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EXECUTIVE SUMMARY

Background to the research

mruk research were commissioned by The Care Commission (CC) and HM Inspectorate of Education (HMIE) to carry out research to evaluate the integrated inspection procedures in early years centres. The principal aim was to evaluate the inspection process from the perspective of parents, providers and local authorities and umbrella organisations.

Key issues arising from research with parents

A self completion approach was adopted with parents. 500 questionnaires were distributed to parents and carers via 20 early years centres. Parents received a questionnaire which would have taken 5-10 minutes to complete, and a FREEPOST return envelope to mruk research. A response rate of 32% (164 questionnaires) was achieved.

Parents’ perceptions of the process were generally very positive. The awareness of the inspection taking place was high (91%), and the inspection itself was seen as important (93%).

The inspections were not perceived to have made a dramatic difference to care and education as most parents felt they had seen their early years centre in a positive light even before the inspection. However improvements across a number of areas had been identified ranging from 22% of respondents stating that ‘encouraging healthy eating’ improved to 8% seeing better links with local schools (see table 2). Of the parents who responded to the question asking whether any other improvements had been noted after the inspection, 8% of the total sample of 164 responded i.e. 30 respondents. 50% of this subset noted additional improvements having been made with around a further third feeling that there had been no additional improvements (29%) and a fifth (19%) perceiving that previous high levels had been maintained (see table 3).

Parents generally felt happy in relation to their access to information about the inspection. Most respondents had either been given a copy of the inspection report (79%), or knew they could access it in the nursery (34%). A smaller proportion had a desire to be more involved in the next inspection than they had been in the last one (13%). However, there was a high level of interest in being able to fill in a questionnaire about the nursery (87%). At present, all parents of children attending centres that had an integrated inspection would have had a questionnaire. Where a centre had a singleton inspection, a sample of parents would have had a questionnaire. There was also interest among 74% in being able to submit comments to the inspection team. Although the current report format is brief there was interest in a summary being available (75%).
There was a desire among all parents for information to be provided to them after the inspection. A high proportion of respondents did not think nurseries should be given advance warning before an inspection took place (65%).

Key issues arising from research with providers

Previous self-completion research had been carried out by HMIE using their own questionnaire with providers who had had an integrated inspection. Approximately 1,000 forms had been received. In addition, mruk adapted the questionnaire to be used with a further 964 centres who had had a singleton inspection. Again, respondents received a questionnaire and FREEPOST envelope addressed to mruk. A response rate of 39% (372 completed questionnaires) was achieved. mruk analysed both sets of the comments from providers.

A wide range of providers was included in the research in terms of size, type and geographic area. There were few significant differences between centres that had a singleton or integrated inspection.

The vast majority of those who had a singleton inspection thought they had received the following; self evaluation form (99%), questionnaires (97%) or briefing notes (96%). A smaller proportion of singleton inspected centres remembered being telephoned (80%). It is worth noting that where a phone call had been received it was usually seen as more useful than the written pre-inspection information. Those centres having an integrated inspection currently all receive a phone call pre inspection.

Pre-inspection information was certainly clear in that the vast majority of those who had a singleton inspection knew what to expect by way of the names and number of inspectors. There were 62% who had been told how much staff time would be required, and a small minority were consistently dissatisfied with a number of timing issues.

The pre-inspection forms were rated positively in terms of their suitability and clarity regardless of whether they had a singleton or integrated inspection.

Those who had a singleton inspection generally felt the requirements made of them were reasonable (92%). Those who had singleton (87%) or integrated (83%) inspections were also satisfied with the level of demand on staff.

In total 12% of singleton respondents and 9% of integrated respondents were dissatisfied with the full range of services being inspected. Most thought the methods and procedures employed were suitable (93% of singleton respondents and 81% of integrated respondents).

Quality of feedback was rated positively for those who had a singleton inspection (91%) or an integrated inspection (85%).
Overall respondents to both surveys gave positive ratings in relation to efficiency (95% singleton and 86% integrated) and helpfulness (91% singleton and 87% integrated).

Key issues arising from research with the Local Authority and Umbrella Organisations group

An important area of the research was qualitative research with a group drawn from local authorities and umbrella organisations. This target included Directors of Education (or others strategically involved) and Quality Improvement Officers (or similar) from local authorities as well as a number of umbrella organisations supporting early years centres. A total of 51 in-depth interviews were carried out using a pre-agreed topic guide. Each interview lasted about 30-40 minutes.

The local authority and umbrella organisations’ opinions were fairly consistent regarding the perceived key benefits of the new integrated inspection process. The inspections were perceived to raise the status of the early years sector, increase the emphasis on care and generally contribute towards creating consistency in both education and care provision. For the first time, it was felt that early years centres were being evaluated in relation to the whole child.

The ethos of the inspections was perceived to ensure quality provision, and about two thirds thought standards had already risen in an ongoing cycle of improvement.

The inspections were seen to be working towards consistency which was a significant challenge in this sector. Certainly the inspections provided a framework for all centres to work towards. The independence of the inspections was commonly believed to help local authorities push forward improvements in partner providers.

Inconsistency in approach was perceived to be an issue for both Care Commission and HMIE inspectors, although the majority of criticism was aimed at the former. In addition, there were perceived inconsistencies regarding reporting styles in terms of recommendations made and the aspects commented upon during inspections.

The frequency of inspection was also a key issue, with a significant majority of the opinion that there were simply too many inspections at present. It was felt that the current timetables of integrated and singleton inspections were placing centres and local authority staff under pressure, and the suggestion was made that a more proportionate approach according to need could help to alleviate the burden.

Finally, there was a need identified for improved cohesion and ‘integration’ in the approaches of HMIE and the Care Commission in integrated inspections. HMIE was considered to have a child centred approach based on quality improvement, whilst the Care Commission was considered to focus on minimum standards. This perceived lack of consistency was not surprising given the two organisations’ different cultures, priorities and goals. Therefore, it was no surprise that it was difficult for them to come together
seamlessly as a single inspecting unit. As the two organisations worked together, it was expected and desired that they would work more closely rather than in parallel.

Overall about three quarters were quite positive about the reporting information from inspections. This enabled local authorities to identify trends and themes. In some instances the reports had also been helpful and motivational for staff.
1. Introduction & Background

1.1 Introduction

mruk research was commissioned by The Scottish Commission for the Regulation of Care (The Care Commission) and Her Majesty’s Inspectorate for Education (HMIE), to carry out research to evaluate the integrated inspection procedures in early years centres.

This report outlines the background and objectives of the research, the method used to meet those objectives and the research findings.

1.2 Background

The Care Commission is a Scotland-wide organisation set up under the Regulation of Care (Scotland) Act 2001 to regulate and inspect Scottish care services. Prior to April 1st 2002, the regulation of care services was carried out by registration and inspection units covering 32 local authorities and 12 health boards, all operating to different standards and procedures.

HMIE is an Executive Agency of the Scottish Ministers under the terms of the Scotland Act 1998. Among HMIE’s responsibilities is the inspection of nursery establishments that provide education to ensure that they meet the appropriate standards. Services that are in partnership with local authorities and receive funding to provide early years education are, therefore, subject to inspection by HMIE.

The main focus of this research was local authority nursery classes, nursery schools and private and voluntary centres working in partnership.

Under the Regulation of Care (Scotland) Act 2001, the Care Commission and HMIE are required to “collaborate in matters relating to the regulation and inspection” of designated child care services. In this instance, this includes school care accommodation services, secure accommodation services and facilities providing day care to children with an educational provision.

A transitional programme of integrated inspections began in April 2003, and over a 3 year period each service would be inspected 3 times:

- once using a joint inspection approach;
- twice by Care Commission Officers only.
By the end of the last financial year (04/05), 1,490 establishments had undergone an integrated inspection. There are approximately 900 organisations not subject to a joint inspection until the financial year (05/06) but they will have undergone singleton Care Commission inspections under that body’s statutory obligations.
2. **Research Objectives**

The principle aim of the research was to review and evaluate the current integrated inspection process. The project objectives included the following:

- To examine participants’ experiences of the integrated inspection method;
- To consider the benefits of the inspection processes, establish specific areas where they could be improved and identify how those improvements could be made;
- To gather the experiences of parents, local authorities, umbrella organisations and providers.
3. Research Methodology

There were a number of audiences to be considered within this research:

- Parents and carers of children aged 3 – 5 years;
- Providers (private and local authority nurseries and playgroups);
- Local authority and umbrella organisations (including Directors of Education, local authority Quality Improvement Officers, and umbrella organisations such as Scottish Independent Nurseries Association, Scottish Quality Nursery Association and Scottish Pre-school Playgroup Association).

These audiences required different methodologies in order to carry out an in-depth and robust consideration of their experience.

3.1 Parents and carers – self-completion survey

It was felt to be important that the research with parents provided a quantitative measure of parents’ and carers’ experience. After the initial briefing meeting, HMIE and Care Commission decided to implement a self-completion method similar to that used by HMIE in the past. This involved gaining the co-operation of a range of early years centres and enlisting their help to distribute questionnaires to parents.

After the briefing meeting mruk developed a structured questionnaire based on the objectives and information requirements. This was estimated to take about 10 minutes to complete and consisted of mainly closed questions. The questionnaire was subject to HMIE and Care Commission input and approval prior to the research commencing.

In the past HMIE had found that this approach generated a positive 60% response rate. Therefore it was decided that 500 questionnaires should be distributed, with a view to achieving a sample of about 300 interviews. A sample list of 20 centres was provided by HMIE. mruk then wrote to the early years centres and enlisted their help before sending a batch of questionnaires to the providers for distribution. The 20 centres included a reflective mix of all types of early years centres and a series of locations in urban and more rural areas of Scotland. Packs of questionnaires were sent to each centre with full instructions on distribution to avoid bias. For example, the parent of every ‘nth’ child attending would receive a questionnaire.

After distribution one early years centre decided not to participate and sent back the questionnaires. Another provider was recruited to distribute these questionnaires, they advised mruk that they had handed out the packs, however it is notable that no questionnaires were returned from this centre.
Questionnaires were returned to mruk for analysis using SPSS. The response rate was not as high as previously when HMIE had used this approach. At 32% the response rate was fairly typical for most self-completion research. This lower response rate could be attributable to the fact that the questionnaires were not part of an inspection, and were perhaps deemed by parents to be less important.

3.2 Providers – postal survey

For consistency, HMIE and Care Commission chose to implement a tried and tested self-completion approach.

Self-completion research had already been carried out by HMIE with those who had received an integrated inspection, and approximately 1,000 forms had been returned. The data was provided to mruk and transferred to SPSS. Open ended responses were captured verbatim, and mruk carried out analysis to group these responses together.

There were a further 964 centres which had only received a Care Commission inspection. The previous questionnaire was refined and adapted for use with these providers.

A sample list was provided to mruk by Care Commission. Although the questionnaire was sent to someone at managerial level, they were asked to consult their staff before completing the form.

Once approved, mruk research distributed all questionnaires with FREEPOST envelopes for return to our offices. In total 372 completed forms were received, giving a response rate of 39%.

All questionnaires were analysed using SPSS for Windows by our in-house Data Processing Department.

3.3 Local authorities and umbrella organisations – depth interviews

A qualitative approach was adopted with the Local authority and umbrella organisations, to allow us to develop a sound understanding of perceptions about the integrated inspections.

A depth interview approach was deemed most appropriate as it allowed respondents from all over Scotland to participate in the research. All local authorities were invited to take part in the research. This included Directors of Education and Quality Improvement Officers or similar. For each authority we aimed to achieve an interview at a strategic and operational level. Where this was not achieved this was most often as a result of refusal to participate, but there were one or two cases where we were simply unable to get access to senior people in order to set up an interview.
There were also a number of umbrella organisations and other interested parties who were invited to take part in the research.

HMIE and The Care Commission wrote to Directors of Education and umbrella organisations giving them background information about the research, requesting their assistance and advising them that they would be contacted by mruk. The Directors of Education were also asked to nominate another person in their authority at an operational level to participate in the research.

In a number of instances these letters were not received, and mruk emailed blank copies of the letter. We then made contact by phone to set up appointments and note the nominated other respondents. As anticipated this was a long process due to the difficulty in gaining access to such senior staff. However, appointments were set up and depth interviews were carried out over May and June 2005. Interviews were conducted using a pre-agreed semi-structured topic guide. Each lasted 30-40 minutes.

A total of 51 in-depth interviews were conducted via the telephone. It is worth noting that most interviews were achieved after around 5 set up calls. Other appointments were set up and not kept by respondents. Importantly, all the potential respondents were given multiple opportunities over a month long period to participate in the research. The following tables detail the structure of the sample.

There were a very small number of potential respondents who refused to participate in the research. This was only true of a few strategic council respondents, most of whom felt they didn’t know enough about early years to answer any questions. Most of those we did not achieve interviews with were simply hard to reach and we communicated only via PA’s. We were unable to interview all of the umbrella organisations some of which declined to take part and others that did not make a representative available to us.
## Organisations Which Participated

<table>
<thead>
<tr>
<th>Strategic Council (18)</th>
<th>Operational Council (27)</th>
<th>Umbrella/Other (6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aberdeenshire</td>
<td>Aberdeen City</td>
<td>Renfrewshire Independent Nursery Forum</td>
</tr>
<tr>
<td>Argyll and Bute</td>
<td>Aberdeenshire</td>
<td>Scottish Pre-School Play Association</td>
</tr>
<tr>
<td>Clackmannanshire</td>
<td>Angus</td>
<td>ADSW</td>
</tr>
<tr>
<td>Dundee City</td>
<td>Argyll and Bute</td>
<td>Care Share</td>
</tr>
<tr>
<td>East Ayrshire</td>
<td>Clackmannanshire</td>
<td>ADES</td>
</tr>
<tr>
<td>East Dunbartonshire</td>
<td>Dumfries and Galloway</td>
<td>Montessori</td>
</tr>
<tr>
<td>East Lothian</td>
<td>Dundee City</td>
<td></td>
</tr>
<tr>
<td>Edinburgh City</td>
<td>East Ayrshire</td>
<td></td>
</tr>
<tr>
<td>Falkirk</td>
<td>East Dunbartonshire</td>
<td></td>
</tr>
<tr>
<td>Glasgow City</td>
<td>East Renfrewshire</td>
<td></td>
</tr>
<tr>
<td>Highland</td>
<td>Edinburgh City</td>
<td></td>
</tr>
<tr>
<td>Inverclyde</td>
<td>Fife</td>
<td></td>
</tr>
<tr>
<td>North Ayrshire</td>
<td>Inverclyde</td>
<td></td>
</tr>
<tr>
<td>North Lanarkshire</td>
<td>Midlothian</td>
<td></td>
</tr>
<tr>
<td>Orkney</td>
<td>Moray</td>
<td></td>
</tr>
<tr>
<td>Perth and Kinross</td>
<td>North Ayrshire</td>
<td></td>
</tr>
<tr>
<td>Renfrewshire</td>
<td>North Lanarkshire</td>
<td></td>
</tr>
<tr>
<td>Scottish Borders</td>
<td>Orkney</td>
<td></td>
</tr>
<tr>
<td>Shetlands</td>
<td>Perth and Kinross</td>
<td></td>
</tr>
<tr>
<td>South Ayrshire</td>
<td>Renfrewshire</td>
<td></td>
</tr>
<tr>
<td>South Lanarkshire</td>
<td>Scottish Borders</td>
<td></td>
</tr>
<tr>
<td>Stirling</td>
<td>Shetlands</td>
<td></td>
</tr>
<tr>
<td>Western Isles</td>
<td>South Ayrshire</td>
<td></td>
</tr>
<tr>
<td></td>
<td>South Lanarkshire</td>
<td></td>
</tr>
<tr>
<td></td>
<td>West Lothian</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Western Isles</td>
<td></td>
</tr>
</tbody>
</table>
The following table details the job titles of participants from local authorities. We cannot identify which council respondents were from or how many had a particular title to ensure anonymity.

**Job Titles of Participants from local authorities**

<table>
<thead>
<tr>
<th>Strategic Council</th>
<th>Operational Council</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director of Education</td>
<td>Early Years Officer</td>
</tr>
<tr>
<td>Director of Education &amp; ‘Other’</td>
<td>Principal Officer, Early Years</td>
</tr>
<tr>
<td>Assistant Director of Education</td>
<td>Head of Inclusion &amp; Early Education</td>
</tr>
<tr>
<td>Head of Community Support</td>
<td>Pre-school Development Officer</td>
</tr>
<tr>
<td>Head of Education &amp; ‘Other’</td>
<td>Service Manager</td>
</tr>
<tr>
<td></td>
<td>Operations Manager Childcare</td>
</tr>
<tr>
<td></td>
<td>Early Years &amp; Childcare Manager</td>
</tr>
<tr>
<td></td>
<td>Education Officer</td>
</tr>
<tr>
<td></td>
<td>Service Improvement Officer</td>
</tr>
<tr>
<td></td>
<td>Early Years &amp; Pre-school Manager</td>
</tr>
<tr>
<td></td>
<td>Quality Improvement Officer</td>
</tr>
</tbody>
</table>
4. Research Findings – Parents and Carers

This section of the report will consider the findings of the research in relation to parents and carers.

It should be noted that non-responses have been removed for each question to prevent them from affecting the findings. Given the small sample size it is not possible to compare sub-groups.

4.1 Profile of the sample

The profile of the parents who responded to the self-completion survey was to some extent dictated by the nature of the nurseries selected to participate in the research. Every effort was made to ensure that a mix of nurseries in terms of urban/rural, private/local authority etc was included in the research.

Of the 164 parents who responded, the majority lived in an urban area (77%). The following chart details the type of early years centre attended by the respondents’ children. The largest proportion of respondents had a child or children who were in a nursery class within a local authority primary school (54%). Almost a fifth (18%) had a child or children attending a private nursery and a further 12% had a child or children attending a nursery school.

![Figure 1: Type of pre-school centre](chart.png)

Base: 164
Source: mruk research, June 2005
Most parents and carers had only one child at the early years centre (89%). Additionally, 9% had 2 children and 1% had 3 or more children at the early years centre.

The majority of respondents were mothers (91%) with a smaller proportion being fathers (8%) or other carers (1%).

The following chart details the respondents’ employment status. Almost two thirds (65%) were in some form of employment, and a further 31% were looking after family and home.

This profile differs significantly from the profile of the Scottish population as a whole. In particular, none of the respondents were unemployed.

Figure 2: Employment status

Base: 160
Source: mruk research, June 2005
The qualifications held by parents were also at a notably higher level than the general population, with 59% having had a further or higher education.

Figure 3: Qualifications held

<table>
<thead>
<tr>
<th>Qualification Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>1%</td>
</tr>
<tr>
<td>Qualifications from school</td>
<td>28%</td>
</tr>
<tr>
<td>Vocational / on the job qualifications e.g. SVQ</td>
<td>15%</td>
</tr>
<tr>
<td>Further education e.g. HNC, HND</td>
<td>32%</td>
</tr>
<tr>
<td>Higher education e.g. Degree, Post Graduate</td>
<td>27%</td>
</tr>
</tbody>
</table>

Base: 160
Source: mruk research, June 2005
4.2 Awareness and experience of the inspection

The vast majority of respondents knew that there had been an inspection in their early years centre in the last year (91%). Awareness of the inspection was even higher for the small number of respondents with children attending family centres or in the voluntary sector, where all were aware of the inspection.

The respondents who were aware of the inspection were asked which of the four things detailed in the following chart had happened during the inspection. Most parents had been told verbally that the inspection was taking place (76%). Almost two thirds had been given written information about the inspection (64%). In addition, 45% had been asked to fill in a questionnaire about the inspection and 13% had been spoken to by someone from the inspection team.

Figure 4: What happened during the inspection?

<table>
<thead>
<tr>
<th>Event</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>The nursery told me verbally the inspection was taking place</td>
<td>76%</td>
</tr>
<tr>
<td>Someone from the inspection team spoke to my partner about it</td>
<td>13%</td>
</tr>
<tr>
<td>The nursery gave me written information about the inspection</td>
<td>64%</td>
</tr>
<tr>
<td>I was asked to fill in a questionnaire about the inspection</td>
<td>45%</td>
</tr>
</tbody>
</table>

Base: 146
Source: mruk research, June 2005
Those aware of the inspection were then also asked which of the five things detailed below had happened after the inspection. Most parents had received a copy of the report (79%), and a further 34% noted that they could have looked at the report in the nursery. In fact, all parents should have received a copy of the report.

It was common for parents to have been given written (60%) or verbal (53%) information about how the inspection had gone.

Respondents were also asked whether they had heard of HMIE or The Care Commission before they received their questionnaire. For both organisations, 84% of respondents claimed to have been aware.
4.3 Perceived impact of the inspection

The inspections were viewed as important by parents. Indeed, 93% felt the last inspection had been important to some degree.

The following table details the parents’ evaluation of the early years centre against a range of care and educational criteria before the inspection took place.

It is apparent that in general parents viewed their early years centre positively. In particular, high scores were achieved for aspects of care such as safety and hygiene, encouraging healthy eating and relationships with staff. In terms of education the range of curriculum activities, resources and staff support for learning all achieved very positive scores.

However, provision of their child’s written progress reports was less well perceived, as was feedback on child progress to a slight extent, and there were slightly fewer respondents perceiving links with local schools.

Table 1: Parental views of nursery provision prior to inspection

<table>
<thead>
<tr>
<th>Aspect</th>
<th>Very Well %</th>
<th>Quite Well %</th>
<th>Not Well %</th>
<th>Very Badly %</th>
<th>Not Applicable %</th>
<th>Base No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety / hygiene</td>
<td>80</td>
<td>20</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>144</td>
</tr>
<tr>
<td>Range of activities your child is offered related to the 3 – 5 curriculum</td>
<td>83</td>
<td>15</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>145</td>
</tr>
<tr>
<td>Feedback on how your child is doing</td>
<td>60</td>
<td>31</td>
<td>9</td>
<td>-</td>
<td>-</td>
<td>144</td>
</tr>
<tr>
<td>Provision of child’s written progress reports</td>
<td>46</td>
<td>31</td>
<td>15</td>
<td>2</td>
<td>6</td>
<td>143</td>
</tr>
<tr>
<td>Encouraging physical activity</td>
<td>71</td>
<td>27</td>
<td>1</td>
<td>-</td>
<td>1</td>
<td>145</td>
</tr>
<tr>
<td>Encouraging healthy eating</td>
<td>80</td>
<td>18</td>
<td>1</td>
<td>1</td>
<td>-</td>
<td>144</td>
</tr>
<tr>
<td>Resources e.g. toys, crafts, computers</td>
<td>76</td>
<td>23</td>
<td>1</td>
<td>1</td>
<td>-</td>
<td>144</td>
</tr>
<tr>
<td>Relationship with staff</td>
<td>85</td>
<td>15</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>144</td>
</tr>
<tr>
<td>Staff support for children’s learning</td>
<td>81</td>
<td>17</td>
<td>1</td>
<td>-</td>
<td>1</td>
<td>144</td>
</tr>
<tr>
<td>Links with local schools and nurseries</td>
<td>63</td>
<td>30</td>
<td>3</td>
<td>-</td>
<td>4</td>
<td>142</td>
</tr>
</tbody>
</table>

Source: mruk research, June 2005
The respondents were then asked to say whether each of these factors got better, stayed the same or got worse following the inspection. A small number of respondents perceived improvements on each of the aspects prompted. Particular improvements were seen in the encouragement of healthy eating (22%). In addition, about a sixth perceived improvements in resources, safety/hygiene and the range of curriculum related activities.

**Table 2: Evaluation of nursery after inspection**

<table>
<thead>
<tr>
<th>Got Better %</th>
<th>Stayed Same %</th>
<th>Got Worse %</th>
<th>Not Applicable %</th>
<th>Base No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety / hygiene</td>
<td>16</td>
<td>81</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Range of activities your child is offered related to the 3 – 5 curriculum</td>
<td>16</td>
<td>82</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Feedback on how your child is doing</td>
<td>15</td>
<td>83</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Provision of child’s written progress reports</td>
<td>10</td>
<td>84</td>
<td>-</td>
<td>6</td>
</tr>
<tr>
<td>Encouraging physical activity</td>
<td>14</td>
<td>84</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Encouraging healthy eating</td>
<td>22</td>
<td>75</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Resources e.g. toys, crafts, computers</td>
<td>17</td>
<td>81</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Relationship with staff</td>
<td>10</td>
<td>88</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Staff support for children’s learning</td>
<td>9</td>
<td>88</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Links with local schools and nurseries</td>
<td>8</td>
<td>88</td>
<td>-</td>
<td>4</td>
</tr>
</tbody>
</table>

Source: mruk research, June 2005

Of the parents who responded to the question asking whether any other improvements had been noted after the inspection, 8% of the total sample of 164 responded i.e. 30 respondents. 50% of this subset noted additional improvements having been made with around a further third feeling that there had been no additional improvements (29%) and a fifth (19%) perceiving that previous high levels had been maintained (table 3).

**Table 3: Other Improvements noted after inspection (spontaneous)**

<table>
<thead>
<tr>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Levels were high before and are maintained</td>
</tr>
<tr>
<td>Using outside more for activities</td>
</tr>
<tr>
<td>This is now best nursery I have sent my kids to</td>
</tr>
<tr>
<td>I am very happy with the nursery</td>
</tr>
<tr>
<td>A new toilet was installed</td>
</tr>
<tr>
<td>Looking into getting things to help children’s co-ordination</td>
</tr>
<tr>
<td>Staff stress levels have improved</td>
</tr>
<tr>
<td>Info about activities and staff who are in</td>
</tr>
<tr>
<td>Info about children’s snacks</td>
</tr>
<tr>
<td>Their confidence grew from getting such a good inspection</td>
</tr>
<tr>
<td>Removal of name badges at last</td>
</tr>
<tr>
<td>Signing in sheet for parents</td>
</tr>
<tr>
<td>Congestion in the waiting area</td>
</tr>
<tr>
<td>Improvements to premises</td>
</tr>
<tr>
<td>Nothing / No</td>
</tr>
<tr>
<td>Don’t know</td>
</tr>
</tbody>
</table>

Source: mruk research, June 2005
4.4 The future

Overall, 13% of the parents and carers wanted to be more involved in future inspections than they were at the last one. These respondents were motivated by a desire to be involved in their children’s education, or felt that the parental perspective was important.

The respondents were given a list of possible ways to improve the inspections for parents. There was strong interest in being given a questionnaire to fill in about the nursery (87%), or being invited to give comments to the inspector (74%). At present all parents of children attending a centre that has an integrated inspection would receive a questionnaire. During a singleton inspection a sample of parents would receive a questionnaire.

A written summary of the inspection report was preferred (75%) rather than a full copy of the report (56%). This is despite the inspection report being relatively brief itself. Those who wanted a summary of the report often also expressed an interest in a full report. The key finding is that there is a desire for written information after the inspection.

Figure 6: Ways to improve inspections for parents / carers

Source: mruk research, June 2005
Parents were mixed in terms of the degree of future involvement they desired. 46% wanted written information in advance of the inspection describing what was involved. In addition, 38% wanted only to be verbally advised about when the inspection was. The remainder felt they didn’t need any information in advance of future inspections.

Figure 7: Preferred level of involvement in future inspections

- **Verbal advice when the inspection was taking place**: 38%
- **Written information in advance of the inspection describing what was involved**: 46%
- **No need to give any information about the inspection**: 16%

Base: 155
Source: mruk research, June 2005
There was a strong desire for information after (100%) and before (84%) an inspection.

Over half wanted a copy of the report (56%) and a similar proportion wanted brief written information (54%). Of those who wanted brief written information, 34% expressed an interest in a copy of the report as well. 41% wanted a conversation with a staff member of the centre.

![Figure 8: Preference for receiving information after future inspections](image)

Finally, most respondents did not think nurseries should be given advance warning before an inspection took place (65%). Currently centres are given advance warning.
4.5 Key issues arising from research with parents

Parents’ perceptions of the process were generally very positive. The awareness of the inspection taking place was high (91%), and the inspection itself was seen as important (93%).

The inspections were not perceived to have made a dramatic difference to care and education as most parents felt they had seen their early years centre in a positive light even before the inspection. However improvements across a number of areas had been identified ranging from 22% of respondents stating that ‘encouraging healthy eating’ improved to 8% seeing better links with local schools (see table 2).

Parents generally felt happy in relation to their access to information about the inspection. Most respondents had either been given a copy of the inspection report (79%), or knew they could access it in the nursery (34%). A small minority had a desire to be more involved in the next inspection than they had been in the last one (13%). However, there was a high level of interest in being able to fill in a questionnaire about the nursery (87%). At present all parents of children attending centres that had an integrated inspection would have had a questionnaire. Where a centre had a singleton inspection a sample of parents would have had a questionnaire. There was also interest among 74% in being able to submit comments to the inspection team. Although the current report format is brief there was interest in a summary being available (75%).

There was a desire among all parents for information to be provided to them after the inspection.

A high proportion of respondents did not think nurseries should be given advance warning before an inspection took place (65%).
5. Research Findings – Providers

This section of the report will summarise the key findings from the self-completion survey undertaken with provider centres that had only undergone a singleton Care Commission inspection.

Comparisons have been made with the findings from the HMIE self-completion survey relating to integrated inspections where questions are comparable. It is worth noting that there are few significant differences between centres regardless of what kind of inspection they had. As in the previous section, non-responses have been removed for each question to prevent them from affecting the findings.

5.1 Profile of the sample

Of provider centres who responded, over half (53%) had between 11 and 30 registered places for 3 to 5 year olds. The following chart details the number of registered places across the whole sample of provider centres in the survey.

![Figure 9: Number of registered places for 3-5 year olds](image)

- 0-10: 6%
- 11-20: 25%
- 21-30: 28%
- 31-40: 17%
- 41-50: 8%
- 51-100: 14%
- 101-200: 3%
- Don't know: * 0%

* = Less than 1%
Base: 357 (Total Responses)
Source: mruk research, June 2005
The chart below shows what type of provider the centres who responded were. Around a third of the total sample stated that they were either a local authority school nursery class (35%) or a voluntary playgroup (32%), a fifth were private nurseries (20%) and 12% were a local authority nursery class.

Figure 10: Type of Provider

<table>
<thead>
<tr>
<th>Provider</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local authority school nursery</td>
<td>35%</td>
</tr>
<tr>
<td>class</td>
<td></td>
</tr>
<tr>
<td>Local authority nursery class</td>
<td>12%</td>
</tr>
<tr>
<td>Private nursery</td>
<td>20%</td>
</tr>
<tr>
<td>Voluntary playgroup</td>
<td>32%</td>
</tr>
<tr>
<td>Local Authority Family Centre</td>
<td>3%</td>
</tr>
</tbody>
</table>

Base: 369 (Total Responses)
Source: mruk research, June 2005
A broad spread was achieved in terms of in which education authority area the provider respondents were located. Providers from every education authority area responded to the survey.

**Table 4: Education Authority**

<table>
<thead>
<tr>
<th></th>
<th>%</th>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aberdeen City Council</td>
<td>7</td>
<td>Inverness Council</td>
<td>1</td>
</tr>
<tr>
<td>Aberdeenshire Council</td>
<td>10</td>
<td>Midlothian Council</td>
<td>*</td>
</tr>
<tr>
<td>Angus Council</td>
<td>3</td>
<td>Moray Council</td>
<td>3</td>
</tr>
<tr>
<td>Argyll &amp; Bute Council</td>
<td>4</td>
<td>North Ayrshire Council</td>
<td>3</td>
</tr>
<tr>
<td>Clackmannanshire Council</td>
<td>*</td>
<td>North Lanarkshire Council</td>
<td>2</td>
</tr>
<tr>
<td>Dumfries &amp; Galloway Council</td>
<td>4</td>
<td>Orkney Islands Council</td>
<td>1</td>
</tr>
<tr>
<td>Dundee City Council</td>
<td>1</td>
<td>Perth &amp; Kinross Council</td>
<td>4</td>
</tr>
<tr>
<td>East Ayrshire Council</td>
<td>2</td>
<td>Renfrewshire Council</td>
<td>2</td>
</tr>
<tr>
<td>East Dunbartonshire Council</td>
<td>4</td>
<td>Scottish Borders Council</td>
<td>2</td>
</tr>
<tr>
<td>East Lothian Council</td>
<td>1</td>
<td>Shetland Islands Council</td>
<td>1</td>
</tr>
<tr>
<td>East Renfrewshire Council</td>
<td>2</td>
<td>South Ayrshire Council</td>
<td>1</td>
</tr>
<tr>
<td>Edinburgh City Council</td>
<td>4</td>
<td>South Lanarkshire Council</td>
<td>3</td>
</tr>
<tr>
<td>Falkirk Council</td>
<td>1</td>
<td>Stirling Council</td>
<td>2</td>
</tr>
<tr>
<td>Fife Council</td>
<td>7</td>
<td>West Dunbartonshire Council</td>
<td>1</td>
</tr>
<tr>
<td>Glasgow City Council</td>
<td>5</td>
<td>West Lothian Council</td>
<td>3</td>
</tr>
<tr>
<td>Highland Council</td>
<td>12</td>
<td>Western Isles Council</td>
<td>3</td>
</tr>
</tbody>
</table>

* = Less than 1%

Base: 362 (Total Responses)
Source: mruk research, June 2005
5.2 Information pre inspection

All the providers stated that they had received a notification letter and pre-inspection return prior to the singleton inspection taking place. The vast majority also stated that they had received a self evaluation form (99%), questionnaires for parents (97%) and briefing notes (96%), with slightly fewer being telephoned (80%).

As can be seen in the table below, the majority felt that the information received before the inspection had been helpful, although telephone calls in particular were felt to have been very helpful (45%).

Table 5: Helpfulness of telephone calls, notification letters and briefing notes

<table>
<thead>
<tr>
<th></th>
<th>Very Helpful</th>
<th>Helpful</th>
<th>Unhelpful</th>
<th>Very Unhelpful</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone call(s)</td>
<td>45</td>
<td>48</td>
<td>5</td>
<td>2</td>
<td>239</td>
</tr>
<tr>
<td>Notification letter</td>
<td>31</td>
<td>64</td>
<td>4</td>
<td>2</td>
<td>357</td>
</tr>
<tr>
<td>Briefing notes</td>
<td>32</td>
<td>65</td>
<td>2</td>
<td>*</td>
<td>327</td>
</tr>
<tr>
<td>Questionnaires for parents</td>
<td>26</td>
<td>66</td>
<td>7</td>
<td>1</td>
<td>335</td>
</tr>
<tr>
<td>Self evaluation form</td>
<td>31</td>
<td>65</td>
<td>4</td>
<td>1</td>
<td>350</td>
</tr>
<tr>
<td>Pre-inspection return</td>
<td>30</td>
<td>65</td>
<td>5</td>
<td>-</td>
<td>359</td>
</tr>
</tbody>
</table>

* = Less than 1%

Source: mruk research, June 2005

These findings were similar to those of the HMIE integrated inspections survey, where 91% and 93% found the telephone contact and written information helpful respectively.

The majority of providers also felt that they were given clear indications about what to expect with regard to the number of inspectors (93%) and the names of inspectors (94%) prior to the singleton inspection. However, although still high, slightly fewer had been informed about what else was required (74%) or were told about how much staff time would be required (62%).
Respondents were also given the opportunity to detail anything else that was explained before the inspection. Whilst the vast majority made no other comment, a few respondents had been given extra information as detailed in the table below.

Table 6: Anything else explained before the inspection – Key responses

<table>
<thead>
<tr>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No, nothing</td>
<td>85</td>
</tr>
<tr>
<td>What exactly the inspectors would do on the day</td>
<td>2</td>
</tr>
<tr>
<td>Timetable for the day / format for the day</td>
<td>2</td>
</tr>
<tr>
<td>Which standard we are getting inspected on</td>
<td>1</td>
</tr>
<tr>
<td>Arrival times &amp; arrival of questionnaires</td>
<td>1</td>
</tr>
<tr>
<td>How we would be given feedback</td>
<td>1</td>
</tr>
<tr>
<td>General conversation which helped me to prepare</td>
<td>1</td>
</tr>
<tr>
<td>A draft programme for the day with times</td>
<td>1</td>
</tr>
<tr>
<td>They explained any questions I asked</td>
<td>1</td>
</tr>
<tr>
<td>Other *</td>
<td>5</td>
</tr>
</tbody>
</table>

* All 'others' less than 1%

Base: 340 (Total Responses)
Source: mruk research, June 2005

The survey then focused on the suitability and clarity of the written documentation received by respondents prior to the inspection, and particularly the self evaluation form and pre-inspection return. Overall, most respondents believed both to be good in terms of suitability, with around a quarter in each case perceiving them to be very good.
In comparison, those who had had an integrated inspection also tended to rate both these documents positively.

![Figure 11: Suitability of Pre-inspection forms](image)

The few who had felt that the suitability of the singleton forms was poor considered them predominantly to be too time consuming, or that there was a repetition of the information required.

![Figure 12: Why was suitability poor?](image)

---

* = Less than 1%

Base: Integrated: 821 (Total Responses) Singleton: PIR: 369; SEF: 364 (Total Responses)

Source: mruk research, June 2005

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CAUTION - LOW BASE SIZES
Similarly the respondents were asked to rate the clarity of the pre-inspection and self-evaluation form. Those who had undergone a singleton inspection held largely positive opinions, with about a tenth giving each form a negative rating. It is interesting to note that those who had had an integrated inspection tended to have more positive opinions, with 37% rating each of the documents as very good in comparison with about a fifth of those who had a singleton inspection.

![Figure 13: Clarity of Pre-Inspection Forms](image)

The small proportion of those who had received a singleton inspection who felt the documentation was poor were asked why. Again, the primary issues were the complexity of the form and the large amount of jargon.

![Figure 14: Why was clarity poor?](image)
The respondents to the provider’s research who had a singleton inspection were asked how reasonable the requirements made of them and their staff to provide pre-inspection information were. The vast majority felt they were very or quite reasonable (92%). This compares with 32% of those who had an integrated inspection who felt the demands on them and their staff were heavy, and a further 65% who perceived them as moderate. These questions were asked in slightly different ways and so are not strictly comparable.

Figure 15: Requirements made of Self & Staff reasonable

- Very reasonable: 32%
- Quite reasonable: 60%
- Not very reasonable: 8%
- Totally unreasonable: 1%

Base: 367 (Total Responses)
Source: mruk research, June 2005
5.3 Attitudes to the inspection itself

Satisfaction that the full range of the service’s work was inspected was high amongst those who had a singleton inspection (88%). This is comparable with 80% satisfaction amongst those who had an integrated inspection.

Figure 16: Satisfaction that full range of services was inspected

Similar satisfaction in Integrated Inspection survey – 32% Very Sat. & 48% Sat.

Base: Singleton: 369 (Total Responses) Integrated: 815 (Total Responses)
Source: mruk research, June 2005
Those who were dissatisfied with the singleton inspection were asked why. Over half complained that it wasn’t possible to have all their resources on show, and a further 53% were unhappy that they hadn’t had enough time to show the full range of their activities. A third noted that items had been included in the report which had not been observed during the inspection (32%) and quarter stated that inspectors had not interacted with the children (23%).

These findings were supported by comments made during the research with providers who had undergone an integrated inspection.

![Figure 17: Reasons why dissatisfied](image-url)
It is positive that the methods and procedures employed during the inspection were seen to be very or quite suitable by those who had a singleton (93%) or integrated inspection (81%).

![Figure 18: Suitability of methods & procedures employed during inspection](image)

**Base:** Singleton: 369 (Total Responses); Integrated: 815 (Total Responses)

**Source:** mruk research, June 2005
The proportion of singleton inspected providers who did not think the methods were suitable were asked why. The key issue related to interview times (62%). Smaller proportions also mentioned a lack of time, desire for time for breaks, took too long or no interaction with children.

Figure 19: Reasons why methods / procedures were unsuitable

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inappropriate interview times for staff</td>
<td>27%</td>
</tr>
<tr>
<td>Not enough time</td>
<td>62%</td>
</tr>
<tr>
<td>No interaction with children</td>
<td>31%</td>
</tr>
<tr>
<td>Need to allow time for breaks</td>
<td>27%</td>
</tr>
<tr>
<td>Took too long</td>
<td>23%</td>
</tr>
</tbody>
</table>

Base: 26 (Total Responses from those who stated methods / procedures were unsuitable) – CAUTION LOW BASE SIZE
Source: mruk research, June 2005

The level of demand on staff was seen as similar for singleton and integrated inspections, with 87% and 83% respectively being satisfied.

Figure 20: How satisfactory level of demand was on staff

<table>
<thead>
<tr>
<th>Satisfactory Level</th>
<th>Singleton</th>
<th>Integrated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very satisfactory</td>
<td>25%</td>
<td>33%</td>
</tr>
<tr>
<td>Satisfactory</td>
<td>33%</td>
<td>30%</td>
</tr>
<tr>
<td>Neither / nor</td>
<td>11%</td>
<td>11%</td>
</tr>
<tr>
<td>Unsatisfactory</td>
<td>11%</td>
<td>11%</td>
</tr>
<tr>
<td>Very unsatisfactory</td>
<td>2%</td>
<td>3%</td>
</tr>
</tbody>
</table>

Base: Singleton: 368 (Total Responses); Integrated: 815 (Total Responses)
Source: mruk research, June 2005
Among the minority dissatisfied with the demand of singleton inspection on staff, most related their dissatisfaction to the pressure on staff (67%) or a lack of consideration for staff nerves (48%), although some also felt that there hadn’t been enough time (28%).

![Figure 21: Why level of demand on staff was unsatisfactory](image)

The co-ordination of singleton inspections and integrated inspections was seen positively (92% for both). Those who had a singleton inspection were asked why they found the experience unsatisfactory. Again this was often related to a time issue, with 69% asking for specific interview times, 38% unhappy about staff missing breaks and 31% complaining about a lack of time.

Indeed time was raised on a number of occasions in relation to singleton and integrated inspections. Respondents to the singleton survey however generally felt that the length of the inspection was adequate to understand what they did; 11% felt there was not enough time.
5.4 Post inspection issues

The quality of the feedback from inspections was rated positively by 91% who had a singleton inspection and 85% of those who had an integrated inspection.

Figure 22: Rate quality of feedback

Again, quality of feedback rating was consistent with Integrated Insp. survey – 51% Very Good / 34% Good

Base: 367 (Total Responses)
Source: mruk research, June 2005
There were a small proportion of providers who had a singleton inspection who rated quality of feedback negatively and they were asked why. The largest single issue was a perception that the officer was not receptive to evidence or explanation (47%). A wide range of other reasons were given by smaller numbers.

Figure 23: Reasons why quality of feedback was poor

- Officer not receptive to evidence / explanation: 47%
- Feedback unfair / harsh: 35%
- Feedback took too long: 32%
- Needed more advice / guidance / discussion: 32%
- Not well thought through: 18%
- Poor typing skills / grammar errors: 9%

Base: 34 (Total Responses from those who stated quality of feedback was poor) – CAUTION LOW BASE SIZE
Source: mruk research, June 2005
Overall the respondents to both surveys were asked to rate the efficiency and helpfulness of the inspection. Those who had a singleton inspection gave slightly higher ratings, with 95% satisfied with efficiency and 91% satisfied with helpfulness. Recipients of an integrated inspection rated efficiency at 86% and helpfulness at 87% – again the vast majority giving a positive rating.

Figure 24: Overall rating of...

Source:  mruk research, June 2005
5.5 Key issues arising from research with providers

There were few significant differences between centres that had a singleton or integrated inspection.

The vast majority of those who had a singleton inspection thought they had received the following: self evaluation form (99%), questionnaires (97%) or briefing notes (96%). A slightly smaller proportion of singleton inspected centres remembered being telephoned (80%). It is worth noting that where a phone call had been received it was usually seen as more useful than other written pre-inspection information. Those centres having an integrated inspection currently all receive a phone call pre inspection.

Pre inspection information was certainly clear in that the vast majority of those who had a singleton inspection knew what to expect by way of the names and number of inspectors. There were 62% who had been told how much staff time would be required, and a small minority were consistently dissatisfied with a number of timing issues.

The pre inspection forms were rated positively in terms of their suitability and clarity regardless of whether they had a singleton or integrated inspection.

Those who had a singleton inspection generally felt the requirements made of them were reasonable (92%). Those who had singleton (87%) or integrated (83%) inspections were also satisfied with the level of demand on staff.

A total of 12% of singleton respondents and 9% of integrated respondents were dissatisfied with the full range of services being inspected. Most thought the methods and procedures employed were suitable (93% of singleton respondents and 81% of integrated respondents).

Quality of feedback was positively for those who had a singleton inspection (91%) or an integrated inspection (85%).

Overall respondents to both surveys gave positive ratings in relation to efficiency (95% singleton and 86% integrated) and helpfulness (91% singleton and 87% integrated).
6. Research Findings – Local authorities and umbrella organisations

It is important to note the nature of qualitative research when considering these research findings. Respondents were asked open questions about their attitudes to all issues such as benefits and drawbacks of integrated inspections. All feedback was entirely spontaneous. Therefore when we say half criticised a particular issue, it doesn’t mean the other half were positive about it – just that they didn’t mention it.

It is also worth noting that the findings in this section relate to respondent perception and not the researchers views. The respondents discussed their perceptions based on feedback from their colleagues in local authorities, partner providers, nurseries and so on.

The local authority and umbrella organisations’ members fell into three categories described for the purposes of this research as umbrella organisations and local authority strategic and operational respondents. Of the 51 respondents:

- Strategic (18 – mainly Directors of Education)
- Operational (27 - e.g. Early Years Officer, Education Officer)
- Umbrella (6 – Various)

6.1 Perceived benefits of the integrated inspection process

Initially all of the local authority and umbrella organisation group members were asked about the benefits of the integrated inspection process. Those respondents working at a strategic level within local authorities were quicker to identify the benefits of the new inspection process than those who were involved at an operational level in the inspections. Those involved at an operational level tended to give a more detailed response.

The group were clear in their common perceptions about the main benefits of integrated inspections. Fundamentally, the way that care and education were brought together in the inspections reflected the child centred approach adopted by local authorities. For the first time it was felt that early years centres were being evaluated in relation to the whole child. The importance of good quality care in enabling learning amongst 3 to 5 year olds was supported by the new structure of inspections. Indeed the new integrated approach was seen as placing more emphasis on care, which had in the past been viewed as a “poor relation”.

Furthermore, the status of the early years sector was raised because of the inspections. This was particularly perceived to be the case within primary schools with nursery classes, where historically some Head Teachers were perceived to have placed significantly less importance on the early years class.
It was felt that the ethos of the inspections was to ensure quality provision in the early years sector in relation to care and education. There was a perception amongst about two thirds that this had already resulted in rising standards, and that it was the first stage in an ongoing cycle of improvement.

The inspections were seen to be working towards consistency which was seen as a significant challenge in this sector. At the very least the inspections were seen as providing a framework for all early years centres to work towards.

As the inspections were external and independent, it was commonly felt that the recommendations and requirements enabled local authorities to push forward issues with partner providers. This was particularly the case in relation to private nurseries, which were often perceived to resist requests for change from local authorities. The recommendations made by HMIE and Care Commission were seen to carry more weight. Specifically the involvement of HMIE was seen to give credibility to the integrated inspection approach. This was particularly true among local authority centres that had previous experience of working with HMIE and were broadly familiar with their approach and styles of reporting.

The independence and objectivity of the inspections was seen by more than half as beneficial for parents. It was perceived that the involvement of a third party made the early years centres more accountable, and thus offered parents reassurance and the ability to compare local provision for early years on a level platform.

The output of the inspections was also seen by some as beneficial; in the main it offered clear recommendations and allowed them to identify themes and develop action plans.

Those working operationally with the early years centres also identified a number of benefits derived as a result of the regularity of the inspections. It was felt that the frequency of inspections allowed trends to be identified and addressed on an on-going basis. A small proportion of them also spontaneously suggested that the burden of inspections would ultimately be reduced for staff in centres as they became used to a cycle of inspection (even if they continued to be every 3 years).

A small minority of respondents also felt that it reinforced work already done by the local authorities and thereby confirmed their existing knowledge base. Theoretically a small minority also felt there should be multi-disciplinary benefits, with assessors sharing good practice between the centres. A small proportion also thought that in some cases the inspections could be used as a motivation tool with centre staff.
6.2 Perceived drawbacks of the integrated inspection process

There was only one respondent who identified no drawbacks. There were also several local authority respondents (involved on an operational basis) who could not think of any benefits to the new integrated inspection method. Consistent opinions about the nature of the drawbacks were found across all types of Local authority and umbrella organisations member. For a handful of respondents the drawbacks far outweighed any perceived benefits; this was mainly a small group of local authority operational respondents.

The single most significant drawback to the integrated inspection approach was inconsistency. This issue was raised by almost all respondents. The majority of those commenting about inconsistency were particularly critical of the Care Commission (in relation to singleton and integrated inspections). A very wide range of inconsistencies were noted by the respondents relating mainly to Care Commission Officers and HMIE inspectors.

It was strongly felt that Care Commission officers did not only make comment or request changes to ensure that the centre complied with legislation. It was perceived that many comments and requests were related to individual officers’ preferences and this resulted in contradictions.

Such discrepancies were not entirely confined to Care Commission officers. A small proportion also criticised HMIE inspectors. It was felt that not all HMIE’s new inspectors were fully trained. An example was given of a rural area where one teacher served several centres and, although she prepared the same paperwork for all 3 inspections, the comments on the paperwork received from the different inspectors were quite varied. It was also mentioned that a particular issue at one nursery might be recommended and yet at another it would be a requirement. There was a perception amongst a handful of respondents that some HMIE inspectors were people seconded from local authority jobs and given brief training to facilitate the need for inspections. In particular they were perceived as subjective. It was also felt that the whole tone of an inspection and verbal feedback was often not reflected in the report – so a Head Teacher may leave an inspection feeling it had gone well only to receive a critical report. Conversely, actual scores in the report may not have reflected verbal feedback.

Both Care Commission and HMIE assessors were criticised for commenting outwith their remit e.g. an HMIE assessor commenting on the need for hand dryers.

There was also a very strong perception that there were simply too many inspections and this is discussed further in Section 6.4.

The increased burden on staff within local authorities and the early years centres themselves was identified by almost all respondents. In many cases new staff had been brought in to support the new inspection regime, in others existing staff felt they had to “spread themselves more thinly”.

The Care Commission came in for further criticism from about three quarters of respondents who perceived the officers to be “risk assessors”. It was not felt that the approach adopted by the Care Commission was child centred. Their recommendations and requirements were described as “petty”, “unimportant” or “based on the inspector’s whims”. This was a result of the perceived emphasis on minor issues which did not affect the safety or education of the child. Many examples were given, and a few are noted below:

- a nursery where children brushed their teeth after lunch, using their own brush and toothpaste they spat into the sinks in the toilets afterwards – the inspector said they should swallow the toothpaste not spit (which went against dentist recommendations);
- a nursery criticised for having bars of soap, not pump dispensers, in the toilets;
- a nursery criticised for having no paper towels in the toilets when the last inspection had required they install hand dryers;
- a nursery criticised for not having an outdoor storage space for outdoor toys.

It was felt that a lot of time, money and resources had to go into meeting this type of requirement when it might have been better spent to more directly benefit the children.

Fundamentally, the Care Commission and HMIE were seen as having different perspectives and therefore were not properly integrated themselves. HMIE was seen as having a child centred approach based on quality improvement. The Care Commission however was seen as working to minimum standards. Furthermore, a minority still felt there was still a need for cohesion between the Care Commission and HMIE who were learning to work together. Specifically the Care Commission was still felt to be learning and building their reputation – about half spontaneously said they did not yet see them as credible.

It was commonly perceived that within the early years sector the voluntary & private centres were of variable quality. Run predominately by parents, the voluntary sector in particular was seen as presenting a challenge in terms of ensuring their provision was comparable with local authority nurseries and nursery classes. This issue was raised most often by those working in rural areas, where the voluntary sector played an important role in ensuring provision for children close to their home. A small minority of respondents were concerned that inspectors’ expectations of the voluntary sector were lower. While they felt this was understandable it was not felt to be acceptable; all early years centres should be judged on a level playing field.

A range of other criticisms were made by a minority of the respondents.

A small minority made comments about the reports, complaining that the use of a series of set phrases was not always appropriate and sometimes made interpretation very difficult.

An individual respondent representing Montessori nurseries felt that inspectors all lacked an understanding of the ethos of Montessori and therefore made many inappropriate recommendations.
6.3 Perceptions about extent to which drawbacks are expected to diminish

About a third of the respondents were hopeful that the drawbacks would diminish as centres became familiar with the new structure of inspections and inspectors became familiar with their job. However, the vast majority were cynical about how drawbacks could diminish without fundamentally changing the approach. Respondents had no or limited information about the future plans for frequency of inspection. There was a very strong desire for a proportionate model of inspection to be adopted. Attitudes to the frequency of inspections are discussed further in the next section.

6.4 Frequency of inspections

The vast majority of Local authority and umbrella organisations members felt the current frequency of inspections was too high. It was perceived that centres were over inspected, and that this put pressure on staff and resources (especially in the voluntary sector). It was felt that with this frequency of inspection there was no time to implement changes before the next inspection came – “we are weighing the pig so often we don’t have time to feed it”.

About half of respondents spoke about centres receiving inspections with only 6-9 months gap in between. It was felt that local authority nursery classes and schools needed fewer inspections than partner organisations, specifically private nurseries and voluntary centres. There was a strong belief that local authority early years centres had been achieving the care standards anyway and therefore annual inspections were “overkill”. Furthermore, about a fifth of operational Council respondents perceived the Care Commission inspections to repeat what the local authorities were obliged to anyway.

About two thirds of respondents agreed that the integrated inspection was appropriate to have every 3 years. There was a small proportion looking for less frequent integrated inspections of around every 5 years, and several strategic respondents wanted to bring frequency in line with Primary Schools – every 7 years.

In relation to care inspections there was a strong desire for a flexible, proportionate approach. It was felt that there was already regular contact with local authorities which would flag up problems. About half of respondents felt there was no need for singleton care inspections in most local authority nurseries, although perhaps there was some benefit among some partner providers. It was deemed appropriate that local authorities would offer guidance on which centres needed more frequent care inspections.
The challenges facing voluntary centres were raised. This was a particular problem in a small number of very rural areas where there was a dependence on such centres for early years. The workload associated with frequent inspections was perceived to be off-putting to parents; fewer were volunteering and therefore provision in very rural areas was at risk. It was also mentioned that in some small, rural centres there were sometimes more inspectors than children, which was inappropriate. The voluntary sector was seen as requiring annual inspections as the committees usually changed each year. Although not directly related to the research, the respondents identified a need to offer a different kind of support to the voluntary sector in order to prevent it collapsing under the burden of inspections.

There was also a common perception that partners in the private sector should be inspected whenever the company changed hands.

6.5 Perceptions about whether there is better care and education as a result of integrated inspections

A significant majority of respondents felt it would be unfair to wholly attribute rising standards or any improvements to the inspection process alone as there were too many other variables e.g. the centre itself, input from parents or input from the local authority. In particular, strategic respondents found it hard to answer this question and some found it difficult to tell. At least half of those working at an operational level were slightly “offended” by this suggestion, and felt that the new approach had simply formalised what their local authority had done anyway.

Strong perceptions existed that there were rising standards. New benchmarks for quality were related to the integrated inspections. There were certainly new reference points and a higher profile for self-evaluation. It was felt that the inspection method had instigated a continuous cycle of improvement and development that had not existed in most local authorities before.

6.6 Information from inspections

Overall, around three quarters of respondents were quite positive about the information which they received from inspections (mainly through reports). For many it confirmed their existing knowledge but this was usually reassuring rather than problematic.

The information helped the local authorities to identify trends and themes. In turn these trends and themes were then used to develop training or in-service days focusing on the issues that had arisen. It was felt the reports made it easy to identify issues for development, and in some local authorities they felt the reports had enabled them to get to know the centres a bit better. There was a good deal of evidence of the reports being used to develop action plans.
Where positive reports were received these were seen as being very helpful and motivational for staff. In addition to having a positive impact on staff, the reports allowed parents to compare early years centres, and it was felt that the information was important in making choices about private nurseries in particular.

Operational local authority staff felt that it gave them confidence to push issues forward where there was a problem. This external and independent information also helped to get partner providers to react to issues the Authority may have been promoting for some time.

A small minority expressed an interest in a newsletter from HMIE and Care Commission outlining good practice and hot topics. A few wanted operational staff from local authorities to be able to sit in on feedback sessions and were unaware this was already possible.

6.6.1 Suggested improvements to information provided

As mentioned earlier, the biggest issue with the reporting was a lack of consistency, and this was true of singleton and integrated reports.

Over two thirds of respondents mentioned they found semantic scales easy to work with and noted a preference for all sections to be based on semantic scales, as the text sections were found to be harder to interpret.

Over two thirds described the reports as hard to understand and interpret and reported a wide range of reasons for this. For example, it was felt necessary among a few of these to clarify to the centres what the difference between ‘good’ and ‘fair’ was, as most centres viewed them as similar terms. Reports were often seen as subjective rather than objective. In some instances officers and inspectors were perceived to have their own agendas or priorities and allowed these to affect their assessments. This perceived bias was seen to be common and presented local authorities with problems.

A small proportion of respondents commented that the reports did not always highlight all the problems or weaknesses that local authorities have identified. The issues that were not common to both parties were harder for the authorities to push through. There was therefore a minority desire for contact and discussion between the authority and the inspectors before the inspection took place.

A small proportion also registered some interest in a report detailing key findings for the whole of Scotland which would allow them to benchmark their Authority and individual centres. (None of those interested expressed an awareness that this had existed before).

A few respondents found the use of common terms in recommendations made the reports bland and repetitive. It was felt important that the centre reports were particularly critical or positive where the centre warranted it.
6.7 Approach to support

This section considers only the findings of the operational respondents within Councils and umbrella organisations.

Support was usually offered pre and post inspection to the early years centres. It is worth noting that the level of support offered was determined by each authority and not an obligation.

It was notable that not all centres wanted support, with some private centres preferring to take their own approach. In contrast it was highlighted that voluntary centres often wanted more support than the authorities were able to provide.

It was commonly felt that there had been changes in the way that support was provided. The actual nature of the changes did vary. Many of the operational respondents saw themselves as supporting the inspection process rather than having a remit to improve care and education. It was very apparent that they felt they were working to someone else’s timetable which was rarely seen as appropriate – too fast, too slow, wrong order etc. They felt they had less freedom to adopt their own approach and were tied to ensuring that health and safety was looked after rather than the wider picture. A minority were giving more intensive support.

There were a handful of examples where inspections were perceived to have facilitated significant change. This was partly because it was felt unfair to attribute changes entirely to the inspection. More importantly, few respondents could call to mind any significant changes that had happened.

6.8 Impact on staff and resources

Almost all respondents saw the impact on staff and resources as a huge drain, describing it as "massive", "colossal" or "significant". In around half of instances new staff had been taken on within local authorities. Just over half pointed out that the pressure was often worse for centre heads who may cover a number of centres e.g. in rural areas.

The process of change to the integrated inspection approach was seen as variable in the early days. There were reports of inspections being cancelled, postponed at the last minute, CC and HMIE inspectors arriving and then discussing who was doing what, and so on. It was felt that they were now better organised and quite well planned, although there was still perceived room for improvement.

There were mixed attitudes to the cycle of inspections for nursery classes within primary schools. Some thought that it was more logical to evaluate the school as a whole entity rather than break apart the nursery, which was felt to make it appear more different than it was. Others felt that logistically it was difficult to inspect at the same time and that it would put unnecessary pressure on the Head Teacher.
6.9 The future

There is a contradiction in the research findings in relation to the ongoing burden of inspections. On the one hand respondents felt they and centre staff would acclimatise to be current frequency of inspections. However, there was a desire for fewer and more proportionate inspecting in order to truly reduce the burden.

There was a perceived need, especially amongst the strategic respondents for Care Commission and HMIE to become fully integrated. The organisations should learn more about each other in order to be more co-ordinated and overcome problems of inconsistency. Specifically the Care Commission was seen as needing to be more confident in the future.

Care and education were seen by the vast majority of respondents as inextricably linked. Respondents described them as “2 sides of a coin”, "equally important” and “hand in hand”. It was seen positively that the profile of care and the early years sector in general had been raised.

6.10 Key issues arising from the local authorities and umbrella organisations research

The Local authority and umbrella organisations’ opinions were fairly consistent regarding the perceived key benefits of the new integrated inspection process. The inspections were perceived to raise the status of the early years sector, increase the emphasis on care and generally contribute towards creating consistency in both education and care provision. For the first time it was felt that early years centres were being evaluated in relation to the whole child.

The ethos of the inspections was perceived to ensure quality provision and about two thirds thought standards had already risen in an ongoing cycle of improvement.

The inspections were seen to be working towards consistency which was a significant challenge in this sector. Certainly the inspections provided a framework for all centres to work towards. The independence of the inspections was commonly believed to help local authorities push forward improvements in partner providers.

Inconsistency in approach was perceived to be an issue for both Care Commission and HMIE inspectors, although the majority of criticism was aimed at the former. In addition, there were perceived inconsistencies regarding reporting styles in terms of recommendations made and the aspects commented upon during inspections.

The frequency of inspection was also a key issue, with a significant majority of the opinion that there were simply too many inspections at present. It was felt that the current timetables of integrated and singleton inspections were placing centres and local authority
staff under pressure, and the suggestion was made that a more proportionate approach according to need could help to alleviate the burden.

Finally, there was a need identified for improved cohesion and 'integrated' in the approaches of HMIE and the Care Commission in integrated inspections. HMIE was considered to have a child centred approach based on quality improvement, whilst the Care Commission was considered to focus on minimum standards. This perceived lack of consistency was not surprising given the two organisations’ different cultures, priorities and goals. Therefore it was no surprise that it was difficult for them to come together seamlessly as a single inspecting unit. As the two organisations worked together, it was expected and desired that they would work more closely rather than in parallel.

Overall about three quarters were quite positive about the reporting information from inspections. This enabled local authorities to identify trends and themes. In some instances the reports had also been helpful and motivational for staff.
7. Conclusions

On the whole parents and providers gave positive feedback relating to their experience of being inspected. Parents had good awareness of the inspection taking place and very much saw the inspection as important. In the main parents did not want to be more involved with future inspections but all wanted information after the inspection.

Similarly providers recalled largely positive experiences where there was good pre-inspection information, requirements made of them were reasonable and methods and procedures were appropriate. The vast majority also rated the quality of the feedback positively and found the inspectors and officers efficient and helpful. Dissatisfaction levels were very low in relation to all aspects of the inspection process.

The local authority and umbrella organisation group talked consistently about the positive aspects of the new integrated inspection method. Increased status of the early years sector, rising standards and the child centred approach were all praised by most of those interviewed. The independent inspections were seen to be working towards consistency in this challenging sector. However, the local authority and umbrella organisation group were much more critical of the process used by HMIE and the Care Commission than parents and providers. Their key areas of criticism (inconsistency, over-frequency of inspection and lack of cohesive approach) did not come through in the research with parents and providers. When taking these research findings forward it is important the three research targets are considered in relation to each other and not in isolation.