Childcare Quality Improvement and Assurance Practices*

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* This report describes accreditation schemes at the time the research was conducted in 1999.

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SECTION 1
INTRODUCTION

1.1   National Childcare Strategy

In May 1998, the government launched its National Childcare Strategy. The Strategy aims to ensure that families have access to an adequate supply of good quality, affordable childcare. Society is changing. The number of mothers in paid work has grown. Family composition is also changing. Fewer than one in four families correspond to the traditional stereotype of father working and mother staying at home to look after young children.

Good quality childcare is not just something parents need when they go out to work or study. It can be good for children. Research shows that young children who spend time in good quality early years and childcare settings can benefit in terms of their language, social and intellectual development. Older children can benefit from taking part in creative and sporting activities with other children. Out-of-school provision can offer safety to children who would otherwise be left to look after themselves.

The growth of childcare provision has failed to keep pace with social and economic changes. The needs of families are often not being met. Not only are there not enough childcare places, many of those that do exist are so expensive as to put childcare out of the reach of many families. The National Childcare Strategy aims to tackle these problems by creating new places, increasing the affordability for parents, and promoting good quality.

1.2   Early Years Development and Childcare Partnerships (EYDCPs)

Responsibility for delivering the National Childcare Strategy has been given to local Early Years Development and Childcare Partnerships (EYDCPs). Each local authority in England has established an EYDCP, made up of representatives from local stakeholder groups. Groups represented include local government and other statutory agencies; Training and Enterprise Councils; further education colleges;

schools; health authorities; diocesan and other denominational authorities; special educational needs groups; employers; parents; private, public and voluntary childcare providers.

EYDCPs have several tasks, including:

- assessing the demand for childcare and the supply of places available to meet it, and setting achievable local targets for filling the gap between the two;
- acting as a source of advice for funding;
- ensuring childcare information services are available which meet national standards;
- raising and maintaining the quality of childcare provision;
- identifying and meeting the training needs of childcare workers;
- producing plans that specify how the above will be achieved.

Research has shown conclusively that children can benefit from spending time in good quality childcare settings. Children and parents need high quality early years services. Improving quality is a key aim of the National Childcare Strategy. Partnerships are responsible for improving the quality of services beyond the minimum standards under the Children Act which are regulated by local authority inspection units. Their Plans should include explanations of how Partnerships will deliver improved quality across all settings.

1.3   Quality assurance and quality improvement schemes

Research suggests that quality improvement and quality assurance (accreditation) schemes can help raise standards. For example, a study conducted in the USA examined the impact of the National Association for the Education of Young Children (NAEYC) accreditation scheme on the quality of care provided in child care centres (Whitebook, Sakai, & Howes, 1997). The authors concluded that NAEYC accreditation, in conjunction with other features of nursery provision, including non-

profit status, retention of skilled teachers, and higher salaries, predicted high quality service provision.

Planning guidance issued by the Department for Education and Employment (DfEE) suggests that EYDCP Plans might, as part of a quality improvement strategy, set out:

> '*how providers will be encouraged to introduce and maintain quality improvement systems, such as self-assessment and action plans, and progress towards appropriate quality assurance award schemes.*' (para. B4.3, EYDCP Planning Guidance, 2000-2001)

Quality assurance and quality improvement schemes raise standards by encouraging providers to assess the quality of their provision, compare it with descriptions of best practice, and so identify areas for potential improvement. Both types of scheme involve providers in a degree of self-assessment. Typically, members of staff are required to collect information on their policies and procedures. They then summarize this information, often into a portfolio of some kind. Should staff find their existing procedures do not meet required standards, they are encouraged to produce action plans setting out clear targets and timetables for improvement.

Where self-assessment has been done as part of a quality assurance scheme, an independent assessor will judge whether the evidence collected through self-assessment meets specific accreditation criteria. Providers judged to have met the criteria are generally awarded a 'kitemark-type' by the accrediting organisation. For this reason many people are more familiar with the term 'kitemark-type' rather than accreditation scheme.

Quality assurance schemes for providers of early years services are a relatively recent innovation in England. Although schemes share the common characteristics described above, they do vary when it comes to recommended methods of collecting and presenting evidence, and the standards laid out in their accreditation criteria. Often different standards apply to different types of early years provision. For example, it may not be appropriate to judge out-of-school clubs against exactly the same standards as nurseries. Consequently, several different accreditation schemes have developed for use by different types of provision.

1.4   The research project

The project set out to examine how quality assurance and quality improvement schemes are being used by EYDCPs and providers in England to improve the quality of services beyond minimum standards.

The sample: Three types of childcare providers took part: day nurseries, out-of-school clubs and childminding networks.

- Day nurseries are run by the statutory, private and voluntary sectors. They can be open from anywhere between 7:30am to 6.00pm. Most provide a service for 52 weeks of the year for children from a few weeks old to five years. The last ten years has seen a significant expansion in the number of private sector day nurseries.

- Out-of-school clubs are run by the statutory, private or voluntary sector. They usually provide a service from around 3.00pm (after school) up until 6.00pm or later, for children aged up to 14 years. Some out-of-school clubs open before schools. Some clubs are open longer during school holidays. Some are sited on school premises, but many offer a collection service, taking children from school to the club venue. EYDCP audits have shown that many parents, especially those in work or full time training, would like more out-of-school places for their children. Several thousand new places have been created since the inception of the National Childcare Strategy.

- Childminding networks are local groups of childminders who wish to qualify for payments of Nursery Education Grant, and so offer places free for four-year-old children. Childminders working in networks can apply to be assessed by local network co-ordinators or managers, to determine whether they qualify for accredited status. It is important to differentiate between an *approved network* and an *accredited network*. In order to become an approved network, the childminding network has to ensure that the childminders have become quality assured childminders. When a minimum of two network childminders have gone on to achieve accredited early years provider status, the network staff can apply for fully accredited network

status. A very recent innovation, there are currently around 60 networks operating in England.

The accreditation schemes. The research team conducted case studies with providers involved in one of six national accreditation schemes:

- *Aiming High*, a scheme run by Kids' Clubs Network for out-of-school clubs;
- *Aiming for Quality*, run by the Pre School Learning Alliance primarily for pre-schools and playgroups, but also used by some day nurseries;
- *Children Come First*, run by the National Childminding Association for childminding networks;
- *A Quality Assurance Scheme for Nurseries and After-school Care*; run by the Centre for British Teachers and developed in conjunction with the University of Glasgow;
- *Quality Counts*, a scheme run by the National Day Nurseries Association;
- *Evaluating and Improving Quality in Early Childhood Settings: A Professional Development Programme*, run by the Effective Early Learning Project at University College Worcester.

Detailed descriptions of each scheme can be found in Appendix D. In addition, some providers who participated in case studies were working with materials for self-assessment developed by their local authority. This scheme did not involve accreditation of any kind.

Aims. The project had ten specific aims, which were to:

(1) assess the implementation and use of quality improvement and quality assurance systems by day nurseries, out-of-school clubs and childminding networks;

(2) identify common problems experienced by day nurseries, out-of-school clubs and childminding networks in implementing and using a quality improvement/quality assurance framework;

(3) highlight solutions identified by day nurseries, out-of-school clubs and childminding networks to resolve common difficulties involved in

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implementing and using quality improvement and quality assurance frameworks;

(4) gauge the opinions of (i) childcare staff and (ii) parents towards the implementation/use of quality improvement and quality assurance systems in day nurseries (statutory, private and voluntary), out-of-school clubs and childminding networks;

(5) establish the extent to which providers are using different quality improvement and quality assurance systems;

(6) identify the reasons why day nurseries, out-of-school clubs and childminding networks *have not* implemented quality improvement and quality assurance systems;

(7) identify good practice for EYDCPs in promoting quality improvement and quality assurance systems to providers and supporting them to improve standards;

(8) establish the range and content of quality improvement systems used by local authority inspection units;

(9) produce written material for EYDCPs describing good practice in the promotion and implementation of quality improvement and quality assurance systems;

(10) produce interim, draft and final reports for the DfEE.

Methods/Design The project was conducted in five distinct phases:

Phase 1: Analysis of Annex Five of all EYDCP Plans submitted to the DfEE for the period 1999/2000. This phase was designed to identify examples of good practice by EYDCPs in promoting quality (aim 7), and establish the range of quality improvement schemes used by local authority inspection units (aim 8). Section 3 of the report describes this phase of the project in detail.

Phase 2: A series of case studies in a sample of nurseries, out-of-school clubs and childminding networks accredited or working towards accreditation. Case studies comprised conducting interviews with managers, staff and parents. This phase was designed to establish the range of views pertinent to aims 1-4. Section 4 of the report provides a detailed description of the case studies.

Phase 3: A nationally representative telephone survey of nurseries, out-of-school clubs and childminding networks. The survey was designed to establish the extent to which findings from the case studies are generalisable (aims 1-4), the proportion of providers in England currently involved in accreditation or quality improvement schemes (aim 5), and why some providers are not using such schemes (aim 6). Summaries of the telephone survey findings appear in Sections 5 and 6 of the report.

Phase 4: Interviews with representatives of the accrediting bodies. Interviews were a means of establishing the extent to which problems and their solutions as reported by providers were consistent with the experiences of those responsible for administering accreditation schemes. Details of the interviews are reported in Section 7 of the report.

Phase 5: Producing written materials. The research team has produced guidance for EYDCPs concerning good practice in promoting and implementing quality improvement and quality assurance systems (aim 9). Four groups of EYDCP lead officers across England were asked to comment on a draft of the guidance. Comments were generally very positive. This document is the final report of the project, produced for the DfEE (aim 10).

The project was conducted by the Thomas Coram Research Unit at the Institute of Education, on behalf of the Department for Education and Employment (DfEE), between November 1999 and August 2000. Public Attitude Surveys Limited conducted the telephone interviews with day nurseries and out-of-school clubs.

SECTION 2
SUMMARY OF MAIN FINDINGS

2.1 This study set out to examine how quality assurance and quality improvement schemes are being used by Early Years Development and Childcare Partnerships and childcare providers in England to improve the quality of services beyond minimum standards. Three types of early years providers took part: day nurseries, out-of-school clubs and childminding networks. The project was conducted in five distinct phases:

Phase 1: Analysis of Annex Five of all EYDCP Plans submitted to the DfEE for the period 1999/2000.

Phase 2: A series of case studies in a sample of accredited nurseries, out-of-school clubs and childminding networks.

Phase 3: A national telephone survey involving a representative sample of nurseries, out-of-school clubs and childminding networks.

Phase 4: Interviews with representatives of the accrediting bodies.

Phase 5: Producing guidance for EYDCPs concerning good practice in promoting and implementing quality improvement and quality assurance systems.

The project was conducted by the Thomas Coram Research Unit at the Institute of Education, on behalf of the Department for Education and Employment (DfEE), between November 1999 and August 2000.

2.2 Key findings

- One third of Early Years Development and Childcare Partnership (EYDCP) Plans for 1999/2000 included details of a clear quality improvement strategy.
- Two thirds of Plans stated that local providers were already asked to undertake some kind of self-assessment as part of their annual inspections.
- Around half of all EYDCPs promoted quality through providing training.

- Over 80% of nurseries and out-of-school clubs had not taken part in any accreditation scheme. The most commonly cited reason for not being accredited was a lack of awareness that such schemes existed.

- The most common problem faced by providers wanting to become accredited was finding the time to do the work.

- According to accrediting organisations, many providers face difficulties finding funding to pay for accreditation.

- Staff involvement in helping settings work towards accreditation was variable. Most parents did not get involved.

- Most accredited providers felt their service had improved as a result of going through the process. The main effect of accreditation on quality was to promote development of written policies and procedures, particularly with reference to health and safety, and equal opportunities.

- Accreditation manuals and other written materials were the main source of information about the process used by providers.

- Mentors or development workers, and locally organised workshops are an important source of practical help for providers.

- Getting accredited cost between £300 and £600 per provider. EYDCPs had become the main source of funding.

2.3 Annex 5s of Early Years Development and Childcare Partnership Plans

The purpose of reviewing Annex Fives of EYDCP Plans was to identify different quality improvement practices and examples of local quality improvement systems where they exist.

The majority of nursery providers are already required to undertake some form of self-assessment as part of their local authority annual inspections undertaken as a requirement of the 1989 Children Act. Procedures vary, but most include a requirement to submit an action plan specifying changes to be made and outlining a timetable. At the time of the research, at least two local authorities had introduced their own accreditation schemes, whilst a third authority had developed a self-evaluation framework for use in all early years settings.

Around 20% of Annex Fives described plans for quality improvement in terms of explicit targets, with deadlines and designation of responsibilities. This suggests that the vast majority of EYDCPs had not developed a clear strategy for quality improvement when Plans for 1999/2000 were compiled.

Almost half Annex Fives contained references to encouragement and promotion of standards more stringent than the statutory requirement. The ways in which EYDCPs supported providers in meeting additional requirements varied, but included the following:

- mentor schemes, whereby qualified teachers and others with expertise give on-going support to providers;
- service level agreements with outside agencies;
- through the support of a dedicated Early Years Development Consultant or Team;
- through provision guidance documents on standards.

To encourage networking between providers, over forty per cent of Partnerships reported that they facilitate and send representatives to an early years forum, cluster or working group.

By far the most commonly reported way of promoting and embedding good practice was through training. After training, the dissemination of materials and resources through meetings with representatives of early years providers was the most popular approach. On the evidence of Plans submitted for 1999/2000, many partnerships were unclear about the role formal quality assurance schemes could play in promoting good practice among providers.

2.4 Case studies in a sample of accredited nurseries, out-of-school clubs and childminding networks

This phase was designed to establish providers' views concerning:

- Choosing schemes and deciding whether to go for accreditation

- The extent of staff involvement in implementation
- Views on key features of the schemes
- Information and support
- Problems, difficulties and solutions
- The impact of schemes on provision

Interviews with parents of children in nurseries, out-of-school clubs and childminding networks were designed to elicit views on:
- Awareness of local authority inspections and quality assurance schemes
- Views on kitemark-type-type schemes
- Awareness of their current nursery's accreditation
- Attitudes to being involved in accreditation schemes
- Awareness of the process of getting accredited; problems and solutions
- Impact of the scheme
- Whether accreditation would affect decisions about joining a nursery
- Advantages and disadvantages of belonging to a scheme

Most providers chose schemes run by organisations they belonged to, or schemes for which they were able to access funding. The extent to which providers involved all their staff in the accreditation process was very variable. Evidence from other countries suggests that schemes are more likely to influence quality when all members of staff are actively engaged in the process.

Most providers were happy with the key features of their scheme. Written materials were generally well received. Although few looked forward to being assessed once they had collected their evidence, most found the process less stressful than they had anticipated.

Information and support play a very important role in the way providers perceive accreditation schemes. The quality of mentoring and other sources of personal support were crucial to success. Several people found attending local groups of providers going through the same scheme to be a valuable source of advice and reassurance.

The most commonly mentioned problem concerned time. Completing an accreditation scheme does take time. Senior managers often had to put in additional hours, but felt that extra work could be kept to a minimum by sharing the workload between all members of staff. However, some senior managers found it difficult to involve all members of their staff in schemes.

Very little has been done to formally evaluate the impact of accreditation and quality improvement schemes on the quality of provision. However, the vast majority of providers were generally of the view that taking part in a scheme has improved their service. Most cited improvements in both policies and procedures. Changes introduced as a result of being involved in accreditation included:

- Staff appraisal schemes;
- Increased opportunities for training;
- Induction schemes for new staff;
- Systems for conducting continuous self-evaluation;
- Key-worker systems;
- Better relationships between staff and managers;
- Improved staff morale;
- Better record-keeping;
- Systems to allow for better planning of activities;
- Improved methods of communication with parents;
- Improved staff relationships with children.

Interviews with a small sample of parents suggested they were generally well informed about local authority inspections. Although they know very little about accreditation schemes, almost all parents thought they were a good idea. Some knew their child's setting had been accredited, but very few could put a name to the scheme. Around one in three parents who knew about accreditation had a reasonably accurate idea of what was involved in becoming accredited.

Parents felt they should be kept informed about any schemes their providers were participating in, but did not have time to get actively involved. Of the few that knew the setting they used had become accredited, most thought it had led to improvements. The

majority of parents using nurseries and out-of-school clubs said if they were to change their provider again, they would want to know about accreditation before making their choice. However, parents said they were not likely to choose childminders on the basis of accreditation.

2.5   A national telephone survey involving a representative sample of nurseries, out-of-school clubs and childminding networks

The survey was designed to establish the extent to which providers in England are currently involved in accreditation or quality improvement schemes, and why some providers are not using such schemes. It was conducted by Public Attitude Surveys Ltd for the Thomas Coram Research Unit.

Only 12% of nurseries and 16% of out-of-school clubs had taken part in any accreditation scheme. Those providers who had gone for accreditation were more likely to be larger facilities (more than 30 places), and to have been open for less than five years.

Of those not already involved in an accreditation or kitemark-type-type scheme, 18% of nurseries, and 27% of out-of-school clubs thought it 'very likely' they would get involved in one the next twelve months.

Lack of awareness was a key factor. Among providers not accredited, around half of nursery managers and a quarter of out-of-school managers said they did not know about accreditation schemes. Only five felt accreditation schemes were not worth getting involved in. Three of the five felt they already provided a well-established, high quality service and they had nothing to gain.

Of the 51 childminding networks covered in interviews only 11 were not yet using a quality assurance scheme. Seven of the co-ordinators in the 11 networks reported that they were 'very likely' to get involved with a recognised accreditation scheme in the next twelve months.

The most commonly cited reason (given by 78% of those not involved) for not being part of a scheme was that the network had only recently been formed.

2.6   Interviews with representatives of the accrediting bodies

The purpose of this phase was to establish the extent to which problems and solutions reported by providers were consistent with the experiences of those responsible for administering accreditation schemes.

Asked what kind of problems providers have with their schemes, accrediting bodies usually mentioned *finding time* and *identifying funding*. Other common problems included:

- recognising accreditation as a collaborative, staff development issue;
- communicating the purpose of accreditation to staff;
- developing clear written policies and procedures;
- changing established practices;
- introducing key worker systems;
- systematic record keeping;
- curriculum planning.

2.7   About the study

Phase 1:   The team conducted analyses of Annex Five of 146 EYDCP Plans submitted to the DfEE for the period 1999/2000.

Phase 2:   Case studies in a sample of 11 day nurseries, 10 out-of-school clubs and nine childminding networks which were accredited or working towards accreditation. In the nursery sample, the team interviewed 11 nursery managers, 17 staff, and 22 parents. In the out-of-school sample, the team interviewed 10 managers, 20 staff and 28 parents. In the nine childminding networks, the team interviewed 13 network managers or co-ordinators, 17 childminders and 16 parents.

Phase 3:   A total of 250 telephone interviews were carried out with day nurseries and, 251 with out-of-school clubs. Both samples were broadly nationally

representative. The research team at TCRU provided PAS Ltd. with the names and telephone numbers of 654 nurseries and out-of-school clubs. Of that total, 51 declined to participate, 46 were unobtainable, and 56 were not called. The effective response rate for the telephone survey was therefore 91% (501/552). The TCRU team conducted interviews with 48 co-ordinators or managers representing 51 childminding networks.

Phase 4: The research team interviewed representatives from six accrediting organisations.

SECTION 3

ANALYSIS OF ANNEX 5s OF EARLY YEARS DEVELOPMENT AND CHILDCARE PARTNERSHIP PLANS

3.1 Introduction

Each Early Years Development and Childcare Partnership (EYDCP) is required to draw up an annual Plan, setting out how childcare needs in their area will be met. The Plan identifies priorities, time-scales, local targets, responsibility for delivering different aspects of the Strategy, and the use to be made of the potential sources of funding. Annex Five of the Plan describes strategies the EYDCP will employ to improve the quality of local provision. The purpose of reviewing Annex Fives of EYDCP Plans was to identify different quality improvement practices and examples of local quality improvement systems where they exist.

3.2 Conduct of the research

The research team looked through Plans submitted to the DfEE by EYDCPs for the period 1999/2000. Plans were examined to identify:

- reference to use of quality improvement systems among local authority registration and inspection units;
- examples of good practice in promoting quality improvement and quality assurance systems to providers, and supporting them to improve standards.

The team reviewed 146 out of a possible total of 150 EYDCP Plans. At the time of the research, four Plans were not available for review. The work was undertaken at the DfEE between December 1999 and February 2000. Through close consultation with staff at DfEE, review of the DfEE planning guidance for EYDCPs, and initial analysis of six Plans, a proforma for extraction of information contained within Annex Fives was designed by the research team at TCRU (see Appendix A).

In some Plans, Annex Fives did not contain complete information. In others, details of quality improvement may have appeared elsewhere in Plans. The majority of Annex Fives did not describe quality improvement strategies in a clear or detailed format. Many provided details of proposals relating exclusively to training, rather than to quality improvement more generally. However, it has been possible to determine a number of key features common across EYDCPs.

Data collected in the review process have been summarised. We also present some individual case examples to illustrate the diversity of approaches to improving quality across EYDCPs.

Analysis of Annex 5s

3.3 Reference to use of quality improvement systems among registration and inspection units

In 75.7% of local authorities, social services departments were responsible for registration and inspection. For the remainder of local authorities, responsibility lay with the LEA (5.4%), the Chief Executives Office (0.7%) or some other/unspecified body (18.3%).

> *Joint inspections* - In the London Borough of Greenwich, Social Services and the Local Education Authority are working together to develop improved registration and inspection services. Rather than the usual Registration and Inspection Unit, the local authority has instituted a 'Quality and Inspection Unit' which is comprised of Under Eight's Advisors and Social Services Inspectors. In at least some areas of provision there are joint inspections. The local authority is also working with the National Childminding Association (NCMA) to improve the registration of

Sixty four per cent of Annex Fives recorded that providers were required to undertake some form of self-assessment as part of their annual inspection procedures; 82.2% of

those required providers in all settings to conduct self-assessment exercises. Two-thirds of Plans stated explicitly that at least some providers (most usually day nurseries) were required by the local authority to produce action plans as part of annual inspection procedures. In anticipation of expansions in provision, almost three-quarters (73.6%) of local authorities were planning to scale up registration and inspection activities. The majority of these were planning to create new posts and appoint more staff (59.5%), drawing largely upon Revenue Support Funds. Finally, only two local authorities (Bristol and Sheffield) had a fully developed kitemark-type-type scheme in operation. Although not a kitemark-type-type scheme, in Leeds a self-evaluation framework has been developed for all providers. A small number of other EYDCPs (including Middlesborough, Peterborough and Somerset) reported that they were planning to introduce, or discuss the introduction of, local quality assurance schemes.

The Bristol Standard - The City of Bristol is using *The Bristol Standard*, which is based on criteria for quality developed originally by the Effective Early Learning Project (EEL), but now adapted for local use. There are currently ten dimensions of quality contained within the standard. With the exception of out-of-school clubs, any willing providers can participate in the scheme. To date 60 providers have received a certificate verifying that they are providing the quality demanded by the Standard. It is intended to extend the scheme to out-of-school clubs in the near future and to appoint an advisor with the specific task of promoting quality and *The Bristol Standard* across early years settings. Another local authority, Swindon, is planning to adopt *The Bristol Standard* in the near future.

Sheffield's Quality Kitemark - In 1998 staff in Sheffield developed a self-evaluation and assessment package for use by providers of childcare. Representatives of all types of provider were included in discussions and decisions about the kitemark. Once piloted, providers could sign up for the scheme and access support from mentors. Providers work through a series of 'modules' relating to quality at their own pace. Trained assessors visit to ensure that quality standards of provision are being met. Although providers are encouraged to participate in Sheffield's quality assurance scheme, those who choose to opt for participation in an external accreditation scheme are also supported.

Leeds' *Let's Get It Right* - In Leeds, a local authority self-evaluation scheme called *Let's Get It Right* has been developed. The self-evaluation package contains three volumes: one for pre-school groups settings; the second for childminders and home carers; and the third for out-of-school clubs and school holiday care. A Quality Assurance Co-ordinator conducts monitoring and inspections to support self-evaluation across the settings.

Local schemes other than those mentioned may exist, but if they were not mentioned in Annex Five of 1999/2000 EYDCP Plans, the research team would not have identified them.

3.4 Examples of good practice in promoting quality improvement and quality assurance systems to providers, and supporting them to improve standards

Concerning quality improvement generally, our analysis of Annex Fives looked for:
- outlines of strategies for quality improvement and targets;
- encouragement and promotion of quality beyond minimum standards;
- encouragement of providers to introduce and maintain quality assurance systems, including the use and identification of particular accreditation schemes;

- encouragement of networking to share good practice, resources and training between providers;

- EYDCP methods of gathering examples of good practice;

- the promotion and embedding of examples of good practice;

- the provision of resources to support providers and carers;

- institutions and services recommended to providers and carers as sources of support and consultancy;

- inclusion and participation of providers, childcare organisations and individuals in developing quality;

- the EYDCP's Plans to publicise their strategy for improving quality.

Outlines of Strategies for Quality Improvement and Targets - Most Annex Fives reviewed described future plans to improve quality rather than *existing* strategy. Many EYDCPs are at the very beginning of their efforts to improve quality. The research team, in collaboration with staff from DfEE, developed a list of quality improvement strategy indicators, including:

- establishment of a quality assurance group;

- development of quality standards;

- ensuring that quality improvement is the focus of all EYDCP activities;

- becoming an Early Excellence Zone;

- setting up Childminding networks;

- extending support to those who are not yet involved in the EYDCP;

- use of external evaluators to assess aspects of Partnerships' progress.

In addition, our review of Annex Fives included a question designed to determine whether or not strategies for quality improvement were described in terms of specific targets and dates.

Less than one third (29.7%) EYDCP Plans described a clear strategy for quality improvement. Only 33.8% of Partnerships had a dedicated Quality Assurance Group in existence, although another 13.5% were planning to establish one soon. Interestingly, Quality Assurance Groups were often part of an EYDCP's Training Sub-Group, reflecting the robust link between training and quality improvement

evident in the majority of the Annex Fives analysed. Only 11.5% of Plans described a quality standard applicable to different types of childcare as being in place, although another 23% reported plans to institute local standards in the future.

Explicit commitment to quality improvement as a focus for all Partnership activity, either currently or in the future, was evident in approximately one tenth (10.2%) of Annex Fives. Only 6.1% of Plans reported that the EYDCP had applied for an Early Excellence Centre (EEC), although a further 13.5% were planning to apply in the future. (EECs are models of good practice in integrating early education, care and family support services. The aim is to create seamless, one-stop services for children and parents. There is close co-operation across education, social services and health services together with an emphasis on training and staff development. EECs work with other providers to disseminate good practice more widely).

Seven per cent of partnerships already had childminding networks in place, while another 12.2% were planning to establish them soon. Less than 3% of Annex Fives included explicit plans to attach toy libraries to childminding networks. Almost 50% of Partnerships reported either existing or planned support for providers without access to a qualified teacher. None of the Annex Fives reviewed included information about current extension of support to providers who have not yet joined the Partnership, although 6.1% did have plans to do so in the future. Only one Annex Five referred to the existence of external evaluation of the Partnership, although a further three mentioned plans to use external evaluators in the future. However, in addition to those areas pre-determined as indicative of the existence of a strategy, almost 60% of Annex Fives included reference to other activities that might be viewed as components of strategy for quality improvement. These largely related to the development of training programmes for providers, but also included reference to the distribution of documents on quality and development of quality guidelines.

Finally, 20.3% of Annex Fives described plans for quality improvement in terms of explicit targets, with deadlines and designation of responsibilities, which suggests that the vast majority of EYDCP's have not yet developed a clear strategy for quality improvement.

> *Strategy for Quality Improvement in Walsall* - In addition to working towards the development of their own quality standard, the EYDCP in Walsall has outlined a number of targets designed to contribute towards the improvement of quality over the next three years. These include:
> - recruiting a training officer who develop programmes of joint training for providers;
> - organising staff exchanges between providers to encourage networking and help to share learning;
> - setting up an 'Infoline' which informal carers of children can call; and, establishing a web-site for providers and carers to access;
> - holding an early years conference.

Encouragement and Promotion of Standards Beyond Children Act Requirements Almost half (45.9%) of the Annex Fives contained references to encouragement and promotion of standards more stringent than the statutory requirement. The ways in which EYDCPs supported providers in meeting additional requirements varied, but included the following:

- mentor schemes, whereby qualified teachers and others with expertise give on-going support to providers (e.g. Hertfordshire);
- service level agreements with outside agencies, for example Pre-School Learning Alliance (e.g. LB Barnet);
- through the support of a dedicated Early Years Development Consultant or Team (e.g. York);
- through provision guidance documents on standards (e.g. Gloucestershire).

Some Plans merely stated that the EYDCP did encourage and promote higher standards, but did not specify how they go about this.

Encouraging Providers to Introduce and Maintain Quality Assurance Systems - One way for EYDCPs to improve quality is by encouraging providers to introduce quality assurance systems. Providers can become accredited through local schemes where

they exist, or through schemes developed by national organisations, such as the National Childminding Association (NCMA) or Kids Clubs Network. Our analysis of Annex Fives looked at how providers are encouraged to get involved in quality assurance systems and which systems local providers are using. Just over 20% of EYDCPs give providers advice on appropriate schemes; almost 40% expect providers to join external schemes recommended by the EYDCP, with a further 7.4% planning to draw providers into joining an existing or planned local authority scheme. Almost 9% of EYDCPs reported that they offer written guidance on quality assurance systems, a further 6.8% reported regular written up-dates on quality assurance systems, while 5.4% mentor providers towards involvement in quality assurance systems.

Just over 70% of Annex Fives mentioned specific accreditation schemes by name. The most frequently referred to was Kids Clubs Network's *Aiming High*, which was reported to be in use by almost a quarter (23.6%) of EYDCPs, as well as being considered for use by a further 28.4%. Again, just over a quarter of partnerships reported considering NCMA's *Children Come First* scheme, and 6.8% had childminding networks already using the scheme.

Other schemes in use or being considered for introduction were:
- The Pre-School Learning Alliance scheme *Aiming for Quality* (in use in 18.9% of partnerships and being considered for use by 25.7% more);
- The Effective Early Learning Project scheme (in use in 11.5% and being considered by another 3.4%);
- Investors in People (in use in 8.8% and under consideration in another 4.7%);
- The National Day Nurseries scheme (in use in two local authorities and being considered by another seven. The scheme was, at the time of the research, still in development);
- The system for small voluntary organisations accredited by PQASSO was in operation in one partnership and being considered by a further six;
- The Centre for British Teachers scheme was being considered by two local authorities.

In addition to the above systems of quality assurance and improvement, several other schemes and charters were mentioned, including Barnardo's *Action for Children* (Dudley) and NCMA's *Childminding in Business Charter* (Kingston upon Hull). Only 15.5% of EYDCPs reported how many providers had successfully completed schemes, and even then few could offer figures of exactly how many had done so.

Encouragement of Networking to Share Good Practice, Resources and Training Between Providers - To encourage networking between providers, over forty per cent (42.6%) of Partnerships reported that they facilitate and send representatives to local early years groups known as early years forums, clusters or working groups. A further 18.2% reported that they plan to do so in the future. Just over six per cent reported that childminders are encouraged to join networks, although a further 8.1% plan to do so. Over 8% arrange visits between nurseries and other providers, and a further 10.1% plan to do this in the future. Only 5.4% of Annex Fives included explicit reference to promotion of networking through visits to Early Years Excellence Centres, although another 11.5% plan this. Just over 10% give providers sources and contacts for information concerning good practice, and a further 5.4% plan to do so. Lastly, just over 10% of EYDCPs have developed partnerships within the Partnership and a further ten per cent (9.5%) plan to do so. For example, in Kingston Upon Hull, the Community Education Service and Pre-School Learning Alliance have jointly accessed SRB monies to provide courses for parents. Other identified ways of networking cited by over one third of EYDCPs (36.5%) included programmes of joint training, and Early Years Resource and Development Centres.

Networking to Share Good Practice - In Leeds all providers of childcare are linked to established cluster groups referred to locally as 'family of schools network'. Each 'family' is supported by a Development Officer and a member of the Early Years Development Team to facilitate local networking and sharing of good practice.

Partnership Methods of Gathering Examples of Good Practice - The most frequently cited way of doing this was through receiving feedback from their own development, training and advisory staff (39.2% of EYDCPs reported that they do this, with another 8.8% planning to do so in the future). Twenty five per cent of EYDCPs collect

information and materials from other organisations, for example the PLA and NCMA. Just over 10% reported having links with other local authorities. Other ways of gathering examples of good practice were given by a further 16.2%, and included taking part in early years research projects (e.g. Birmingham) and attending conferences (e.g. Milton Keynes).

Promoting and Embedding Examples of Good Practice - Certain criteria were established to determine through analysis of the Annex Fives how EYDCPs are promoting and embedding examples of good practice across the local authority. By far the most commonly reported way of promoting and embedding good practice was through training, with almost fifty per cent of EYDCPs reporting that they do this currently and a further 15.5% planning to do so. After training, the dissemination of materials and resources through meetings with representatives of early years providers was most often mentioned, with over a quarter (25.7%) of EYDCPs already doing this and another 10.8% planning to. Not surprisingly given that only a minority of local authorities have quality assurance schemes, only 4 (2.7%) Annex Fives state that promotion of good practice takes place through the dissemination of their own standards, although a further 4.7% plan to do this in the future. A higher number, 15.5% do however disseminate local authority guidance on quality, and a further 6.8% plan to do this sometime in the future.

The Provision of Resources to Support Providers and Carers - Service level agreements with outside agencies and associations (e.g. the Pre-School Learning Alliance) was one of the most commonly cited forms of support given to providers. In total 23% of Annex Fives included reference to such agreements, and a further 4.7% mentioned plans to set them up in the future. Only 6.1% reported having service level agreements with libraries, with less than one per cent (0.7) planning to do so. Twenty three per cent of EYDCPs have instituted a programme of joint training, and a further 13.5% plan to develop such a programme soon. Around twenty per cent (20.9%) of EYDCPs report that they offer providers support through linked early years advisors or teachers, and another 12.8% plan to do this in the future. Only three Annex Fives included reference to 20-day secondments of linked teachers, although more than 10% offered visits and needs assessment through qualified teachers attached to early years providers.

Only three EYDCPs (2%) have supplied materials for providers to give to parents to help explain quality issues. Some (17.6%) Annex Fives included reference to other sources of support work with young children. These included toy libraries, support groups for parents and carers, library information services, drop-in facilities and resource centres.

Institutions and Services Recommended to Providers and Carers as Sources of Support - Most commonly, local authority staff are reported as recommended sources of support: over fifty per cent of Plans (52.7%) recommended educational and other personnel in the local authority, while 14.2% recommended social services personnel. Early Years Excellence Centres were recommended in 6.1% of Plans, with a further 8.1% planning to recommend these once they are established. Over 12% of EYDCPs recommend Early Years Centres to providers and carers and a further 8.1% plan to do so. Education and Professional Development Centres are recommended by 16.9% and a further 4.1% plan to recommend them. Over a quarter (27.7%) of EYDCPs mentioned other institutions and services that they recommend to providers and carers. These included resource and training centres, and 'surgeries' (e.g. in Somerset). The kinds of resources available through the above included: curriculum resources (available in 30.4% of EYDCPs); education advisors (34.5%); toy libraries (23%); and parental projects in schools (10.1%).

Inclusion and Participation of Providers in Developing Quality - Another area explored in the analysis of the Annex Fives was the inclusion and participation of the full range of providers, childcare organisations and individuals in developing quality. Almost a quarter of Annex Fives included reference to the inclusion of representatives from all types of providers in discussions relating to quality, although the degree or meaningfulness of this participation is not possible to determine through this analysis. Still, a further 20% of EYDCPs also mentioned that they will be endeavouring to do this too in the future. Less than 5% of EYDCPs stated explicitly that they either have or plan to have mechanisms for establishing joint review of curriculum documents, although slightly more either had or planned joint development of standards (13.5%). However, again training featured more highly with 23.5% of EYDCPs describing joint programmes of training, with a further 18.9% planning this.

Inclusion of Providers and Other Partners - In Somerset, the EYDCP has not only included representatives of providers of childcare, but is also developing partnerships with other professionals, including midwives and school nurses who are seen as key in supporting informal carers of children.

The EYDCPs Plans to Publicise their Strategy for Improving Quality - Since few EYDCPs had well developed strategies for improvement of quality, it is not surprising that few were able to express explicit strategies for publicising their plans. Vague references to the Children=s Information Service were made by approximately a quarter of EYDCPs, with 16.2% already using the service and a further 10.8% planning to do so. Leaflets and posters were proposed by 6.1%, with a further 10.8% planning to utilise these methods. Just over 5% had prepared news releases and another 6.1% planned this activity. Other methods of publicising the EYDCPs strategy included liasing with outreach workers and other staff, mail shots for parents, and through the award of a local authority quality assurance scheme where it exists or is planned.

3.5   Conclusions

Based on analysis of the Annex Fives, it appears that in the 1999/2000 Plans, most EYDCPs were at the very beginning of their efforts to improve quality. This analysis clearly reflects the early stages of development of strategy across the country for quality improvement in early years provision. Many of the Plans reviewed here were tentative and unclear in presentation. Only a few were well developed, and of those fewer still either have or plan to have a local authority quality assurance scheme. However, Annex Fives were the only section of EYDCP Plans reviewed. It may well be that further endeavours for quality improvement were described in other sections. When triangulated with other data collected as part of the research into quality assurance and improvement in early years provision, there is also evidence to suggest some under-reporting of activities designed to improve quality. For example, telephone research with co-ordinators of childminding networks suggest that there are

a great many more local authority supported networks than described in the Annex Fives of Early Years and Childcare Development Plans.

What is clear through analysis of the Plans however, is a reliance on training as a mechanism for improving quality. It is reasonable to assume that greater knowledge of formal quality assurance systems and schemes in which providers can participate could help staff preparing Annex Fives of EYDCP Plans.

SECTION 4
CASE STUDIES IN NURSERIES, OUT-OF-SCHOOL CLUBS AND CHILDMINDING NETWORKS

4.1   Introduction

To establish the range of views concerning the implementation and use of quality improvement schemes, the research team conducted a series of case studies in a sample of nurseries, out-of-school clubs and childminding networks accredited or working towards accreditation. In each setting, members of the team interviewed managers, staff and parents. This section of the report provides a detailed description of these case studies.

4.2   The sample

Nurseries – The research team conducted interviews in 11 day nurseries in England. The sample included nurseries from Berkshire, Bracknell, Greater London, Kent, Kirklees, Leeds, Solihull, Sunderland and Surrey. Eight nurseries were selected from lists provided by accrediting organisations:

- two PLA accredited nurseries
- two nurseries who had taken part in the C*f*BT pilot
- two nurseries who were piloting the NDNA scheme
- two nurseries who had used the EEL framework

The remaining three nurseries had used a self-evaluation scheme developed by the Under Eights Service in Leeds: *Let's Get it Right. Dimensions of Quality Education and Care – a self-evaluation framework for those working with young children in group settings.*

Nine of the 11 nurseries were run by the private sector. Of those nine, four belonged to a national chain, two ran in universities, and three operated in converted areas of

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their proprietors' homes. The remaining two nurseries were Early Years Centres funded by the local authority.

Three of the nurseries were relatively small, taking 20 children or less. In two others there were between 20 and 30 children and in the remaining six nurseries there were between 40 and 55 children. All but three of the nurseries provided places for children under the age of two years.

The two nurseries piloting the NDNA materials had had no changes of staff since they began working on the scheme. However the other nurseries (some of whom had been accredited for more than two years) had lost members of staff. Three had lost between 1-3 staff, the rest had lost more than three since being accredited.

Out-of-school clubs – The research team conducted interviews in ten out-of-school clubs. Participating clubs came from Birmingham, Cambridgeshire, Greater London, Leeds, and Milton Keynes. Nine were selected from clubs accredited Kid's Clubs Network *Aiming High* scheme. The tenth club had participated in the Leeds *Let's Get it Right* self-evaluation scheme.

One of the clubs was run by the statutory sector, five by the voluntary sector, and four by the private sector. Seven of the clubs provided places for children up to the age of 11 years, and the other three for children aged up to 14 years. The number of children provided for ranged from 24 to 60. Commonly, the number on the roll was between 30 and 40. Seven clubs had lost up to three members of staff since accreditation, one had lost six.

Childminding networks – The research team conducted interviews in nine childminding networks. Networks were located in eight areas from the South of England, Greater London, the Midlands and the North of England. All nine were selected from networks either accredited, or working towards accreditation1, through the National Childminding Association's *Children Come First* scheme.

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1 In the strictest definition, the term 'network' can only be used when full accreditation has already been achieved. However, in the absence of another appropriate term, 'network' being used here to refer both to those already fully accredited and those working towards it.

While some networks in the sample had been established for some time, others had begun to work towards accredited status more recently. For example, one network had been established for three years and had been using a quality assurance regime during that time. Networks also varied in size, ranging from 12 to 71 childminders.

4.3 Conduct of the research

Nurseries and out-of-school clubs – Members of the research team visited providers during January and February 2000. Interviews were conducted using semi-strutured topic guides, copies of which can be found in the appendices. Prior to arranging a visit, researchers sent a letter inviting those identified by accrediting organisations to take part. The letter explained the purpose of the research, who would be interviewed, and asked for assistance in gaining access to parents. The team telephoned providers within four days of sending out letters to answer possible queries. Once dates for face-to-face interviews had been agreed, researchers posted copies of topic guide headings to providers. During the visits to sites, a member of the research team interviewed:

- the manager/proprietor;
- any staff who could be released from duties with children and who had taken part in quality assurance schemes;
- any parents willing to participate.

Researchers tape-recorded all interviews, and made contemporaneous notes. To ensure confidentiality and anonymity, tapes were wiped clean once all possible information had been extracted. In the nursery sample, the team interviewed 11 nursery managers, 17 staff and 22 parents. In the out-of school sample, the team interviewed 10 managers, 20 staff and 28 parents.

Childminding networks – Interviews were conducted throughout February 2000 using semi-structured topic guides, copies of which can be found in the appendices. Members of the research team conducted face-to-face interviews in three childminding networks. Because childminders typically live over a wide area, telephone interviews were undertaken in the remaining six networks. The sample of

interviewees was purposive rather random, given that relatively few childminders to date have participated in a nationally recognised scheme leading towards quality assured status and accreditation. It was important then to conduct interviews with a range of experienced and well-informed network childminders. To this end, local network co-ordinators were asked to select a group of childminders for interview. In turn, childminders were asked to forward the names of parents using their services who might be prepared to take part in the research. The team conducted 46 interviews across the nine networks involving, 13 network managers or co-ordinators, 17 network childminders and 16 parents. All of the interviewees, including parents, were women.

4.4   Analysis

The remainder of Section 4 describes themes emerging from interviews. For managers of nurseries and out-of-school clubs, their staff, childminding network co-ordinators, and childminders, themes are described under six headings:

- Choosing schemes and deciding whether to go for accreditation
- The extent of staff involvement in implementation
- Views on key features of the schemes
- Information and support
- Problems, difficulties and solutions
- The impact of schemes on provision

Themes emerging from interviews with parents of children in nurseries, out-of-school clubs and childminding networks are described under eight headings:

- Awareness of local authority inspections and quality assurance schemes
- Views on kitemark-type-type schemes
- Awareness of their current provider's accreditation
- Attitudes to being involved in accreditation schemes
- Awareness of the process of getting accredited; problems and solutions
- Impact of the scheme
- Whether accreditation would affect decisions about joining a nursery

- Advantages and disadvantages of belonging to a scheme

Interviews with managers of nurseries and out-of-school clubs, their staff, childminding network co-ordinators, and childminders.

4.5   Choosing schemes and deciding whether to go for accreditation

Nurseries - People chose accreditation schemes for different reasons. Some had been long-term members their accrediting body, and valued the association's other services. They expressed loyalty to the association and so had chosen its accreditation scheme above others. Others had opted for their scheme after attending a talk and coming away '*fired with enthusiasm*'. Two nursery managers had not been consulted over the decision, which had been made by senior staff of their nursery chain. One manager of an early years centre commented:

> '*the upper management structure had decided that the document represented good practice – and just expected everyone to use it*'.

Out-of-school clubs - In six out-of-school clubs, managers said local sponsors, for example EYDCPs or TECs, dictated which accreditation scheme clubs should take on. This meant that the choice of scheme and the decision to go for accreditation was taken out of their hands. Although three of the managers were really interested and felt that they wanted to take a fresh look at the quality of their services at this time, the other three felt somewhat coerced into it. In two settings, their local authority had encouraged club managers to take part in accreditation, with additional pressure from their own line manager. However, both of these club managers respected the judgment of their line manager and were themselves enthusiastic to examine their own practice and become accredited. Although staff in these eight settings had not been involved in the decision to go for accreditation, they were happy to go along with it.

In the remaining two settings, club managers themselves had decided to go through a self-evaluation or accreditation process and had free choice of schemes. One self-

evaluation framework had been presented to staff as an '*introduction to quality assurance*' and used willingly by members of staff as a handbook of good practice.

The other club manager had chosen a scheme on a recommendation from her local Play Association and '*because it seemed a natural scheme to choose for an out-of-school club*'. The manager had asked for the views of the staff about going for accreditation and did not go ahead until she had gained their approval. Staff appreciated the fact that they had been consulted.

Childminding networks - Unlike some sectors of childcare provision, childminders seeking nationally recognised quality assured or accredited status, must undertake the NCMA's *Children Come First* scheme. The rationale for particular localities setting up networks and seeking accreditation was surprisingly similar across all nine sites. In the vast majority of cases, network co-ordinators had been brought into post as part of local Early Years Development and Childcare Partnerships initiatives to improve quality. Their remit was to set up an accredited network with the capacity to develop provision for the education of four-year-olds and/or community childminding for children placed through social services. Some local authorities had a history of employing childminding development workers, to which the role of childminding network co-ordinator or manager was seen as an extension. One network had originated through the NCMA *Childminding in Business* initiative and primarily served one local private employer. Involvement in *Children Come First* was seen as a natural progression in continuing to provide a high quality service for parents and children.

Managers and co-ordinators in rural areas felt childminders qualifying for nursery education grant in rural areas could offer parents of four-year-old children a convenient, local service.

Network co-ordinators and managers often cited external impetus from the Early Years Development and Childcare Partnerships and others in the local authority as a factor in establishing accredited networks. However, they also expressed high levels of personal commitment to involvement in *Children Come First*. Two network co-ordinators summed up the views of others when they said:

> *'Establishing a network was written into my job description, so I had to [get involved in Children Come First] ... but it is crucial anyway to raise the profile of childminding'*

Almost all of the network co-ordinators and managers interviewed cited access to the Nursery Education Grant as one of the primary incentives for participating in *Children Come First*. However, less that half of the childminders interviewed said that this was the most important reason for their deciding to become involved. While some were indeed keen to provide for four years old, very few were providing places for them to date. Those who were interested in accessing the Nursery Education Grant most often said that the impetus for this had come from parents who did not want to remove their four-year-olds from the childminder. Indeed the vast majority of network childminders across the nine sites stated that the primary incentive for their involvement in *Children Come First* was to achieve external and nationally acknowledged recognition for the high quality of service they felt themselves to be providing already. Many said that they were keen to contribute towards raising the profile and increasing the perceived professionalism of childminding. As one childminder said:

> *'I want to be recognised as a professional and a teacher of children. Lots of childminders are not given the respect they deserve and yet the early years are so important.'*

Access to increased opportunities for training and support, as well as decreasing isolation and greater opportunities for networking with others were considered important factors of the scheme for most network childminders. While many of those interviewed were already active in terms of accessing training and had been involved in local branches of NCMA and childminding support groups, further training was clearly an important incentive for becoming a network childminder. Indeed, one childminder reported that she wanted to do a NVQ and social services would only be prepared to support this financially on the condition that she joined the network:

> *'I wanted to work with children in need and to have a chance for more training and so not to stagnate. I didn't want to be 'just a childminder' ... I wanted the challenge.'*

Related to the desire for recognition and interest in further training opportunities, there were high levels of consensus among childminders that quality assurance would help improve the image of childminding and raise its profile. One childminder summed up a commonly expressed view when she said:

> ' ... [I] want to see the job taken more seriously ... this [quality assurance] proves your commitment'.

Several childminders interviewed were keen to ensure more rigorous standards in childminding generally:

> 'Childminders should be more regulated and trained - not just on safety but other things too. It [quality assurance] must be stringent otherwise how can be taken seriously?'

The majority of childminders interviewed did not think that the scheme would have a major impact on demand for places in the short term. They felt the scheme was not sufficiently well publicised to parents. However, most already had waiting lists for places due to what they felt to be a good local reputation for quality provision.

In conclusion:

- The impetus for establishing quality assured childminding networks usually came from the EYDCP, who are keen to expand provision, especially for four years olds and children placed through social services.
- Both co-ordinators and managers and network childminders demonstrated high levels of commitment to their participation in quality assurance.
- For childminders, the most important incentives for involvement in quality assurance included acquiring formal recognition of good practices, access to training and support and improving professionalism among childminders generally.

4.6   Extent of staff involvement in implementation

The extent to which managers of nurseries and out-of-school clubs involved their staff in the accreditation process varied, regardless of the scheme used. We identified four broad approaches:

1. Managers take sole responsibility
2. Managers and senior staff play a major role
3. Mangers and management committees take responsibility
4. All members of staff are encouraged to contribute

Managers who took sole responsibility for collecting evidence and compiling portfolios where required had often taken a conscious decision not to involve their staff from the outset. Consequently when questioned, staff reported they had very little to do.

In other settings, managers and senior staff took the lead in collecting information. They sometimes asked individual members of staff to provide copies of written materials such as plans and records. When questioned, staff in these settings could remember making contributions, but were not always sure how those contributions were used, or why they constituted evidence of quality.

A third approach, typical of some out-of-school clubs, involved managers working closely with a member or members of their management committee, sharing out tasks. Staff were not consulted in any systematic way, but were asked for copies of plans and records to include in portfolios.

Finally, the most inclusive approach involved managers sharing the task of collecting evidence with all members of staff. Some accreditation schemes are designed explicitly to encourage the maximum level of staff participation. In settings where everybody had played an active role in the accreditation process, staff spoke enthusiastically about specific tasks they had been asked to do, and appreciated the extent to which they felt they had been given a chance to demonstrate their expertise.

When interviewed, staff were generally happy about the extent to which they had been involved in the quality assurance processes, regardless of the degree of that involvement. However, staff encouraged to take a more active role generally had a better understanding of, and more positive attitude towards, accreditation procedures.

Questions about involvement and participation in quality assurance procedures are less relevant to childminding networks. To secure quality assured or accredited status, all childminders have to be monitored and assessed by their network co-ordinators. The *Children Come First* scheme requires co-ordinators or managers to put together a portfolio which includes evidence gathered from individual childminders, ensuring high levels of participation from all of those involved in the network.

The majority of childminders we spoke to participated enthusiastically in the development of their network. Some were given the opportunity to choose a name for their network. Many reported working with each other to develop written policies on issues such as equal opportunities and behaviour management.

4.7   Views on key features of accreditation and quality improvement schemes

Managers and staff were asked about the following aspects of their QA schemes:
- manuals;
- the collection of evidence and compiling portfolios;
- assessors' visits;
- assessors' reports.

*Manuals –*Manuals are the probably the most important single element of any quality assurance or quality improvement scheme. They describe the standards accredited settings have to meet. They may also include descriptions of the evidence settings may have to provide, how that evidence has to be collected and presented, and details of any assessment procedures. Consequently, it is essential that accrediting bodies provide manuals that can be readily understood by their target audience.

Most mangers we spoke to found their accreditation manuals and any accompanying guidance notes clear and easy to use. Accrediting bodies have evidently gone to great lengths to develop user-friendly materials. Where criticisms were made, they usually fell into one of the following categories:

- Unclear definitions of standards;
- Inappropriate terminology;
- Confusing or illogical layout.

For example, one manager noted that their manual did not help them decide *'how much evidence to collect'* or *'the best evidence to produce'*.

Less senior staff often had less experience of using self-assessment materials than their managers. Many we spoke to had not seen the accreditation materials. For those that did, several felt the written materials *'looked daunting'* at first glance. However, once staff understood how the task of collecting information could be broken down into smaller, more manageable bits, they were happier. Where managers were positive about the whole process, staff had more confidence in their abilities to get the job done.

Some senior staff said they had to rewrite sections of their manual to make them more accessible to everyone using them. People rated manuals most highly when they provided clear descriptions of good practice. Staff described one document in glowing terms as providing an *'overall philosophy of good nursery practice'* that could be used as a *'reference book'*.

Compiling a portfolio of evidence – Most accreditation schemes involve assembling a portfolio of evidence that is presented for assessment. Managers felt this was a very useful exercise. Benefits cited were:

- *'it made you look at every aspect of nursery provision'*
- *'it pointed up strengths and weaknesses'*
- *'it brought to light areas for improvement'*
- *'it highlighted training needs of staff'*
- *'it was the normal things that we did but it illuminated it for us when having to write it down'*.

Managers who involved everyone in their setting used the compilation of the portfolio as a staff development exercise and reported that the experience had *'cemented the team'* and increased everyone's knowledge and understanding of quality care. In the case of one particular out-of school club, the manager found that assembling the portfolio gave the club a structure and was a good vehicle for developing effective communication between herself and the management committee.

In settings where managers took on most of the responsibility for putting the portfolio together, staff did not comment on the process but were generally pleased with the product. They saw the completed portfolio as a point of reference and overview of the nursery's work. In contrast, staff who had been more involved in self-assessment explained that the process was *'a real learning tool'* leading to the development of good work habits, and a greater understanding of *'improvement by degrees'*. Where staff were encouraged to carry out detailed observations in their setting, they said they had learned a lot about the quality of the interaction between adults and children. They had been able to identify examples of good practice that could be used in developing other members of the staff team. Staff found the process of data collection *'very revealing'* about children and their development. Some said they became more willing to be self-critical as a result of working through self-assessment exercises. The process had caused them to reflect on the range and frequency of activities they provided, and the quality of their forward planning. This had linked well into work for NVQs. The process had given a sense of excitement about *'improving everything'* and for one playworker *'the process of putting your thoughts and actions into writing was really useful'*.

The Assessors' Visits - Not all accreditation schemes involve visits from external assessors. Some of the schemes being used by providers in our case studies had not developed to the point at which providers were ready for an external assessment. External assessment in any context can be a daunting prospect. Although some providers felt quite nervous prior to their visits, staff generally reported that the visits were less eventful than they had imagined; assessors were unobtrusive and sometimes friendly.

Managers often appreciated the ways in which the assessors talked with parents and got involved in activities with children. They could see the assessors were

'*professional*' and '*astute*'. Straightforward feedback given at the end of the visit often '*gave an immediate boost to morale*'.

The Assessors' reports - Managers generally found the assessors' reports fair and accurate. One explained that the recommendations were useful and had led to more improvements (specifically the development of an appraisal system). Where people were somewhat critical of their reports it was because they it was too similar to that given to other nurseries in the same chain and '*not individualized enough*'. Another manager complained her report was '*not in-depth enough – too basic- just two or three sheets*'. She made the point that it seemed little reward for such a lot of work. In almost all settings staff had read the report or received feedback on it from managers. All thought the reports were fair and some had felt a sense of pride.

4.8   Information and support

Many of the managers and staff interviewed had used self-assessment materials before (e.g. as part of internal audit systems in other employment, self-generated Quality Assurance checklists for nurseries, as part of accreditation training in previous employment, or through taking part in Investors in People). All had found their prior experience useful when it came to evaluating their current procedures against criteria presented by accrediting organisations.

In this section we examine the theme of information and support under five headings:
- Early Years Development and Childcare Partnerships
- Training and workshops
- Peer group meetings
- Mentors
- Other sources of support.

Early Years Development and Childcare Partnerships – Many of the providers interviewed had gone through their accreditation scheme before EYDCPs had been established. For others, the level of EYDCP involvement ranged from none to the

local EYDCP having '*inaugurated the whole accreditation thing*'. This particular partnership had set up meetings between the provider and the accrediting body, and offered to be at the end of a telephone for advice during implementation, which the provider found very helpful. [The national telephone survey, discussed in Section 5, asked providers about the range of support they received from EYDCPs]

In the case of childminding networks, the vast majority of network co-ordinators and managers agreed that EYDCPs demonstrated high levels of interest and commitment to supporting the development of quality assured and accredited networks. Funding levels were thought to be adequate and the provision of training through some EYDCPs welcomed. However, some co-ordinators and managers had not always found their relationships with EYDCPs easy, especially in terms of their role of keeping the members of the local EYDCP informed about procedures:

> '... *it was early days and networks were new and they didn't understand what it was all about. You were explaining to them all the time*'.

Training and workshops - The training available to providers varied from one general 'overview' meeting, to an initial conference followed by three days intensive training. In general all managers found training helpful. Managers were particularly grateful where initial sessions '*pulled no punches and the amount of work was not played down*'. The use of video training materials that could be taken back to settings was also well received. People reported sessions to be very good when they were able to have all their questions answered by providers who had already gone through accreditation and /or to scrutinise a portfolio from a club that been accredited.

Peer group meetings - Peer group meetings were cited as a very useful source of help. One self-help support group of all managers going through accreditation met regularly and shared ideas on the interpretation of standards and the types of evidence that could be included in a portfolio. Those who attended reported this to be a prime source of support and 'full of tips'. At one of the meetings an accredited provider brought in her portfolio for all to see. In one local authority, accreditation was a regular item on the agenda at play leaders' meetings. At these meetings managers devised policies together and compared evidence they were intending to submit.

Mentors – Not all accreditation schemes provide mentors for providers. For some schemes, local development workers can act in this capacity. Where they did have access to an identified person as a source of support, managers found it very useful. They particularly appreciated:

- ability to ask '*anything at all*'
- answers to quick queries (by telephone)
- return of calls within two days
- lengthier replies written and sent by post
- tips collected from other nurseries and passed on
- mentors who really 'listened'
- scrutiny of a 'draft' portfolio, feedback (annotated) on its quality and where gaps still existed and advice on how to close those gaps
- visits from mentors.

Childminders were convinced that the role of a paid, dedicated co-ordinator was crucial to the success of networks.

Other sources of support – Providers mentioned several other sources of support they found valuable, including:

- Practitioners working in other local settings;
- Early Years advisers;
- Other local professionals who gave help with policy writing;
- Head teachers at schools to which out-of-school clubs were attached;
- Training courses that focussed on the quality of activities provided in early years settings and adult-child interactions;
- Visits to other providers (useful for ideas on activities and procedures).

Although some accrediting organisations offered providers a telephone help line service, many did not access this source of help.

4.9   Problems, difficulties and solutions

Finding time to do the work involved in self-evaluation and accreditation was the problem most frequently cited by managers. Several managers found the process took up more time than they had first thought. Doing observations in a setting, collecting evidence, and writing documents describing new policies and procedures were just some of the time-consuming activities that often had to be done. Some managers just ended up doing 'unpaid overtime'.

For childminders the major problem encountered was juggling commitments, both professional and personal, to fit in training, initial assessments (which could take on average three hours) and subsequent monitoring visits. Childminders were also concerned that extra paperwork should not take them away from their primary work of caring for children:

> *'Although parents are thrilled to bits to have an accredited childminder they do not want it to affect the day to day care and time spent with their kids'.*

With the benefit of hindsight, some managers felt they should have spent more time at the outset getting a more accurate overview of exactly what was involved. That would have enabled them to think more carefully about timing, i.e. choosing a period in which to go through the process when there were as few pressures as possible on the setting.

In some cases the problem of finding time was compounded by a lack of understanding on behalf of the staff. *('They didn't know the nature of the beast they had to tackle')*. The manager was determined to involve all the staff, but discovered that they found the concepts of 'quality assurance' and 'back-up evidence' very difficult to grasp. To solve this, the manager took time to go through the manuals with two senior staff and encouraged them to do the same with their teams, reading and re-reading the quality areas until they began to understand. It was also helpful to keep accreditation as a recurring item on staff meeting agendas.

In more than one setting managers were initially confused as to whether the same evidence could be used more than once. The best solution was to talk to others- either

mentors or other colleagues involved in the same scheme. Unfortunately, members of staff sometimes had different interpretations of what as required as evidence. One manager had found getting questionnaires back from parents difficult. She simply persisted and in the end had to 'beg' parents to return them.

A major difficulty experienced by managers was fitting in timed observations of children in a way as to avoid any disruption. This required strict planning – planning observations into the programme of activities for the children. However, with the best will in the world, there were times when observations had to be disrupted (i.e. through necessary nappy changing and other personal routines that could not wait). Staff being observed by peers also caused some initial unease when the process got underway and 'not naming names' posed a problem for managers when good practice was uncovered by observations. Eventually staff got used to peer observation and managers referred anonymously to the good practice they had seen in later staff development activities. Some managers explained that were they to start the process again, would try to set aside a whole INSET day to allow staff to practice using observation schedules and try to group children in such a way that observations could be carried out smoothly during group time.

Two managers who had not attended any training sessions found their supporting documents too difficult to use for self-evaluation. '*It's in the form of questions – it doesn't give a set of indicators of quality*'. Both managers had developed their own self-assessment checklists. In future, they said they would be more pro-active in seeking help from mentors.

The main difficulty faced by staff with only a small degree of involvement (i.e. collecting bits and pieces for the manager) was that it often became an add-on to their work, something extra to do. One manager felt she needed to give more thought to the structure of meetings, and make self-assessment and the collection of evidence more of a staff development exercise than an add-on. For staff more fully involved in self-assessment procedures, their main concern was whether their work was good enough, whether they were actually measuring up to the quality standards. Staff who were totally involved became much more self-reflective than others. They explained that

they '*just got into a routine of being rigorous*' or '*pulled together, brainstormed our craft knowledge*'.

When managers were asked what they would do differently if they were to start the whole process all over again, they came up with a range of useful advice. The consensus was that all staff should be consulted, and feel ready to make a commitment to accreditation; that timing was important and accreditation should be started when other potential pressures on the setting were least likely. Managers who handled accreditation single-handed or with senior staff only reported that they would probably involve more people next time. Some thought they would be more active in seeking out the support of the mentors, more insistent when asking for clarification of explanations contained in written materials. One manager felt they had wasted time by starting without gaining an overview of the whole process. She felt that next time she would look through the file from start to finish to see where evidence can be used more than once.

Some problems evidently arose because more than one of the accreditation schemes being used was in the early stages of development. With time, materials and procedures should be developed to better suit the needs of users. Similarly, providers might feel more inclined to commit themselves to accreditation were parents more aware of the schemes, what they involve and their relationship to quality.

4.10   The impact of the scheme

Some providers we spoke to were still working on their accreditation or quality improvement schemes. For them it was too early to judge the impact of participation on their provision. Of the remainder, all but a few said they had changed their practices as a result of taking on their scheme. Where people reported no change, it was because, in their view, they were already providing a high quality service before they became accredited. As one childminder put it: '*I was doing it all anyway - now I just have the evidence and recognition*'

Most managers felt accreditation and quality improvement schemes had generally led to them introducing a range of changes. Some were to do with the introduction of new working procedures, such as:

- Staff appraisal schemes
- Induction schemes for new staff
- Systems for conducting continuous self-evaluation
- Key-worker systems
- Better record-keeping;
- Systems to allow for better planning of activities;
- Improved methods of communication with parents.

Managers felt they were more analytical when it came to thinking about their provision. Staff were generally more reflective and self-critical, and consequently more highly motivated and keen to pursue training opportunities. They had learned to define their own procedures and practices, and translate them into policy documents. Clearer policies led to more consistent practice, which helped to create the impression among staff that they were working more effectively as a team. Staff generally felt more valued, and were more willing to participate in developing standards. One manager talked about having '...developed a consciousness of maintaining quality'. Several felt the process had led to an improvement in their relationships with staff, and helped them gain '... a great deal of confidence', a view echoed by co-ordinators and managers of childminding networks, one of whom said

'It has raised the profile of childminding locally and they [childminders] have more confidence, in dealing with parents for example ... they feel they are professionals now'.

Managers also noted improvements in working practices with children. Asking children what they thought about their provision had meant staff 'learned a lot from children's responses. What we thought was not always what the children thought'. Several felt practices had improved as a result of taking a more analytical view of the way adults and children interacted. Relationships with children had changed, with adults becoming 'less directive'. Staff had developed a better understanding of how to integrate learning opportunities in the areas of literacy, numeracy, and science into

children's activities. Close observation of children's preferred activities had led one nursery to change their approach towards boys and girls, enticing boys into more literacy based play. Managers felt children had benefited from improvements in their learning experiences and enjoyed a better balance between play and educational activities. Provision had become more child-centred.

Staff whose involvement in the process had been only limited were still generally positive about the impact of accreditation. Changes they listed included:

- more accurate assessment of children;
- increased job satisfaction (knowing you are on the right lines with your practice);
- key policies having more influence on practice;
- improved links with parents;
- more cohesion in the staff team;
- greater consistency in working practices;
- greater demand for staff training.

The impact that accreditation has on the demand for training is important. As one co-ordinator of a childminding network remarked:

'The training associated with getting the childminders up to scratch was as important as the quality assurance scheme in bringing about positive changes'.

Staff who had taken an active role in all phases of the accreditation process thought their schemes had had a significant impact on their own learning. They had learned:

- what counts as quality and degrees of quality;
- how to do self-evaluation;
- how to interact effectively with children (e.g. extending children's conversation);
- the extent to which they play a major educational and social role in children's lives

Staff who had been encouraged to undertake observations of adult/child interactions as part of their scheme felt they had a better understanding of young children and how to work with them; they had learned:

- to listen to children;
- that children have individual patterns of learning;
- that children learn '*in an integrated way*' (this had led them to think of planning more cross-curricular activities).

Staff in out-of-school clubs felt that accreditation had encouraged them to give children more of a say in how things were run. Several reported setting up new children's committees. *'Now they have more enjoyment – doing what they really want to do.'*

Assuring quality for children with special needs – We asked interviewees whether schemes had helped them think about the service they provided for children with special needs. Managers generally felt that assessing themselves against the quality standards had made them think more about what they were providing. It had led them to develop new policies, improve access to their buildings, appoint a SENCO (special educational needs co-ordinator) and to actively seek information about support agencies. One manager stressed the important role played by accreditation procedures in helping staff better appreciate the individuality of each child and their learning.

Three managers explained that schemes had not prompted any new thinking on special needs. Their view was that if the nursery contained no children with special needs, there was no need to think about providing for such children. Staff in those three settings echoed the managers' views.

Some managers were critical of the SEN sections in their materials. In their view, the coverage of SEN was superficial – *'doesn't go into detail to help you reflect on the provision you make for individuals'*. Staff in the same settings felt that they had *'gone a lot further'* with their thinking on SEN than their self-evaluation materials went. However, some felt that the process of assessment and monitoring had helped staff identify training needs on issues related to children with special needs.

Impact of accreditation on demand for places – Most managers and staff felt accreditation had little or no impact on the demand for places. Some thought that accreditation might influence demand were the public made more aware of it. Once parents know more about what was involved, they may develop a preference for providers who show an interest in self-evaluation.

4.11 Advantages and disadvantages of belonging to a scheme

Managers perceived several advantages of taking part in an accreditation scheme:
- it provides a goal;
- it provides a framework for continuous evaluation;
- everyone can learn from the process and this helps the provision to move forward;
- it's a way of bringing a team together;
- the completed portfolio acts as an invaluable reference document for all staff and can be used in training new staff;
- it prepares you for local authority and OFSTED inspections.

They felt the great advantage of taking part in self-evaluation was that '*...it's not about a 'judgement' it's about development and change'*

Staff who had been closely involved in their scheme identified several advantages. Involvement:
- acts as a developmental process;
- offers monitoring tools that can be used over and over again;
- leads to improved standards;
- improves staff morale - '*a lot of confidence comes from self-evaluating; after all you can mark your own work*'

Staff who had been only marginally involved stressed that accreditation had improved administration within their provision.

Co-ordinators and managers of childminding networks saw the advantages of belonging to the scheme primarily in terms of raising and improving the profile of childminding and the associated increase in confidence among childminders:

> *'The image of childminding locally has improved enormously since the network was set up ... no longer seen as babyminders or the cheap option for mums who can't afford a nursery'.*

Childminders felt that their accreditation scheme had help them feel less isolated:

> *'The support of the network and meeting with other childminders is probably the main advantage for me'*

Identified disadvantages had mainly to do with the time taken to complete self-assessment procedures. One comment was that if accreditation or self-evaluation cycles take too long, staff enthusiasm tails off. Another was that over zealous self-assessment could lead to attention being drawn away from children. More generally, the view was expressed that high staff turnover can make it difficult to maintain levels of quality over time. Lastly, some people felt that accreditation materials should identify clearly what counts as quality and how quality varies by degrees, otherwise providers will not use them.

Local Authority Inspections and work done on Quality Assurance Schemes - Managers were asked to consider the work done for QA schemes in relation to local authority annual inspections. Managers described both similarities and differences in the two approaches. Areas of quality examined by local authority inspectors were broadly similar to those covered in accreditation materials. However, all managers involved with externally assessed schemes reported that there was a higher standard of scrutiny from the scheme assessors than from the local inspectors. It was commonly felt that schemes required a lot more evidence or 'proof' of quality procedures than local authority inspectors did.

A few accredited managers felt that in their area, the two approaches conflicted. The local ethos was:

'to offer advice and assistance – look at what you are doing and help you to make it better – a developmental model. In contrast the [accreditation scheme] *is an inspectorial model'.*

One manager believed that the focus of local authority inspections was drawing closer to that of the accreditation schemes.

'They are now looking at the learning experiences on offer and what the children are actually doing').

However, inspection procedures vary across local authorities. One manager felt local authority inspectors and accreditation schemes looked at totally different things. The former were interested mainly in looking at structural features of settings rather than quality of adult-child interactions. Another felt their accreditation scheme reflected child-centred practices to a greater extent.

Interviews with parents of children in nurseries, out-of-school clubs, and childminding networks

4.12   Conduct of the research

All parents who were willing to be interviewed were initially asked the first eight questions on the topic guides. If parents were unaware that their provision had been accredited or were using self-evaluation as part of quality assurance, the interview was terminated, otherwise they went on to give their views on all the topics. The research team interviewed a total of sixty-six parents. This is evidently a small and generally self-selecting sample. Consequently the views expressed should not be taken as necessarily representative of all parents whose children use childcare provision. However, the qualitative data we have collected could usefully inform a future project designed to look more systematically at parental views.

4.13 Awareness of local authority inspections and quality assurance schemes

Parents were generally well informed about local authority inspections but less well informed about quality assurance schemes All but five parents we spoke to knew about local authority inspections. However, only nine parents with children in nurseries were aware that nurseries could seek accreditation. Similarly, only five parents using a childminder knew that childminders could seek accreditation through networks. Parents of children in out-of-school provision were much more aware of quality assurance arrangements. Twenty of the 28 parents interviewed knew that clubs could choose to be accredited if they so wished.

4.14 Views on accreditation schemes

Although familiar with the general principle of accreditation schemes, parents were commonly unaware that childcare providers could be accredited. However, once informed they were almost unanimously in favour of accreditation schemes for childcare provision. They thought that accreditation schemes would give parents confidence that standards of care were being monitored and reassure parents that their children were safe and secure and that staff were adequately qualified. Parents felt that accreditation should involve providers being judged by an independent, external assessor. Two parents felt that a single, national accreditation scheme standard would be better for each type of provision. That way, parents would be able to compare providers against each other. Other points raised included problems of staff turnover making it difficult to maintain standards, and the issue of cost; if accreditation schemes were expensive, many voluntary sector providers would not be able to afford them.

Most parents had ideas about what providers should have in place in order to qualify for accreditation. The following were cited over and over again:
- vetted staff with appropriate qualifications;
- a healthy and safe environment;
- a range of stimulating activities;
- a pleasant social environment with good relationships;

- appropriate adult – child ratios.

Beyond those things mentioned above, parents valued services that provided:
- a place where their children are happy;
- staff with good behaviour management skills;
- staff that know about their own child's individual needs (medical, nutritional);
- a balance of play / educational activities;
- activities that interest and stimulate children;
- regular feedback on their child's developmental progress.

What they do not want to see is provision that lacks balance (*'not too schoolish'*), apprehension or fear in their children, or their children slipping developmentally because of lack of monitoring on behalf of staff. Parents with children in out-of-school provision did not want to see their child wandering about aimlessly, watching endless videos or being in an unpleasant environment.

Parents employing childminders felt that they should provide an appropriate, safe and secure environment for care; engage in a variety of activities and play designed to stimulate and educate the children; adapt to the specific developmental needs of individual children; and maintain open channels of communication with parents:

One parent commented:
> *'They should have proven knowledge of children's developmental needs and appropriate activities … they should also be able to prove they are doing what they say they are'.*

Some parents also mentioned the importance of training in first aid, preparing healthy meals, cleanliness, and demonstrating patience and care.

4.15   Awareness of their current provider's accreditation

Ten parents were unaware of the quality assurance practices happening in the nurseries attended by their children. Nine parents were aware that their own nursery had gone through an accreditation process, and a further three knew they were doing some sort of self-evaluation. However, only three parents knew the name of schemes. The picture in out-of-school clubs was similar. Although nineteen parents were aware of their club being accredited, only six could put a name to the scheme. Only one parent who used a childminder could name their accreditation scheme.

Parents found out about accreditation in a variety of ways – through their initial interview with the managers, newsletters, informal chats with staff, or because they were part of a management team. Parents were often hazy about the extent of their involvement along the way. However, some remembered filling in short questionnaires or being interviewed in some cases. Many remembered being aware of impending assessors' visits.

4.16   Attitudes to being involved in accreditation schemes

Of parents who knew their childcare provider had been accredited, none we interviewed had been asked their opinion over the choice of scheme. The majority of parents were happy for managers and committees to make decisions about choosing accreditation schemes, only six (fewer than 10%) said they would have liked to have known about schemes and what they entailed.

Parents generally felt that they were kept abreast of the accreditation process although one was very unhappy that she had not had updates on what was happening. The main issue raised was that parents like to be kept informed about everything that goes on at the nursery; they also like to be consulted over issues concerning the quality of care their children receive (although not necessarily involved in making decisions). Several providers pointed out that if parents are paying for non-parental care, they are unlikely to have the time to spare for extensive involvement in accreditation schemes.

In general, parents reported being happy with the extent to which providers consulted them over the accreditation issue.

4.17   Awareness of the processes of getting accredited; problems and solutions

Around one in three parents had fairly accurate ideas about the tasks required to become accredited and described them as: getting all the paperwork in place, proving the housekeeping is in order and assessing the quality of interaction between adults and children. They understood that the process must have generated 'mountains' of paperwork and reckoned that providers must have solved the problem through sheer hard work. The parents concerned were either on management committees, or had some professional experience of similar procedures. The majority of parents we spoke to knew very little about the work, or problems, involved in becoming accredited.

4.18   The impact of the scheme

Parental opinions varied as to whether providers had changed their procedures in any way in order to become accredited. Some parents had noticed no change. Other parents could see improvements, reporting:

- improved security;
- better use of premises;
- *'stricter behaviour code'*;
- more structure to the programme;
- new activities (music, more trips);
- introduction of audio-visual equipment;
- *'more acknowledgement of children's opinions'*;
- *'more communication with parents'*;
- better learning outcomes for older children.

Because so few parents were aware of their childminder being accredited, the question of impact provoked very little discussion in this group. One parent commented:

'Well, she has always done everything that you are meant to – and more – and so it is hard to say that there has been any improvement – she was excellent anyway'.

4.19   Whether accreditation would affect decisions about using a childcare provider

The majority of all parents we interviewed said if they were to change providers now, they would want to know about accreditation before choosing. They cited the following reasons:

- it would be 'a plus' for the provider and help them decide between providers;
- it would show a nursery had been externally assessed;
- it would be a reassuring factor that the provider was trying to improve.

However, some parents said that in reality they had little choice over what local provision to use.

Around one in four parents using nurseries or out-of-school clubs explained that in principle accreditation would not be a major factor in their decision about choice of provider. Personal judgement and approval from the local authority would suffice.

Parents who used childminders generally felt accreditation would give them a greater degree of confidence in the quality of care being provided. However, only two parents thought accreditation would influence their decision on which childminder to use. One parent summed up her position by saying:

'Although it could be a help to know they have reached a certain standard, I still think personal recommendation goes a long way ... I heard about my childminder from someone at work and she was always happy and I am too ... I'd recommend her to anyone looking myself'.

4.20   Advantages and disadvantages of belonging to a scheme

Of those who knew their providers were accredited, most parents could see advantages of going through accreditation or self-evaluation. They felt the process provided:

- an essential and useful review of policy and staff expertise;

- personal development through enhanced knowledge;

- an overall analysis of strengths and weaknesses;

- self-reflection on managerial and communication skills;

- an evaluation of activities on offer;

- motivation to work towards higher goals;

- a tool for continuous self-assessment.

Parents also saw advantages for staff because going through accreditation or self - evaluation would:

- encourage reflection on their work and activities;

- give them another (external) view of their work;

- provide goals to aim for.

Many parents mentioned that if managers and staff '*reflect on their pedagogical ideas*' one outcome was bound to be better provision for the children. They suggested also that achieving accreditation would give everyone '*a pat on the back*'.

The only potential disadvantages parents discussed were mainly to do with issues of time and workload. They thought there might be disadvantages in belonging to a scheme if the job of collecting and reviewing evidence meant managers and staff couldn't concentrate on the needs of children. Two parents commented that they would like some reassurance that schemes were properly managed to ensure that all accredited providers were in fact providing a high quality service.

SECTION 5

NATIONAL SURVEY OF NURSERIES AND OUT-OF-SCHOOL CLUBS

5.1 Introduction

This section reports the results of a national telephone survey conducted for the Thomas Coram Research Unit by Public Attitude Surveys Ltd. The telephone survey method was used because recent survey work with childcare providers has run into problems of poor response rates. For example, only around 30% of nurseries responded to a recent national postal questionnaire survey. The research team used telephone interviews to collect data on the prevalence and type of quality improvement and quality assurance schemes currently in use, and the reasons why some providers are not using these schemes. Telephone survey data also helped to establish the extent to which qualitative data collected in the case studies reported in Section 4 can be generalised to the wider population of childcare providers using accreditation schemes.

5.2 Conduct of the research

The sample - A stratified random sample of twenty-five English local authorities was selected to include some from each of the following five categories: inner London authority, outer London authority, metropolitan authority, new unitary authority and shire county.

Two problems frequently arise in telephone surveys: (a) the person most able to answer the questions is not available when a call is made, (b) the person responding needs to consult specific documents or colleagues before they can respond. To reduce the risk of encountering these problems, a list of questions to be asked during the telephone interview was sent to providers by post. A covering letter explained the purpose of the survey and identified a date on which they would be contacted for their responses.

Letters were sent to ten day nurseries and ten out-of-school clubs in each of the 25 local authorities. Participants were selected at random from local authority lists. Where nurseries or out-of-school clubs could not be contacted or declined to participate, additional letters were sent to other providers in the same local authority.

A total of 250 telephone interviews were carried out with day nurseries and, 251 with out-of-school clubs. Telephone interviewing was carried out by Public Attitude Surveys (PAS) Ltd. Telephone interviews were conducted during February and March 2000. The research team at TCRU provided PAS with the names and telephone numbers of 654 nurseries and out-of-school clubs. Of that total, 51 declined to participate, 46 were unobtainable, and 56 were not called. The effective response rate for the telephone survey was therefore 91% (501/552). Given the random nature of the sample, results from the telephone survey can be considered to be broadly representative of providers in England.

The sample of 250 nurseries was made up of 13 (5%) from the statutory sector, 17 (7%) from the voluntary sector, and 220 (88%) from the private sector. Of the 251 out-of-school clubs, 90 (36%) were from the statutory sector, 72 (29%) from the voluntary sector, and 89 (35%) from the private sector.

Interviewers spoke to nursery and out-of-school club managers or proprietors using a structured interview schedule. A copy of the schedule appears in Appendix C of the report. Questions covered the following issues:
- have you implemented a quality assurance/quality improvement scheme?
- if not, why not?
- to what extent were staff members involved in implementation?
- to what extent were parents involved in implementation?
- has your accreditation scheme helped you think particularly about services for children with special needs?
- what impact has the process had on the quality of service you provide?
- how adequate was the information and support available during implementation?
- did you experience any problems during the process?

- what solutions did you identify to resolve any difficulties involved in implementing and using the scheme?
- what do you think the advantages and disadvantages of belonging to the scheme might be?

Analysis of survey data

5.3   Have you implemented a quality assurance/quality improvement scheme?

Table 1

Proportion of providers involved with an accreditation or kitemark-type-type scheme

	Type of provision	
	Day nursery (%)	Out-of-school club (%)
Involved	12	16
Not involved	88	84

Base: All respondents $N = 501$ (250 day nurseries, 251 out-of-school clubs)

Most nurseries and out-of-school clubs had not taken part in any accreditation scheme. Those providers who had gone for accreditation were more likely to be larger facilities (more than 30 places), and to have been open for less than five years. Looking across a range of characteristics, accredited provision did not differ in any other significant way from non-accredited provision.

Of those not already involved in an accreditation or quality assurance scheme, 18% of nurseries, and 27% of out-of-school clubs thought it 'very likely' they would get involved in one over the next twelve months. A third of nurseries and a quarter of out-of-school clubs responded to the same questions with a more cautious 'maybe'.

Among providers not implementing schemes, almost three-quarters (73% of day nurseries and 71% of out-of-school clubs) had used self-assessment of some kind to look at the quality of their service. For nurseries, the schemes most often involved sending out parent questionnaires, doing observations, and getting staff to complete questionnaires. In out-of-school provision, observations were less of a feature, but parent and staff questionnaires were popular. In 56% of these settings, staff produced any written materials themselves, although for a third of providers the materials came from their local authority. All bar six providers (out of 271) judged their self-assessment materials useful in helping them to improve quality. 66% judged them 'very helpful' and 33% 'quite helpful'.

5.4   If not, why not?

Table 2

Reasons for not being involved with an accreditation or kitemark-type scheme

	Type of provision	
	Day nursery	Out-of-school club
Reason for non-involvement	(%)	(%)
Don't know about schemes	44	26
Too busy	12	19
Decision made at head office	11	17
Too expensive	7	10
Other	32	37

Base: All not involved with an accreditation or kitemark-type scheme N =   430 (220 day nurseries, 210 out-of-school clubs). Totals exceed 100% because of multiple responses.

Nurseries and out-of-school clubs cited lack of awareness as the main reason why they were not involved in accreditation schemes. Amongst those not involved, around

half (44%) of nursery managers, and a quarter (26%) of out-of-school managers said they did not know about accreditation schemes. Only five managers felt accreditation schemes were not worth getting involved in. Three of the five felt that because they already provided a well-established, high quality service, they had nothing to gain from becoming accredited. Data reported in the remainder of this section were collected from only a small sample of providers, and should be interpreted accordingly.

5.5 To what extent were staff members involved in implementation?

Evidence from other research into accreditation and quality improvement schemes has highlighted the importance of involving all members of staff. The more people are encouraged to contribute to the process, the more likely it is that schemes of this kind will lead to improvements in standards of provision.

Table 3

Which staff were involved with the accreditation or kitemark-type scheme

	Type of provision	
	Day nursery	Out-of-school club
Staff group		
Senior members of staff only	5	10
Senior and some other staff	-	5
All staff	21	21

Base: All with members of staff involved with an accreditation or kitemark-type scheme

$N = 62$ (26 day nurseries, 36 out-of-school clubs)

21 nursery managers of the 26 who involved staff claimed everybody had contributed to the accreditation process. Among out-of-school clubs involving staff, 21 managers

said all staff were involved. When asked about the extent of staff involvement, managers in 18 nurseries and 23 out-of-school clubs said 'very much', while 8 in nurseries and 10 in out-of-school clubs they said 'somewhat'. Staff involvement usually meant attending meetings and collecting information for portfolios of evidence. Of providers involving staff in schemes, around two out of three nurseries, and one in four out-of-school clubs, arranged staff training as a result of quality improvement initiatives. However, based on evidence collected from interviews with staff during the case study phase of the research, these figures need to be interpreted with caution. At the very least, mangers and staff may have different views on what counts as *staff involvement.*

5.6   To what extent were parents involved in implementation?

Of the providers either accredited or working towards accreditation, managers in 47% of nurseries and 51% of out-of-school clubs claimed parents were involved in the schemes. Many parents do not get involved. For most, it is likely to be an issue of time. The fact that children use early years services frequently means parents already have to meet the often competing demands of work and family life.

Table 4

*Number of providers where parents were involved with an accreditation
or kitemark-type scheme*

	Type of provision	
Parent group	Day nursery	Out-of-school club
Management committee	-	3
A few parents	7	5
Most parents	3	2
All parents	4	11

Base: All with parents involved with an accreditation or kitemark-type scheme   *N* =
35 (14 day nurseries, 21 out-of-school clubs)

Views on the extent to which parents were involved in accreditation varied. Among
the 14 day nurseries, 3 managers said parents were 'very much involved', 10 said
'somewhat involved' and one said parents were involved 'very little'. For the 21 out-
of-school clubs, the figures were 4, 12 and 5 respectively. Most managers talked
about informal involvement, such as letters being sent out, or more usually a notice
going up on a board. Questionnaires, meetings and collecting information were all
mentioned as activities some parents took part in. Again, caution needs to be
exercised because of different possible interpretations of involvement.

**5.7   Has your accreditation/kitemark-type scheme helped you think particularly
about services for children with special needs?**

Managers in 42% of nurseries, and 41% of out-of-school clubs felt being involved in
a scheme had influenced their thinking about services for children with special needs.

Table 5

How accreditation or kitemark-type schemes have influenced thinking on Special needs provisio

| | Type of provision | |
| | Day nursery | Out-of-school club |
Influence		
More staff training	11	10
New policies	5	6
New working practices	3	5
Highlighted issues	-	2
Other	3	3

Base: All involved with an accreditation or kitemark-type scheme which made them think more about special needs provision   *N* = 30 (13 day nurseries, 17 out-of-school clubs). Column totals exceed 30 because providers gave multiple responses.

5.8   What impact has the process had on the quality of service you provide?

Table 6 illustrates the extent to which providers thought taking part in their accreditation or kitemark-type scheme had helped to improve the quality of their service.

Table 6

How much has your accreditation or kitemark-type scheme helped you to imp
  qualiryour quality of your service

	Type of provision	
	Day nursery	Out-of-school club
Improvement		
	(%)	(%)
Very much	36	39
A little	40	49
Not at all	23	12

Base: All involved with an accreditation or kitemark-type scheme

$N = 71$ (30 nurseries, 41 out-of-school clubs)

Of those nurseries and out-of-school clubs who felt they had improved their service, managers had made changes in policies (31) and practices (21). Two areas of policy change most often cited were equal opportunities, and health and safety. Similarly, of the 21 providers who had made changes in practice, 9 were in the area of health and safety and 4 in equal opportunities. Two nurseries reported having changed their administrative practices as a result of being involved in a scheme.

5.9   How adequate was the information and support available during implementation?

When we interviewed nursery and out-of-school managers face-to-face, several said how important it was to have good levels of support as they went through the

accreditation process. Table 7a describes the different types of support providers had access to.

Table 7a

Sources of support available to providers going through accreditation

	Type of provision	
	Day nursery	Out-of-school club
Source of support	(%)	(%)
Manuals/written materials	63	61
Mentors/development workers	30	56
Workshops	40	27
Local authority inspection unit	33	29
Other providers in same scheme	17	20
Local EYDCP	10	17
Accrediting inspector/assessor	7	5
Other	7	7
None	3	2

Base: All involved with an accreditation or kitemark-type scheme

$N = 71$ (30 nurseries, 41 out-of-school clubs)

Nurseries and out-of-school clubs had slightly different views when it came to assessing how useful they had found each source of support. Tables 7b and 7c provide the details.

Table 7b

How useful was each source of support for your nursery?

	How useful			
	Very useful	Quite useful	Not useful	Total
Source				
Manuals	10	8	1	19
Workshops	7	3	2	12
LA inspection unit	4	1	-	5
Mentors	5	3	1	9
Other providers	2	2	1	5
EYDCP	2	1	-	3

Base: All involved with an accreditation or kitemark-type scheme

$N = 71$ (30 nurseries, 41 out-of-school clubs)

Table 7c

How useful was each source of support for your out-of-school club?

	How useful			
	Very useful	Quite useful	Not useful	Total
Source				
Manuals	12	11	2	25
Mentors	5	3	1	9
LA inspection unit	2	1	-	3
Workshops	4	7	-	11
Other providers	4	2	2	8
EYDCP	5	2	-	7

Base: All involved with an accreditation or kitemark-type scheme
$N = 71$ (30 nurseries, 41 out-of-school clubs)

69

5.10   Did you experience any problems during the process? What solutions did you identify to resolve any difficulties involved in implementing and using the scheme?

Relatively few providers reported serious problems going through the accreditation process. One in ten nurseries and around one in four out-of-school clubs reported major difficulties. Lack of time was a significant issue for both types of provider. Out-of-school clubs reported having particular problems created by high staff turnover.

Providers who experienced difficulties generally went to their accrediting body to seek advice on what to do.

5.11   What do they think the advantages and disadvantages of belonging to the scheme might be?

Around half of the nurseries and out-of-school clubs who had completed a scheme, felt that accreditation had advantages to it over and above the improvements it had brought in the quality of provision. Nurseries felt it had provided them with additional information, improved communication between staff, and led to more training being made available. Out-of-school clubs identified intrinsic benefits from having a quality assurance 'kitemark', particularly in terms of how it encouraged parents to voice their appreciation of the service and recognise the contribution made by staff. However, 77% of nurseries and 83% of out-of-school clubs did not think being accredited had led to any significant changes in demand for places from local parents (see Table 8 for details).

Fourteen out of the 71 accredited providers (20%) thought there were some disadvantages to being involved in their scheme. The three most commonly cited were additional pressures on time, an increase in paperwork, and a lack of support during the process of collecting evidence.

Table 8

Has membership of the scheme had any effect on the demand for places from Parents?

Effect on demand	Type of provision	
	Day nursery	Out-of-school club
	(%)	(%)
Increased a lot	10	2
Increased a little	10	7
No change	77	83
Don't know	3	7

Base: All involved with an accreditation or kitemark-type scheme

$N = 71$ (30 nurseries, 41 out-of-school clubs)

SECTION 6

TELEPHONE INTERVIEWS WITH CHILDMINDING NETWORKS

6.1 Introduction

A member of the research team conducted a series of telephone interviews with co-ordinators and managers of childminding networks[2]. Interviewees were working in networks not yet accredited.

6.2 Conduct of the research

The research team contacted the National Childminding Association (NCMA) and asked if they could supply a list of childminding networks. The NCMA very kindly agreed to collaborate, and provided a list of over sixty networks in England, none of which were accredited. Having developed a telephone questionnaire, a member of the research team contacted local co-ordinators to conduct the interviews or to arrange a suitable time for the interview to take place.

The team conducted interviews with 48 co-ordinators or managers representing 51 networks. The remaining networks listed were not included in the sample for a number of reasons:

- the co-ordinator or manager was not available for interview because of long-term sickness;
- the post of co-ordinator was not filled at the time of research;
- the co-ordinator or manager was very new to post and felt unable to take part in the research;
- on telephone contact it was reported that there was no longer an active network locally.

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[2]In the strictest definition, the term 'network' can only be used when full accreditation has already been achieved. However, in the absence of another appropriate term, 'network' being used here to refer both to those already fully accredited and those working towards it.

Network co-ordinators were asked about their qualifications and experience. They cited wide range of qualifications, largely, although not exclusively, relating to the field of childcare and education. Commonly reported qualifications included NVQ, NNEB, City and Guilds, B.Tec and HNCs. Less common were qualifications in teaching and social work and other degrees. Of the 48 co-ordinators interviewed, 25 had previously worked as a registered childminder. Others had experience of working in public and private childcare settings. Some co-ordinators had also worked for local authorities or in the private sector.

Networks had been in existence from between one month and six years. The largest number of childminders in a single network was 220, with an average fourteen. Networks, which included out-of-school and community provision, served children aged from six weeks to 14 years. The cost of a place varied from between £1.50 to £3.75 per hour, with an average of £2.40. In community networks working with social services to provide places for families and children with special needs, the rate was higher, ranging from £2.50 to £3.75 per hour.

Interviews, lasting between ten and thirty minutes, took place throughout February and March 2000. All but one of the interviewees were women.

Interview data were coded and summarised using the Statistical Package for the Social Sciences (SPSS). Responses to open-ended questions have provided a series of quotes that are presented here to illustrate commonly expressed views.

Interviewees were asked questions about their participation in quality assurance schemes. A copy of the interview schedule appears in Appendix C of the report. Questions covered three broad areas:
- use of quality assurance, 'kitemarks', and other self-assessment schemes;
- implementing the quality assurance scheme;
- impact of the scheme.

Within the three broad areas described, specific questions asked about:
- use of self-assessment materials;

- the involvement of staff and parents;

- help and support available;

- difficulties and solutions;

- improvements and changes in provision;

- advantages and disadvantages of the scheme;

- effects on demand for places;

- provision for children with special needs.

Analysis of survey data

6.3   Use of quality assurance and kitemark-type and other self-assessment schemes

Eleven of the 51 networks covered in interviews (22.9%) were not yet using a scheme. Seven of the co-ordinators in these 11 networks reported that they were 'very likely' to get involved with a recognised accreditation scheme in the next twelve months.

Eight of the eleven networks cited that the network had only recently been formed as the reason for not being part of a scheme. Only one co-ordinator surveyed had not heard of accreditation schemes. One co-ordinator not yet involved in a scheme reported using self-assessment materials written by early years staff in the local authority. The materials were rated as very useful.

6.4   Implementing the Quality Assurance Scheme

Analyses reported below are based on 40 networks working towards accreditation. None of the networks interviewed had completed the quality assurance process. The average period of time spent working towards quality assurance or accreditation to date was just over seven months, with a range of 1-16 months. The majority of co-ordinators surveyed (56%), reported working largely in isolation, taking a full lead on developing the network and taking it through the quality assurance process. Of those

working with others, 64%, reported that colleagues were senior staff, usually drawn from the Early Years Team. Few parents had been involved in the quality assurance process to date. Only one co-ordinator reported having involved parents, in this case through a mail-out.

Respondents were asked to identify the sources of support and help they were able to access as they went through the quality assurance process and to rate it in terms of usefulness.

Table 9a

Sources of support available to childminding networks
going through accreditation

	Proportion of networks
Source of support	(%)
Manuals/written materials	67
Mentors/development workers	23
Workshops	60
Local authority inspection unit	35
Other providers in same scheme	58
Local EYDCP	44
Accrediting inspector/assessor	7
Other	4

Base: All networks working towards accreditation. $N = 40$

Table 9b

How useful was each source of support for your network?

	How useful			
Source	Very useful	Quite useful	Not useful	Total
Manuals	15	17	-	32
Workshops	18	11	-	29
Other providers	18	7	3	28
Mentors	5	4	2	11
LA inspection unit	10	3	4	17
EYDCP	12	3	6	21

Base: All networks working towards accreditation. $N = 40$

Five out of 11 co-ordinators using mentors rated the mentors' support as 'very useful', with a further four rating this as 'quite useful'. Only two did not find the support of informal mentors useful at all. Sixty per cent of co-ordinators had attended workshops or seminars relating to their scheme. Of these 29 co-ordinators, 18 found them 'very useful'.

Although almost half of co-ordinators (44%) reported that their EYDCP had been supportive and interested in their work, the majority stated that it was the job of the co-ordinator to keep the members of the EYDCP informed and up-to-date. In this sense, the co-ordinators did not report that they benefited from the expertise of the EYDCP, but rather they were dependent on them for financial resources. More than half (58%) of co-ordinators reported that they had had contact with co-ordinators working in other networks. This contact took place at seminars and workshops, by telephone and through meetings arranged between co-ordinators themselves. Most of the co-ordinators rated these links as very or quite useful (89%). The remaining 11% of co-ordinators who did not rate these links as helpful, usually stated that this was

because they were more experienced or were further along the accreditation process, and so they were providing support to others but not receiving any benefits back.

Forty-six per cent of co-ordinators said that they had experienced difficulties with quality assurance. Difficulties included:

- recruitment of childminders;
- unfamiliarity with and the newness of the scheme;
- too much paperwork associated with accreditation;
- the co-ordinator's own inexperience and need for additional training;
- poor publicity about networks;
- pressures of time;
- changes in staff.

The most commonly mentioned difficulties were to do with the frequency of monitoring visits and the readability of manuals. Co-ordinators resolved difficulties with manuals by simply re-wording some sections. As far as the monitoring visits were concerned, they either spent less time on each visit, or reduced the number of visits made to childminders.

In relation to difficulties and overcoming them co-ordinators said:

'Networks are not well publicised outside of NCMA ... [I] have done presentations and publicised [the network] locally to raise the profile and awareness'

'The childminders were not interested at all at first ... we spent the first months working really hard to get them on board and understand the benefits of the network for them'

'There is so much paperwork ... and all the policy development to do ... but there is no way to cut corners, it has to be done properly'

'Childminders need a lot of support to do the scheme ... it is brand new and needs some re-working'

In common with co-ordinators interviewed in accredited sites, some of those surveyed by telephone reported having concerns about standardisation of assessment for childminders within and across networks.

6.5 Impact of the Scheme

Interviewees were asked about the impact of accreditation on the quality of service they provide. Most co-ordinators interviewed felt that it was too soon to assess impact adequately. Of the eight who did comment, six said the quality of their service had improved 'very much'. Changes made to the service were largely in terms of improved policies and practices, which included those relating to equal opportunities, behaviour management, curriculum development and record-keeping.

All interviewees, irrespective of how long they had been involved in the scheme, were asked to identify any advantages of the scheme, although again some interviewees (15) felt that they had not been involved in the scheme long enough to respond to the question. Of the 25 who did respond, only one could not identify any advantages.

The main advantages cited were:
- access to greater support;
- more training for childminders;
- improved career paths for childminders;
- increased professionalism;
- greater choice for parents;
- improvements in self-confidence among childminders;
- an enhanced local profile for childminding;
- elevation of standards above the minimum statutory requirements.

Some co-ordinators said that participation helped to keep childminders up-to-date with new developments. Among some of the comments made by co-ordinators were:

'It's a nationally recognised scheme and parents like that'

'It means a better profile for childminding and better quality for parents'

'Childminders can move on ... have career development and better self-esteem'

'People want to be put on the map as [providing] quality childcare'

'[The scheme] assures quality and raises the profile and status of childminding'

Asked to describe any disadvantages of the scheme, a third of the co-ordinators said it was too early to tell. Of the 26 or so who did answer the question, over half said they could not think of any disadvantages. Among the ten or so co-ordinators that did cite disadvantages, the most commonly reported included:

- the potential for the development of a two-tier system of childminding;
- the possibility of some childminders de-registering and offering informal care;
- pressure on childminders to have more inspections;
- lack of flexibility in the scheme;
- too much paperwork which may take childminders away from their primary job of providing care and education to children.

Co-ordinators commented that:

'There needs to be more local flexibility built into the scheme'

'... [the scheme] takes [childminders] away from constructive play with children ... distracting them from their primary goal'

Only three co-ordinators, all working in community or business networks, determined any change in the demand for places as a result of the network being accredited. They said that demand had increased 'a lot'.

Almost 30% of co-ordinators felt their scheme had helped them think about provision for children with special needs generally. Although most were not able to be specific

about how their thinking had changed, several said they had developed new policies on special needs or had run training courses.

Co-ordinators were generally very positive about accreditation. Most felt they would like to continue to use their scheme. Only one co-ordinator said she would not recommend the scheme to other networks. She felt that staff in each locality had to make their own minds up about participation in quality assurance schemes.

6.6   Discussion

Several consistent themes emerged from the telephone survey phase of the research and the case study interviews conducted in quality assured and accredited networks.

Co-ordinators surveyed by telephone agreed that involvement in accreditation was important in ensuring that there was external and nationally acknowledged recognition for quality provision among childminders and that the scheme helped to raise the profile and improve the image of childminding.

Both phases of work suggested that the scheme improved access to more training and provided greater support for childminders, widely recognised as experiencing high levels of isolation. Several co-ordinators interviewed by telephone felt that quality assurance was the future for childminding and that eventually all childminders would have to go through the process.

In neither sample did co-ordinators identify any significant change in demand for places to date. Respondents agreed that this was largely due to a lack of knowledge among parents about accreditation.

Few co-ordinators interviewed by telephone reported high levels of involvement from other colleagues working in early years, or parents. In a minority of cases, recruitment of childminders into the scheme itself was problematic. Again, many respondents felt that being experienced ex-registered childminders themselves was very important in recruiting and sustaining interest among childminders.

Telephone interviewees agreed with co-ordinators and managers interviewed in-depth that manuals caused some problems. In common with colleagues working in quality assured and accredited networks, respondents reported that they had modified some of the forms and the process of initial assessment and monitoring.

Meetings and workshops were thought useful. Co-ordinators also reported a lot of sharing of ideas and information between network co-ordinators working in different localities. Those further down the road towards full accreditation however, did comment that they were offering support to less experienced co-ordinators, without necessarily gaining support in return. Co-ordinators widely agreed that their key task with the local EYDCP was to keep members up-to-date and explain procedures to them.

Co-ordinators did identify some difficulties with accreditation. However, most attributed them to the 'newness' of their scheme, which led to some uncertainties about consistency and standards within and between networks.

Finally, in common with those interviewed in accredited networks, the greatest benefits of the scheme were considered to be the improved status it brought, and the way it was helping to raise the profile of childminding. It was felt to be improving both the professionalism and self-esteem of childminders. The vast majority of co-ordinators were highly committed to the scheme and saw accredited childminding as the future of the profession.

SECTION 7
FACE-TO-FACE INTERVIEWS WITH ACCREDITING BODIES

7.1 Introduction

Accreditation and quality improvement schemes are a relatively recent innovation in the childcare field. Several schemes have been developed, each designed for use by one or more types of provider. The purpose of this phase of the research was to establish how well accrediting bodies felt their schemes were developing in these early stages.

7.2 Conduct of the research

The research team interviewed representatives from six accrediting organisations:

- The Centre for British Teachers (C*f*BT)
- The National Day Nurseries Association (NDNA)
- The Effective Early Learning (EEL) project
- The Pre-School Learning Alliance (PLA)
- Kids Clubs Network (KCN)
- The National Childminding Association (NCMA)

Interviews looked at four key areas:

- the amount of support given to providers;
- cost to providers of implementing the scheme;
- problems encountered by providers;
- evidence concerning the impact of accreditation on quality

Interviews took place in February and March 2000. A copy of the interview schedule used with representatives of accrediting bodies appears in Appendix B.

Interviews with representatives of accrediting bodies

7.3   The amount of support given to providers

Table 10 describes the degree of support accrediting organisations typically give to providers:

Table 10

Degree of support typically offered to providers by accrediting bodies

Accrediting body	Support offered
NDNA	Training session (2hrs.), follow-up visit, telephone support, up to 3 local group meetings
C*f*BT	2-3 hour on-site workshop, access to helpline and consultant, proactive telephone calls, offers of additional visits
EEL	3-day training session, 6 evening meetings per year, external advisor, open help line
PLA	Pack of materials, training day for groups of Providers, encourage local self-help groups
KCN	Network of mentors, publications, newsletter
NCMA	Training up to 1 day on how to use the accreditation materials, written materials, peer support from other local network co-ordinators, telephone support

7.4 Cost to providers of implementing the scheme

The cost of going through an accreditation scheme ranges from £300 to £600 per provider. Charges generally reflect the cost of training, mentoring and independent assessment. Accrediting bodies tend not to make significant profits from their schemes. Over the last two years, EYDCPs have become an important source of funding for providers wanting to become accredited.

7.5 Problems encountered by providers

Asked what kind of problems providers have with their schemes, accrediting bodies usually mentioned *finding time* and *identifying funding*. Other common problems included:

- recognising accreditation as a collaborative, staff development issue;
- communicating the purpose of accreditation to staff;
- developing clear written policies and procedures;
- changing established practices;
- introducing key worker systems;
- systematic record keeping;
- curriculum planning.

7.6 Evidence concerning the impact of accreditation on quality

When accrediting bodies ask providers what they think of their schemes, results are generally positive. However, as noted above, accreditation schemes are a recent arrival in UK early years settings. So far very little independent research has been done to gauge the impact accreditation may have on quality of service. In time, systematic evaluations may encourage more EYDCPs to fund accreditation as one effective route to raising standards.

SECTION 8
CONCLUSIONS AND RECOMMENDATIONS

This final section summarises key findings and outlines recommendations under the ten aims of the project described in Section 1 of the report.

Aim 1   *To assess the implementation and use of quality improvement and quality assurance systems by day nurseries, out-of-school clubs and childminding networks.*

Relatively few nurseries and out-of-school clubs were involved in accreditation schemes. Childminding networks were somewhat different, in that most are established with the specific intention of becoming accredited.

The decision to get involved in accreditation schemes was usually taken by senior staff or by someone outside the provider. Few consulted staff groups more widely. Staff were often asked to get involved in collecting evidence for accreditation portfolios, but in many settings, senior staff took responsibility for the process. Evidence suggests that accreditation is likely to have a more positive impact on quality of service provision in settings where staff are more actively involved in the process. Promoting accreditation schemes as a means of improving quality should include emphasis on the importance of actively involving all members of staff in the process.

Materials produced by accrediting bodies played a crucial role. In particular, manuals explaining procedures need to be user friendly, meaning jargon free and clearly laid out. Providers were generally positive concerning the standard of materials they had used. Many thought that working through accreditation materials with colleagues had been an effective team building exercise.

EYDCPs, workshops and meetings with other providers going through the same schemes were all cited as valuable sources of support. Providers in schemes providing mentors generally found them a great help. Similarly, help from local childcare professionals was well received. In general, accreditation schemes were more likely to

be completed successfully where providers had access to personal support, either in the form of mentors or other local providers with experience of accreditation.

No systematic, independent research has been conducted on the extent to which accreditation schemes can improve quality. Policy makers, EYDCPs and providers need to know more about creating the optimum conditions under which quality improvement and quality assurance schemes can raise standards. Research in the USA suggests that accreditation schemes on their own may not consistently lead to higher standards. However, promoted in conjunction with other initiatives to improve working conditions, and reduce staff turnover, accreditation schemes may have a key role to play in improving quality.

Aim 2   *Identify common problems experienced by day nurseries, out-of-school clubs and childminding networks in implementing and using a quality improvement/quality assurance framework.*

Time and cost were identified as potentially significant obstacles to providers becoming accredited. Providers often underestimated how long it would take to compile the necessary documentation. Some senior staff reported having to put in unpaid overtime to get the extra work done. Staff commented that with the benefit of hindsight, they would have spent more time going through the accreditation materials thoroughly before starting the evidence collecting process. Some concerns were expressed over the impact that spending so much time on accreditation might have on staff relationships with the children. Those responsible for supporting providers through the accreditation process might encourage them to think about the timing of the exercise. Providers should not be encouraged to take on accreditation activities during particularly busy periods. Sharing workloads throughout the staff group should also be encouraged. Evidence suggests that accreditation schemes are more likely to improve standards when all members of staff are actively involved in self-evaluation and collecting evidence for portfolios.

According to accrediting bodies, cost was clearly a concern to many providers. Voluntary sector providers had particular difficulties. Accrediting organisations felt EYDCPs had a significant role to play in supporting providers with financial help.

Aim 3   *Highlight solutions identified by day nurseries, out-of-school clubs and childminding networks to resolve common difficulties involved in implementing and using quality improvement and quality assurance frameworks.*

The quality of support providers receive while going through quality improvement or quality assurance procedures was key. Mentors and local development workers, while expensive, played a vital role. EYDCPs might also consider the value of running local workshops and self-help groups as an effective source of support for providers.

Senior staff who took on most of the accreditation work on their own, felt they would have been better off involving the whole staff team. With the benefit of hindsight, more effective action planning would have included holding regular staff meetings to explain the accreditation process to staff and enlist their help. Several said they should have taken more time to think about how to organise the process. Several felt they should have been more insistent when asking for help and clarification from accrediting bodies.

Some EYDCPs have managed to keep costs down by encouraging groups of providers to work towards accreditation together. This approach has helped EYDCPs negotiate discounts with accrediting bodies, and save money by training local development workers as mentors.

Aim 4   *Gauge the opinions of (i) childcare staff and (ii) parents towards the implementation/use of quality improvement and quality assurance systems in day nurseries, out-of-school clubs and childminding networks.*

Where they were aware that such schemes existed, parents and staff generally viewed accreditation in a very positive light. Managers and staff in nurseries and out-of-school clubs felt that being accredited had improved the quality of service in relation to policies, procedures, and relationships with children. Staff were more likely to seek out additional training. Going through the accreditation process had helped create more effective team working in group settings. Childminders saw advantages in terms of raising and improving the profile of childminding. Parents also felt accreditation schemes were a good idea for childcare providers. However, neither staff nor parents

were systematically involved in implementing accreditation schemes. Evidence suggests staff involvement is crucial if quality assurance procedures are to raise standards. EYDCPs should monitor closely the extent to which all members of staff are encouraged to participate actively in quality improvement and quality assurance schemes. Encouraging greater parental involvement is desirable, though may not always be practicable.

Aim 5   *Establish the extent to which providers are using different quality improvement and quality assurance systems*

Accreditation schemes were not widely used in nursery or out-of-school provision. Only 12% of day nurseries and 16% of out-of-school clubs in our telephone survey were involved with an accreditation scheme. The situation with childminding networks was somewhat different, in that most are established with the specific intention of becoming accredited. Many providers were simply unaware such schemes exist. Accrediting organisations, EYDCPs and the DfEE might encourage greater participation by rigorously promoting quality improvement and quality assurance schemes to both providers and parents.

Aim 6   *Identify the reasons why day nurseries, out-of-school clubs and childminding networks have not implemented quality improvement and quality assurance systems*

The chief reason why providers do not implement an accreditation scheme was simply because they were not aware of their existence. This applied to around one in every two nurseries, and one in four out-of-school clubs. The amount of time people thought accreditation would involve also served to discourage people. Accrediting bodies thought cost was a factor in providers not going for accreditation.

Evidence from the national telephone survey suggested that in a few settings, managers simply did not see the relevance of accreditation. They may have felt that they had already established a good quality service.

Aim 7   *Identify good practice for EYDCPs in promoting quality improvement and quality assurance systems to providers and supporting them to improve standards*

The majority of EYDCPs had not, on the evidence of plans submitted for the period 1999/2000, developed systematic quality improvement strategies. It may be the case that current Plans, for the period 2000/2001, describe quality improvement strategies in more detail.

Key features of good practice could include some or all of the following:
- A dedicated quality assurance sub-group of the EYDCP;
- Development of quality standards
- Ensuring that quality improvement is the focus of all EYDCP activities
- Setting up childminding networks
- Extending quality improvement and quality assurance schemes to providers not yet involved in the EYDCP
- Provision of local mentors for providers going for accreditation
- Establishing self-help groups to support providers going through accreditation
- Use of external evaluation to assess aspects of Partnership progress in raising standards
- Strategies for quality improvement described in terms of targets and dates.

Aim 8   *Establish the range and content of quality improvement systems used by local authority inspection units.*

Two out of three local authority inspection units required providers to undertake some form of self-assessment as part of their annual inspection procedures. The same number also asked providers to submit action plans as part of the same process. This finding is consistent with the results of the telephone survey suggesting that around three-quarters of providers not implementing an accreditation scheme were involved in some form of self-assessment exercise aimed at improving standards. Providers felt that self-assessment materials had helped them to improve quality. Accreditation schemes may

not yet exert a major influence on settings in England, but on this evidence, most providers will not need much convincing of their potential value.

A review of EYDCP Plans for the period 1999/2000 revealed that two local authorities had developed a comprehensive kitemark-type scheme. A third authority had developed a self-evaluation package, but did not award a kitemark-type to those successfully completing the process.

Aim 9   *Produce written material for EYDCPs describing good practice in the promotion and implementation of quality improvement and quality assurance systems*

A report of the research has been produced for EYDCPs in the 'Reporting on…' series. A draft was discussed in four focus groups with representatives of EYDCPs and their comments incorporated.

Aim 10   *Produce interim, draft and final reports for the DfEE*

This is the final report of this project.

REFERENCES

Whitebook, M., Sakai, L., & Howes, C. (1997). NAEYC Accreditation as a Strategy for Improving Child Care Quality. National Center for the Early Childhood Workforce: Washington, D.C.

APPENDIX A
**Proforma for analysis of Annex 5s in Early Years Development and
Childcare Partnership Plans**

Early Years Development and Childcare Partnership Plans
Analysis of Annex 5s
Proforma

BACKGROUND

1. Name of local authority: ....

2. Type of authority *(Circle as appropriate)*

Greater London   Metropolitan   New Unitary   Two Tier

REGISTRATION AND INSPECTION

3. Which department within the local authority has responsibility for registering and inspecting day care facilities under Part X of the Children Act 1989? *(Circle as appropriate)*

Social Services   Education   Chief Executive's Office   Other

4. Who carries out inspections? *(Circle as appropriate)*

Under 8s advisers   Social Services Inspectors   Other

5. Are providers required to undertake any self-assessment as part of annual inspection procedures?

      Information on self assessment is given   Yes/No

5a   If yes, provide details where available:

Full day care	Yes/No	....
Sessional day care	Yes/No	....
Childminders	Yes/No	....
Out-of-school clubs	Yes/No	....
All providers	Yes/No	....

6. Are providers required to produce action plans as part of annual inspection procedures

Information on action plans is given Yes/No

6a.   If yes, provide details where available:

Full day care   Yes/No   ....

Sessional day care   Yes/No   ....

Childminders   Yes/No   ....

Out of school clubs   Yes/No   ....

All providers   Yes/No   ....

7. What plans are there to scale up registration and inspection activities in response to planned growth in provision?

Information on scaling up registration and inspection is given   Yes/No

7a.   If yes, provide details

Reorganise registration and inspection unit   Yes/No
to make use of existing staff

Create new appointments   Yes/No
(If yes, specify posts required and whether a source of funding is identified)

....

....

Other plans for scaling up
....

8. Is there a local authority accreditation scheme that gives providers a 'badge' ('chartermark'/'kitemark-type')?

Yes/No   [If No, go to question 9]

8a. If yes, provide *name* of scheme ....

8b. Give details of any *key features* of the scheme, if available.

....

8c. Which providers can take part in the LA accreditation scheme?

Full day care	Yes/No
Sessional day care	Yes/No
Childminders	Yes/No
Out-of-school clubs	Yes/No
All providers	Yes/No

8d. Have any providers already successfully completed the Accreditation Scheme?

Yes/No.   If yes, give numbers...........................

8e. If yes, identify HERE any types of provider that could be picked up for case study

....

....

QUALITY IMPROVEMENT

9. Do Partnerships outline a strategy for Quality Improvement?

Yes/No

9a If Yes, what strategies are in place/ planned <u>within the Partnership</u>?

	In place	Planned
Set up QA group within Partnership	Yes/No	Yes/No
Develop and implement own cross sector Quality Standards	Yes/No	Yes/No
Make Quality Improvement the focus of all Partnership activities	Yes/No	Yes/No
Apply for Early Years Excellence Centre	Yes/No	Yes/No
Apply to become Early Excellence Zone	Yes/No	Yes/No
Set up Childminding networks		Yes/No	Yes/No
Attach toy libraries to Childminding networks		Yes/No	Yes/No
Support providers with no qualified teachers	Yes/No	Yes/No
Extend support to providers who have not yet joined Partnership	Yes/No	Yes/No
Use external evaluators to assess aspects of Partnership's progress	Yes/No	Yes/No

Other ....

9b Are strategies for Quality Improvement described in terms of targets over the next three years?

Yes/No

10. Does the Partnership encourage/promote any quality standards over and above the Department's requirements?

Yes/No

10a. If Yes, how does the partnership intend to support providers in meeting additional requirements?

....

....

11. How are providers encouraged to <u>introduce</u> and <u>maintain</u> quality assurance systems?

Given advice on QA schemes appropriate to type of provider   Yes/No
Expected to join LA in-house scheme   Yes/No
Expected to join particular schemes selected by LA   Yes/No
Given written good practice guidance (e.g. through newsletters)   Yes/No

Providers are mentored towards achieving QA awards   Yes/No
Providers are encouraged to see accreditation schemes as   Yes/No
a tool within a continuous framework (not a one off process)   Yes/No
Providers are given regular written updates on good practice
guidance (e.g. through newsletters)   Yes/No

Other ....

**12.   Other than any LA scheme mentioned in Q9,
           are any of the following accreditation schemes are identified by   name?**

Yes/ No [If No go to Q 14]

12a.   Which schemes are identified as being <u>in use</u> or <u>planned for recommendation?</u> (Tick as appropriate)

Scheme	In use	Will be recommended
Investors in People		
The Pre-School Learning Alliance 'Aiming for Quality'		
The Centre for British Teachers (CfBT) scheme		
The Early Education and Learning (EEL) project		
The National Day Nurseries Association (NDNA) scheme		
The Kids' Clubs Network 'Aiming High' scheme		
The National Childminding Association (NCMA) 'Children Come First' scheme		
The Charities Evaluation Services' Practical Quality Assurance System for Small Voluntary Organisations (PQASSO) scheme.		

Other ....

13. Have providers already successfully completed any of these accreditation schemes?
                                    If yes, provide details where available:

       Full day care   Yes/No   ....
       Sessional day care   Yes/No   ....
       Childminders   Yes/No   ....

       Out-of-school clubs   Yes/No   ....

14. How are providers and others encouraged to network to share good practice, resources and training?

	In place	Planned
Send representative to EY fora /working groups/ clusters	Yes/No	Yes/No
Childminders encouraged to join networks	Yes/No	Yes/No
Organise visits of partners between institutions	Yes/No	Yes/No
Organise visits of partners to Early Excellence Centres	Yes/No	Yes/No
Providers are given sources /contacts for good practice (e.g. through newsletters)	Yes/No	Yes/No
Develop partnerships within the Partnership (e.g. pre-schs and primary schools/child care and SRB initiatives)	Yes/No	Yes/No

If yes, **specify** the partnerships being made ....

....

Other identified ways of networking

15. How does the Partnership <u>gather</u> examples of good practice across and beyond its area?

	In place	Planned
Asks other services and units in the LA	Yes/No	Yes/No
Receives feedback from own advisory staff /development & training officers	Yes/No	Yes/No
Collects material / research from associations (NCB, NEYN, NCA, PLA)	Yes/No	Yes/No
Links with and collects ideas from other LAs	Yes/No	Yes/No

Other ....

16. How does the Partnership <u>promote and embed</u> examples of good practice across and beyond its area?

	In place	Planned
Disseminates LA Quality Standards to and trains all providers	Yes/No	Yes/No
Distributes LA curriculum guidelines/play manuals/other guidance	Yes/No	Yes/No
Through training	Yes/No	Yes/No
Regularly updates policy / guidelines	Yes/No	Yes/No
Disseminates materials/research from in and beyond LA through meetings, conferences, newsletters	Yes/No	Yes/No
Gives written guidance on good practice (e.g. through newsletters)	Yes/No	Yes/No

Other ....

17. What resources are <u>provided</u> to support providers and carers?

	In place	Planned
QA materials appropriate to type of provider	Yes/No	Yes/No
Service level agreements with Library Services	Yes/No	Yes/No
Service level agreements with associations (e.g. NCMA, PLA)	Yes/No	Yes/No
Linked EY adviser/advisory teacher	Yes/No	Yes/No
20 day secondments of linked teachers	Yes/No	Yes/No
Visits / needs analysis from qualified teacher	Yes/No	Yes/No
Support with grant applications for disadvantaged areas	Yes/No	Yes/No
Programme of joint training	Yes/No	Yes/No
Written material/booklet for parents explaining general quality issues when choosing a provider	Yes/No	Yes/No
Written material for parents explaining the various accreditation schemes providers may use	Yes/No	Yes/No

Other ....

18. Which institutions/services are recommended to providers and carers, formal and informal as sources of support and consultancy?

	In place	Planned
Early Excellence Centres in and beyond the LA	Yes/No	Yes/No
Early Years Centres in the LA exemplifying integrated provision	Yes/No	Yes/No
Education/Professional Development Centres in the LA	Yes/No	Yes/No
Education personnel in the LA	Yes/No	Yes/No
Social Services personnel in the LA	Yes/No	Yes/No

Other ....

19. From these sources, what resources are <u>available</u> to support providers and carers?

	In place	Planned
QA Materials	Yes/No	Yes/No
Curriculum materials/resource packs	Yes/No	Yes/No
Specific materials for LA Literacy and Numeracy Initiatives	Yes/No	Yes/No
Informal advice from Education advisory staff	Yes/No	Yes/No
Toy libraries	Yes/No	Yes/No
Drop-in day care	Yes/No	Yes/No
Parental projects in schools		
(e.g. Family Literacy; Books for Babies)	Yes/No	Yes/No
Written material for parents explaining general	Yes/No	Yes/No
quality issues when choosing a provider	Yes/No	Yes/No
Written material for parents explaining the various	Yes/No	Yes/No
accreditation schemes providers may use	Yes/No	Yes/No
Telephone advice service for parents on QA issues	Yes/No	Yes/No
Drop-in advisory service for parents on QA issues?	Yes/No	Yes/No

Other ....

20. How are the full range of providers, childcare organizations and individuals involved in developing quality?

	In place	Planned
Purposeful inclusion of reps from all types of provider		
in decision making groups	Yes/No	Yes/No
Joint review of curriculum documents	Yes/No	Yes/No
Joint development of standards documents / Quality Charters	Yes/No	Yes/No
Joint training initiatives	Yes/No	Yes/No

Other ....

21. How is the Partnership's quality improvement strategy, and resources attached to it, publicised?

	In place	Planned
Vague reference to 'through Children's Information Service'	Yes/No	Yes/No
Leaflets and posters in clinics/health/community centres/schools	Yes/No	Yes/No
News releases	Yes/No	Yes/No
Information fairs / road shows	Yes/No	Yes/No
Through outreach workers (e.g. with Refugees/Travellers)	Yes/No	Yes/No
Award of LA kitemark-type	Yes/No	Yes/No
Mail shot of written information specifically produced for parents	Yes/No	Yes/No

Other ....

_____
_____
_____
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APPENDIX B
TOPIC GUIDES FOR FACE TO FACE INTERVIEWS

CHILDCARE QUALITY IMPROVEMENT AND QUALITY ASSURANCE PRACTICES AND RELEVANT STAFF AND PARENTAL ATTITUDES

TOPIC GUIDE
Managers/co-ordinators in nurseries, childminding networks and out-of-school clubs

Pre-amble: Thank you for agreeing to be interviewed. We are conducting interviews as part of a research project designed to improve our understanding of how nurseries/out-of-school clubs/childminding networks use of quality assurance or 'kitemark-type' schemes. The research is being done for the Department for Education and Employment, who have responsibility for quality in childcare settings. We are taping each interview so we have an accurate record of what you say. The tapes will be wiped clean at the end of the project. When the findings come to be reported, we will not mention any individuals by name.
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SECTION 1: BACKGROUND INFORMATION

1a.   Name of provider

1b.   Address of provider

1c.   Name of Local Authority

1d.   Category of provision: childminding network/out-of-school club/day nursery [*delete*
as   *appropriate*]

1e.   Sector: statutory/voluntary/private [*delete as appropriate*]

1f.   Number of children provided for

1g.   Age range

1h.   Professional Qualification & Job title

1i.   Sex: male/female [*delete as appropriate*]

1j.   Ethnic Group

1k.   Date of interview

1l.   Current number of staff

1m.   Number of staff still remaining who went through the accreditation process

SECTION 2: SETTING UP THE QUALITY ASSURANCE/KITMARK SCHEME

2.1 Why did you decide to get involved with an accreditation scheme?

2.1.1 Which scheme are you involved in:

PLA
CfBT
EEL
NDNA
NCMA (Childminding networks)
KCN (Out-of-school clubs)
Local authority scheme
Other (*please specify*)

2.2 Why did you choose this scheme over any of the others?

2.3 Was it an easy choice?

2.4 When did you first hear of this scheme?

2.5 How did you find out about the scheme and the requirements for accreditation?

2.6 How easy was it getting information about the different schemes on offer?

2.7   What kind of information and advice did you get? How helpful was it?

        Prompt: What other information or advice would you have liked to have had at this point?

2.8   What kind of problems did you come up against <u>at this point</u>?

2.9   What solutions did you come up with?

2.10   Did you get any advice or help from your EYDCP (Early Years Childcare and Development Partnership)?

        IF NO: GO TO QUESTION 2.13

        IF YES:

2.11   How helpful was the EYDCP?

2.12   What other kind of help would you have liked the EYDCP to offer?

2.13   Had you been using any quality improvement or self-assessment materials prior to starting the quality assurance scheme?

IF NO: GO TO QUESTION 2.15

       IF YES:

2.14   Did your experience of other quality improvement or self-assessment schemes help with implementing your quality assurance/kitemark-type scheme? If yes, how did it help?

2.15   Thinking about your local authority annual inspection for a minute, do you think the work you have had to do for your quality assurance scheme has complemented the local authority's approach, or do the two seem to conflict in any way?

2.16   What else proved helpful during your early involvement with the scheme?

2.17   Who was involved in getting the scheme started here? *[prompt: local authority officers, management committee, staff, parents, etc.]*

2.18   How were they involved? *[through meetings, by letter, through questionnaires, informally etc.]*

2.19   What would you do differently, if anything, if you were to start the whole process of choosing an accreditation scheme all over again?

2.20   Would you want the accreditation organisation to anything differently?

SECTION 3: IMPLEMENTING THE SCHEME

3.1　What were the major difficulties you faced as you went through the process of getting accredited?

3.2　How did you go about resolving those difficulties?

3.3　What kind of help were you able to get ? *[mentors/development workers, the EYDCP, through other institutions involved in the same scheme etc.]*

　　　Prompt: What else proved helpful?

Could you comment, where appropriate, on the key aspects of the scheme:

THE MANUAL

3.4　What did you think of the design and layout?

3.5　Did it provide you with all the information you needed?

3.6   How did you use the manual?

3.7   How easy was it to use?

3.8   Any specific problems with using the manual?

IF YES

3.9   How did you get around those problems?

3.10   Any other comments about the manual?

WORKSHOPS AND TRAINING

3.11   Were the workshops/training pitched at the right level?

3.12   What did you think about the quality of the trainers?

3.13   How useful were the workshops/training?

3.14   Any other comments about the workshops or training?

THE MENTORING

3.15   How easy was it to get help from mentors when you needed it?

3.16   What did you think about the quality of mentoring?

3.17   Overall, how useful were the mentors?

3.18   Any specific problems around the mentoring?

3.19   How did you get around those problems?

3.20   Any other comments about the mentoring?

THE PORTFOLIO/SUBMISSION

3.21   How useful an exercise was completing the portfolio?

3.22   How difficult was it to work on the portfolio? (get the evidence you required)

3.23   What did you think about the amount of work involved?

3.24   Any specific problems with the portfolio/submission?

3.25   How did you get around those problems?

3.26   Any other comments about the portfolio/submission?

THE ASSESSOR'S VISIT

3. 27   How did the assessor's visit go? (what assessor actually did, relationship with
        assessor any problems, etc).

THE REPORT
3.28   How accurate did you think the report was?

3.29   How fair did you think the report was?

3.30   Any specific problems with the report?

3.31   How did you get around those problems?

3.32   Any other comments about the report?

SECTION 4: IMPACT OF THE SCHEME

4.1   What do you think have been the **<u>positive</u>** impacts of using the scheme for the nursery/childminding network/out-of-school club as a whole?

        Prompt: What do you think have been the positive effects of using the scheme for **yourself?** *[better leadership skills, better relationships with staff, better written policies, better administrative skills, better public relations, introduced self-assessment]*

        Prompt: What do you think have been the **positive** effects of using the scheme for **staff**? *[more opportunities for professional development/training, better links with parents, made the job more rewarding/interesting, better working conditions?]*

        Prompt: What do you think have been the **positive** effects of using the scheme for **children**? *[activities more exciting, children more independent, better resources]*

        Prompt: What do you think have been the **positive** effects of using the scheme for **parents**?

4.2   What have been the **negative** aspects of using the scheme for the nursery/childminding network/out-of-school club as a whole?

        Prompt: What do you think have been the **negative** effects of using the scheme for **yourself?**

        Prompt: What do you think have been the **negative** effects of using the scheme for **staff?** *[more work, no more pay]*

        Prompt: What do you think have been the **negative** effects of using the scheme for **children?**

Prompt: What do you think have been the **negative** effects of using the scheme for **parents?**

Prompt : Has the scheme had **positive or negative** effects for **any other people**?

4.3   Has membership of the scheme had any effect on the demand for places from parents?

4.4   What kind of changes, if any, have you made to your service as a result of getting quality assured? [*ask about positive and negative changes*]

4.5   How did the scheme help you to think particularly about your service for children with special needs?

4.6   Would you like to see your nursery/childminding network/out-of-school club continue to use the scheme in the future? Why?

4.7   Would you recommend the scheme to other nurseries/childminding networks/out-of-school clubs? Why/why not?

4.8   Any other comments?

CHILDCARE QUALITY IMPROVEMENT AND QUALITY ASSURANCE

PRACTICES AND RELEVANT STAFF AND PARENTAL ATTITUDES

TOPIC GUIDE
parents

Pre-amble: Thank you for agreeing to be interviewed. We are conducting interviews as part of a research project designed to improve our understanding of how nurseries/out-of-school clubs/childminding networks use of quality assurance or 'kitemark-type' schemes. The research is being done for the Department for Education and Employment, who have responsibility for quality in childcare settings. We are taping each interview so we have an accurate record of what you say. The tapes will be wiped clean at the end of the project. When the findings come to be reported, we will not mention any individuals by name.
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_____

1. Name and address of facility used for childcare

2. Age of the child using this facility

3. Gender of child: Male/Female [*delete as appropriate*]

4. Has your child got any special needs?

5. Gender of interviewee: Male/Female [*delete as appropriate*]

6. What is your highest educational qualification?

7. Ethnic Group *(show OPCS categories).*

8. Date of interview

9. Did you know that your nursery/childminder/out-of-school club has to be inspected every year by the local authority? YES/NO [*delete as appropriate*]

10. Are you aware that nurseries/childminders/out-of-school clubs can, if they want to, take part in quality assurance or 'kitemark-type' schemes that help them to assess how good a service they are providing? YES/NO *[delete as appropriate]*

11. Do you think having 'kitemark-type' quality assurance schemes for nurseries/childminders/out-of-school clubs is a good idea? YES/NO

12. Why do you/don't you think it is a good idea?

13. Would you have liked to know more about the scheme before deciding on which nursery/childminder/out-of-school club to use? YES/NO

14. Why would you/wouldn't you have liked to know more?

15. Are you aware that your child's nursery/childminder/out-of-school club is taking part/has taken part in a 'kitemark-type' scheme? YES/NO *[if NO, end interview]*

16. Do you know the name of the scheme? YES/NO [*if 'yes', ask interviewee to name the scheme*]

17. Did you know about the scheme before your child started attending the nursery/childminder/out-of-school club? YES/NO *[if NO, go to question 19]*

IF YES

18. Did knowing that the nursery/childminder/out-of-school club was/had been involved in the quality assurance 'kitemark' scheme influence your decision to enrol your child here? YES/NO *[if NO, go to question 21]*

IF YES:

19. How did it influence your decision?

20.   How important was it relative to other features of the nursery/childminder/out-of-school club?

    IF NO:

20. Why didn't it influence your decision?

21.   How did you find out about the scheme [by letter, informal discussion with staff, through other parents etc.]

22. Were you asked to help choose the particular scheme in use? YES/NO [*if 'yes' ask the interviewee to describe how their help was sought*]

23. Would you liked to have been asked about which scheme the nursery/childminder/out-of-school club should have chosen? YES/NO

24. Why would you/wouldn't you have liked to have been asked?

25. Have you been asked to complete any questionnaires about the scheme? YES/NO

26. What did you think of the questionnaire, and why?

27. Have you been asked to go to any meetings to do with the scheme? YES/NO

28. What did you think of the meetings, and why?

29. Beyond the initial information about the scheme, have you received any further information to keep you up-to-date? YES/NO [*if 'yes' ask the interviewee to say what form this has taken*]

30. Do you know if there have been any problems with the scheme? YES/NO [*if yes, ask what they were*]

31. Do you know how these problems were solved? YES/NO [*if yes, ask how*]

32. What do you think the scheme generally?

33. How important is it for you as a parent to know that the nursery/childminder/out-of-school club is quality assured or 'kitemarked'? Why/why not?

34. Can you see any differences in the facility as a result of participation in the scheme? YES/NO *[if 'yes' ask interviewee to describe them]*

35. Can you think of one or two advantages of being involved in this scheme?

36. Can you think of any disadvantages of being involved in this scheme?

37. Do you think that your nursery/childminder/out-of-school club has involved you enough? YES/NO [*ask interviewee to explain their answer*]

38. Do you think it is important to involve parents in schemes to improve quality in childcare? YES/NO [ask interviewee to explain the reasons for their answer]

39. Do you think your nursery/childminder/out-of-school club could have handled the accreditation 'kitemark' scheme better in any way?

CHILDCARE QUALITY IMPROVEMENT AND QUALITY ASSURANCE PRACTICES AND RELEVANT STAFF AND PARENTAL ATTITUDES

TOPIC GUIDE
Key personnel from each organisation currently administering a recognised, national accreditation scheme

Pre-amble: Thank you for agreeing to be interviewed. We are conducting interviews as part of a research project designed to improve our understanding of how nurseries, out-of-school clubs, and childminding networks use quality assurance or 'kitemark-type' schemes. We are not evaluating specific schemes, just trying to get a view of how they work in general. As is usual with research of this kind, interview data will remain confidential within TCRU. The research is being done for the Department for Education and Employment, who have responsibility for quality in childcare settings. We are taping each interview so we have an accurate record of what you say. The tapes will be wiped clean at the end of the project. When the findings come to be written up in our report, although specific schemes will be identified, we will not mention any individuals by name.
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SECTION 1: BACKGROUND INFORMATION

1.1   Name of accrediting organisation

1.2   Your position in the organisation:

                       Interviewee (1):

                       Interviewee (2):

                       Interviewee (3):

1.3   Category of provision scheme is designed for: [*underline as appropriate*]

         childminding network/out-of-school club/day nursery

1.4   Date of interview

SECTION 2: SETTING UP THE QUALITY ASSURANCE/KITMARK SCHEME

2.1   What type of providers is the scheme aimed at?

2.2   When was the accreditation scheme first introduced?

2.3   When was the first provider formally accredited?

2.4   Do you have any information on the characteristics of accredited providers?
        [Prompt: Size of establishments, sector etc.]

2.5   How long did it take to develop the scheme?

2.6   Was that about the time you expected it would take?

2.7   What was the process?

2.8   Did you encounter any particular problems or difficulties?

   IF YES

2.9   How did you go about dealing them?

2.10   Who was involved in development of the scheme?
        [Prompt: What external support did you receive (e.g. steering group, DfEE). What other

        support would you have liked? How useful was the external support?]

2.11   Why did the organisation go down the road of developing an accreditation scheme?

2.12   What do you see as being the main purpose of the scheme?

2.13   How many providers are currently accredited?

2.14   What would you say were the main features of your scheme?
        [Prompt: What makes it different from other schemes available to providers?]

2.15   Has the scheme changed since it was first developed? If so, why?

2.16   How long does accreditation last before renewal is necessary?

2.17   How do you think the scheme relates to the Children Act requirements and local
        authority inspections?

2.18   Would you make any recommendations to organisations wanting to set up
        accreditation schemes for other types of provision?

2.19   Would you do anything differently if you were starting the process all over again?

SECTION 3: IMPLEMENTING THE SCHEME

3.1   What kind of support do you typically give providers who are trying to gain accreditation using your scheme?
[Prompt: Written materials, personal visits, mentoring, inspections etc.]

3.2   How does this support work?
[Prompt: What, if any, kind of problems have you encountered? What solutions did you come up with? What has feedback from providers been like?]

3.3   How many times would one of your representatives visit a typical provider during the process of becoming accredited?
[Prompt: How long would each visit last? What kind of issues would be raised?]

3.4   How much does it cost the average provider to successfully complete the accreditation process?
[Prompt: Do most providers pay this themselves? Do providers find it a reasonable sum? Is there any financial help available for smaller providers?]

3.5   What proportion of those providers who apply for accreditation successfully complete the process? *[Prompt: What happens when a provider fails to get the accreditation at their first attempt]*

3.6   What would you say are some of the more common problems providers have when trying to become accredited?

3.7   What have you done to address these problems?

3.8   What happens once providers have become accredited?

3.9   Do you offer any follow-up procedures?

3.10   What have you done in the way of evaluating the impact the scheme may have on the
        quality of provision?

        IF YES:

3.11   What are the results?

3.12   How do you promote the scheme to providers?
        [Prompt: What kind of information do you give them? Do you target particular sectors?

        Do you get any help from external sources like EYDCPs? What kind of external

        support would be useful?]

3.13   What kind of difficulties have you come across when it comes to marketing the
        scheme? How do you get around them?

3.14   Do you have any information or literature you target specifically at parents?

        IF YES:

3.15 How does this approach work?

3.16 Have you done any surveys of accredited providers about what they think of the scheme?
[Prompt: What are the results?]

3.17 Have you done any research with non-accredited providers to see what they think of the scheme?
[Prompt: What are the results?]

3.18 Is there anything that external organisations (e.g. DfEE, Local authorities, EYDCPs) could do that would help either the accreditation org and/or providers with respect to accreditation schemes?

3.19 Any other comments you would like to make about either the accreditation scheme or the way in which providers use it?

APPENDIX C
QUESTIONNAIRES FOR TELEPHONE INTERVIEWS

CHILDCARE QUALITY IMPROVEMENT AND QUALITY ASSURANCE PRACTICES AND RELEVANT STAFF AND PARENTAL ATTITUDES

TELEPHONE INTERVIEW SCHEDULE

Managers/co-ordinators in nurseries and out-of-school clubs

Pre-amble: Thank you for taking the time to be interviewed. We are conducting interviews as part of a research project designed to improve our understanding of how nurseries and out-of-school clubs use quality assurance or 'kitemark-type' schemes. The research is being done for the Department for Education and Employment, who have responsibility for quality in childcare settings. When the findings come to be reported, we will not mention any individual nurseries or out-of-school clubs by name.

_____

SECTION 1: BACKGROUND INFORMATION

1.1 Name of Local Authority

1.2 Category of provision:　　　day nursery　　　☐

　　　　　　　　　　　　　　　out-of-school club　　☐

1.3　　Sector:　　Statutory　　☐

　　　　　　　　Voluntary　　☐

　　　　　　　　Private　　☐

1.4 How long has your nursery/out-of-school club been open?

　　　　　　　　　Years:　　　　　　Months:

1.5 Number of registered places:

1.6　Age range:

1.7 What do you charge for a full-time place?

1.8 Job title:

1.9 Professional Qualification:

1.10　Gender:　　female　☐　　　　male　☐

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SECTION 2: USE OF QUALITY ASSURANCE/KITMARK SCHEMES

2.1 Is your nursery/out-of-school club involved with a recognised accreditation or kitemark-
type scheme?

> (***PROMPT*** - for example, schemes like the Pre-School Learning Alliance *Aiming for
> Quality* scheme, local authority schemes like the Bristol, Sheffield or Leeds schemes,
> or the Kids' Clubs Network *Aiming High* scheme that help providers assess the
> quality of their service)

Yes ☐

No ☐

IF YES, GO TO SECTION 3

2.2 Does your nursery/out-of-school club use any other kind of self-assessment methods with
a view to improving quality?

Yes ☐

No ☐

IF NO GO TO QUESTION 2.6

2.3 What does you self-assessment scheme involve?

Staff questionnaires ☐

Parent questionnaires ☐

Observations in the nursery/out-of-school club ☐

Other *(please specify)*

2.4 Who wrote the materials you use?

The local authority ☐

Staff in our nursery/ out-of-school club ☐

Staff in another nursery/ out-of-school club ☐

Other *(please specify)* ☐

2.5 Have the materials been useful in helping you to improve quality?

Very helpful ☐

Quite helpful ☐

Not helpful at all ☐

2.6 Why has your nursery/out-of-school club **not** got involved with one of the recognised accreditation or kitemark-type schemes?

Don't know about these schemes ☐

Owner/manager doesn't think it worthwhile ☐ *(see q 2.8)*

Haven't been able to find a suitable scheme ☐ (see q.2.9)

Too busy ☐

Too expensive ☐

Other *(please specify)*

2.7 How likely is it that your nursery/out-of-school club will get involved in an accreditation or kitemark-type scheme in the next 12 months?

Very likely ☐

Maybe ☐

Not very likely ☐

Don't know ☐

IF Q.26, BOX 2 TICKED, THEN ASK:

2.8 Why didn't the owner/manager think these schemes are worthwhile?

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2.9 What makes existing schemes unsuitable?

Thank you very much for taking the time to talk to us.

TERMINATE INTERVIEW

SECTION 3: IMPLEMENTING THE QUALITY ASSURANCE/KITMARK SCHEME

3.1 Have you completed the accreditation process?

Yes ☐

No ☐

IF YES:

3.2 How long did the accreditation process take from start to finish?

Months:

IF NO:

3.3 How long have you been working towards accreditation?

Months:

3.4 Which scheme are you involved in:

Pre-School Learning Alliance ☐

Centre for British Teachers ☐

Effective Early Learning Project ☐

National Day Nurseries Association ☐

Kids' Clubs Network (Out-of-school clubs) ☐

Local authority scheme ☐

Other (*please specify*)

3.5 Were/are members of staff other than just yourself involved in working towards getting the nursery/out-of-school club accredited?

Yes ☐

No ☐

IF *NO*, GO TO QUESTION 3.9

IF *YES*:

3.6 Which members of staff were/are involved?

Senior members of staff only ☐

Senior and some other staff ☐

All staff ☐

3.7 How involved were/are they?

Very much ☐

Somewhat ☐

Very little ☐

3.8 How were/are they involved?

	Yes	No
Through meetings	☐	☐
Through collecting information	☐	☐
Through questionnaires	☐	☐
Informally	☐	☐

Other *(please describe)*

3.9 Were/are parents involved in working towards getting the nursery/out-of-school club accredited?

Yes ☐
No ☐

IF *YES*:

3.10   How many parents were involved?

Parents on the management committee only   ☐

A few parents   ☐

Most parents   ☐

All parents   ☐

3.11   How involved were they?

Very much   ☐

Somewhat   ☐

Very little   ☐

3.12   How were they involved?

	Yes	No
By letter	☐	☐
Through meetings	☐	☐
Through collecting information	☐	☐
Through questionnaires	☐	☐
Informally	☐	☐

Other *(please describe)*

3.13   What kind of help were you able to get as you went through the accreditation
        process?

	Yes	No
Manuals/other written materials	☐	☐
Mentors/development workers	☐	☐
Workshops	☐	☐
The local EYDCP	☐	☐
Contact with other institutions involved in the same scheme	☐	☐
Local authority inspection unit	☐	☐

Other *(please specify)*

3.14   How useful was the help you were able to get?

	Very useful	Quite useful	Not very useful
Manuals/other written materials	☐	☐	☐
Mentors/development workers	☐	☐	☐
The local EYDCP	☐	☐	☐
Contact with other institutions involved in the same scheme	☐	☐	☐
Other	☐	☐	☐

3.15   How difficult is/was the process of getting accredited?

Very difficult   ☐

Quite difficult   ☐

Not at all difficult   ☐

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3.16   Did you come up against any major difficulties as you went through the process of getting accredited?

Yes   ☐

No   ☐

IF *NO*, GO TO SECTION 4

IF *YES*:

3.17   What were the difficulties you came up against?

3.18   How did you go about resolving those difficulties?

SECTION 4: IMPACT OF THE SCHEME

      4.1   Has taking part in the accreditation/kitemark-type scheme helped you to improve the quality of service you provide?

Very much ☐

A little ☐

Not at all ☐

IF *NO*, GO TO QUESTION 4.3

IF *YES*:

4.2   What kind of changes, have you made to your service as a result of getting quality assured?

	Yes	No
Changed policies	☐	☐
Changed practice	☐	☐

      Please specify:

4.3   Have there been any other advantages using the scheme?

Yes ☐

No ☐

IF *NO*, GO TO QUESTION 4.5

IF *YES*:

4.4   What have been the other advantages of using the scheme?

4.5   Have there been any disadvantages in using the scheme?

Yes   ☐

No   ☐

IF *NO*, GO TO QUESTION 4.7

IF *YES*:

4.6   What have been the disadvantages of using the scheme?

4.7   Has membership of the scheme had any effect on the demand for places from parents?

Demand increased a lot   ☐

Demand increased a little   ☐

Demand decreased   ☐

No change   ☐

Don't know   ☐

4.8   Has your accreditation/kitemark-type scheme helped you to think particularly about your service for children with special needs?

Yes   ☐

No   ☐

IF *NO*, GO TO QUESTION 4.10

IF *YES*:

4.9   How has your accreditation scheme helped you to think particularly about your
        service for children with special needs?

                        Develop new policies   ☐

                        Change working practices   ☐

                        Additional staff training   ☐
4.10   Would you like to see your nursery/out-of-school club continue to use the scheme in

        the future?

                                    Yes   ☐

                                    No   ☐

                                    ☐
                        Don't know

4.11   Would you recommend the scheme to other nurseries/out-of-school clubs?

                                    Yes   ☐

                                    No   ☐

                        Don't know ☐

4.12   Any other comments?

CHILDCARE QUALITY IMPROVEMENT AND QUALITY ASSURANCE PRACTICES AND RELEVANT STAFF AND PARENTAL ATTITUDES

TELEPHONE INTERVIEW SCHEDULE

Managers/co-ordinators of Childminding networks

Pre-amble: Thank you for taking the time to be interviewed. We are conducting interviews as part of a research project designed to improve our understanding of how childminding networks, nurseries and out-of-school clubs use quality assurance or 'kitemark-type' schemes. The research is being done for the Department for Education and Employment, who have responsibility for quality in childcare settings. When the findings come to be reported, we will not mention any individual networks, nurseries or out-of-school clubs by name.

_____

SECTION 1: BACKGROUND INFORMATION

1.11   Name of Local Authority

1.12   Category of provision: childminding network   ☐

1.13   Sector: Statutory   ☐

                         Voluntary   ☐

                         Private   ☐

1.14   How long has your childminding network been running?

                         Years: Months:

1.15   Number of approved/accredited childminders (and children where possible):

1.16   Age range served :

1.17   What is the rate charged for a full-time place?

1.18   Job title:

1.19   Professional Qualification:

1.20   Gender: female   ☐   male   ☐

SECTION 2: USE OF QUALITY ASSURANCE/KITMARK SCHEMES

2.9.1   Is your childminding network involved with a recognised accreditation or kitemark-type scheme?

(**PROMPT** - for example, the NCMA scheme Children Come First or local authority schemes like the Bristol, Sheffield or Leeds schemes)

Yes   ☐

No   ☐

IF YES, GO TO SECTION 3

2.10 Does your childminding network use any other kind of self-assessment methods with a view to improving quality?

Yes   ☐

No   ☐

IF NO GO TO QUESTION 2.6

2.11 What does you self-assessment scheme involve?

Staff questionnaires   ☐

Parent questionnaires   ☐

Observations   ☐

Other *(please specify)*

2.12 Who wrote the materials you use?

The local authority   ☐

Staff in our network   ☐

Staff in another setting (providers)   ☐

Other *(please specify)*   ☐

2.13 Have the materials been useful in helping you to improve quality?

Very helpful ☐

Quite helpful ☐

Not helpful at all ☐

2.14 Why has your Childminding network **not** got involved with a recognised accreditation or kitemark-type schemes?

Don't know about these schemes ☐

Owner/manager doesn't think it worthwhile ☐

Haven't been able to find a suitable scheme ☐

Too busy ☐

Other *(please specify)*

2.15 How likely is it that your nursery/out-of-school club will get involved in an accreditation or kitemark-type scheme in the next 12 months?

Very likely ☐

Maybe ☐

Not very likely ☐

Don't know ☐

Thank you very much for taking the time to talk to us.

TERMINATE INTERVIEW

SECTION 3: IMPLEMENTING THE QUALITY ASSURANCE/KITMARK SCHEME

3.19   Have you completed the accreditation process?

Yes   ☐

No   ☐

IF *YES:*

3.20   How long did the accreditation process take from start to finish?

Months:

IF *NO*:

3.21   How long have you been working towards accreditation?

Months:

3.22   Which scheme are you involved in:

NCMA   ☐

Local Authority Scheme   ☐

Other (*please specify*)   ☐

3.23   Were/are members of staff other than just yourself involved in working towards getting the network accredited?

Yes   ☐

No   ☐

IF *NO*, GO TO QUESTION 3.9

IF *YES*:

3.24   Which members of staff were/are involved?

Senior members of staff only   ☐

Senior and some other staff   ☐

All staff   ☐

3.25   How involved were/are they?

Very much   ☐

Somewhat   ☐

Very little   ☐

3.26   How were/are they involved?

	Yes	No
Through meetings	☐	☐
Through collecting information	☐	☐
Through questionnaires	☐	☐
Informally	☐	☐

Other *(please describe)*

3.27   Were/are parents involved in working towards getting the network accredited?

Yes   ☐

No   ☐

IF *NO*, GO TO QUESTION 3.13

IF *YES*:

3.28   How many parents were involved?

Parents on the management committee only   ☐

A few parents   ☐

Most parents   ☐

All parents   ☐

3.29   How involved were they?

                                    Very much   ☐

                                    Somewhat   ☐

                                    Very little   ☐

3.30   How were they involved?

                                                   Yes   No
        By letter   ☐   ☐

        Through meetings   ☐   ☐

        Through collecting information   ☐   ☐

        Through questionnaires   ☐   ☐

        Informally   ☐   ☐

        Other *(please describe)*

3.31   What kind of help were you able to get as you went through the accreditation
        process?
                                                   Yes   No

        Manuals/other written materials   ☐   ☐

        Mentors/development workers   ☐   ☐

        Workshops   ☐   ☐

        The local EYDCP   ☐   ☐

        Contact with other institutions   ☐   ☐
        involved in the same scheme

        Local authority inspection unit   ☐   ☐

        Other *(please specify)*

3.32   How useful was the help you were able to get?

	Very useful	Quite useful	Not very useful
Manuals/other written materials	☐	☐	☐
Mentors/development workers	☐	☐	☐
The local EYDCP	☐	☐	☐
Contact with other institutions involved in the same scheme	☐	☐	☐
Other	☐	☐	☐

3.33   Did you come up against any major difficulties as you went through the process of getting accredited?

Yes   ☐

No   ☐

IF *NO*, GO TO SECTION 4

IF *YES*:

3.34   What were the difficulties you came up against?

3.35   How did you go about resolving those difficulties?

SECTION 4: IMPACT OF THE SCHEME

     4.1   Has taking part in the accreditation/kitemark-type scheme helped you to improve the quality of service you provide?

Very much ☐

A little   ☐

Not at all ☐

IF *NO*, GO TO QUESTION 4.3

IF *YES*:

4.4   What kind of changes, have you made to your service as a result of getting quality assured?

	Yes	No
Changed policies	☐	☐
Changed practice	☐	☐

     Please specify:

4.5   Have there been any other advantages using the scheme?

Yes   ☐

No   ☐

IF *NO*, GO TO QUESTION 4.5

IF *YES*:

4.4   What have been the other advantages of using the scheme?

4.5   Have there been any disadvantages in using the scheme?

Yes   ☐

No   ☐

IF *NO*, GO TO QUESTION 4.7

IF *YES*:

4.6   What have been the disadvantages of using the scheme?

4.7   Has membership of the scheme had any effect on the demand for places from parents?

Demand increased a lot   ☐

Demand increased a little   ☐

Demand decreased   ☐

No change   ☐

Don't know   ☐

4.8   Has your accreditation/kitemark-type scheme helped you to think particularly about your service for children with special needs?

Yes   ☐

No   ☐

IF *NO*, GO TO QUESTION 4.10

IF *YES*:

4.13 How has your accreditation scheme helped you to think particularly about your service for children with special needs?

Develop new policies ☐

Change working practices ☐

Additional staff training ☐

4.14 Would you like to see your network continue to use the scheme in the future?

Yes ☐

No ☐

4.15 Would you recommend the scheme to other networks?

Yes ☐

No ☐

4.16 Any other comments?

APPENDIX D
SUMMARIES OF QUALITY ASSURANCE SCHEMES

QUALITY ASSURANCE SCHEME SUMMARIES: 1

Name of Scheme: **Kids' Club Network's Quality Assurance Scheme for out of school clubs:** *Aiming High*

Main Aims: to create a recognised standard over and above the
basic requirements for registration;
enable clubs to demonstrate an approved standard;
set targets and generate action plans for clubs;
show clubs how to continue to improve;
enable parents and carers to know that the club provides a
high quality service; enable TECs, employers and others
to impose quality thresholds;
strengthen the role of local authorities in improving provision through
annual inspections.

Levels of Quality: levels 1-3 (good, very good and excellent)

Key Areas for
Improvement: Commitment to Quality
(including written statements, planning, affordability and accessibility)
Positive Play Opportunities
(supervision support, planned range, addressing developmental needs
etc.)
Care Environment
(premises, equipment, routines, record-keeping, equal opportunities,
rules, safety etc.)
Child-centred Service
(building relationships, participation and inclusion and effective
communication etc.)
Partnership with Parents
(collection and dissemination of information, involvement, attitudes
etc.)
Access
(accessible premises, policies, affordability, admissions policies)
Equal Opportunities
(training, policies, positive play, clear procedures for dealing with
discrimination etc.)
Management
(appropriate structure, legal responsibilities, financial management
etc.)
Staffing
(ratios, staff development, equal opportunities, qualifications and
experience etc.)
Volunteers(selection, supervision and support etc.)
Administration
(financial systems, children s records, staff records, confidentiality
etc.)
Food
(nutrition, individual needs, organisation etc.)

Premises
(safety and security, accessibility, areas for activities etc.)
School Collection and Delivery
(efficiency, safety, trained escorts etc.)
Local Networking
(community links, information to community, links with local organisations etc.)
Holidays
(specific indicators of quality for holiday playschemes including staffing,
contrast to school, records of scheme etc.)

Steps Towards Improvement (Process):

1. Staff and management make a commitment to quality.
2. Staff read through the quality areas and decide which level to work for.
3. Plan a portfolio to include a variety of written and visual evidence to include minutes from meetings, letters to parents, programmes of activities and photographs.
4. Collect evidence for each area of improvement.
5. Contact Kids' Club Network to arrange assessment
6. Approved assessor visits to carry out assessment. The portfolio provides a basis on which the assessor forms their visit. The visit lasts about four hours and the assessor will meet with parents, staff, management, and representatives of the management committee.
7. Club receives assessor's report with recommended level of attainment. The report includes recommendations on further action.
8. Club accepts recommendation.
9. Certificate is issued.
10. Club is quality assured.

Support Available:

Mentors defined as ideally trained through Kids'
Club Network's Quality Assurance Scheme or an
experienced playcare professional or a representative
of the local authority or Training and Enterprise Council.

QUALITY ASSURANCE SCHEME SUMMARIES: 2

Name of Scheme: **Pre School Learning Alliance Accreditation Scheme:** *Aiming for Quality*

Main Aims: To provide accreditation in addition to standards ensured by registration under the Children s Act.

Levels of Quality: N/A

Key Areas for
Improvement:

Setting Clear Aims and Objectives
(including written policy statements, plans for staff development
and education and care)
Curriculum Planning, Review and Evaluation
(curriculum/play plans for each child, regular meetings, evaluation)
Early Years Curriculum
(major areas of learning and experience provided for,
play activities supporting the curriculum)
Session Plans and Routines
(planning, choice, physical needs, food)
Staffing
(staffing level, qualifications and experience, training opportunties)
Interaction
(adults support learning, assisting in language development, codes of
conduct)
Parental Involvement
(information, participation)
Premises and Equipment
(safety, furniture and equipment, accessibility)
Safety
(safety, routines, adult supervision, food preparation)
Administration
(management, insurance, employment conditions, recruitment
procedures)
Community Links
(links with community, PSLA)
For pre-schools with a parent and toddler sessions and
those offering full or extended daycare there are additional areas
including considerations of curriculum, ratio of staff and links with
parents.

Steps Towards
Improvement
(Process):

1.   Pre-school decides to seek accreditation. It is
       suggested that preliminary meetings are held
       with stakeholders to provide information and organise the self-
       assessment process.

2.   Application made to Pre-school Learning Alliance National Centre for the accreditation materials.

3.   Pre-school gathers a portfolio of evidence of its standard of provision. The self-assessment materials include criteria for the quality of provision and indicators against which practice can be assessed.

4.   Pre-school conducts a self-assessment and makes any necessary improvements. Evidence is collected including plans of layout, photographs, parents' questionnaires, policy documents and publicity materials.

5.   Pre-school applies for a visit from the a Pre-school Learning Alliance Accreditation Assessor.

6.   Accreditation assessor visits to validate self- assessment

7.   In unvalidated areas pre-school draws up action plans to begin to make necessary improvements and requests a second visit from the assessor.

8.   Accreditation materials are submitted to Pre-school Learning Alliance's National Accreditation Panel.

9.   Accreditation either granted or deferred.

10.   For accredited pre-schools, re-accreditation is required after 3-years.

Support Available: Through the Training and Fieldwork Department at the Pre-school Learning Alliance's National Centre. Local branch sub-committee can also provide a Pre-school Learning Alliance fieldworker or support worker to advise and help with the self-assessment process.

Name of Scheme: **National Childminding Association Approved**
                     Childminding network Scheme: *Children Come First*

Main Aims: To allow local authorities, TECs, employers and other agencies
                     to be sure that networks are providing childminding of the
                     highest quality.
                     To ensure that all childminders in the network are practising
                     according to the standards in the *Quality Childminding Charter* based
                     on the NCMA s *Principles for Excellence in Childminding Practice*.

Levels of Quality: N/A

Key Areas for
Improvement: Childminding Status
                     (registration, insurance cover, awareness of current legislation
                     and guidance)
                     Children s Learning and Development
                     (relevant and appropriate play and learning, support, written records)
                     Working Partnership with Parents/Families
                     (sharing information, respect for traditions and practices of parents)
                     Children s Behaviour
                     (responses appropriate to age and development, clear boundaries)
                     Equality of Opportunity/Anti-Discrimination
                     (developing sense of identity, help develop positive attitudes to others)
                     Confidentiality
                     Keeping Children Safe
                     (awareness of signs and symptoms, plans for accidents, organising
                     environment)
                     Nutrition and Diet
                     (nutrition, agreement with parents)
                     Continuity
                     (providing services for long periods)
                     Business Practice
                     (keeping records and contracts)
                     Support and Liaison
                     (seeking advice and support)

Steps Towards
Improvement
(Process):   1.   The childminding network tells NCMA that it wishes to seek approval.

2. The Training, Development and Consultancy Department at Head Office sends a How to apply for NCMA approval of childminders network pack to the network. This includes a tool kit which provides the tools and forms necessary to undertake the accreditation exercise.

3. The network assesses its readiness to meet NCMA standards for approval and makes any necessary changes to its working practices.

4. The network sends Form A to NCMA to indicate its intention to seek approval.

5. The network begins to assemble its pre-assessment portfolio of documents to provide evidence against laid-out performance indicators.

6. The network sends NCMA Form B to indicate that the portfolio is near to completion.

7. The network arranges the NCMA s assessor s visit, completes its pre-assessment portfolio, sends the portfolio to the assessor and makes other necessary preparation for the visit.

8. The NCMA assessor scrutinises the pre-assessment portfolio, records findings and prepares for the visit

9. The assessor visits the network

10. The assessor prepares the report, including any further requirements to be met prior to approval, and makes recommendations

11. The NCMA Network Approval Panel considers the assessor s155recommendations

12. The network is informed of NCMA s approval decision and arrangements are made for reporting back on fulfilment of any remaining requirements

13. If there are two or more childminders within the network who have been accredited to participate in an Early Years Development Partnership, NCMA advises the LEA and OFSTED of successful approval of the network. If the network has no accredited childminders when it is first approved by NCMA, it must inform NCMA when it has two or more accredited childminders within the network, and NCMA will then inform the LEA and OFSTED.

Support Available: NCMA provides training and seminars and has a database.
Local NCMA Regional Childminding Development Officers can also offer help.

QUALITY ASSURANCE SCHEME SUMMARIES: 4

Name of Scheme: **C***f***BT Education Services:** *A Quality Assurance Scheme for Nurseries and After-school Care*

Main Aims: To offer opportunities for staff development (professional and personal); To provide opportunities to evaluate practice against measurable standards and have these verified; To offer a gold standard model to measure practice by.

Levels of Quality: N/A

Key Areas for
Improvement: Learning environment
(curriculum, recording/assessment, planning, evaluation, promoting learning, special needs, equal opportunities)
Social experience
(caring relationships, daily routines, managing behaviour, caring for the environment, cultural diversity)
Partnerships
(parents, community, local authority, external support services, other providers)
Staffing
(qualifications and experience, practice guidelines, support and appraisal, development and training, access to resources)
Management
(aims and ethos, supervising practice, staff support, reviews and planning, financial managing)
Resources and Accommodation
(indoor space, outdoor space, staff facilities, play materials and equipment, display)

Steps Towards
Improvement
(Process):

1. Obtain manual and study part 1 (Introduction) and part 2 (The Standards), which describe in detail the six key areas and specific criteria of a quality nursery environment. It is emphasised that this exercise should be undertaken collaboratively so that staff reach a shared understanding of the meaning of the six key areas.

2. Once a common understanding of the six key areas is reached, staff study parts 3 (Describing Practice) and 4 (Evidence) of the manual which describe the tasks to be carried out to gain accreditation.

3. The scheme suggests that specific tasks are delegated to staff to ensure everyone s involvement in compiling the submission. These include describing policy and practice.

4. Prepare a submission, which brings together extensive Descriptions of practice and relevant documentation (evidence) which demonstrates how practice meets the standards defined in the manual. This is estimated to take a period of approximately two months. Evidence might include copies of policy documents, curriculum documents, completed folios of work for 0-2 year olds and 3-5 year olds, records and minutes of meetings and photographs of displays and activities.

5. Send the submission to CfBT where it is examined by two experienced professionals.

6. Arrange visit from CfBT scrutineer.

7. CfBT write a report and recommend accreditation if appropriate. If accreditation is not recommended because of weakness in two or more areas, the nursery is required to address these issues and resubmit in a time of not less than six months after receipt of the report.

Support Available: workshops are offered to help staff prepare for submission. .

QUALITY ASSURANCE SCHEME SUMMARIES: 5

Name of Scheme:	**EEL (Effective Early Learning Project) scheme:** *Evaluating and Improving Quality in Early Childhood Settings: A Professional Development Programme*

Main Aims:

To develop and disseminate a cost-effective strategy to evaluate and improve the quality and effectiveness of early learning available to young children in a wide range of education and care settings across Scotland, Northern Ireland, England and Wales

To evaluate and compare rigorously and systematically the quality of early learning provided in a diverse range of early childhood and care settings.

To support practitioners to improve on 'previous best' through gradual incremental change and development [The scheme adopts an 'inclusionary model' – something 'done with' participants not 'done' to them]

Levels of Quality: N/A – simply 'improve on personal best'

Key Areas for
Improvement: In this case called '10 dimensions of quality'

Aims and Objectives
Learning experiences/curriculum
Learning and Teaching strategies
Planning, assessment and record-keeping
Staffing
Physical Environment
Relationships and Interactions
Equal Opportunities
Parental Partnership, Home and Community Liaison
Monitoring and Evaluation

Steps Towards
Improvement: [The process and procedures encapsulate validated self-evaluation and a programme of development. Whole thing takes 9-12 months].

Process: EVALUATION PHASE:

1.   Staff and governors agree to participate – decide on who is going to be the EEL Support person. Inform parents about taking part in EEL. Register for accreditation.
2.   EEL Support worker collects relevant documents relating to 10 areas of improvement, taking photographs as a key record of evidence. Completes Physical Environment schedule. Distributes Professional biography questionnaire to staff.

3. EEL Support worker interviews manager, up to 5 children, staff and parents using given schedules and taking notes. Optional Governor interview.

4. EEL Support worker tracks up to 5 children, observing them 4 times each (am and pm) for 5 minutes. Systematic checklist observation sheet provided – different one for children with SEN. Analyses observations (guidance given on drawing up graphs from this).

5. EEL Support worker uses Child Involvement Scale to observe up to 12 children ensuring range of sex and age. Each is observed 3 times for 2 minutes. Analyses observations (guidance given on drawing up graphs for this).

6. EEL Support worker uses Adult Engagement Scale with up to 5 adults 4 times each for 2 minutes – different scale for adults working with children with SEN. Analyses observations (guidance given on drawing up graphs from this).

7. EEL Support worker compiles and presents evaluation report using the 10 areas for improvement as headings (Guidance booklet provided to help with writing report). Report to be validated by participants. Strengths and areas agreed for improvement are decided. Copy sent to EEL Project Team.

ACTION PLANNING PHASE

8. Develop Action Plan – EEL Support worker meets with External Adviser – discusses strengths and areas agreed for improvement – latter prioritised. Identify first step in first priority. Make short term planning agenda for 3-6 months. Identify and mobilise resources. Action planning with rest of staff and responsibilities agreed and allocated. EEL Support worker writes Action Plan (guidance given).

DEVELOPMENT STAGE

9. All participants share in monitoring and documenting progress of Action Plan – evidence can include further observations, test results but must include:

10. Further application of Child Involvement Scale and

11. Further application of Adult Engagement Scale.

REFLECTION STAGE

12. Staff meet to reflect on their achievements and the evidence they have gathered showing the impact of action planning on children's learning. Decide on next cycle of action.

13. Final Report is compiled using guidance booklet provided.

Support Available: An External Adviser operates as critical friend (LEA adviser, inspector, advisory teacher, development officer, Head of another setting).

Video is provided to help EEL Support Worker practise tracking children/do observations of adults and children.

QUALITY ASSURANCE SCHEME SUMMARIES: 6

Name of Scheme: **National Day Nurseries Association:** *Quality Counts*

Main Aims: To promote quality daycare and education for all children; Develop, encourage and maintain high standards in care and education for the benefit of all children, their family units and their local communities; Develop and provide support services to organisations delivering education and care; Celebrate good practice and inform parental choice.

Levels of Quality: N/A

Key Areas for
Improvement:

Management and Staff

Recruitment and Selection of Staff
Staff Portfolios
Student Portfolios
Administration Records
Partnership with Parents/Carers
Environment
Health & Safety
Nutrition and Serving of Food
Meeting of the Developmental Needs of Children
Provision of Integration of Children with Additional Needs
Child Protection
Trips and Outings
School Escort Service
Community
Out-of-school clubs

Steps Towards
Improvement
(Process):

1. Purchase Quality Counts pack
   (*Nursery familiarises itself with Standards and process of accreditation*)
2. Nursery sends letter of commitment
   (Stating nursery's commitment to take part in Quality Assurance process – enclosed with the pack)
3. NDNA Appoints a Mentor
4. Mentor contacts Nursery
   (*Group meetings arranged*)
5. Evidence Gathering
   (*Nursery works through Quality Criteria Sections and builds portfolio of evidence*)

6.   Nursery & Mentor agree on application for assessment
(All applicable sections of Quality Criteria completed)
7.   Nursery applies to NDNA for assessment
8.   NDNA Assessor visits nursery
9.   Accreditation and Award of Certificate

Support Available: Mentoring in group sessions, possible site visit, and telephone support.