups. These decisions (and outcomes) created tension with our culturally responsive and equitable evaluation approach because fewer subgrantee and family perspectives informed the work. This report thus describes outcomes, impacts, and other effects from PDG mostly from an upstream perspective—in other words, changes at the state. While we would have preferred a greater number of family participants to better inform our understanding of how families have been benefitting from PDG statewide, we also recognize that impacts from systems efforts (e.g., impacts to families) are typically not seen until 5-10 years after implementation.

Data quality from grantee reports to their respective state grant manager improved over time. Thus, secondary data in this report referencing grantee outputs and outcomes may have some inaccuracies. As programs refined the definitions of different metrics required of grantees, it took some time to communicate and create clarity in how to report these definitions. For example, "successful referrals" are defined as "families who received the service(s) or resources they requested." However, not all organizations used the same process for following up with families or providers to know if a referral was successful. Likewise, some organizations may have underreported these successful referrals if their process did not include follow-ups with one-time clients.

Report roadmap

This report's findings are divided into four chapters, each of which addresses one of the study's evaluation questions. The report concludes with a fifth chapter of recommendations and lessons for the future. The format is as follows:

Chapter 1: Evaluation question 1 – How well are we doing the work? This chapter describes the evaluation's assessment of how each of PDG's seven guiding principles show up in grant implementation and the degree to which each principle advances PDG's goals to make it easier for families to access services.

Chapter 2: Evaluation question 2 – What were the barriers and enablers that made the difference between successful and disappointing implementation and outcomes? This chapter outlines the areas in which implementation has been successful or disappointing and describes the key factors that led to each. Similarly, the evaluation team identified successful and disappointing outcomes and the connections between those outcomes and implementation, including barriers and enablers.

Chapter 3: Evaluation question 3 – What was learned about how and why change occurred? The evaluation team examined the lessons PDG learned from implementation through the lens of the six conditions of systems change. This chapter describes findings for each of the six conditions.

Chapter 4: Evaluation question 4 – Who is better off as a result of PDG activities and in what ways? This chapter describes findings from family focus groups about families' experiences accessing services from PDG subgrantees and non-PDG-funded organizations. Families discussed both successes and challenges in terms of PDG-funded services, other services, and cultural responsiveness.

Chapter 5: Recommendations and lessons for the future. This chapter shares recommendations that are intended to help guide ongoing sustainability efforts as the grant continues into 2023 through its no-cost extension, while also serving as a resource to any government agencies interested in systems change and equity efforts.
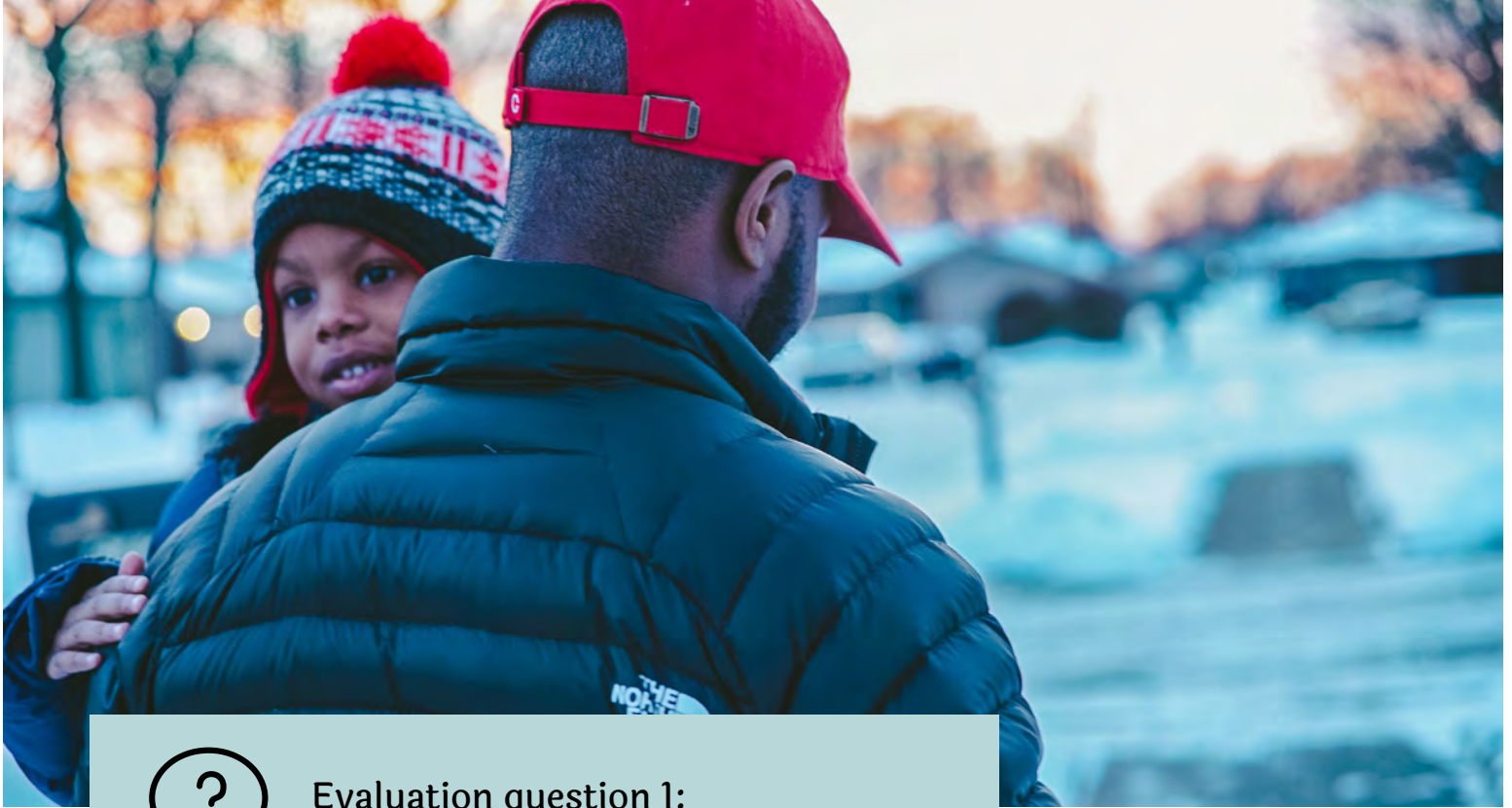
Evaluation question 1:
How well are we doing the work?

In preparing to implement PDG, the state went through a strategic planning process that included defining guiding principles to infuse throughout the work. The principles established a shared understanding of PDG values, aligned priorities for the work, and influenced state policy to design systems and programs that are both strategic and value-driven. Importantly, PDG leadership and project staff expressed a strong commitment to the guiding principles. As one agency lead shared:

> "We have made a point to improve practice with all guiding principles with the Hubs. Keeping them explicit and talking about the values has integrated them into the work and creates some accountability. They have helped us learn how to better show up with these principles even when it's not always tangible."

This evaluation assessed how the guiding principles show up in grant implementation and the degree to which each principle advances PDG's vision and strategies. The evaluation team gathered input from PDG leadership to develop an implementation rubric of criteria that generated discussion and helped assess how well staff have integrated the guiding principles into grant work. Each guiding principle received a rating of poor, good, or excellent. Most of the data that informed the ratings came from agency and project lead interviews, though some findings came from subgrantee and family focus groups. The following chapter examines each of the seven PDG guiding principles (described in Table 3), the ratings they received, and the key evidence and themes that support the rating.

Table 3: PDG guiding principles

PRINCIPLE	ABBREVIATED DEFINITION	RATING
Belonging and inclusion	Inclusion in the community and our connections with one another enhance or weaken well-being and trust within communities. When people feel that they belong, their voices are heard in a way that helps shape the conditions in the communities that affect their lives.	Good
Geographic responsiveness	Geographic responsiveness recognizes that where someone lives is often a factor when considering equity but is rarely explicitly discussed. The goal is to make services accessible for Minnesota children, regardless of where they live.	Good
Interagency collaboration	Given the intersectionality of the issues impacting children and families, interagency collaboration is needed to support solutions and dismantle structures perpetuating inequities.	Excellent/ Good
Intersectionality	Intersectionality refers to the concept that overlapping social identities, such as class, race, geography, language, sexual orientation, age, religion, disability, and gender, impact the experience of an individual.	Poor
Racial equity	Racial equity is the process of addressing inequities and strengthening opportunities and outcomes for all. In Minnesota, inequities fall primarily along racial lines, with African American and American Indian communities experiencing the brunt of these inequities.	Good
Trauma and healing informed	PDG defines trauma as a response of physical, mental, or emotional distress in reaction to overwhelming adverse experiences.	Good
Whole family system	Whole family approaches focus on creating opportunities for and addressing needs of both children and the adults in their lives together. The approach recognizes that families come in different configurations and as such the state must move its work from child-focused and adult focused to whole family focused, and equally and intentionally on services and opportunities for the child and the adults in their lives.	Excellent/ Good

Belonging and inclusion

Rubric rating: Good 👍

The guiding principle of belonging and inclusion recognizes that inclusion in the community and connections with other people enhance or weaken well-being and trust within communities. When people feel that they belong, their voices are heard in a way that helps shape the conditions in the communities that affect their lives.

The principle of belonging and inclusion is infused in who PDG funds, program design, communications, and collaborative implementation practices.

Funding Community Solutions includes more community members in decision-making due to the program's Advisory Council. It also influences how the work is done and who is invited to the table. The atmosphere of belonging created through Community Solutions funding is an important change that has fostered more trust between the state and community. For example, the state worked with a lot of intentionality and prioritized external involvement in the planning and execution of the Community Solutions grants. As one project lead shared:

> "Community Solutions grantees feel like this funding has supported them in their vision of healthy communities and are able to be a part of decision-making around early childhood. The community is being helped in the way they wanted [and believe] that we were true partners."

The Community Solutions Advisory Council, which works with the Minnesota Department of Health (MDH) to develop requests for proposals and review applications for this grant program, is a significant contributor to how the state incorporates belonging and inclusion into the grant. Council members come from communities across Minnesota, and the state selected them to increase the representation of diverse perspectives in decision-making. Council members also advised MDH in creating a transparent and objective evaluation process focused on the outcomes subgrantees are working to achieve. The advisory council has helped build a bridge between the state and people from communities that are underrepresented. As one agency lead described:

> "I think it is creating consistent feedback loops with the community. The Community Solutions fund has an advisory body and regular connection with the community. Those are strong pieces for sustainability and success."

Fostering a sense of belonging and inclusion is most important among those who have historically been excluded. This intersects heavily with the racial equity and geographic responsiveness principles in identifying who to center in the work. Thus, increasing resources via grants and staffing to culturally specific and Indigenous organizations and Tribal governments was one way to strengthen inclusion. PDG staff understand that impacting the lives of all of Minnesota's children requires an equity focus, funding local organizations that have the cultural competencies and community trust to serve a wide range of racial, cultural, and ethnic groups in geographies across the state. PDG subgrants not only funded Tribal governments, but also entities like Indigenous Visioning, which works to bring the Tribal voice to state and national policies that affect Indigenous communities. Tribal governments have recently been stretched so thin that they do not have staff to go after new funding, so eligibility for Indigenous organizations has increased inclusion in Indigenous communities. Families themselves (during focus groups) confirmed feeling welcomed at their culturally specific Community Solutions organizations. Grant eligibility—such as allowing Tribal nations, nonprofits, and other government entities—created improved opportunities for Black, Indigenous, and People of Color (BIPOC) families to benefit from state funding and feel a sense of belonging through culturally relevant services.

Community Resource Hubs' communities of practice have also fostered belonging and inclusion by providing a forum for Hubs and their staff to share learning, discuss challenges, exchange solutions, and build practice-based knowledge. These communities of practice have helped build trust across levels of government (e.g., county and state) and different jurisdictions (e.g., urban and rural, Tribal government and counties). Hosting them virtually has allowed for greater staff participation, including more people in opportunities to connect.

Intentional feedback loops have created pathways for both staff and community members to feel a sense of belonging through ongoing dialogue. The community needs assessment conducted during the PDG planning phase helped staff better understand what communities and populations should be prioritized. As PDG was implemented, each program or activity crafted and used evaluation practices to continue hearing from affected groups. This ranged from conducting point-in-time data collection like focus groups with providers on Help Me Connect to reflecting on individual technical assistance conversations with subgrantee organizations to understand larger patterns. The feedback loops established help give voice

to those who are often left out of design and planning, including Indigenous communities, Communities of Color, immigrants, and refugees.

A conscious and deep effort to use plain, accessible language in external communications demonstrates PDG recognition that communication materials impact families' sense of inclusion. Further, School Readiness Consulting conducted an equity-focused PDG document review in 2020 that resulted in actionable findings for sustaining and improving inclusive communication. The state intentionally uses language that resonates with community members in the PDG materials it publishes. As an agency lead raised:

> "At the front end of the grant, we have been conscious of the language we use in anything we publish. We have focused on using plain language – not using jargon. Thinking of that piece. The majority of us come from academia and were trained in a certain way. The public doesn't want a document like that, it signals that it isn't for them."

In addition, Help Me Connect is available in four languages to ensure the resource is inclusive of some of the most prevalent racial and ethnic communities in Minnesota. Even more, the state is still working to make additional improvements. For example, staff are partnering with community members for translation help in response to feedback that some of the Help Me Connect language is too formal.

Internal state partner staff work in support roles like information systems, contracting, and finance. They are critical to interagency collaboration and implementation but have historically felt undervalued. PDG has created a network of collaboration where some internal state partner staff now feel a sense of connection and importance to the work. As one such staff member shared:

> "People reach out and ask for my input, which has been great. Usually, it's me going and advocating to staff, but now I'm being asked for my expertise and for the expertise of people I work with."

The examples described above illustrate how staff have explicitly considered belonging and inclusion in carrying out the grant. However, it is important to note that limited statewide evidence was available about whether children and families—who are the focus of PDG's ultimate mission—feel a stronger sense of belonging and inclusion due to the PDG work. Future evaluation efforts are required to better understand whether families feel a greater sense of belonging and connection to the systems of support available to them.

Geographic responsiveness

Rubric rating: Good 👍

The PDG principle of geographic responsiveness recognizes that where someone lives is often a factor when considering equity but is rarely explicitly discussed. Rural areas—due to their greater geographic span and fewer individuals per mile—typically have fewer options for support in their geography. The state struggles with diverse and competing needs between urban areas and Greater Minnesota.

> 🌐 **Geographic responsiveness is reflected in the design of Community Resource Hubs and Help Me Connect.**

The Community Resource Hubs grantmaking practices ensured that almost all regions in the state had a local organization or agency that received funding. An agency lead shared that they did extra networking in regions where they did not receive applications in their first funding round to encourage organizations to apply.

Specifically, the state intended Community Resource Hubs' design to strengthen the networks of providers who could support families, especially in rural areas where provider shortages substantially limit family options. This explicit focus on encouraging partnerships across a geographic region therefore made them well-placed to support efforts to connect state programs to local entities. This is evidenced in the early childhood mental health consultation program whereby PDG connected Hubs to this body of work and asked for their help in advertising across their partnerships. In this way, more state services were not only available statewide, but more effectively communicated as available.

PDG's commitment to developing local partnerships and engaging a wide variety of communities through the Hubs also emerged as a successful part of the grant. As one internal state partner staff mentioned:

"PDG takes the citizen and local government centered design seriously. They talked to Counties and local community social workers. There is better sampling on who they are talking to about problems and solutions, so the solutions are effective. Local partnership is central to their process."

However, some state staff reflected on the continuing struggle to find subgrantees in some parts of the state, especially in southwestern Minnesota; this area lacks any PDG funding, including Community Resource Hubs or Community Solutions grantees. Transportation problems are an ongoing barrier for rural Minnesotans, and existing Hubs are not always close by. In addition, parents in some areas still struggle to find culturally competent providers and/or specialists who offer specific services (e.g., assessment for speech therapy and autism).

Online tools like Help Me Connect also provide evidence of this principle's infusion in the work. These websites help connect families to a range of services across many geographic areas. Help Me Connect staff has worked collaboratively with the Community Resource Hubs in rural Minnesota to review and update programs currently listed on the site and to fill in gaps when needed. One of the Hubs was able to discontinue managing their local resource website with the confidence that they can share Help Me Connect with their families to find local information. PDG staff continue to improve these tools as they respond to user feedback on the website's limitations (both geographically and service topic-wise).

It is important to note that this evaluation did not examine geographic differences in implementation of services throughout the state. For example, during analysis, the evaluation team viewed Community Resource Hubs as a whole program rather than assessing how well each Hub is implementing the work in its service area. This more detailed look at the Hubs program is available through their 2022 annual report: **Community Resource Hubs Final Report**.

Interagency collaboration

Rubric rating: Excellent/good

Given the intersectionality of the issues impacting children and families, interagency collaboration is needed to dismantle structures perpetuating inequities. State government is siloed by policy areas and federal and state funding streams, requiring Minnesota families to provide the same information to different agencies to access benefits. PDG staff learned during community listening sessions during its 2019 Planning Grant how important it is for state agencies to work together to solve community members' problems and ensure information about state benefits and other supports is easily accessible.

Interagency collaboration is evident in internal practices at the state. The state's intentional work to break down silos between agencies has also helped the state collaborate better with subgrantees.

This principle is evidenced by interagency legal agreements that have allowed for staff and resource exchange and project implementation across agency partners. Moreover, state staff described the ways agencies use collaboration and relationships to break down silos. For example, staff described how regular interagency "project lead" meetings have helped the collaborative process, enabling joint problem solving and resource sharing across agencies. The strengthened connections have helped agencies understand more about each other's priorities and work; this has opened up new opportunities for collaboration and synergy. Agency leads said that they are constantly looking for ways to connect different departments and people to advance PDG's mission. As one lead reflected:

> "The success was bringing together this cross-agency working group with people who had been involved with childcare from different departments. MDE, Labor and Industry, DEED, IRRRB. Some of these economic development organizations haven't been plugged into early care and education. I now have contacts at those places that I can ask questions of, send resources to, and connect with."

The PDG partner agencies were not the only ones to experience the benefits of collaboration. PDG's interagency collaboration efforts are informing strategic and tactical plans for Minnesota IT Services (MNIT) and how state agencies and MNIT can better collaborate in the future. MNIT staff want to be viewed as strategic partners, rather than simply reactive problem solvers. PDG agencies have brought technical staff into the planning processes of various activities, demonstrating the value of inviting multiple perspectives as true collaborators and serving as a model for other agencies.

The benefits of intentional interagency work have rippled beyond operations and communications at the state, creating more reliable pathways for communities and families' feedback to reach the appropriate state staff. An internal state partner reflected that "PDG created better collaborations between state agencies, program partners, community partners, Tribal nations, and families."

PDG staff have collaborated around feedback loops, using their shared communication pathways to help each other improve programs and resources. For example, as subgrantees and families shared gaps in Help Me Connect, subgrantee staff passed along the information to the Help Me Connect project lead to make improvements. Likewise, when subgrantees shared what they need to help families, other PDG program staff listened and suggested ideas for how to help. One subgrantee shared:

> "As a coordinator, having certain things available as a resource for me to relay to our navigators or to relay to social services, or other departments or partners we end up working with has been helpful. And so that's what I took on as saying. 'OK, well, I don't have anything to offer right now. I'm not a family coach but let me make sure that social services and our navigators, who are connecting all residents to all different services, know about Help Me Connect as a resource or that WIC is listed on Bridge to Benefits."

While interagency collaboration has been highly effective, some state staff still see opportunities for improvement like getting more clarity about the distribution of decision-making across agency leads and the various PDG-funded projects. Additionally, some state staff noted an opportunity to leverage the interagency collaboration structures for communicating externally with partners and community since external communication has come up as an ongoing challenge of the grant.

Intersectionality

Minnesota families' intersectional social identities—such as class, race, geography, language, sexual orientation, age, religion, disability, and gender—impact their lives and experiences. Various state programs affect the lives of Minnesota's children and families in intertwined ways and can enhance their lives if they work together in a coordinated manner. State programs and policies need to reflect and accommodate the intersectional identities of Minnesota residents so that all are well served regardless of social identity. PDG acknowledges the multifaceted and overlapping challenges that families experience during early childhood development, seeking to ensure intersectionality is adequately reflected in its work.
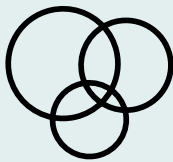
There was little data that spoke to the ways PDG design and implementation attended to children and families' intersectional identities and varying experiences. However, the guiding principle did show up in some ways, including Community Solutions funding decisions, investments and training around early childhood mental health services, and the way PDG views the complex early childhood system.

Of all the guiding principles, state staff mentioned and described intersectionality least. Though culture, race, and geography have often been part of implementation conversations, there has been little discussion of how the combinations of these identities (and others) were considered in providing services. In fact, some state staff had difficulty articulating how the principle shows up in the work—or used differing definitions (e.g., many believed it meant working across various sectors).

There is some evidence that multiple intersections were prioritized during funding decisions and considered during implementation. For example, some Community Solutions grantees focused on racial and geographic identities, while others focused on disability and race, or religion and gender. Overall, PDG focused on families with low incomes, so interventions based on intersecting identities were prioritized. For Help Me Connect, there were efforts to add information and imagery on the site that connects themes for children with disabilities, rural geography, multi-generational families, same-sex

caregivers, single parents, and people of different racial backgrounds. The early childhood mental health services program does imply some level of support for intersectionality. Mental health coaches are trained in racial bias and are disbursed in local regions to help child care providers understand how these identities may affect children and families' behaviors and attitudes.

One agency lead referenced how intersectionality is connected to the interagency approach, sharing, "Intersectionality also speaks to the point of connection in the different activities. Like how the Hubs and Learning Communities are intertwined. The intersectionality of the issues and how they are taken care of." To this point, there is evidence that PDG actors (subgrantees and PDG staff) have made space at monthly staff meetings and the quarterly Community Resource Hubs meetings to discuss how to leverage intersecting work to support families with intersecting identities.

Racial equity

Rubric rating: Good 👍

Minnesota is frequently at the top of state rankings for overall health, education, and economic outcomes. It has some of the country's top-ranked public schools, highest average ACT scores, lowest infant mortality rates, and boasts one of the strongest workforces. But underneath the impressive averages lie deep unfairness that falls primarily along racial lines, with African American and American Indian communities experiencing disparities in infant mortality, reading, poverty, and many other indicators of well-being.

Almost all PDG programs and funds have direct evidence of intent to improve outcomes for Indigenous and/or Communities of Color, with some efforts more deeply contributing to advancing equity.

PDG has demonstrated a commitment to racial equity by designing and implementing activities that specifically target improved opportunities and access to services among Black, Indigenous, and People of Color (BIPOC) children and families. One example of this commitment is the Community Solutions funding, which the state created specifically to "promote racial and geographic equity."[12] The BUILD Initiative technical assistance and community of practice offerings for subgrantees also explicitly focus on advancing equity, raising race as a topic of conversation. In designing and implementing the flagship grant programs (Community Solutions and Community Resource Hubs), state staff worked to advance equity in many front-end processes. Examples include connecting with and directly advertising the funding opportunity among culturally focused organizations and later providing individualized technical assistance to subgrantees. This type of support is meaningful in advancing racial equity as BIPOC-led

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[12] Retrieved February 14, 2023, from: **https://www.health.state.mn.us/communities/equity/projects/communitysolutions**

organizations are often smaller and have less experience navigating state systems because the state has historically excluded them. Subgrantees affirm state efforts to advance racial equity. As one subgrantee described in a focus group:

"Community Solutions is, in my understanding, the first state funding to help specifically minority kids and young children with support…. Just getting the funds and support from the state to help our community is very meaningful to parents."

The explicit **Indigenous evaluation** focus and the hiring of a full-time Tribal Nations lead are additional examples of how PDG is prioritizing the racial equity guiding principle in grant implementation. Both subgrantees and state staff expressed an appreciation for the Indigenous evaluation, which raises up the voices of Indigenous subgrantees and the communities they serve. As one subgrantee shared, "It was absolutely wonderful to see an Indigenous evaluation component on a state grant – that says a lot right there on a state's commitment to Tribes and Tribal grantees." An external consulting team, Wilder Research and Bowman Performance Consulting, co-created an **Indigenous Evaluation 101 Guidebook** through a series of gatherings with Indigenous community members as part of the Indigenous evaluation process. The guidebook includes considerations for culturally responsive evaluation that reflect Indigenous values. The creativity of this strengths-based evaluation is evident in the story banking process, which is accessed through a QR code for Indigenous families to help tell their children's story and describe positive experiences for data collection.

PDG has promoted the Child Development Associate Credential in high schools and the Grow Your Own pilot program to diversify the early childhood workforce. This workforce focus is meant to increase the number of teachers and providers who look more like their students, understand students' cultures, and speak their languages. The goal is to have more racially representative early childhood workforce across Minnesota.

Some state staff pointed out that Minnesota still has a lot of progress to make on its racial equity journey across all levels of government. It is especially important because COVID-19 and social contexts such as the racial reckoning over the murder of George Floyd have exacerbated existing challenges for BIPOC communities throughout grant implementation.

Trauma and healing informed

Rubric rating: Good 👍

A key component of PDG implementation is the recognition that many families experience both individual trauma and the historical trauma of their communities. The Substance Abuse and Mental Health Services Administration defines trauma as an "event, or set of circumstances, that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being." This principle was prescient; it was defined and developed prior to the pandemic and George Floyd's murder, events which further traumatized Minnesotans.

> **The trauma-informed toolkit and early childhood mental health consultation program serve as the key examples of PDG commitment to the trauma and healing informed principle.**

PDG directly infused its trauma and healing informed principle into the work by developing a **Toolkit for Healing-Centered Practice** to help providers working with families. The toolkit was designed to help providers both increase their understanding of what it means to be truly trauma informed and begin the complex and multi-step process of carrying those practices into everyday interactions.

In addition to the toolkit, the early childhood mental health consultation work has helped ensure adults working with children are equipped with the proper training to avoid retraumatizing children and their families. The model is based on the idea that a better understanding of a child and family's experiences—including their trauma—can help providers develop strategies for improving families' mental health. Through PDG, this program grew into starting Trauma and Healing Learning Cohorts, demonstrating continued commitment to the principle. The piloting of these healing groups and trauma-informed consultation has helped early learning programs better understand how to recruit culturally competent staff. The expansion of who can participate in the Trauma and Healing Learning Cohorts shows how those involved are learning and deepening the work; they are now open to guardians ad litem and a wider range of early childhood system providers in areas like family, friends and neighbors, education, child welfare, and child protection. Community Resource Hubs also received Infant and Early Childhood Mental Health Consultation.

State staff not only designed programs and resources to improve trauma-informed work, but also funded existing trauma-informed work. A subgrantee noticed this trauma-informed lens in PDG efforts and observed that it has been well received in their community. As this person shared:

"Participants were craving something to teach them how to become change agents in a positive way and they are dismantling a lot of generational traumas. Participants go through classes that identify challenges in the community so they can find solutions."

Beyond programs, PDG considers how communication is a key space for a trauma-informed approach. Staff shared interest in getting feedback about how information is portrayed and relayed. An agency lead provided an example of this feedback:

"We've learned how certain messaging can affect populations such as people with disabilities hearing 'all children are born healthy and ready to thrive.' We are responsive when we hear that feedback [of exclusive or inequitable language] and take the necessary steps to mitigate any potential harm in our messaging."

Furthermore, Community Solutions grant reporting requirements were structured to allow organizations to drive their own portrayal of the communities they serve. This reflects a sensitivity to healing efforts that put storytelling in the hands of communities rather than prioritizing state-defined success.

Although this guiding principle shows up in all the ways described above, state staff said they want to increase awareness of services and resources that advance trauma and healing work. For example, they would like to share the trauma-informed toolkit more widely for greater adaptation and use. An agency lead reported that efforts to this end are underway to share the toolkit; United Way is embedding it into their 80x3 Initiative and early childhood special education is using it as a tool for continued work on the intersection of disability and trauma.

Whole family system

The whole family system approach recognizes that families come in different configurations, focusing on creating opportunities for and addressing the needs of both children and the adults in their lives, together. Families are defined by those people in them and often include grandparents, aunts, uncles and others in key relationships with children. This is about more than engagement of parents to improve outcomes for children; this is about building on the needs and goals of not only children, but the adults in their lives as well so that the entire family can move out of poverty and thrive. It also requires the systems that serve children, adults and families to work in coordination to meet the needs of the whole family.

The whole family system approach is evident in the grant structure: the PDG lead agencies represent different aspects of a family's life (health, social services, and education). The intentionality behind the whole family system approach also emerges in the projects it funds or connects with, such as the Family, Friend, and Neighbor program and Community Solutions.

The whole family system approach is intrinsic to the operations and the structure of PDG. The Children's Cabinet is a centerpiece of the whole family system, as it includes state agencies with connections to housing, finance, corrections, and other areas that impact an entire family. The interagency partnerships enable PDG to communicate and leverage the strengths and roles of various state agencies to address needs from a whole family perspective. As one director shared,

"We've done a better job of truly engaging multiple state agency and partnerships around early childhood. Often, there's a lot more silos. Usually, the central agency stays as the driver, whereas, in this case our Project Manager has utilized their education lens across the entire early childhood system."

Several of the interagency partnerships prompted attempts to connect families to a variety of resources beyond just early childhood development. This shows how families thrive when their needs are met, moving beyond just a siloed view of how children develop and grow. For example, PDG partnered with Children's Defense Fund-Minnesota to include its Bridge to Benefits screening tool in Community Resource Hubs. PDG did so to increase awareness and participation in public work support programs and federal and state tax credits that improve family economic stability. A subgrantee described how these partnerships and the larger principle are positively playing out in their organization:

"Now, instead of working directly with early educators and the Head Start side of the CAP agencies, we're working with family service workers in the CAP agencies and in the Tribal Nations to help families. They're doing home visits and meeting the families and finding out do they need: Do they need help with finding childcare? Do they need help with rental assistance? Do they need help with mental health? We're finding those things out, and then leading them to The Bridge to Benefits and connecting them to opportunities. So, I think it's kind of growing and expanding into what's needed instead of our original plan."

Help Me Connect is another whole family system tool that helps families connect to a wide range of services in their local communities that support healthy child development and family well-being. While the original vision of Help Me Connect was intended to support caregiver connections to the variety of early childhood services, the web site analytics and user feedback show that most families' initial needs are related to food, housing, and transportation. Site adjustments have been made to support connections to basic needs and ensure caregivers have an opportunity to explore the other programs they may not know about.

The Family, Friend, and Neighbor (FFN) mental health consultation illustrates consciousness about how families are structured and make decisions about care for their child(ren). This whole family system principle further intersects with implementing the racial equity principle as PDG has supported three groups from the Latinx community into joining that network. Since caregivers are well-supported through the program, they can in turn ensure quality care for the whole family.

While many of the programs and interagency work itself are evidence of a whole family system approach, some state staff felt that they could have better highlighted fathers as a group needing support during implementation of this principle. Given that two Community Solutions grantees focused specifically on male caregivers, it is clear that balancing supports for the array of family members in a child's life is a need.

Chapter 2: Factors affecting implementation and outcomes
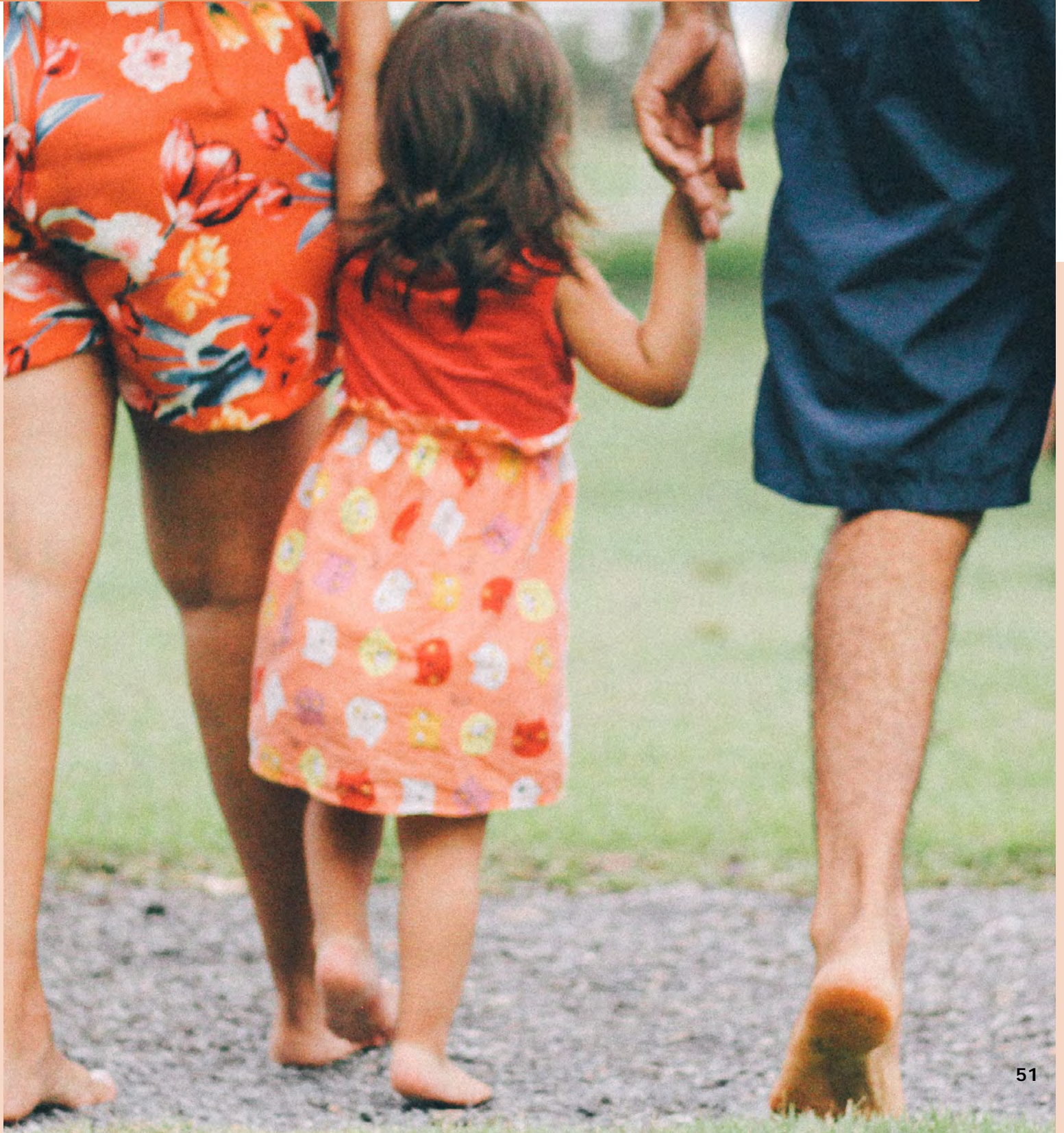
Evaluation question 2:
What were the barriers and enablers that made the difference between successful and disappointing implementation and outcomes?

Evaluation question 2 focuses on identifying barriers and enablers to PDG project implementation and outcomes. Many barriers and enablers play into all aspects of PDG; the evaluation team did not list each one, but instead aimed to articulate the areas in which implementation has been successful or disappointing and describe the key factors that led to each. Similarly, the evaluation team identified successful and disappointing outcomes and the connections between those outcomes and implementation, including barriers and enablers. The findings heavily draw from state staff, though whenever possible, subgrantee observations are included as well. Findings related to successful and disappointing implementation and outcomes, and the barriers and enablers that contribute to them, fell into four broad categories described in greater detail below:

- The grant's structure and focus on systems change
- The grant's resources, including funding and what it has enabled
- The context in which the grant has been implemented and external factors such as the pandemic
- The grant's focus on collaboration and shared efforts.

Grant structure and systems focus

The grant's focus on expansive system-level change involving multiple sectors aligns well with PDG's guiding principles and has allowed PDG to take an approach that adequately reflects the system's complexity. While necessary, this complexity can work against the competing need for clarity and concision. In addition, cross-sector work, a key tenet of PDG and an important enabler for many aspects of implementation, has also caused some coordination challenges. Regardless, PDG project staff believe that PDG's complex approach is vital for meaningfully changing early childhood and family systems.

> **The grant's complexity has allowed for a whole family system approach that includes the many aspects of and players within the early childhood and family systems.**

The early childhood and family-serving systems are extremely complex, so it makes sense that efforts to strengthen them (i.e., PDG) are also complex and multi-layered. PDG work has incorporated many systems, sectors, programs, and players. It reflects the intended whole family focus by including a variety of players who interact with children and families. However, this focus can also be a barrier, as disparate parts of the system are not always well aligned with one another or designed to work together in a collaborative way. Because the system is so interconnected, project leads have also encountered challenges with identifying scope, understanding the big picture, and knowing who has the power to resolve issues. One project lead described this challenge by sharing:

> "We cycled through trying to solve a small piece, then seeing it in connection to other pieces of early care and education system, and huge underlying issues. There are big picture pieces that need to be addressed in order to address specific things. We cycled between different levels of scope and tried to strike a balance between them."

PDG staff also recognize that system-level changes, which have high impacts, occur slowly and cannot be accomplished in three years, especially when attending to equity, community responsiveness, and sustainability. One internal state partner described the challenge of a short-term grant for sustainability:

> "Another challenge is that it's a few years grant – you must run and get everything you want embedded into something – either a current system or receive ongoing funding. There are so many great things happening, and momentum and it would be a bummer for it to end and to be alone out here again."

A project lead also noted that creating meaningful and sustainable change takes time, which is in tension with the need to quickly spend money from a short-term grant. While the three years of PDG funding provided meaningful support to advance its mission, concern about sustainability – or lack thereof – has also been a barrier to implementation, even among subgrantees. To address this, the state is actively pursuing sustainability of grant activities and created the **Minnesota Preschool Development Grant Sustainability Planning Guide** to identify which aspects of PDG to sustain, possible levers for sustainability, and next steps for supporting sustainability of PDG-funded elements.

Telling the story of PDG, including its goals and outcomes, is vital for building awareness, buy-in, and trust. However, several PDG staff shared that this high-level messaging has been lacking. The grant's complexity and sheer number of pieces—one of the grant's strengths—also makes it challenging to develop a simple, unified message about PDG that can be shared externally. In addition, a few staff pointed to the complexity of the early childhood and family-serving systems as further complicating this messaging, as it is difficult to reach all those who should be hearing about PDG (e.g., different sectors and agencies).

Grant complexity also affects internal communications. Several PDG staff from all levels of the work (e.g., agency leads, project leads, and internal state partners) noted that it has been difficult to ensure that everyone involved with the grant, across agencies and sectors, understands PDG's scope. Some PDG staff described a lack of awareness of what others were doing, how their work fit in, or what would come next (especially if they only worked on one part of the grant). One agency lead described this tension, noting: "The size of PDG and comprehensiveness—it's so broad that it's hard to keep the information flowing through the proper channels. The massive scope and enterprises creates issues with the communication (although there have been successes there as well)." Another agency lead also noted that the grant structure focuses on high-level strategies with iterative, responsive actions in order to manage complexity; this is a strength in the work, but also makes it more difficult to communicate exactly what is happening.

Some PDG staff shared positive feedback about methods for supporting internal communication, such as monthly meetings, and relationship-building as a communication strategy, though staff capacity has limited these efforts. While PDG had a staff person dedicated to communication, there was a delay in initial hiring and then staff turnover resulting in a gap in staffing for over a year (nonconsecutive) of the grant, exacerbating communication issues.

Grant resources

As expected, grant resources, especially funding, have been vital for PDG implementation and achieving desired outcomes. Beyond funding itself, the way the state has spent the funding (e.g., on staff time and collaboration) and the freedom to use grant resources as needed have been strong enablers in implementation and contributors to positive outcomes. However, the pandemic and other external factors created challenges with staff capacity. This demonstrates that strong, flexible funding is necessary but not sufficient for successful implementation.

PDG funding has allowed for dedicated PDG staff and staff time for collaboration and relationship-building, which is vital for successful interagency collaboration.

PDG provided a significant investment in the early childhood system at the state level and among subgrantees and partners. These funds have allowed for additional state staff capacity and, in some cases, dedicated staff whose sole role is to implement PDG. Many state staff stressed the importance of dedicated staff, including internal state partner staff in areas like communications and IT, as they can prioritize the work and act as a "point person" for others who have questions or challenges. Several PDG staff noted the value of the grant's project manager in particular. This position has been critical for holding relationships and institutional knowledge, watching for duplication and redundancy, engaging community, and "promoting connectedness" among PDG staff. One project lead noted that staffing and other resources have also supported subgrantees, as they can access new services and expertise through PDG.

For other staff, funding for interagency work has supported coordination and collaboration. Many PDG staff stressed the value of relationship-building and appreciate that PDG funding specifically expected interagency work and has allowed time for relationship development. As one agency director described, "PDG is actually funded to do the cross-agency work. Other initiatives are doing it as part of the work, but PDG has staffing and time dedicated to the cross-agency work."

Staff with a variety of expertise, learning mindsets, and interest in innovation and collaboration have contributed to implementation and identified new ways of working. Supportive leadership has made this possible.

PDG staff also pointed to the skills, mindsets, and characteristics of staff as drivers of PDG work. Project leads credited individuals with knowledge in a variety of areas, including technical expertise and subject matter expertise, for progress and the inclusion of multiple perspectives. Beyond this, PDG staff identified passion as an important characteristic, with one agency lead noting the "combination of the right skills and the passion" as especially important. A few PDG staff also described staff and internal state partners as having an interest in innovation, creativity, and "pushing boundaries," helping to illuminate new ways of thinking and working together. In addition, a few project leads and internal state partners identified as valuable the use of a "learning mindset" where staff focus on iteration, responsiveness, and learning from

feedback. For example, quarterly reports demonstrated this iteration and responsiveness through the design and phased implementation of Help Me Connect, which incorporated feedback about additional resources and user experience enhancements from Hubs staff and other providers in real time. In addition, PDG staff members' learning mindset led to discussions around equitable grantmaking for Community Solutions grantees and the later development of an Equity in Grant Making report resource. Because of the emphasis on interagency work, willingness to collaborate is also a key characteristic for PDG staff.

Strong leadership at multiple levels has also been important in implementation. Many state staff identified supportive and effective leadership, through multiple interagency structures including Directors and Assistant Commissioners as well as the Children's Cabinet and its Senior Leadership team, as an enabler to PDG. Figure 6 below describes this structure. In particular, staff need to feel supported in their work and that leadership values collaboration. One agency lead described how leadership buy-in for interagency collaboration has shifted working styles:

"We have solid and effective leadership. What we see and what I hear my director saying– until you practice that skill or muscle it doesn't naturally occur. Before, you got money and there was urgency to get things done. PDG has allowed to pause, to reflect, and plan. Make sure the right people are at the table. Those are the pieces that have really changed."

Figure 6: Shared leadership for PDG
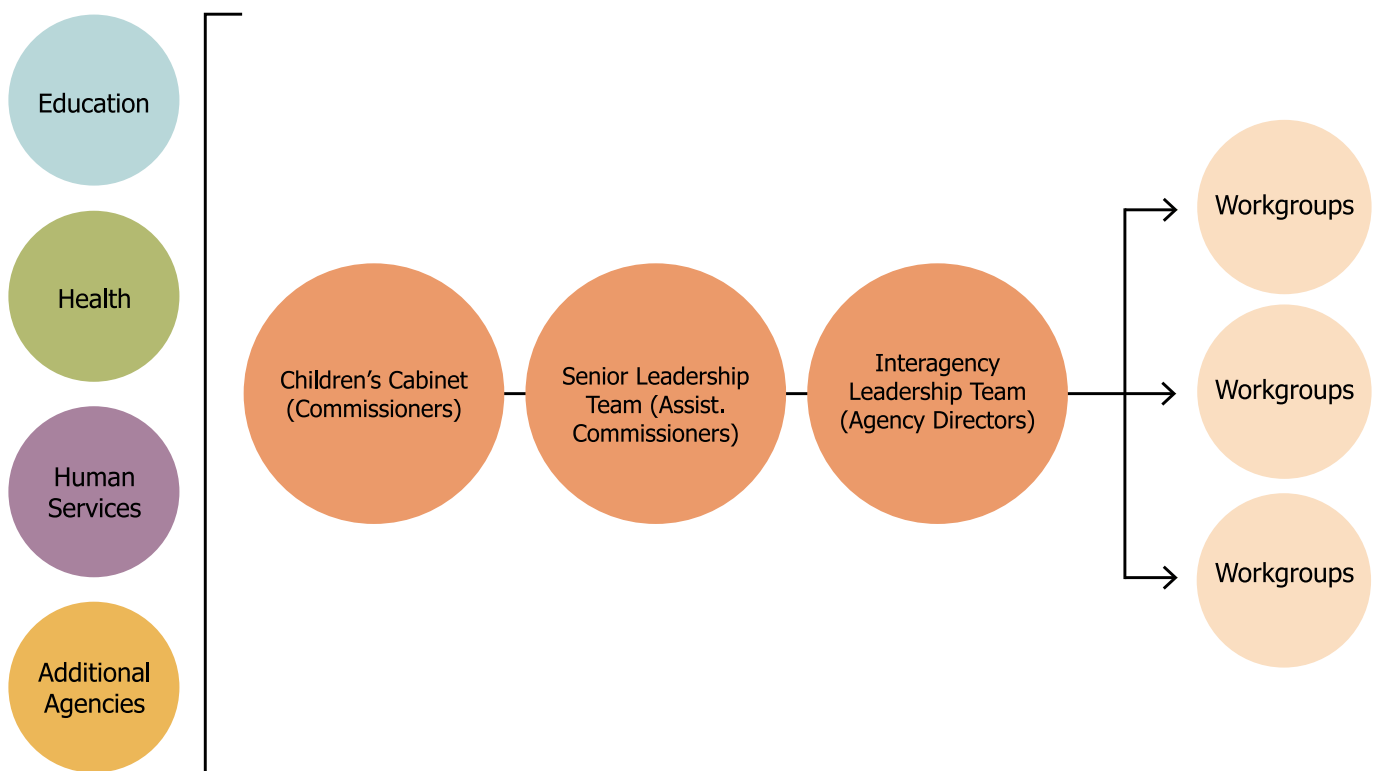
Despite PDG's significant resource investment, staff capacity remains a challenge, in part due to the pandemic.

Despite the funding infusion and high quality of PDG staff, barriers to consistently adequate staff capacity have persisted, like in many other agencies and sectors. Almost all agency and project leads interviewed described challenges with staff capacity, including hiring challenges, small teams, staff turnover, and competing priorities for staff. Turnover led to a loss of momentum, institutional knowledge, expertise, and relationships. Several project leads also discussed turnover among leadership, which sometimes redirected or completely changed projects, slowing progress. As described above, grant implementers highly valued PDG-specific staff, yet they sometimes moved on to other roles given the short-term nature of the grant funding. One director described this phenomenon by sharing:

"Temporary positions for 3 years based on the grant leads to having hard times retaining the staff. Often, those staff will take full-time positions when the opportunity arises (for stability), but that then creates turnover in those grant-specific roles. Therefore, we might have a hard time finishing what we set out to do since we are losing staffing."

Although staff turnover was a challenge, it is important to note that several staff who left PDG positions were hired in full-time (i.e., not time-limited) state government roles. These individuals retained the relationships built through PDG and some continued with distinct PDG projects in their new positions. One agency lead shared that this has led to the spread of mental model shifts and higher collaboration throughout state government.

Many PDG staff also noted barriers for those who had PDG work added to their existing roles, as they struggled with capacity challenges, competing priorities, and appropriate level of involvement with PDG. COVID-19 exacerbated this issue, forcing many staff to prioritize pandemic response work over PDG and other agency work.

Limited staff capacity has also restricted interagency collaboration. One internal state partner described this tension, noting, "When we don't have the capacity, it's really hard to authentically collaborate. Emergencies and priorities can overshadow the interagency collaboration." The PDG document review process also provided an example of capacity challenges among subgrantees: The state reported high levels of interest in trainings for Community Resource Hubs staff, but comparatively low attendance due to staff capacity. Similarly, an agency lead shared that Hubs and subgrantee organizations also struggled with capacity issues that challenged implementation. This general capacity squeeze may be reflective of shifts in the labor market as a result of the pandemic.

> **Funding flexibility has allowed the state and subgrantees to carry out the work despite the pandemic and highlighted opportunities for shifting institutionalized state practices to prioritize equity and community.**

Flexibility is another key feature of the PDG grant. A few PDG staff identified this flexibility as important for allowing adaptation during the heart of the pandemic as well as responsiveness internally within the state and externally with subgrantees. PDG funding streams have shifted power to the community, ensuring communities can decide what they need, what works for them, and how to spend money. This has allowed for a more responsive, equitable approach to grantmaking.

Subgrantees also value flexibility—they can make their own decisions about how to spend funding internally or in the community. In addition, subgrantees stressed the importance of funding for Community Solutions because they are, as one subgrantee described, "so unique – created by BIPOC communities for BIPOC communities…to have the state manage that and support us that way, it says a lot." Like PDG staff, subgrantees value funding for designated staff and increased staff capacity overall. One project lead noted that flexibility in funding has supported equitable services through subgrantees.

The opportunity to leverage PDG funding for existing ideas that could not have been carried out previously has also helped the state shift away from the status quo. For several PDG activities, funding has allowed for implementation of existing plans, hopes, and ideas (e.g., categorical eligibility work). As an agency lead described:

> "PDG isn't doing anything that hasn't been dreamed up for the last decade or longer; all are things that people have been talking about and wanting to do for a long time, and there's more of those things that we know would help. We just need resources for that."

Grant resources, coupled with the political will to enact these ideas, have built momentum for previously stalled ideas. For some projects, this initial investment was the catalyst for changes that will last into the future. For example, PDG funding has allowed for the training of new early childhood mental health consultants who are culturally diverse and/or speak a variety of languages. Now that these consultants are trained, they have

added capacity to the early childhood mental health consultation program and can continue to provide culturally responsive services. It should be noted, however, that the short-term nature of grant funding will have significant impacts on sustainability for projects that require ongoing resources. To address this, the state has begun sustainability planning and pursuing alternative funding sources (e.g., the governor's budget), though it is unclear what will be sustained in the long-term.

Context and external factors

The COVID-19 pandemic has been a significant, unplanned, and ongoing barrier during PDG implementation, slowing grant progress. At the same time, the pandemic has contributed to an increase in political will for substantive change in the early childhood field. This supportive environment for innovation in early childhood has helped overcome pandemic disruptions and provided essential high-level advocacy that has worked in tandem with other enablers to support largely successful implementation.

Although the state and subgrantees have implemented much of the PDG work successfully despite COVID-19, pandemic response limited capacity, slowed progress, and minimized some hoped-for outcomes.

Many factors external to PDG have affected implementation. Not surprisingly, the pandemic has created significant implementation challenges, especially around capacity. As described previously, staff capacity is extremely important for implementation, but many staff described challenges having needed capacity to do PDG work. The pandemic worsened capacity challenges, as one of the lead partner agencies involved in PDG— the Minnesota Department of Health—had to completely shift their focus to pandemic response activities for a significant amount of time. The department reassigned staff, including technical staff, or required them to prioritize COVID-related work over PDG and their typical duties. In addition, an enterprise-wide hiring freeze precluded the hiring of new staff to increase capacity. Despite these challenges, PDG implementation has continued with much success in many parts of the work.

In addition to capacity issues, some PDG staff noted that pandemic-related changes to how people work— most notably, shifting to virtual work—have required them to change plans and slowed progress. As one internal state partner staff noted:

> "The pandemic made a mess of some of the plans so we had to do a fair amount of shifting. It's interesting to think about what we could have done with the funds without needing to be responsive to the pandemic."

However, a few other PDG staff noted that the pandemic has also necessitated innovation and supported new ways of working. For example, project leads shared that virtual communications make it easier to connect with more diverse communities and have allowed for online Trauma and Healing groups. When coupled with the flexibility in funding, changes to respond to the pandemic have sometimes created positive impacts.

The pandemic was a major factor in the later-than-hoped launch of the Community Resource Hubs. This meant that families could not access the Hubs benefits at a very difficult time. One agency lead shared that the slow launch meant that Hubs "started behind the curve right off the bat," taking away time necessary to build authentic relationships. Similarly, the delays compressed Hubs' time to plan for sustainability. However, some of these impacts may be mitigated through the grant's no-cost extension, which will expand Hubs' timeframe to fully implement their work.

Subgrantees also described the challenges of limited capacity and the pandemic's work-related impacts. Subgrantees spoke of less capacity among their staff to provide programming while responding to basic needs. They also had to adjust planned (often in-person) work to comply with COVID-19 safety guidelines by setting up virtual programs and services or developing strategies to provide services that could not be done online (e.g., providing basic need items to families).

> **The governor's focus on children and family issues and the subsequent support of the Children's Cabinet, coupled with the pandemic heightening cultural awareness of the needs of children and families, have contributed to prioritization of PDG work.**

While the pandemic has caused challenges for implementation, other aspects of the external environment have enabled PDG's efforts. Some state staff feel that PDG came at the "right time" as many parts of the political climate aligned to support the work. Staff shared that PDG is strongly aligned with the current administration's priorities around interagency work and children and families. In particular, several state staff at a variety of levels described the Children's Cabinet as a strong champion of the work, playing a unique role in connecting agencies and building bridges to legislative priorities. This level of political will behind early childhood makes it an optimal time for the state to leverage resources through PDG. One agency lead described this as a success in implementation:

> "[At this time] we have a governor who supports early childhood, and leaders who want to think collaboratively across state agencies. We have the best policy window for this grant, which has been helpful. [We have] the ability to connect so many pieces that are beyond the grant."

Political will and commitment to children and families is evident at all levels of the system, from the federal government, to advocates, to nonprofits and other players. PDG staff highlighted these groups' urgency around supports for children and families, noting that it likely is in part due to challenges the pandemic has illuminated and exacerbated. One staff person described another context shift due to the pandemic, as government support has become more accepted as an appropriate and meaningful way to care for people and families.

Collaboration and shared efforts

Collaboration is a central tenet of PDG that has enabled implementation and ultimately led to positive outcomes, especially related to relationship development. However, because collaboration was a new strategy for many involved in PDG, it has occasionally clashed with existing policies and practices, causing slowdowns and frustration. In most cases, shared efforts have prevailed despite challenges.

Different priorities, practices, and policies across agencies as well as bureaucratic structures have impeded interagency collaboration and innovation, hindering technical work with shared resources in particular.

As previously described, PDG is intended to support interagency and shared work, which was largely successful across the grant. However, many PDG staff, especially project leads, noted that differences in agency practices, policies, and priorities were strong barriers to implementing interagency work. Agencies each have their own goals and activities, which PDG has not superseded, causing challenges with competing priorities and capacity to do PDG work on top of agency work. One internal state partner shared the following as the biggest barrier to interagency collaboration: "Getting everyone on board and their priorities aligned. Being on board with purpose is different from making the purpose a priority." Across agencies, there are differences in processes, definitions, and organizational structures, many of which are not documented. Several project leads and internal state partners noted that this makes it a challenge to understand needs, power structures, and points of communication when working with other agencies. One project lead described this challenge by noting:

> "This is applicable any time we are doing interagency work. All the processes are different, expectations are different in how things are paid, staffing challenges. It impacts everything if we do any interagency work. The three state agencies have attempted to collaborate in the past; there are inevitable silos that make that difficult."

For some pieces of the work, agency differences have caused roadblocks despite the staff's desire to achieve PDG goals. Despite these challenges, many staff pointed to interagency collaboration as a key factor in shifting culture and practices at the state. As one project lead shared:

> "While there were operational frustrations, I see them as growing pains. The value of cross agency work really supports the goals of PDG. The operational shortcomings are lessons learned that can be improved upon and need to as we make equity central to our work at the state."

Bureaucratic structures and existing beliefs about collaboration have also challenged shared work. Several PDG staff shared feeling constrained in what they have the power to do, regardless of individual buy-in, desires, and efforts. Some staff also noted challenges with changing culture and mindsets about what is possible in the work. A few individuals described examples of how traditions and entrenched beliefs about how the work "should" be done have created resistance toward innovative PDG approaches. While PDG was designed to make a significant change in the way the system interacts with children and families, these changes do not occur without some pushback. Nevertheless, PDG staff were, in many cases, able to navigate bureaucracy and shift mindsets in order to successfully collaborate internally and externally.

An area of particular difficulty in shared work was around technical and operational efforts, including contracting and fiscal operations. Many PDG staff described significant barriers to contracting using shared, interagency funding; most notably, the length of time and intense effort needed to manage differences between agencies, such as different timeframes and reporting requirements, and the multiple people involved in approval processes. Subgrantees also feel the impacts of challenging contracting processes, and one subgrantee shared, "The contract process itself is very slow and laborious and includes many, many people." Unfortunately, the slow pace has sometimes cut into the time available for implementation. Even with contracts in place, a few PDG staff noted that state finance policies are in tension with subgrantee needs and, in some cases, with equitable and community-centered approaches to funding. For example, the grant sought to move away from a financial model that requires organizations to operate a program out of their cash on hand and wait for state reimbursement later because it is a challenge for small organizations. Despite understanding this tension, existing policies prevent advance payments to address the issue, reinforcing barriers for communities to access grant funds.

Help Me Connect, a flagship PDG activity to centralize resources online, also required significant interagency collaboration. Help Me Connect was a priority in the PDG needs assessment—which was based on family and community direction—and included a great deal of collaboration among internal technical staff, external IT contractors, and others to ensure that the resulting product aligned with hopes for the work. IT staff played a critical role but had limited time due to COVID-19 pandemic priorities. Subject matter experts who could speak to the many services offered through Help Me Connect were also vital for completeness and accuracy. In addition, subgrantees pilot tested and provided feedback on the platform to support continuous improvement. While all these players were necessary for successful implementation, the need for technical expertise and intensive collaboration meant that Help Me Connect progressed more slowly than originally hoped.

Despite delays, Help Me Connect was launched in 2021. One project lead shared that community providers are relieved to know there is a one-stop site for families to learn about available resources. Website analytics show an upward and stable trend of Help Me Connect visitors, a potential early indicator of widespread use.

**Chart 2.** Number of Help Me Connect Visits, June 2021 – October 2022
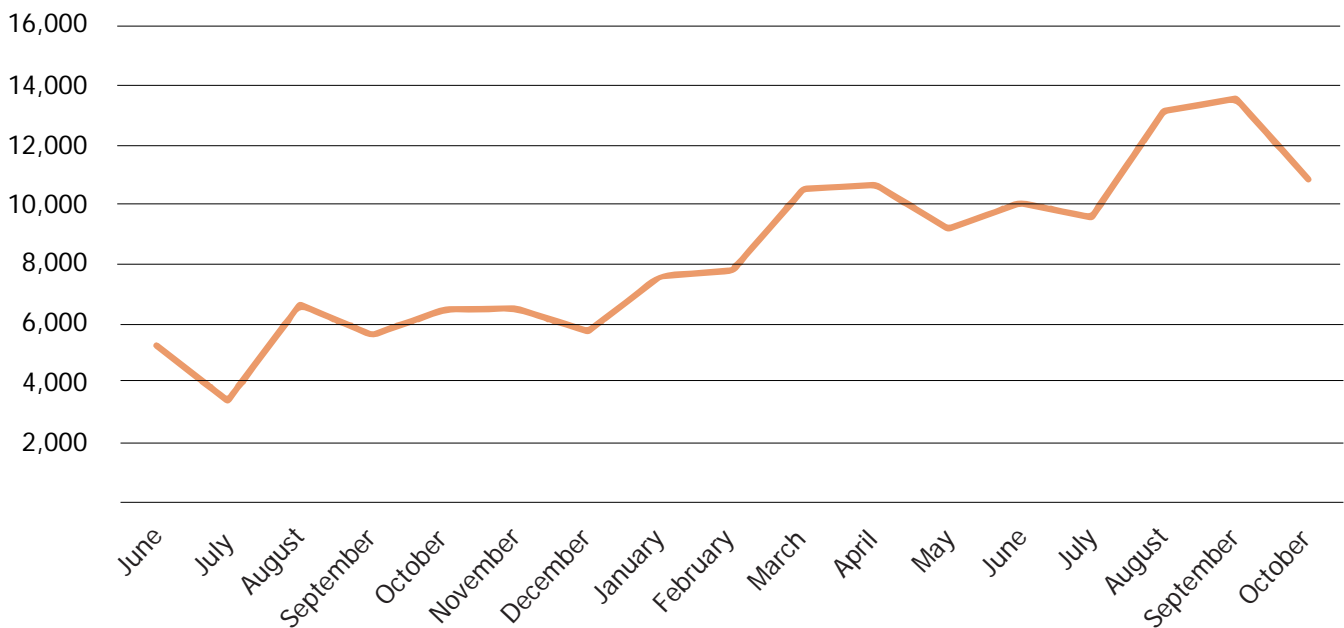
However, some subgrantees described challenges with the site's functionality, such as broken links, inaccurate information, and website navigation difficulties. A few families in focus groups described wanting more centralized information about resources, not knowing that Help Me Connect exists. Moreover, some state staff and subgrantees also expressed concerns about how useful Help Me Connect is for meaningfully changing how families engage with early childhood and family-serving systems. For example, families may identify opportunities for support from the state through Help Me Connect but still encounter barriers around availability of services, eligibility and repetitive application processes. At the time of this report, the Help Me Connect team was continuing to work collaboratively with Community Resource Hubs navigators and others to understand challenges with Help Me Connect and improve the site accordingly.

> **While agencies did reach some agreements around data sharing that will positively impact families, the process was especially difficult and achieved less success than hoped.**

Eligibility coordination for families—a strategic direction for PDG—has achieved partial success in implementation, resulting in some improvements to the system. Data sharing between agencies is at the heart of the work underpinning this strategy. The Joint Powers Agreement (JPA) developed in concert with the attorney general's office provided solid groundwork for the interagency efforts. The agreement outlines broad parameters for sharing data across the departments of Education, Health, and Human Services for the purposes of eligibility and service coordination. The strategy for implementation was initially envisioned through a shared data portal that all agencies could access; this would be made possible through this shared JPA governance with appropriate data protection protocols. However, after spending time working toward the portal and identifying duplication among existing state efforts, the goal shifted to creating individual data sharing agreements with associated technology directly between programs. Once it became clear that individual agreements were needed to be effective, implementation was slower than hoped despite efforts to improve efficiency, such as overlapping system planning and legal review. Though the JPA set a foundation for this work, agency leads reflected that additional data sharing agreements will be required by agencies to further detail specific parameters for any data sharing.
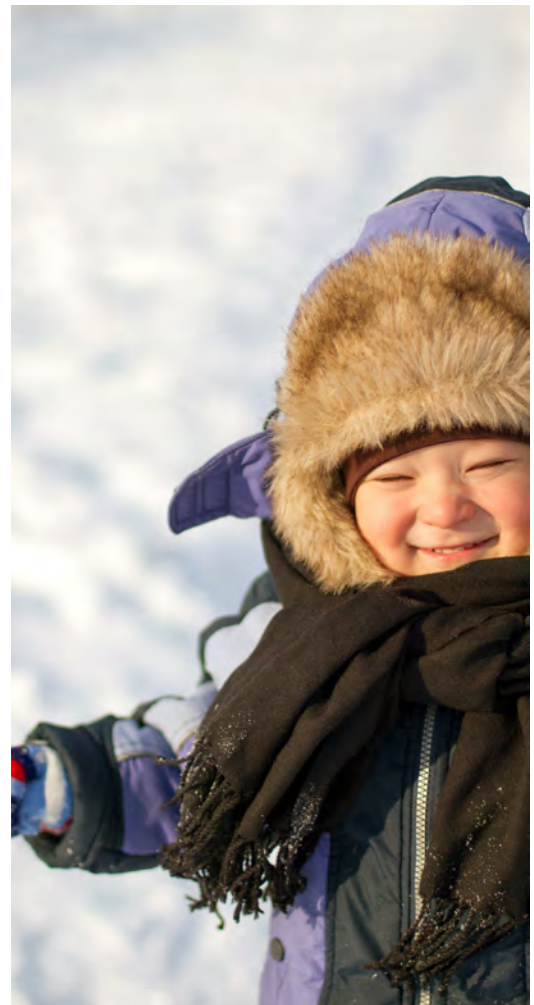
PDG staff also described other challenges to data sharing. Data sharing progress was slowed because of interagency work with competing internal department priorities: Shared decision-making and approvals took time and several types of expertise (e.g., attorneys, IT staff, and program implementers) to come to agreement. Reconciling the multiple layers of federal, state,

and agency policies also delayed the work and contributed to the technical issues. PDG project staff also shared that, in general, there is a risk-averse approach to data privacy and security, likely informed by the Minnesota Government Data Practices Act, leading to narrow interpretations of data privacy policies. Confusion and differing views about data ownership and responsibility for sharing have also created barriers.

However, a notable success related to data sharing has been the implementation of automatic enrollment in free and reduced-price lunch based on Medicaid enrollment, which was possible because of a federal waiver funded and staffed through PDG. An additional positive outcome of this work is that it will move some schools into community eligibility for free and reduced-price lunch, which will provide meals for all children in the school, saving even more families from paperwork. One PDG agency lead described the outcomes of this work:

> "As a result, 87,000 kids will receive free school meals that didn't last year and 202,000 will not have to complete the paperwork. Of the 87,000 matched, 16,772 were not yet in kindergarten as of August 2022. Two hundred million more dollars have gone to school meals because of this work. It is in process of being replicated with the Food Distribution Program on Indian Reservations (FDPIR) certification with school meals."

Innovations in program applications and policy have also occurred during project implementation. For example, DHS' **MNbenefits.mn.gov** has streamlined the application process for nine DHS programs to less than 20 minutes. While this works well for those seeking only DHS benefits, DHS does not currently share governance of the application with any other department. PDG leadership determined it was best to conserve resources for other purposes instead of developing competing program applications for Education and Health. DHS staff are innovating options to connect programs in other agencies such as WIC, Head Start, and Early Learning Scholarships to MNbenefits.mn.gov. One PDG staff member shared that these innovations would not have occurred without the relationships developed through PDG.

Data sharing practices will make it easier for families to get the services they qualify for without duplication of effort. These efforts reflect PDG's focus on the whole family system, which was also stressed by subgrantees, who described how it can be exhausting and embarrassing for families to share their information and stories multiple times with multiple agencies to get services. Subgrantees also shared a desire for systems to communicate better with one another. Despite the known challenges to data sharing and agreements, PDG staff continue to pursue a litany of coordination and accessibility opportunities across agencies in order to make it easier for families to access services.

Structures for interagency work and relationship-building have supported collaboration that resulted in new and strengthened state-level partnerships.

Though there have been challenges to interagency collaboration, agencies have demonstrated their ability to effectively work together across many parts of PDG. As discussed previously, resources for shared work have supported interagency collaboration, addressing siloes across the many programs that serve children and families. A few PDG staff noted that intentionality and commitment to collaboration, partly due to grant requirements, have built buy-in and supported project progress. As one project lead shared:

> "Before PDG, I could go to different agencies to try and change things, but the project would often fall flat. Having the buy-in of leadership and having a central project manager is huge for this work to have actual change."

A few state staff also pointed to regular meetings and communication as important for providing opportunities to collaboratively troubleshoot and leverage learning from multiple sources. Other staff noted successful practices that have supported coordination, including the planning grant, which allowed for time to reflect on and plan the work, and shared structures such as a unified mission/vision that have allowed for more aligned work.

Beyond the structures and processes, relationship-building supports collaboration and shared efforts. As discussed, several PDG staff shared that relationships are a core part of PDG and noted the importance of having dedicated resources to build relationships and partnerships. These relationships have helped to mitigate some of the challenges of interagency work, such as siloing, lack of awareness of others' work, and confusion over roles and responsibilities. Several PDG staff also commented on the value of relationship building with external partners, supported by the BUILD Initiative, which has created buy-in, developed champions, and allowed for knowledge sharing. One agency lead shared how valuable these relationships with partners can be:

> "One of the things that makes PDG successful is the building of relationships and partnerships not only from the past, but growing new partnerships as well. The role of relationships that are bi-directional and authentic are critical for external support."

Several PDG staff identified the development of authentic relationships and infrastructure for collaboration as a positive outcome of PDG work. They indicated that these partnerships make state systems operate more smoothly, which should also have impacts for families. PDG has provided an opportunity for people to practice collaboration and see its value, creating hope that it has set the stage for continued collaboration.

Relationship-building and responsive, flexible support from the state, as well as the grant's community-oriented approach, have contributed to more mutually beneficial partnerships between the state and subgrantees.

Relationships between the state and subgrantees have also enabled project implementation, especially when they focus on partnership and collaboration rather than hierarchy and control. One internal state partner shared:

"Community organizations are feeling more valued and heard as partners to state agencies. PDG gave funding and had partners take responsibility in how they use the funding. The state gave up power and trusted that community-based agencies knew what their communities need best and had funding to act on community needs."

The Community Solutions Advisory Council has also acted as a liaison between the state and subgrantees, advocating for subgrantees' needs and raising lessons learned with PDG administrators. A few project leads described the advisory council as a way to shift power dynamics and put more focus on communities.

Subgrantees also view relationships with the state as generally positive, noting that state staff have been available and responsive and that having a "point person" for the work has been useful. Some subgrantees also value the supports provided by the state, including evaluation support and technical assistance, regular meetings, mental health consultation, and support for adjusting budgets and workplans when needed. In addition, some subgrantees also value communities of practice, as they have provided opportunities to network, generate ideas and solve problems, and provide feedback to the state. For some, communities of practice and other shared events have helped develop peer relationships, though differences between subgrantees and their work have occasionally made it difficult to identify shared experiences. However, other types of subgrantees have not yet had opportunities to connect with one another.
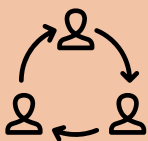
Resources and support for community-level collaboration have helped subgrantees build relationships with peers and in their communities.

PDG grants have also supported partnership building within communities. A few subgrantees described how they have developed and expanded community-level relationships—and the positive impacts of those relationships on families and communities. One subgrantee shared:

"This grant has allowed for space and time to make connections across our main partners, but also – it's starting to infiltrate into the smaller orgs/agencies that are really critical to the daily lives and conversations among community members and this is where the real benefit of coordination is going to happen."

Community-level resources through PDG, such as Community Solutions grantees and Community Resource Hubs and navigators have also supported relationships with communities.

Chapter 3:
Lessons learned

**? Evaluation question 3:
What was learned about how
and why change occurred?**

We used a systems change lens to develop the findings for this chapter. The concept of systems change lies in the idea that social problems are rooted in a complex interplay of interacting conditions that must be shifted in order to create change. These six main conditions exist, with varying degrees of visibility, in most social and environmental problems. This chapter's findings are organized around the six conditions of systems change as defined below:

1. **Policies:** Government, institutional and organizational rules, regulations, and priorities that guide the entity's own and others' actions.

2. **Resource flows:** How money, people, knowledge, information, data, and other assets such as infrastructure are allocated and distributed.

3. **Practices:** Deeply rooted activities (procedures, guidelines, or informal shared habits) of institutions, coalitions, networks, and other entities that define and characterize the entity.

4. **Relationships and connections:** Quality of connections and communication occurring among actors in the system, especially among those with differing histories and viewpoints.

5. **Power dynamics:** The balance and distribution of decision-making power, authority, and both formal and informal influence among individuals and organizations.

6. **Mental models:** Habits of thought; deeply held beliefs and assumptions and taken-for-granted ways of operating that influence how we think, what we do, and how we talk.

As the six conditions of system change are often interdependent and have varying degrees of interaction, findings appear under the section that best reflects the overall theme. However, findings in each section may overlap because of the intertwined relationship of various issues in early childhood development.

Policies
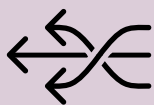
Flexibility in policies has supported PDG's ability to be responsive and adaptable to the current environment and needs of the communities served.

Existing mental models in state agencies have rigid expectations for project implementation, particularly in grants management, and are supported by policies that do not allow for flexibility and customization to needs of the communities they serve. PDG is in direct contrast to this existing mental model as it allows for flexibility in many areas of PDG implementation, including open non-traditional reporting options for diverse subgrantees, flexible funding to respond to pandemic needs, and capacity building support for organizations to successfully implement activities. For Community Resource Hubs, applicants were asked to ensure three goals were met; they could choose "the how" and the partners. As one project lead explained:

"We did not put a lot of demands on what the grant [model] needed to look like. There's not a [prescribed] model for Hubs, there are 12 different models...At end of day, what makes it successful is that organizations got to put together an application on what they wanted to do and how."

These flexible adaptations have supported PDG's ability to remain community focused and maintain positive relationships between PDG community agencies. This has not only encouraged increased commitment and engagement by community partners throughout the process, but it has also increased PDG's ability to be culturally responsive, equitable, and agile. One subgrantee noticed the difference in reporting expectations—allowing for multiple options for report formats and content—and how it has positively impacted their experience with the state. As they said:

"I have done state, federal, and national RFPs for 30 years and this has been the only grant process that I can say genuinely reflects our values. We put more work into the initiative rather than constantly having to do state reports...it's just a whole different process."
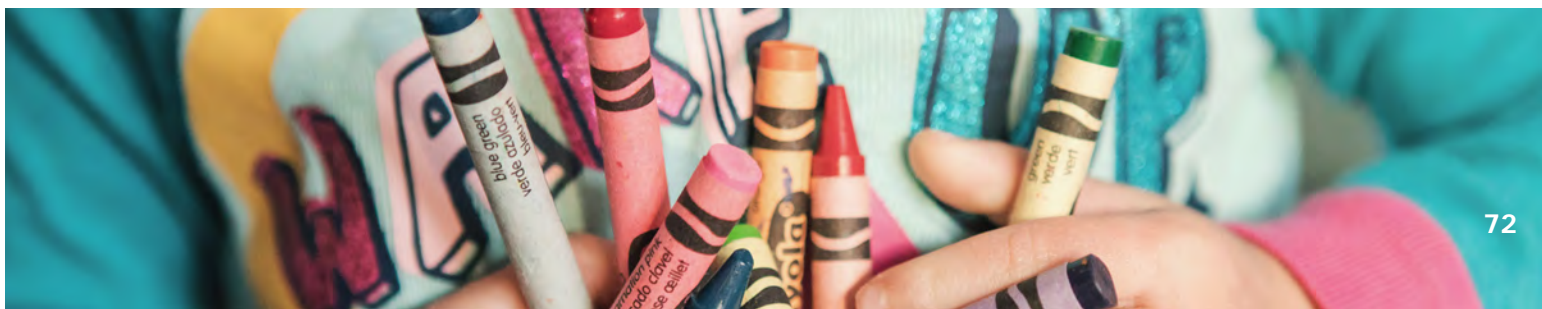
While maintaining flexibility in PDG policies for project implementation is important, many policies—particularly regarding funding streams—continue to hinder full flexibility and customization. PDG explored multiple avenues for changing policies related to grantmaking, from advance payment to reimbursement models. PDG staff understand that these policies are part of the systems that maintain inequities. One project lead reflected:

> "How do we get people paid, create reimbursement? It's challenging. We need to bring the diversity lens here too; we talk about systemic racism. But do we talk about how operations affect smaller orgs that work with specific communities? No, it is not something we talk enough about with the operations people."

Nevertheless, it is only in pursuing different and new ways of implementing grantmaking pathways that PDG has learned what policies can and cannot be adjusted. As one project lead noted, "We tried to use advance payment but lacked knowledge of the process…If we knew it wouldn't work, we wouldn't have pursued it. We asked around but nobody had done this process." Trying to get subgrantee organizations—often small and unused to state payment cycles—payment early and often was unsuccessful. Policies on advance payment and reimbursement were immovable.

In summary, PDG found multiple avenues for creating flexible policies to support project implementation and build community relationships. However, many funding policies and resulting practices could not be changed, continuing to uphold some systems that ultimately create barriers for families.

Practices

Implementing local partnerships at the citizen and local government levels has helped to center community voice.

PDG uses a community-based approach and design due to an acute awareness of the differences in needs of the multiple communities the state serves. The root of these differences varies greatly depending on the unique context of each community. This may include differences based in culture or geographic location. For some communities, these differences become barriers to accessing state resources. PDG has attempted to reduce these barriers by intentionally involving local partnerships at the citizen and local government levels to help contextualize community needs and thus better develop more effective solutions and programing. A state staff person observed the PDG practice of talking to a variety of actors at more local levels to get more effective solutions. The staff person reported, "Local partnership is central to their process."

Resource flows
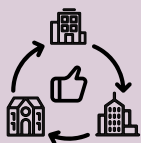
Centering interagency collaboration in state grant processes helps improve community agencies' access to grant funding and support.

The PDG model allows for the collaborative distribution of resources with funding specifically designated to support interagency collaboration. For many state agencies, this approach has helped to reduce cross-agency competition and promote a sense of comradery and unity. One agency lead shared this as a lesson to others: "If we didn't have the [dedicated] resources it [collaboration] wouldn't happen. People would be protective of their resources and would get pulled in different directions. The shared resources make a big difference."

Through this culture of interagency collaboration, PDG staff have been better able to act as a supportive system for smaller community organizations to increase their capacity and representation in the state grant process. One state staff member explains:

"Smaller agencies need more TA in terms of business, such as how to be strategic in how they budget and operate. The government has lots of rules, and in the nonprofit world you might not know them. Having somebody [from the state] to be on calls and troubleshoot [is a support]."

PDG's supportive role has helped many community agencies better navigate and understand the state grant process. For many of these organizations, this supportive role has persisted even after the grant award, with many wanting support throughout program implementation. One subgrantee affirmed, "The state should continue to offer support in navigating resources and clarifying requirements and language."

The combination of increasing access to financial resources and subgrantee-led design of what to do with those resources creates the conditions for changing state systems toward greater equity.

PDG's grant model has allowed community agencies to design programs that are more in line with both their organizational capacity and community needs. This is in direct contrast to the normative practices of many traditional state grant programs. One subgrantee illustrated this, saying: "What I liked about this one [grant] was that we had the opportunity to create the program and to listen to the community about how they want their program."

When community agencies design and mold programming in the grant process, state agencies demonstrate their respect for community agencies' understanding of community needs. This enforces the message that they are true partners, which empowers agencies to make the decisions required to better meet community needs. State staff described these benefits of sharing power around resources with community organizations. This has directly affected what work was done and with whom.

For many community agencies, the freedom to choose how funding is used not only supports the implementation of program activities but also helps build the capacity to serve communities better. In fact, many subgrantees have used PDG funding to add needed staff to help strengthen the ways they serve their community. As one subgrantee shared about being able to fund more staff: "It has allowed us to serve women better and make sure their families have what they need."

From the planning phase, PDG was designed to address disparities Minnesota residents face due to systemic processes that reinforce them. As a result, PDG acted intentionally in grant fund distribution to ensure it increases equity. One agency lead explains:

"Equity in grantmaking. That was one thing that the main activities tried to focus on. Enterprise-wide, not just MDE. What does equity mean for pools of money, applications, the RFP process, etc.? There was a whole report written with a focus on serving more grassroots organizations, a focus on the American Indian community. It was about being cognizant of communities served and that different parts of the state have different needs."

Throughout the grant application process, PDG actively supported diverse and grassroots community agencies in applying for grant funding. This included being flexible in grant application timelines and being proactive in reaching community agencies that are often overlooked in the request for proposal (RFP) process. As one

PDG director shared: "If a state agency wants culturally specific providers (such as for the Community Resource Hubs) you need to be really clear about that in the RFP."

This PDG practice of being intentional in reaching out to and supporting applications from grassroots and diverse community agencies in the RFP process is a change that can have significant community impact. It also reflects the values and principles that have been built into the core of PDG. As one project lead stated:

"Our work gives funds to organizations that for decades have needed funds. PDG was founded on needs assessments. Something that has been said is that communities have solutions, but they need long-term funding. That success is reflective of agencies recognizing the importance of funding the right organizations; bigger isn't necessarily better. This change is a way to make sure that we are reflecting our values in the RFP process."

Coordinating eligibility and streamlined access for families requires massive financial investment and IT expertise.

A significant and continued challenge in PDG implementation is the difficulty agencies face in sharing information. This results in duplicative processes that families must complete in order to access resources and services. As one state staff person observed, "There has been a lot of talk about building multiple systems to benefit families... Since all agency systems work differently, it is 'beg, borrow, and steal' to get new systems done." To better support interagency information sharing, PDG attempted to establish a data portal that would automate the process of service and eligibility coordination across agencies. Beyond the legal challenges described in Chapter 2, the PDG team learned more about what IT expertise and resources were needed to bring this vision to reality.

PDG learned that involving IT experts with various skills early in design (e.g., those with knowledge of the different departments' existing systems as well as new options), funding IT staff to commit time to implementation, and substantial financial investment to support the required infrastructure was all needed to implement such a large goal. As staff raised, the lack of technical support was not the only problem PDG faced in establishing the data portal. PDG's complex needs in data sharing required infrastructure that was equally complex and costly. As

an agency lead described, "As the scope got clearer, there still wasn't enough funding...to make it happen. The infrastructure technical solutions are very expensive." With limited time and funding dedicated to IT within the state system, PDG struggled to find the means to address these issues. A state staff person articulated the problem:

> "PDG has a hard time fitting into established IT priorities. The state agencies have limited IT resources and the different funding systems are not in alignment. The core operating staff...need staff to develop, maintain, and provide local engagement for the new system, so you need a whole new product team. You need a permanent PDG team to support the product but with temporary funding."

The importance of including IT personnel as strategic partners in initial program planning and throughout iteration is a critical element of technology-focused infrastructure changes. In reflection, both internal state partner staff and leads spoke of the need for even more collaboration between MNIT (both central and department level) and PDG agencies. This suggested that formalizing a leadership role with a staff member from MNIT as part of the agency lead team might have created the necessary depth of problem solving needed to better implement the portal.

Practices, relationships, and connections

The collaborative frameworks built into PDG implementation practices have facilitated strong interagency communication that supports better community work.

Practices that encourage consistent and intentional communication between different agencies have supported interagency collaboration in PDG. More specifically, two communication practices have been instrumental in the support of relationships and connection-building: the use of feedback loops at multiple levels of PDG and the establishment of regular state-to-community and community-to-community agency meetings.

The use of regular meetings across state agency staff is an important practice that has strengthened relationships and promoted strong collaboration

The PDG grant manager has hosted interagency meetings as a regular practice throughout the duration of PDG to increase opportunities for communication between state staff. Though the agency leads are responsible for making sure their agency and teams understand what is

going on, these meetings have been crucial in addressing divisions and silos within state and community environments. One agency lead explained: "I spend a lot of time communicating both within and between our agencies. State government is a hierarchy so we need to make sure everyone has the information they need." Project leads who participate in their monthly group meeting have noticed the benefit of participating. They described not only the value but also the environment that is created; as one noted, "The structure of convening multiple state agencies has been really helpful. It's a collaborative environment in how we give feedback and I have felt that it's more informal." Others noted the "informal" nature of the meetings, observing that taking time not only to get reports on each other's work but also to share what is happening in their community or personal lives are keys to success. For state staff, the importance of regular agency meetings is in facilitating interagency communication as well as promoting networking. They have seen that this focus has in turn helped reinforce trust, commitment, and collaboration.

PDG agency leads have used the state hierarchy to organize pathways for efficient communication. For example, the agency leads have facilitated a monthly combined check-in with directors of their respective partner agencies. This has furthered interagency coordination and networking while also creating space for multiple perspectives. One lead observed that regular access and connection to their immediate leadership has helped to further champions for the work. In addition, they learned that the group approach created a sounding board for new ideas while simultaneously offering an opportunity to get permission to implement the ideas due to the presence of decision-makers.

Other senior leadership (e.g., assistant commissioners) engagement in meetings has been less consistent; they are convened on an "as-needed" basis. Though PDG staff recognize the value in having champions at the highest levels of their agencies, as one lead described, they have not yet found "the right balance of when to involve leadership and at what level." However, overall agency leads report that ultimately they feel these leaders are responsive when called upon and have communicated their trust in the leads to be decision-makers.

While interagency communication is at the core of regular agency meetings, for many community and state agencies, regular agency meetings also provide a unique space for interagency learning. As many facets of PDG are new and contrary to existing models, regular agency meetings provide an opportunity for many agencies to share best practices that can be translated into areas of existing work. One project lead explained, "I take very seriously that this is a learning grant and trying to track lessons learned and bring it forward. Things I would do differently going forward—building training pieces. I am putting in more specifics now that we have an idea of what worked well and what didn't."
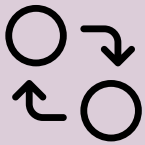
PDG's establishment of regular and intentional space to collaborate has helped to support relationships and connection building between the state and subgrantees and among subgrantees.

Many PDG activities have also further supported this culture of relationship- and connection-building between state and community agencies. As a project lead emphasized, "So many new relationships were established between the Hubs and Help Me Connect work, including with community organizations." These regular and frequent opportunities to connect have not only helped organizations share resources and knowledge but also create deeper bonds that increase commitment and support. For many subgrantees, the support and goodwill provided by these connections have helped them navigate and overcome challenges in meaningful ways. It has helped them build friendships and relationships that persist outside of PDG. One subgrantee described:

"It is nice to get to know like-minded individuals and make friends through this. It has been great to come alongside individuals doing this work and support one another. Some people have had trials and crises, it has been nice to be able to come together through those, even offline. Being a department of one in my own organization, it is nice to have contact with others doing similar work, to touch base and brainstorm and know you're not alone."

It has also helped build strong lines of communication that continue to support existing and future work. In fact, some subgrantees are planning to maintain these connections even after PDG is done. A subgrantee reflected that now the relationships are built and colleagues are seen as partners, they have realized how important and helpful it is to "keep our communication lines open with our partners."

Subgrantees described their practices of prioritizing relationships with their partner organizations, stating that having a regular meeting structure has helped them connect to resources that were not previously accessible. Resources have helped equip these organizations with the tools and knowledge needed to address various challenges and barriers. One

subgrantee reflected on how critical the initial and ongoing meetings were as they established partnerships for their PDG work. As this person said, "It was really helpful to have that personal 1-1, where they share this is who we are, this is what we do....You almost have to revisit those conversations to keep thinking about who offers what and how we can better coordinate, otherwise we forget."

The individualized support PDG staff have prioritized with community organizations to increase equitable access to funding has furthered the relationship-building that they value. Project leads noted the benefits that this commitment to relationships has brought: individualized awareness of need; a foundational concept for addressing equity; facilitating problem solving when issues arose; and exchanging knowledge.

While many subgrantees are committed to continuing this culture of relationship- and connection-building after PDG, many also hope that state agencies and PDG will continue to lead this effort. State and local organization staff recognize that facilitating these meetings and connections requires significant resources. Without prioritized funding to have someone coordinate, subgrantees also recognize the difficulties of trying to keep up the relationship-building. As a subgrantee reflected, "It can be a full-time job to keep up with connections."

While the role of state agencies in future collaborative efforts after PDG is ambiguous, the intentional establishment of opportunities to build relationships and connect has been instrumental in supporting trust and commitment by all agencies involved.

Power dynamics

The **Community Solutions Advisory Council has improved power dynamics between the state and communities due to shared decision-making in the RFP design and selection of community grantees.**

Creating the Community Solutions Advisory Council was a significant move to help redistribute power to the community. The advisory council is made up of racially and geographically diverse parents and individuals with experience working in early childhood education and racial equity. Council members have the freedom, support, and power to take the lead in the RFP process, helping to center community voice and needs in grantee selection. A project lead described how it can change state systems:

"The advisory council has a lot of power. That structure of having a council co-create RFP, select grantees, co-manage grantees, is a very unique model. Different from other grant funded programs, it can lead to more focus on communities actually impacted. It has been a big plus point for us to move forward. We have momentum now about health equity within state agencies."

PDG staff recognize that this model is directly intended to shift power. One of the major implications this group tested was changing who made decisions in the RFP process and ultimately made decisions about resource flows (i.e., which organizations got funding). One project lead reflected, "This was a power dynamic shift where we were equal partners and the council drove the changes."

Despite PDG implementing several practices for the state to share power with communities, staff recognize that more work and time is needed to fundamentally change state culture and practice.

While many community agencies saw and appreciate the new ways that the state has shared power—organizations designing their programming, the council having oversight of a funding stream—they recognize that this is in the context of PDG specifically. As a result, without broader commitment from state agency leadership, legislators, and the governor, these power sharing practices will continue to exist in isolated instances. Moreover, as an agency lead raised, the ultimate intended outcomes of power sharing—decreased disparities among Minnesota families—will not be realized for several years, well beyond the PDG term and evaluation.

Just as the state is shifting the power of program design to local organizations, so subgrantees are shifting power to families who are experts about their own experiences.

In addition to tailoring project activities to community needs, centering community voice in project design also helps to give community members the tools they need to make necessary changes in their lives. Subgrantees gave multiple examples of how they designed their work by

talking to those they intended to serve. In other examples, subgrantees illustrated how their work is systematically about supporting families in knowing what is best for themselves. A subgrantee offered the following example:

"Empowering the parents has been one key intentional focus – constantly reassuring their participants and parents that they know their child best while also giving tips they can use. They [staff] want the parents to trust themselves and that they know what their child wants."

Disrupting institutional power dynamics of "knowing what is best" for communities has impacts beyond just those directly participating in PDG-funded work. For many families who feel increased empowerment, there is a trickle-down effect that has a long-lasting generational impact; this is an important step in stopping cycles of disruption and harm. A subgrantee raised this concept: "I think one of the most important parts about empowering parents is that empowered parents raise empowered children and these are the future of our nation and the future of our city and communities." When community members are empowered through participation in supportive programming, they build the confidence and skills to take power back and begin to take the active roles needed to lead their own transformation. As these community members effectively model change in their own lives, they also pave a path for many others to do the same, building resiliency and strength within their communities. As one subgrantee reflected:

"We've seen transformation among many of the women in it [the Indigenous Parent Leadership Institute]…They found their voice and can't wait to use their voice and can't wait to start another cohort and be mentors to another cohort…They're not going to wait for anyone else to bring something to their community – they're ready to make things happen in their community."

Mental models

PDG has shifted state mental models from "family beneficiaries" to "family partners."

Traditional mental models within the state often place community members as beneficiaries of services from the state, an attitude that connotes a need for community to be "grateful" to receive help. In this relationship, community organizations (e.g., subgrantees) are often simply a means to an end, expected to meet prescribed goals that reflect a belief that "one size fits all." PDG has designed and implemented a series of practices that simultaneously shifted this "expert" mental model and reinforced what it takes to place families at the center. A state staff person observed this shift, saying, "Before it was like, 'we are the professionals and know what is best for families.' PDG has shifted our thinking and we are involving families in every decision because we are building a system for them."

The impact of this mental model shift has allowed state agencies to not only change practices to better empower community voice but also has helped state staff themselves understand the importance of viewing community members as partners rather than beneficiaries. PDG practices have influenced both PDG staff as well as those of their partners, demonstrating both an appetite for change and ripple effects beyond the grant. For example, a PDG state partner staff listed a seminal set of practices that led to their own mental model shift and how they are incorporating it into their other (non-PDG) state activities:

"In the past, we would decide on the targets then talk to our advisory council. Because of the modelling from PDG, we held over ten listening sessions, with community partners, interpreters, cultural liaisons, families, providers, interagency partners, and everything we created came out of those listening sessions. The targets and strategic plan were derived from community input. PDG helped me understand that I need to listen to families, quote families, and list the context in which the families are speaking."

The relationship-building focus is another effort that has strengthened and moved mental models for both PDG staff and subgrantees. Through staff collaboration, the message of centering families has been reinforced by others' examples of what they have done to achieve this goal. As shared in subgrantee conversations, organizations saw increased benefits to collaborating as partners to support families rather than competing for resources.

> **?** **PDG challenged traditional mental models of siloed, program-specific support to communities through its** interagency agreements and promotion of interagency collaboration.

Historically, the use of multiple different funding sources and differences in funding reporting requirements, deadlines, and processes between state agencies perpetuated a system of agency siloes. Though collaboration and interagency examples exist across the state, PDG efforts deepened examples of practices and strategies needed to be successful. As PDG strategies relied heavily on interagency efforts, incorporating collaborative practices and strategies at the core of all programing design and implementation were essential to success. Placing collaboration at the forefront of program planning and implementation was an approach that challenged existing mental models of how work is conducted at the state. As one project lead described, the intentionality of interagency collaboration was a core factor in PDG's success.

While many state and community organizations have benefited greatly from this collaboration-focused approach, persistently siloed interagency information-sharing practices continue to be a barrier to successful collaboration. This impacts many community agencies' ability to fluidly provide access to resources for many community members. As a subgrantee lamented:

> "It's like sometimes our systems don't really talk to each other, and that's something we're exploring as a county. Why does a family who's on medical assistance insurance and presumptively eligible or adjunctively eligible for WIC, why isn't that streamlined? Looking at our MN benefits application, why aren't all the other things listed there? Some sort of automation or benefits eligibility is something that I think the state would benefit from hearing from us as Hubs long after the grant ends or whatever remains as a Hub."

PDG's use of interagency agreements, its focus on agency collaboration, and the enforcement of supporting practice have helped to encourage interagency communication and reduce siloing in state agencies. This mental model shift is important in ensuring project sustainability and increasing community agencies' ability to successfully help their communities.
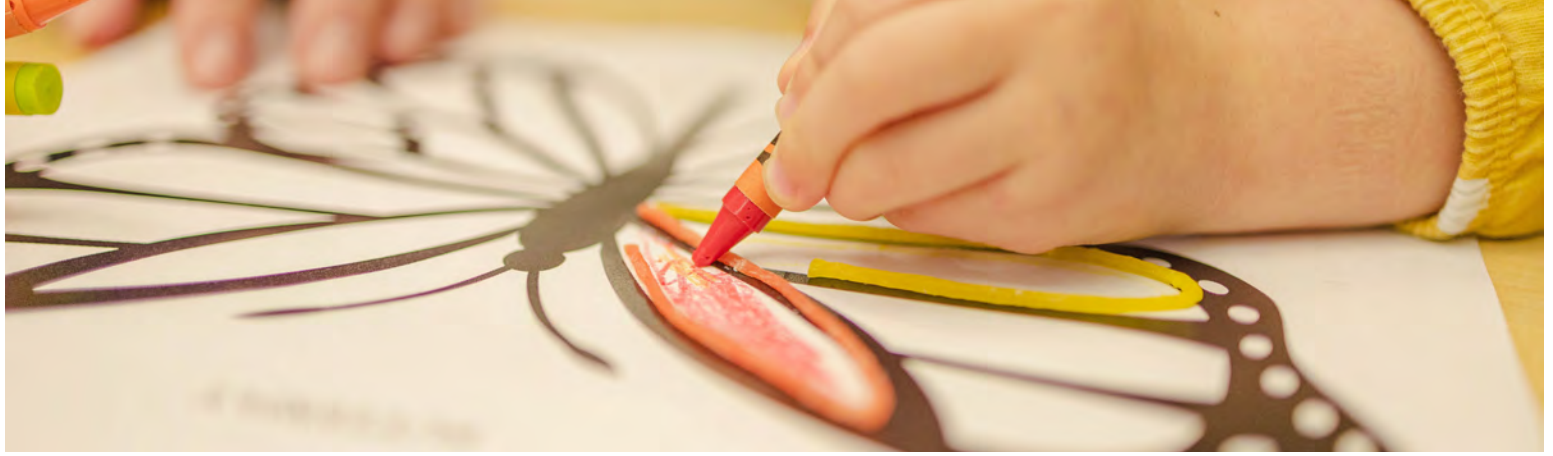
PDG staff members' mental model—a belief that bureaucracy can change—has helped to push project work forward in the face of complex systems and bureaucratic change.

PDG staff have faced substantial barriers in project implementation. Yet, several staff reported observing optimism and persistence among PDG staff and credited this outlook with what it has taken to make incremental and larger changes at the state. This belief system—or mental model—that things can change serves as evidence among the PDG team of the importance of attending to mental models in order to create systems change. As a project lead observed:

"Having optimistic team players have been the only reasons this has moved forward. Pessimism can come too quickly and defeat everything. There's always something that's optimistic. People always tell me 'This is hard work," but it shouldn't be. Is it hard work or do we need a change of staffing with a fresh view and fresh questions? We need a voice of optimism to push the work forward."

Evaluation question 4:
Who is better off as a result of PDG activities and in what ways?

While PDG has benefitted the staff at state agencies who were able to partner, families benefited from increased collaboration to eliminate structural racism and inequities as well as attention to community-developed solutions. During family focus groups, families discussed their experiences accessing services from PDG subgrantees and non-PDG-funded organizations. Findings from family focus groups fell into three main categories:

- Families' experiences with PDG-funded services
- Families' experiences with other services
- Cultural responsiveness

Families discussed both successes and challenges in terms of PDG-funded services, other services, and cultural responsiveness.

Families' experiences with PDG-funded services

Through Community Solutions, Community Resource Hubs, and Help Me Connect, PDG has benefitted Minnesota families by providing services, resources, and supports, including connecting families to other local service organizations. From July 2021 to September 2022 of the grant, Community Resource Hubs reported that 9,698 family members (i.e., parents, guardians, caregivers, and grandparents) came to Community Resource Hubs sites. By the end of 2023, Community Resource Hubs referred 5,011 of these families; 36% (1,815) of these referrals were successful, meaning the family received the service or resource they requested. As later demonstrated in Chart 3, Community Resource Hubs served disproportionately more Hispanic, American Indian, and African American or Black individuals than the state population, which is discussed further in the "families' experiences related to cultural responsiveness" section below.

Most of the families who participated in a focus group learned of the focus groups from Community Solutions grantees. Therefore, families discussed their experiences with Community Solutions grantees more than their experiences with Community Resource Hubs. Many families reported that Community Solutions grantees have improved their lives by providing supports for immediate needs (e.g., temporary child care or supplies such as groceries, strollers, and school supplies), and others said the same about supports for long-term needs (e.g., higher education, parent education, mental health). Community Solutions grantees have also made families feel welcome. However, a couple of families experienced challenges with PDG-funded services.

Successes with PDG-funded services

Families have had positive experiences with Community Solutions and Community Resource Hubs, which have helped them access programming, especially related to parent education, support for adult education, and getting transportation, food, and child care.

Many families participated in parent education courses led by Community Solutions grantees, which they view very positively. For example, an American Indian parent who participated in an Indigenous parent leadership initiative described it as a life-changing experience that has helped her have a voice to support her child, as well as confidence in her parenting. Additionally, one parent who speaks Spanish described the impact that a Community Solutions grantee, including its parent education program, has had on her life:

"[Community Solutions grantee] definitivamente ha sido una bendiciòn para nuestras vidas porque nos ayudaron mucho en buscar este recursos ya que yo venìa aquì sì sin nada…he estado en muchos cursos en inclusos que la verdad me han ayudado mucho en entender còmo funciona acà el sistema financiero de renta de casa, mèdico. Entonces, sì, ha sido una gran bendiciòn [Community Solutions grantee]."

[A Community Solutions grantee] has definitely been a blessing for our lives because they helped us a lot in finding resources since I came here with nothing…I have been in many courses that truly have helped me a lot in understanding the financial system, renting homes, and the medical system. So, yes, the [Community Solutions grantee] has been a great blessing.]

A few Indigenous families and families who speak Spanish shared that Community Solutions grantees have helped them further their education as they pursued English classes, a GED, or a college degree. Grantees provided support and supplies, such as college tutoring, a laptop, and school supplies. For example, one parent mentioned:

"Otro gran apoyo fue que me dieron un laptop para estudiar y continuar mis clases de inglès, antes estudiaba por mi celular y es mucho mejor con la computadora."

[Another great support was that they gave me a laptop to study and continue my English classes. Before I used to study on my cell phone and it is much better with the computer.]

Furthermore, a few families expressed appreciation for Community Solutions and Community Resource Hubs. For example, a couple of Spanish-speaking families appreciate Community Solutions grantees' ability to provide resources to enable families to access programming and services. A couple families that do not drive mentioned the importance of a Community Solutions grantee providing transportation. One parent said that the grantee has longer hours than other organizations, which is helpful to her as a working mother while another parent also mentioned that this grantee provides child care and food while she uses their services. A couple of parents also shared that staff at a Community Resource Hub that offers temporary child care have been understanding and supportive; as one parent mentioned, "They were like, 'You need a break and it takes a village to raise a child...' I never realized how hard it was to be a mom."

A couple of families mentioned Help Me Connect as helpful because it provides many resources. The site currently has 11 top-level categories that visitors can use to explore services and programs.[13] Analytic data show that the five most frequently visited categories are: (1) Developmental and Behavioral Concerns, (2) Early Learning and Child care, (3) Basic Needs, (4) Healthy Development and Screening, and (5) Family Well-being and Mental Health. More specifically, the top five key word search queries are "autism, housing, transportation, diapers, and food." These terms highlight what PDG has recognized: Early childhood development connects to a variety of needs, and that families want services—like housing or diapers—to be easy to access. See the **Appendix** for a breakdown of Help Me Connect use by county and by Community Resource Hubs focus area.

Community Solutions and Community Resource Hubs have successfully made families feel welcome.

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[13] Please note that Help Me Connect was piloted to the public in May 2021 with more widespread marketing and communications about the website in August 2021. While the initial launch of the website was intended for providers who work with families, the audience was later broadened to include families with young children themselves.

According to their Year 1 Annual Report, Community Solutions grantees understood the importance of building strong, trusting relationships with communities and hiring "culturally congruent staff." Staff from Community Resource Hubs also shared the importance of being welcoming and accepting of all heritages and cultures with the goal of meeting families where they are and being a safe place for them to find beneficial tools and resources. Families felt the impact of these efforts. As reported by almost half of families during focus groups, Community Solutions grantees and Community Resource Hubs have helped historically marginalized populations, such as immigrants and people who speak a language other than English, feel welcomed and supported. For example, some families shared how a Community Solutions grantee offers programming and services in Spanish, which is essential for new immigrants speaking that language. As a parent shared about the welcoming and empathetic environment provided by the Community Solutions grantee:

"Una de las cosas que me encanta de [Community Solutions grantee] es que las personas que trabajan para esta organizaciòn tienen mucha empatìa. Nunca ha encontrado alguien que se refiera grosero o no sè en lo personal. Siempre estàn dispuestas a ayudar. Si no contestan, regresan la llamada lo màs pronto. Siempre estàn buscando què hacer para poder apoyar a la comunidad."

[One of the things I love about [Community Solutions grantee] is that the people who work for this organization have a lot of empathy. I have never found someone who refers to me rudely or I do not know personally...They are always willing to help. If they don't answer, they return the call as soon as possible. They are always looking for what to do so they can support the community.]

A few families have experienced challenges with PDG-funded services, including inability to care for children who need extra help and long waiting lists.

While families largely described positive experiences with Community Solutions and Community Resource Hubs, a few families discussed challenges with these services and programs. One parent shared that a temporary child care that operates as part of her local Community Resource Hub was not equipped to care for children that need "extra help." The nursery removed the child and did not connect the parent to other programs to assist with child care. A member of a different family mentioned that she had to wait a long time to be connected to a therapist through a Community Solutions grantee.

While Help Me Connect has been a helpful resource for a few families, one parent noted that the various webpages take a long time to navigate and include incomplete information. At the time of her search, she could not find her local Community Action Agency listed as a resource. The winter 2021 and spring 2022 Community Resource Hubs quarterly data reflected this experience: Hubs acknowledged that Help Me Connect can be overwhelming for families and lack other resources that staff know are available in the area. As described in earlier sections, Help Me Connect continues to build and make improvements as feedback is received from families, providers, and subgrantees. This iterative approach both explains how families may still not find the information they seek while also recognizing that feedback—such as this report—continues to inform improvements to the website.

Families' experiences with other services

In addition to accessing PDG-funded services, families who participated in focus groups mentioned using a variety of services available outside the grant. Families discussed their successes in finding and using services. A few families also discussed how they are involved in their local community. However, many families have experienced challenges and barriers to accessing and using services, such as not being able to find the resources they need or struggling with the paperwork and documentation necessary to apply for services.

Community Resource Hubs tracked the services families requested starting on April 1, 2021, and reported them quarterly to the state. In review of this data through June 30, 2022, the services requested fluctuated each quarter, with most services requested increasing slightly over time. Food, affordable housing, financial assistance, and family well-being requests were most requested over time. Chart 3 describes the change in the median number of service requests across all Hubs by quarter. See Appendix for changes in services requests by Hubs grantee.

Chart 3: Median number of services requested by clients among Hubs' grantees[14]

Legend:
- Food
- Family Well-being
- Affordable Housing
- Transportation
- Job Search
- Healthcare
- Financial Support
- Financial Assistance
- Disabilities
- Childcare
- Legal Services
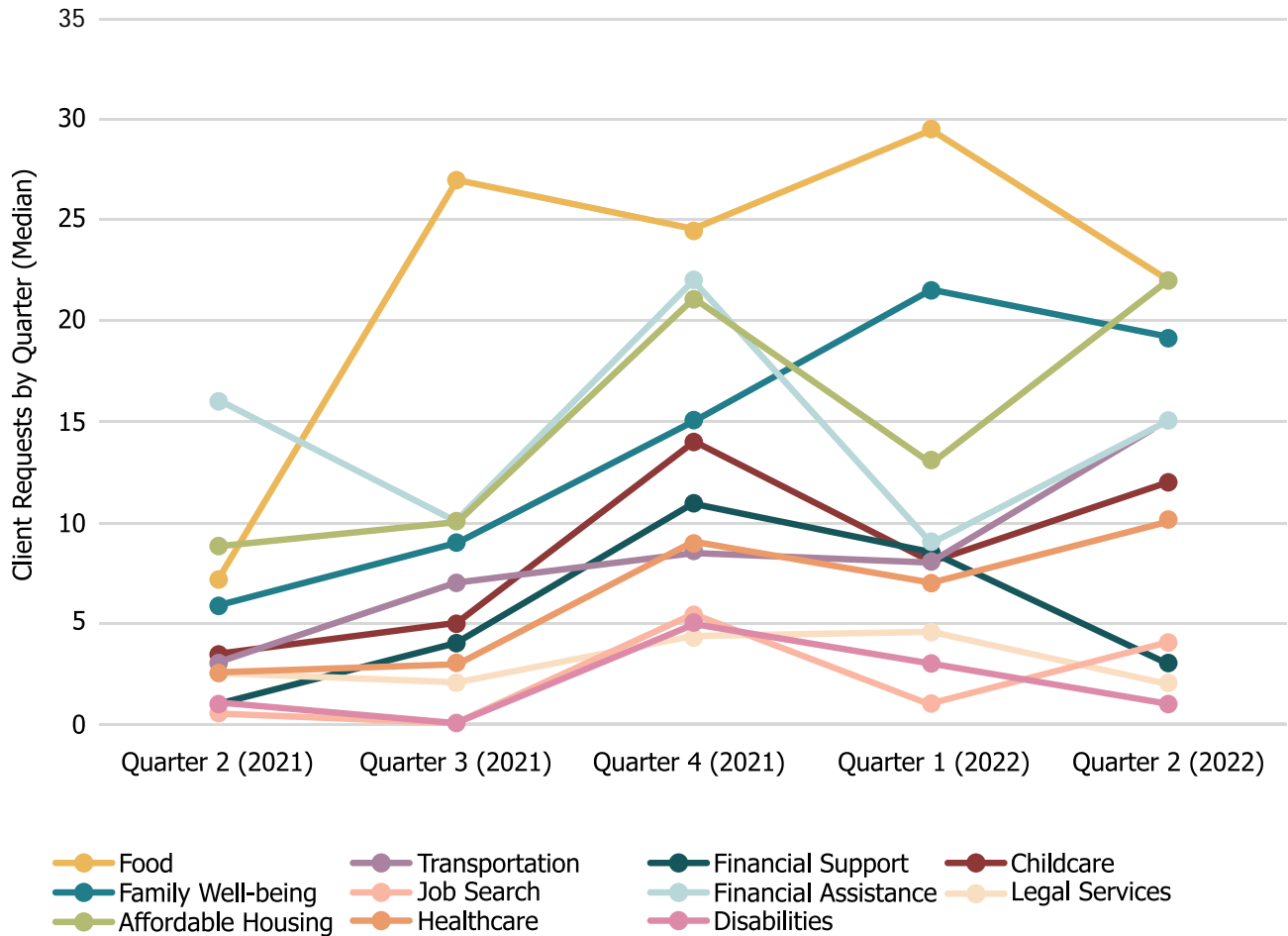
Successes with other services

✓ **Some families have been able to successfully find the services they need.**

Although some families reported learning about available resources and services from friends and family, a slightly higher number reported learning about available resources and services through local organizations (e.g., Community Solutions grantees, Community Resource Hubs, etc.). One parent shared that her county and local organizations have worked together to inform families about services and programs. She explained that the county goes to events and community gathering spaces, such as the Children's Museum, to advertise services. Another parent mentioned using a "referrals and resources book" from a local organization to find services. Additionally, one parent noted that her social worker sends her resources via email; this parent remarked that she has been sent even more resources during the pandemic.

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[14] Note: Median is used to summarize these data instead of average due to the wide-ranging number of clients and requests served by each subgrantee. This wide range skews the average calculations; thus the median is used to summarize service request data.

Services have successfully met some families' preferences.

Some families reported being pleased with the early childhood services and programs they accessed. For example, one parent was able to find a Spanish immersion preschool program for her child, which aligns with her values, language preferences, and traditions. Another parent participated in Early Head Start home visiting and appreciates that the service provider came to her house. The service provider shared many developmental milestones, and the parent thinks that is a helpful guide to have as a single mother. The service provider also conducted developmental screenings for her child.

Some families also reported having positive experiences using health or mental health services. Of these families, a few mentioned they regularly used health services (including pediatricians) and appreciate the level of care they have received. One parent shared that she has enjoyed her weekly maternal health visits from the local Community Action Agency because they have given her an opportunity for social time with another adult.

Some families feel empowered to make changes to services in their community and/or be leaders in their community.

Some families discussed how they are involved in their communities. For example, these families mentioned making changes through their local Head Start program or school system. A few families described making changes to services by being advocates for their children during early intervention assessments and services. A couple of families also said they are board members of local organizations.

Challenges with other services

Many families described challenges when accessing services, especially early education and child care programs, early intervention services, and health services.

Many families described challenges related to accessing services. Some described barriers to learning about and enrolling in services, such as not knowing what services exist or where to find them. For example, a few families described wanting a service that could educate their extended families about autism in Hmong, and one parent was unsure where to find a financial planning service.

Some families shared that paperwork makes enrolling in services challenging. Although families generally mentioned that there is a lot of paperwork, one parent specifically highlighted that her disabilities make it difficult for her to complete the forms. Additionally, a parent who has experienced homelessness noted that housing assistance is particularly challenging to apply for because it requires people to list everywhere they have lived in the past couple of years. A few families described how providing documentation (e.g., birth certificate) was also challenging when enrolling in services. For example, one parent shared:

> "Our hardest step so far is they [childcare assistance] need a birth certificate for both of our kids. We were in the middle of COVID with our first son, so the courthouse was shut down and they didn't have any notaries, so we couldn't get his birth certificate notarized. So, we couldn't send that in. And now, because it's so late, we have to pay even more of a fee to get his birth certificate. And the same thing with our youngest...so now it's gonna be even more expensive just to get the birth certificates just to get childcare assistance. And so they're [Community Solutions] helping us with affording it...trying to find out the best way to get it without having to spend $200 out of pocket just to get it [the birth certificate and childcare assistance application]."

A few families, including three Hmong families, described difficulties finding early intervention services. Similarly, Community Resource Hubs acknowledged a need for early childhood mental health services in the Spring 2022 PDG Quarterly Survey.

Families also described other barriers to or challenges with accessing and using services, which included:

- Long waiting lists or waits for services, especially mental health supports, early intervention services, case management services, and daycare assistance
- Lack of translated materials
- Shortage of providers, especially for early intervention services
- The COVID-19 pandemic (e.g., lack of in-person services, lack of services following strict COVID guidelines)
- Lack of on-site child care
- Government assistance programs not providing enough assistance to meet families' needs
- Long waits for an over-the-phone translator when calling insurance.

A few families mentioned that affordability is a top concern for accessing child care. One parent mentioned that being able to afford child care would open up educational and job opportunities for parents as well as participating in culturally important activities, like ceremonies. Another parent also stated that the programs offered to help parents afford child care may be lacking:

> "[These programs are] very challenging because when they're based on income, they're not considering that most of your income is already going to childcare. I wish that some of these programs were also looking at the whole scope of what you're already spending so we could access more services and we aren't battling with what we can do and what we can't."

A few families reported other barriers to accessing child care services including lack of culturally responsive providers and providers who could accommodate children with disabilities.

Families' experiences related to cultural responsiveness

In Minnesota, households with young children are more racially and/or ethnically diverse than the overall state population. Similarly, and as part of intentional program design to advance racial equity, Community Resource Hubs served disproportionately more Hispanic (30%), American Indian (14%), and African American or Black (12%) families than the state population. See Chart 4 for a comparison between the general population and who Hubs served.

Chart 4: Race/ethnicity of **individuals served by Hubs** compared to **MN households with children under 5 years old**[15]

Legend: MN population estimates | MN households with children under 5 | Individuals served by Hubs2
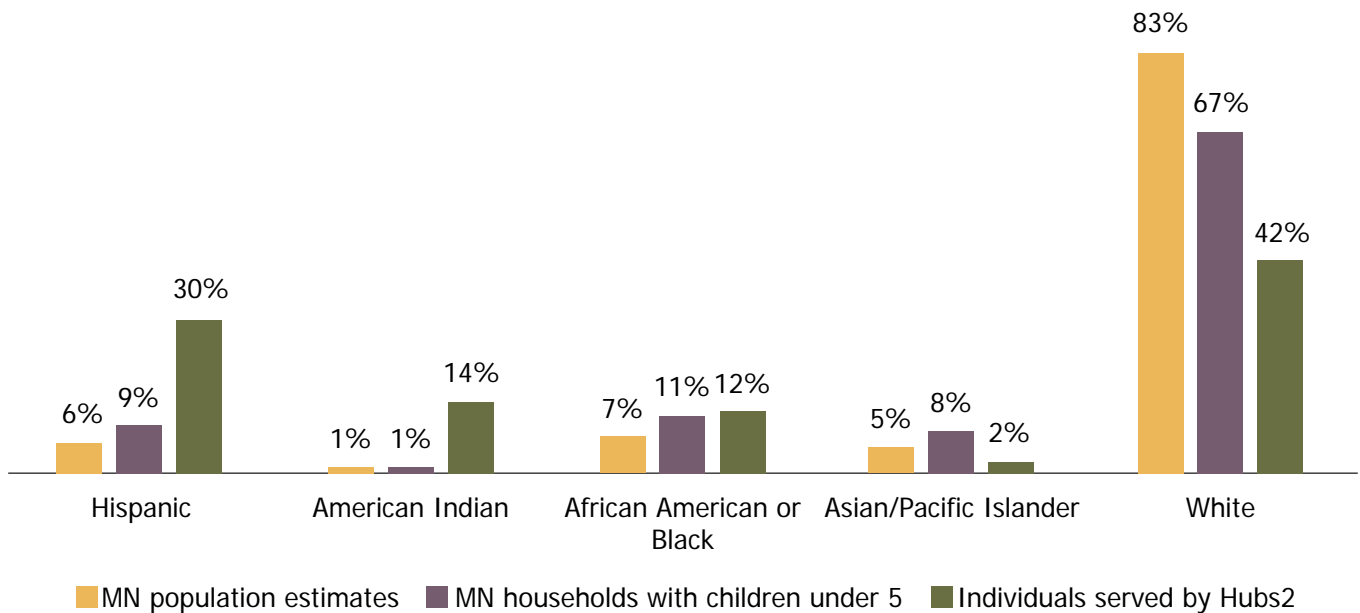
Most focus group participants were BIPOC and/or spoke Spanish. Many of these families discussed whether services are culturally responsive. Families provided specific examples of how services either align or do not align with their background (e.g., race/ethnicity, family structure, etc.), and suggested increasing the racial and ethnic representation of service providers and local and state leaders.

Successes with cultural responsiveness

→|← **Nearly half of families said that services align with their background.**

Many families mentioned that the services and programs they use are culturally responsive. Families provided examples like preschool programs that recognize their family structure, service providers that are the same race/ethnicity as them, in-home services for families who do not drive or live in a rural area, and services in the languages families prefer. Families tended to describe local services (e.g., Community Solutions grantees, local referrals facilitated by

[15] Sources: Hub Quarterly Surveys for Y2Q2-Y3Q2 (April 2021-June 2022); U.S. Census Bureau, American Community Survey 2019 (5-year estimates) for data for MN households with children under 5; U.S. Census Bureau (2021) for MN population estimates.

Note: We used 2019 American Community Survey data due to data quality issues with the most recent data collected in 2020. The 2020 data collection was heavily impacted by the pandemic, causing the Census Bureau to release experimental estimates. Most notably, the 2020 data undercounts folks who may be less likely to complete the survey, specifically households with lower socioeconomic status.

Community Resource Hubs, child care programs, Community Action Agencies) as aligned with their backgrounds. One parent who speaks both English and Spanish said:

> "I've seen so many steps forward in consideration of people who speak a second language. When I came to Minnesota 12 years ago, everything was in English or things that were translated were very bad...it kind of got the scope but was hard to understand. I've seen many things improve. Different organizations want to connect with people from other cultures, so I think we are moving in the right direction. And the most important part is willingness, which I see."

Some families indicated that the most important aspect of determining a good fit is if the provider takes an interest in their family and their family's culture. A few parents said that one of the reasons they chose to use resources from a specific Community Solutions grantee was because the organization understands their culture and offers services in Spanish and staff that speak their native language. As one parent mentioned:

> "Hay muchas organizaciones que hablan español, pero como que no estàn familiarizados con nuestra cultura. Entonces es como, como que se nos hace un poco màs difìcil. Y pues, la mayorìa de los que trabajan en [Community Solutions] que hablan español, sì, estàn familiarizados con nuestra cultura. Entonces eso es lo que lo que mi familia busca, que nos podamos entender."

> [There are many organizations that speak Spanish, but they are not familiar with our culture so it's a little more difficult for us. And well, most of those who work at [Community Solutions grantee] who speak Spanish are also familiar with our culture. So that is what my family seeks, that we can understand each other."]

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Challenges with cultural responsiveness
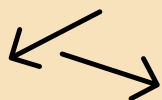
Some families have experienced services that do not align with their backgrounds and are not culturally responsive.

Some families have accessed services that they feel are not culturally responsive. These services are usually from organizations managed outside of families' local communities or by county or state agencies. For example, one American Indian parent expressed frustration that receiving Temporary Assistance for Needy Families (TANF) through the county did not allow her cultural, religious, or spiritual activities to count as work or education hours. If she had accessed TANF through the Tribal government, these activities would be counted. Additionally, one American Indian parent shared:

> "Working with county human services — it's a lot harder working with them...the way they came off towards you when you walk in the door. It doesn't seem they really care or take into consideration something you're going through and that you're needing help."

All Hmong parents who participated in the focus group shared multiple specific examples of how the services they have accessed for their children with autism do not align with their culture. One parent wishes more service providers were individuals of color. Another mentioned that although providers might translate documents into Hmong, this misses information sharing among those who are not literate in Hmong. One parent also described that providers use a "white male" as the standard and do not understand different backgrounds. Families shared that white providers, especially pediatricians, do not understand the importance of extended family in Hmong culture or the stigma about autism. As a result, white providers don't understand what Hmong parents go through in communicating with family members about their child's diagnosis, assessment process, and support services. Given the popularity of "autism" as a search term on Help Me Connect, culturally appropriate—and knowledgeable—supports for families with children who have autism is an area of deeper need.

This sentiment around medical professionals' need for better cultural competency was reflected in another focus group. A parent who speaks Spanish mentioned that her pediatrician's approach is culturally different than the approach in Mexico, where she lived prior to the U.S.:

> "In Mexico, the pediatrician would give you their cell phone number, so when I have a sick child, I just text the doctor...Here, you have the saying of a doctor's visit but it's just five minutes with the doctor. Culturally, it's a different approach to seeking those services."

> **Many families discussed the importance of racial, ethnic, cultural, and linguistic representation at the state and local service provider levels.**

Many families, mainly those who speak Spanish, or are Hmong or American Indian, mentioned the importance of representation. These families stated that they have difficulty seeking help due to language barriers or due to feeling judged or discriminated against by agencies offering assistance. Hmong families mentioned wanting more funding for Hmong community-driven groups and that providers need to understand Hmong historical trauma and build strong connections and relationships with the Hmong community. Both Hmong and American Indian family members mentioned that there should be more BIPOC community organization leaders, service providers, and/or county agency staff. American Indian families also wish that more state leaders were Indigenous. An American Indian family member shared the importance of representation:

> "They need to have someone who is in our shoes on the board when they are making decisions about certain stuff...rather than seeing it from our point of view, whether its cultural or economic, it's easier to just have someone there. And being able to voice things out that will help us. Just because you think it's going to help doesn't mean it's actually going to help. It would be nicer to have someone on our side be there than having some richer higher ups make decisions on what's going to make our lives better if they've never been in our shoes before."

Chapter 5: Recommendations and lessons for the future

A no-cost extension granted in mid-2022 will allow the PDG work to continue into 2023, past its third year of implementation. The following recommendations are intended to help guide ongoing sustainability efforts while also serving as a resource to any government agencies interested in systems change and equity efforts.

1   Prioritize shifting mindsets to recognize community as a partner rather than a beneficiary.

Most institutions—particularly government—were built by those with privilege to mitigate risk and be "accountable to the public." As a result, programs and practices are often efficient for the government or prioritize an agency's needs over those of the people they serve. Government agencies' anti-racist and equity-focused work starts with one of the conditions of systems change: mental models. In particular, identifying those most affected by the work—in PDG's case, low-income BIPOC families with children under 5 years old—as partners rather than "beneficiaries" can shift the perspectives of those working to serve their communities. Asking the basic question, "How would we operate if we thought of this group as a partner in the work?" reframes the expectations that often come with the status quo. In many cases, that status quo means requiring people who access public programs to work hard to navigate complex systems and justify need. Recognizing community as a partner inherently identifies the power imbalance—another system change condition—between the state and those it serves and attempts to equalize it.

2 **Fully staff the work.**

Interagency collaboration and a commitment to creating more equitable programs and practices takes time and resources. Moving beyond the "efficiency" mindset to build an environment in which staff can take the time to invest in relationship building and other equitable practices will help the state strengthen its impact. Funding for staff positions and time should not just include leads and staff, but also the many support and administrative staff who are critical to this type of effort. This project found that human resources, finance, contracts, and grants management staff contributed substantial time to supporting the interagency effort. Their talents and expertise are vital to changing practices to reflect the mental model of "families as partners." Furthermore, investing in support staff will have ripple effects among their direct co-workers. As more people contribute to shifting mental models, power dynamics, and practices toward equity, they will share this way of working among colleagues as a standard practice. Much like other agency work, time and resources are also important ingredients for successful grantmaking programs (e.g., Community Resource Hubs). In this project, we found that the time investment to ensure equity was greater than planned, requiring additional staffing to bring workloads to a more reasonable level.

3 **Lean into complexity and the connection-building required to create systems change.**

Addressing complex issues—such as disparities in child development outcomes—requires systems thinking, an inherently complex skill and capacity. As Minnesota seeks to do family first work, systems must operate differently. PDG has shown the capacity for state agencies to shift towards families first. It has also demonstrated that making progress on complex problems with a systems lens requires commitment, space to be creative, and time to build connections. Leaning into the complexity means leadership must focus on the high-level strategies that are intended to achieve the mission, considering ideas within these strategies that respond to the ever-shifting environment rather than preventing deviation from planned activities and tasks. PDG should continue to build on its success in this area during the no-cost extension. In fact, many of the connections that PDG helped create between divisions, across agencies, and into communities can be maintained after the end of the grant. For agencies hoping to do more interagency work, staff must believe and receive reinforcement that new connections lead to good ideas and support change. Agency leadership must help facilitate this connection-building, for example making introductions between staff working on shared issues or looking for patterns of work that achieve shared goals.

4 **Be willing to work within bureaucracy in order to find opportunities for flexibility.**

Systems change efforts— especially those affecting large institutions—can work if people believe change is possible and are flexible in how they reach a particular goal. Working alone or outside agency bureaucracy will not create a sustainable, long-term change. Instead, examining bureaucratic processes and practices of which you are a part, and identifying others who contribute to these practices, can be a strong starting point. Doing so can help identify opportunities for flexibility or change that incrementally shift bureaucracy toward a partnership-based approach to services and resources. For example, by focusing on relationships and building connections, PDG found that leveraging power brokers of bureaucratic processes helped them make many of their desired changes to the system.

5 **Systematize collaboration in order to support interagency strategic priorities.**

State agencies typically specialize and create containers to support Minnesota residents, but peoples' lives are more complex than one single agency can serve. Interagency strategic priorities allow for the benefits of individual departments while also addressing people and families' multi-sector needs and experiences. Interagency collaboration requires supportive infrastructure to result in meaningful systems change. Interagency agreements were the cornerstone of this infrastructure—they enabled agencies to come together in pursuit of a shared mission, routed funding to the most effective delivery system or program, and created the policy pathway to affirm interagency staff sharing. While this grant's interagency agreements took time to develop, they were an effective mechanism for reducing silos between agencies. Continuing to leverage the templates created for this work, and using PDG agreements as examples, may encourage adoption and streamline the process in the future as agencies seek to make their services more accessible to residents.

6 **Expand communications pathways beyond static and digital/virtual reliance.**

Families continue to feel disconnected from the opportunities and resources available to support them. Despite the significant effort that went into developing Help Me Connect, everyday families continue to rely on people they know—word of mouth—to understand what is available. Likewise, it takes time, sometimes many years, to become a trusted online resource and for providers to adjust their current process to include a new step. The omnipresence of online access and virtual reliance, which exploded during the pandemic, has resulted in programs and services equating online access with accessibility. This desire for increasing the variety of pathways a parent can learn about services was elevated in family focus groups (and referenced **below**). Agencies centering equity must recognize the diversity of ways people learn about and access the resources available to them and expand communications accordingly in order to effectively reach people. As of this report publication, the PDG team had already taken this advice under advisement and was planning solutions for 2023.

7 **Provide support for case management software investment among local organizations.**

If organizations and providers are committed to reducing inequities, they need to know basic participant demographics that may affect their experience. Organizations can then tailor services based on these characteristics. This level of basic documentation is a critical equity practice and is difficult to track without the right intake practices or support software (e.g., Salesforce, Apricot). The state should therefore directly invest in or offer funding and technical assistance—particularly for smaller organizations or those newer to state funding—to provide the case management infrastructure needed (e.g., software, training) to use individual demographic data to serve families better. Requiring this basic demographic data in reporting would thus align incentives to implement a case management system, provide quality data, and support equity efforts. Even more, a commonly used, and organization-run, robust case management system can support community organizations to better focus on family experience. This can be done by documenting referrals and a family's history, placing the burden on organizations to track what is already collected from families and using it to get them appropriate and eligible services.

8   **Ensure categorical eligibility criteria are designed to be implemented by relevant departments.**

When establishing categorical eligibility across or within departments, the state should actively pursue automation that is maintained between programs. The state should continue to exercise feedback loops between the state and federal level to support the federal efforts to reduce barriers for states. To support smooth implementation of categorical eligibility, communication between policymakers and implementing agency staff needs to clearly articulate the required alignment in state law, further minimizing legal questions about interpretation.

9   **Invest in a centralized state grants management infrastructure to create a "common application" and flexible reporting expectations for grantees.**

The PDG work illustrated the significant effort the state and community organizations contributed to having new service organizations—often smaller and inexperienced with government but deeply trusted by and connected to families—access funding and resources from the state. By recognizing the perspective of a small organization getting program funding from the state through different departments, a single state grant application could reduce the amount of time spent on things like grant writing or uploading different required documents that may not be as readily available for smaller organizations. Likewise, while funding reporting requirements are often based on legislative policy (federal or state), allowing more flexibility is important. This can help reduce the reporting burden and shift to a more culturally responsive, accurate, and grantee-driven model.

10   **Consider opportunities for efficiencies in contracting and procurement with local community organizations and agencies.**

PDG spent considerable time and effort working through contracting and procurement processes to make it easier for organizations to access funding and implement PDG strategies. Many of these processes could be considered for codification, contributing to increasing equity as systems become easier for outside organizations to navigate. Likewise, PDG learned in-depth about the fiscal policies and practices that continue to create barriers to equity. Creating alternative models that meet both state needs and serve local organizations better should be considered.

Family ideas for improvements

Most families provided suggestions for state and local leaders about how to improve families' access to and experiences with early childhood-related services. Families discussed a need for family advocates and increased awareness of services, as well as a variety of other ideas for improvements.

1   Use different outreach methods to increase awareness of services.

A few participants stated that they mainly learned about services online instead of through community spaces. For example, one parent who speaks Spanish mentioned:

"En Facebook nos enteramos de las cosas y los servicios. Serìa bueno tener màs informaciòn en los lugares tambièn como en las iglesias, centros de la comunidad."

[On Facebook, we find out about things and services. It would be good to have more information in places, as well as in churches and community centers.]

Another parent who speaks Spanish offered that a resource hotline would be helpful for when individuals or families are stuck and need a resource or help with a service.[16]

As referenced above in Recommendation 6, the PDG team is taking steps to expand communication pathways, responding to family insights.

2   Increase family advocates.

A few families suggested a need for an advocate to help increase access to services, which one parent defined as having "someone to help you speak on your own behalf...somebody to be there to support you." One parent described this further by mentioning that having a specific, designated person with whom to discuss changes to services would be helpful. Another parent mentioned that she was unable to find support among the Hmong community for her child with autism. She suggested there should be more awareness and advocacy training for Hmong families. While not explicitly named among the families suggesting this, research shows that advocates with a similar racial and/or ethnic background improve individuals' health outcomes.[17]

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[16] United Way 2-1-1 in Minnesota offers a health and human services resource hotline in English and Spanish, but it did not seem as if this parent was aware of this resource.
[17] Mulrooney Eldred, S. (2023, February 22). Patient navigators help people of color get better cancer care, research shows. MPR News. Retrieved February 24, 2023, from **https://www.mprnews.org/story/2023/02/22/patient-navigators-help-people-of-color-get-better-cancer-care-research-shows**

3 **Some families also provided additional suggestions for improving early childhood-related services.**

A few families suggested making services, especially child care, more affordable. A few families also suggested decreasing wait times for early childhood mental health services, early intervention services, and disability waivers. These ideas all relate to active projects connected to the PDG model, further confirming the need for this work to continue and achieve the outcomes parents desire.

Additionally, one parent mentioned that the Community Solutions grantee's Indigenous parent leadership initiative helped her learn how to identify problems and make changes.[18] This parent thinks this program should be more widespread among other leaders.

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[18] A similar parent leadership training will be sustained by the DHS Child Safety and Permanency Division with Community-Based Child Abuse Prevention dollars.

Appendix

Methodology & Context

Family Focus Group Participant Demographics

Table 4. Language of Focus Group

LANGUAGE	PERCENT OF FAMILIES (N = 44)
Spanish	59%
English	34%
Hmong	7%
Amharic	0%
Somali	0%

Note: Focus groups were offered in English, Spanish, Hmong, Somali, and Amharic, but participants who signed up preferred Spanish, English, or Hmong.

Table 5. Families' Race/Ethnicity

RACE/ETHNICITY	PERCENT OF FAMILIES (N = 44)
Hispanic or Latino	59%
American Indian or Alaska Native	9%
White	9%
Asian	7%
Multiracial	7%
Black or African American	5%
Preferred not to answer	5%
Middle Eastern or North African	0%
Native Hawaiian or Other Pacific Islander	0%
Race, ethnicity, or origin not listed	0%

Table 6. Families' Geographic Location

GEOGRAPHIC LOCATION	PERCENT OF FAMILIES (N = 44)
Urban or suburban	73%
Rural	18%
Preferred not to answer	9%

Table 7. Families' Income Level

INCOME LEVEL	PERCENT OF FAMILIES (N = 44)
Extremely low	2%
Low	16%
Low-medium	43%
Medium	25%
Medium-high	7%
High	0%
Preferred not to answer	7%

Note: The definitions of each income level, which were included in the survey for participants, are below.

Table 8. Income Level Definitions

INCOME LEVEL	DEFINITION
Extremely low	We are usually or always unable to pay for our basic needs with the resources we have.
Low	We are sometimes unable to pay for our basic needs (e.g. housing/rent, food, etc.) with the resources we have.
Low-medium	We can pay for our basic needs with the resources we have, but things are often tight financially.
Medium	We can pay for our basic needs and have some left over.
Medium-high	We can pay for our basic needs, have some left over and do not worry about making ends meet.
High	We have substantial income that allows us to do all the things we want.

Culturally Responsive and Equitable Evaluation Details and Reflections

The following content provides additional information on the practices we used to follow a CREE approach. In addition, we describe our reflections on the work we did, illuminating how we can continue to improve in the future.

Engaging those most affected by the evaluation

We identified four major groups with interest in the evaluation: PDG agency leads and their directors, project leads, sub-grantees, and families (with children under the age of 5). We used a variety of platforms to engage with the PDG team and other key groups throughout this study. We facilitated meetings, shared written documents, and used asynchronous platforms (Padlet) to engage. By doing so, we aimed to ensure the evidence we produce is timely, rigorous, and responsive to the needs of the variety of groups involved in this work.

State staff engagement

As the evaluation was to focus on the state, we relied on agency leads to design the evaluation questions. While equitable evaluation calls for funders to not be the only primary users of the evaluation—and therefore the only ones to design evaluation questions—we balanced this with a desire to lower the burden of involvement on families and communities who are removed from state work. We collaborated with the agency lead team on a regular basis; through regular emails and bi-monthly check-in meetings to provide updates, gather feedback, and raise ideas and concerns with the work. Agency leads in particular directed the evaluation; their commitment to equity as a cornerstone of their daily work and in pursuit of the PDG mission came through in the evaluation process as well.

Sub-grantee engagement

Sub-grantees (e.g., Community Resource Hubs and Community Solutions) were an important group of providers and links to communities and families across the state. We therefore wanted to gather their insights as data sources as well as experts in working with families. While critical, we intentionally did not try to engage these grantees beyond what seemed minimally necessary; they were already being asked to participate in program-level evaluation efforts, and we did not want to overburden them. This furthered our rationale for not engaging them in determining the evaluation questions for our work, though we recognize this as a key practice in equitable evaluation.

For Community Resource Hubs, our team participated in the Hubs' quarterly meetings to present updates and receive feedback on critical decisions. For both grant programs, we emailed and called sub-grantees to recruit for participation in data collection and ask their help in recruiting for family data collection.

Advisory Table

In order to ensure caregiver/parent perspectives informed our work, we worked with a group of 10 women representing 10 regions served by the PDG sub-grantees. These women were themselves pregnant and/or parenting adults with children five years or younger, several of whom also worked with a subgrantee organization. The main purpose of the Advisory Table

to advise the evaluation team regarding evaluation practices and processes focused on subgrantees and families. Through ongoing communication and monthly meetings, the Advisory Table:

- Offered input and recommendations for engaging community stakeholders, including families and providers, to ensure that the evaluation included a diverse set of perspectives and experiences across the continuum of PDG services throughout the state.
- Provided feedback on the data collection methods, tools, and processes—especially for families—to ensure a culturally responsive and equitable approach.
- Shared insights with the evaluation team regarding root causes of data collection challenges (e.g., access and recruitment), and how to address them.
- Assisted with recruitment of focus group participants from their communities.
- Provided insights for the interpretation of emerging findings.
- Offered recommendations for the dissemination of the relevant findings in the community.

Not only did we attend to equity practices as it related to the Advisory Table's support of the evaluation, but we attempted to bring an equity lens to the entire process of partnering with us. This meant that we wrote short agreements to be clear about expectations, we used the same agreement form those members had with the prior contractor, we kept the agreed upon stipend amount from the prior contractor, and we divorced payments from "deliverables."

Centering the Voices and Experiences of Diverse Populations:

To accomplish the key goal of understanding how to serve the PDG community, we designed the evaluation to consider and be responsive to evolving regional demographics. Many residents of Minnesota identify as Hispanic or Latino, Somali, Ethiopian, Hmong and/or speak a language other than English at home.[19] Additionally, the PDG commitment to advancing equity meant that the focus of early childhood efforts were intended to most affect BIPOC families, especially those experiencing financial hardship. We strived to prioritize the involvement of these community members in the evaluation, especially through their participation in focus groups and disaggregation of the data provided by different groups. The evaluation team offered focus groups in Spanish, Somali, Amharic, Hmong, and English. Both an independent consultant who specializes in CREE and the Advisory Table reviewed the focus group protocol to ensure the questions were culturally appropriate and clear. However, we faced several challenges in identifying and recruiting an evaluation sample that represents the race, ethnicity, language diversity, and income level in the target populations, which ultimately negatively affected the equity lens we wanted to incorporate in this study. The challenges include:

- We had a limited understanding of the target communities served by subgrantees/providers. Of the 35 subgrantees, only Community Resource Hubs are asked to provide demographic information on the target populations they serve. The quality of data available is variable and depends on the infrastructure of the sub-grantee. As a result, we were unable to embed an equity lens in our sampling plan to reflect the diverse regional demographics of those affected by sub-grantee services and support. Similarly, Community Solution Grantees were unable to share the demographic information of the families with whom they have worked. This information may not be systematically collected by grantees.

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[19] https://mn.gov/admin/demography/data-by-topic/age-race-ethnicity/
https://mn.gov/admin/demography/data-by-topic/immigration-language/

- We faced challenges in recruitment due to several logistical and cultural reasons. For example, pandemic-related restrictions on in-person gathering made it difficult to engage with potential participants on site and invite them for focus groups. Our recruitment strategy was primarily online, supplemented by flyers and other recruitment material distributed at subgrantee offices, churches, community centers, etc. Limitations in face-to-face outreach efforts thus created challenges in recruitment. Moreover, recruitment was especially challenging in communities where there is stigma around accessing services. Immigrant communities in particular tend to know each other, so people are concerned about privacy. In our experience with recruitment from Ethiopian communities (where no one participated in this study), individuals we approached expressed discomfort talking about issues as personal as accessing services from government agencies, especially with outsiders (i.e., researchers) they do not know. This experience suggested a need for extended time with potential participants to build trust and establish relationships before starting outreach and recruitment efforts.

Cultural Competency of the Evaluation Team:

Our project team had the skills, expertise, and values needed to conduct this project in alignment with our DEI goals. At the beginning of the project, one of the team members spoke Spanish—the most common language spoken at home in Minnesota after English. This team member left The Improve Group in early 2022. Two other staff at The Improve Group joined the project during outreach and data collection to provide translation and/or facilitation in Hmong and Somali. During translation and preparation, we worked together with each staff member to ensure questions were culturally and contextually relevant. Where we did not have internal staff with the translation or language skills, we worked with external research consultants who were familiar with the local community and spoke the language, such as Somali and Amharic.

Additionally, we worked with an independent consultant who is an experienced qualitative researcher and specializing in culturally responsive and equitable evaluation. She provided guidance on how to incorporate the CREE principles throughout the evaluation and advised the evaluation team on community engagement and recruitment.

Reflections on CREE

Using a CREE approach to an evaluation does not come with a standard guidebook. There is much emergent literature that speaks to the different layers evaluators might choose to include in their process. At the same time, emergence and flexibility seems to be a foundation for doing anything in an equitable manner. To this end, we observed and experienced a variety of realities and decisions that brought us to the end of the evaluation. In some ways we experienced challenges, yet in truth these were often more learning opportunities.

Per the Equitable Evaluation Initiative framework, a working orthodoxy to counter is that "evaluation resources are spent on data collection, analysis and reporting" rather than supporting relationship building. Perhaps in part due to the guiding principle of interagency collaboration, the evaluation process was marked by having enough resources and support to dedicate to relationship-building. Relationships were built within the evaluation team—made up of staff from two partner firms—across other contractor teams (e.g. Indigenous evaluation team, strategic planning team, etc.), and with state PDG teams. Relationships were built with the Advisory Table—a group of parents from across the state.

However, tension existed in this space of relationship building. With whom are we called to build relationships if we are to advance equity? What if people do not want to prioritize relationships to the end of participating in the evaluation? We did not have deep relationships with the sub-grantees, those who are closest to families for whom this work is centered. We did not have deep relationships with parents who were engaging with sub-grantees. We felt this absence of connection most notably during recruitment and data collection activities as we had sparse participation. A few challenges we noticed in our engagement processes were:

- Hubs meetings were attended by many people (upwards of 60), but attendees often were unclear about their role in PDG and what all was part of the effort. This meant that asking for input and decision-making about the evaluation added to the confusion.
- Staff turnover—like in most other sectors—was high. Thus, it was both hard to maintain relationships as well as keep track of who new hires were as replacements.
- Participating in the overarching evaluation was not a priority when programs and service delivery was still needed. This challenge was even more apparent in light of the other, more directly applicable evaluation work organizations were conducting. At the same time, this is a challenge across equitable evaluations, making it relevant to key groups.

Despite these challenges (or perhaps because of them), we came back to the reality of our equitable evaluation purpose—to center the State as evaluand in order to share with other agencies how they can shift the system toward equity.

The practice of using an Advisory Table model as a means of ensuring diverse family voice and oversight of the evaluation was a good match for this body of work. Due to the challenges of engaging with families impacted by sub-grantees, the connection to these Advisory members became even more important. Nevertheless, the complexity of the grant and its emergent and responsive programming meant that the group had a hard time tracking what the work was (of PDG) and therefore how best to support the evaluation. To help bring even more focus to the group, in 2022, we focused more directly on getting their expertise regarding the ways that we hoped to engage and hear from families across the state. This helped them relate more closely to the evaluation work without getting lost in the overarching grant.

Another challenge we faced with the Advisory Table was getting consistent participation. This group was expected to meet during the day, on top of other work and life activities. Naturally, schedule conflicts arose. Meetings were found to be the best way to get insights from Advisory members so although we asked for ideas through email, we mostly relied on the meetings to learn from the group. We see this inconsistent participation as a reality in any community-centered engagement, even when payment is involved. Using an equitable perspective means recognizing that people have different needs and life events at any given time; valuing that people come to the table with this whole life experience and are generally participating is the ultimate goal.

Despite the challenges and observations we had of working with the Advisory Table, our anonymous survey of advisors at the conclusion of their work revealed unanimously positive experiences with the work. Highlights included: 100% of respondents (n=7) saying that they agreed to strongly agreed that communication with the evaluation team was good and that the work was interesting. The same percentage felt the evaluation team listened to their ideas and saw that their contributions influenced the project. The only area of improvement offered was continuing to ask questions during discussion in different ways when conversation seemed to be stalled by people not understanding the content.

Additional Data

Table 9. Help Me Connect use by county between June 2021 and October 2022

| COUNTY	COUNTY POPULATION	NUMBER OF HMC VISITS	PROPORTION OF TOTAL HMC VISITS	HMC VISITS AS PROPORTION OF POPULATION	NUMBER OF HUBS SUB-GRANTEES IN SERVICE AREA
Hennepin	1,259,428	25308	31%	2%	6 (18%)
Ramsey	550,210	13454	16%	2%	5 (15%)
St. Louis County	199,754	3151	4%	2%	2 (6%)
Dakota	425,423	2804	3%	1%	2 6%)
Stearns	159,256	2735	3%	2%	-
Olmsted County	156,277	2067	3%	1%	-
Anoka	353,813	1790	2%	1%	1 (3%)
Washington County	259,201	1697	2%	1%	1 (3%)
Blue Earth	67,427	1404	2%	2%	-
Scott	147,381	1403	2%	1%	1 (3%)
Wright	136,349	1340	2%	1%	-
Beltrami	46,847	1133	1%	2%	1 (3%)
Sherburne	96,036	1032	1%	1%	-
Rice	66,523	1014	1%	2%	1 (3%)
Crow Wing	64,889	937	1%	1%	1 (3%)
Carlton	35,837	936	1%	3%	1 (3%)
Carver County	103,551	845	1%	1%	-
Chisago	55,922	790	1%	1%	-
Otter Tail	58,812	769	1%	1%	-
Clay	63,955	715	1%	1%	-
Kandiyohi County	42,855	631	1%	1%	1 (3%)
Douglas	37,964	624	1%	2%	-
Becker	34,371	602	1%	2%	-
Itasca County	45,108	577	1%	1%	1 (3%)
Goodhue	46,403	556	1%	1%	-
Dodge	20,822	545	1%	3%	-
Winona	50,825	523	1%	1%	-

COUNTY	COUNTY POPULATION	NUMBER OF HMC VISITS	PROPORTION OF TOTAL HMC VISITS	HMC VISITS AS PROPORTION OF POPULATION	NUMBER OF HUBS SUB-GRANTEES IN SERVICE AREA
Mille Lacs	26,139	480	1%	2%	-
Steele	36,803	473	1%	1%	-
Cass County	29,519	469	1%	2%	-
Morrison	33,169	461	1%	1%	-
Isanti	39,966	449	1%	1%	-
Mower	40,011	434	1%	1%	1 (3%)
Polk	31,529	414	0%	1%	-
Wadena	13,773	386	0%	3%	-
Benton	40,545	381	0%	1%	-
Brown	25,111	381	0%	2%	-
Freeborn	30,444	366	0%	1%	-
McLeod	35,873	362	0%	1%	-
Le Sueur	28,494	340	0%	1%	-
Pine County	29,483	336	0%	1%	-
Hubbard	21,332	326	0%	2%	1 (3%)
Nicollet	34,220	307	0%	1%	-
Lyon County	25,629	294	0%	1%	-
Kanabec	16,207	294	0%	2%	-
Nobles	21,924	251	0%	1%	-
Aitkin County	15,902	246	0%	2%	1 (3%)
Meeker County	23,141	237	0%	1%	-
Roseau	15,150	235	0%	2%	-
Waseca	18,691	227	0%	1%	-
Wabasha	21,645	215	0%	1%	-
Cook	5,393	213	0%	4%	2 (6%)
Pennington	14,178	194	0%	1%	-
Redwood	15,249	180	0%	1%	-
Martin County	19,785	179	0%	1%	-
Stevens	9,753	177	0%	2%	-
Renville	14,612	166	0%	1%	-
Pope	11,097	165	0%	1%	-

COUNTY	COUNTY POPULATION	NUMBER OF HMC VISITS	PROPORTION OF TOTAL HMC VISITS	HMC VISITS AS PROPORTION OF POPULATION	NUMBER OF HUBS SUB-GRANTEES IN SERVICE AREA
Faribault	13,758	161	0%	1%	-
Swift	9,345	160	0%	2%	-
Todd County	24,582	158	0%	1%	-
Mahnomen County	5,519	153	0%	3%	1 (3%)
Fillmore	21,058	150	0%	1%	-
Koochiching County	12,440	150	0%	1%	1 (3%)
Chippewa	11,924	150	0%	1%	-
Clearwater	8,810	144	0%	2%	1 (3%)
Sibley	15,028	143	0%	1%	-
Cottonwood County	11,277	140	0%	1%	-
Watonwan	10,980	140	0%	1%	-
Jackson	9,911	135	0%	1%	-
Lake of the Woods County	3,758	134	0%	4%	-
Big Stone	4,989	129	0%	3%	-
Lake	10,658	127	0%	1%	1 (3%)
Marshall	9,390	126	0%	1%	-
Grant	6,021	126	0%	2%	-
Norman	6,475	114	0%	2%	-
Yellow Medicine	9,795	106	0%	1%	-
Houston	18,578	97	0%	1%	-
Pipestone	9,047	97	0%	1%	-
Lac qui Parle	6,658	88	0%	1%	-
Rock	9,414	78	0%	1%	-
Murray	8,276	78	0%	1%	-
Kittson	4,248	71	0%	2%	-
Traverse	3,308	70	0%	2%	-
Red Lake	3,999	67	0%	2%	-
Wilkin	6,254	44	0%	1%	-
Lincoln	5,673	34	0%	1%	-

Community Resource Hubs Quarterly Surveys

Chart 5. Scott County average services requested Y2 Q3 – Y3 Q2
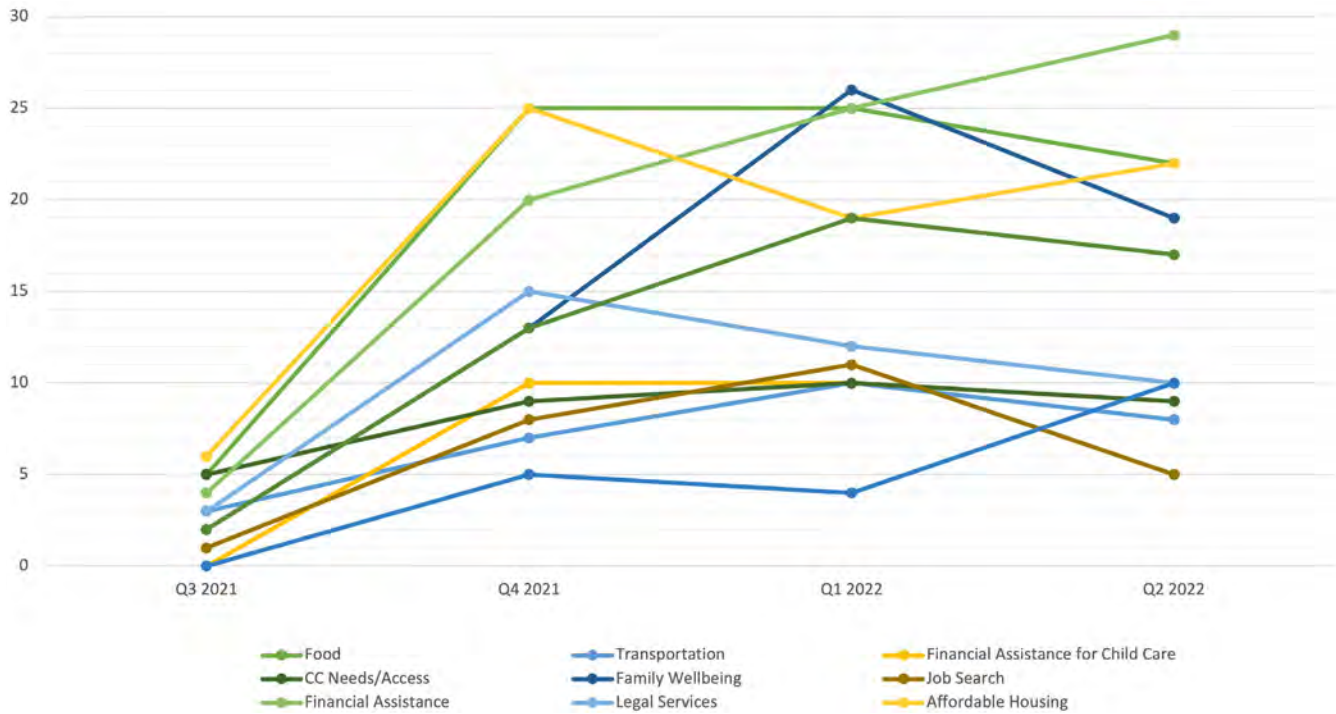
Note: Scott County did not submit a Y2 Q2 survey

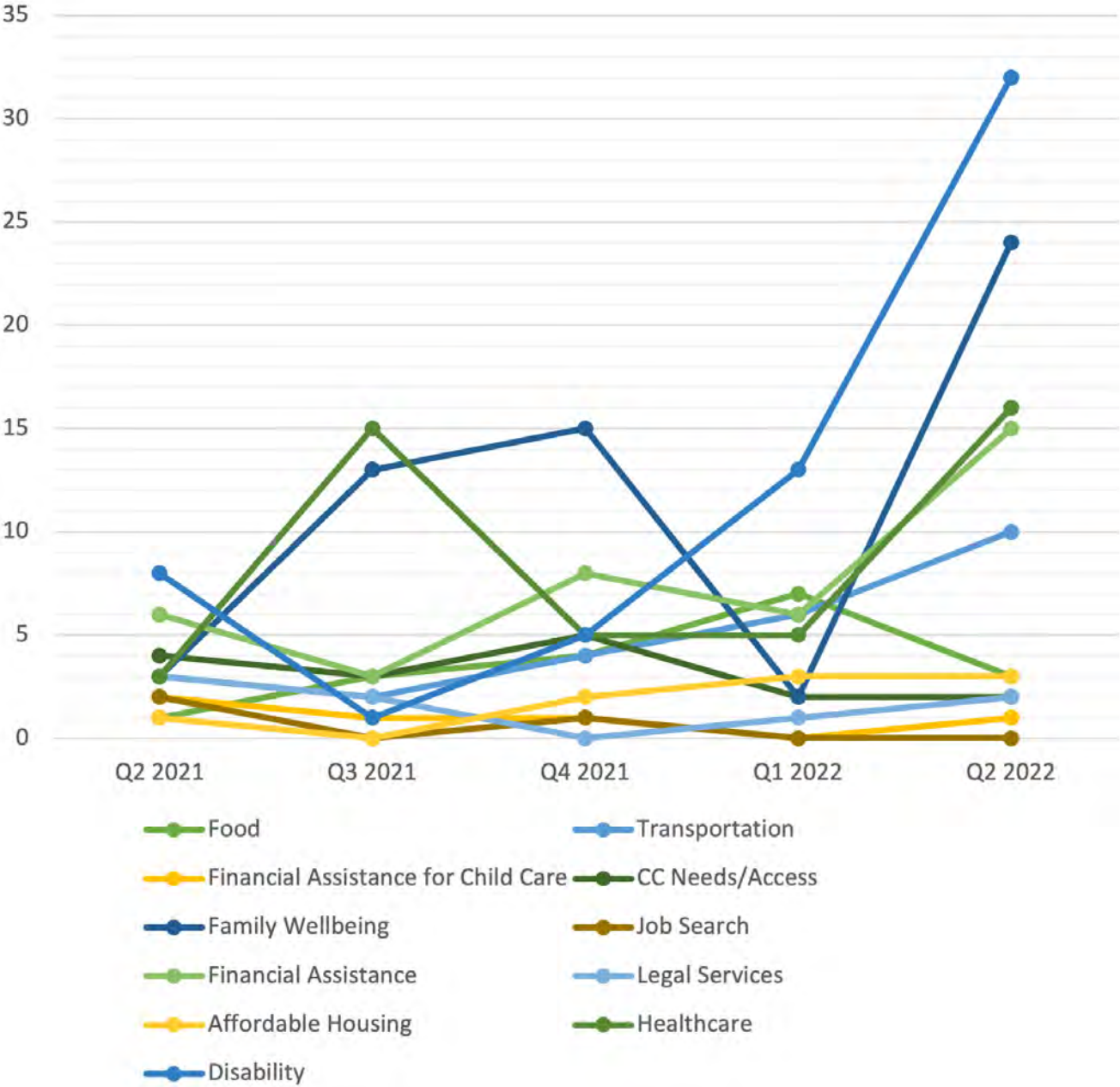**Chart 6.** Fraser average services requested Y2 Q2 – Y3 Q2

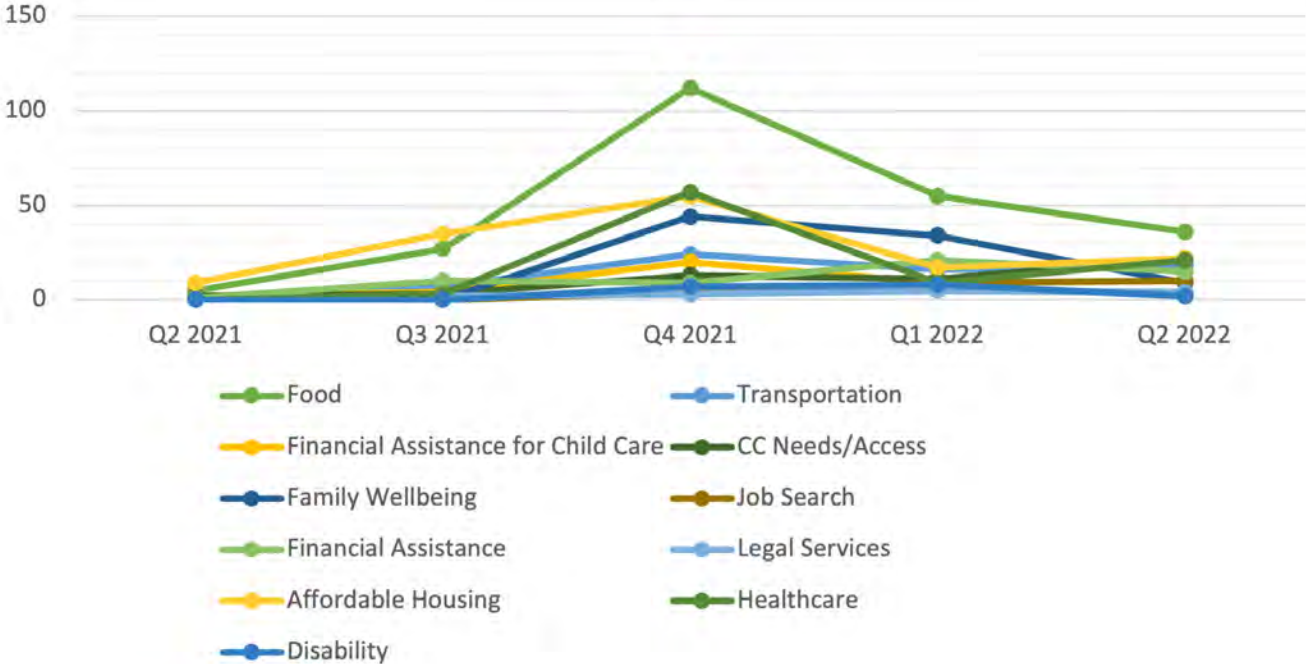**Chart 7.** Northland Foundation average services requested Y2 Q2 – Y3 Q2

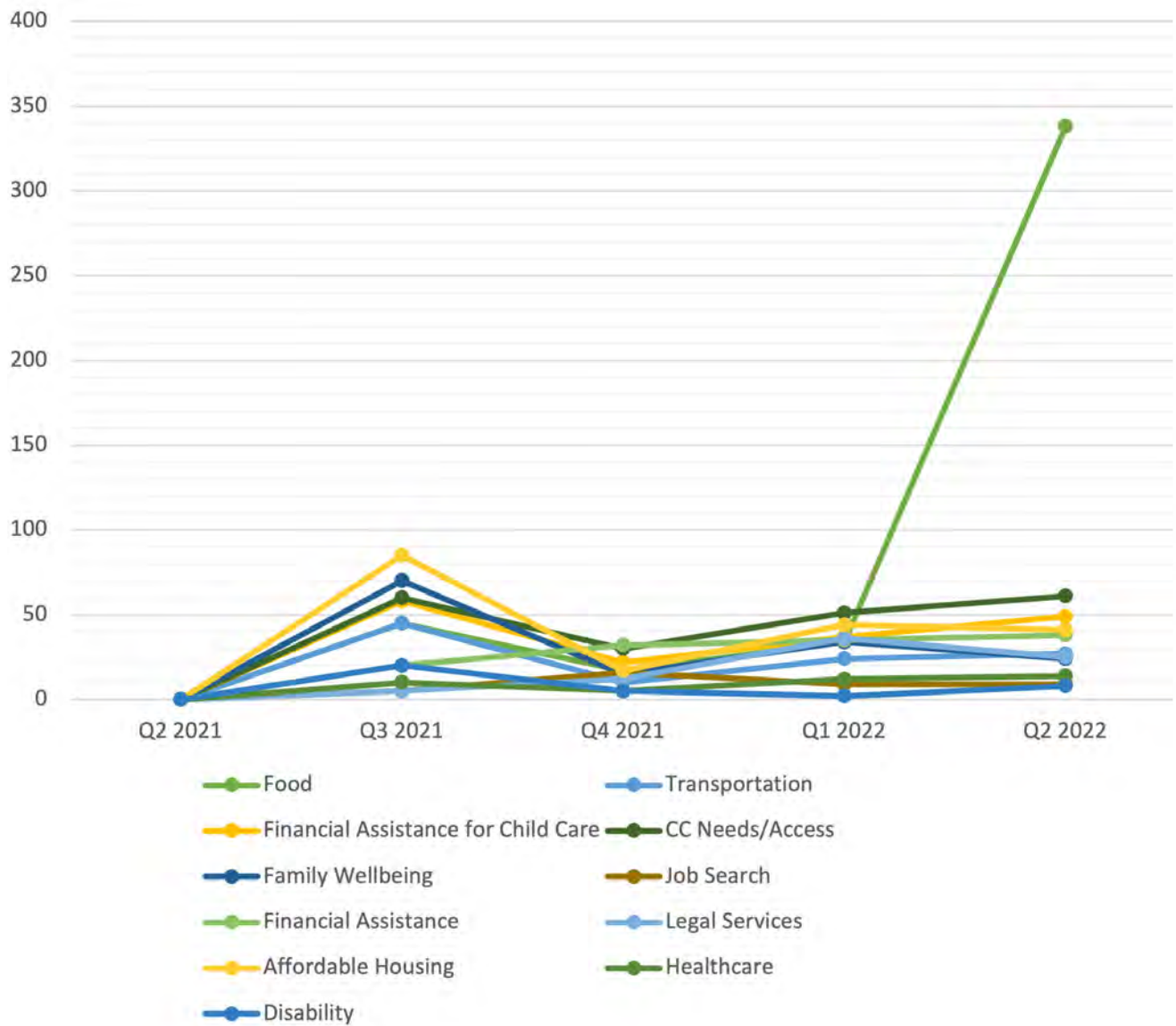**Chart 8.** Lutheran Services average services requested Y2 Q2 – Y3

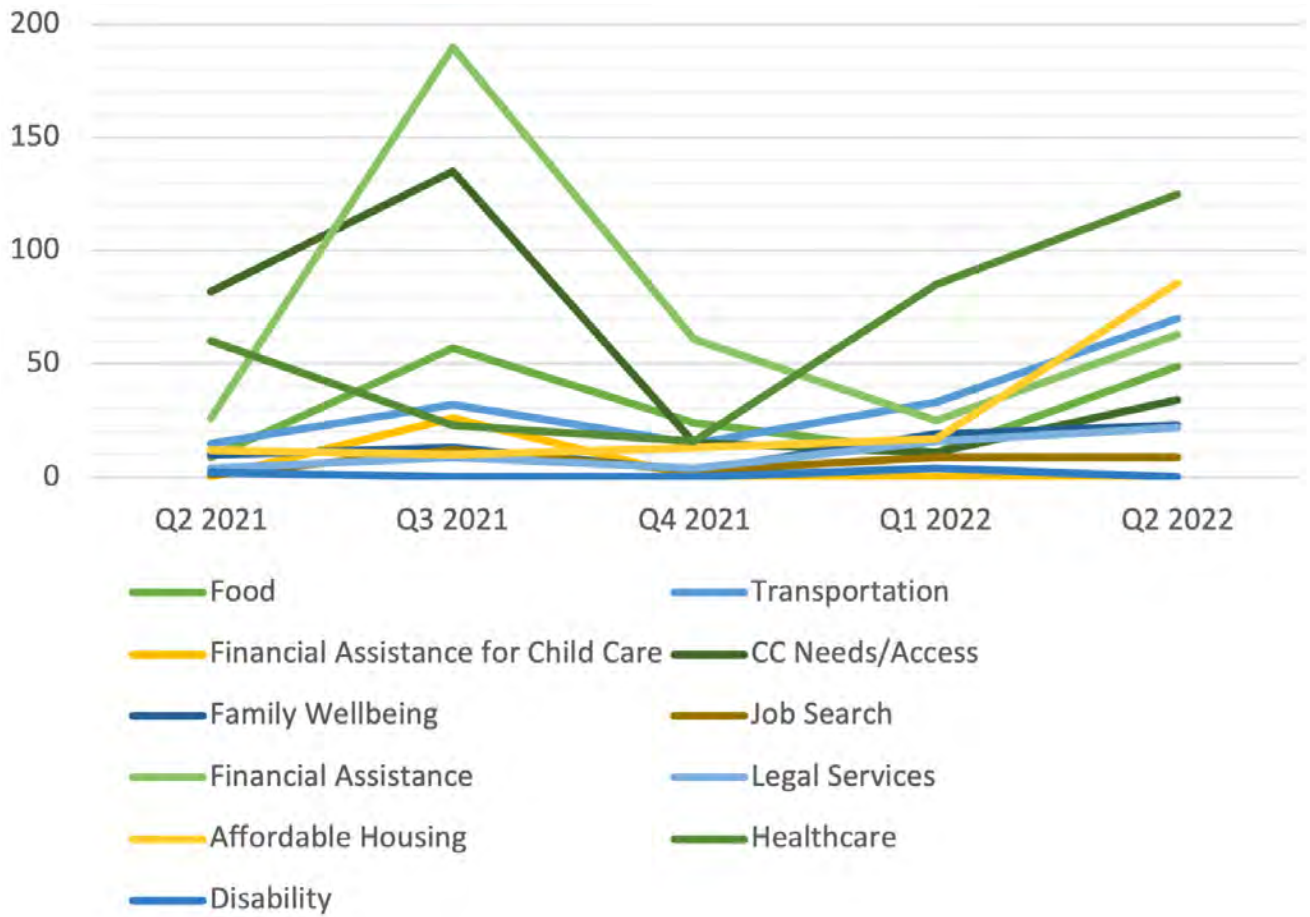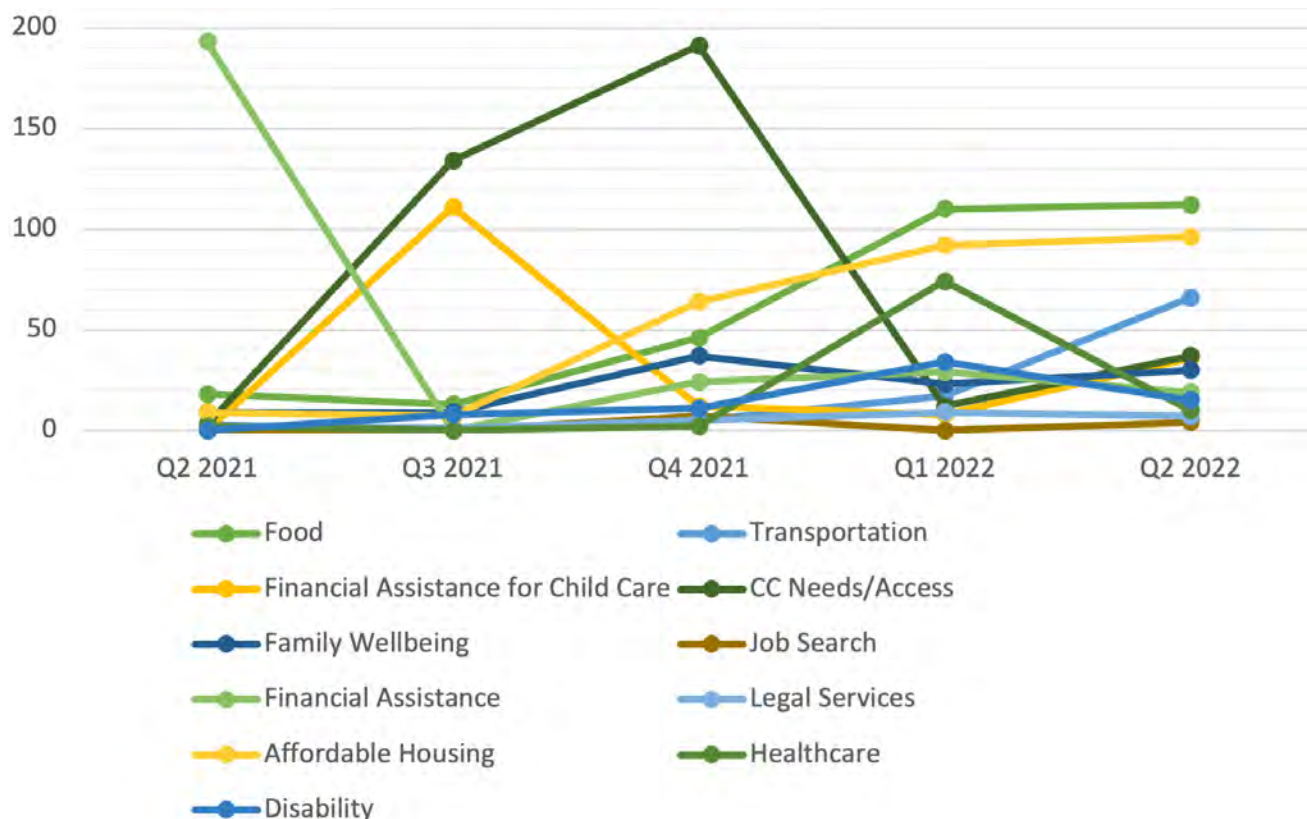**Chart 9.** Northfield average services requested Y2 Q2 – Y3 Q2

Chart 10. Northwest Minnesota average services requested Y2 Q2 – Y3 Q2

Tools

Family focus group guide

Introduction and Consent

Thank you for joining us today. My name is _____ and I am representing [organization], a research organization that focuses on supporting the development of young children. We are partnering with the state of Minnesota [Share if someone asks: Minnesota Departments of Education, Health, and Human Services, along with the Children's Cabinet] to learn about the experiences of Minnesotan expecting and parenting families.

Minnesota state leaders want to support expecting and parenting families so that children thrive during those important early years. To do so, we'd like to hear more about what families like yours need and experience living in the state. And we'd like to hear your thoughts on how changes to services for children and families are made in your community. Understanding your experiences and perspectives-- as an expecting or parenting family member-- will help the state as they work to get things right. We will share what we learned with our partners through reports and presentations. We really appreciate you for participating today.

CONSENT

Each of you received a copy of the consent form in advance. We'd like to go over a few points from that form together:

- Your participation is voluntary, and you can stop participating at any time.

- This discussion will last for about 1.5 hour and we will give you a $50 gift card to thank you for your time and participation.

- We will audio record today's session to ensure we don't miss anything. The recording will not be shared with anyone outside of our project team. We are willing to stop and restart the recording at any point during our session.

- Your name will not be shared in any reports or presentations but your direct quotes may be linked to vague demographic information in reporting, for example: "family from Wantawan County, Spanish speaking focus group."

Great, I will begin the recording. *START RECORDING*

I will now ask each of you if you agree to participate. If you do, please respond "yes" when I call your name.

[If they wish to continue] Great, we are happy to have you participate in this listening session!

[If they do not wish to continue or express concern] Thank you. If you have any questions or concerns about today's session, we are happy to answer or talk through any of your concerns in a separate Zoom room. Is that okay with you?

AGREEMENTS

Before we begin, I wanted to share a few more points:
- First, it is important that **we honor the privacy of individuals**. That is, participants' personal details --e.g., full name or email-- will not be shared beyond this conversation or for purposes other than research and program improvement. Please help us by **not sharing personal information about yourself or others** during the session.

- **There are no right or wrong answers.** We are interested in hearing everyone's perspective. Please be respectful of differences of opinion. We value hearing from everyone, so we hope everyone will speak up and share their thoughts.
  - If there are times where you don't feel comfortable sharing verbally, or there isn't time for you to share, please use the chat function to share your experience to the group or privately to me.

- **You may skip questions you don't feel comfortable answering or stop participating at any time.** If you decide to stop participating, please feel free to exit the Zoom session.

- We have put everyone on mute. If you would like to talk, please be sure to unmute yourself. And mute yourself again when you are not talking.

- **We want to be respectful of your time.** At times, I may need to interrupt and move on to the next topic so that we can end on time.

Do you have any questions before we start?

OPENING AND WARM-UP

Please introduce yourself by telling me your children's ages and a hope or dream you have for them.

1. Thinking about the services you are using currently, ones you've used in the past, or that you might use in the future, what do you wish that service providers knew about your family's background (e.g., culture, language, religion, economic status, geographic location, family structure, need for accommodations, etc.)?

   a. *Probe:* How might your background (e.g., culture, language, economic status, need for accommodations, etc.) make it easier or harder for you to find programs and services?

   b. *Probe:* Who provides care in your family? Has this been considered by service providers?

2. What makes the children and families in your community (and/or Minnesota) special or unique?

EXPERIENCE WITH SERVICES AND SUPPORTS

Thank you for what you have shared so far. You were selected to participate in this focus group because of your connection to [Organization Name]. We want to ask you a few questions about this organization as well as the specific programs and services that you connected with to understand your experience with using them. *[Remember to encourage participants to be very specific when naming services or organizations throughout this part of the conversation]*

3. Tell me about why you used [Organization/Service Name].

   a. *Probe:* What help were you seeking? (Examples: prenatal care, pediatric, dental, WIC, occupational therapy, developmental screening, home visiting, parenting classes, childcare)

   b. *Probe:* How did you find out about [Organization Name]? Where did you first look for help? What happened next?

   c. *Probe:* What was helpful to you? What was challenging?

4. Talk us through what services/programs you were connected to by [Organization Name]. What <u>have you done</u> to enroll in programs and services for children and families? *[If families need ideas of programs/services, mention: prenatal care, pediatric, dental, WIC, occupational therapy, developmental screening, home visiting, parenting classes, childcare]*

Potential Mind Mapping Activity (if in person): *Jot down the steps taken to enroll in a chosen program or service. If a step was easy to complete or worked well, write it in green. If a step was challenging to complete or did not go well, write it in red.*

a. *Probe:* Which of those steps are easy? Which steps are challenging?

b. *Probe:* What could be done to make it easier for families to get connected to these programs and services?

c. Has the COVID-19 (the Coronavirus) pandemic changed your ability to find or enroll in programs and services for your family? If so, how?

5. Can you tell us about your experience with these programs and services.

a. *Probe:* What has worked well for your family and your child?

b. *Probe:* What difficulties have you had?

c. *Probe:* If you have received services from more than one organization/agency, how did the organizations/agencies work together?

i. *Probe:* What could have made your experience of getting services from multiple organizations/agencies better?

6. What makes a program or service a good fit for your family?

a. *Probe:* What kinds of things do you look for to understand if a service or program will meet your family's needs?

b. *Probe:* Can you think of a time that you encountered a service or program that was either a good fit for your family or not a good fit for your family? How did you know, and what did you do?

7. Have the programs and services that you used aligned with your family's background (e.g., culture, language, religion, geographic location, economic status, need for accommodations, etc.)?

a. *Probe:* Can you share examples of how they have or have not supported your family's background?

b. *Probe:* Can you share examples of how programs/services have or have not understood and supported the emotional or mental health needs of your family?

COMMUNITY ENGAGEMENT

Thank you for sharing your experiences and thoughts. Now we'd like to ask you about how changes to services for children and families are made in your community.

8. If you could change one thing about the services used by children and families in your community, what would it be?

a. *Probe:* Can you tell us of any times when you felt like your thoughts and opinions were heard and changes were made in your community?

b. *Probe:* Who do you or members of your community speak to if they have suggestions, ideas, or see something in need of change in your community?

c. *Probe:* How could it be easier for you to share your thoughts or make changes to services?

LOOKING FORWARD

9. What else should community and state leaders know about the experiences of your family with child- and family- focused services in your community?

    a. *Probe:* What suggestions do you have for leaders who make decisions about child and family programs and services in Minnesota?

    b. *If more time is needed:* Please share your responses in the linked Jamboard (research team will share link in chat).

THANK YOU AND EXIT SURVEY

Thank you for participating in today's discussion! We hope this time with you will help to strengthen the programs and services that are available to Minnesota's youngest children and their families.

Before we end, we would like to ask you to complete a short survey to capture a little more information about you and your family. This information will help us describe the group of families that participated in this effort. Please remember, we will not share your personal information publicly, though we may include your anonymized quotes in future reports or presentations. At the end of the survey, there will also be a place to let us know where to send your $50 gift card as a thank you for your time today.

To complete the survey, please click on the link I just entered into the chat box *(put EXIT SURVEY LINK in the chat box; if participants are unable to complete the survey at this moment, let them know they will be receiving the link by email as well).*

Sub-grantee focus group guide

Introduction

Thank you for joining us today. My name is _____ and I am representing Child Trends, a nonprofit research organization that focuses on supporting the development of young children. Our team is working with the Improve Group to evaluate the implementation of the Minnesota Preschool Development Grant (PDG) in partnership with Departments of Education, Health, and Human Services, along with the Children's Cabinet. The purpose of this conversation today is to learn more about your experiences as a [Community Resource Hubs/ Community Solutions] grantee.

Our conversation will last approximately 90 minutes. Your participation in this focus group is voluntary, and you can skip any questions you prefer not to answer or choose to stop participating at any time. You can unmute yourself whenever you would like to share verbally, but you may also share your thoughts via the chat feature if you prefer. I'll be taking notes during our conversation to ensure I don't miss any of the insights you have to share. Before we proceed, is it okay if I record the conversation so I have something to reference later for note taking? The recording will not be shared outside of the evaluation team.

Your responses will not be connected to your name or any other identifiable information in any way. The evaluation team will analyze your responses with those of other focus group participants so we can identify important themes and findings. In our final report to the state, we may use quotes that describe experiences or provide insight into common themes across interviews, but they will not be connected to your name.

Do you have any questions before we start?

[START RECORDING]

Warm Up

To get us started, we have a few questions about your role within PDG.

1. Can you please share your name and briefly describe your organization, your role within the organization as well as the specific populations your organization is serving?

Implementation

Now, we'd like to ask you a few questions about your experiences as a Community Solutions/ Community Resource Hubs grantee.

2. Thinking back to when your organization was first awarded a Community Solutions/ Community Resource Hubs grant—what were your hopes/expectations for the Community Solutions/Community Resource Hubs grants or for Minnesota's early childhood systems more broadly?

3. Thinking about what has happened in the time since your organization was awarded a grant, to what extent have those hopes/expectations come to fruition? Based on your experiences and observations, what has gone well or has not gone so well? Can you please provide specific examples?

    a. What factors have supported success in what has gone well?

    b. What challenges have you and your agency experienced in making those hopes a reality?

Communication & Coordination

To support the goal of improving access to services so that all Minnesota children and families have what they need to thrive, PDG also aims to improve coordination among family-serving organizations across the state and to leverage community-developed solutions. These next few questions are about how you've experienced that coordination.

Let's start by talking about your experiences with the state, specifically.

4. What have been your experiences communicating with state staff?

    a. Do you have a clear idea of who at the state you can reach out to when questions or concerns arise?

b. Are you happy with the frequency of state communication?

c. Do you think decision-making at the state level has been reflective of your work?

d. Has decision-making at the state been transparent?

5. What has been your experience with the resources available to you as a grantee through the state's PDG efforts? These resources include online tools and navigators like Help Me Connect and Bridge to Benefits, one-on-one support with grant management, training and technical assistance, and also opportunities to connect with other grantees and folks at the state through things like virtual convenings or Communities of Practice with other family-serving professional.

As you think about the way in which you/your organization do your work to support children and families we are interested in the role that the different state agencies played….

a. Which of these supports have been most useful and how have they supported your work with children and families?

b. What supports are lacking? What additional resources, tools, or systems would be helpful to support you in working with children and families?

Now, let's talk a bit about coordination more broadly.

6. What changes in coordination, if any, have you seen with other organizations in your community, other grantee organizations, or with the state as a result of this grant? *(probe as needed: reduced barriers to information sharing among family-serving orgs, reducing redundancies, flexible funding, reduced burden on families via services like HMC)*

a. If you've seen improvements, what do you think facilitated those improvements?

b. If you haven't seen any improvements, why do you think that is? What do you see as the main barriers to improving coordination?

Lessons Learned

Now, we'd like to hear your thoughts on the impact of the PDG – both for your organization and community specifically and for broader systems of support for children and families across the state.

7. In your view, what have been the most important positive changes as a result of the PDG and can you walk us through how these changes came to be? *(Probe if needed: Possible areas of systems change could be around practices, ways of thinking, the distribution of decision-making power, resource flows, relationships and connections, coordination with other entities, policies, or services.)*

a. What do these changes look like for the children and families you work with? Your organization or community? The broader statewide system of support for Minnesota's children and families?

8. Something we've heard in past convenings like this one is a strong desire to leverage and share existing knowledge and practices (so you aren't re-inventing the wheel).

a. Have you ever shared those learnings with other grantees, other family-serving organizations, and/or the state? Why or why not?

   ▪ What did the state do to create space for learning and sharing knowledge among grantees?

b. Moving forward, what systems or structures do you think would help facilitate and *institutionalize* knowledge sharing so that future efforts can build off the work that has already been done?

Looking Forward/Sustainability

9. What would you like to see from the state and PDG leadership to better support coordination moving forward—whether that coordination is among family-serving organizations like yours or with the state?

10. Thinking into the future, what elements of the PDG do you think are most crucial to preserve?

   a. What potential barriers may arise in sustaining these elements of the work?

11. What has been one thing you have learned through this grant that has helped you to adjust who you serve or how you serve them?

Thank You & Closing

Those are all of the questions I had for you today! Do you have any questions for me or is there anything else you would like to share before we wrap up?

Thank you so much again for participating in this session! [Add details about gift cards]

Project Lead Deep Dive guide – Workshop 1

1. **(10 min) Checking in/relationship building**

   a. Quick poll: What mindfulness activity would you like to use to start off our meeting today?

      i. Breath

      ii. Mind

      iii. Body

      iv. Connection

      v. Joy

      vi. None—just want to say hi and share weekend plans

2. **(10 min) What do you want out of these quarterly meetings?**

   a. Bridging with evaluation questions/data collection

    i. How well are we doing the work?

    ii. What were the barriers and enablers that made the difference between successful and disappointing implementation and outcomes?

    iii. What was learned about how and why change occurred?

    iv. Who is better off as a result of PDG Activities and in what ways?

b. *Prompt: any interest in institutionalized practices? Holding spot for ideas/learnings/ challenges you would like to discuss with the group?*

c. What are some ways you like to process information? With visual prompts, individual vs group, less/more technology?

3. Key objective today: Co-creating an understanding of shared experiences in navigating state systems for this work.

(60 min) Activity

a. Padlet

b. *Will give 3-5 minutes for each round to jot down ideas. Star your top 3. Share with a partner. Choose favorite top 3 and put on the board.

c. **(15 min) Round 1:** What are examples of ways you have navigated state systems to support coordination?

    i. *Prompt option 2: examples of working with community partners?*

d. **(15 min) Round 2:** What barriers have you experienced in navigating any of these examples?

    i. *Additional prompt ideas: where did you notice being frustrated?*

e. Break

f. **(15 min) Round 3:** What has smoothed the way (i.e. been helpful) in these examples?

    i. *Prompts: successful practices? Enabling characteristics?*

g. What ideas need more clarification? How can we be more specific?

4. **(20 min) Theming:** Where do you see pairs between similar ideas?

a. Additional groupings? (e.g. more ideas that could be added to a pair)

b. What "name" would we give each grouping?

5. **(15-20 min) Focused conversation**

a. What do you notice about the board?

b. What is exciting?

c. Where are you feeling unclear?

d. What new insight have you gained?

e. What does this suggest for what looks different in your work now (on PDG) versus what work looked like prior to involvement in the grant?

f. What feels important to carry forward into next quarter?

- To send in advance (by 6/3)
- High-level agenda for this meeting
- Summary of or link to Padlet from Q1 meeting
- Questions to consider:
    - o What feedback (formal or informal, positive and negative) have you gotten about your/project PDG work?
    - o What is the vision for successful implementation of your project/work?
    - o What progress has been made toward this vision and how was that progress made?
    - o What barriers have gotten or are getting in the way of achieving the vision? What hinders progress?

Agenda

AGENDA	RESOURCES

1. Welcome and grounding (10 minutes)
 	
  a. (Sara) Welcome activity – music, put in the chat a favorite song or artist
 	
  b. Share agenda
 	
    iii. "Deep dive" into reflection and learning
 	
    iv. Primarily in small groups
	Slide with agenda
	
	Tech: take attendance in the tracker

2. Wrap up from last deep dive (10 minutes)
 	
  a. Enablers of successful implementation/cross-agency work:
 	
    i. Neutral convener to bring agencies together (co-ordination role, not enmeshed in the work)
 	
    ii. Being in the same space (virtual or physical)
 	
    iii. Developing and maintaining relationships
 	
    iv. Creating and leveraging expertise and tools
 	
    v. Partnering with community
 	
  b. Who can share an example of one of these?
 	
    i. Thank you for sharing about your successes and solutions! Later today, we'll have more time to talk about progress in PDG, as well as the barriers to that progress. But first, let's take some time to talk about feedback.
	Slide with enablers listed
	
	Tech: assign people to breakout rooms (shown in next section)

AGENDA	RESOURCES

3. Process and reflect on feedback (25 minutes)
 	
a. Set-up in large group: *This meeting is an opportunity to reflect and collaborate around learning and solutions. We want to take this opportunity to not just think about your own experiences and learnings, but also bring in what you've learned from others who aren't in this room or don't always get the chance to be heard.*
 	
b. Break into small groups of 4, each facilitated by an IG facilitator/notetaker (Mix-up groups and be intentional about no-direct supervisor parings and cross-agency):
 	
  i. Group 1
  ii. Group 2
  iii. Group 3
  iv. Group 4
 	
c. Take some time (5 min) to reflect on what feedback you've gotten recently about PDG. For example, feedback from Hubs and Community Solutions grantees at the MN Early Learning Summit, or other formal or informal feedback that you've gotten (Help me Connect focus groups, interviews, conversations with grantees, colleagues/peers, etc.). Jot down some general ideas on a sticky note in your group's Jamboard [tips for using Jamboard]
 	
  i. What have you heard or learned from others about PDG work?
 	
    1. What have you heard is going well? What do YOU think is going well? (e.g., maybe there are some larger practices and cross-agency collaboration happening that families don't see, but contributes to their experience)
	Slide with questions i-iii
	
	4 Jamboards, 1 per group with prompts aligned with questions i-iii
	
	Tech: paste Jamboard link in chat; paste reflection questions in chat; open breakout rooms

2. What have you heard is not going as well or is challenging?
 	
  ii. What does this feedback tell you about your/the work going forward?
 	
  iii. What other opportunities for feedback are there?
 	
    1. What feedback do you feel is missing or do you want/need to hear from?	

AGENDA	RESOURCES
d. Facilitator guides the group through the Jamboard, asking group members to share with each other context and more detail about what they put on the Jamboard.	
4. Break (10 min – approximately 2:45-2:55)	
5. Implementation progress and barriers discussion (55 minutes) a. Set-up in large group: *We want you to have the opportunity to have deeper conversations about your project and your experiences with it. We also are using this to learn more about IMPLEMENTATION. We recognize that while you're all working toward the same overarching goals, your places in it are different. We want to learn more about what's unique and what's shared about your experiences.* b. Break into **same** small groups of 4 (shown above), facilitated by same IG facilitator/notetaker c. Facilitator introduces question prompts (in d) and gives about 5 minutes for the group to reflect, take notes, prepare to discuss d. After about 5 minutes, each person shares about their project and experiences with PDG, own goals and progress, answering the following prompts in about 5 minutes per person: 　i. The overall PDG Vision is "By focusing on children facing racial, geographic and economic inequities, all children in Minnesota will be born healthy and able to thrive within their families and communities." **How does the PDG vision show up in your project/work?** 　ii. **What is the vision for successful implementation of <u>your project/work</u>?**	Vision slide Questions slide 4 Jamboards: Vision Progress Barriers Tech: paste Jamboard link in chat; paste reflection questions in chat; open breakout rooms

AGENDA	RESOURCES

iii. What progress has been made toward this vision and how was that progress made?
 	
iv. What barriers have gotten or are getting in the way of achieving the vision? What hinders progress?
 	
e. Then, when all small group members have shared their perspectives story, the group facilitator will lead a discussion around shared experiences and lessons learned using the following prompts:
 	
   i. What experiences are unique? What contributes to this uniqueness?
 	
   ii. What experiences are shared or similar? E.g., around vision, progress, or barriers
 	
   iii. What do these shared experiences tell us about this work?
 	
   iv. What ideas do these shared experiences raise for how to move forward?	

6. Closing and next steps (5 minutes)
 	
a. Thank you for sharing and discussing your experiences! We hope that today you've had a chance to reflect on your experiences and learn more about your colleagues.
 	
   i. In the Q3 Deep Dive session on September 21, we will continue the conversation, focusing on "emerging findings" from evaluation and on sustainability
 	
b. In the meantime (July), we will be doing interviews with <u>project leads</u> to discuss a "case study" in PDG outcomes
 	
   i. Project leads, please sign up for an interview using Bookings app now
 	
       1. Will also follow up with emails
 	
   ii. Agency leads, you have had interviews already, so no need to sign up for another one.
 	
   iii. Will give project leads a few minutes to sign up now—once you're finished (or if you don't need to sign up), you can head out.
 	
c. Thanks again and see you next time!
	Resources: Bookings scheduling link
	
	Tech: paste Bookings link into chat

Project Lead Deep Dive guide – Workshop 3

To send in advance (by 9/16)

a. High-level agenda for this meeting

b. Final PowerPoint

c. Questions to consider:

- Thinking about your work with PDG, what has gone right? What has gone wrong? What could be improved going forward?

- Review FSG's six conditions of systems change (slide 11 in the PowerPoint). How has your work with PDG addressed these conditions?

Agenda

TIME	ITEM	RESOURCES AND TECH
5 min	**Welcome and settle in** *Play music from Q1 chat suggestions as people come in* 1. Welcome 2. Agenda for the session	Karissa: Share PPT Nick: take attendance in tracker
25 min 9:05-9:30	**New grant application (Amanda)**	

10 min
9:30-9:40
	Introduce "lessons learned"
	1. Introduce evaluation question 3
	2. Present PPT with summary of "lessons learned" method
	   • Describe "lessons learned" as a concept and method in evaluation
	   • Provide example of lessons learned
	   • Set up reflection and small group
		Karissa: Share PPT
		
		Nick: assign breakout rooms (see next section); put Jamboard link in chat

5 min 9:40-9:45	**Individual reflection** (in breakout rooms) **Room 1** **Group 2** **Group 3**	Nick: open breakout rooms

TIME	ITEM	RESOURCES AND TECH
	Other attendees can be assigned based on similar work, if known, or randomly	
	1. Thinking about all your work with PDG… • What has gone right? • What has gone wrong? • What could be improved going forward? 2. Capture your thinking on your room's Jamboard *Facilitator waits for about 5 minutes of individual reflection time, or until folks seem to be done with reflection and adding to Jamboard. Provide support for using Jamboard as needed*	

30 min
 9:45-10:15
	Small group discussion (continuing in breakout rooms)
	
	 Facilitator guides discussion and takes notes
	
	 1. Discuss ideas on Jamboard:
	 • What came to mind during your individual reflection?
	
	 2. Based on these reflections, what lessons did you learn? [Prompts: What should be repeated or avoided? What should others do or not do?]
	 • *Facilitators prompt to uncover:*
	    o How did you learn the lesson? [Prompts: What happened (briefly) and why? Why is it important?]
	    o When/to whom is this lesson relevant? [Prompts: In what situations is this lesson relevant? Who needs to know? When might similar situations arise?]
	
	 Facilitator continues to prompt for lessons until all lessons have been shared or time is out; then release group for break.
		Facilitators: Notes docs

TIME	ITEM	RESOURCES AND TECH

	Group 3
	
	Other attendees can be assigned based on similar work, if known, or randomly
	
	1. Thinking about all your work with PDG...
	   • What has gone right?
	   • What has gone wrong?
	   • What could be improved going forward?
	2. Capture your thinking on your room's Jamboard
	
	Facilitator waits for about 5 minutes of individual reflection time, or until folks seem to be done with reflection and adding to Jamboard. Provide support for using Jamboard as needed	

30 min 9:45-10:15	**Small group discussion** (continuing in breakout rooms)
	
	Facilitator guides discussion and takes notes
	
	1. Discuss ideas on Jamboard:
	   • What came to mind during your individual reflection?
	
	2. Based on these reflections, what lessons did you learn? [Prompts: What should be repeated or avoided? What should others do or not do?]
	   • *Facilitators prompt to uncover:*
	     o How did you learn the lesson? [Prompts: What happened (briefly) and why? Why is it important?]
	     o When/to whom is this lesson relevant? [Prompts: In what situations is this lesson relevant? Who needs to know? When might similar situations arise?]
	
	Facilitator continues to prompt for lessons until all lessons have been shared or time is out; then release group for break.
		Facilitators: Notes docs

TIME	ITEM	RESOURCES AND TECH
5 min **10:15-10:20**	**Break**	Nick: close breakout rooms Karissa: Share PPT
5 min **10:20-10:25**	**Conditions of systems change** Introduce FSG's conditions of systems change and definitions	Karissa: Share PPT
5 min **10:25-10:30**	**Individual reflection** (in breakout rooms) 1. How did your work with PDG address these conditions? 2. Add your thoughts to your room's Jamboard, placing the sticky note near the condition you addressed *Facilitator waits for about 5 minutes of individual reflection time, or until folks seem to be done with reflection and adding to Jamboard. Provide support for using Jamboard as needed.*	Karissa: Share PPT Nick: open breakout rooms (same as before)
25 min **10:30-10:55**	**Small group breakouts** (continue in breakout rooms) Facilitator guides discussion and takes notes 1. Reflect on and discuss Jamboard • Take a couple of minutes to review the sticky notes on the slide. What questions arise or where would you like to hear more? • What patterns emerged about which conditions were addressed? • What about the conditions that were not addressed? What are barriers to addressing these conditions? • What does this tell you about how and why change occurred in PDG? • What does this mean for sustainability of PDG efforts?	Facilitators: Notes docs Amy's notes Nick's notes Karissa's notes

TIME	ITEM	RESOURCES AND TECH
	2. [if time] Incorporate conditions of systems change into lessons learned: • Going back to the "lessons learned" we discussed earlier, what condition(s) of systems change came up in the lessons we talked about?	
5 min **10:55-11:00**	**Closing** 1. Evaluation next steps • Evaluation progress: wrapping up data collection and moving into analysis and reporting • Q4 Deep Dive in early December, primarily to review and give feedback on emerging findings from the evaluation	Karissa: Share PPT

Project Lead interview guide

Introduction and Consent

Thank you for joining us today. My name is [name] and I work for The Improve Group.

We invited you to participate in the interview today to get more in-depth insight into the implementation of Minnesota's PDG effort. As we near the end of the grant timeline, we're interested in learning more about what has gone well with implementation, what has been challenging, and what you've learned throughout the process. I also want to talk a little bit about sustainability and what might continue after the grant ends. The findings from interviews with other project and agency leads, along with data collected from directors, grantees, families, and more, will be used to better understand grant process and progress, and will be incorporated into final grant reporting.

We really appreciate you taking the time to participate in this interview. Before we continue, we would like to provide some important information about today's discussion:
• This discussion will last for about 45-60 minutes.
• Your participation is voluntary, and you can stop participating at any time, or skip any questions.
• I will be taking notes during our conversation to ensure I don't miss anything. They will not be shared with anyone outside of our project team, and you will not be identified by name in any of the results.
• We may use quotes in reporting; if so, we would not connect it to your name or identifying information. For example, the quote could be attributed to a "PDG project lead."
• There are no right or wrong answers, please share openly and honestly.

Knowing that information, are you still comfortable moving forward with the interview today?

[If they do not wish to continue or express concern] I understand. Would you like to share your concerns with me?

[If they wish to continue] Great, we are happy to have you participate! Do you have any questions before we start?

Protocol

Introduction

I'd like to start by understanding a bit more about how you fit into PDG.

1. What is your role with the Preschool Development Grant and how long have you been in that role?
    a. How long have you been with in this field and with the State in particular?

Success case

During the last "deep dive" workshop, we asked you to describe your vision for your work—what you hope to achieve as a result of your particular aspect of PDG work. Keeping that vision in mind, think of one big success that you've experienced, or a positive change that came about because of your work.

2. Tell me a little bit about the success you're thinking about—what was the change?
    a. How does the change shift systems for families or move toward the PDG vision?

3. How did this success come about?

4. How was it different than in past/other efforts?

5. What were the key factors in making it happen?

6. I'm curious about how the sustainability levers showed up in this success, if at all. What role, if any, did the following play in your success: [read items a-g one at a time as separate questions]
    a. Funding
    b. Support, including from partners, champions, and broader stakeholder groups
    c. Organization and governance
    d. Management systems
    e. Staff and expertise
    f. Program rules that allow for or hinder coordination, collaboration, and funding from multiple sources
    g. Adaptability to leadership changes and shifting opportunities and priorities

7. What challenges did you encounter along the way or what do you wish would have gone differently?

a. What supports or resources would have helped?

8. What will you carry forward from that experience?

Lessons learned

Now, I'd like to reflect a bit on what you've learned since this grant work began and what you think will happen in the future.

9. If you could go back to the beginning of this grant and give yourself (or the person in your role) some advice about implementing PDG, what would you say?

    a. What changes would you make?

10. What is the most valuable thing you've learned through the PDG process?

    a. How have you or will you apply that learning in your work going forward?

11. Looking ahead to after the grant ends, what do you most want to retain or sustain from PDG, the PDG process, or outcomes of PDG?

Closing

Those are all the questions I had for you.

12. Before we wrap up, what else do you want to share about PDG? Or, what else should I have asked you about that I didn't?

Thank you again for your time and insights—we really appreciate you sharing your perspective. Have a great day!

Agency Lead interview guide

Introduction

The purpose of our conversation today is to deeply learn from you and your experiences regarding the implementation of PDG grant activities.

Our conversation will last approximately 60 minutes. I'll be taking notes during our conversation to ensure I don't miss any of the insights you have to share. Before we proceed, is it okay if I record the conversation so I have something to reference later for note taking? The recording will not be shared outside of the evaluation team.

Your responses will not be connected to your name or any other identifiable information in any way. However, because we are interviewing only six agency leads, there might be details in your answers that give away who you are. The evaluation team will analyze your responses with those of other interviewees for us to develop themes and findings. In the report, we may use quotes that describe experiences or provide insight into common themes across interviews, but they will not be connected to your name.

Do you have any questions before we start?

Warm up

We're going to start with some questions to document your role within PDG.

1. Can you describe your role as the [POSITION NAME]?

    a. What work are you responsible for within PDG?

Implementation

Next, I'm going to ask questions related to the implementation of the PDG grant. Start thinking about the work your agency has done since PDG started, and the work being done throughout the PDG system.

2. What strengths does your agency bring to the implementation of PDG activities?
For reference: This could be related to the implementation's effectiveness, fidelity to implementation, the infrastructure supporting implementation, the key drivers of the implementation (who is responsible for implementation), or processes of feedback and improvement.

3. What has gone well with implementation?

    a. What factors have supported success in what has gone well in implementation?

    b. What challenges do you and your agency experience in supporting PDG work?

    c. What lessons can be learned from your agency's implementation successes?

4. What are ways you have seen the guiding principles being implemented in the work?

    a. *Guiding principles: Intersectionality, Racial Equity, Interagency Collaboration, Trauma and Healing Informed, Geographic Responsiveness, Belonging and Inclusion, Whole Family System.*

5. Next, think of an example of when implementation of PDG was disappointing or didn't go as well as you hoped.

    a. Why were you disappointed with the implementation?

    b. What were the challenges and barriers to successful implementation?

    c. What could have been done differently?

6. What have you seen others do well in their implementation of PDG?

    a. Where do you see potential improvement for their work?

Cross agency collaboration

The next set of questions are related to your experiences with cross agency collaboration, and the successes and challenges of collaboration.

At the project leads workshop in early March, project leads, and agency leads shared ideas about how they have successfully navigated state systems to support cross agency collaboration. Some of the ideas included: relationship building and communication, creativity in data sharing and contracting, having "neutral" agencies facilitate cross-agency work, and having a central person to connect the dots between different agencies.

7. We are hoping to get more details on these ideas. What examples can you share related to them?

Probe: restate list or share in chat

    a. What factors have enabled success in carrying out [EXAMPLE ACTIVITY]?

    b. What factors created challenges or prevented success in [EXAMPLE ACTIVITY]?

    c. What could be done differently or could be improved as you move forward?

    d. *[If necessary]* What other strategies have you used to navigate cross-agency work?

Learning

8. Change happens at multiple levels (individual, family, organization, community, etc.). What have been the most important positive changes as a result of the way you and your agency have implemented PDG?

Probe: Possible areas of systems change could be around practices, ways of thinking, the distribution of decision-making power, resource flows, relationships and connections, policies, or services.

9. In what ways has PDG contributed to these changes?

Probe: What is unique about PDG that has contributed to these changes and/or impacts?

10. What, if any, unintended consequences have emerged because of you and your agency's implementation of PDG?

Sustainability (time allowing)

11. If you could choose one thing to support after the grant ends, what would you choose? Why?

12. Often when we talk about our work, we are always thinking about what MORE we can do without considering that some work has served its purpose or is ready to be let go. What PDG work do you think should be deprioritized, or let go?

Wrap up

Those are all the questions that I have for you. What else would you like to share before we wrap up?

Thank you for your time. Have a good day!

PDG Partner interview guide

Introduction and Consent

Thank you for joining us today. My name is Moira and I work for The Improve Group.
We invited you to participate in the interview today to get more in-depth insight into the implementation of Minnesota's PDG effort. As we near the end of the grant timeline, we're interested in learning more about what has gone well with implementation, what has been

challenging, and what has been learned throughout the process. I also want to talk a little bit about lessons learned and what might continue after the grant ends. The findings from interviews with other project and agency leads, along with data collected from directors, grantees, families, and more, will be used to better understand grant process and progress, and will be incorporated into final reporting.

We really appreciate you taking the time to participate in this interview. Before we continue, we would like to provide some important information about today's discussion:

- This discussion will last for about 60 minutes.
- Your participation is voluntary, and you can stop participating at any time, or skip any questions.
- I will be taking notes during our conversation to ensure I don't miss anything. They will not be shared with anyone outside of our project team, and you will not be identified by name in any of the results.
- We may use quotes in reporting; if so, we would not connect it to your name or identifying information. For example, the quote could be attributed to a "PDG State staff partner."
- There are no right or wrong answers, please share openly and honestly.

Knowing that information, are you still comfortable moving forward with the interview today?

[If they do not wish to continue or express concern] I understand. Would you like to share your concerns with me?

[If they wish to continue] Great, we are happy to have you participate! Do you have any questions before we start?

Protocol

Introduction

The mission of the Preschool Development Grant (PDG) is to create an equitable system that supports expecting and parenting families with young children. To do this families, communities, and government agencies will partner to eliminate structural racism and inequities that exist in access, policies, programs and practices. PDG has a set of guiding principles: intersectionality, interagency collaboration, racial equity, geographic responsiveness, trauma informed, whole family system, and belonging and inclusion. To help families navigate the early childhood systems, PDG has developed tools like Help Me Connect, an online tool that connects families to resources; Progress on legal and technology barriers to coordinating eligibility and services; and direct grant making to Community Resource Hubs and other local organizations . PDG is implementing a no wrong door approach to services that helps families connect to services through local community hubs and community solutions grantee organizations.

Now, I would like to start by understanding a bit more about your role and how you fit into PDG.

13. What is your role with the Preschool Development Grant? i.e. in what ways do you interface with grant staff or grantees?

a. How long have you worked for the State of Minnesota?

b. How long have you been involved in PDG work?

c. Has your role been the same throughout that time?

d. What percentage of your work is on the PDG initiative?

Successes and Challenges

I want to learn about what the successes and challenges that staff working on the PDG initiative have had. Please think of successes that you've experienced in working to support PDG, or a positive change that came about because of your work on it. Next, think about the challenges you have experienced that made fulfilling the goals of the PDG harder.

14. Tell me a little bit about the successes you thought about—what was the change that resulted?

    a. How did it come about?

    b. How was it different than in past/other efforts?

15. What were the key factors in making it happen?

    a. (Prompt on these factors if none listed: funding, support, governance, management systems, staffing, program rules and adaptability.)

16. How did the big success shift internal State systems to benefit families?

17. What challenges have you experienced in advancing or supporting the PDG work?

Interagency Collaboration

One of the goals of PDG has been interagency collaboration. How do you see that occurring in your work with counterparts from other state agencies?

18. How have you collaborated with your counterparts in other state agencies?

19. What has enabled interagency collaboration the most?

20. What has most hindered interagency collaboration?

21. Do you envision working in the same way beyond the PDG grant?

22. Do other staff in your agency collaborate with other agencies or is this unique to your PDG work?

Lessons learned

Now, I'd like to reflect a bit on what you've learned since this grant work began and what you think will happen in the future.

23. What is an example of a time you made a change to the way you do your work as a result of reflection and/or learning from PDG efforts? If you have not made changes yet, what would you change as a result of the knowledge or insight you have gained?

24. If you could go back to the beginning of this grant and give yourself (or the person in your role) some advice about implementing PDG, what would you say?

    b. What changes would you make?

25. Looking ahead to after the grant ends, what do you think will be the impact of PDG?

    a. Internally on how you do your work?

    b. On Minnesota's early childhood system?

    c. On Minnesota's families?

    d. On community organizations?

Closing

Those are all the questions I had for you.

26. Before we wrap up, what else do you want to share about PDG? Or, what else should I have asked you about that I didn't?

Thank you again for your time and insights—we really appreciate you sharing your perspective. Have a great day!

Director interview guide

Introduction Language

The purpose of our conversation today is to deeply learn from you and your experiences regarding the implementation of PDG grant activities.

Our conversation will last approximately 60 minutes. I'll be taking notes during our conversation to ensure I don't miss any of the insights you have to share. Before we proceed, is it okay if I record the conversation so I have something to reference later for note taking? The recording will not be shared outside of the evaluation team.

Your responses will not be connected to your name or any other identifiable information in any way. However, because we are interviewing eight directors, there might be details in your answers that give away who you are. The evaluation team will analyze your responses with those of other interviewees for us to develop themes and findings. In the report, we may use quotes that describe experiences or provide insight into common themes across interviews, but they will not be connected to your name.

Do you have any questions before we start?

Warm-Up

1. In a couple of sentences, Describe your role as a director with/as part of PDG.
2. PDG is seen by many as "different" from other initiatives. What would you say makes PDG different from others?
3. What similarities do you see between PDG and other initiatives?

Implementation Questions

4. What kind of work you have seen PDG Agency Leads performing?

    a. What do they do to support implementation of the grant?

    b. What could be better?

5. What PDG work have you been impressed with?

6. What are the ways in which you've seen the guiding principles being implemented in the work? *(if they would like a reminder: intersectionality, interagency collaboration, racial equity, geographic responsiveness, trauma informed, whole family system, and belonging and inclusion)*

7. In what ways has PDG has been well-implemented?

    a. What went really well?

    b. Why did it seem to go so well? (what supported this going well)

    c. What were the challenges/barriers despite it going well?

    d. What did it result in? I.e. what difference did this ultimately make? To whom?

8. In what ways has PDG not been well-implemented? Describe what parts of the work have not gone well.

    a. Why was it disappointing?

    b. What were the challenges or barriers?

    c. What could have made it go better?

    d. What did it result in? I.e. what difference if any did this ultimately make? To whom?

9. What does successful collaboration look like to you?

    a. In what ways do the systems in place and staff involved in PDG meet these criteria?

    b. In what ways is PDG missing the mark?

10. What do you think is most important to hold on to as this work continues into the future?

11. What feels less important or should be left aside?

Wrap up

12. Those are all the questions that I have for you. What else would you like to share before we wrap up?

Thank you for your time. Have a good day!