EVALUATION OF THE EARLY LEARNING AND CHILDCARE DELIVERY TRIALS
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Key Messages

The Early Learning and Childcare (ELC) trials aimed to test different models of delivery to inform the wider ELC sector of key successes and challenges related to the implementation of 1140 hours. The purpose of this evaluation is to provide useful learning from a range of sources. The evidence reported has been gathered through structured conversations with trial leads, and a joint evaluative review of settings by the Care Inspectorate and Education Scotland. It should be noted that the evidence is largely observational in nature and should be considered a preliminary reflection of e.g. improvements in children's progress, rather than a formal assessment of what will happen when the expansion is rolled out.

Overall, several key messages have been identified:

• Clear and meaningful communication to parents/carers on the benefits of the funded entitlement for their child is important, alongside clear process guidelines on how to register and reassurance on what take up of the entitlement means for them.

• To encourage uptake among eligible two-year olds in particular, positive non-stigmatising language was seen as key, talking about positive benefits for the child as a result of early access to services.

• Sufficient time should be built in to recruit qualified staff, and workforce engagement is important when changing work patterns to accommodate additional hours.

• Several trials commented very positively about working with childminders, however time should be built in for recruitment, logistics planning and communicating the offer to parents to increase uptake.

• Consulting with parents/carers on the flexibility of the offer gave them a positive sense of ownership over the provision, and in some cases revealed that certain offers may not be popular and therefore not viable.

• ELC staff and parents were supportive of the expanded offer and reported positive outcomes for children, particularly in relation to outdoor learning.

• There was no single delivery model that could be identified as more effectively delivering high quality.

• There is a need for a continued focus on high quality professional learning for the existing and new ELC workforce as the expansion continues.

• The benefits of partnership working and sharing of practice within and across local authorities as the expansion of ELC continues were evident.
1. **Background**

In November 2015, Scottish Government (SG) announced its intention to expand the provision of free early learning and childcare (ELC) from 600 hours to 1140 hours per year by 2020 for all three and four year olds and eligible two year olds.

To inform the national expansion programme, the Scottish Government worked closely with Local Authorities across Scotland to deliver 14 ELC trials in different settings. The aim of these trials was to test out different ways of delivering the 1140 hours, and to provide learning to inform the wider roll-out. The trials were established prior to the development of the SG Blueprint for the expansion of early learning and childcare in Scotland. 

2. **Overview of the trials**

In taking forward the expansion of ELC and delivering on its 2020 vision, SG invited local authorities to devise and submit for trial, new delivery models that would not compromise on the quality of experience, would deliver positive outcomes for children, ensure excellence and equity in the ELC sector and support children’s transitions through early learning and childcare and into school. In late 2016 and early 2017, a total of 14 delivery model trials were selected in the following authorities:

- Aberdeen
- Angus
- Argyll & Bute
- Dumfries & Galloway
- Dundee
- East Ayrshire
- Edinburgh
- Eilean Siar
- Glasgow
- Midlothian
- North Ayrshire
- Scottish Borders
- Shetland
- South Lanarkshire

Each trial had a duration of 6-12 months, and in October 2017, two trials had come to an end of their trial period and continued as part of early phasing. Other trials started later and will not finish until June 2018.

The trial delivery models can be categorised into two main groups – blended provision, and ELC offered by a single provider. Blended provision is characterised by children attending two or more settings, managed by different providers, working together to provide children with their entitlement to ELC. Within the Scottish Government trials programme blended provision was offered by childminders and ELC establishments working together.

A child receiving their ELC from a single provider will most frequently attend the same setting for all of their sessions. It is possible however for a registered provider to offer a placement over different sites, staffed wholly, or in part by different practitioners. Within the Scottish Government trials programme single providers offered ELC predominantly in establishment settings. Two trials authorities used establishment-based settings but included outdoor/forest kindergarten sessions as part of their provision. More detail on each trial can be found in Annex A.

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1 A Blueprint for 2020: The Expansion of Early Learning and Childcare in Scotland
3. Evaluation approach

3.1 Aims
The evaluation sought to gain a better understanding of issues and experiences related to the delivery of 1140 hours of ELC, with a focus on the following themes:

- Capacity
- Uptake
- Quality
- Child and parental outcomes
- Flexibility
- Scalability

This report presents learning from across the trials programme. Part A presents an independent review of joint evaluative visits completed by Education Scotland and the Care Inspectorate. Part B presents evidence collated by the Scottish Government on what trials did, what worked well, and what did not work well in relation to the above themes.

It should be recognised that given the relatively short duration and small scale of the trials, evidence in some areas, for example improvements in children’s progress, wellbeing and impact on families, is largely anecdotal in nature and should be considered preliminary. Additionally, it should be recognised that it was not an aim of the trials to examine the economic efficacy of any particular model of delivery. While the trials cannot necessarily be said to apply to Scotland as a whole, they aim to help others plan to deliver 1140 hours of ELC by showcasing the steps taken and lessons learned.

3.2 Methods
The evidence collated in this evaluation report is drawn from the following sources:

PART A

- **Care Inspectorate (CI) and Education Scotland (ES) observations.** CI and ES supported the evaluation of the trials programme by assessing quality aspects of the trials settings. It is important to note that these assessments did not take the form of an inspection but rather an evaluative visit to provide helpful information on support, environment, staffing, management and leadership, and positive outcomes for children, to support the ELC sector as it moves towards 1140 hours.

PART B

- **Semi-structured conversations with trial leads from each Local Authority.** In addition to regular updates from each trial, semi-structured conversations were conducted by SG trials affiliates midway through and at the end of the trials period.

- **Local Authority self-evaluations.** Several trials conducted their own evaluations, by e.g. running surveys with parents/carers and staff, documenting learning from materials used and, where possible, learning from these materials have been included in this report.
4.  PART A - Key findings from the Care Inspectorate / Education Scotland evaluative visits

4.1  Context
The Care Inspectorate and Education Scotland supported the evaluation of the 1140 hour trial delivery models through the use of an impact review framework. The key focus of this work was to:

• provide professional judgement on what was working well and what barriers existed to providing high-quality early learning and childcare (ELC) using different models of delivering 1140 hours of funded provision.

and where possible:

• identify key elements of the new models that supported improved outcomes for children and families.

Consideration was also given to how the Care Inspectorate's registration and variation function had impacted on and supported the delivery of the trial models.

The Care Inspectorate and Education Scotland’s evaluation included all 14 trial authorities. At the time of the evaluation visits, two local authorities had concluded their trials but were continuing to provide 1140 hour provision informed by their trial delivery model therefore these were included within the evaluation. The 14 trials included:

• Seven local authorities offering a blended model of ELC involving children attending both a childminding and establishment setting.
• Five local authorities offering ELC based at a single provider.
• Two authorities offering a single provider but including outdoor/forest kindergarten sessions as part of their provision.

Ahead of the evaluative visits, local authority trial leads completed a Self-Evaluation Position Statement (SEPS) (see Annex B). The SEPS template questions were framed to share evidence in relation to the areas that potentially impacted on the delivery of the various models.

The Care Inspectorate and Education Scotland visited each trial authority during March and April 2018. The visits focussed on the impact the change in delivery model was having on children and their families, rather than evaluating the quality of individual settings. Not all individual settings involved in the trials were visited; the validation exercise sampled at least one site involved in each trial within an authority.

During the visits the Care Inspectorate and Education Scotland engaged in professional dialogue with staff, carried out direct observations, engaged with stakeholders, and reviewed of relevant documentation. At the end of the visit there was a plenary session with key staff involved in the trial. This involved a discussion on the positive features of the trial model and any aspects which had, or still required further development.

4.2  Learning from the Registration and Variation Process
The following section focusses on information relating to registrations and variations undertaken by the Care Inspectorate, which directly supported the implementation of the delivery models. It also reports on the ways in which and to what extent the Care Inspectorate’s registration or variation processes (where required) had impacted on the delivery of the model, as well as feedback from the local authority trial leads on how the process could be improved to reduce potential barriers. This included consideration of timescales, expectations and communications.
From the 14 local authorities, 69 registered care services were identified as being involved in the delivery of the trial models, including 30 Daycare of Children services and 39 Childminding services.

Of the 30 Daycare of Children services, three were new services requiring registration. However, only one completed the registration process. Two providers withdrew their applications for a variety of reasons, including challenges recruiting staff, financial reasons and building requirements. In response to one application being withdrawn, the local authority made alternative arrangements which parents/carers reported they were happy with, as it was an extended hours provision in an establishment that they were familiar with. The service registered was intended to support the delivery of a blended model involving an extended day and year nursery as well as childminders.

Variations were submitted and granted for 14 Daycare of Children services. Of these:

- Twelve involved an increase in the numbers of children cared for. This created an additional 328 places for pre-school children, 69 of which were for eligible 2 year olds.
- Four involved extending operating times throughout the day and year.
- Seven were to utilise outdoor spaces as an indoor/outdoor nursery.

Of the 39 Childminding services, five submitted variations. There was no evidence to suggest the variations were required for the trial models they were involved in, although the additional places created may have been utilised by children involved in the trial models.

With the exception of one variation, the registration and all variations were completed within the key performance target timescales set by the Care Inspectorate. More than half of the variations were completed within one month of the application being received.

The reason one variation was not completed within the timescale was due to adaptations to premises not being completed on time. The authority stated the Care Inspectorate responded promptly to progress the variation when all works were completed.

In terms of the ways in which and to what extent the Care Inspectorate's registration or variation processes had impacted on the delivery of the models, almost all feedback was very positive. This included:

- The quick timescale in which the process was progressed.
- On-going support and advice from the registration team and case holding Inspectors.
- The prompt availability/responsiveness of Care Inspectorate staff.
- Established good working relationships with Care Inspectorate staff, in particular the case holding inspector and registration link inspector, and the knowledge they have of the services.

Two trial leads felt that Care Inspectorate expectations on what was required to progress the applications could have been made clearer at the start of the process as the lack of this had delayed the process. The Care Inspectorate will be reviewing their registration process in 2018 and will take account of this comment.

Some trial leads shared that whilst no formal variations were needed, they had received a range of support from the Care Inspectorate, including on-going conversations and advice. The value of this featured strongly in the feedback received from all authorities.
In summary, the Care Inspectorate approach to supporting the implementation of the trial models was successful and contributed effectively to the delivery of the models and 1140 hours of Early Learning and Childcare as part of the Scottish Government’s Early Learning and Childcare expansion policy.

4.3 Learning on aspects of quality

The evaluation highlighted a number of aspects which are valuable in terms of the learning they offer local authorities. These may also be of interest to providers adapting their services to offer the entitlement of 1140 hours of ELC in the future.

When considering the evidence gathered, it is important to take into account the small number of trials, their relatively short duration, and wide range of models represented. In an evaluation such as this, it cannot be assumed that aspects not highlighted were absent from other trials or delivery models. It was also noted that areas identified as strengths in some trial delivery models were also noted as areas for improvement in others.

4.3.1 Elements of new models having a positive effect on the quality of ELC being delivered

The following positive aspects of provision were noted during evaluative visits:

**Relationships between staff/parents/carers/children**

- Children had positive, nurturing relationships with practitioners and childminders. In blended models children were reported to be more confident than they were prior to this arrangement. They were displaying increasingly positive social interactions, and developing early communication skills.

- Feedback suggests that children had fewer absences from their ELC setting than before the trial delivery model was implemented.

- Carefully managed transitions which took account of the needs of individual children and their families. Arrangements were also in place to maximise continuity of care for children across an extended hours or year placement. For example a dual-keyworker system supported consistent communication with families. In another delivery model one practitioner stayed with the children as they moved between different sites. In a further example, full day, rather than half-day, placements were offered with providers in order to minimise the number of transitions a child experienced within their day. In single provider models where children had attended trial provision prior to starting school, primary school staff reported smoother transitions to school. Across all delivery models, families felt well supported by the settings their children attended.

- Increased parental engagement in their children’s learning was identified. Families who took part in family learning workshops reported that these had had a positive effect on their ability to engage in, and support their child’s learning at home.

**Child development**

- Parents/carers spoke positively of the difference extended hours and/or attendance at outdoor provision had on their children. For example, they noticed positive changes in their children’s sleep patterns, behaviour at home, improved language skills, and their children being more independent.

- All practitioners within a setting offering Gaelic Medium Education (GME) were able to deliver learning through the medium of Gaelic. Practitioners and parents/carers noted the progress that children had made. Parents/carers shared that children in the delivery trial model used more Gaelic at home than their older siblings had when they attended ELC.
• Extended placements and/or new delivery approaches to the curriculum had given children access to a wider variety of experiences. Examples of this included increased learning opportunities in literacy and numeracy, opportunities for children to lead their learning, and to take part in outdoor learning. Greater use was made of the local environment to support learning. Children had extended time to take forward their own interests. It was noted that children benefitted from being able to revisit their interests throughout the day.

• Children had increased opportunities for outdoor learning. Practitioners had reviewed the structure of the day in response to children attending for longer hours than previously. Due to the flexibility created by children attending for extra hours, opportunities were identified for children to spend more time learning outdoors. This was as part of free-flow play at their ELC setting, and also at off-site locations such as local beaches, forest areas and in other community locations.

• Practitioners had considered how they delivered the curriculum in the light of children’s new experiences and made changes to try to help with continuity and coherence for learners. Changes had been made to the play and learning environment. These included, for example, increased access to loose-parts play materials indoors and out, and the redevelopment of the outdoor environment. A sharing wall had been developed to enable children who attended more than one site to share their experiences and reflect on their learning. This helped staff to build upon children’s prior learning.

**Partnership working and staff development**

• Collaborative approaches with partners had led to improved partnership working and community capacity building. For example children’s extended hours had supported increased partnership working with health visitors and speech and language therapists. In a second example families of children attending were able to access support from the local authority positive destinations officer. This had resulted in some family members returning to or gaining employment, others had accessed training or education.

• The role played by childminding development officers helped establish and strengthen links between childminders and establishments in some blended models.

• There was a focus on meeting the professional learning needs of childminders. Examples included a focus on Curriculum for Excellence and other national education priorities. A learning pathway for childminders was in place in one authority and childminders were registered at the local college to support access to qualifications.

• Increased staffing had provided opportunities for enhanced leadership roles for practitioners. These have included leaders of outdoor learning and the development of a family support worker role.

• Positive working relationships were established between providers, including local authority and third sector providers, and childminders, to improve the quality of provision. For example, work was underway to create a shared outdoor community space that would enable childminders and nursery staff to come together, with their children, for shared learning experiences. In another trial, the positive and supportive relationships between the local authority and the providers within a blended model had contributed to the effective support for children and families within the trial delivery model.

• Implementing the new models had increased opportunities for professional learning and dialogue for practitioners. This had resulted in improvements as a result of staff teams developing a shared and consistent understanding of child development and pedagogy, including forest kindergarten/outdoor learning pedagogy.
4.3.2 Barriers to the successful delivery of high quality provision

In order to support the learning of others developing their expansion plans, local authorities involved in the trials shared openly the challenges they had faced. They shared evidence of the progress they had made in finding solutions, and were open about the work they still had to progress. Local authorities also recognised that in some instances, although they had successfully implemented strategies to address areas for improvement, their solutions were not scalable and further consideration was still required.

Aspects identified as potential challenges, which either had been, or were still to be overcome, in the successful delivery of high quality ELC within the trial delivery models included the following:

• In some delivery models children benefited from choosing from a menu of nutritious hot and cold options, and eating in an attractive and inviting setting. However in a number of delivery models there was scope to improve children’s mealtime experience. Areas for improvement included making the setting more inviting; providing appropriate furniture, a choice of meal on a daily basis and variety over time, and by considering approaches to the service of meals to support independence and social interactions.

• Where ELC was offered over two locations, including an off-site solely outdoor setting, there were some challenges. Providing shelter and warmth in some outdoor settings proved challenging due to local conditions. Dealing with official requirements such as planning and building control was time consuming and difficult. The inability to provide warmth and shelter affected the quality of children’s experiences, including restricting access to make and enjoy warm food. The lack of shelter and warmth outdoors also limited the allocation of outdoor provision to half a day. Some children who attended outdoor provision in the morning found it challenging to transfer to an establishment in the afternoon. Practitioners worked to overcome this by putting in place a range of strategies such as outdoor play on arrival at the afternoon location, and by providing time to relax in a separate nurture room, before moving into the playroom.

• Effective communication and joint working across settings and within staff teams, in relation to children’s care and learning needs was identified as an important area requiring further attention. For example, creating, developing and monitoring children’s personal plans, and tracking and monitoring children’s progress and achievement across the curriculum in different settings. Further consideration is required as to how best communication between settings to support children can be facilitated. This includes taking account of the working patterns of childminders.

• Ensuring that the professional learning needs of childminders were met. Local authorities reported that further consideration was required to ensure that sustainable and scalable models of professional learning are developed to support their expansion plans.

• Clear roles, remits, and expectations of providers required to be established. This was the case where the delivery model had resulted in expanded management team or where children attended more than one setting. These need to be communicated and understood by families as well as practitioners.

• To ensure safe working practices, providers within blended provision had to put in place consistent approaches, policies and procedures in relation to safeguarding and the sharing of information. Providers with no prior experience of the agreed approach required significant support to implement these requirements.

• Recruitment of high quality staff in rural areas has presented difficulties in some trial authorities. This includes the recruitment of staff to provision offering GME. This has resulted in some children learning through GME receiving less of their learning through Gaelic than had previously been the case.
4.4 Key considerations and next steps

The evaluation of the quality aspects of the 1140 hour trial delivery models by the Care Inspectorate and Education Scotland highlights a number of key considerations for local authorities in taking forward their expansion plans.

In relation to the quality of ELC provision, there was no single delivery model that could be identified as more effectively delivering high quality. Models reflected the needs of Scotland’s diverse communities and geography. Parents/carers, local community members, ELC providers, and local authority staff shared their experiences of working together over time to develop models which met the needs of local communities, children and families.

The evaluation highlighted the need for a continued focus on high quality professional learning for the existing and new ELC workforce as the expansion continues. The benefits of continued sharing of practice within and across local authorities as the expansion of ELC continues, were also evident. There requires to be a deliberate focus on the delivery of high quality provision for children and their families within this. The sharing of effective practice should draw not only on the experience of provision which is changing as a result of the ELC expansion policy, but also the high quality extended day and year provision which already exists in Scotland.

As increasing numbers of children attend ELC settings for longer periods of time, there is both the responsibility and opportunity to get it right for them. The evidence on the importance of high quality provision is clear. During the evaluation we saw evidence of settings that had evaluated their care and learning provision to ensure that they were making the most of the opportunities created by the expansion to improve the quality of their provision. These settings paid careful attention to a number of key characteristics of high quality ELC including focussing on the quality of their environments; the curriculum; play-based learning and outdoor learning. There is a challenge for all provision to ensure that it has a focus on continuous improvement throughout the expansion period and beyond, taking account not only of improving the way that things have been done in the past, but also in exploring those new opportunities that the expansion offers.
5. **PART B – Key findings from Scottish Government collated evidence**

5.1 **Capacity workforce**

Local authorities have a complex combined role as both providers and commissioners of services. Recruiting nursery staff and childminders presented some practical barriers within the relatively short trial timescales, however the trials uncovered some useful learning on the level of preparation and engagement needed within the workforce to ensure success.

For example:

- As providers, some trials based in rural local authority settings faced difficulties recruiting new staff for the expansion, and noted the importance of building sufficient time at the outset to address this challenge.

- Several trials mentioned the importance of engaging staff around changing existing patterns of work. In some cases, staff were required to take on shift systems for the first time or change contracts to move from term-time to year round employment. Problems were in some cases mitigated by ensuring that any new contracts met needs at the outset, rather than trying to adjust contracts already in place.

- Trials with childminder involvement noted the challenge of an inconsistent spread of childminders across the authority (very few or none in some areas of deprivation).

- Where outdoor learning or forest kindergartens were involved, local authorities were required to choose learning facilities on the basis of being a) existing local authority assets b) available for high quality outdoor learning environment all year round, and/or c) practical additions to the existing infrastructure. On the latter point, in one trial area, the installation of a geo dome\(^2\) meant that children could be offered an outdoor experience for a large part of the day.

- The offer of an outdoor experience proved attractive for parents/carers, and enabled the registration capacity of the nursery to be increased, with good uptake.

- Outdoor learning offers did present some workforce challenges however, including specific training needs, transportation issues for staff and the provision of suitable clothing for staff.

- For some expansion models, such as those offering ‘stay and play’ services, staff had to receive training and learn on the job how to provide a service to parents/carers as well as to children. While delivering this level of service was a challenge in terms of staff capacity, trial authorities spoke of the prospect for long-term benefits for child and parent outcomes as well as staff development.

- Where new and/or unqualified staff were part of the extended offer, some trials noted that experienced staff had to give a lot of time to mentoring and mitigate against any impact this might have on the quality of experiences for children.

- Several trials mentioned the benefits of partnerships with external providers and third sector organisations, in that staff had more opportunities for peer support, better learning and development opportunities, as well as a shared purpose and vision.

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\(^2\) A geo dome is a hemispherical thin-shell structure covered with sheeting made of plastic, plywood, metal etc.


5.2 Uptake

This section concerns the uptake of the additional hours on offer across trials. In particular, each of the trials were asked what they did to encourage uptake of the 1140 hours expansion, and to reflect on what did and did not work well in relation to uptake.

5.2.1 Methods of encouraging uptake

- Most trials used a combination of methods to advertise the trial to parents/carers and encourage them to take part. These included group meetings with parents/carers, one-to-one conversations, letters sent out to all eligible parents/carers, social media adverts/updates and leaflets.

- Many local authorities worked with other agencies or services to advertise the trial and recruit parents/carers. These included community groups, Homestart, Parent Groups, Health Visitors, Social Work Services, Early Years Scotland Staff, the Scottish Childminding Association and local community activists.

- In some cases, all eligible families within a certain area were targeted, or all families with eligible two year olds. In others, specific children or families were identified and approached directly.

5.2.2 Encouraging uptake – what worked well

- Many trials noted the success of building personal relationships with parents/carers, through face to-face conversations and one-to-one meetings.

- Question and answer sessions with parents/carers were frequently mentioned as a success, in order to address an array of concerns.

- Some trials offered morning, afternoon and evening meetings to accommodate all parents/carers.

- Help with application form completion was mentioned as being greatly appreciated by parents/carers, and in turn encouraged uptake.

- Parent questionnaires were conducted to better understand parental needs, and personalised feedback (e.g. evidence of children enjoying the programme) proved particularly successful.

- Several trials operated an open doors policy for the parents/carers to speak to staff all year round.

- Closed community social media groups for parents/carers worked well in a number of cases, where parents/carers were able to make requests of the local providers (often in relation to flexibility, changes in hours etc.).

- Several trials worked in partnership with other stakeholders to increase uptake. These local authorities reported that the approach helped them to understand how best to communicate the offer and to maximise the reach of their message. This was especially important for the trials aimed at eligible two year olds.

- All trials aimed to ensure parents/carers were made aware of the benefits of the trial for their child. To encourage uptake in eligible two year olds in particular, positive non-stigmatising language was seen as key, talking about positive benefits for the child as a result of early access to services.

- Giving parents/carers as much ownership as possible and a say in the offer was seen as a positive step by the trials. As a result, parents/carers felt they were involved in their child’s learning journey with the setting.
5.2.3 Encouraging uptake - what did not work well

- Several of the trials mentioned that more formal ways of approaching parents/carers, such as formal meetings, had not worked well, further evidencing the importance of personal and informal one-to-one conversations.
- For example, some authorities felt that parents/carers were very anxious and lacking confidence about attending a formal meeting.

Many of the trials mentioned issues with some parents/carers not fully understanding the offer, such as:
- Families not being aware of the eligible funding available for two year olds.
- Some families who were working with Social Work, misunderstood the offer to participate in the trial as increased scrutiny and monitoring of their parenting ability.
- Parents/carers being confused about whether the childcare would continue after the first year of the trial.
- Parents/carers not understanding different flexibility options and being overwhelmed by the different options.
- Parents/carers wondering whether children may miss certain parts of the curriculum by attending at different times.
- Parents/carers not realising that if they sign up it is not obligatory to send their child for the full 1140 hours all the time.
- Parents/carers avoiding certain hours (e.g. holiday provision) in the belief that it would not be popular so they would not be able to get those hours anyway.

5.2.4 Reasons for not wanting to take up the 1140 hours offer

In addition to the above learning on uptake, trials reported the following reasons for why parents/carers did not want to use 1140 hours of funded childcare:
- Parents/carers said they simply didn’t need the childcare, especially those who did not work.
- Parents/carers were concerned that there was a hidden agenda, e.g. if they took up their entitlement, something would be expected of them, such as a return to work.
- Some parents/carers thought their children, especially two year olds, were too young to be in ELC or to be in ELC for as many as 1140 hours.
- Some families felt that they required time to build relationships and trust with the setting and staff before increasing to 1140 hours of ELC.

5.3 Flexibility

The trials offered varying degrees of flexibility in opening hours, ranging from specific hours to bespoke models offering parents/carers whichever hours they needed. The sections below outline the flexibility offer in more detail, with findings on what did and did not work well.

5.3.1 Offering flexibility - what trials did

- Several trials arranged flexibility by offering extended nursery opening hours, some by working with childminders who offer flexible hours, and others by offering a blended model in which children spent set hours in nursery with childminder flexibility around those hours.
- Some trials offered additional hours above the 1140 for payment.
- While a number of trials offered term-time provision only, most offered year-round care.
• Some trials offered an asymmetric week in line with school provision in their area.
• Several nursery-based trial models offered specific hours, while others first consulted with groups of parents/carers on which opening times they would prefer, and gradually adopted the patterns identified as most suitable.

5.3.2 Offering flexibility - what worked well
When asked what worked well in terms of delivering flexibility, trials mentioned the following:
• Consulting with parents/carers on which hours they would prefer, with some trials discovering that parents/carers did not want extremely early, late or long opening hours.
• Trials working with childminders were able to deliver a higher level of flexibility or a completely open-ended offer to parents/carers, given that some childminders did not have set times in the way that nurseries do.
• Changing operating models to accommodate all-day, all-year provision. For example, one trial shifted staff from term-time only contracts to year-round contracts, and as a result were able to offer parents/carers the option to choose the days and hours they need. The authority reported that this model worked well for offering flexibility at a large scale and supported best use of existing capacity within a setting.

5.3.3 Offering flexibility - what did not work well
Trials mentioned the following as not working well in terms of offering flexibility:
• A lack of interest in e.g. early or late hours meant that offering those hours became very expensive per child, especially in more rural areas.
• Low uptake over the holidays made holiday provision unsustainable in some cases.
• Staff unwillingness to move to year-round contracts proved difficult for some trials.
• Offering fully flexible provision (with both nursery and childminder) was very expensive given that, for these trials, it required paying for more childminder hours than was being used, to retain the place and accommodate parents/carers’ variable work shift patterns and holidays.
• Contrary to the finding above, where a change in staff operating model resulted in flexibility and best use of capacity, some trials felt that it may be difficult to maximise their capacity as a result of being as flexible as possible. A concern was that the offer would need to become less flexible as uptake increased.

5.4 Scalability
Several trials are continuing to provide the expanded 1140 hours provision, with a view to scaling up the offer. Various learning points are laid out below.

5.4.1 What worked well for scaling up
• A number of trials based around extended nursery opening hours found they were able to secure the necessary staff hours to provide more flexible opening hours and parent uptake of provision for three and four year olds, and have already started to roll out the trial in other areas, or plan for such a roll out.
• In one large Local Authority, over 50% of the council settings and nearly half of staff are on all-year contracts, and the experience thus far is that this staffing model works well for offering flexibility at a large scale, and that all-year flexibility is not necessarily more expensive.
• One of the trial models offering outdoor learning achieved high uptake and increased capacity for 1140 hours, at manageable costs. Learning from this trial suggests that outdoor sites need to be within walking distance from an ELC centre, and that more training for all staff should be provided about the philosophy and approach of the model. The original trial site will continue to offer an outdoor experience for two nurseries closer to the site. This limits the need for some of the transport costs as children are brought to or collected from the site by their parents/carers.

• Another trial authority are exploring options for more nurseries within the local area to have a geo dome attached, enabling the council to maximise capacity of some nurseries.

• In both examples, solutions have to be explored to overcome practical issues such as the supply of quality outdoor clothing, lunch provision and staffing.

5.4.2 What did not work well for scaling up

As mentioned previously, trials offering fully flexible bespoke ELC provision around parents/carers’ needs (including shift working patterns) with both nursery and childminders, report that the model requires intensive support to sustain, and is very expensive. This is because they have to pay for hours beyond what is actually used by parents/carers to retain the place with the childminder.

Several trials commented very positively about working with childminders, with one for example noting the benefits of home-based care, the intimacy of the relationships as opposed to establishment care, and the creation of new community connections that happen by parents/carers and childminders getting to know each other. However, a small number of trials working with childminders noted the following challenges related to scaling up these models:

• The uptake of childminder offers has tended to be lower than other trial offers, although this may be due to parents/carers being less informed on this type of provision.

• Local authorities will need to consider how to assess the quality of blended nursery and childminding offers.

• There may be difficulties associated with recruiting large numbers of childminders, and there may be an uneven spread of childminders across local authorities, with a lack of services in the most deprived areas.

• Childminders will often need to balance paid places and funded places. This may be a problem in a blended model which requires childminders to transport funded children to or from a nursery setting.

• Childminders may need access to transport if such a blended model is to work, depending on location, or the Local Authority has to fund transport costs.

5.5 Child/parent outcomes

Some anecdotal evidence on child outcomes was collected during structured conversations with trial leads, and this largely echoes the findings from the Care Inspectorate and Education Scotland visits. For example, trial practitioners reported that:

• The increase in hours resulted in more time for richer learning, with some trials observing an increase in social skills as a result of two, three, and four year olds learning together.

• Children develop stronger friendship bonds with peers/staff as a result of spending more hours together.

• Some parents/carers of children in trials spoke of having more time to do other things, e.g. return to work, adult learning, hobbies etc.
• As a result of spending more time in ELC settings, children are more aware of and caring towards their environment. They have a sense of belonging, and are more prepared for transitions through nursery and into school.

• While some trials found that children can be tired in the afternoon and more difficult to engage, the same trials noted the positive impact of consistency through longer sessions for children with challenging behaviour.

• Through formal and informal feedback from parents/carers - children attending outdoor provision as part of the expansion were sleeping and eating better, and their confidence, knowledge about nature, physical wellbeing and ability to care for their belongings had improved.

• Children in trials with outdoor provision, were helping parents/carers become more interested in the outdoors and live a healthier family lifestyle.

6. Conclusions

The evaluation sought to gain a better understanding of issues and experiences related to the delivery of 1140 hours of ELC. It did not aim to provide an evaluation of 1140 hours on child and parent outcomes or to predict what will happen once the expansion has been rolled out. It does however, provide a useful source of evidence drawn from a range of sources that highlights some of the positive benefits, the challenges and learning points that can be used to inform the next steps in the delivery process.

Regarding the positive benefits, evidence provided within the report highlights the following:

• A number of trials were able to demonstrate positive and nurturing relationships between staff, parents/carers and children, with some reporting fewer child absences from their ELC provider. In particular, family workshops were reported to be having a positive effect on parents/carers’ ability to support their child’s learning at home.

• Parents/carers tended to speak positively about the perceived impact of the extended hours on their child’s learning and behaviour through increased access to opportunities including access to outdoor learning.

• Staff reported increased opportunities for improved partnership working and community capacity building as well as enhanced opportunities for professional learning and leadership roles.

The evaluation also highlights some useful learning which can support future delivery as the expansion is rolled out, including:

• Clear and meaningful communication to parents/carers on the positive benefits of the funded entitlement for their children is key, alongside clear process guidelines on how to register and reassurance on what take up of the entitlement means for them.

• A continued focus on high quality professional learning for the existing and new ELC workforce is essential. Sufficient time should be built in to recruit qualified staff, and continued engagement with the workforce is important when changing work patterns to accommodate additional hours

• Several trials commented very positively about working with childminders, however time should be built in for recruitment, logistics planning and communicating the offer to parents/carers to increase uptake.

• Consulting with parents/carers on the flexibility of the offer gave them a positive sense of ownership over the provision, and in some cases revealed that certain offers may not be popular and therefore not viable.
• There are clear benefits of continued sharing of practice within and across local authorities as the expansion of ELC continues, as well as a focus on continuous improvement throughout the expansion period and beyond.

7. Acknowledgements

The Early Learning and Childcare trials were facilitated and supported by a large number of individuals and organisations, working in collaboration to produce this report. The Scottish Government are particularly grateful to the many colleagues in local authorities and partner providers who enabled and delivered each of the trials, and the local trial leads for participating fully in all data gathering exercises. Thanks also to the trials team seconded to the Scottish Government (Jackie Brock, Heather Douglas, Kenny Forsyth, Aileen McLean), the Care Inspectorate, and Education Scotland for their valued contributions and support throughout.
Annex A – Summary of the 14 ELC expansion trials

1. **Angus**
   This trial looked at the conversion of a small nursery class to focus on outdoor learning and increasing the capacity of the nursery. It saw provision move from part-time to a full-day model, within the school day (9am to 3pm). Linked childminders provided before and after-care if needed. It featured community consultation to support development of the project.

2. **Argyll and Bute**
   This trial worked with existing provision to extend from part time to full-day ELC for two to five-year-olds. Additional hours were made available through local childminders. Working with a Community Trust, this project also developed holiday care.

3. **Dumfries and Galloway**
   This trial expanded current term-time ELC provision to full-day, all-year-round provision. A partner-provider setting provided greater flexibility for parents/carers. Further flexibility was provided by childminders, who were commissioned to provide additional hours in a combined model where needed.

4. **Dundee**
   This innovative project trialled combined ELC provision, utilising childminders, for eligible two-year-olds. It specifically targeted children at risk of being placed on the child protection register or who were newly placed on the register, and developed holistic referral and monitoring processes for those children.

5. **East Ayrshire**
   This trial built on an existing community childminding model and provided combined ELC provision with childminders for eligible two-year-olds. Childminders were linked to local nurseries to maintain consistency for children.

6. **Eilean Siar**
   This project trialled extending morning-only, term-time nursery provision to full-day, year-round provision for two to five-year-olds. The extended provision was integrated with out-of-school care to meet whole family needs and improve sustainability in a remote and rural community. It also planned to develop the provision of parenting support alongside the ELC, all in one place.

7. **Glasgow**
   Glasgow trialled a new staffing model to increase flexible access. This project, in an area of high deprivation, provided a blended model of provision with childminders working with the nursery to provide part of the child’s ELC experience.

8. **Midlothian**
   This trial extended an existing family learning centre approach. It employed local childminders and brought together services for under sixes and out-of-school care, as well as health and family support services in the area.
9. **North Ayrshire**
This project focused on an area of high deprivation and linked provision of ELC to local employability services, aimed at helping parents/carers to access employment, training or education. It used a customised model of ELC to suit individual family needs, and parents/carers were able to choose from the local authority nursery, registered childminders, local private partner nursery, or a combination of any of these services.

10. **Shetland**
This project featured a community consultation on a flexible model of ELC provision. It increased hours within an ELC setting to full-day provision. It also established commissioning arrangements with private providers and childminders.

11. **South Lanarkshire**
South Lanarkshire’s trial featured a combined model of ELC provision, with registered childminders working with a local Children’s Centre. It focused on an area of high deprivation, and childminders were used to support parents/carers in outlying communities. This support included programmed participation of children and childminders in the nursery, time spent by the child at the nursery, and time spent by the child at the childminder’s home.

12. **Aberdeen**
This project trialled a new and innovative approach to providing ELC for eligible two-year-olds. It was based on the existing model of Stay and Play delivered by Early Years Scotland, which is built on parental engagement being pivotal to achieving positive outcomes for children, especially for children and families experiencing disadvantages. Unlike existing services for eligible two year olds, where a general period of settling in is planned, the model offered parents/carers the opportunity to stay and play.

13. **Scottish Borders**
This trial built on existing provision where some wraparound existed, but where parents/carers were previously required to pay. The trial offered an increase in the number of hours of ELC provided Monday to Friday during term time. ELC provision was also offered during holiday periods to meet parental demand. The trial explored how ELC could be delivered holistically and integrated with other services, including the out-of-school club and the Early Years Centre.

14. **Edinburgh**
This project looked to extend two nursery settings within Edinburgh through the establishment of outdoor nursery provision in the form of a nature kindergarten. The trial targeted nurseries in areas of high deprivation. Additional hours were offered to pre-school children (four-year-olds) to minimise disruption on conclusion of the trial.
Annex B – Care Inspectorate/Education Scotland Local Authority Self-Evaluation Position Statement (SEPS) template

Education Scotland and Care Inspectorate

Impact review evaluating the quality of the Early Learning and Childcare (ELC) trials of delivery model for 1140 hours.

Local Authority Self-evaluation Position Statement (SEPS)

What we will ask you to do before the visit by Education Scotland and the Care Inspectorate

The local authority contact for trials in your area should complete this SEPS and submit it to Education Scotland. The SEPS will form the basis of the discussions which we will have during our visit.

We will contact the named education authority officer directly to agree a date and time to visit the authority. This will include arranging visit/s to a sample of settings involved in the trial. It’s important to note that this is not an inspection but is an evaluative visit to provide helpful information to support the ELC sector as it moves towards 1140 hours ELC. On the visit we will explore how well your specific delivery model is working to provide high-quality ELC and any barriers you’re experiencing in delivering high-quality ELC within the new model. We will work with you to identify, what is working well, what could be improved and any barriers that exist or that you have overcome. It will be really helpful if you can be as honest as possible as your feedback will enable us to inform the wider expansion programme. As part of our work, we will also consider the evidence that you have to support your views of the model and what difference it is making to children and families. This may include for example observations over time, and tracking and monitoring information. Information provided may also help us to gather learning to improve the Care Inspectorate’s registration and variation processes (section 2).

Please use this document to highlight key aspects of your trial delivery model as it will form the basis for discussion with members of the Education Scotland and the Care Inspectorate team undertaking the visit.

Please return the completed SEPS to sian.neil@educationscotland.gsi.gov.uk by cob 16 February 2018.
You are asked to focus on:

• what is working well in your delivery model for delivering high-quality ELC;
• the quality of educational experiences and care for children; and
• any barriers to providing high-quality ELC and how these have been overtaken.

Please keep your responses clear and concise. You may prefer to use bullet points. How good is our early learning and childcare? (HGIOELC?) and the National Care Standards may be used as a reference to support your evaluation. The questions link to HGIOELC? QI 2.6 Transitions, and QI 3.2 Securing Children’s Progress and Care Inspectorate Quality Themes Care and Support, Environment, Staffing and Management.

Section 3 examples
In what ways and to what extent has the model had on children’s wellbeing? Consider relationships, attachment, transitions and continuity of care for children.

• Changes to the start and finish times of the session allow increased time to share information about the child’s session. As a result parents/carers have reported in questionnaires that they have improved relationships with staff and in particular with their child’s key worker and as a result children’s care needs are being met more effectively.

• Continuity of care has improved for children. As a result we have observed that children feel more secure, and settle more quickly into their time within the setting.

In what ways, and to what extent has the model had on the quality of educational experience for children?

• As a result of children attending for an increased number of hours they are becoming increasingly confident, resilient and independent learners. Staff have an increased knowledge of the children as individual learners and are using this information to build more effectively on their prior learning to ensure they make the progress they are capable of.
### Education authority:

Key local authority contact, name and email address:


### Detail of setting/s included in trial:

(names, opening hours and length of year, type of provision, age range)


### Details of delivery model

Please provide brief details of the changes in your service delivery as a result of the trials.


Describe **briefly** the main **quality** aspects of your delivery model that are working well:


Describe **briefly** the main **quality** aspects of your delivery model that you would like to improve:
### Section 1 – General

How do arrangements for protecting children and young people, within and across the trial delivery model, take account of [National Guidance for Child Protection in Scotland | 2014](#) (Please focus on those aspects of your service delivery distinct to the trial – for instance what are the arrangements for children attending on blended placements, or services not previously commissioned by the local authority.)

### Section 2 – Staffing

In what ways, and to what extent has the model had on staff deployment and roles?

In what ways, and to what extent have any staff changes had on outcomes for children and families? Consider recruitment, qualifications, skills and experiences.

### Section 3 – Care Inspectorate registration and variation process

In what ways and to what extent did the Care Inspectorate’s variation or registration process (where required) have on the delivery of the model? Could the process be improved to reduce potential barriers? Consider timescales, expectations and communications.

### Section 4 – Outcomes for children and families

For the following questions please include both what is working well, changes which have had a positive effect, as well as the challenges or barriers which exist or have been overcome, or changes which have had a negative effect.

In what ways, and to what extent has the model had an effect on children’s wellbeing? Consider relationships, attachment, and continuity of care for children.

In what ways and to what extent has any change to the environment had an effect on the delivery of the model and meeting children’s needs? Consider resources, accessibility, choice and risk.

In what ways, and to what extent has the delivery model had an effect on the quality of educational experience for children?

In what ways, and to what extent has the delivery model had an effect on the quality of experience for families?
In what ways, and to what extent has the delivery model had an effect on children becoming increasingly confident, resilient and independent learners? Has it affected how well practitioners know children as learners and the progress they are making?

In what ways, and to what extent has the delivery model had on those with protected characteristics and those who are impacted by socio-economic disadvantage?

In what ways, and to what extent has the model had an effect on transitions? This includes all types of transition, including:
- into the setting;
- during the ELC session;
- where there are shared placements; and
- when moving onto a new setting/school.