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**Nottingham**

School of Education

# **An Evaluation of the Early Years Two Year Pilot Scheme in the City of Nottingham**

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# **An Evaluation of the Early Years Two Year Pilot Scheme in the City of Nottingham**

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## **The Research Team**

The team undertaking this evaluation all have significant experience of mixed methods research, research in the early years and evaluation of policy initiatives.

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### **1. Background to the Pilot**

*As this report was being finalised, the Labour Government failed to secure a majority in the 2010 General Election and was replaced by a coalition government between the Conservative and Liberal Democrat Parties. Hence this report reflects strategies, policies and practices that were in operation before the new government took office.*

#### **1.1. Aims and objectives**

The background to this evaluation is as follows, much of which is taken from Two Year Old Pilot Support Pack 2008. The extended two year-old pilot was announced in the Children's Plan ([www.dfes.gov.uk/publications/childrensplan](http://www.dfes.gov.uk/publications/childrensplan)) and is an extension to the existing pilot scheme currently operating in 32 Local Authorities (LA) across the country. The new pilot builds on the experience of the existing pilots, with a heavy focus on deprived two year-olds and their families.

#### **1.2. Key changes for existing pilots**

There were five key changes over existing Pilot projects which form the backdrop to this evaluation:

- All two-year olds benefiting from the extended pilot will be from low income families, and funding from the Department will allow Local Authorities (LA) to provide childcare for 15% of the most deprived two year-olds in each LA.
- The number of hours offered to families will increase from 7 ½ hours to between 10 and 15 hours, depending on the choices LAs have made.
- The approach to identifying eligible children will be first and foremost data driven, but will be supported locally by high quality outreach work.
- The pilot will not only provide childcare to two-year olds, but also opportunities for the whole family to benefit, such as increased support for home learning, and sign-posting to e.g. training through children's centres.
- The pilot was planned to be extended to a new set of Local Authorities bringing the total number of pilots to around 60 LAs. However, the DCSF has now changed this and funding has now been extended to every LA.

#### **1.3. Aims of the extended pilot**

A key aim of the Pilot was that by March 2011, it was planned to deliver free childcare to 20,000 two year olds in the most disadvantaged communities with the specific aims:

- To improve learning outcomes and close the gap between those children and other children in the LA.
- To improve outcomes for parents, by supporting them in taking advantage of training and/or work opportunities
- To build evidence on the impact of the pilots to inform proposals for any further rollout.

This report is evaluation of the Nottingham element of the government's Two Year Old pilot which aims to improve access to preschool for two year olds of disadvantaged families. This Pilot early years' programme was announced by the DCSF (previously the DfES) who announced the Pilot and invited expressions of interest in Dec 2005. Confirmation to Local Authorities (including Nottingham) of their participation in the Pilot occurred in March 2006. The programme has been running in Nottingham City since 2006 and is now well established in several locations across the City. The DCSF announced extended funding 2008 to 2011.

## Evaluation of the Nottingham Two Year Pilot

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The National Pilot evaluation of outreach activities (Kazimirski et al., 2008) took place between 2006 and 2008 and was carried out by the **National Centre for Social Research**, and involved a study of:

- Parental views
- Child development
- Childcare provider views on delivery of the Pilot
- Support to children (childcare providers)

A local evaluation took place between 2006 and 2009, looking into:

- The number of children accessing and where in the city, family profiles;
- Childcare Development Record Summaries tracking personal, social and emotional development (PSED);
- Childcare provider views on delivery of the Pilot;

There are three main elements which featured in this local evaluation:

- Supporting children's development through access to quality Early Learning experiences;
- Effective outreach activity and partnership working.

The evaluation we report here is a focused study in selected locations in the City of Nottingham to explore the impact of the Two Year Old Early Learning Pilot on i) **the child** (Communication, Language and Literacy Development (CLLD) and Personal Social and Emotional Development (PSED)); and, ii) **the family** (Social and Economic benefits and family/child relationships). It draws on both the national and the local evaluations undertaken so far – and will utilize the data held by the Local Authority. It includes in-depth family and provider interviews, a parental survey, observations of childcare provision, and analysis of developmental data on children.

### 1.4. Eligibility for the pilot

This pilot is tightly focused on an economic deprivation, data driven, and broadly applicable model (so other LAs could apply the model in the future). Funding to LAs will be based on national data which uses Income Deprivation Affecting Children Index (IDACI) to identify 15% of the most deprived two year-olds in each Local Authority. Local Authorities will need to use local data sets to help them identify where the most deprived children are living and to inform the targeted outreach in order to support them to remain engaged. We are aware Nottingham has all this data and we will develop strategies for common use of this data in our evaluation. The national eligibility criteria will be integral to the evaluation and all families accessing the pilot must be in receipt of one or more of the following:

- Income Support;
- Income-based Jobseeker's Allowance;
- Child Tax Credit at a rate higher than the family element Extra Working Tax Credit relating to a disability, or Pension Credit.

Certain parental and child characteristics are also key to engagement in the Pilot:

- Children from families with three or more children aged under five;
- Teenage parents and lone parents;
- Parents with health issues or disabilities;
- Family have experienced domestic violence;
- Family have experienced substance misuse issues;
- Children with speech and language needs, including EAL;



- Children in care and children in temporary accommodation;
- Children on the Child Protection Register;
- Children involved with social services;
- Children with developmental or learning delay and children with disabilities;
- Children experiencing emotional and behavioural problems.

Our evaluation sought to explore across these key groups. However, we were not in a position to specifically select participants stratified along these lines. Where possible we attempted to talk to as many parents as possible. Yet as we report later, this was not without difficulties.

### 1.5. The local context

In order to make any sense of data on Nottingham, it is first important to grapple with the complexity of the comparisons which needs to be drawn. It is crucial however to say at the outset that we do not consider it helpful to say that difficulties in Nottingham are not really a problem only because they are not as bad as other cities; that is no way to improve lives. We start with the clear understanding that educational development and attainment is closely linked and correlated with deprivation. This would be the easy answer to the problem of why Nottingham has so many problems with the level of attainment of its young people. However it does not help us to specifically understand the specific factors. Notwithstanding, it is important to know some of the roots of the difficulties in order to better target strategies and policy initiatives.

We start with an analysis from The Policy and Information Team, Environment and Regeneration, (Nottingham City Council, 2007, p. 7) which makes quite sombre – and sober – reading (the emphasis is ours).

**Nottingham ranks 13th out of the 354 districts** in England using the Average Score measure (the average score of the district's SOAs) on the IMD, representing an improvement on the rank of 7th in the 2004 Indices. The Top 20 most deprived districts using this measure are shown in Table 2. **Nottingham ranks 12th using the Average Rank, again an improvement on 9th in 2004.**

“Extent” is the proportion of the district's population living in the 10% most deprived SOAs in the country. **Nottingham ranks 11th using this measure** (previously 9th). “Local Concentration”, the population weighted average of the ranks of the district's most deprived SOAs (which contain 10% of the district population), **places Nottingham 26th (previously 9th)**. The Income Scale and the Employment Scale measures the number of people experiencing deprivation. As these give absolute numbers rather than percentages, the results for these measures reflect the size of local authorities. **Nottingham ranks 13th and 12th respectively**. Using the Average Score, Liverpool remains the most deprived authority in England. **Nottingham is now the fourth most deprived of the Core Cities** - compared to third in 2004 - after Liverpool, Manchester (2nd) and Birmingham (10th). The others ranked as follows; Newcastle 37th, Sheffield 63rd, Bristol 64th and Leeds 85th. **Leicester and Derby ranked 20th and 69th respectively**.

The following graphs show the proportions of the population in the City of Nottingham and the three surrounding Boroughs who are living in each deprivation decile. These

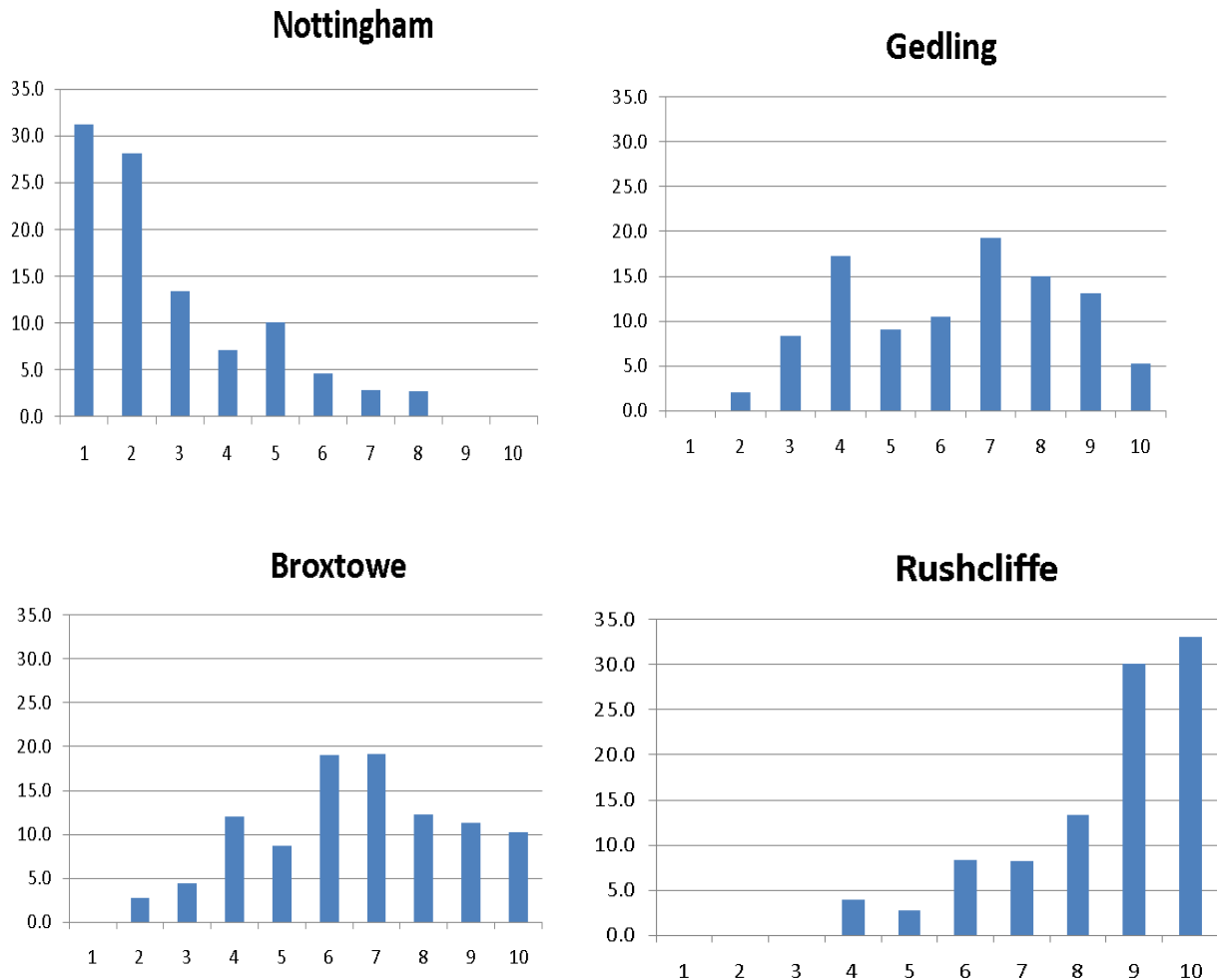
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figures were calculated from the IMD based on the ONS 2007 data for Lower Layer Super Output Areas (LSOA). (A **Lower Layer Super Output Area** is a geographical area determined by the Office of National Statistics containing around 1500 people. There are 32,482 Lower Super Output Areas in the country and 137 in the City of Nottingham)

1 – is the most deprived 10% of LSOAs in the UK

10 – is the least deprived 10% of LSOAs in the UK



**Figure 1 – Proportion of population living in deprivation deciles**

*Source: Author calculations based on ONS data*

This data shows quite a shocking difference between the City of Nottingham where nearly **70%** of the population live in the most deprived 30% of UK LSOA areas, whereas in Gedling and Broxtow it is **less than 10%** and in Rushcliffe **none** live in the most deprived 30% of LSAOs.

In terms of another set of comparisons, The DCFS produce a "*Children's Services Statistical Neighbour Benchmarking Tool*" which allows for direct comparison between cities and their 10 nearest neighbours. It compares performance on a number of key indicators including Under 18 conception, various measures of school attainment and educational engagement factors. Nottingham's 10 "nearest statistical neighbours" are:

- Manchester
- Barking and Dagenham
- Sandwell
- Kingston Upon Hull
- Southampton
- Wolverhampton
- Birmingham
- Salford
- Middlesbrough
- Liverpool

However the proximity is only "close"- at the midpoint of a 5 point scale. Nottingham comes out poorly overall on most statistics when compared to its ten "close" neighbours. It has:

- Highest U18 conception rate
- Third lowest KS1 reading
- Third lowest KS1 writing
- Lowest KS1 Maths
- Lowest KS2 Science
- Lowest KS2 maths
- Second lowest KS2 English
- Third lowest KS3 English
- Third lowest KS3 Maths
- Third lowest KS3 Science
- 5<sup>th</sup> lowest 5A\*-C inc E&M
- Highest primary absence rate
- Third highest secondary absence rate
- 4<sup>th</sup> highest exclusion rate
- Second highest 10-17 conviction rate
- Third lowest % in EET

On every measure, Nottingham is worse than the mean of its statistical near neighbours. Interesting however, the only statistic where Nottingham comes near the middle is the percentage of 5+ A\*-C including English and maths at 16 – the definition of Full Level 2 where it performed better than Manchester, Sandwell, Kingston Upon Hull and Middlesbrough.

This is the context in which Early Years provision takes place in the City of Nottingham, and within which the pilot is operating. It suggests that not only do the families and young people involved in the pilot face immediate problems (e.g. KS1 attainment and primary school absence), but that there are further issues lurking in the future for them at later phases of education (e.g. KS2-4 attainment, GCSE attainment, exclusions, conviction and NEET).

## 2. Background to the Evaluation

### 2.1. Family support

A key element of the Two Year old Pilot is developmental and support work with families. There are two strands of family support:

- Home Learning Environment Support (i.e. structured parent/ toddler time and other parenting support)
- Wider parental support

It is stated in the Support Pack that families should have access to both elements of the family support offer, and families should be encouraged to access some parent/toddler time as part of the pilot.

#### 2.1.1 Family support

The government expects each participating Local Authority to put steps in place to ensure all participating families know how to access the support they need to provide family stability and a positive environment for their child. Providers will be expected to be able to signpost families to support with services such as:

- health advice
- counselling;
- drug/alcohol support groups;
- housing advice;
- benefits advice;
- training (including targeted programmes such as family literacy, language and numeracy);
- employment support;
- confidence building/ assertiveness training.

This 'Family Support' requirement was introduced in the second wave of the Pilot (in 2008) and therefore was not a priority when the Pilot was started in Nottingham. We understand that the local strategy on this requirement is to support providers to make steps to build relationships with their local Children's Centre (who provide all of the services detailed in the list above). This is an ongoing target for the City and is by no means achieved with all of the providers currently supported. Therefore whilst steps are being taken to put in place support to providers with this requirement, naturally there is little evidence at this moment.

#### 2.1.2 Home learning support

There is plenty of evidence to suggest that elements of what we call 'home learning support' can bring strong benefits to children and their families. The *Effective Pre-School, Primary and Secondary Education* study (EPPSE) explores the benefits that home learning can bring to the child during pre-school period and shows that the benefits remain strong for both academic and social behavioural outcomes through to the end of primary school at age 11 (Melhuish et al, 2007).

The government's "*Parents as Partners in Early Learning Project*", (DCFS, 2008) expects pilot providers to promote home learning to parents, and to actively support parents to devise appropriate activities that will support their child's development. This part of the offer links very clearly to the provision of parent/toddler time. It is desired that parents should be encouraged to play with their children at home using letters and numbers, to

read to their children, or to visit the library with them. Our team included one of the national directors of the EPPSE study (Prof Sammons) and this greatly informed the design and analysis of our evaluation. Although the *Home Learning Support* part of the pilot has not started yet, the interviews with parents included some questions related to this. We took great care with the selection of sites to enable us to explore how centres were working with parents.

## 2.2. Evaluation strategy

The evaluation looked into these elements and how they were operating and influencing the families.

### 2.2.1. Families

It was important to explore the perceived impact and the benefits on the family of engaging in childcare provision. This would include economic benefits (e.g. the ability to work or undertake education or training) and other social benefits, but we mainly focussed on the benefits to family life and parenting strategies. We sought to engage some **30-35 families**, including a mix of new and continuing children, who were using the provision and explore their experiences, the benefits and outcomes for the family, the perceived benefits for the child and any problem areas.

### 2.2.2. Provision

It was important for us to engage with providers to examine their views of the impact of the provision on the child and the ways in which the providers were seeing benefits for the child and the family. We engaged **six childcare providers** who were in the Pilot and in each we interviewed key staff, usually the manager. In order to provide triangulation we also observed the children in the settings and evaluated the quality of the provision using observations.

As is shown in **Table 1**, in all cases, two visits were made to each of 6 providers (although some extra visits were needed in order to interview parents at a time convenient to them)

Visit one	Visit two
Questionnaire left for distribution to parents	
Semi-structured interview with centre manager	
Observation of children	Observation of children
Semi-structured interviews with parents	Semi-structured interviews with parents
	Observation of provision

**Table 1 – Organisation of visits to sites**

The target child sample is to include those who entered the provision in September and January.

We are aware of local blanket surveys:

- 2 Year-Old Pilot - Provider's Questionnaire
- 2 Year-old Pilot Evaluation - Parent's Form

We will explore with the Early Years team how we can use this data which can inform our own survey and interview schedules.

### **2.2.3. Developmental data**

We wanted to be able to explore any developmental benefits for the child – although we expected these to be difficult to measure. A range of data was collected through researcher observations of children in the settings and from individual child ratings such as the *Adaptive Social Behavioural Inventory* (ASBI). This is a simple form that was completed by staff on individual children; it was a cost effective strategy and most appropriate as the pre-school worker who knows the child is best placed to complete this. The ASBI was used in the EPPE3-11 study and enables different features of social behaviour to be identified including peer sociability, independence and concentration and hyperactivity, for example. National norms exist for the ASBI so it would enable children's development to be set in context of these. Furthermore, if we subsequently were to follow these children up we could see changes in their social behaviour over time which may help us explore impact longitudinally. We may also be able to compare the children's outcomes on ASBI with those found for the Millennium cohort at comparable ages.

We were provided with raw data and location data from the Nottingham City Council Children's Services Early Years Team and we worked closely with the staffs in the Early Years Team who were able to provide us with whatever data we felt was required. We will explore strategies to collect data on children's progression in key developmental areas as well as using existing baseline data where available. We would also seek to collect data on staff identification of children's needs and the support provided (e.g. health, cognitive, emotional and behavioural).

We made use of such tools the Early Childhood Environment Rating Scale (ECERS E & R) (Sylva, *et al.*, 2006), which enabled measures of centre quality to be examined. These measures were already in use amongst the centres in the pilot and we made use of such data to provide indicators of the quality of provision for pilot children.

We would be interested in working with the Early Years team to use this project as a stimulus to seek longer term, longitudinal funding think for ongoing analysis of developmental data of Nottingham children.

### 3. Previous Studies on Early Years Provision

In the UK there is a long tradition of variation in pre-school provision both between types of provider (voluntary, private and maintained) and in different parts of the country reflecting particular Local Authority (LA) emphases and funding and geographical conditions (e.g. urban or rural) during the mid 1990s. A series of reports questioned whether Britain's pre-school education was as effective as it might be and called for both better co-ordination of services along with research into the impact of different forms of provision (Siraj-Blatchford, 1995).

However, there has been little systematic longitudinal research on the effects of pre-school in the UK. One exception was the Child Health Education Study which indicated that children with some form of pre-school education had better outcomes at school (Osborn & Milbank 1987). Other evidence had been provided concerning the influence of different pre-school environments on children's development (Melhuish 1993; Sylva & Wiltshire 1993). Some researchers adopted cross-sectional designs to explore the impact of different types of pre-school provision (Davies & Brember 1997). The absence of data about children's attainments at entry to pre-school meant that neither the Birth Cohort Study (1970) nor the National Child Development Study (1958) could explore children's developmental progress over the pre-school period. Moreover, there have been significant changes and expansion in pre-school provision and use, as well as changes in the school system during the last 30 years, and thus the 1970 Cohort cannot provide evidence relevant to current practice. The 'Start Right' Enquiry (Ball 1994) recommended the use of longitudinal studies with baseline measures so that the 'value added' to different child outcomes by pre-school education could be investigated and the results inform policy makers.

The most detailed and widely known studies of early education have been carried out in the USA. Slavin et al. (1994) used 'best evidence synthesis' to identify successful programmes for disadvantaged children. They concluded the more successful interventions combined several 'strands', involved intensive participation by children and families and lasted for a substantial number of years. The Perry Preschool Project, later called High/Scope intervention showed striking long term social and economic benefits for very disadvantaged children (Schweinhart, Barnes & Weikart 1993). The study adopted an experimental (RCT) design. There are however limitations (practical and ethical) on the use of randomized experimental designs in studies of pre-school influences. It is argued that the random allocation of young children to alternative pre-school 'treatments' would be unacceptable to most parents in England where policies emphasizing parental 'choice' have been emphasised, particularly given the non-statutory nature of pre-school provision. Also RCT approaches while appropriate to test the impact of specific interventions, can be difficult to generalise to other populations and contexts and cannot indicate which features of an intervention are most important.

Research into the effects of pre-school education requires longitudinal designs which separate pre-school influences from those related to the individual child's personal and family characteristics. It also needs to study a wide variety of children including a range of groups (disadvantaged children and others). Such research should also seek to identify and illuminate the educational processes, including pedagogy, associated with positive effects on children (Sylva, 1994), and so needs to sample from a wide range of different types of pre-school providers and settings.

The **Effective Provision of Pre-school and Primary Education** research (EPPE3-11) was set up to examine the effects of pre-school on young children's cognitive and social

behavioural development and to establish whether pre-school experience provided a better start to school. It also explored whether pre-school effects 'last' (continue to influence children's later progress in primary school and beyond (Sylva et al., 2010). EPPE research design is an 'educational effectiveness' one in which children's developmental progress across a given time span (in this cases ages 3 to 7 years) is explored in terms of a list of possible influences: these include individual child characteristics such as gender or birth weight, family influences such as parental qualifications or employment, the '*home learning environment*' created by the families to support children's learning at home, and finally the educational context of the child's pre-school or primary school. In addition to recruiting children who attended different kinds of pre-school, EPPE recruited children who had no formal, 'group care' at all, we called them the 'home' group and they were valuable because their development could be used for a comparison to the development of children who had attended pre-school.

The first phase of the EPPE study, i.e. when its children were 3- 7 years of age, has shown the benefits to all children of attending pre-school (Sylva et al., 2004, Sammons et al., 2002; Sammons et al., 2003). The second phase, when the children were 7 to 11 years (Sylva et al., 2008; Melhuish, 2008; Sammons et al., 2008a; 2008) showed that the effects of children's pre-school experience lasted until they were age 11, in both cognitive and social-behavioural outcomes. The findings of EPPE documented the gains to children's development that early childhood education could provide. More importantly, EPPE suggested that some early experiences were better than others – at home or in sessional provision. EPPE used quantitative and qualitative research methods to describe good practice in families and centres.

EPPE is Europe's largest longitudinal investigation into the effects of pre-school education and care. The EPPE research centres on a group of 2,800 children drawn from randomly selected pre-school settings in England toward the end of the 1990's. Their developmental trajectories have been carefully investigated, with many 'enjoying, achieving and making a contribution' in the ways described so powerfully in the government's Every Child Matter policy (DfES, 2003). Both some have struggled in their attainment and social/behavioural development and EPPE explores the possible reasons behind the different trajectories. It does this by collecting information not only on the children but on the educational, familial and neighbourhood contexts in which they have developed. The families and educators of the children have been interviewed for detailed information about the education and care practices that children have experienced in both home and pre-school/school contexts. At the core of EPPE are questions about ways that the individual characteristics of children are shaped by the environments in which they develop. This view of reciprocal influences between the child and the environment owes much to the work of Bronfenbrenner (1979) whose theory puts the child at the centre of a series of nested spheres of social and cultural influence, including education.

EPPE was first conceived towards the end of the 20<sup>th</sup> century as a way to chart the contribution of pre-school to children's cognitive and social development, especially the start they made at school (called Reception class in England, at age 5) and their progress through Key Stage 1 (age 5-7). The new government in 1997 was keen to break the 'cycle of disadvantage' in which poor children received poor public services and went on to school failure, poor health and low paid jobs. The then Prime Minister Tony Blair set forth the promise of his new government: 'Provision for young children—health, childcare, support—will be co-ordinated across departments so that when children start school they are ready to learn' (1998, cited in Beltsy, Barnes & Melhuish, 2007).



When the EPPE research began in late 1996 there was wide diversity of provision, no common curriculum or 'standards', and a large un-met need for education and care for children aged 3 and 4, i.e., in the two years before entry to statutory schooling. During the last 13 years that the research has been conducted to follow the progress and development of the child sample from age 3 to 14 England has witnessed a transformation of Early Childhood services for children and families (Sylva and Pugh, 2005). There is now a common entitlement curriculum for children between birth and age 5+ alongside fully specified and statutory 'standards of provision', all neatly laid out in the Early Years Foundation Stage (EYFS, DCSF, 2008). It is important to note that the children and families recruited into the study were the first to experience the government's new policy arrangements for young children and their families. Access to a free pre-school place was made available to the parents of all four year olds in 1998 and this was extended to three year olds in 2004. It might be argued that children and families in the EPPE study were the first to benefit from the strong commitment to early childhood made by the Labour government elected in 1997.

Most significantly for this study, the EPPE research demonstrated that pre-school had a positive impact on children's cognitive attainment and their social behavioural development and that these effects continue to affect children's developmental trajectories up to the end of primary school (age 11) and further investigations are underway to see if pre-school influences last into secondary education also. The study drew attention to the way high quality pre-school has benefits for disadvantaged children and can be seen as an effective intervention to help reduce the risk of poor educational outcomes for at risk groups. It also drew attention to the importance of the home learning environment as a powerful influence on young children's development and future educational outcomes and this stimulated an interest in parenting policies. Findings which suggested that *the duration of pre-school matters* and that an *earlier start to pre-school (age 2 years) could be beneficial* led to interest in the 2 Year Old pilot. Similarly, findings that *the quality of pre-school provision was important especially for disadvantaged groups of children* and its links with staff qualification levels especially that of the Centre Manager have also been influential. Recent new analyses of the EPPE sample to age 10 years have indicated that high quality pre-school experiences can act as an important intervention that reduces the likelihood of later identification of special educational needs in primary school (Anders et al 2010).

The 21<sup>st</sup> Century saw even more initiatives particularly a major policy programme called 'Sure Start'. Launched in 2002 this ambitious programme was targeted at children and families living in the 20 per cent most disadvantaged neighbourhoods. It aimed to 'close the gap' between the life chances of rich and poor. Sure Start was followed by the Neighbourhood Nurseries Initiative, nurseries catering for babies and toddlers and located in disadvantaged neighbourhoods so that their parents could move into employment. Finally, the Children's Centre programme was offered first in 2004 to families living in disadvantaged neighbourhoods and then rolled out to all children and families in England (beginning in 2008).

As we stated earlier, one significant finding from the EPPE study which relates specifically to the Two-Year-Old Pilot is that of the importance of the home learning environment. Indeed evidence suggests "the quality of the home learning environment was indeed the most significant factor in predicting children's learning outcomes when other background factors were taken into account." (Siraj-Blatchford, 2010, 464)

### 4. Research Design

The evaluation adopted a mixed methods approach involving

- Interviews with key staff in pilot Provider Centres;
- Observations (qualitative and quantitative) of the quality of provision (e.g. using the Early Childhood Environment rating scale and field notes) in six pilot Provider Centres;
- Observations of children in the pilot Provider Centres, focusing on aspects of behaviour, interaction, and relationships;
- Data about children's social behaviour obtained from simple checklists completed by child care staff
- A survey of parents of children attending each of the case study pilot Provider Centres; and,
- Analysis of existing data held by the Nottingham City Council Children's services Department.

The research will adhere to strict ethical guidelines protecting the anonymity and confidentiality of participants (children, families and staff). Hence, the evaluation used both quantitative and qualitative methods. This approach enabled the collection of data from different sources - children, parents, nursery staff, and nursery managers - with the purpose of strengthening the reliability of our findings by triangulating results obtained by these different methods and from the different informants. Qualitative data were collected using individual interviews with each nursery manager, parent semi-structured interviews (either face-to-face or by telephone), environmental field notes, and child observations. All project staff who visited the providers and collected data directly from children had obtained CRB Enhanced Disclosure. Quantitative methods comprised the Adaptive Social Behaviour Inventory (ABSI), and a questionnaire survey of parents. The specific methods are described below.

#### 4.1. Qualitative sources

##### 4.1.1. Manager interviews

Semi-structured, face-to-face interviews were conducted with the six nursery managers to explore their perceptions of participating in the pilot programme, and of both child and parent impact. Interviews were carried out between July and September 2009, prior to the first round of child observations.

##### 4.1.2. Parent interviews

A total of 17 semi-structured parent interviews were carried out to investigate parental perceptions of their experiences in participating in the pilot programme, as well as to explore their views on benefits to their child. Interviews were conducted between October and December 2009, after the child observations had been completed. Children had been involved in the pilot for at least two months at the time of interview. Interviews were conducted either face-to-face at the nursery or by telephone (whichever was preferred by the parent).

Manager and parent interviews were audio-taped and then transcribed. Interview transcripts were coded using analytical matrices (Miles & Huberman, 1994) in order to allow a systematic analysis of the qualitative data. All matrices were stored securely as Word documents. Initial data reduction was carried out by preliminary first level coding of transcripts using broad themes derived from the interviews schedules. Second level

coding was then carried out to identify emergent issues within these themes. As the researchers coding the interviews were also involved in the data collection, coding checks were carried out for reliability. This procedure helped to clarify of definition of the codes used.

### **4.1.3. Environmental field notes**

These field notes were taken on the first visit to each of the providers by the researcher as they were shown around the premises. The aim of this method was to gain an environmental description of each of the nurseries, focusing on the location, general appearance of the building, indoor and external facilities, and décor.

After adding any further reflections on the site, these field notes were written up in order that they could be used in the descriptive profiles of each nursery. This procedure helped to clarify the physical structure of each site and explain how and why some of the activities took place.

### **4.1.4. Child observations**

Observations of 4-5 pilot children in each setting were carried out on two occasions. The first was between July and September 2009, and the second was between October and December 2009. A total of 23 children were observed and permission was gained from parents prior to observations taking place. Children were observed in order to identify key tasks, activities and interactions they involved themselves in. Researchers used a schedule to log observations in the following categories: relationships with adults, relationships with other children, verbal interaction, non-verbal interaction, and play. There was also an 'other' category. Children had been involved in the pilot for at least two months at the time of observation.

The observations were coded from the schedule into an analytical matrix, which was stored securely as a Word document. This matrix allowed within- and across-categories analysis of child activity at an individual (e.g. it was possible to look at a child's observed activity alongside the perceived activity on the ABSI form completed by a staff member) and group level (e.g. similar activities were able to be identified within particular settings). Preliminary first level coding of the observation data used the broad categories mentioned above. Second level coding was then carried out to identify interesting issues within these categories.

## **4.2. Quantitative sources**

### **4.2.1. The Adaptive Social Behaviour Inventory**

The Adaptive Social Behaviour Inventory (ASBI) (Hogan, Scott, & Bauer, 1992) is a general measure of social and behavioural development of pre-school children and has been used in a number of other studies including Sammons et al (2003), Melhuish et al. (2001) and Burchinal and Cryer (2003). The inventory comprises 30 items, and each of these items represents a directly observable behaviour. Originally the inventory was developed for parents to complete regarding their child's behaviour at home, however it has also been validated for use in the preschool classroom by teachers and teaching assistants, and has demonstrated inter-rater consistency (Greenfield et al, 2004). In this study, the ABSI was administered to each of the observed children by a member of the nursery staff on the first visit to the sites. This was carried out between July and September 2009.

### 4.2.2. Parent questionnaire

Having interviewed 17 parents of observed children, a questionnaire was designed and administered to all parents involved (past or present) in the pilot programme. A total of 120 questionnaires were sent to nurseries (20 x 6 nurseries) to be distributed to parents in December 2009, and a self-addressed envelope was also provided in order to preserve the anonymity of those who responded. 17 of these were not given out so in actuality, only 103 were distributed. We received responses from a total of 15 parents, all of whom were current users of the pilot provision. Hence a response rate of 15% was achieved, which is really quite disappointing, however we do need to take account of the context of some of the parents. The questionnaire explored issues relating to the pilot, focusing especially on benefits to children and parents, and aimed to position the individual interview responses within the wider context of the pilot.

The children ranged from 2 years 4 months to 3 years old and 90% of families had 1 (2), 2 (6) or 3 children (5).

English was the main language for 75% and this was the language spoken at home with the exception of two families. The majority described themselves as white or British.

Data collected via the ABSI and parent questionnaire were entered into Excel (and subsequently SPSS). Data were given individual and provider identifiers in order that patterns could be identified within and across sites. All files were stored securely. Analysis was conducted initially at question level, followed by a secondary analysis at provider level. In the case of the ABSI data, an additional level of analysis was carried out that linked the inventory data and the child observation data.

### 4.2.3. ITERS and ECERS scores

Each of the chosen providers had been given ECERS and/or ITERS scores by Nottingham City Council as part of their evaluation of providers. The ITERS scale consists of 39 items organised into seven subscales, each measuring a different dimension of quality (e.g. space and furnishings, care routines, listening and talking, activities, interaction, programme structure, and parents and staff). These scores were considered for the 23 observed children. Based on the imputed quality scores (one nursery did not have an ITERS score):

- **39%** (n=9) of observed pilot children had taken up a free place in a setting with an ITERS score of 5 or above (which represents a 'good' score):
- **39%** (n=9) took up a place in a setting with an ITERS score of 4 - 4.9 (which represents the higher end of 'adequate');
- **4%** (n=1) took up a place in a setting with an ITERS score of 3 - 3.9 (which represents the lower end of 'adequate').

The ECERS scale uses the same format and scoring, but is used for slightly older children (2.5 to 5 yrs). For this reason, the ITERS scale was the primary focus of analysis.

## 4.3. Problems with data collection

As is common with research in disadvantaged communities, we experienced some difficulties recruiting and meeting as many parents as we had originally desired. In some cases appointment were arranged but parents did not show up, sometimes it was because the child missed nursery on that day. In a number of cases, access proved potentially problematic and where we could we undertook interviews with parents over the telephone.

## 5. The Early Years Sites

In this section we provide basic details of our six sites. The sites were selected by a careful process to ensure we had a spread of sites across the City. We focussed on one of the providers in each of the following areas:

- Arboretum
- Aspley
- Bestwood
- Bulwell
- Forest Fields
- Sneinton

All these areas contain some of the most deprived parts of the city, and indeed the country, all being located in the bottom 10% or 20% of deprivation.

The final selection was based on size, quality ratings from OfSTED reports and ICERS scores.

We begin with a brief description of each of the sites. The names of all sites in this report are pseudonyms.

### 5.1. First Steps

(ITERS – high, ECERS – high/adequate)

#### **Description**

This nursery is located within an established housing estate and is integrated with a local Children's Centre. The nursery provides both private and neighbourhood nursery childcare places for local parents and places are also available as part of the local Sure Start initiative.

#### **General appearance**

The building is in fairly good condition externally and the nursery is on one floor. To enter the premises, parents are required to 'buzz in' and are greeted by one of the carers. There is a notice board in the reception for parents giving information regarding grants, health issues, etc.

#### **Number of staff**

A total of 13 staff, including the cook.

#### **Number of children**

It caters for approx 55 children under 8 years of age.

#### **Facilities**

- i) The baby unit takes children from 6mths to 2yrs of age and is situated within a large room with several large windows. There are wall and hanging displays, as well as photos of the children. The area is divided into different areas (e.g. water play, art, quiet area).
- ii) Children who are 2 years old (including pilot children) are in the room next door, which is a similar size. Although there are several tables in this room, there is room for them to be pulled back for whole group activity. The walls display children's work and photos of activities.
- iii) The final room accommodates 3-4 year olds. This is the largest room and leads onto an outdoor space. Again, the room is divided into areas for various activities

and the walls display a combination of manufactured materials and children's work.

- iv) The outdoor area comprises a tarmaced area and a grassy area. This area is well secured and is used throughout the day by the children.

### **Role of manager**

The manager has been in this role for 6 years, *'...as long as the nursery has been here'* (provider interview). Her role involves looking after day-to-day operations and she is also involved with the programme provided by the Children's Centre. She considers that part of her job is to *'...signpost things to parents like health, family support, advice sessions, etc'* (provider interview).

## **5.2. Happy World**

(ITERS – high/adequate, ECERS – low/adequate)

### **Description**

This nursery is based in a very large, old house on a new housing estate. The nursery received funding to open through the Neighborhood Nurseries initiative and is one of 2 nurseries run by the same company.

### **General appearance**

The house has two floors and all rooms are very large. Although an attractive building architecturally, it is in need of some attention. However, inside it is fairly well decorated and welcoming.

### **Number of staff**

The nursery have approx 30 staff (including a cook / housekeeper), *'...but they do not all work at the same time'* (provider interview). There are some part time staff but 10 members of staff working on a full time basis.

### **Number of children**

It is registered for 111 children under 8 years of age.

### **Facilities**

- i) The baby unit takes children from six weeks to approx 22 months old. It is a large room with a separate facility for cots.
- ii) The main room is split into two areas: one for eating and one for playing. There are a lot of displays on the walls.
- iii) The next room is for approx 2-3 year olds and is on the second floor of the house. This room is divided into areas for water play, messy play, reading, eating etc. There are lots of displays on the walls. The room connects with the pre-school room, which occasionally allows for joint activities.
- iv) The final room is also on the second floor and is for pre-school provision. This room is set out with different activities, but also allows for the children to work whilst sat at tables (as they will at school). There is also a carpet area.
- v) The house also has a craft room where all groups go to participate in creative activities.
- vi) There is a sensory room and an indoor / outdoor room for when it is raining and the children cannot play outside.
- vii) The outside area is surrounded by a 10ft steel fence and backs onto a canal / brook. There is a large tarmac area, and a large grass area which has swings, tables, sand pit and nature walk.

### **Role of manager**

The manager has been in post for approx one and a half years. Her role is to take care of the day-to-day running of the nursery, to oversee the parents, to answer the telephone, deal with admin, *'...and I also cover rooms as well'* (provider interview).

### **5.3. Footprints**

(ITERS – low/adequate, ECERS - high)

#### **Description**

This private day nursery is based in a former college site and is located opposite a large high school. It is also adjacent to a former nursery site which the owner is trying to purchase in order to expand as they need more space and wish to give access to more children. The catchment area is mixed and some children travel some way to attend this nursery.

#### **General appearance**

The current facilities are over one floor and all rooms are large. The building is quite old but well decorated on the inside and appears welcoming on entry with a parents' notice board. Entry is secured by the use of fingerprint readers.

#### **Number of staff**

There is a total of 25 staff.

#### **Number of children**

The nursery is registered for 77 children under the age of 8 years.

#### **Facilities**

- i) The baby unit takes children from birth to 2 yrs old, and has its own play area through an external door. It is a single-level room with an area for the younger children and another area for those who are nearly 2 years old. There are displays and material on the walls.
- ii) The next room is for 2-3 year olds and is divided into areas for water play, messy play, reading, etc. There are lots of displays. This room also leads out onto the outside area.
- iii) The next room is for 3-5 year olds. It has its own sink, newly equipped toilets, lots of equipment to play with, and has its own small play area. The room is a bit disorganised.

#### **Role of manager**

The manager has been in this role for seven years and was a deputy manager in another nursery prior to this position. The owner of the nursery lives on the premises, but has handed over the running of the provision to the manager – *'I run the place. He does the business, repairs, etc, but I have the running of the child care'* (provider interview).

### **5.4. Small Faces**

(ITERS – N/A, ECERS – high)

#### **Description**

The nursery is a committee-run provision, and is integrated with a local community centre and run by a charity.

#### **General appearance**

The building is old, very small and was a school, but is now shared with the community.

### **Number of staff**

There are 6 members of Staff including 4 preschool workers and 2 lunch staff

### **Number of children**

This provision is registered for no more than 26 children from 2 years to under 5 years.

### **Facilities**

- i) There is no baby unit.
- ii) All children are in one large room which is zoned. There are around 6-8 two year olds – and the rest are all 3-4 years old. Pilot children are integrated. The room has several windows and lots of play equipment and there are lots of wall and hanging displays.
- iii) There are no cooking facilities and children all bring their own lunch. There are two lunchtime assistants who help out at lunchtime.
- iv) The outdoor area comprises a tarmaced area but no grass. The area is partitioned into creative and play, and part of the area has recently been re-surfaced (paid for by Early years grant). There is a new play frame/climbing frame.

### **Role of manager**

The manager is a working manager who is contracted for 25 hours a week, to include pre-school care and all duties of running the site. The manager has overall responsibility for the setting including all staffing, managing waiting lists, CRB checking etc. The manager also attends the committee meeting as the nursery is run by a charity.

## **5.5. Tree Tops**

(ITERS - high, ECERS – high/adequate)

### **Description**

This nursery is managed by a management committee. It operates from within a training centre, in a refurbished building. They also run training for parent groups.

### **General appearance**

The nursery is well proportioned, tidy and secure. There is a CCTV camera on entry to the premises. A copy of the local mission statement relating to neighbourhood and family regeneration in the reception area, and local jobs are also displayed on the board.

### **Number of staff**

There are approx 30 permanent members of staff (including part time staff).

### **Number of children**

Registered for no more than 65 children under 8 years of age.

### **Facilities**

- i) The baby unit takes children from 6mths to 2 years old. This room is quite small with few windows, but there are lots of wall and hanging displays, and the routines and menus are also shown on wall. The room is divided into areas e.g. water play, art, quiet area.
- ii) The next room takes all 2 year olds (including pilot children). There is a main room, changing room and a room for group activities plus one other. This is a larger size to the baby room. There are several tables that are pulled back for whole group activity. There are many displays on the walls and photos of the children.



- iii) The final room takes 3-4 year olds. This is the largest room and leads onto an outdoor space with dedicated play area. The room is divided into areas for various activities. The displays are a mixture of manufactured posters and children's work.

### **Role of manager**

The child care services manager has been in post for six and a half years – *'I manage all on and off site childcare. I also run the training courses here'* (provider interview).

## **5.6. Little Fairies**

(ITERS – high/adequate, ECERS – low/adequate)

### **Description**

This provider is a neighbourhood nursery located opposite the local Sure Start Centre and Children's Centre.

### **General appearance**

The nursery is based in a former pub and is over two floors. All rooms are large. The building is quite run down externally and inside it appears cold and unwelcoming.

### **Number of staff**

There are 18 members of staff (including a cleaner and cook).

### **Number of children**

Registered for 98 children under 8 years old.

### **Facilities**

- i) The baby unit takes children from birth to 2 years old. It is a split-level room with an area for the very small children and another area for those nearer 2. The room acts as a corridor between the entrance and other rooms. There are a few displays.
- ii) The next room is for 2-3 year olds (not including pilot children). The room is divided into areas for water play, messy play, reading, etc. There are lots of displays. The room leads out onto the outside area.
- iii) The next room is similar to the previous one, but is for the pilot children only.
- iv) The final room is on the second floor and is for the after school provision. This room is large but quite bare.
- v) The outside area is surrounded by a 10ft steel fence yet equipment still has to be taken in each day to avoid theft or damage. There is a large tarmac area, a separate soft-surface area on a higher level, and a large grass area.

### **Role of manager**

The manager has worked at the nursery for three years, but been in this role for two of those. She describes her role as overseeing *'...the running of the nursery, support staff, supervisions, assessment systems, partnerships with parents, and so on'* (provider interview). She is also key in the implementation of new policies and making sure the provision is up-to-date.

## 6. Overview of the Two Year Pilot

### 6.1. Introduction

This section draws on Sections B and C of provider and parents interviews and gives an overview of the Pilot, how it was accessed the sources of information about the pilot.

### 6.2. Source of information about the pilot

The parents we interviewed had joined the scheme between **January 2008** and **April 2009**, with the majority joining between **January 2009** and **April 2009**.

Parents had mainly four ways of hearing about the pilot: from another person, through another child's provision, from publicity material or from a professional. Notably no one reported hearing about the scheme directly from the local authority. In some ways this might have been surprising, but in other ways it seems more positive that information is flowing not from the top down from the central bureaucracy within the city council, but through social networks that form the everyday lives of the parents.

We understand that it was always the LA's intention **not** to employ Outreach Workers to refer families to the Pilot but rather to engage with existing 'Family Support' services (Health Visitors, Social Care etc). It was felt this would be a much better way to engage with parents and support the sustainability of the scheme if it were to continue in the future. Whatever the issues for the future, this strategy does appear to be working insofar as engaging with existing family support services.

The most frequent route was through another professional with whom the parents were engaged – most usually the health visitor. The health visitor was able to look into the parental situation and intervene, both for clinical and strategic purposes:

*I also have a 9 year old with asbergers. I found out about it from my health visitor. I am signed off sick and she suggested I ought to look into it. I didn't know before she told me.*

*The health visitor suggested me getting her on the list so that she had more chance of getting a place.*

Not only was the health visitor able to provide information but it seemed this was part of a health and well-being strategy

*The Health visitor told me. I am not working and nursery is just too expensive. If it were not for this I would not be able to afford to send him anywhere. He would then just have to stay at home with me all day which would not be good for him or me.*

*My health visitor told me about it. I was worried that he was spending so long with me and I wanted him to meet other children. So he can get used to it when he goes up to big school. We wanted him to get used to being away from us.*

After the health visitor, parents found out from receiving information from the childcare provision of another child.

*I took my daughter to the Sure Start Centre and it's opposite to the nursery. They told me about it.*

*I was taking my daughter to the pre-nursery club and a woman who works at the children's centre told me about it. Otherwise I wouldn't have known at all.*

*The Children and families information service gave info to Children's Centres. And they were really good.*

Parents also found out through other forms of publicity – e.g. a leaflet from a children's centre or nursery or from an advert on local radio.

*There was a leaflet through the door inside a magazine from the City Council that has jobs and things going on in the community in it.*

So, even though there was a feeling the local authority had informed no-one – it is clear that many of the routes depend on infrastructure emanating from the city authority itself.

Finally parents found out through informal networks of friends and relatives – since word had got around.

*A neighbour told me about it because her daughter was doing it.*

*My aunt told me about it as her granddaughter had been on it.*

Once contact had been made with the providers, information was generally very forthcoming, with usually the nursery manager proving answers to all questions.

*The most effective has been that the nursery is so welcoming.*

*Everyone at the nursery was welcoming.*

These last two comments are example of the generally positive relationships between parents and nursery a staff.

### 6.3. Getting onto the pilot

Parents reported finding it very straightforward getting onto the scheme and being allocated a place. In most cases this involved no more that filling in a form visiting the nursery and waiting. The following expresses the situation for the vast majority of families.

*I got in touch with the nursery and they told me to come and visit. The staff seemed to be enjoying the work. It was a happy environment. I have never regretted it. I am in receipt of benefits because I don't work so I don't pay. I am expecting again in March. There was a 3 month wait over summer holidays. I got a call in the summer for him to start in September. I had no contact with Local Authority – all was with the nursery.*

Occasionally however, the Health Visitor acted as an intermediary:

*My health visitor got in touch with the nursery and then I got in touch with the nursery and they asked me if I would go in for a chat.*

Whilst not everything went so smoothly for everyone, but even in cases where the preferred option was not possible, an alternative was acceptable, as the following example illustrates.

*I called the phone number on the leaflet and got the list of local nurseries taking part. I chose this one because it was the closest and I applied there for January sessions but didn't get place for then – they could only offer the later sessions that went on till 6pm and that was too late for me so I asked if could get a place for April time and I did.*

### 6.4. Parental involvement in the pilot

From the parental survey it appeared to us that the most common reason for accessing the provision was for the **development of the child's social skills through interaction with other children** (7). **Getting respite and time to spend with other children** was given as a reason by 3, and **looking for work** by 2 parents. All but two parents felt their reason for accessing the provision had been achieved. This mirrors the evidence we gained from the interviews which we report on in this section.

We asked about parents' reasons for wanting to get their child involved in the pilot. Of course sometimes it is difficult to isolate particular reasons because some parents may have multiple reasons for what just seems a good thing to do. The complexity of some people's lives is illustrated in the following quote, which neatly sums up many of the similar comments we heard.

*I wanted to socialize him, and a close second to give me time. I have not been able to work because I was heavily depressed after I had him. So I didn't feel like getting up and looking for work. There's not a lot of money to go round.*

This encompasses four key themes: *socialization* of the child, *respite* for the parent, mother's *mental health* and the precarious parental finances.

However we were able to identify several key motivating factors, two of which were more prominent: the development of the child and respite for the parents. We will now explore each of the two main motivators.

#### 6.4.1. Child development

Parents were very aware of the need for children to meet other children and with other adults in order for their development opportunities to be fully exploited. In many cases parents were aware of the limitations imposed by their own circumstances. Specifically parents mainly wanted their child to meet and socialize with other children as well as to begin to introduce them to adults other than the parents.

*He was a bit clingy and I wanted to get him used to being away from me.*

*I wanted him to get used to being with other children. I did want to get a job but I got pregnant with Chloe so I could not get a job till she is older. I wanted him to socialize with other children. He is clingy and shy and I want him to go with other children and adults other than just me and his dad.*

*I wanted him to meet other children. Staying home with me he would not get much chance to meet other kids his age.*

*My daughter was really shy and now she has more confidence and will talk to others, adults and children and she's learned a lot of words.*

A further motivator was recognising the need to be "school ready" because this point was a key stage in both the child and the parents' life.

*I wanted her to get ready for nursery when she was three and to give myself a bit of free time so I could get ready to go back to work.*

*Mainly just for my daughter to socialize and get her used to being around other children and to get her ready for main nursery.*

*I don't have many friends with children the same age so I wanted to get her used to being with other children and share with them and be social with them. My other son did not go till quite late and I can see the different he does not find it easy to mix with other children.*

### **6.4.2. Respite**

The term "respite" might bring with it some negative connotation, suggesting the parents "just wanted a break". However, this potentially masks some of the real difficulties some of these parents were experiencing.

*I'm a single parent and have 3 kids and I need a break from them sometimes. I put his name down at loads of nurseries. I'd previously had some respite care there for him due to domestic violence in the home and he'd gone there so I could have some time on my own so he knew it and liked it.*

*I was in the early stages of pregnancy and decided it would be easier if my daughter was at nursery.*

*I was educated and got qualifications – but I have the same needs for the pilot as others – but the difficulties I suffer are not so obvious. I have been suffering post natal depression for two and a half years. I am a single parent with no family here so we are very isolated. These four mornings are the only time I get to myself.*

*To give me time really. With four kids it's difficult to get everything done. Like shopping, housework, going to doctors and so on – it's difficult enough with three kids doing all that.*

It becomes clear that getting some respite from the child is not to be seen in the sense of seeking rest and relaxation; in many cases it is just about making daily life more possible.

### 7. The Benefits for the Children

We report in this section on the benefits and advantages the pilot programme had on children. We do this by triangulating findings from both quantitative and qualitative methods and findings from different sources. Findings presented here are based on:

- interviews with nursery managers;
- ASBI evaluations carried out by staff;
- child observations;
- semi-structured parent interviews;
- questionnaires completed by parents.

#### 7.1 Interviews with nursery managers

Each of the six nursery managers was asked to identify the benefits of the pilot in terms of children’s development. The interviews were conducted prior to any of the other data collection methods, between July and September 2009. The interviews were audio-recorded and transcribed, and analysed using analytical matrices, as described in **Section 4.1.2**.

##### 7.1.1. Cognitive and socio-cultural developments

The overall views of the six managers were very positive. Findings are presented in **Table 2** with each theme and the number of managers who noted each theme.

<b>Benefit / development</b>	<b>No. of managers</b>
Social skills	5
Language	4
Behaviour	4
Life skills	3
Confidence	3
Sharing	3

**Table 2 – Reported benefits of engagement**

As Table 2 shows, there were a number of common developmental benefits identified by at least half of managers: social skills, language, behaviour, life skills, confidence, and sharing. Children’s improved social skills was an area in which five of the managers had seen developments, which covered interactions with peers, sharing, polite manners and understanding boundaries.

*I see lots of changes with social skills. Some children start sharing for the first time and start being able to interact with other children in a more appropriate way.*

*The biggest difference is in their social skills – being able to play within boundaries is an important part of being able to function and interact with other people.*

*Being able to wait their turn when they’re playing or eating is really important and they often can’t do this when they come here. Seeing them being able to do that and not think everything is about them all the time is rewarding.*

It was also noted that those children who attended the provision benefitted when they went to pre-school provision at a later date.

*If they go elsewhere when they're 3, the school nurseries often say that the pilot children are more prepared than those who haven't been to a nursery before.*

Language was another significant area in which four of the managers noted developments.

*One of the main differences is in their language – once the children have something to talk about at home, the parents talk more to them and this has a really positive affect.*

*A lot of the children have language issues, especially if English is second language in the home. They have to communicate here.*

*One boy was just grunting when he came here now he says good morning and responds to his name and is really coming along. He is picking up everyday words.*

Many managers (n=4) perceived a major benefit of the provision to children was in the area of behaviour.

*Behaviour difficulties are quite hard to define at this age because they usually stem from something else, but we do see improvements in the overall behaviour of children.*

*You start to see that children are responding to instruction a lot quicker, not messing around when they should be tidying up, saying please and thank you, that sort of thing.*

Two managers stated that the pilot made it easier to identify children who may benefit from a referral, whereas if the provision was not in place these problems would not be picked up until at least 3 years of age or later.

*Another benefit that I've seen is in identifying children who need some kind of enhanced provision when they turn 3. Especially with parents who don't realise that their child is having difficulties, it can be tricky to tackle the subject so that the parent becomes aware that there might be help that the child could benefit from.*

Life skills were identified by three managers as an area that improved from attendance of the nursery provision. These included eating, table manners and diet.

*Sometimes the children aren't particularly clean, their teeth and things, and if they see other children doing these things, they tend to follow suit.*

*Just basic things like parents will come to us and say they want to start them potty training and we would find it easier here than parents do at home because it's part of our routine and we don't mind if children wet on the floor and parents do mind this.*

*Some children may have problems like sitting and eating at a table because they don't do it at home, but they get used to it here and soon find it easy to do.*

Many of the life skills that improved were due to establishing a daily routine. All managers who identified improvements in life skills saw this as a benefit for children.

*It's a simple routine – a lot of the children lack routine at home, but in here you can guarantee our children will know tidy-up time, song time, lunch time, brush your teeth time.*

*It's about giving them consistency and continuity all the time.*

Three managers reported increases in children's confidence as a benefit.

*There's much more confidence to when they first start.*

*Some of the children have anxiety and separation issues at the start, but they see that their parent comes back at the end of the day and their confidence begins to increase and you can see them getting braver each day.*

Improvements in the ability to share were reported by three of the managers. This reflected goals concerning children learning to participate in a range of experiences, and cope with social aspects of play such as sharing toys, choosing activities and turn-taking.

*There can be some shouting and crying and pushing to start with because most of them are used to getting their own way at home and having toys of their own to play with. They come here and suddenly there are others who want to play with the same toy and learning how to deal with that is quite difficult.*

*It's so rewarding when we finally see a child who has had sharing problems handing over a toy to another child to play with. It's a difficult concept to learn.*

### **7.1.2. Enjoyment and well-being**

Managers were also asked if they thought the children enjoyed attending the provision. Of the four nursery managers who answered this question, all of them reported an overwhelmingly positive response:

*They definitely enjoy coming here. They get to know other children and learn more activities. It's more fun for them than being at home all the time.*

*We do see some children getting upset when they start, but once they settle, they love it!*

They also stated that the majority of children (on the pilot) in their care were happy and contented. This was said to be as a result of the constant stimulation experienced at the nursery.

*They spend a lot of time in the garden area and playing on the equipment that they just don't have at home.*

*They have so much more time with adults than they do at home and this has a good effect on everything which makes the child feel good about things.*

Several of the managers thought that the amount of adult attention and interaction children received while participating in the pilot had a positive impact on the well-being and increased their sense of self-worth.



## 7.2. Observed and perceived child activity

### 7.2.1. Adaptive Social Behaviour Inventory (ASBI)

Members of staff at participating centres who were familiar with each child were asked to complete the ASBI questionnaires for each of the children being observed as part of the evaluation. In previous research (e.g. Sylva *et al*, 2004), this scale has been divided into four subscales as identified by Hogan, Scott and Bauer (1992). However, given the relatively small sample of children observed and in an attempt to link the items on the inventory to improvements in child development identified by the nursery managers (and parents, see below), the ASBI questionnaire responses were divided into six subscales as described below:

- social skills (items 1, 2, 6, 7, 13, 19, 27)
- language (items 11, 12, 30)
- behaviour (items 3, 10, 15, 16, 18, 21, 23, 26, 29)
- life skills (item 25)
- confidence (items 9, 14, 17, 22, 24, 28)
- sharing (items 4, 5, 8, 20).

In all of the subscales, higher scores indicate better behaviour where the statement is positive (e.g. is helpful to other children), whereas a lower score indicates better behaviour where the statement is negative as it suggests a lower incidence of negative behaviour (e.g. gets upset when you don't pay enough attention). Of the 6 sites taking part in the evaluation, five completed the inventory for a total of 22 children.

Overall scores for the five nurseries are shown in **Table 3**.

	<b>Improvement of positive aspects</b>	<b>Average score</b>	<b>Reduction of negative aspects</b>	<b>Average score</b>
<b>Social skills</b>	281	2.13	44	2.00
<b>Language skills</b>	140	2.12	N/A	N/A
<b>Behaviour</b>	235	2.14	138	1.57
<b>Life skills</b>	48	2.18	N/A	N/A
<b>Confidence</b>	185	2.10	74	1.68
<b>Sharing skills</b>	125	1.89	36	1.64

**Table 3 – ASBI Scores**

These findings suggest that participating nurseries were effective in promoting positive aspects of development, with providers scoring an average of 2.10 or above (out of 3.0) in relation to social skills, language, behaviour, life skills, and confidence. This indicates that these positive aspects of development were happening either *sometimes* or *almost always*. The average score was slightly lower for 'sharing' at 1.89.

The scores also show that nurseries were fairly successful at reducing negative aspects of development. Average scores ranged from 1.57 to 2.00, which indicate that these aspects of behaviour were taking place either *sometimes* or *rarely/never*. The area with the highest score was negative social skills.

### 7.2.2. ITERS Scores

We also examined these data in terms of the ITERS scores given to each of the providers in our evaluation. This analysis showed that the average scores recorded for all positive items on the ABSI scale were higher for the provider with a low ITERS score (Foot Prints). This is most apparent when looking at the area of 'behaviour skills'.

In terms of reduction of negative areas of development, Foot Prints also showed greater success. The provider who scored consistently more highly (which indicates higher frequency of negative development) in each area were Happy World and Little Fairies, both of which had high/adequate ITERS scores.

It should be noted that these data are based on perceptions of nursery staff. The next section reports on the observations of children in situ.

## 7.3. Child observations

Observations of children were divided into five main categories:

- relationships with adults
- relationships with other children
- verbal interaction
- non-verbal interaction
- play

### 7.3.1. Relationships with adults

Within the groupings observed, there were between three and four adults present. The ratio was approx 1:3. The relationships between children and adults had a number of similar characteristics across the six settings. The most common of these was *praise and feedback*, followed by *questioning by the child*, and *listening*. In all of the six providers, child relationships with adults also involved the *child seeking attention*, and *wanting to be in close proximity to the adult*, and in four of the nurseries *watching the behaviour of adults* was also observed. In the settings with an ITERS score of 5.0 or above, the balance of the relationship between adult and child was fairly equal, which indicates that children were encouraged to initiate these relationships. It was also the case that these settings demonstrated more one-to-one relationships. Adult-child relationships in the remaining nurseries were more likely to be initiated by the adult, and were also more likely to involve a group of 4 or more children.

### 7.3.2. Relationships with other children

Again, the relationships between children had a number of similar characteristics. The most common of these were *imitation*, *co-dependence*, and *sharing* which were observed in all nurseries. There were also negative characteristics seen in three of the settings – *aggression*, and *confrontation*. In five of the six providers, relationships with other children involved the *seeking involvement with others*, and *observing others*. In the

settings with an ITERS score of 5.0 or above, there seemed to be a greater degree of sharing in these relationships.

### 7.3.3. Verbal interactions

Adult-led interactions (including praise, instruction, and questioning) were the most common across all six nurseries and involved the majority of the observed children. In five of the six providers, child-led interactions were also clearly identified. Almost half of all of the child-initiated observations included interventions from a staff member. This was usually in order to praise the child or to extend the play / learning that was taking place to others. In the settings with ITERS score of 5.0 or above, the balance of who initiated the activities, staff or child, was very equal, suggesting that children were encouraged to initiate activities and interactions. The children in nurseries with lower ITERS scores experienced a different balance of initiation, with a much greater emphasis upon staff initiated episodes. In all of the nurseries involved in the evaluation, children spent most of their time in small groups, unless they were involved in outside play. However, more prolonged interactions were more likely to be observed when children were either with one adult or one other child.

### 7.3.4. Non-verbal interactions

Aspects of non-verbal interaction that were observed in children included confidence, control, enjoyment, closeness, demonstrating, role playing, and cooperation. These interactions were observed in single child, child-child, and adult-child situations. A greater variety of non-verbal interaction was observed in the three providers with ITERS scores of 5.0 or above. In the nursery with the lowest ITERS score (3.0-3.9), children were less likely to demonstrate, show confidence, cooperate or participate in role play. There were also more observations in this setting of children watching others and not being involved in their own activity.

### 7.3.5. Play

Types of play observed in the chosen settings included dancing, music, painting, drawing, puzzles, sand play, construction, and free play. These activities offered opportunities for explanation, questioning, modelling etc. Four of the providers (which also had the highest ITERS scores) had a range of play activities constantly in circulation and children were organised in ways that would allow them access to as many of these as possible during the day. In settings that were less effective in this respect, observations indicated that there were more incidences of poor behaviour and that this was less likely to be followed up

## 7.4. Parent views of child progress - Interviews

Semi-structured parent interviews were carried out across all six sites, between October and December 2009. Interviews were audio-recorded, transcribed and then coded. The majority of participants (15) were mothers; the remaining 2 participants were fathers.

### 7.4.1. Cognitive and socio-cultural developments

All 17 parents identified new skills that their children had learned through attendance of the pilot programme (**Table 4**). These new skills were categorised thematically.

<b>Benefit / development</b>	<b>No of parents</b>
Language and communication	15
Life skills	13

Confidence	10
Behaviour	10
Interaction	8

**Table 4 – Parental views on child development**

All parents reported that their children had learned a range of new skills throughout the period of their attendance at the pilot programme, particularly in the areas of language and life skills. **Table 4** shows that confidence, behaviour, and interaction were also areas in which parents noticed improvements.

Examples of new skills in language and communication were given, especially in relation to repetition of nursery rhymes and using partial and full sentences.

*I've really noticed a difference in her language. She's asking for what she wants and it all makes sense now.*

*It's really lovely to sing songs and rhymes with him when he comes home. They're very good at teaching him new things.*

Life skills were also areas that parents mentioned as having improved. Examples of this were independence, meal-time and sleep behaviours, and improved concentration and attention at home.

*My son will sit and play on his own and doesn't need constant attention from me.*

*We can sit and have a meal as a family which we couldn't before because he kept being fussy and wanting to get down and not want to sit with us.*

Several parents reported that their child has increased confidence as a result of attending nursery.

*It's confidence really. He doesn't mind me leaving when I drop him off.*

*I didn't think she would talk to other children but it's given her a boost and now she's is a lot more confident.*

*He's not as clingy any more.*

Behaviour was also seen as a benefit of the provision as these quotations illustrate:

*He's calmed down a lot and is able to listen more because he's not always in trouble.*

Social interaction with other children and adults was reported as being an area of improvement by a number of parents.

*She is speaking to other children at her level and... sharing, turn taking and so on.*

*It's good that she talks to other adults now. It was only me before and it helps to get the input of other adults. I think it helps with her language development and she seems to be more sociable with other children too.*

### **7.4.2. Enjoyment and well-being**

Comments were overwhelmingly positive in terms of child learning, and none of the parents interviewed had any suggestions for how they would improve the pilot programme. In addition, when parents were asked if their children enjoyed going to nursery, all parents interviewed said that they did.

*Yes, he loves it and always has a smile on his face when I pick him up.*

*She loves it – I can't get her away!*

*She even wants to go at weekends and get upset when I say she has to stay at home.*

Parents noticed that their children wanted to go to the setting because they enjoyed it, that they were looking forward to their sessions and were asking to go on the days they were not meant to go as they had started to expect the routine. A few parents (n=7) thought their children had become more alert as a result of the provision, which had an impact on their choice of activity to participate in at home.

*My son doesn't want to watch the TV as much now because he's learned so many other activities.*

Like the managers, some parents thought that the amount of adult attention and interaction their child received at nursery had a positive effect on the child as it was not always possible for the parent to give that much attention to them at home.

### **7.5. Parent views of child progress - Survey**

A questionnaire was distributed to all parents involved with the six providers who had (either presently or in the past) participated in the pilot provision. In relation to 'impact on children', a number of questions were included. A total of 15 parents responded to the questionnaire survey.

Parents reported very few specific problems that their child had with health, behaviour, language or general development. However, the parents' views on how the pilot provision contributed to the child at home were interesting with a slight difference between cognitive and behavioural benefits. All parents felt the children enjoyed nursery and in particular enjoyed interaction with other children, as well as enjoying the activities in themselves. Half claimed the provision had helped with learning and behaviour at home – giving support on reading, creative activities, and on behaviour issues as well as toilet training. Around 90% of the parents felt the child at home shared better, played better, interacted better and enjoyed learning more than previously.

The impact on the child's behaviour was less strong however with 70% claiming that they interacted better with family members but only 50% claiming the child's behaviour was better at home.

One parent summed up her view as follows (our emphasis):

*I am **very happy** with the pilot scheme. The scheme has made my life a lot **easier** and my daughter **enjoys** going. She has **progressed** very well and has **picked up** a lot of things.*

#### **Ideas on how to help your child's learning at home**

Six parents reported that the pilot had given them ideas for helping their child's learning at home. The ideas included singing, shapes, colours, reading, drawing, and creative work.

This matches some of the findings of the EPPE research which identified seven types of home learning activities that were seen to be particularly significant (Siraj-Blatchford, 2010, 464):

- Reading to the child
- Taking the child to the local library

- Playing with numbers
- Teaching about numbers
- Painting and drawing
- Teaching about letters
- Teaching and singing songs poems and rhyme

### ***Ideas on how to help your child's behaviour at home***

Again, six parents noted examples of ways in which the pilot had helped them with behaviour issues at home. The examples included dealing with demand, toilet training, discipline, making them apologise, feeding and speech.

### ***What does your child enjoy?***

All 16 parents said that their child enjoyed the provision. Examples of activities that they enjoyed the most included: being with other children, the activities, staff, interaction, improved health.

### ***Is there anything your child does not like?***

None of the parents who responded to the questionnaire said there were aspects of the pilot that their child did not like.

## **7.6. Summary**

Improvements in social skills and language were areas of noticeable progress highlighted by nursery managers during their interviews. These were similar to those reported by staff through the ABSI questionnaire, and also those reported by parents from semi-structured interviews and questionnaires.

This triangulation of findings from different respondents and by different methods provides a strong evidence base for child progress having taken place as a result of the pilot programme.

## 8. Benefits for Parents

This section describes the benefits and advantages that the pilot programme had on parents. As in the previous section, perceptions were examined in a number of different ways and yielded three separate sources of data. Nursery managers' and parents' perceptions of the effects of the pilot on parents was a main focus of the qualitative interviews. Quantitative data was collected via the survey and these results are also presented.

### 8.2. Interviews with nursery managers

Each of the six nursery managers was asked to identify the advantages of the pilot on parents and families. As with the impact on children, the overall views of the six managers were very positive. Findings are presented in **Table 5**.

<b>Advantage of pilot</b>	<b>No. of managers</b>
Setting boundaries for child	6
Discipline techniques	4
Learning activities at home	5
Life skills for child	4
Routines	3

**Table 5 – Manager views on advantages of pilot**

As **Table 5** shows, there were a number of benefits for parents identified by the majority of managers: setting boundaries, discipline techniques, learning activities at home, life skills, and routines.

#### 8.2.1. Advantages seen in the home

There were two main areas relating to behaviour that were mentioned by managers as having impacted upon parents. All of the six managers reported that the pilot had helped parents in setting clear boundaries at home for the child(ren).

*I have discussed boundaries with one mother who said she was surprised at how much the pilot had helped her at home.*

*I think it teaches children that there are boundaries and that they are there for a good reason, and once they know that it makes it easier for parents to set boundaries at home too.*

The second area was discipline, reported by four managers, and specifically enhancing the range of techniques used by parents in the home.

*Some of our parents didn't know how to effectively discipline their child and many of them would just shout and not try to understand what had happened or how they could change it in the future.*

*When they start, a lot of the children have discipline problems and I think we act as a role model for parents in this area so they can copy the techniques at home.*

Many managers (n=5) perceived a major benefit of the provision to parents was the ideas it provided for learning activities at home.

*Parents see what we do with the children and they copy it at home.*

*It does give parents ideas of what they can do with the children at home because some of them just sit them in front of the television and that's it.*

*I think the children go home and tell their parents what they have done and then ask if they can do it at home and it is passed on that way too.*

Life skills were identified by four managers as an area that benefited parents. This area included eating, table manners and toilet training.

*I think it must have helped parents with meal times at home because we get them sitting at the table and staying there and eating with spoons.*

*Because we have a good, balanced diet here, children get used to eating a range of foods and they're not as fussy at home.*

Three of the managers reported that the routine of the pilot was a benefit to parents.

*Coming here gets the children into a routine and that's one of the things that parents want at home but have problems with.*

### 8.2.2. Expectations and understanding

Managers also commented on the changes in parental expectations of the child as a result of attending the nursery provision, as well as the observed increase in understanding of the child's needs.

*Some parents can be quite over protective when their child starts at nursery and then you see them letting their child do various things on their own, like hang up their coat, choose an activity.*

*We hear parents talking to their child in a different way and they start asking what they should be doing at home to help them.*

One of the managers stated that she felt some parents' perceptions of themselves as parents had been improved as a result of seeing their children improve in various areas.

### 8.3 Parent views of impact – Interviews

All of the parents participating (15 mothers & 2 fathers) identified benefits they had identified for themselves as a result of their child attending the pilot provision (**Table 6**).

<b>Advantages of pilot</b>	<b>No of parents</b>
Better understanding of child	13
Relationships	11
Parenting skills	10
Learning at home	9
Well-being	8
Access to work	2

**Table 6 – Parental views on impact of pilot**

As **Table 6** shows, very few parents said that the pilot enabled them to work. However, parents reported other ways in which the pilot had a positive effect on other aspects of their lives.



### 8.3.1. Better understanding of child

The majority of parents (n=13) felt they had gained a better understanding of their children as individuals, including relationships

*I think I understand what he is supposed to be doing educationally now and before I just didn't have any knowledge of that.*

*I do feel like I know what he likes to do now.*

Some (n=11) believed that their relationships with their child had improved since attendance of the pilot setting. Receiving detailed, regular feedback on the child from the setting facilitated such opportunities as well as the relationships that parents had built with the staff. There was also a feeling that it had increased appreciation of each other.

*We get on a lot better now and that has happened since my son has been going to nursery.*

*I know more about her now, which sounds strange, I know. Talking to the staff about how she's doing has helped us at home.*

Parents described how the experience had supported them with regard to certain parenting skills. Parents talked about how they took on board how staff at the setting interacted with the children. A wide range of other benefits were mentioned, ranging from parents getting support with very practical aspects of parenting (e.g. toilet training) to receiving help and advice with a child's behavioural problems.

*I've learned a lot about how to talk to my daughter and how to do other things too. It's not difficult stuff but you just need to see someone else doing it sometimes and you realise that it would work for you too.*

*I've learned a lot about how to deal with my son's behaviour.*

*It was great to have support when I wanted to start potty training my daughter – not sure how I would have coped if they hadn't have been there.*

*Some parents (n=9) believed that the pilot settings had made a difference to what they were doing with their children at home with regard to activities.*

*We do lots of activities together when we're at home. We have done some reading and puzzles and numbers. I do a bit of messy play but try to leave that to nursery!*

*She's a lot less likely to watch TV at home now and wants to do something else.*

### 8.3.2. Well-being

Some parents reported that the free sessions for their children had made them feel less exhausted or tired, and they were able to take a much needed rest during the time the children were in the setting. This was mentioned largely by parents with more than one child under school age and/or a newborn baby in the family.

*It's great to have a break to spend time with my other child.*

*I look after my father and it gives me a bit of respite time without the kids.*

*I use the time to do my shopping which is a lot more relaxing without my daughter with me.*

### 8.4. Parent views of impact – Survey

The questionnaire distributed to all parents involved (past or present) with the six providers identified a number of issues in relation to 'impact on parents'. A total of 15 parents responded to the questionnaire survey.

#### 8.4.1. Improved behaviour of children at home

The majority of the 15 parents who responded to the questionnaire reported that they had seen improvements in relation to:

- Overall behaviour (n=8)
- Sharing (n=14)
- Playing (n=15)
- Family interaction (n=14)
- Cooperation (n= 12)

#### 8.4.2. Helped with access to work or training

There was little evidence that the pilot had allowed parents to seek work or training – with one now in full time work, and two now in part time training. However 50% were currently looking for work and 25% for looking for a training place. Very few (3) had access to other childcare should the pilot provision not be available – in which case they would have to remain at home. All were either very satisfied or quite satisfied with the hours (Very = 64%), the weeks (Very = 93%) and the quality of care (Very = 64%).

Three of the respondents reported being in work and a further two parents stated that involvement in the pilot had given them the opportunity to look for work. Likewise, two parents said they were involved in training. However, none of them felt that the pilot had given them the chance to look into access to training.

In terms of benefits, 50% were in receipt of Income Support (including all those looking for work) 88% receiving Family Tax Credit, 15% Incapacity Benefits, but none were receiving Job Seekers Allowance.

### 8.5. Summary

Benefits for parents were noted in a number of areas via the nursery and parent interviews, as well as the parent questionnaire. Nursery managers drew attention to the improvements that could be reflected in the home, which was also highlighted by the questionnaire survey. The semi-structured interviews with parents focused more on their greater understanding of their child and the improved relationships.

## 9. Conclusions

### 9.1. Overview

This report has drawn attention and provided rich data on five key themes around the working of the pilot, and which need to be considered when future finding decisions are considered:

- The socialization of the child
- Supporting parents to contribute to the child's cognitive development
- Providing respite for the parent
- Improving the mother's mental health
- Supporting the families precarious finances

The two main factors that seemed to stand out as particularly important in motivating parents to engage in the two year old pilot were:

1. a desire to benefit their child's development especially in socialization and building confidence, and
2. parents' desire for respite from the day to day need to provide 24 hour care for their child so they could engage in other activities that made daily life more possible, including getting ready to go back to work and education/training.

Both staff and parents reported positive benefits to children in their involvement in the pilot especially in cognitive and socio-cultural development and enjoyment and well being.

Observational data provided additional evidence of benefits to children in social behavioural development as measured by the ASBI instrument. The quality of the centre was also important, better outcomes were found in Centres with higher ITERS scores. While the number of cases involved was too small to comment on statistical significance the results are in line with other research that indicates that pre-school quality is an important influence on child outcomes. As we say in the Summary to Chapter 7 there is *"a strong evidence base for child progress having taken place as a result of the pilot programme"*.

Interviews with staff and parents indicate that staff can support parents in developing positive approaches particularly in relation to discipline and boundaries and giving ideas on ways to help their child at home.

Parents felt that the provision for their child and support and guidance had given them a better understanding of their child, improved their relationship with their child and helped them with parenting skills and learning at home.

### 9.2 Recommendations

We would like to offer the following recommendation to the Local Authority for ways in which the Two-Year-old Pilot might be developed.

#### **Recommendation 1 – Embedding the Provision of Information**

Health visitors and other professionals such as the Children and Families Information Service play an important role in communicating with parents about the 2 year old pilot and advising parents on health and well being matters. It may be advantageous for the Local Authority to look at ways in which the provision and cascading of information to parents might be broadened.

#### **Recommendation 2 – Continuous Improvement of Provision**

The quality of the Centres appears to influence children's outcomes positively and it is recommended that centres adopt self evaluation and review strategies that focus on improving this feature. The ITERS and other similar instruments can provide a starting point to support a stronger focus on quality. The Local Authority could support this process with a City-wide perspective.

#### **Recommendation 3 – Improving Child Outcomes**

Parents reported a range of benefits for themselves and their children. Improvements in child outcomes and in parenting and relationships were more common than benefits related to parents' engagement in work and training. Centres should look at ways to strengthen and build on their strengths in supporting children and fostering parenting skills and improved relationships.

#### **Recommendation 4 – Preparation for (Pre)-school**

It was evident that the pilot was successful in offering support and preparation to children for the next stage of their education. For some, this involved another 1-2 years in the same day nursery. However, a small number of the case study nurseries did not offer pre-school provision and, for those children, the pilot offered increased confidence in making this transition to a school-based environment. Centres should focus on strengthening this aspect of their provision in order to increase confidence of children and parents.

### **Recommendation 5 – Developing Parenting Strategies**

We were impressed in this study by how a number of parents had changed some aspects of their parenting strategies. There seems to be more room for greater direct and systematic approach to this as an element of the pilot by provision of resources, informational material, and so on.

### **Recommendation 6 – Increasing the Confidence of Parents**

Observation, questionnaire and interview data highlighted the fact that early years provision was available to the majority of these children only as a result of the pilot, and that, at the beginning of the experience, some parents did not feel wholly comfortable within the nursery environment. Our research showed that, over time, parents' confidence increased regarding communication and participation within the educational setting. It would be beneficial to focus some effort on this area to ensure that this confidence is maintained when the child progresses to pre-school and school. In turn, this will encourage a greater parental involvement and interest in their child's education.

### **Recommendation 7 – Developing economic security**

External support and advice may need to be brought in to support employment related goals if this is seen as a continued aim of the scheme. This seemed not to be a key element of the pilot but it did seem there were possibilities for it to be slightly re-engineered to provide such opportunities.

### **Recommendation 8 – Improving the Home Learning Environment**

Our research has show there is some evidence of strengthening of the home learning environment of the children, matching findings of the EPPE research. We would suggest this might be developed further by the Early Years team providing support and resources for providers and parents to help parents in supporting their children's learning, including the following aspects of their child's development:

- Reading to the child
- Taking the child to the local library
- Playing with numbers and letters
- Teaching about numbers
- Painting and drawing
- Teaching about letters
- Teaching and singing songs, poems and rhymes
- Creative and dramatic play
- Playing with other children

### **Recommendation 9 – Sustaining child development**

This evaluation has looked at a number of children who may go on to become vulnerable learners and has pointed to diverse ways in which their early development is being potentially enhanced by this provision. There is evidence from other studies that exposure to quality early years education can have long term benefits for children and families. However we are aware such benefits do not come automatically but need to be fostered. Hence we recommend that the Local Authority exploits the opportunities open to it through engagement in the pilot by some of the more disadvantaged children in the City, to establish a longitudinal tracking database. This database would provide both impetus for continued focus on development and attainment as well as providing data for on-going research and analysis. We would be happy to work with the Local Authority on the establishment and analysis of such a database.

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