

# The Early Years Education Program: The EYEP:Q

## RESEARCH REPORT

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# Executive Summary

## Background

Evidence from overseas (such as The Carolina Abecedarian Project and the HighScope Perry Preschool Program) has shown early, targeted interventions for at-risk children and families to yield rewards not only for children over their lifetime but also for society in terms of social and economic returns.

More recently, international research, policies and practices have shown that *quality matters* in the provision of early childhood education and care (ECEC), and the evidence is very strong in regard to the benefits of quality ECEC for disadvantaged children. However, while there is evidence to suggest that Australian universal ECEC services are trying to engage with vulnerable children and their families, the literature also indicates that some of the most disadvantaged children and families either do not engage at all with universal services or do not sustain their engagement with them.

It has been suggested that ECEC programs that specifically focus on vulnerable families may provide two useful solutions to this problem. Firstly, targeted services ensure that some of the most vulnerable children and families are connected to services designed to support them. Secondly, they can assist the sector by sharing how they successfully sustain the engagement of vulnerable families with their services.

The Children's Protection Society is committed to providing new research evidence that can be of practical benefit to the universal ECEC sector as well as to inform policy decisions. Accordingly it is filling a research gap by conducting an Australian-first randomised controlled trial together with a benefit-cost analysis into the effects of the provision of high quality ECEC services to at-risk children and their families. In addition the Children's Protection Society commissioned an in-depth ethnographic study into its Early Years Education Program.

A recent literature review (Fordham, 2015) contextualised the rationale for the current research study: the Qualitative Study of the Early Years Education Program (EYEP:Q), and should be read as a companion document alongside this report.

## The Early Years Education Program

The Early Years Education Program (EYEP) is targeted at children and families who experience significant family stress and social disadvantage. It is located in a child and family centre in a low-socioeconomic, high-need area in North East Melbourne. Children are aged under three when they enter the program and have been assessed as having two or more risk factors such as parental mental health difficulties, parental substance abuse, family violence or having teenage parents.

The structural features of the program are above the NQF/Regulatory requirements and include high staff to child ratios; qualified staff; attachment-focused and trauma-informed care; a child-centred curriculum based on the EYLF; integration with family support services; support from infant mental health professionals; and partnerships between educators and parents.

## Purpose of the study

The purpose of this qualitative study into the EYEP was to examine the lived experiences of all of its participants (staff, parents and children) in order to describe and disseminate the day-to-day activities of the program with the universal ECEC sector. The EYEP:Q study aimed to:

- 1) Gain a deep understanding of what occurs in the EYEP's everyday practice;
- 2) Describe what is unique and different about the EYEP;
- 3) Translate this understanding to enable effective replication of the EYEP;
- 4) Understand, describe and articulate educators' needs in implementing the program;
- 5) Gain an understanding of the EYEP's integrated multidisciplinary practice strategies.

## Methodology

The EYEP:Q study was conducted over a period of two years. Data collection techniques involved embedded participant observation, semi-structured interviews and focus groups. Observations of what occurred in the centre were *overt* in that the researcher was identified to all research participants in the setting and field notes were written instantaneously. Interviews with EYEP team members and parents were conducted as a two-step process with an approximate 12-month interval between the two interviews. Three focus group discussions were held with EYEP staff at six monthly intervals.

## Findings

The EYEP is a well-constructed high quality early childhood education and care program that has been sensitively and respectfully designed to support the complex and changing needs of children and families experiencing vulnerabilities. Educators employ attachment-based and trauma-informed practices, which are strengthened by a relational pedagogy that is comprehensively linked to the national *Early Years Learning Framework* (EYLF, DEEWR, 2009), and the National Quality Standard (NQS, ACECQA, 2013).

The interdisciplinary nature of service delivery results in an educational and care model that is enriched by extensive input from Infant Mental Health professionals enabling educators to have a greater understanding of each child's internal world. In addition educators are supported by regular professional supervision, relevant ongoing professional development, extensive time allocated for programming and planning and a range of activities that maintain their wellbeing.

The holistic curriculum is both child- and family-centred and educators employ family-centred practices that enhance parental belonging and sustain parental engagement with the program. Two of EYEP's unique elements are the supportive manner in which families gradually orientate into the program, and the respectful approach taken to include parents in their children's education and care plans.

The evidence in this study suggests that the most important outcome of a high quality holistic EC curriculum that employs both child-centred and family-centred practices is that of sustained parental engagement.

## Implications

Findings from this study suggest three distinct implications for universal EC services working with children and families experiencing vulnerabilities.

1. *Engage* families well. Once families are engaged it is crucial to *sustain* their engagement. If families experience a sense of *belonging* to a service they may be less likely to disengage from it. If services sustain parental engagement, their children will participate in EC services, with the obvious outcome being the potential to improve children's learning, development and wellbeing.
2. It takes *time to build relationships* with families, particularly with families who may have experienced high levels of stress or social disadvantage and who may have a mistrust of professional services. A slower orientation into an EC setting is one way to facilitate this process. Training in family-centred practices would support educators to be better skilled in building respectful relationships with every family.
3. Educators (and other EC staff) would benefit from *learning* and *training* in:
  - Attachment theory to understand issues that children with attachment difficulties may be experiencing, and to understand the emotions and needs behind children's behaviours.
  - The effects of trauma on children's learning and development so that educators can support children who may be reliving traumatic experiences or who may need help with their emotional self-regulation.

- Designing and implementing a holistic approach to curriculum and relational pedagogy that supports and enhances every child’s capacity as a learner.

## Conclusion

The EYEP:Q is a significant ethnographic study that enables a deep understanding of the Early Years Education Program, reveals the lived experiences of all those involved in it and richly describes its quality practices. This report provides robust research evidence that the Early Years Education Program is an evidence-based, high-intensity pedagogical and family engagement practice. It is hoped that the extensive information and practical implications contained within this report will assist the universal ECEC sector to successfully sustain the engagement of vulnerable children and families with their services.

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# Introduction to the Research

Evidence from overseas such as The Carolina Abecedarian Project (Campbell, Ramey, Pungello, Sparling, & Miller-Johnson, 2002) and the HighScope Perry Preschool Program (Schweinhart, Montie, Xiang, Barnett, Belfeld, & Nores, 2005) has clearly shown early, targeted interventions for at-risk children and families to yield rewards not only for children over their lifetime but also for society in terms of social and economic returns. However these studies were undertaken several decades ago and focused on African-American families living in ghettos in small American cities, arguably a very different context to contemporary Australia. Indeed more recently European researchers have criticised the over reliance on such US studies, and questioned whether the programs are generalisable outside of the US (see Penn, Barreau, Butterworth, Lloyd, Moyes, Potter, et al., 2004).

A recent literature review (Harrison, Sumsion, Press, Wong, Fordham, & Goodfellow, 2011) titled “Understanding and responding better to the needs of highly vulnerable Australian families and their children”, commissioned by the Australian Research Alliance for Children and Youth (ARACY) and funded by the Australian Government Department of Education, Employment and Workplace Relations (DEEWR) highlighted:

1. The diversity within vulnerable populations and the need for early childhood programs to address this diversity through localised, individual approaches; and
2. The value of long-term research into intervention outcomes and the processes involved in achieving these outcomes.

The authors suggested that such long-term research required commitment and involvement from professional practitioners who, in turn, would need the support that enabled them to actively engage in reflective practices. In addition to proposing an Australian longitudinal early childhood (EC) study with at-risk or vulnerable families reflecting the unique nature of the Australian context, the following research gaps were noted, specifically that there was a need to better understand:

- The perspectives of all early childhood program participants including at-risk children and families, and educators in regard to program processes and outcomes;
- The support needs of early childhood educators to provide high quality services to at-risk children and families;
- The nature of relationships between staff and families perceived to be at-risk or vulnerable in relation to the establishment of trust, the capacity to bring about changed parenting behaviours and information seeking/resourcing;
- The unique support needs of at-risk infants; and
- The strengths-based approaches that best engage families who are marginalised or hard-to-reach, in particular refugee families, families in isolated communities and Indigenous families.

More recently, reviews of international EC research, policies and practices have shown that *quality matters* in the provision of early childhood education and care (ECEC), and the evidence is very strong in regard to the benefits of quality ECEC for disadvantaged children (Brennan & Adamson, 2014). While there is evidence to suggest that Australian universal early childhood education and care services are trying to engage with vulnerable children and their families (Skattebol, Blaxland, Brennan, et al., 2014), the literature also indicates that some of the most at-risk children and families do not or cannot avail themselves of universal services (Winkworth, McArthur, Layton, Thomson, & Wilson, 2010). It has been suggested that ECEC programs that specifically focus on vulnerable families may provide two useful solutions to this problem (Lord, Southcott, & Sharp, 2011). Firstly, targeted services may ensure that some of the most vulnerable children and families will be connected to services that are designed to support them. Secondly, they may also be able to assist the universal ECEC sector by sharing how they successfully sustain the engagement of vulnerable families with their services.

The Children's Protection Society is committed to providing new research evidence that can be of practical benefit to the universal Australian ECEC sector as well as to inform policy decisions. Accordingly it is filling a research gap by conducting an Australian-first randomised controlled trial together with a benefit-cost analysis (called the EYERP; see Jordan, Tseng, Coombs, Kennedy, & Borland, 2014), into the effects of the provision of high quality ECEC services to at-risk children and their families (the EYEP).

## The Children's Protection Society

The Children's Protection Society is one of the oldest independent child welfare organisations in Victoria and holds a unique place in the history of Australian child protection.

CPS was founded at a meeting at Government House on March 21st 1896 by then Governor of Victoria's wife, Lady Sybil de Vere Brassy as the Victorian Society for the Prevention of Cruelty to Children (VSPCC). Its aims were to protect children from cruelty and neglect, to advance the claims of neglected, abandoned and orphaned children to the general public, to cooperate with existing societies for this purpose and to enforce the laws for the protection of neglected children and juvenile offenders. It was one of the few secular non-government agencies in the child welfare field.

From the 1920s to 1980s the Society provided services across metropolitan Melbourne and rural Victoria, governed by central and rural committees. The work of the society was to investigate reports of child abuse and neglect and also provide temporary emergency care for children in small residential units. These units were based in Fitzroy, Heidelberg, Sale and Hamilton.

In 1971 the Society changed its name to the Children's Protection Society and in 1979 the Victorian State Government authorised CPS as a child protection agency under the Social Welfare Act 1970. By 1982 CPS had ten child protection units; seven in the city and three in the country.

The State Government initiated a review of the Social Welfare Act and practice in 1983 and also a review of the Society's operation. The Carney Report was released in 1984 and recommended that CPS not be re-authorised as a child protection agency and that this responsibility be provided by the State. Whilst CPS formally relinquished its role in 1985 to the Victorian Department of Community Services, today's child protection system in Victoria owes much to the work of CPS. Reforms to welfare legislation and policy meant a change in CPS' operations but not its mission to reduce child abuse and neglect.

Over the past 120 years, as political, social and economic times changed, so too did the needs of the community. CPS has responded to those changes and provided innovative and targeted services including: family support, sexual abuse counselling and treatment services, support services tailored for mothers, fathers and other carers such as grandparents, early education expertise, child and family centres, ChildFIRST and Services Connect referral services.

Today CPS is a dynamic and diverse independent and voluntary child and family services organisation with no political or religious affiliations, governed by a Board of community members, servicing vulnerable children, young people and families.

# The Early Years Education Program

Operated by the Children’s Protection Society (CPS) and established in 2010, the Early Years Education Program (EYEP) is located in a child and family centre in a low-socioeconomic, high-need area in North East Melbourne. Children are aged under three when they enter the program and have been assessed as having two or more risk factors as defined in the Department of Human Services Best Interest Case Practice Model. Typical risk factors include parental mental health difficulties, parental substance abuse, family violence and having teenage parents (Jordan et al., 2014). A full list of risk factors is available in the Victorian Department of Human Services’ Child Development and Trauma Guide (2007).

Although the EYEP is targeted at children less than three years of age who experience significant family stress and social disadvantage, it nonetheless operates within a universal framework. The children receive at least 25 hours a week of high-quality education and care for 50 weeks of the year for three years at no cost to their families. The structural features of the program are above the NQF/Regulatory requirements and include high staff to child ratios (1:3 for children under 3 years; 1:6 for children over 3 years); qualified staff; attachment-focused and trauma-informed care; a child-centred curriculum based on the EYLF; integration with family support services; support from infant mental health professionals; and partnerships between educators and parents (See Figure 1).

Figure 1:  
The EYEP model



Jordan et al., (2014).

The program’s objectives are to:

- 1) Develop and implement a research-informed model of integrated care, education and support to a critical mass of children who experience significant family stress and social disadvantage (and who are currently engaged with family services or child protection services).
- 2) Measure the impact of this intervention through a randomised controlled trial determining the impact of the EYEP on a range of children’s school readiness measures as well as undertaking a benefit-cost analysis to inform government policy.
- 3) Inform and disseminate this model of care to increase the capacity of other existing children’s services to meet the needs of young children at risk.

In order to achieve its objectives and to intervene in children’s lives as early as possible the EYEP adopted a dual modal approach: the two models were education and care, and are herein briefly described.

## The EYEP Education Model

The EYEP employs an education model that is pedagogically driven and reflective, as well as child-focused and based on the national *Early Years Learning Framework* (EYLF; DEEWR, 2009). It is guided by the overarching vision of the EYLF: *Belonging, Being and Becoming* as well as the EYLF's Principles, Practices and Learning Outcomes.

### EYLF Principles

The principles “reflect contemporary theories and research evidence concerning children’s learning and early childhood pedagogy” (EYLF, 2009, p. 12) and underpin educators’ practice.

- Secure, respectful and reciprocal relationships
- Partnerships with families
- High expectations and equity
- Respect for diversity
- Ongoing learning and reflective practice

### EYLF Practices

The eight EYLF practices exemplify how children’s learning, development and wellbeing are promoted in ECEC settings:

- Holistic approaches
- Responsiveness to children
- Learning through play
- Intentional teaching
- Learning environments
- Cultural competence
- Continuity of learning and transitions
- Assessment for learning

### EYLF Learning Outcomes

Educators use the five Learning Outcomes in the Early Years Learning Framework to design and implement a learning environment for each child to promote their learning, development and wellbeing.

- 1) Children have a strong sense of identity;
- 2) Children connect with and contribute to their world;
- 3) Children have a strong sense of wellbeing;
- 4) Children are confident and involved learners; and
- 5) Children are effective communicators.

Each child has individual education goals that are identified by the educators in partnership with the parents. In addition, EYEP educators employ ongoing reflective practice (documenting, monitoring and assessing each child’s learning) and participate in regular one-on-one supervision sessions with education team leaders and group consultations with the infant mental health and early childhood education consultants. Ongoing professional learning for all members of the EYEP team is an essential component of the program.

## The EYEP Care Model

Integral to the education model is an attachment-focused, trauma-informed, primary-care model. This means that every child is allocated a key worker who is that child’s primary carer. Children gain a sense of safety and security through purposeful greetings and farewells on arrival and departure each day; the predictability of the routines; and responsive, close physical contact and comfort with their primary carer.

The goal of this care model is to foster significant attachments for children who are possibly experiencing attachment difficulties in their home care environments as well as to build trusting relationships between staff and parents. An important part of the care model is to provide the children with at least 75% of their daily nutritional needs. Underpinning the model is a transdisciplinary approach implemented by a team comprised of an education leader (with postgraduate qualifications in early childhood curriculum), educators, an early childhood curriculum consultant, an infant mental health consultant, a supernumerary educator with music expertise, a cook, and family support consultants. The essence of this transdisciplinary approach is that all team members collaborate across disciplinary boundaries to pool expertise, increase individual knowledge and skills and develop collegial and supportive relationships, as well as to more effectively identify and respond to the needs of the children and families in the EYEP (Cumming & Wong, 2012; Wong, Press, Sumsion, & Hard, 2012). The team's overarching focus is to develop and implement relational pedagogical strategies that reduce the children's behavioural and emotional dysregulation, enabling them to be more available to learning (Jordan et al., 2014, p. 3). In addition to the randomised controlled trial into the EYEP, the Children's Protection Society commissioned an in-depth ethnographic study into the program called the EYEP:Q.

## Extending the reach of the Early Years Education Program: The EYEP:Q

The Qualitative Study of the Early Years Education Program (EYEP:Q) conducted a thorough investigation into the Early Years Education Program (EYEP) in order to understand the lived experiences of all participants (children, families and staff) as well as to describe, translate and disseminate the day-to-day activities of the education and care models. The study aimed to:

1. Gain a deep understanding of what occurs in the everyday practice of the EYEP;
2. Describe what is unique and different about this program;
3. Translate this understanding to enable effective replication of this program;
4. Understand, describe and articulate educators' needs in implementing this program.
5. Gain an understanding of its integrated multidisciplinary practice strategies.

Underpinning the research aims were five research questions that were drawn from the EYEP:Q literature review (see Fordham, 2015):

1. How do the educators facilitate meaningful interactions with the children?
2. How does learning occur between the children and with the educators?
3. How do the educators build and sustain trusting relationships with the children and families?
4. How does an integrated and transdisciplinary model of service provision support the diverse needs of children, families and staff?
5. How do the two models of education and care interact to support children's learning, development and wellbeing?

# Research Methodology

This study was conducted over a period of two years. It involved a two-step process of interviews with EYEP team members and parents of children attending the child and family centre, a series of focus group discussions with EYEP educators and many days of participant observations. An overview of the approach to the research is presented initially, followed by an account of the study's ethical considerations. Descriptions of participants, procedures and data analysis undertaken are then presented in sequence.

## Research approach

In the qualitative research literature, authors use the terms 'interpretivism' and 'constructivism' interchangeably to describe a researcher's relationship with the data (Denzin & Lincoln, 2013; Mertens, 2005). For the current study, the term 'social constructivism' (Creswell, 2013, 2014) was chosen as within this paradigm researchers seek understanding of the social world and assume multiple meanings, co-creating understandings between the researcher and the participants and utilising natural settings for its research procedures (Denzin & Lincoln, 2003).

Developed within a social constructivist paradigm (Creswell, 2013, 2014), the current study utilised ethnographic and phenomenological methodologies (Creswell, 2013) in order to understand the complex world of lived experience from the point of view of the participants (Schwandt, 2000). Ethnography is defined as both a qualitative research method and a product whose aim is cultural interpretation grounded in observations of social phenomena (Silverman, 2013). The ethnographer goes beyond reporting events and details of experience and attempts to generate understandings of culture from the insider's point of view. The emphasis in this research approach was therefore to allow meanings to *emerge* from the researcher's encounter with the EYEP rather than imposing meanings on this program from other existing models (Hoey, 2011). Phenomenology is defined as the study of collective experience of a phenomenon or concept, in order to reduce individual experiences of the phenomenon of interest to its "universal essence" (Creswell, 2013, p. 76). The phenomenological researcher collects data from all research participants who have experience of the concept of interest and distills this into a descriptive narrative that elucidates this "essence."

## Data collection

Data were collected over a period of two years. Data collection techniques involved embedded participant observation (Fraenkel & Wallen, 2003; Podmore, 2006), semi-structured interviews (Minichiello, Madison, Hays, & Parmenter, 2004; Patton, 2002), and focus groups (Silverman, 2013). The participant observations of what occurred in the children's rooms were *overt* in that the researcher was identified to all research participants in the setting (Spriggs, 2010) and observations and field notes were conducted in accordance with Fraenkel and Wallen (2003, pp. 393-399), utilising open-ended narrative records (anecdotal and running records). Semi-structured interviews were held with staff and parents in the recursive manner described by Minichiello et al., 2004, and utilised both open and closed questions that allowed for flexible, conversational, two-way communication (Minichiello, Aroni, Timewell, & Alexander, 1995; Minichiello et al., 2004). The interviews constituted a series of face-to-face conversational interactions between the researcher and research participants (EYEP staff and parents) designed to collect "detailed and richly textured information" (Minichiello et al., 2004, p. 412) about the participants' experiences, expressed in their own words. Three focus group discussions were held with EYEP staff at six monthly intervals with topics drawn from, and building on, earlier data collection (as per Silverman, 2013, p. 213). Table 1 clarifies which research methods were applied to each research question.

Table 1:  
Summary of data collection methods used to address research questions

Research question	Research methods
How do the educators facilitate meaningful interactions with the children?	Observations Interviews with educators Focus groups with educators
How does learning occur between the children and with the educators?	Observations Interviews with educators
How do the educators build and sustain trusting relationships with the children and families?	Observations Interviews with parents Interviews with educators Focus groups with educators
How does an integrated and transdisciplinary model of service provision support the diverse needs of children, families and staff?	Observations Interviews with parents Interviews with educators
How do the two models of education and care interact to support children's learning, development and wellbeing?	Observations Interviews with educators Focus groups with educators

The EYEP is informed by the disciplines of education, infant mental health and family services, and the knowledge base of attachment theory and the impact of trauma, and the research methodology aimed to reflect this. The researcher documented everyday aspects of the program as well as 'out of the ordinary' and particularly significant events. Embedded participant observation enables rich descriptions of evidence-based practice and contributes to practice-based evidence. Data from this study will complement the data obtained from the randomised control trial into the EYEP that is still in progress.

There are three rooms in the centre: two rooms with children aged between 0-3 years and one room with children aged between 3-6 years: this room is called the Kinder room, and the children in it are referred to as Kinder children. The researcher spent considerable time in each room over the two-year research period. Observations of the children interacting with their educators were conducted respectfully, with the children's knowledge and with their prior consent (Alderson, 2004).

## Ethical considerations

### Ethics approval

The ethics application for this study was submitted to the Charles Sturt University Humans Research Ethics Review Committee (HREC) using the National Ethics Application Form (Version 2008 - V2.0). The study met all the ethical requirements of the *National Statement* including informed consent, confidentiality and the right to withdraw from the study at any time without prejudice (Appendix 1). The protocol number issued to the project was 2013/172.

### Disclosure of the true purpose of the study

The research purpose was made explicit to all participants (EYEP team members and parents) in the Information Sheets (Plain Language Statements) and Consent Sheets that were given to all participants (see Appendices 2, 3, 4, & 5). As appropriate, Information and Consent Sheets for parents were translated into their home languages by Straker Translation Services.

The Information Sheet given to parents stated “The reason for this new research project (Early Years Education Program: Q) is to have a really good look at the Early Years Education Program (EYEP) in order to understand the experiences of all the children, parents, educators and families as well as to describe, understand and share the day-to-day activities of the program.” Additionally the letter specified “Taking part in the research will involve you being interviewed by [name of researcher]. These interviews will be digitally audio-recorded. [Name of researcher] will also be observing your child interacting with other children and staff at the EYEP and making written field notes. [Name of researcher] will ask you questions about your experiences with the EYEP as well as your thoughts on the program and your child’s progress.”

## Confidentiality

Research materials (Information Sheets and Consent Forms) were given to participants by the researcher at the child and family centre. All participants were informed that:

- The confidentiality of the information they provided would be safe guarded, subject to any legal requirements;
- Information collected in the project would be kept at Charles Sturt University for a period required to undertake analysis for the project, and then for a period required by professional practice, after which it would be destroyed;
- No information on names or addresses would be kept as part of the information collected in this project.

In order to ensure confidentiality for the purposes of reporting participants are referred to with generic terms such as ‘educator(s)’ ‘parent(s)’ and ‘child(ren)’. During the interviews and at the commencement of each focus group discussion, the researcher reminded and reassured participants about the confidentiality procedures. Subsequent to transcription, all identifying information was removed from the interview transcripts. Copies of *clean* transcripts (i.e., identifying information removed) were sent to all EYEP team members and educators to give them the opportunity to review and change them if they wished.

## Potential harm and management strategy

It was acknowledged that research participants (in particular parents) might become distressed when talking about their situation. If this happened, the researcher (a trained family therapist) planned to stop the interview immediately and support the family through their distress. The researcher also planned to terminate the interview should the participant wish and refer the family to a family counsellor if they wished to talk to other trained personnel. In the event, this intervention was not required.

## Engaging with parents and EYEP research participants

Great care was taken to engage with all research participants in a respectful and collaborative manner. All interviews with families were held at the child and family centre, at a time that was convenient for them. Three parent interviews were conducted using appropriate interpreters from VITS (Victorian Interpreting and Translation Services). The researcher was sensitive to the language parents used when talking about their circumstances and was careful to use the same language and to avoid professional jargon.

All but two of the interviews with EYEP team members were held at the child and family centre and at times that were negotiated with the team. At the start of each interview the researcher confirmed the likely timeframe together with the time each participant had available and made every effort to adhere to it. At the end of each interview all participants were asked if they wanted to add information or make additional comments.

## Communication of findings to research participants

At the start of the second year a booklet summarising general findings from the first year of data collection was distributed to all families who had indicated that they would like to be kept informed of the study’s progress. A summary of the second year of the research study will similarly be distributed to families.

Regular presentation updates were made to the EYEP team throughout the course of the study and copies of publications and posters arising from the study were also shared. On completion of the study a summary report will be distributed to all participants who indicated their interest.

### Ethics variation No.1

At the beginning of the second year of data collection it became evident that despite the researcher's best efforts to transcribe educators' interactions with children verbatim, at times things happened at such a pace that it was not always possible to document them accurately. Given that these interactions played an important part in helping children to regulate their behaviours and emotions it seemed pertinent to seek to record these interactions in a more faithful way. Accordingly the researcher first sought the approval of the CPS Research Sub-Committee and then canvassed the views of the EYEP team. Subsequently an ethics variation was submitted and approved by Charles Sturt University's Human Research Ethics Committee to request ethics approval to digitally record the educators interacting with the children and with each other using an iPad (Appendix 6). As part of this variation to the original ethics application revised Information Sheets and Consent Forms were created and distributed to all relevant participants (see Appendices 7, 8, 9, & 10).

### Ethics variation No. 2

As data collection progressed it became apparent that some important experiences of the Early Years Education Program had been overlooked – namely those of the children. Again from discussions with and approval of members of the CPS Research Sub-Committee it seemed timely to canvas the views of the small group of children ( $n = 5$ ) who were leaving the Kinder room at the end of their 3 years in the EYEP program. This second variation was therefore jointly submitted to the CSU HREC committee with ethics variation No.1 and approved (Appendix 6). As part of this variation to the original ethics application revised Information Sheets and Consent Forms were created and distributed to the parents of the relevant Kinder children (see Appendices 11 & 12) and subsequent to parental approval, consent was also sought from the children (Appendix 13).

## Participants

All families ( $N = 27$ ) who had a child or children enrolled in the Early Years Education Program during the first year of the current study, and all educators and other permanent (i.e., not casual) team members ( $N = 22$ ) employed over the course of the study were invited to participate. During the final period of data collection four children who were transitioning to school in the following year (whose parents had given consent for them to be invited) were also asked if they would like to take part in an interview with the researcher.

## Procedures

Five data collection methods were employed in this study: in-depth interviews, observations, focus groups, photographs and digital recording of interactions between educators and children.

### In-depth interviews

Interviews were designed to take place with families and EYEP team members twice over the course of the study with an approximate 12-month interval between each one. Prior to commencing the first interview, all participants completed a Consent Form (see Appendices 3 & 5), which explained that, with permission the interviews would be digitally recorded (to assist in their subsequent transcription) and that all electronic data would be securely and anonymously stored on the researcher's university computer. Additionally all participants were asked if they would like to see a copy of the questions beforehand (see Appendices 15, 16, 17, & 18 for details of all interview questions for educators, EYEP team members and parents).

## Observations

The role of the researcher in the centre was *overt* in that the researcher was identified to all research participants in the setting (children, parents, educators and other EYEP members) as the person who would be sitting and observing and taking notes, with the specific purpose of the research project also made clear (Spriggs, 2010). As the researcher was going to be a participant observer it was important to let the children know what the researcher was doing in their space and so before any observations commenced the researcher discussed a protocol with the educators and prepared a script. While the intention was to be a participant observer throughout the course of data collection there were many times when the researcher's role became that of a non-participant observer. However as Creswell (2013) discusses, role fluidity exemplifies a good qualitative observer.

## Focus groups

Focus groups were planned at six-monthly intervals commencing approximately six months after the educators' first interview. The intention of these focus groups was to drill down into issues that had been raised in the individual interviews (with parents and educators) and also to unpack aspects of the program that had been documented in the observations (see Appendices 19, 20, & 21 for details of focus group questions).

## Photographs

Over the course of the study photographs would be taken of:

- The children's play and learning spaces (both internal and external);
- The educators' teaching plans;
- Key program elements (such as the nutrition);
- The layout of the centre; and
- The local community.

The purpose of these photographs was to provide a context for the observations as well as evidence of the quality of teaching preparation and planning in each of the rooms and throughout the centre.

## Digital recording of interactions between educators and children

As previously mentioned it became apparent that despite the researcher's best efforts to transcribe educators' interactions with children verbatim, at times things happened at such a pace that it was not always possible to document them accurately. It seemed most important to be able to correctly document the language that the educators were using to help the children regulate their emotions and behaviours as two research questions directly related to interactions:

1. How do the educators facilitate meaningful interactions with the children?
2. How does learning occur between the children and with the educators?

Participants' interactions would be discreetly recorded using an iPad with a high quality recording application called Voice Record Pro 7.

## Interviews with children

The purpose of interviewing a small number of Kinder children in the research was to include their views on their centre. The five Kinder children who had received their three years of intervention and who were about to leave the EYEP were deemed to be the best group to sample. There were other children remaining in the Kinder room but they had only been in the program two years or less, and as they were continuing on in the other research program (the EYERP) it did not seem appropriate to interview them. Additionally the five children who were transitioning out of the program were around 5 years of age and had the verbal and social skills to interact with the researcher and respond to the questions (Appendix 14).

Information Sheets and Consent Forms (see Appendices 11 & 12) were given to the five parents, and four parents agreed for their children to take part. Consent was then sought from the children themselves and this

was done in several stages. First of all the Kinder educators prepared the children saying that the researcher was going to ask them if they would like to talk with her individually. Then when the researcher was next in the Kinder room she asked the children if they would like to come and talk with her about their ‘Kinder’ in the parent room which was in full view of the Kinder room. When in the parent room the children were shown the Consent Form that their parents had signed, and the researcher explained what that meant. Then the children were given their own Consent Form that the researcher read out to them (Appendix 13). If the children agreed to the requests they put a stamp in the corresponding blue circle and wrote their names on the dotted line at the bottom of the page. The interview then proceeded straightaway and as the children answered each question they put a stamp in the corresponding blue circle. Afterwards the interview was played back to the children so that they could hear what they had said and they were given a copy of the questions to take home and show their parents (Appendix 14).

## Transcription process

The audio files of all interviews with parents, EYEP team members and focus groups were sent via the Internet to a professional transcription service in another state of Australia, in order to ensure confidential transcription. No details of participants were sent with the files. When the transcriptions were returned they were checked and stripped of any identifying information that may have been revealed in the interview (e.g., name of child, names of other people, names of services).

A copy of the checked interview transcript was given to each EYEP staff member for checking – so that they could make any changes or additions before returning them. If transcriptions were not returned within two to four weeks, a follow-up email was sent. On receiving the transcript of their first interview a number of EYEP staff made changes or added in extra thoughts, for example they removed information that they felt might have identified them or they deleted or amended emotive statements. With the second interview transcripts most staff made no changes. Only the approved transcripts were used in subsequent analysis. A decision was taken not to send copies of the transcripts to parents as it was considered that it would be an additional stressor in their already stressful lives. One parent requested an audio copy of their interview and this was supplied.

## Data analysis

Thematic analysis was the approach used to analyse data. It involves carefully searching across a data set “to find repeated patterns of meaning” (Braun & Clark, 2006, p. 86) and it aims to minimally organise the data set whilst providing rich detailed descriptions of the phenomena being studied (Braun & Clark). The thematic analysis process used was a six-stage hybrid of Braun and Clark’s six phases and Rossman and Rallis’ (2003) seven phases. These are presented in Table 2 and are discussed briefly below.

Table 2:  
Stages of data analysis

Stage of analysis	Analysis process
1	Organising the data sets
2	Familiarisation with the data
3	Generating codes
4	Interpretation: Searching for themes
5	Reviewing and defining themes
6	Writing up

## Organising the data sets

An important preparatory step in the data analysis process is to organise the data into a manageable configuration (Rossman & Rallis, 2003). Accordingly, interview transcriptions were organised into documents with wide margins to allow for comments.

## Familiarisation with the data

This stage is also known as *immersion* in the data (Braun & Clark, 2006; Rossman & Rallis, 2003) and it requires repeated reading of the interview data, focus group transcripts and observational field notes for emergent meanings and patterns.

## Generating codes

Strauss and Corbin (1998, p. 3) define coding as “the analytic processes through which data are fractured, conceptualised and integrated to form theory.” This stage in the analysis involves organising the large mass of data into smaller, meaningful segments by identifying interesting features of the data and formulating a *précis* (Braun & Clark, 2006). To achieve this, short descriptive summaries of chunks of data (the codes) are written in the margins of the transcripts (see Figure 2).

Figure 2:  
Example of coding process

Interview with: <b>E</b> Date: <b>#2</b>  Talking about life cycles with the eggs and doing a lot of planting, using the compost and things like that. Talking about how it does get mulched down and then we turned over the garden bed and just a lot of that incidental learning that happens and there' s been really good feedback that they' ve taken it home, they' ve pulled weeds from home and mums say well one little girl in particular won' t put a glass of water down the drain, she takes it out and chucks it in the garden	<b>CODE / THEME:</b>  Environment - sustainability RQ2 Facilitating learning Children becoming learners
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## Interpretation: Searching for themes

This step consists of “sorting all the various codes into their potential themes and collating all the relevant coded data extracts within the identified themes” (Braun & Clark, 2006, p. 89). Through this process, relationships between codes become clearer and links or connections emerge (Braun & Clark). As these relationships are revealed, the researcher can attach significance to them, offer explanations and draw conclusions (Patton, 2002). The initial part of this process involves creating a logical manual information management system whereby codes are grouped into categories. The second part of this process involves reading the coded data extracts again, searching for deeper understanding and a consideration of how they might link together to form themes.

## Reviewing and defining themes

A review of the themes is then undertaken. This involves a review of the coded data extracts and a reflection on whether they hold together under their thematic umbrella. This process is followed by a review of the themes and consideration of their consistency within the entire data set. At this stage possible alternative explanations and interpretations are also considered (Rossman & Rallis, 2003).

## Writing up

The final stage is as the name suggests. It involves first creating a logical writing plan and subsequently writing a cohesive story that reflects the original aims of the research, presents answers to the research questions and draws some useful conclusion for future research, policy or practice.

## Research Contexts

In this first section the research contexts are presented, i.e., Early Years Education Program demographics, EYEP staffing structure, details of the study's participants, data collection procedures and descriptions of a typical day in the centre.

### Early Years Education Program demographics

This research study took place in a purpose-built children's centre established in 2010 in a low-socio economic high-need area of North East Melbourne (see Figure 3). In this community almost a quarter of children (23%) enter school developmentally vulnerable on two or more domains of the Australian Early Development Census (AEDC, 2014), a figure that is more than twice the national average (11%). Operated by the Children's Protection Society the Early Years Education Program (EYEP) is an early childhood education and care program provided for children who experience significant family stress and social disadvantage, and who are currently engaged with family services or child protection services. The children attending the EYEP receive 25 hours of high quality education and care every week for 50 weeks of the year for 3 years. A key aim of this program is for these children to enter school developmentally equal to their non-disadvantaged peers. At the commencement of the study (January, 2014), 37 children belonging to 27 families were enrolled at the centre and there were 17 EYEP staff based at the centre. In the second year of the study (2015) there were 22 children belonging to 18 families and 14 EYEP staff based at the centre (see Table 3).

Table 3:  
Families, children, educators and other EYEP team members at the centre each year

	Year 1		Year 2
Families	27	Families	18
Children	37	Children	22
Educators	9 (3 left & 2 replaced)	Educators	8 (1 left & 1 replaced)
EYEP team	8 (4 left & 2 replaced)	EYEP team	6 (2 left & 2 replaced)

Insert Photograph 1 Entrance to the Child and Family Centre about here

Figure 3:  
Diagram of the Children's Centre



## Early Years Education Program staffing structure

When this study began in 2014 the EYEP was staffed with 17 personnel most of whom were full time (see Table 4). Table 5 clarifies the staffing structure in the second year of this study (2015).

Table 4:  
EYEP staffing in 2014

1x Program Development Manager	(F/T)
3x Early Years Team Leaders:	Centre Director (F/T) Quality & Training Development Leader (P/T 3 days) Practice Development Leader (P/T 4 days)
9x Educators (all F/T):	Room 1: 3 educators Room 2: 3 educators Room 3: 3 educators
1x Office Manager/Receptionist	(F/T)
1x Cook	(F/T)
1x Infant Mental Health Consultant	(P/T 2 days)
1x Supernumerary Educator (with music expertise)	(P/T ½ day)
2x Consultants:	One experienced consultant in early childhood education and care (ECEC) and the infant mental health consultant on the team (IMH) met with the team once a month providing support and guidance. Another IMHC also met with the team from time to time for education sessions.

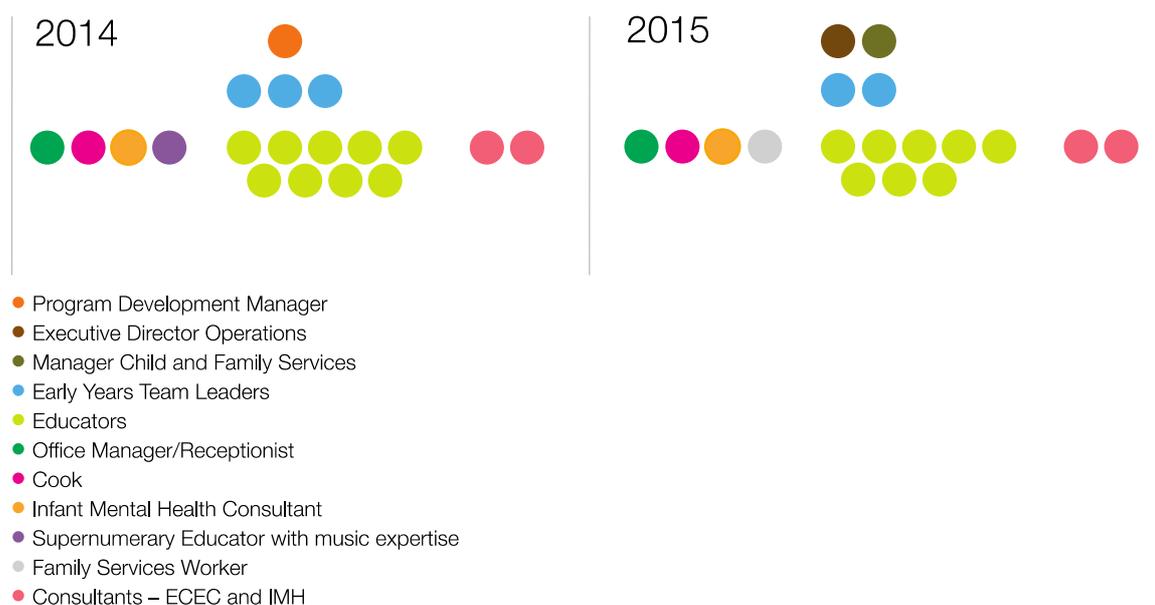
Table 5:  
EYEP staffing in 2015

1x Executive Director Operations	(P/T)
1x Manager Child & Family Services	(P/T)
2x Early Years Team Leaders:	Centre Director (F/T) Early Years Education Leader (P/T 4 days)
8x Educators (all F/T):	Room 1: 4 educators Room 2: 2 educators Room 3: 2 educators
1x Office Manager/Receptionist	(F/T)
1x Cook (F/T)	(F/T)
1x Infant Mental Health Consultant	(P/T 2 days)
1x Family Services Worker	(P/T 1 day)
2x Consultants:	As before, ECEC & IMH consultants continued to meet monthly with the team

The supernumerary educator (with music expertise) resigned from the program in early 2015. Subsequently music sessions were provided by one of the children's fathers (who was a musician). He ran a 20-minute music session in each of the rooms once each week.

See Figure 4 for a visual comparison of the EYEP staffing structure in both years.

Figure 4.  
EYEP staffing structure



## Study participants

All 27 families who had a child or children enrolled in the Early Years Education Program during the first year of the current study gave consent for their child /children ( $n = 37$ ) to participate in the study, and 24 families agreed to be interviewed (see Table 6). Twelve educators and ten other permanent (i.e., not casual) EYEP team members employed over the course of the study agreed to participate in interviews. Seven educators and two other EYEP team members took part in focus groups and all educators were observed. Four children (drawn from the cohort of 37) who were transitioning to school in 2016 gave their consent to be interviewed.

Table 6:  
Study participants

Participants	<i>N</i>	Research activity	Number taking part
EYEP educators	12	Observations	12
		Interviews	12
		Focus groups	7
EYEP team members	10	Interviews	10
		Focus groups	2
Families	24	Interviews	24
Children	37	Observations	37
		Interviews	4
TOTAL	83		

## Early Years Education Program participants

All EYEP educators had a Diploma in Children’s Services as their minimum qualification, but as shown in Table 7, four educators had a higher qualification, as did the majority of the other EYEP team members. Educators’ experience in the field of ECEC ranged from 3 years 2 months to 30 years, with the average length of time being 13½ years. For other team members the range was from 5 years to 25 years experience in the ECEC sector, also with an average period of 13½ years. In addition educators had diverse prior experiences such as working in mental health nursing, journalism, social work, drug and alcohol rehabilitation, sleep centres, nannying and setting up early childhood programs in developing countries. At the time of their first interview educators’ experience working in the EYEP program ranged from 1½ months to 4 years. All but one of the educators had worked in universal or mainstream ECEC settings prior to working in the EYEP. All educators were employed fulltime from 8.30 am to 4.30 pm or from 9.00 am to 5.00 pm.

Table 7:  
EYEP staff details: qualifications, expertise, time in the centre when interviewed

Highest qualification					
	Diploma in Children’s Services	Adv. Diploma in Children’s Services	Bachelors Degree/ Grad Dip in ECEC	Masters Degree	Doctorate
EYEP Educators	8	2	2		
EYEP Team	3	1	2	3	1
ECEC Expertise					
	Less than 10 yrs	10 - 19 yrs	Over 20 yrs	<i>M</i>	
EYEP Educators	6	2	4	13½ years	
EYEP Team	2	6	2	13½ years	
Time in centre at 1st interview					
	Less than 1 yr	1 - 3 yrs	Over 3 yrs	<i>M</i>	
EYEP Educators	5	2	5	23½ months	
EYEP Team	2	2	6	33½ months	

## Child and family participants

Of the 27 families recruited to the study the majority (20) had one child, five families had two children and two families had three and four children respectively. A few children were in the care of their grandparents but the generic term ‘parents’ has been used throughout this report as it preserves confidentiality.

In order to be eligible to participate in the EYEP all children and families were:

- Assessed as having two or more risk factors as defined in the Victorian Government’s Department of Human Services Best Interest Case Practice Model (2007) and
- Engaged with family services or child protection services with early education a part of the child’s care plan (Jordan et al., 2014, p. 5).

Typical risk factors of children and families in the centre included parental mental health difficulties, parental substance abuse, the presence of family violence, having teenage parents or having recent refugee experiences. In their first interview, parents ( $n = 24$ ) were asked how they had been referred to the EYEP. While the two largest referring agencies were Maternal Child Health Nurses (7) and CPS family support workers (6), a number of different referring agencies were also identified (see Table 8).

Table 8:  
Sources of family referrals to the EYEP

Referral source	Number
Maternal Child Health Nurse	7
CPS Family Support Worker	6
Other Family Support Services	3
Psychologist	2
Department of Human Services	2
Social worker	1
Mother & Baby Unit (Hospital)	1
Midwife	1
Friend	1

During the course of the study the children's ages ranged from 6 months to 5 years 8 months, with the majority of children aged between 2 and 5 years.

## Study procedures

*In-depth interviews.* Two interviews were designed to take place with families and EYEP team members over the course of the study with an approximate 12-month interval. However due to a large number of children graduating from EYEP at the end of the 1st year of data collection, a planned slowing of the rate of recruitment to the study for operational reasons at the beginning of the 2nd year of data collection, and EYEP staff turn over, not all parents and staff could complete two interviews (see Table 9 for interview schedule, and Appendices 14, 15, 16, 17, & 18 for interview questions).

Table 9:  
Interview schedule with EYEP staff, parents and children

Interviews	When held	N	Totals
1st interview: original EYEP staff	Feb of 1st year (1 held in Nov due to mat leave)	16	22
1st interview: new EYEP staff	Feb to Nov of 2nd year	6	
2nd interview: original EYEP staff	Feb of 2nd year	8	9
2nd interview: new EYEP staff	Nov of 2nd year	1	
1st interview: original parents	May to Oct of 1st year	16	24
1st interview: new parents	Feb to Aug of 2nd year	8	
2nd interview: original parents	Aug to Nov of 2nd year	10	10
1st interview: children	Nov of 2nd year	4	4

## Observations

Over the course of the two-year data collection period approximately 100 days were spent observing everyday activities at the child and family centre. Of those 100 days, 96 days were spent detailing teaching practices in the rooms and the outside spaces; conducting focused child studies of three children; observing families arriving and departing in the foyer; and documenting food preparation in the kitchen. On average the number of days spent observing in each teaching room was 2.75 days per visit, but the range was from 1 day to 7 days depending on the overall length of time of each visit to the centre.

The breakdown of time spent observing each of the above-mentioned activities was as follows:

Children aged 0 - 3 years:	43 days
Children aged 3 - 6 years:	36 days
Focused child studies:	12 days
Arrivals and departures in the foyer:	4 mornings and 4 afternoons
Food preparation in the kitchen:	1 day

Other activities observed during the course of data collection included staff meetings and team supervision sessions; centre incursions, such as Music Sessions, Sports for Kinder sessions, and visits by the local Police Force on one occasion and a ballerina on another; and centre excursions for example the swimming program, library visits, walking through the local community to join Chinese New Year celebrations at the shopping mall, and a whole centre visit to Melbourne Zoo.

Observations were recorded in a series of notebooks labelled with the name of the observation setting (e.g., Foyer, Kinder Room). Observations were documented as per Creswell (2013) with running records of activities noted on the left hand page (of a two-page opening) and the researcher's reflections written on the right hand page. On observing certain children's challenging behaviours and the educator's corresponding management strategies the researcher followed up with the relevant educator to assist in elucidating the rationale behind each strategy. These conversations were then noted in the reflections section of the notebook.

Frequently line diagrams were drawn to assist in understanding which children were seated where for an activity (e.g., mealtime settings, or who was engaged in a play activity). Over the two years many of the children irrespective of age approached the researcher and indicated a desire (pointing) or made a verbal request to draw in the researcher's notebooks. These requests were always facilitated and consequently the notebooks also provide a wonderful record of the children's evolving drawing and in some cases writing skills. On a few occasions some of the children were also keen to assist in the research and provided ideas or commentary for the researcher to note down.

## Focus groups

Three focus groups were scheduled with EYEP educators (and any other EYEP team members wishing to participate) at six-monthly intervals commencing approximately six months after their first interview. Table 10 gives details of when focus groups were held and participant numbers.

Table 10:  
Focus group details

Focus group details	Number of participants
November 1st year	7
May 2nd year	7
November 2nd year	6

Focus groups with EYEP staff were held in the afternoons (after the children and families had left for the day), ran for approximately 1½ hours and addressed between three and five topics. All focus groups were

digitally recorded and the audio files were sent via Internet to an interstate transcription service. For the first focus group an assistant was employed to help with organisation and to take notes during the focus group, but subsequent focus groups were organised and managed solely by the researcher (see Appendices 19, 20, & 21 for details of focus group questions).

## Photographs

As previously noted, over the 36-week data collection period photographs were taken of:

- The children's play and learning spaces (both indoors and outdoors);
- The educators' teaching plans;
- Key program elements (such as the nutrition);
- The physical layout of the centre; and
- The local community.

Photographs were typically taken at the start of each observation day before the children and families arrived, and always with permission from the educators. Great care was taken not to photograph or identify any of the research participants: children, parents and educators. Occasionally photographs were taken during the day of the children's work as examples of their play and learning, but the children's permission to do so was always requested first, and if their names were visible on their work the photo was subsequently de-identified.

## Digital recording of interactions between educators and children

Once approval was obtained from all relevant participants (parents and educators) the researcher discreetly used an iPad with an application called Voice Record Pro 7 to record examples of the educators' interactions with the children. These recordings took place during the final period of data collection only, when children and educators were extremely familiar and comfortable with the researcher's presence. Some of these recordings were targeted to record specific activities (for example mealtimes or group times), and other recordings were made randomly in order to sample regular interactions.

## Descriptions and definitions of the Early Years Education Program

Typically, at the Early Years Education Program (EYEP) educators start arriving around 8.30 am and spend their first half hour writing case notes or preparing for the morning. All educators are present by 9.00 am when they meet in the foyer of the centre for a quick 10-minute team meeting. The Centre Director and Education Team Leader lead this meeting and brief the staff on any known changes to the usual routine (such as an educator is away, or who is covering lunches) and educators brief each other about any issues that might be current or expected for their children and families (such as court attendance or medical appointments). At the conclusion of this handover-style meeting the team wish each other a great day ("*have a great day everybody*") and the educators head into their rooms to finish setting up.

The children's program runs from 9.30 – 2.30 and so families start arriving from around 9.15. They are all greeted warmly by the receptionist who supports their transition from the car park through the foyer and into their respective teaching rooms.

In their first interview, educators were asked how they would describe their typical day and here is how one educator described her day from when the families started to arrive:



## Two illustrations

### 1) A typical day (from an interview)

*By 9:30 we're all available for the families, greeting them and listening to them, any concerns or anything they might want to give you about the child's night before and things like that. We welcome them and the parents are welcome to stay for as long as they want. We do have some families that would stay for a morning session. Then we have morning tea and then there's an indoor and outdoor program, so doors are kept open and the children are welcome to go inside or outside and we follow their lead and their cues, communicating amongst ourselves who's going inside, who's going outside.*

*With the babies we like to keep the routine consistent so we have music at about 11:00 and that for them is a sign that we're coming inside and that we're going to get ready to wind down, calm down, and then have lunch. So we'll have music for about fifteen, twenty minutes and then get their beds out ... as soon as their beds are out they head to the lunch table, and so have lunch at about 11:30 and then they have a rest, rest time.*

*Most of the babies will sleep from about quarter to 12:00 to about 1:30 so then we'll have our lunch breaks in between there. And then they wake up and have afternoon tea and then 2:30 the families arrive and then we do another catch up on how their day's been. And again we welcome a lot of the parents' feedback so sitting down, listening to them, encouraging them to come a little bit early and have afternoon tea with us, which is great to have them do that. And just having conversations, conversations at the lunch table – so a lot of our conversations are including the child. And then 2:30-ish they go home and then we spend the rest of the time until 4:30 writing up our notes or setting up the room if we're making changes or having discussions with the people in the room about what worked well, if something didn't work well how we're going to change it.*

### 2) Another educator provided different commentary on her typical day (also from an interview)

*A typical day? Sometimes we have families that need to come in a little bit earlier than usual than the prescribed time so that's usually catered for while we're setting up. Just so if some families are having a stressful time sitting in a car park rather than getting them to wait for a long time we allow them to come in earlier and that's fairly typical too. Then we have our morning program and encourage morning tea, getting feedback from parents, we try really hard to get feedback from them to put the child's day into context.*

*At the moment because we're transitioning, the children are able to come and go freely from their old room that they've been in, we really encourage that. So it's okay if they choose that they want to have morning tea or lunch in that room rather than having lunch in our room, that's completely fine for them to come and go as they please.*

*Also a typical day is sometimes where families aren't quite here on time and supporting them with their questions and bits and pieces on the other side of the day too ... so sometimes part of our role would be a little bit of enhanced care in supporting where we can, whether it might be agreement on lifts or us personally contacting the family support worker or we try and get our families to sign*

*consent forms with other professionals they're working with, so that we can also link in and keep other services informed so that the family have the best care.*

In their interviews educators' descriptions of the centre fell into one of two categories. They either viewed it as a regular EC centre with a few extras, or as a specialised service. For example:

A regular centre:

- *"A normal child care centre with a twist"*
- *"All the essential components of a regular child care setting but with more time and flexibility"*
- *"This is normal, our childcare setting, but what we offer is different. The hours are different, the staff are different, the families we have are different"*

A specialised service:

- *"It's an intensive care unit"*
- *"It's a cross between social work and education"*
- *"A really supped up, high-quality education service where children and families can access more than just quality education, they can get some help around social, emotional development and family systems difficulties"*
- *"It's a specialised Early Childhood setting, so it has elements of early childcare, like every other childcare centre, but it also has very specialised elements that are not in a standard childcare centre that make it very unique. One of those things is the big focus of the program, which is having a very strong attachment focus and relationship focus ... aimed at trying to ameliorate or minimise the negative repercussions for children who have experienced vulnerability and/or trauma"*

And in their interviews parents made comments that encapsulated their views of the centre:

- *"Everybody is friendly and welcoming – the culture is genuine"*
- *"I feel comfortable"*
- *"I can see my child's wellbeing"*
- *"It provides a consistency in his life"*
- *"They are like family"*
- *"It's a very good environment – what they teach and how they teach"*

These are very perceptive comments from the families, for example, "not just what they teach but how they teach" and indicate a good understanding of quality in early childhood education. Additionally these comments would appear to positively reflect the EYLF principles of 'Secure, respectful and reciprocal relationships', 'Partnerships with families' and 'High expectations and equity' (DEEWR, 2009). The parent's insightful comments about their lived experiences of the centre, confirm the importance of educators holding high expectations for every family (EYLF, DEEWR, 2009).

# Research Findings

This section systematically addresses the five research questions:

1. How do the educators facilitate meaningful interactions with the children?
2. How does learning occur between the children and with the educators?
3. How do the educators build and sustain trusting relationships with the children and families?
4. How does an integrated and transdisciplinary model of service provision support the diverse needs of children, families and staff?
5. How do the two models of education and care interact to support children's learning, development and wellbeing?

## Question 1: How do educators facilitate meaningful interactions with the children?

From observations of teaching practice and interviews with educators it is possible to list with accuracy the range of approaches that educators employed to facilitate meaningful interactions with children. These interactions are clearly guided by the National Quality Standard, Quality Area 5: Relationships with children, in particular Standard 5.1, 'Respectful and equitable relationships are developed and maintained with each child' (ACECQA, 2013). Educators demonstrate attunement, responsiveness and acceptance by:

- Listening to children's comments and requests and responding to them respectfully
- Noticing children's body language
- Re-framing children's activities with strengths-based language e.g., "*you're a thinker / artist / musician / explorer*" or "*she's learning*"
- Giving clear and consistent feedback
- Looking at the need or feeling that might be underneath a behaviour and responding to the need or feeling
- Wondering aloud what a child might be feeling
- Taking time, not rushing and knowing how to slow things down
- Using open-ended questions that enhance conversation
- Not shaming children
- Being fully present in the moment, able to reflect on their own practices and adjusting them on the spot (authentic reflection and reflective capacity)
- Being flexible
- Following through with their own suggestions
- Actively facilitating interactions

### What skills do educators need to facilitate meaningful interactions?

EYEP educators were authentic with children, which means they were being clear, consistent, honest, open and respectful. They knew what activities helped children regulate their emotions (such as providing sensory activities and quiet spaces) and set these up in the rooms. They knew how to create a environment

with appropriately calming resources, by modeling practices such as being calm, being patient, using a quiet voice, and by being aware of themselves in the space (see section on environmental pedagogy). They appeared to have a thorough knowledge of children's developmental needs, abilities, and stages and how to extend *all* children's learning, whatever their age. They had excellent observational skills so that they noticed children's interactions and responded positively, and they also could predict the potential for new interactions and guided those supportively. These pedagogical skills and understandings reflect the EYLF practices of 'Holistic approaches' and 'Responsiveness to children' (DEEWR, 2009).

Educators also employed diverse strategies that helped to facilitate meaningful interactions between the children. These strategies have been organised to reflect whether educators were observing children's behaviours, modeling behaviours or assisting new behaviours:

Observing:

- Noticing and responding to children's positive caring
- Noticing and commenting when children showed kindness to one another
- Noticing when children reflected modeled behaviours and taught each other
- Noticing when children shared joyful moments together (singing a duet)

Modeling:

- Modeling positive and respectful language
- Modeling phrases to help children negotiate with each other

Assisting:

- Encouraging children to look at others and guess how they might be feeling
- Explaining why another child might have responded the way they did e.g., *"I wonder if he didn't realise that that was part of your game"*
- Facilitating shared spaces (pre-empting potential problems)
- Providing commentary on and interpreting children's non-verbal interactions e.g., to an older child *"Can you ask her if it's ok? (to pick her up and twirl her around). She's only little and she is telling you that she doesn't like it."*
- Fostering interactions between children of different ages e.g., *"She's learning from watching you"*

Taken collectively, these strategies exemplify a relational pedagogy of skilled and careful observation (Luff, 2009), co-constructed learning with the provision of relevant learning experiences (Brownlee, 2004), and educator responses that took their cues from the children (Brooker, 2009). Clearly the EYEP educators are skilled in child-centred practices that listen and respond to children in ways that support their social and emotional learning.

In addition over the course of time spent observing children in the learning spaces it became apparent that a range of other circumstances facilitated children's connections and friendships with each other. These were:

- If the children were allocated to the same room
- If the children had started at the centre at the same time
- If the children had the same primary carer
- If the children were of the same gender (but not necessarily the same age)
- If the children were siblings
- If the children had similar family backgrounds

## Practice Implications

Educators understand how quality relationships and interactions are central to children's wellbeing, learning and development.

Educators are skilled in observing, modeling and responding to children's behaviours in ways that promote children's positive sense of self and their capacity to self-regulate.

## Question 2: How does learning occur between children and with educators?

Learning occurs in part due to the very nature of the EYEP model – that is to say the program’s philosophy of attachment-based care and relational pedagogy is designed to nurture children’s development and learning. Additionally the centre operates an open-door policy between each of the teaching rooms and with the outdoor spaces that fosters family groupings and thus enables children to learn from interactions with their peers of all ages. Older children develop empathy for the babies who are “*still learning*” and they themselves are reinforced as “*teachers*” of their younger friends. The program also provided a range of extra learning opportunities such as Sports for Kinder (a weekly Kinder gym session provided by a visiting early childhood trained physical educator: 20-minutes in each room), swimming lessons, music sessions and cooking, and peer modelling was evident during each of these activities.

### What skills do educators need to facilitate learning?

In the main it was evident that children’s learning transpired directly in response to the educators’ pedagogical skills and these skills have been grouped into four categories:

1. Relationships
2. Understanding learning and learners
3. Co-constructors of learning with children
4. Facilitators of learning

#### *Relationships*

This category reflects the educators’ abilities to be attuned with the children, to be available, to praise appropriately, be supportive, to notice, and to respect children’s agency and choices. Accordingly,

- Educators were physically and emotionally available for children
- They noticed children, their interests and their feelings
- They noticed what the children noticed
- They used positive language to frame children’s achievements “*Oh you’ve made a discovery*”
- They promoted children’s agency by encouraging choice making
- They praised children’s strengths and named the learning “*I can see that your brain has been working so hard and so fast it has been creating all these things*”
- They managed challenging behaviours in a supportive way (“*I can see you’re having trouble managing yourself at the table. Would you like me to come and sit next to you and help you to manage?*”)

#### *Understanding learning and learners*

This category highlights educators’ abilities to sequence children’s learning, to enrich children’s learning with language and questioning, demonstrate flexibility, follow children’s interests and seize the teachable moments. Thus educators:

- Used language to enrich and extend children’s thinking and skills
- Wondered about children’s actions “*How did you learn that? How did you do that?*”
- Followed children’s interests (e.g., the movie *Frozen*), and introduced related elements (songs, costumes, snow figurines) into the program

- Were flexible and spontaneous with their programming and responded to children’s changing interests quickly, thereby co-creating the curriculum
- Provided activities with incremental challenges to encourage new learning
- Noticed new elements in the environment (e.g., a new flower, a different bird or unusual insect) and incorporated them into new learning experiences.

#### *Co-constructors of learning with children*

This category exemplifies educators’ abilities to model behaviours, help children problem solve, think critically, and sustain their shared engagement. Hence educators:

- Were playful and modeled how to play
- Modeled positive social language and behaviours with children at mealtimes (see section on the nutrition program)
- Supported children’s problem solving “*How are we going to solve this problem?*”
- Used open-ended questions “*How does this work I wonder?*”
- Shared examples of learning from their own lives
- Took the time to engage in meaningful conversations with children 1:1 and in small groups

#### *Facilitators of learning*

This category emphasises educators’ abilities to set up challenging and interesting experiences and environments, select resources that support learning, and foster children’s development and wellbeing. Consequently educators:

- Had high expectations for learning (the Kinder children learnt about the world, Australia and the children wrote their own Kinder song and created a Kinder flag (see photos))
- Were clear and consistent with their limits and expectations
- Slowed down transitions to support children’s emotional self-regulation
- Helped children make good choices by setting safe limits
- Used picture books to follow up with concepts (being kind to our friends)
- Supported children’s attention to tasks with individual ‘Work in progress’ blocks that they could leave next to their unfinished projects (see photo)
- Built children’s capacity to negotiate e.g., “*Did you ask her? Did you have a conversation?*” or “*What arrangement did you have?*”
- Created an environment that facilitated learning (see section on environmental pedagogy).

Insert

Photograph 2 Kinder flag

Photograph 3 Kinder song

Photograph 4 Work in progress blocks [about here](#)



## Two illustrations

### 1) **Developing new skills and extending language** (from an observation)

A child noticed some nuts and screws holding together a piece of play equipment and asked how they had been put there. Observing this interest the educator first answered the questions and then said:

Ed: *I might bring the drill in and you could have a turn with that. Have you ever drilled before?*

Ch: *Not for real, only a pretend one.*

Ed: *Just let me set this up and then I'll get the drill.*

The educator got the drill and set the child up with some wood and the drill and they sat down together. There followed a sustained **shared** conversation around tools, drilling, drill bits and their different functions, holes, dents, shavings, plaster, the number of holes, why drill bits were different colours, comparing sizes of drill bits, and gently reminding him of the need to take care of himself and put the bits away carefully.

On this first occasion the activity occupied the child for half an hour but he returned to it again and again over several days: he was safe and secure (in a space to learn), interested in the activity and thoroughly engaged in his own learning. The educator's sustained shared interest and knowledge also supported the child's capacity to learn.

## 2) **Slowing down a transition and helping children to solve a problem** (from an interview)

*Two little kids were pulling – well actually there was about three or four who were pulling this lovely silk scarf – pulling the scarf, they all wanted a turn first, “Me first, me first, me first”, and I'm thinking, ‘Oh Gosh I hope they don't tear a hole’, and I said “Oh this is a really special scarf. This is my very special scarf so I'm just gathering it up really, really gently”, again, slowing down the transition, going really, really slowly.*

*I said “I just need to hold it because I'm really worried” and they were all looking at me to choose who was going to go first. But I wasn't going to be saying who was going to go first. I said, “Oh we've got a problem I can see. You know A wants to go first, and B wants to go first, and what are we going to do, we've got a problem.” Just pausing and waiting to see what their ideas were “what ideas do you have?”*

*And then it was actually A who said, “I know, we can share.” I went, “Oh, what do you think?” The other girls went, “Oh, yeah that's a good idea.” So the next minute, the four girls are all underneath the scarf you know, and they'd worked it out themselves, giggling and laughing and having a lovely connection time, rather than having that regulation of, “No you can go first and then you can go.”*

Taken together with the pedagogical skills described earlier, these illustrations help to elucidate how the educators effectively integrate the principles of the EYLF in order to enhance children's learning outcomes.

The parents' responses to a question about what they thought their children were learning through their participation in the EYEP showed their understanding of the learning that is happening in the centre. The parents' responses about their children's learning can be grouped in terms of skills, learning dispositions and values.

*Skills:* (i.e., cognitive, language, social, emotional and physical skills)

In addition to identifying that their children were learning colours, English, writing, letter recognition, problem solving, counting, and singing, some parents also said their child was learning:

- *“How to express his feelings”*

- *“Social etiquette”*
- *“Sharing”*
- *“How to play with others”*
- *“To be happy”*

*Learning dispositions:* (i.e., listening, concentration and persistence)

Some parents acknowledged that their children were learning these sorts of qualities stating:

- *“He’s learning independence”*
- *“Self-confidence”*
- *“How to listen, how to concentrate”*
- *“Learning that work can be work in progress”*
- *“To manage herself”*

*Values:* Some parents also recognised that their children were learning:

- *“Morals and respect”*
- *“Empathy for others, like see his mum is gone and he’s upset, so we be kind”*
- *“Compassion for his friends”*

Again these insightful comments by parents appear to indicate not only that they had a good understanding of what their children were achieving in the EYEP but also that EYEP educators were working in close partnership with families (EYLF Principle 2; DEEWR, 2009), communicating respectfully and sharing insights and perspectives about the children.

The Kinder children were also asked what they had learnt and likewise they identified some skills (e.g., *‘reading books’* and *‘sharing’*), and values (e.g., *‘how to be nice to people’* and *‘sharing and caring’*).

Finally parents were asked what they thought *they* had learnt through their engagement with the EYEP and in summary parents identified that their participation and engagement with the centre had strengthened their capacity, confidence or skills in the following ways:

Relating to and interacting positively with their children:

- *“How to interact with my child”*
- *“To be patient”*
- *“To slow down, calm down”*
- *“To love my child”*

Guiding children’s behaviour in appropriate ways:

- *‘To praise my child’*
- *“How to say ‘no’ to my child but giving a reason for this”*

Modeling appropriate language with their children:

- *“Instead of wondering what they want – I ask them”*
- *“I’ve learnt to use my words”*
- *“Not to swear”*

Understanding and responding to their children emotions and feelings:

- *“I talk to them about everything that’s going on, their feelings and what’s happening”*
- *“I’m learning more about him through him being here”*

## Practice Implications

Educators are in tune with children, and physically and emotionally available.

Educators understand teaching and learning and young learners, and enrich and extend children's learning and development.

Educators engage in sustained shared thinking with children to support learning together

## Question 3: How do educators build and sustain trusting relationships with the children and families and with colleagues?

In the Early Years Education Program a relational pedagogy approach underpins all interactions between educators and children, between educators and parents and between educators and educators. Relational pedagogy acknowledges the importance of educators being intentional about their work with children and recognising the centrality of relationships for learning (Papatheodorou & Moyles, 2009). While there are many similarities in how positive relationships are built with children, parents and other educators, there are also differences in the skills and practices employed with each. This section is presented in three parts to reflect the different relationship practices and skills used by educators and the diverse elements of the EYEP's relational pedagogy approach.

### Building and sustaining relationships with children

Educators who establish warm, interactive relationships with children exemplify quality early childhood practices (Sylva, Melhuish, Sammons, Siraj-Blatchford, & Taggart, 2004). In their interviews educators described a range of different practices and skills that they employed when building trusting relationships with the children. The practices have been grouped into educators being available, responding sensitively, or communicating warmly.

#### i) Being available

- *“Being present when the children arrive and leave”*

#### ii) Responding sensitively

- *“Giving children time – taking things very slowly”*
- *“Giving children personal space”*
- *“Knowing when to step back”*
- *“Observing and learning”*
- *“Finding out children’s strengths”*

#### iii) Communicating warmly

- *“Getting down to the children’s level”*
- *“Using eye contact and smiling”*
- *“Using language that affirms love and care”*
- *“Acknowledging children’s feelings”*

In addition the educators are *skilled* in relationship building with children and so they were observed to be physically and emotionally warm, kind, caring, friendly, respectful, attuned, available, predictable, consistent, clear, supportive and calm.

The Centre's external National Quality Standard, Assessment and Rating report confirms the quality and importance of the EYEP educators' relational pedagogy with the children (Standard 5.1: 'Respectful and equitable relationships are developed and maintained with each child' ACECQA, 2013). The report stated:

*Each educator consistently demonstrated respectful, equitable relationships through their consideration of each child's perspective, their calm manner and approachability. Educators maintained vigilance regarding where a child might require additional support to feel secure, confident and included and responded to in a timely way.*

In regard to the three Elements for Quality Area 5, Standard 5.1 the report also noted, "Educators acknowledged each child individually, positioned themselves often at the child's level in front of the child and spoke with clarity in a quiet voice" (Element 5.1.1); "Educators were responsive to each child that approached them to share information, engage in play or ask for assistance" (Element 5.1.2); and lastly "Each educator was available for each child" and "Educators acknowledged the importance of each child's emotions and this supported their wellbeing" (Element 5.1.3). All children have a strong sense of identity (EYLF Learning Outcome 1, DEEWR, 2009), when educators "acknowledge and respond sensitively to children's cues and signals" (p. 21).

## Building and sustaining relationships with parents

Parents were asked in their second interviews "What would you say are the most important skills for teachers in building relationships with parents?" Many of the relational skills and practices that parents identified could also be categorised as educators 'responding sensitively' or 'communicating warmly', but in addition parents' responses differentiated a third category, that of educators 'being knowledgeable.'

### Being knowledgeable

- *"Have experience with families"*
- *"Know how to connect with parents"*
- *"Understand the children's histories"*
- *"Have knowledge of mental health issues"*
- *"Have knowledge of cultural diversity"*

### Responding sensitively

- *"Have good intuition (know when to ask: "Are you ok? Is everything alright?")"*
- *"Give feedback and helpful hints"*
- *"Be open to listening"*
- *"Offer suggestions but don't tell us how to run our family"*
- *"Praise and give confidence"*
- *"Give families space"*
- *"Be open-minded"*

### Communicating warmly

- *"Be friendly"*
- *"Be honest"*
- *"Be nice"*
- *"Show genuine caring"*
- *"Have empathy"*
- *"Show respect"*
- *"Don't judge"*

When the educators were asked a similar question in their second interview 'What would you say are the most important skills and / or strategies in facilitating and sustaining relationships with hard-to-reach families?' they identified most of the same qualities as parents. Additionally, educators' responses revealed two further qualities that would appear fundamental to building and sustaining positive relationships with

parents: ‘care’ and ‘respect.’ Practices based on the qualities of showing care and respect are identified as central to family-centred practice because they support partnerships with families, rather than the notion of the ‘professional as expert’ (Dunst 1997).

#### Care practices

- “Recall details of parents’ lives”
- “Know their immediate family and what happens in the home”
- “Show parents that you hold them in mind over the weekend”
- “Be able to contain the emotional feelings for the parent”
- “Walk alongside parents”

#### Respect practices

- “Treat parents as equals and show that they are valuable people”
- “Respect parents’ decisions”
- “Share aspects of your own life”



### Illustration

#### Respectful practices (from an interview)

*I think you have to be patient and understanding and I think you’ve got to not be judgemental and see everybody as an equal and yourself as equal to them. And that you haven’t lived a day in their life so it’s hard to understand what they go through and if you can just see them for who they are and [understand] that they have the best interests of their child at heart, whether or not they’re able to meet those at the time, that is their ultimate desire*

One educator also suggested some respectful care strategies to build relationships with younger parents who appeared less comfortable coming regularly to the centre:

- Text or message them (to keep them up-to-date with what is happening)
- Seize opportunities to take their photo with their children when they do appear (to include them visually in children’s portfolios, or family posters)
- Don’t give up but keep gently encouraging their engagement
- Authentically validate their parenting skills (“You’re doing such a good job with [name of skill]”)

Another educator described how important it was to not take things personally if you had a difficult or challenging conversation with a parent but to remain professional and:

*Rise above any hurtful comments or bad feelings and say “Right, bad day, get on with it.” So make sure they always feel welcome and you’re always going to be there for them whatever they say.*

Collectively the data from interviews with educators and parents clearly reflect a commitment to the National Quality Standard, Quality Area 6: ‘Collaborative partnerships with families and communities’ and in particular Standard 6.1 ‘Respectful and supportive relationships with families are developed and

maintained' (ACECQA, 2013). In addition, the EYEP educators' relational pedagogy resonates loudly with the EYLF principles of 'Partnerships with families,' 'High expectations and equity' and 'Respect for diversity' (DEEWR, 2009). As noted previously, the EYEP's relational pedagogy reveals a close alignment with the principles of family-centred practice (Dunst, 1997), which are described in detail in the Discussion section.

## Building and sustaining relationships with colleagues

The work in the centre is often intense and can be challenging. Consequently it is important for educators and other EYEP work colleagues to build and sustain good relationships between themselves. The National Quality Standard, Quality Area 4: 'Staffing arrangements,' specifically Standard 4.2, 'Educators, coordinators and staff members are respectful and ethical,' addresses this aspect of the Centre's work (ACECQA, 2013). In the interviews and focus groups educators discussed what factors help them build relationships within the team. They identified four factors 'trust', 'respect', 'communication' and 'self-reflection' to be the most important:

### Trust

- *"Trusting your colleagues"*
- *"Knowing how to really build trust"*
- *"Being in tune with your colleagues and not professionally jealous"*

### Respect

- *"Respecting and accepting differences"*
- *"Knowing how to talk to each other respectfully when issues arise"*
- *"Supporting each other"*

### Communication

- *"Having open communication"*
- *"Checking in with colleagues ("Are you ok?" "Do you need help?")"*

### Self-reflection

- *"Being able to reflect on your practice (self-reflection) and if necessary apologise"*
- *"Understanding the rupture and repair process (from the Circle of Security)"*
- *"Remembering that children are the focus"*

These data appear to highlight the professional nature of the EYEP team (National Quality Standard, Quality Area 4, Element 4.2.1), as well as the respectful, collaborative and supportive ways the EYEP team communicates (National Quality Standard, Quality Area 4, Element 4.2.2; Element 4.2.3).

EYEP staff variously participated in a range of activities designed to facilitate good communication and team membership. Some examples of these team-building activities were the morning handover meeting (previously discussed); a birthday cake-making roster (all birthdays were listed and celebrated); monthly after-work socialising; 'boot camp' (once a week for a few hardy exercisers); team fundraising for charity (September 2015); a team scavenger hunt; and a trip to the night markets.

In addition to the extensive list of practices, strategies and skills that are outlined above, three intentional pedagogical strategies are employed in EYEP that undoubtedly contribute to building and sustaining respectful, responsive relationships with the children and families. They are listed here and described below.

- i) Purposeful greetings
- ii) Gradual orientation into the centre
- iii) Education and care plans

## Purposeful greetings

From their very first encounter with the centre, families are greeted purposefully and warmly, firstly by the receptionist, then by their child's educators, and also by any other staff members who encounter them. All staff make an effort to learn the names of children's extended family members including siblings, aunts and grandparents so they can greet them appropriately. Educators show genuine interest and concern for every family member and child through the informal conversations they have each day at arrival and at departure times and before and after weekends. These purposeful conversations help to strengthen the relationship between home and the centre. One of the educators described the strategy like this:

*One of the guidelines we have, we call it a purposeful greeting and I think that's something that's really important for children and for families and that's a really good first step in welcoming people into the centre. ... It's a warm welcome that we all offer when parents come in. I think parents feel as if they're valued and that they are welcome and the same with the children, the children are the focus, they're not ignored while people have a chat with the parents, it's very much about welcoming that child, getting down to their level and making eye contact.*

Daily, warm, welcomes and purposeful conversations not only reflect the National Quality Standard, Quality Area 5: 'Relationships with children' (ACECQA, 2013), and the EYLF principle: 'Partnerships with families' (DEEWR, 2009), but their family-centredness reinforces child and family *belonging* - "knowing where and with whom you belong" (DEEWR, 2009, p. 7) - to the centre.

In their interviews many parents commented positively on the warm welcome they received, and the effect this had on them. One parent summed up the experience of the purposeful greetings like this:

*From week one it was like you walk into this place, and it's such a family atmosphere, like not just a work place, you belong here. And you go from the car and you see parents and they're 'oh hi, how was your week, how are you going?' And I stop and chat. And the staff are the same. I think it's more than a day care centre it's a family... The warm friendly welcomes I get in the morning. I think the relationships that are formed here are amazing. I think it's a really positive, supportive environment for a parent to be in, because sometimes we feel like we're a bit of a fish out of water.*

## Gradual orientation into the centre

Each child and family has an orientation and participation plan that is developed between the child's primary carer and the child's parent(s) and that is informed by the infant mental health assessment that each child and family has before they commence attendance. The purpose of the plan is to ensure that the child's transition into the centre is in their best interests, is thoughtful and occurs gradually over a period of weeks and months. For children under 12 months, the process may take up to 12 weeks, and for children over 12 months it may take up to eight weeks. Educators and parents review the plan together at the end of each week. The team's infant mental health consultant also supports the planning and processes involved in a child and family's orientation into the centre. This orientation process is "based on active communication, consultation and collaboration with all families" thereby reflecting that it exceeds the National Quality Standard, Quality Area 6: 'Collaborative partnerships with families' (Element 6.1.1; ACECQA, 2013).

Initially the child's primary carer and the child's parent(s) arrange a suitable time for the child's first visit to the centre. The child and parent(s) come and stay for a couple of hours and are introduced to educators, parents and children and get to know the centre. Typically, the child and parent leave before the other children in their room have lunch, and they can repeat this for several days. When the child and parent/s are feeling more comfortable they might stay for lunch and eventually the child stays for a sleep or rest, with the parent settling them down and staying beside them so that the child feels safe. Then the parent might leave the child to sleep by themselves but will still be available in the building, until both educator and parent(s) agree that the child is fully oriented into the program and ready to stay for a full day.

The process helps educators to build meaningful relationship with parents because there is no rush to move a child and family through the orientation process and so the slow transition into the centre supports children and their parents to gradually build up trust with educators and settle in to the new setting. Crucially this gradual orientation process also helps to foster each child and family's sense of *belonging* to the centre.

Educators have time to listen to parents' concerns and hear their stories, and they can also observe how the child and parent interact, answer questions, provide information and model positive practices in a warm, gentle, consistent manner. Educators take the opportunity to share stories from their lives, and this two-way process enables parents to get to know the educators as individuals, and strengthens connections. The extended time that parents spend orientating their children into the EYEP provides a "golden opportunity to chat informally" (Arnold, 2007, p. 101) and lays the foundations for a collaborative partnership.

Even when their children are fully oriented into the program the parents are welcome to stay in the centre each day for as long as they like. They can stay for meals, participate in play activities with their children or use the parent resource room. It should be noted that this gradual process of orientation is much easier when parents are not working.

## Education and care plans

Once a child has completed their orientation into the centre and both child and parent(s) are settled, the child's primary carer arranges a meeting with the parent(s) and together they develop an Education and Care Plan. Family caseworkers may also attend this meeting but it is the parent(s) and educator who develop the child's education and care goals. Children's plans are reviewed every three months to ensure the relevancy of the education and care goals.

Each meeting is held at the children's centre and commences with a review of the child's progress, as well as a discussion of their skills, achievements, interests, and any significant changes that may have occurred or are occurring in the children's and families' lives. Educators also use this time to share the child's portfolio with the parent(s). The progress of previous goals is discussed and then new goals are identified, clearly linked to the learning outcomes in the *Early Years Learning Framework* (2009) along with activities and actions that will be taken to achieve the planned goals. Parents are encouraged to identify *their* goals for their children.

After the meeting, the outcomes are typed up as the new Education and Care Plan and all parties participating in the review sign it, before copies of the plan are given to those present. Subsequently educators write each goal up in detail on an Individual Learning Development Record, which identifies the strategies, experiences and materials that will be employed to meet every goal (See Figure 5) and is provided to all families in an accessible format (National Quality Standard, Quality Area 1: 'Educational program and practice,' Element 1.1.4; ACECQA, 2013).

The process helps to build meaningful relationships with parents because in these 12-weekly meetings, the educators share accurate and unbiased information with the parents in ways that enable the parents to understand their children's progress and needs as well as share their own ideas for new goals and strategies that might help to achieve them. Meaningful relationships are developed when parents' views are listened to, when their knowledge is treated respectfully and inclusively in the goal setting process, and when they are seen as their child's most important educator as well as capable contributors in their children's lives (see Whalley, 2007).

Figure 5

Example of an Education and Care Plan (for a child aged 5 years)

Previous Goals	Progress
<p>To continue to extend the child’s learning in all areas of the curriculum.</p> <p>EYLF Learning Outcome 4: Children develop dispositions for learning such as curiosity, cooperation, confidence and enthusiasm.</p>	<p>Child is a very keen learner.</p> <p>Child is keen to share thoughts and knowledge.</p> <p>Child is creative and enjoys making 3-D objects at the pasting table.</p> <p>Child has learnt to draw recognisable people and objects such as trees and flowers.</p> <p>Child enjoys teaching peers how to draw people.</p>
<b>Discussion</b>	
<p>Educator and parent have both noticed that recently the child does not want to attempt new activities especially if the child feels that they can’t do the task perfectly. Sometimes the child gives up on an activity and appears sad. This also happens at home.</p>	
New goal (Link to EYLF Outcomes)	Activities / Actions to achieve this
<p>Help the child to break down new tasks into small components</p> <p>EYLF Learning Outcome 4: Children develop dispositions for learning such as curiosity, cooperation, confidence and enthusiasm.</p>	<p>If educator notices that the child is not managing well with a new task, encourage the child to use a “work in progress” block to give the child’s brain a rest. Encourage the child to return to the task later.</p> <p>Parent can use the words “Give your brain a rest” at home, so that the child does not lose confidence in trying a task again.</p>

## Practice Implications

Educators are available, responsive and communicate warmly with children and families.

Educators know how to connect with families.

Educators understand that it takes time to build meaningful relationships with children and families.

Educators share information with families respectfully and inclusively and view parents as capable contributors in planning for children’s learning and development.

## Question 4: How does an integrated and transdisciplinary model of service provision support the diverse needs of children, families and staff?

Before this question is addressed it is important to clarify the model of service provision that the EYEP was observed to operate. Despite the intention of the EYEP to utilise a transdisciplinary model of service provision, observations and interviews revealed that the model more faithfully replicates that of *integrated* or *interdisciplinary* service delivery. The rationale for this statement is drawn from descriptions in the literature of what should occur in a holistic transdisciplinary model (see Nolan, Cartmel, & Macfarlane, 2012), and comparisons with the reality of the EYEP, and is explained below.

In a transdisciplinary model of service provision, a group of practitioners from diverse professional backgrounds e.g., a physiotherapist, an occupational therapist and a speech pathologist, would first share their knowledge and expertise before working across professional boundaries to ensure that families only engage with one transdisciplinary practitioner (who addresses their diverse therapeutic needs) instead of three individuals. Hence the model (when enacted faithfully to the model) is less stressful and time-consuming for families. However, it is incredibly hard to do transdisciplinary practice well because of the nature of professionals' need to role release, the challenge of crossing professional boundaries and of not gate-keep their knowledge and expertise (McWilliam, Hearn, & Haseman, 2008; Nolan et al., 2012). All members of a transdisciplinary team are seen as equals and perform the same role.

In the EYEP, the data indicate that this is not the case. Educators are always the primary contacts for children and families and they work as early childhood educators with some additional knowledge of infant mental health, effects of trauma, and high quality EC practices as a result of the consultancy sessions that they attend. But this is uni-directional sharing of knowledge and expertise and not bi- or multi-directional as it would be in a transdisciplinary model. The infant mental health consultants do not appear to role release to consider the educators as capable infant mental health practitioners. And while in some instances infant mental health consultants *also* work directly with parents, they do that in the capacity of being an infant mental health practitioner and do not appear to advise or guide families on educational practices. So not all the EYEP team are engaged in 'trans' practices.

Given the evidence, the EYEP can more appropriately be described as an *integrated* or *interdisciplinary* model of service delivery, whereby:

*Professionals from different disciplines i) share information and make decisions together; ii) work within their respective disciplines to implement these decisions; iii) are jointly accountable for shared goals* (Press, Sumsion, & Wong, 2012, p. 19).

The EYEP educators attend consultation sessions where the infant mental health professional shares knowledge of the child's inner world from an infant mental health perspective, and as one educator said, as a result of these consultations, they are given "*a language to use with the children.*" At staff meetings, joint consultations with the staff, led by an infant mental health specialist and an external early childhood education curriculum specialist also support a deeper understanding families and children from two perspectives. These practices enhance the educators' practice as *educators* – that is their pedagogy is informed by an understanding of attachment theory and the effects of trauma for example, but they do not replace the infant mental health consultant. Nor do other team members work as educators. One educator expressed it like this:

*They are educators, they are not therapists, they're not counsellors to either the children or the parents. And whilst in some ways they play a therapeutic role for the children, particularly those who display more severe trauma symptoms, they are not a therapist. So their availability to be open and available to the children is key to building that relationship with them so that the children can experience a safe and secure relationship, maybe the only one that they have. Maybe, because not all of the children have insecure attachments to care givers. It shouldn't get in the way of them being able to provide the high quality education ... Sometimes educators get really keen and eager to support the families and they might intervene in a way – and it's not unsafe, but it's not necessarily helpful to the families because they don't have that level of understanding of what's happening or what the needs are. And it comes from a kind place, it comes from a nurturing place, but it's not necessarily useful.*

Perhaps then it is better to rephrase the original question into “How does an *integrated, interdisciplinary* model of service provision support the diverse needs of children, families and staff?”

As previously stated in the research contexts section, the current EYEP team consists of a Centre Director, an Education Team Leader, nine Educators, an Office Manager / Receptionist, a Cook and a part time Infant Mental Health Consultant. Collectively these team members deliver the program, but the educators undertake the majority of the work with children and families.

Once a fortnight each room of educators meets with the team's infant mental health consultant to discuss any issues that might have arisen with their children and families. Because of their training and expertise and perhaps because of their 'distance' from the program (only being part time and not working directly in the rooms) the infant mental health consultant can bring a uniquely different perspective to the work as the educators get regular opportunities to reflect on the attachment theory that underlines the program.

Indeed one of the educators described the process thus:

*I feel very fortunate to have the expertise of the infant mental health consultant. Often I walk away I think oh that's so clever, like that's really good. Yeah we will try that strategy or just how to word things, how to articulate any particular issues that you might be having with families, ... really good feedback and advice, you might want to approach it this way, or say it this way, because when you might say it this way that might leave them feeling – and you're like I didn't take that into account or I hadn't thought of about that perspective, or as to why a child might be exhibiting these particular behaviours.*

Educators clearly value the knowledge and information that the infant mental health consultant brings to the program. But the consultations also provide a space for the educators to safely discuss any emotional responses that they might be experiencing. Indeed one educator described the infant mental health consultations as being “*emotionally containing for the staff,*” suggesting that the consultations provided a space where educators could safely share, understand and process their emotions (in regard to what might be happening in the rooms or with their individual children and families), which in turn enabled them to proceed more positively.

## Practice Implications

Regular consultations with an infant mental health specialist can enhance educators' understanding of children's attachment and emotional development.

Interdisciplinary or integrated practice builds respect and shared understandings between professionals.

Families and children benefit when professionals who are in partnership with them have shared aspirations and work collaboratively.

## Question 5: How do the two models of education and care interact to support children's learning, development and wellbeing?

Separating education and care practice in this research question is not suggesting there is a dichotomy between them in everyday practice. Education and care are 'separated' in this study in order to support a deeper understanding of their importance, connectedness and key elements.

In discussing how the two models interact, the evidence obtained from observations, interviews and focus groups overwhelming led to the conclusion that the care elements needed establishing before educational components could be taken into consideration. Specifically children's wellbeing - feelings of safety, security and connection to the space - needed supporting before other aspects of their development and learning could be supported. As one educator stated:

*I think it's really important to have an established primary attachment first because if the child doesn't feel secure they're not going to learn.*

In saying this it was clear that educators needed to be extremely flexible in the way that they worked and much of what they could achieve in terms of facilitating children's learning and development depended on children's fluctuating emotional status. That is to say that each day was highly unpredictable:

*Each day when they arrive it's not a consistent behaviour that they present or a consistent emotion that they present, it varies from day to day, depending on what happens at their home. So what walks in our door can be quite different to what presented the day before. So not expecting things to be the same every day, you have to just keep working with something new every single day.*

### The Care Model

Three fundamental elements of the care model that will be discussed are the primary carer role; the educators' abilities to help children regulate their emotions; and the nutrition program.

#### Primary carer role

In the EYEP the term chosen to describe the individual educator who is allocated to the care of a child is that of 'primary carer.' The term was chosen in response to attachment and the impact of trauma theories. The EYEP model also recognises and acknowledges that parents are their children's primary carers and their primary educators.

In the EYEP model each child and family is allocated to a primary carer who is the go-to person for that child and family and who also acts as a primary attachment figure for the child in the centre. A key task of the primary carer is to build an attachment to their primary children and also where appropriate to help strengthen the quality of the attachment relationship between each child and their parents(s) (Colmer, Rutherford, & Murphy, 2011).

Observations revealed that the role requires educators to navigate between caring deeply for the children and developing an attachment with them, but also not taking over from the parents. Indeed in the first focus group when educators discussed how they understood the role there was some discrepancy between notions of whether each was a primary attachment figure, a secondary attachment figure or a primary carer. Some educators stated that a child's primary carer was always their parent and that an educator was only a secondary attachment for the child, for example:

*My understanding of the words 'primary attachment', 'secondary attachment' [is that] when we started this, we were the primary educators, but we're actually all secondary attachments to the children anyway.*

So finding a good balance between educator and carer can be a difficult role – one that requires a great deal of self-reflection and consideration of oneself (and one's own needs) in the dynamic of child, family and educator. In their second interview educators were asked how they managed this balance and they framed their thoughts in terms of working in partnership with parents as well as some of the challenges involved with the role.

Working in partnership:

- Work with parents to give them the best knowledge that you can offer
- Have respect for the parents and a non-judgemental, positive regard for parents;
- Parents are the experts of their children
- Reassure parents with phrases like “*You're the most important person in your child's life*”

Challenges involved:

- “*You can find yourself quite attached to the child and it is difficult when you see a child is hurting from events at home*”
- “*If I feel I'm too involved I can discuss it reflectively in the infant mental health consults*”
- “*It can be a challenge if the child sees the educator as a parent figure*”



## Illustration

**The challenge when a child seems to regard the educator as a parent figure** (from an interview)

*I have a child in my primary care that almost sees me as his parent. So that's a real struggle, that's a challenging balance for us and particularly because the mother didn't really come to the centre last year so the attachment was really formed with me. This year I can see there'll be a bit of a swing because Mum's now involved in bringing the children to the centre. So to manage the child reuniting with his mother, we'll be sitting alongside each other and playing together. So that way it's a triad working together so that the child can build up that relationship a little better with the parent ... and so that the child really sees that the parent is the primary carer and I'm the educator, not the primary carer.*

Educators were also asked to talk about how they nurtured or supported the relationships that the child had with their family. The educators agreed that it was important to be a strong advocate for the child so that the child could see them as a conduit to their parents. Some educators also thought that it was important for a child to see that they (educators) had a respectful relationship with the child's parents, in effect “*giving the child a lens to see that their parent is OK.*” Other educators described strategies they used to build parental confidence:

Strategies to build parental confidence:

- Supporting the parents to be in the room
- Saying “*Come and sit by me*” or “*come and play*”

- “Promoting an alliance, a partnership, together not separate”
- Helping parents to notice their children’s cues, and what their children might be trying to tell them
- Sharing the positive learning the child has achieved in the day
- Including parents in three-way conversations between child, parents and educator
- Reminding and praising parents that they are doing a great job of parenting
- Giving parents strategies to try at home
- Modeling how to enjoy playing and having conversations with children

One educator eloquently described the process like this:

*It’s the relationship that’s the most important. So I guess part of that is three things: 1) Exploring parents’ own feelings about meeting their own children’s needs. 2) Facilitating parents’ strengths to discover strategies to help them define what boundaries they want to put in place for their children; and 3) Providing developmentally guided information when needed.*

Two educators referred to strategies discussed earlier, namely, the gradual orientation into the program, and the 12-weekly education and care plans as being two practices that helped build attachment between the parents and their children. In the first instance parents spend time being with their child as they both orientate into the centre and in the second strategy, parents’ knowledge of their child is respected when they propose goals for their child’s individual learning plan.



## Illustration

**Slow orientation into the centre builds attachment between mother and child** (from an interview)

*In this program we actually assist the parent to build that attachment, that’s why the orientation takes longer than in mainstream child care which is like one week, go! But in this program we take it very slowly, to really ensure that it’s based on the child’s need and the parent’s need, so they have that responsibility to look after a child - that is the nature of being a mother and having a baby. So we follow it through and we assist them and we support them the best we can to build the attachment. The orientation [process] actually supports the parent to build their attachment in here. So we let the parents engage in the play either indoors or outdoors and let the parents assist them during quiet time, music time or sleep times and it goes from there, they gradually build attachment with their babies.*

## Emotional self-regulation

Emotional development begins early in life, and is a critical aspect of the brain’s development: “early emotional experiences literally become embedded in the architecture of [young children’s] brains” (National Scientific Council on the Developing Child, 2004, p. 1). The experience of trauma or neglect in childhood has been well documented as producing measurable changes in the immature brain (Perry, 2002; Shonkoff & Garner, 2011) that can affect cognitive, emotional and social behaviours (Briggs, 2012). Consequently young children growing up in environments where there are parental mental-health problems, substance abuse or family violence face significant threats to their own emotional development (Glaser, 2000). With

all of the EYEP children having experienced some sort of trauma or stress in their lives, a great deal of the care work is focused on supporting children's emotional self-regulation.

From the observations it was clear that all educators approached this aspect of their practice in a consistent manner. And given that the centre operated an open-door policy whereby all children had access to all learning spaces, this uniform approach was very important. Educators used the same language, and were kind, compassionate, clear and supportive as they helped children who were experiencing *big feelings* of sadness or anger just as well as the children who needed help managing a transition (e.g., from outside to inside). They were observant in terms of noticing how children might be feeling or managing themselves day-to-day and provided physical closeness and used appropriate praise and meaningful feedback to assist children to build their emotional capacity. From combining educators' interview and focus group responses with audio-recordings of their interactions with children it is possible to provide a clear description of the step-by-step process EYEP educators employ to help children regulate their emotions. These strategies are listed below:

1. Notice any changes happening with a child's facial expression, body language, voice
2. Stay calm and speak in a calm voice
3. Acknowledge that they are feeling something *"I can see that your fists are tight"*
4. Try to understand what the feeling is *"I'm wondering if you're feeling sad?"*
5. Name the feeling *"It looks like you're angry"* or *"You really want your mum"*
6. Validate the feeling *"It's ok to feel sad"*
7. Help the child's awareness of feelings using tangible imagery *"Your engine is running too hot, and I can feel your heart beating fast"*
8. Help the child to manage *"You're having a big feeling, how can we manage your big feeling?"*
9. Regulate with the child *"Let's take a few deep breaths"* or ask child to blow up a balloon, or to hold a stress ball
10. Coach the child how to calm down *"Take a deep breath, take another deep breath, it's ok, you're calming down"*
11. Give the child limited but manageable choices only when they are calm and can hear *"Would you like a drink?"* *"Would you like to come and read a story?"*

Implicit in these strategies are the notions of slowing the whole process down and helping the child to understand, as well as to manage their feelings. The EYEP educators' approach to supporting children's emotional self-regulation is clear evidence of the children becoming strong in their social and emotional wellbeing (EYLF Learning Outcome 3), in that the educators consistently "talk with children about their emotions and responses to events with a view to supporting their understandings of emotional regulation and self-control" (DEEWR, 2009, p. 31).

In the instances where the child was in conflict with another child or children, educators used the same approach but empowered *all* of the children to deal with the conflict with positive language models, or with gestures if children were non-verbal. When children exhibited challenging behaviours educators would make every effort to separate the behaviour from the child (externalise the behaviour), to empathise with how the child might be feeling (*"I know it's hard to wait your turn"*) and to provide the child with alternative solutions or choices to support their agency in the process.



## Two illustrations

### **1) Emotional self-regulation** (from an interview)

*A big part of what we do is helping them with their emotional regulation and acknowledging feelings, so we do a lot of that across the centre, that's a really big part of it, using words such as "You're having a really big feeling" and staying with the child and just helping them work through those emotions. So we'll talk about the physical symptoms, getting them to recognise what's actually occurring for them when they are having a big feeling.*

*So things like teaching them to breathe deeply and we'll model that, and we'll sit with them. Getting them to recognise if their heart's beating fast and saying things like "Is your heart beating fast, put your hand on your chest, can you feel it, mine's beating a bit fast too", or "Are you feeling hot?" or "It looks like your hands are really shut tight and that looks like it's an angry feeling." So really talking about those feelings.*

*We've got a lot of books and resources that we use. A particular one that's really useful is Lester Loses His Cool, about the little steam engine that gets quite overexcited and then kind of blows up and there's a wiser, older engine that teaches him strategies, so that's been really useful with the children that we have and we've taken some strategies from that.*

### **2) Emotional self-regulation** (from an interview)

*The manner that we try to use with the children is very calm, very quiet and slow. You know children that may have suffered trauma are at an elevated heart rate a lot of the time anyway. So by us talking really slowly and quietly and calmly that can help to soothe them and to teach them if you like, to calm themselves.*

*We've seen it a number of times, children that come in that cannot regulate themselves emotionally, the more you sit with them and help talk them through it, they do learn those skills, and that's a really, really important part [of our program].*

*We're very keen on never telling, it's asking. So words or phrases such as "I'm wondering if you're feeling a bit sad about this" because we don't actually know for sure how they're feeling, but we can guess. And I think that helps the children to feel we're in tune with them and understanding and listening.*

*When I trained we were told a phrase you could always use was "You need to" and you hear it echoed a lot, and that was a positive phrase but you're still telling, you know "You need to do this" instead of asking them "Oh I wonder why you're doing that?" Using creative ways to guide behaviour that don't shame children is a really big part of what we're doing.*

## The nutrition program

One of the six components of the EYEP model and a core contributor to the children's care is the nutrition program (see Figure 1). Accordingly this aspect was of research interest and data were collected through observations of educators interacting with the children at mealtimes, interviews with educators, parents, the cook, children, and photographs of the food. Observations revealed:

- Children received three meals a day – breakfast, lunch and afternoon tea
- Leftover afternoon tea was made available for families to take home in paper bags

- The food was delicious and always beautifully presented with care and respect (see photo)
- The menu was nutritious and a fresh fruit or vegetable and salad platter accompanied each meal
- Parents were welcome to stay for meals

The Centre's meals are planned on a four-weekly rotation, and are guided by:

- Education and Care Services National Regulations (2011)
- Healthy Together Victoria (2015)
- National Quality Standard, Quality Area 2: Children's health and safety (ACECQA, 2013)
- Nutrition Australia (2016)

Two examples of the Centre's menus are:

Day one: Weetbix, fruit platter, crumpets with jam, full cream or soy milk / water  
Finger salad, spinach, zucchini and potato frittata, water  
Fruit platter, scones, full cream or soy milk / water

Day two: Weetbix, fruit platter, toasted cheese muffins, full cream or soy milk / water  
Finger salad, Moroccan lamb with couscous / vegetarian option with tofu, water  
Fruit platter, yogurt, full cream or soy milk / water

**Insert photograph 5 of minced beef, vegetarian alternative, tacos, cheese, veggies & rice about here**

When families orientate into the centre they are consulted about what their children like to eat and about any allergies children may have (National Quality Standard, Standard 6.1: 'Respectful and supportive relationships with families are developed and maintained'). Children's food preferences and allergies are on display in each room and on every lunch trolley, and the cook adapts the meals accordingly. Cultural diversity is reflected in the types of meals offered. Babies have the same meals as the older children but they are vitamised. Menus are clearly displayed and recipes are shared with families as requested.

When interviewed the cook said:

*Our target is to provide 75% of a child's daily nutritional requirement, we probably reach more but we aim for that. We spend \$5 per day per child. If it was a normal 30-place centre the budget would be \$3 per child ... so we spend more dollars to reach the 75% of daily requirement.*

This figure is well above the 50 per cent of children's daily intake previously recommended for long day care centres by the Start Right Eat Right initiative (Victorian Government Health Department, 2009).

Reflecting findings from contemporary research into enhancing nutrition practices and mealtime environments in early childhood education and care centres and the National Quality Standard (ACECQA, 2013; Benjamin Neelon, Vaughn, Ball, McWilliams, & Ward, 2012; Maalouf, Connell Evers, Griffin, & Lyn, 2013; Summerbell, Moore, & O'Malley, 2014), the educators:

- Acted as positive role models for children at mealtimes
- Ate the same meals together with the children and responded positively when children came to the table "Thank you for coming to the table I appreciate that"
- Used sensitive language to encourage children to try foods "These vegies are saying I need someone to eat me"
- Gave positive feedback when children did try a new food "I'm glad you tried it, because you liked it and it's yummy"
- Talked about flavours "Can you taste the taste in the food? There's a little spice in it called ginger"

- Explained the nutritional benefit of foods “*Broccoli for your blood, carrots for your eyes, we need food to help our brains think, to grow and learn and develop our muscles*”
- Used language to support children’s awareness of their appetite levels “*Do you feel full in your belly?*”
- Had conversations at mealtimes and gave the children feedback about the interaction “*We’re eating lunch together like a big family.*”

The children’s agency is fostered by children collecting the trolleys from the kitchen, preparing the tables, serving themselves with tongs, eating independently and cleaning up afterwards (National Quality Standard, Quality Area 1, Element 1.1.6: ‘Each child’s agency is promoted, enabling them to make choices and decisions and to influence events and their world’).

Additionally, educators introduce children to a range of cooking experiences that extend their general knowledge about foods as well as helping to develop their interest in healthy foods - examples of foods children made were- roti bread, sushi, pasta, vegie rolls, pizzas, campfire sausages with baked potatoes, gingerbread people, waffles, chocolate-dipped strawberries and cinnamon scrolls (see photos of children preparing cinnamon scrolls).

In their interviews the Kinder children were asked what their favourite food was at the centre. They said:

- “*That’s easy, cheesy mornay*”
- “*Strawberries, apples, bananas, grapes, cheese, sultanas, crackers, like what we had at the zoo*”
- “*Pasta, with meat and cheese*”
- “*Biscuits, cheese, apricots and sultanas*”

Some of the comments parents made about the food in interviews reflected their insights into the quality of the nutrition provision and its importance for their children’s wellbeing, as the following comments indicate:

- “*The cook makes fantastic food, I know because I’ve eaten it. It’s so yummy and the kids love it*”
- “*The food that they provide is nice. I know for a fact it is. And the kids seem to like it. You know if I make some of the meals at home that they have here, “I don’t like that!” But they will eat it while they are here. So there must be something that they do differently*”
- “*My daughter came home and asked me to cook couscous last night and I was like “Why would I cook couscous?” ... She’s like “I don’t really like couscous on its own, but when it’s mixed with meat it tastes really yummy*”
- “*Having the cook is great, he nourishes our children*”
- “*We haven’t had much money and I tend to buy and cook the same food. Here she can eat as much as she wants and she gets to try different things*”
- “*We’ve learnt nutritional advice*”

Other parents added that they had learnt about good portion sizes for children, and how to present vegetables (for example, corn) to make them more appealing.

Finally in regard to sustainable practices, the centre has a vegie garden (see photo), and the children enjoy watering (and sampling) the herbs and vegetables. The centre also has two chickens, Rainbow and Blackie, and a guinea pig called Fred. Each day the children take it in turns to feed the animals the lunchtime scraps, collect any newly laid eggs and deliver them to the cook, who in turn makes boiled eggs for the children’s lunches that they enjoy peeling and eating. The cook mixes any spare eggs into the children’s birthday cakes (National Quality Standard, Quality Area 3, Element 3.3.1: ‘Sustainable practices are embedded in service operations’; Element 3.3.2: ‘Children are supported to become environmentally responsible and show respect for the environment’).

Insert photographs 6 - 11 of children preparing cinnamon scrolls

Insert photograph 12 of Herb and vegetable bed about here

## The Education Model

From observations, interviews and photographic evidence the EYEP's education model can be described as the integration of four key elements:

1. Curriculum
2. Pedagogy
3. Environment
4. Transitions

### The Curriculum

In early childhood settings curriculum means *'all the interactions, experiences, activities, routines and events, planned and unplanned, that occur in an environment designed to foster children's learning and development'* (cited in the EYLF, DEEWR, 2009, p. 9., adapted from Te Whariki).

Accordingly the EYEP curriculum is all the child-centred activities and experiences that take place each day (many of which have already been described), either at the children's centre in the various learning spaces, or off-site on excursions to community places such as the mobile library or the local swimming pool.

The Centre's curriculum was explained to families in a 'program outline' displayed in the foyer:

*An Emergent Curriculum process of program planning will be implemented. Children's interests and strengths are taken into account to plan the experiences provided indoors and outdoors.*

*A daily reflective journal, individual children's plan or group plan is completed by staff outlining the children's progress and participation for the day and this then defines the program for the following day.*

*Portfolios are used to document children's learning and development. These will include observations, photographs, children's artwork, learning stories, shared group experiences. These are shared with parents and children regularly and their input is encouraged.*

*The Early Years Learning Framework for Australia and the Victorian Early Years Learning and Development Framework and Transition are referred to in terms of our planning, reflections, learning and environment.*

*Educators engage in regular room meetings for program reflection and planning together as a team.*

In addition, each teaching room created and displayed on its door its own philosophy that reflected the curriculum. The three room philosophies were all very similar and were clearly linked to the EYLF: One example was:

*To provide an environment where each individual feels safe, respected and has a deep sense of belonging. We work with the family as a whole to support their child working toward positive outcomes. Our enriched environment focuses on play, friendships and strengths that will enable children to grow, participate and become curious life long learners*

The link between the curriculum and pedagogy was explored in the study. In interviews, educators were asked, "How does your pedagogy connect with the Early Years Learning Framework?" and in their answers they linked their own teaching practices or the pedagogy of their room, with the Vision, Principles, and Practices of the EYLF. Here are some examples of their responses:

#### Vision

*"Belonging is the first part of the EYLF. So we take photos of the children, we talk about their families, our families and our one big family in the room"*

## Principles

*“The EYLF is an evolving curriculum as is ours in the room: we take the children’s interests and build on them”*

*“Relationships are the key, and working in partnership”*

## Practice

*“We scaffold them into being learners in the space”*

*“We might be inspired by individual children’s learning needs but also developmentally there are quite often similarities [in the group] so then it allows the group to explore and then the group might shape the individual goals so the program can become something else”*

These reflections from the educators and the observations of their practice revealed their understanding of the nature of a holistic approach to curriculum.



## Illustration

### Connecting the five EYLF learning outcomes (from an interview)

Children develop their identity when they feel safe, secure and supported and then after that they look around and they see other people around them, the educators, people who are familiar to them on a daily basis and then they start to have a connection towards those people.

Without them feeling safe, I think it is impossible for them to explore and then develop another learning outcome, which is when they are connected to others and their peers especially. And then they start to develop their wellbeing, their physical [abilities] and then after that they’re starting to learn through play, whatever type of play. It can be dramatic play, it can be sensory play - it’s all learning going on, and they’re using language, verbal or non-verbal language, depending on their age.

When discussing their documentation of children’s learning and development (National Quality Standard, Quality Area 1, Element 1.2.1: ‘Each child’s learning and development is assessed as part of an ongoing cycle of planning, documentation and evaluation’), a number of educators referenced the usefulness of the Victorian Early Years Learning and Development Framework (VEYDLF; DEECD, 2011) for evaluating the children’s progress. One educator explained her rationale for using it:

*In terms of supporting documents for the actual program probably the Victorian Early Year’s Learning Framework is one that we use very regularly ... I just find that it has a really great evidence table which tells you what evidence you can show that the child is meeting the outcomes. I think it’s quite broad and it fits in really nicely with the planning that we do here.*

It is perhaps important to note here that the VEYDLF is aligned with the EYLF and is an approved framework under the National Quality Framework. It shares the same five learning outcomes as the EYLF and supports the work of all early childhood professionals.

## Pedagogy

Pedagogy enacts curriculum, and so in their second interview educators were asked, “What are the features of the pedagogy in your room, and how does your pedagogy support children’s development, learning and

wellbeing?” Some educators were less confident in answering this question, but those who were confident clearly described how the two models of care and education interacted. For example they talked about relationships being the key to learning, delighting in children’s explorations in play, and building children’s emotional capacity. One educator’s response powerfully represented what other educators said:

*We heavily rely on the national curriculum so belonging, being, and becoming but alongside doing all that learning within the curriculum through an attachment focus so that the relationship supports the learning. So ‘being’ not only for the children but ‘being with’ as well, so the attachment fits along there and through the process of the relationship is that whole belonging and then [there is a] natural transition as we do the dance together of becoming.*

As did another educator who stated that the features of her pedagogy were:

*Play-based learning, learning through play because when children play they’re actually exploring, and that’s when they start the learning process. So they start with play and then they find their identity and they explore the environment around them, they feel safe, secure and then our role is to make sure it’s happening, that they feel safe and secure and supported in this environment so they can move out from the cocoon and become a butterfly.*

Displayed outside each room by the children’s lockers are program planning sheets that document Broad Goals, Learning Outcomes and Strategies (linked to the EYLF), Experiences, Observations and Learning. Educators update the sheets regularly. One example of this process from August 2015 was:

Broad Goal:	To help the children develop their creative and imaginative abilities.
Learning Outcomes & Strategies:	Role-play with miniatures (Outcome 1 and 5)
Experience:	Lego people and small wooden blocks
Observations & Learning:	[Name of child] played with the people. Each person spoke to each other. She stated, “Are you the dad?” to one of the people. She also moved the people to the home corner.

These sheets provide evidence of educators meeting National Quality Standard, Quality Area 1, Element 1.1.4: ‘The documentation about each child’s program and progress is available to families.’

In addition, educators were observed to critically reflect on children’s learning and development as part of their pedagogy (National Quality Standard, Quality Area 1, Standard 1.2: ‘Educators and coordinators are focused, active and reflective in designing and delivering the program for each child’). For example educators spent time at the end of each day reflecting on the day’s program and the children’s engagement with it, writing learning stories from observations that integrated photographs of the children’s participation, and planning extensions to the children’s learning for the following day. Critical reflections on pedagogy were also observed to regularly occur in the open plan office, during lunch times, staff meetings and during education consultation sessions.

## Environment

*“In terms of the environment, the space must be rational and well thought-out but also welcoming, a space where teachers and other staff can move, act and work well with children” (Rinaldi, 2006)*

From observations and photographs of the learning spaces (indoors and outdoors) and of the various resources (see photos), it was evident that educators understood how shaping and modifying the environment was important for supporting children’s learning, development and wellbeing.

At the commencement of each new observation, time was taken to absorb the atmosphere in the room, for example:

*The rooms were fresh and fragrant with lavender, eucalyptus, spearmint, or lemongrass: relaxing and inviting. If music was playing it was typically a gentle piano solo or some eclectic world music. Rooms were always clean, inviting and thoughtfully presented. There were never too many activities but always plenty to choose from depending on the age group of the room: quiet cubby spaces; soft toys; animal figurines; blocks and transport; water play; dress-ups; babushka dolls; licorice-scented playdoh; puzzles; a craft table; an easel with carefully selected paints (spring pastels or autumn hues); a basket of musical instruments; picture books adjacent to a comfy lounge; the breakfast trolley ready and waiting with honey crumpets, a fruit platter and Weetbix: each room had a microwave to be able to offer the children warm milk on their cereal.*

*Doors to the covered verandah were usually open so outside play spaces were visible. Sandpits were always raked smooth and ready for players - with dinosaurs, plants, tyres, trucks, colourful cardboard tubes, hard hats, tool kits or flowers and flowerpots caringly laid out. Intimate cubby spaces or tents were also outside, covered with scarves or filled with cushions, and the climbing and balancing equipment was creatively constructed to help in the development of new skills.*

In writing about spaces in early childhood centres, Rinaldi cites Malaguzzi's definition of the environment or space as the 'third educator' and stresses the importance of "the relationship between the quality of space and the quality of the learning" (2006, p. 77). EYEP educators were intentional about the pedagogical role played by the environment, as time and care were put into each day's set-up. And while there may have been distinguishing differences between the different approaches in the three rooms, each learning space reflected a calm, consistent layout with obvious attention given to soothing sensory elements and plenty of natural elements (see photos). Resources were selected that were culturally responsive, showed respect for diversity, and were interesting, stimulating or challenging (see photos).

Children's spaces should be organised in ways that enable children to express their potential, explore and research, construct projects, strengthen their identity, collaborate and communicate with others, as well as have their privacy respected (Rinaldi, 2006). In the EYEP, children's individual needs for quiet role-play (private cubby houses), active projects (fully equipped woodwork benches), or sensory exploration (warm, fragrant playdoh for example) were available. The EYEP environments were rich in experiences, rich in play opportunities and rich in teaching (Greenman, 1988); educators demonstrated a sound understanding of the language of space (Rinaldi, 2006); and there was observable authentication of National Quality Standard, Quality Area 3, Standard 3.2: 'The environment is inclusive, promotes competence, independent exploration and learning through play.'

Insert photographs 13 and 14 of Natural elements 1 and Natural Elements 2

Photograph 15 of Autumn leaves ready for raking

Photograph 16 of Outdoor fun

Photograph 17 of Sensory playdoh

Photograph 18 of Clap sticks

## Transitions

One of the EYLF's eight Practices is 'Continuity of Learning and Transitions' (DEEWR, 2009) and in describing this practice the EYLF document states that "Transitions, including from home to early childhood setting, between settings, and from early childhood settings to school offer opportunities and challenges" (p. 16). However over the course of time spent documenting practices in the EYEP, more types of transitions were observed and hence transitions here are defined as:

- Transitions into the centre in the morning
- Children transitioning from one activity to another
- Children transitioning from outside play to an activity inside
- Children and families transitioning between rooms (e.g., children moving to the Kinder room)
- Children and families transitioning to a new primary carer (usually associated with a room change)
- Transitions from the centre to home at the end of the day
- Transitioning out of the centre – leaving to go to school or preschool

From observing the EYEP educators' skills and strategies in supporting children to manage transitions it was clear that their approach was consistent. As has been mentioned earlier, all educators understood the importance of slowing down transitions by not rushing children, speaking with a calm voice, and using positive strategies. Two successful strategies were:

- i) Counting out the minutes left before a transition happened together "*in five minutes we will be going inside ... in two minutes ... in one minute ... there's no more minutes left ... we are all coming inside now*"
- ii) Having visual timers that the children were encouraged to use, so they could see how long before their turn at an activity was next or was finished.

Educators understood that for certain children some transitions (e.g., mealtimes, sleep time) could be triggers for children's feelings of distress and so they moved more slowly and carefully through these, using songs and positive language to help the flow and to reduce any anxieties.

Educators also understood (and actively facilitated) children's use of transitional objects. A transitional object is a person, space or thing that enables a child to cope with a particular transition. Many different elements were observed to be transitional objects including toys and books (which children could take home with them), objects (a bunch of keys), an area of a room (cubby hole), certain people (the receptionist), or food (eating on arrival, or taking food home).

One example of the use of a transitional space was evident when a 4-year old child needed her own quiet place to help her settle into the centre in the morning. All the educators knew she needed this time and space and in response they encouraged her to visit the 0-3 year olds' room where she could have breakfast or play quietly on her own until she was ready to rejoin her peer group.

It was also apparent that for transitions between rooms and between primary carers a great deal of planning and thought took place prior to them occurring. Educators spoke about the need for high-level communication to keep children and families involved in all transition planning and decisions, as well as helping children to manage room changes by facilitating opportunities to explore the new space and spend time with future educators, effectively "*giving them a gentle nudge emotionally and physically.*"

They acknowledged that it was important to "*have a commitment to support the children in every step,*" to "*be sensitive, have empathy*" and use supportive language e.g., "*You'll be a Kinder girl soon!*" They reflected that changing primary carers was challenging for educators too, and that it was important for educators to trust each other, to allow the new relationship to grow, to be able to let go, to respect a child and family wanting to revisit the previous relationship, and to always be mindful of the child's needs.



## Illustration

### **Sensitive transitions** (from an interview with an educator)

*We've learned a lot from the infant mental health field about the importance of transitions and the importance of rupture and repair - that sort of attachment idea about the fact that we need all these repair things to happen if they're to have a good experience of any of these big changes.*

*I think first of all having an idea that transition is an important thing to consider is probably part of the first plan. I think a lot of people dismiss the process and so they're like 'it'll be fine' or 'we've prepared them by saying you're going into the next room' and that's enough. But I think it really needs to be considered as a big part of any child's entering into a room or changing rooms or leaving, it needs to be considered first of all. And then I think it needs to be planned around.*

*The really long orientation is an amazing tool for parents and children to get into this system in a way where they are not forced into trusting someone but they are able to build trust in an organic way. The same for educators, it gives them time to process what they've learned about the child and family and to keep that in mind as they're planning because when it's too quick you don't get to pick up on the things that the family's trying to show you or you don't get to observe the child in the new environment very well, you don't get to plan using that knowledge; so I think the more time you can put into it the better.*

*And obviously in a program like this it's also about the educator's transition because they've been with this child for two years sometimes and it's a huge thing to hand over a family and all of the things that you know about that child and there's an element of loss in that as well. So I think really considering it, giving people time to process, giving families time to understand what the plan is and also giving them a kind of veto to say too fast, too slow, can we do this differently or can I be involved for a bit longer? Communication for that is important as well.*

*As long as it's thoughtful then people actually have the time to consider what are going to be the implications of this change and what might the child be feeling which is a big thing that we've learned from infant mental health is think about the internal world for the child, what are they going to experience in this? Is it going to be a positive change where everybody's on board or is it something that's changed all of a sudden that I don't know why? Planning around that is important for children.*

*We try and do a slow handover with families as well in between primary carers because obviously that's the person that they've built up trust with and so to move to another educator is often quite a big thing. Sometimes families are really looking forward to it because their child's going to the Kinder room, it's a big deal, it's kind of like a graduation, but we try and do a joint 12-weekly meeting between the two educators and the family, so it's kind of a handover one sharing knowledge and also it's part of the formal process of handing the family over so that the family doesn't feel that they're being left with nobody to hold them.*

For transitions into the centre each morning and from the centre to home every afternoon different but important strategies were observed. Firstly the role of the receptionist was pivotal to the process. She welcomed families into the centre by noticing who was arriving, opening the door and saying, “*Good morning [name of child and then parent] I'm waiting for you*” or “*Hello my friends,*” responding positively, first to the children (“*What have you got? Oh a beautiful scarf?*”), and then to the parents. She carefully

arranged blocks or figurines on a low table in the foyer so children could play while their parents signed them in (see photo). Or if children were in strollers she would crouch down to their eye level and comment warmly and positively. Then she opened the door from the foyer to the teaching rooms saying “*Are you ready?*” and wishing them all to “*Have a good morning.*”

At the end of the day the receptionist was again present in the foyer to open doors, notice artwork, give children stamps on their hands, let some ring the doorbell or put antiseptic wash on their hands, and responding to each child’s routine of transitioning out of the centre. Everyone was acknowledged and farewelled warmly and positively, “*Have a great evening and I’ll see you tomorrow.*”

In regard to supporting children and families to transition out of the centre and off to school, the educators employed many thoughtful and respectful strategies:

- “*Talking about it a lot*”
- Creating a ‘school space’ in the room, with school-type activities (e.g., pencils, paper, rulers, work sheets)
- Bringing in school uniforms (both genders), school bags and lunch boxes for dress-ups (see photo)
- Laminating pictures of typical lunch foods for matching games
- Practising making sandwiches
- Visiting each child’s school with the child and creating social stories (see Illustration 1)
- Creating a special transitional object for the child (see Illustration 2)
- Giving parents who were leaving, cards (along with their children’s portfolios) with encouraging messages of “*good eating, good sleeping, about good learning*”
- Writing detailed transition reports for the new school outlining the support children would need if they exhibited certain behaviours (see Illustration 3)

Insert photograph 19 of Welcome toys in the foyer

Photograph 20 of Dress ups to practice being school ready



## Illustrations from interviews

### 1) Creating social stories to support a child’s transition

*The schools themselves have a school transition. So we support the children by taking them at least once to a school transition. And at that transition we meet, we participate; we stay with the child and take photos of the child at the school. And then we do a social story. For one child because she had difficulty making friendships the social story was about her in the school space. “Here I am at the toilets” and “Here I am on the mat” “I can sit on the mat, I know I can do it.”*

*So that story was set up for her so that she could read that at home and be ready when she went to school.*

## 2) Preparing children and making a transitional object

*We talked about it for months I was always talking about it and supporting them and letting them know that I would miss them but they were ready and I was confident in their capabilities. They were ready for school but I would miss them but [I was] trusting in their abilities.*

*For the children that I was primary carer for, I made them a transitional object. I made them back in July so I'd had that in the back of my mind for them leaving so I was already planning months ahead.*

*I hand made some sock bunnies and gave them to them and it was really interesting. Two of the children straight away named their bunnies and one of them named it Stripey because it was a striped sock so that was obvious, and the other child named her bunny Snuggle Bunny and Snuggle Bunny was a girl and she said "I can smell you on this."*

## 3) Writing transition reports

*Probably I went over and above in my transition reports [but] what I really wanted to highlight - as much as I acknowledged the children's strengths - what I really wanted to highlight is what support they would need - what it would look like if they weren't managing - that was the big thing. This is what it might look like if they're not managing and this is what might be helpful and I made myself readily available. But it wasn't for their benefit per se it was for the children.*

## Interaction between care and education models

While it is hoped that the above sections on care and education clearly reflect how the uniqueness of the EYEP facilitates an interaction between care and education, in the second focus group educators were specifically asked to share their thoughts on the practices and skills that they viewed to be most important when discussing the interface between the models. Their responses indicated that they understood how *"education and care practices are enmeshed."*

When reflecting on the educators' comments it seems that the concept of *relational pedagogy* is helpful for understanding the interconnection between the education and care models in a way that respects the importance of both constructs. Underpinning the care model is the educators' knowledge of attachment (e.g., training in Circle of Security: Marvin, Cooper, Hoffman, & Powell, 2002), and the input of the EYEP infant mental health consultant (understanding children's emotional needs). Underlining the education model is an ability to be responsive, flexible, and reflective in supporting children's learning and development during teachable moments.

Brooker (2009), argues that "most practitioners as well as policy-makers will agree that care and education are inseparable but that the caring aspect of the provision leads the educating aspect in the case of children under 3." (p. 100). However when thinking about the children at the EYEP, it could be argued that the notion of the caring aspect leading the educating aspect endures longer than three years. Brooker goes on to describe the care relationship as "a triangular one constructed for the mutual benefit of the child, the parent and the practitioner" (2009, p. 100). When reflecting on the interaction of the models at the EYEP, the educational model can also be viewed as triangular one, constructed for the same mutual benefits of the child, the parent and the educator.

## Practice Implications

Educators' theoretical understanding and responsive, consistent, practices support children's ability to regulate their emotions over time.

Children's learning and development is enhanced by ongoing reflection on pedagogy by educators in partnership with families and other professionals.

Educators carefully design and plan the environment in response to understanding its influence on children's learning, development and wellbeing.

Educators used thoughtful, consistent, well-planned and individualised processes for all transitions.

## Meeting educators' needs

One of the main aims of this ethnographic study was to 'Understand, describe and articulate educators' needs in implementing this program' and there can be no doubt that in order for staff to consistently undertake this level of high quality work they need to be nurtured and supported. From discussions with staff in interviews and focus groups, as well as from reflections on observations, three facets of support seemed most significant to the maintenance of staff welfare. They were: professional training and development; professional supervision, and managing staff wellbeing.

### Professional training and development

As previously mentioned, all educators in the EYEP had a Diploma in Children's Services as their minimum educational qualification (see Table 5). Educators undertaking this type of intense and challenging work with children and families living with significant vulnerabilities need specific professional training and development related to attachment theories, the impact of trauma and stress on children and the practice implications.

Many educators had either undertaken relevant training when the EYEP commenced in 2010 (for example Circle of Security training), or had subsequently attended a range of appropriate professional development courses and conferences. Table 11 lists educators' professional development from June 2013 until the end of 2015, when the study concluded. The types of professional development undertaken have been organised in terms of whether the key focus was i) trauma; ii) attachment / infant mental health; or iii) early childhood education and care.

Table 11:  
Educators' professional development from June 2013 to December 2015

Name of training / conference	Length of time	No. of staff
<i>Trauma</i>		
The Neurobiology of Complex Trauma	2 days	3
The Neurobiology of Complex Trauma	1 day	4
Creative Interventions with Traumatized Children	1 day	1
Effective Responses to Family Violence	1 day	1
Making Sense of Fragmented Lives	1 day	1
Mindfulness – Why Attention Matters	1 day	1
Teaching Traumatized Students	1 day	1

Understanding Children: Abuse & Trauma	½ day	1
<i>Attachment / Infant Mental Health</i>		
Dan Hughes	6 days	1*
Introduction to Family Therapy	4 days	2
Infant EC Social Emotional Wellbeing Conf.	3 days	2
Circle of Security - Core sensitivities	3 days	1*
Introduction to Infant Mental Health	3 days	1
Attachment-Based Practice / Relational Pedagogy	1 day	All
<i>Early Childhood Education and Care</i>		
Leading Learning in Early Childhood Settings	4 days	1
Enhancing Childhood Growth & Development	3 days	1
Early Childhood Conference	2 days	2
The Action is the Interaction	2 days	1
Culturally Competent Practice	2 days	1
Laying the Foundations Conference 2015	2 days	1
Child Restraint for Safety	1 day	2
Autism Spectrum Disorder /Asperger's syndrome	1 day	1
Beyond Tomorrow Early Years Conference	1 day	1
Early Years Conference	1 day	1
Mindful Co-working	1 day	1
Place-Based Initiatives	1 day	1
Safe Sleep Space	1 day	1
Reflective Practice Session	3 hours	All
Intentional Play Spaces	1.5 hours	All
1. Managing Childhood Anxiety 2. Inclusion for Children with Delays 3. Understanding & Managing Behaviour 4. Sensory Strategies for Successful Inclusion 5. Sharing Sensitive News with Parents 6. Learning Language Through Play	2 hours per topic Staff attended between 2-4 sessions	6

\* Self funded by individual staff

In their second interviews and in the second focus group, educators were asked, “What type of professional development is essential for this work?” and their suggestions fell into several discrete groups. Most educators stated that the greatest need was for training around attachment (Circle of Security, Dan Hughes and knowledge of attachment theory) and trauma (Bruce Perry, Impact of trauma on child development). Subsequently they identified a range of other skills training, which ranked in this order: communication skills training (talking with challenging clients, conflict resolution, responding to anger); working with specific client groups (drug and alcohol, family violence); early childhood education skills (program planning, sensory play, “Calmer Classrooms: A guide to working with traumatised children” (Victorian State Government, 2007), scripts for managing ‘big feelings’, cultural diversity to enhance practices,

building community links); and staff supports (managing staff wellbeing, professional supervision). In addition they were agreed on the notion of undertaking training together as a team, as they believed that the process not only contributed to an enhanced uptake of skills and shared knowledge but also strengthened the team's cohesion.

## Professional supervision

One method of supporting educators in the work that they do is through the provision of supervision. Indeed each educator is assigned to a member of the EYEP leadership team who meets with them once a fortnight to talk about how they are going, how their children and families are going and whether there are any issues with themselves, the children, families or their work environment that they might need support with. Supervision is not typical in mainstream ECEC settings, and so for all educators (and most supervisors) it was a new experience for them. Consequently it seemed appropriate to document this element of practice and so in the first focus group educators shared their thoughts on the supervision process, and in a later interview discussed how it supported their professional learning. In terms of their thoughts on supervision these fell into three areas: the purpose of supervision, the problems with it and how they thought it should be done.

Educators agreed in interviews that supervision helped them to reflect on how they operated (to unpack one's own issues), how they were with their colleagues, how to help their children and families and how to structure their future professional development. For example:

*Working with vulnerable families you actually really need supervision just to unpack some of your own issues... having good supervision is an opportunity to reflect on the way you operate in the room, how you might be able to operate with your colleagues, how you can do professional development ...it's a place where it is about the families you're working with, how you're feeling, what you can bring to the Centre and to the program*

In regard to what they thought the problems were with supervision, educators firstly highlighted the fact that because they were all supervised by different team leaders, there was not always a consistency of supervision practice, for example:

*They had three different philosophies as well; they were coming from things, from three different angles really, so every one of us had very different supervision, very different.*

Educators also spoke at length and with concern about the changes at leadership level that had impacted on their supervision experiences. One said, "I've had three different supervisors, and you've had a few" and her colleague said, "Yes I've had three different supervisors as well, and they've all been different." Educators agreed that when their supervisors kept changing it was hard to keep building trusting relationships (with each new supervisor) and as a consequence the intention of it being a self-reflection session was often not realised.

In considering how supervision *should* be done educators were unanimous in stating that supervision needed to:

- Be carried out by a trained professional who is an expert in supervision
- Be carried out by someone external to EYEP: "A really skilled external supervisor"
- Have a contract of confidentiality and goals
- Be provided to staff individually (1:1) and as a group (team supervision).

In their second interview educators were asked to describe how supervision supported their professional learning. Following on from previous ideas one educator said, [it supports your learning] "Well, if your supervisor is experienced and knows how to facilitate your reflection" and another said "It doesn't, if you keep having new supervisors." Others though described how supervision helped to "bring the unconscious to the conscious," or helped them in "finding our blind spots" or helped them to "meet my goals with the children."

## Managing staff wellbeing

Maintaining staff wellbeing plays an important role in supporting staff in any workplace not least because staff who experience their work positively are more likely to remain in the work setting (Huntsman, 2008). Given that early childhood settings are susceptible to staff turnover (thereby potentially jeopardising quality of practice) and given also the intense and challenging nature of the work undertaken in the EYEP it is of interest to gain a deeper understanding of what early childhood educators in the EYEP think about the concept broadly, as well as their views on how wellbeing can be supported. Thus in the final focus group educators were asked three questions that related to staff wellbeing: “Why is staff wellbeing important?” “How does CPS support your wellbeing?” and “What do you do to support your wellbeing?”

Firstly, when discussing why staff wellbeing is important, the educators outlined several reasons that showed clear insights into this aspect of their work at the centre. The insights have been grouped in terms of their relationship to the nature of the work, the client group, and the team:

The nature of the work:

*“The work is intense and we need nurturing”*

*“As staff we experience vicarious trauma”*

*“Our work is about building and sustaining relationships and we need to be OK to do that”*

The client group:

*“Everyday is unpredictable – we take a deep breath and step in”*

*“On certain days the whole centre experiences a rise in anxiety levels”*

The team:

*“We know it is important to support each other - we need to know how to support each other”*

*“It is a research project so there are high expectations placed on staff”*

In thinking about how the Children’s Protection Society supported their wellbeing, educators identified some positive strategies employed at an organisational level as well as a number that were specific to their centre. Broad organisational strategies included ‘RU OK?’ Day; CPS Health and Wellbeing Committee, Fortnightly newsletters (*“that validate the good stuff”*), and CPS Agency days. At the local level, staff nominated the fact that their Centre Director was the Mental Wellbeing Coordinator, the in-centre staff get-togethers, the Boot Camp, team fundraising activities (e.g., Steptember), going out for dinner as a team, the 10 minute catch-up/ handover meeting in the mornings, supervision and infant mental health consults (*“a space to understand the work, yourself, and your responses to it”*).

In regard to the question about how they supported their own wellbeing, the educators gave various replies, many of which were naturally personal, but in the main described social activities, methods of relaxation, quality time with family, sports or keeping fit, enjoying hobbies or interests, and having fun with friends.

## Practice implications

Appropriate initial and ongoing qualifications, training and development are necessary to support educators meeting the challenging nature of their work with children and families.

Educators benefit from professional supervision or reflective supervision with a skilled and experienced education leader or clinical supervisor.

Staff turnover may be reduced if EC settings enhance staff wellbeing.

## Challenges to the quality of practice

As with any work place inevitably there are challenges to service provision. From observations, interviews and focus groups with educators, a number of factors that could challenge the efficacy of the EYEP model were noted and have been grouped as challenges that relate to children; parents; individual educators; the team; consistency; and managing organisational change.

The two main challenges that related to the children were described as firstly, the unpredictability of how children presented from day-to-day, so that educators never knew what to expect; and secondly that within each group of children there were often too many competing emotional needs which meant that the group could become hard to manage and educators “*start to question their own integrity.*” In the first year of data collection the Kinder room was comprised of 3 educators and 18 children and there were many occasions when even these high ratios (1 educator to 6 children) “*didn’t cut it.*” Consequently one educator suggested that a maximum of 12 children with high emotional needs (aged between 3 – 5 years) with 2 educators in one room would be better.

Challenges to the program concerning parents related mostly to when parents did not attend regularly and consequently children could not establish their own routine; and when parents did not respect the time boundaries of the program. For example, several parents were regularly late to collect their children, and this not only impacted on educators’ time while they waited with children but could also raise tension with certain parents.

In regard to individual educators it seemed that a number of factors could potentially challenge program quality. For example, as with all work places individual attitudes and attributes come into play, but in the EYEP educators must be especially careful not to put their own needs ahead of the children’s. But this is not always straightforward, and consequently educators need excellent self-reflection skills as well as a good understanding of any transference of children’s issues. Educators need to be mindful of how they communicate with parents - as one educator said, “*we’ve all made mistakes here about disempowering families.*” They also need to be able to regulate and manage their own emotions, for example if a child makes a disclosure to them, or if a child bites, scratches, or hits them. In such circumstances educators need to be able to understand and monitor their own responses to these matters and remove themselves from the situation if necessary.

While it was clear that educators need to be well-qualified to work in the EYEP, it also seemed at times that the *team* could be compromised by educators seeing themselves as leaders, rather than equal team members. At times differences in work styles and opinions appeared to impact on team cohesion. Additionally there were occasions when issues around trust, collaboration and a willingness to support one another noticeably affected the team.

Quality of practice was also challenged by a couple of features concerned with consistency. Issues around a consistent understanding of the primary carer role were noted in the section on the primary carer role, and issues related to consistency of supervision practices were raised in the section on professional supervision. A third matter is consistency of training: not all educators received the same training when they commenced in the EYEP (such as Circle of Security) nor did they all attend the same type of ongoing professional development. In addition casual staff employed to replace educators on leave, typically only had a Certificate III. Accordingly some casual staff were observed to take quite different approaches to managing children’s behaviours - regulating children’s behaviours rather than taking time to think about the child’s emotion, or what lay beneath or behind a behaviour. This has the potential to undermine the quality of the EYEP as well as to confuse children.

The fourth feature concerns consistency of practice across the rooms. While there was an overarching Centre philosophy, each room also had its own philosophy (albeit they were very similar) and each educator also had their own personal philosophy (based on their experiences etc.). Consequently differences in

pedagogical approaches between rooms were occasionally observed. For example one room at times could be quite routines-focused, whereas another appeared more relaxed and responsive to children's needs.



## Illustration

### **Consistency of practice** (from an interview with an educator)

*It would be good if there was a consistent language that we could even train staff in. So when new staff enter [the program], how do we communicate this model to them in a really clear way in terms of practice? I feel like it's been sort of done a bit organically and I don't know that that's necessarily the best way to do it because obviously you're going to get a lot of variation when you do that.*

*I wonder is the program the same as it was two years ago ... or is it the same as it was when it began? Are we meeting the goals of what we set out to and I think we are in many ways but I wonder if we are doing it consistently.*

*It's less around planning but more about practicing interactions with children, so what does it look like, what does relational pedagogy look like in the classroom? I know we say we make the most out of every interaction and I think that we do, but do we focus enough on language modelling in the classroom, have we communicated that that is a priority to all [educators] and are we consistently doing it? So even if we've communicated it and everybody understands it, are we doing enough monitoring as it goes through to see on an everyday basis is that going on at a high enough level in our rooms?*

The final challenge to quality of practice is that of managing organisational change, and in particular minimising the impact of staff turnover. This feature is of interest in the ECEC sector where staffing arrangements affect both structural and process dimensions of quality (National Quality Standard, Quality Area 4: Standard 4.1: 'Staffing arrangements enhance children's learning and development and ensure their safety and wellbeing'). In 2014 and in the first half of 2015, ten EYEP staff (four educators and six EYEP team members) left the program (nine staff permanently resigned and one educator went on 12-months maternity leave but subsequently did not return). As this type of staff turnover is not uncommon to the early years sector, the EYEP educators were asked their thoughts about how best to manage such changes.

Educators said that it was important to be positive about the changes; be consistent with routines; have open communication with families, to answer parents' questions honestly and reassure them, "*we're always here for you;*" give parents plenty of notice when staff were leaving; build in opportunities for children and families to say goodbye; be responsive to children's feelings and to the needs underneath their behaviours (especially if children found it hard to say goodbye to an educator); and have photos of staff who had left and talk about them with the children.

## Practice implications

Open, respectful communication between all parties: educators, children, parents and management, can mitigate challenges as they arise.

Educators' wellbeing is supported to manage unpredictability.

Stability of staffing in EC settings is strongly related to positive child outcomes.

## Discussion

This discussion section first explores and describes the research themes and concludes with implications for universal ECEC services working with children and families experiencing vulnerability.

Throughout the data analysis stage, several motifs were noted to recur: notions of ‘safety’ ‘feeling secure’ ‘trust’ ‘being respectful’ ‘having skills’ ‘playing’ ‘being supportive’ ‘time’ ‘space’ ‘being responsive’ ‘relationships’ ‘emotions’ and ‘slowing things down.’ On reflection these concepts are inextricably linked, and therefore suggest that collectively they represent one overarching theme, that of a ‘*holistic curriculum.*’

In order for an early childhood curriculum to be considered holistic it is suggested that it should be both child-centred *and* family-centred. Being child-centred means having a strong understanding and implementation of the Early Years Learning Framework and the National Quality Standard, with special attention to *relational pedagogy, the environment and time.* Being family-centred means enhancing *parental belonging* and sustaining parental engagement with intentional *family-centred practices.*

### Holistic curriculum

A quality holistic Australian early childhood curriculum is one that exemplifies the Early Years Learning Framework (EYLF) and is driven by a thorough understanding of its Vision, Principles and Practices (DEEWR, 2009). And not only is the EYLF understood, but the service and educators implement the Quality Areas, Standards and Elements of the National Quality Standard (ACECQA, 2013), in ways that exceed the requirements and do not just meet them.

The EYLF states that when educators take a holistic approach to children’s teaching and learning “they pay attention to children’s physical, personal, social, emotional and spiritual wellbeing as well as cognitive aspects of learning ... [and] recognise the connections between children, families and communities and the importance of reciprocal relationships and partnerships for learning” (DEEWR, 2009, p. 14). Hence a holistic approach is fundamentally child-centred but also implicitly family-centred.

In February 2014, the EYEP (known as the CPS Children’s Centre) having been rated as Exceeding the National Quality Standard in November 2013, applied for an Excellent rating. In May 2014 it was the first children’s centre in Victoria to receive ACECQA’s Excellent rating, demonstrating excellence in:

- 1) Practice and environments that enhance children’s learning and growth
- 2) Inclusive partnerships with children and families
- 3) Collaborative partnerships with professional, community or research organisations
- 4) Sustained commitment to professional development and support of educators

These four areas of excellence provide evidence of the holistic nature of the EYEP curriculum and reveal both its child-centred and family-centred nature. The elements of the EYEP curriculum that will be expanded in this discussion are relational pedagogy, the environment, time, parental belonging and family-centred practices.

### Relational pedagogy

Underpinning the work of the EYEP is a relational pedagogy that acknowledges the importance of educators being intentional about their work with children and recognising the centrality of relationships for learning (Papatheodorou, 2009). Papatheodorou describes relational pedagogy to be:

*The empowering force for knowing ourselves (in whatever capacity: learner, teacher, policy-maker and implementer), and others; for making sense of others and making sense of ourselves because of others... [it] is about individuality and the collective consciousness that is shared and transformed in time and space (2009, p. 14).*

Embedded in the relational pedagogy of the EYEP is the EYLF Vision – *Belonging, being and becoming*. The EYEP welcomes all children and families respectfully, so that they feel safe and included in an unhurried, interesting environment where wellbeing and learning are nurtured and encouraged. The EYEP exemplifies a space where relationships and learning coincide (Malaguzzi, 1998).

While it is acknowledged that belonging, being and becoming are not a step-by-step process, because all three co-occur, it is nonetheless suggested that for the children in the EYEP (many of whom may have experienced trauma and disadvantage) having a sense of *belonging* is vital if they are to be open to learning.

In their interrogation of the term ‘Belonging’ within the EYLF, Sumsion and Wong (2011) identified ten dimensions of belonging, including emotional, social, cultural, spatial, temporal, and moral/ethical dimensions. They concluded that within the EYLF “Belonging speaks to people ... it resonates emotionally ... it offers the possibility of sustained engagement.” It is suggested that belonging as it was observed in the EYEP fulfilled a diverse range of dimensions as outlined above. Children experienced belonging as a result of the warmth and skill of educators, who had a thorough understanding of attachment-based care and the effects of trauma on development. Gradually, with their primary carer as the conduit, children made connections with other people and spaces (other educators and children in their room, outside spaces, other rooms in the centre) and developed capacities to share and have empathy for others. Within the framework of the relational pedagogy, children in the EYEP moved from being observers to explorers and actors, becoming more resilient emotionally and more independent, capable learners.

Dahlberg and Moss (2005, drawing on the work of Readings, 1996), call for an ethics of care in children’s spaces that requires a pedagogical relationship of “listening, relationships and obligation ... an infinite attention to the Other” (p. 93). This relational pedagogy gives preference to listening, which plays a critical role in the quality pedagogy of Reggio Emilia Children’s Centres and which is defined by Carlina Rinaldi, Executive Consultant for Reggio Children, as sensitivity, openness, time, emotion, interpretation, and a suspension of prejudice (2006, p. 65).

As evidenced in the EYEP, the educators were intentional with their listening (to children and parents) responsive to children’s behaviours and emotions, focused on building positive relationships (with children, between children, and with parents) and attentive to children’s interests and ideas in ways that supported and encouraged their learning.

## The environment

In their descriptions of quality pedagogy observed in the Effective Provision of Pre-school Education (EPPE) study, Siraj-Blatchford and Sylva (2004, p. 720) distinguished between ‘pedagogical interactions’ and ‘pedagogical framing.’ Pedagogical framing is defined as “the behind-the-scenes aspects of pedagogy” and includes the use of resources and the shaping of the environment.

An understanding of attachment and knowledge of the effects of trauma on children’s development as well as knowledge about teaching and learning inform the EYEP pedagogy. Consequently educators were intentional in their selection of resources and in how they shaped the learning environment, responding to cultural diversity and children’s interests. Resources were arranged on low shelves or in baskets so that children could access them independently. Resources were variously stimulating (playdoh with aromas of fruit or spice), or calming (classical music, dimmed lighting), or visually relaxing (natural elements such as plants, bark, shells and stones). Quiet nooks (tents draped with scarves and filled with cushions) were constructed for children who needed their own space, big wooden blocks were provided for children who enjoyed constructing, and swings provided opportunities for children to experience momentum.

Malaguzzi, the founder of Reggio Emilia's education philosophy in describing the EC environment as the 'third educator' (Rinaldi, 2006), helped shape a contemporary understanding of children's rights to experience quality environment, spaces of beauty and variety. Ceppi and Zini (1998) further expand this notion in their analysis of desirable characteristics for quality EC environments (based on the Reggio children's centres), wherein they explore how light, colour, smell, sound, and materials can be creatively deployed to communicate and inspire.

Within the EYEP (as with most EC centres) there were constraints on how the children's spaces could be organised, however it was evident that educators were intentional in their use of the environment as the third teacher, and accordingly adapted lighting, smells, sounds and materials to present children with diverse experiences that supported their wellbeing and promoted and challenged learning.

## Time

Time is another important element of quality pedagogy (Rinaldi, 2006) and in the Reggio Emilia Children Centres, quality pedagogy requires:

*not only a certain quantity of time so as not to be 'time governed' but also a certain concept of time that is not 'the time of production' ... time is something else, a necessary element for creating relationships, an offering that the school gives: 'time to children, time to teachers, time for their being together' (p. 18).*

Time is a valuable commodity in children's environments (Greenman, 1988), and in the EYEP, time as defined above underscores the program: there is time for families to gradually orientate in to the program; children have unhurried time for settling into the program each day and for learning at their own pace; time is prioritised to support children's emotional regulation; educators have time to play with children; there is time for sustained shared thinking (Siraj-Blatchford & Sylva, 2004); EYEP program routines strive to meet the children's time and less so the adults'; families in crisis are given time; there is time for a pedagogy of listening (Rinaldi, 2006); and educators have time for planning, for reflection and for supervision.

Dahlberg, Moss & Pence (1999), writing about 'time' in the Reggio Emilia children's centres stated: "Time is not organised by the clock, but according to children's own sense of time, their personal rhythms and what they need for the projects on which they are working. All this gives children time to get engaged, time not to have to hurry, time to do things with satisfaction" (p. 60). Of course in the EYEP some things are organised by the clock, for example lunchtime and departure at the end of the day, but Kinder children are also given time to engage with their projects for example with individual 'Work in progress' blocks.

## Parental belonging

As previously acknowledged, the three concepts of *belonging, being and becoming* are not linear in nature, but it is argued that for vulnerable or at-risk families having a sense of belonging to an EC setting is an essential first step to sustaining their engagement with that service. In the EYEP parents' sense of belonging was initially built with their child's primary carer and within their child's room, and then subsequently the connection extended to other educators, other parents, and other spaces in the centre. Parental belonging occurred because of the genuine warmth and skill of the educators, because parents were always greeted warmly, were asked about their night, or their weekend and listened to i.e., they understood that someone cared for them: "*I don't have family, so I consider this centre here as my second home, and my family*" (parent); and because they felt safe, were accepted as they were and were not judged: "*I feel safe with them that I can go and talk to them about anything that's going on, and they make me feel better*" (parent).

Spaces were provided for parents to sit, chat and be together, and so they could make connections with each other and could become as one parent described it '*a community of parents*'. Parents described becoming more capable as parents – they learnt new skills from observing the educators' positive models, gained an understanding of what their children were learning in the joint 12-weekly meetings and got practical

information from attending the informal Coffee Mornings. Parents became friends, became knowledgeable of community resources that were available to them if educators “*hold their hand a little bit,*” and they developed the confidence to move forward and make positive contributions to their communities.

## Family-centred practice

Another way to consider relational pedagogy is through the lens of family-centred practice. As Fordham and Johnston stated in 2014 (p. 172) “family-centred practice is the hallmark of family support programs as it implies that families have the ultimate control over decisions about their children.” Additionally family-centred practice acknowledges that the family is the constant in the child’s life, the expert on their child’s abilities and needs and a unique and capable unit (Fordham & Johnston, 2014).

Carl Dunst who is a leading proponent of family-centred practice identified ten “core practices most often described as key features of a family-centred approach to practice” (Dunst, 1997, p. 78). Implicit in these practices is the understanding that “services are provided to families in ways that are individualised, flexible, supportive, sensitive and respectful” (Fordham & Johnston, 2014, p. 173). These practices are summarised in Table 12.

Table 12:  
Ten core practices of family-centred practice

Family-centred practice
Treat families with respect
Work in partnership and collaboration
Share information completely and in an unbiased manner
Be sensitive and responsive to family diversity
Promote family choices and family decision-making
Base intervention on family identified desires and needs
Provide individualised support and resources
Utilise a broad range of formal and informal supports and resources
Employ competency enhancing help-giving styles
Enhance family strengths and capabilities

*(source: adapted from Dunst, 1997)*

On examination of these family-centred practices it is clear they also describe the relational pedagogy of the EYEP: respectful practice; working in partnership; being sensitive and responsive to families; encouraging family decision-making and family-identified goals; programming individually (the orientation process); providing resources (coffee mornings) and supports (facilitating community links); enhancing families’ competencies (modeling positive practices); and enhancing family strengths (giving feedback and praise).

In addition to the examples listed above, EYEP educators engaged in family-inclusive practices such as welcoming the participation of siblings, grandparents, friends and neighbours, and they actively supported parents to stay in the centre. Educators respectfully built parental capacity to see their children and understand their perspectives but were careful not to disempower parents. As one educator said:

*“A lot of the families that come in here who are overstressed and overburdened, sometimes have very low confidence, and the more we become expert, the less confident they become. Engaging parents helps if you make them the expert and just ask to walk alongside them and asking what*

*their desires are for their child. You always achieve goals with parents when it's a goal they want to achieve rather than one that you want to achieve"*

Strategies such as the 12-weekly education and care planning meetings are almost identical to an Individual Family Service Plan (IFSP), a family-centred process that enacts collaborative family-professional partnerships. Fordham and Johnston (2014) reported on an Australian study (SCOPE, 2004) that found that families prefer family-centred services to those that are professionally-centred because they enhance: their satisfaction with parenting; feelings of empowerment; and parental and family wellbeing.

The evidence in this study suggests that perhaps the most important outcome of a high quality holistic EC curriculum that employs both child-centred and family-centred practices is that of sustained parental engagement. Many parents at the EYEP identified that *they* felt cared for; that educators supported them (parents) without judgement; that their opinions were valued and respected; and that they (parent and educators) worked as a team. If parental engagement is valued and sustained, their children will be more likely to attend early childhood education and care, and which ultimately is of benefit to the children's learning, development and wellbeing.

## Implications for universal ECEC services working with children and families experiencing vulnerabilities

A number of practical implications have already been summarised at the end of each research question or results section. In addition to those, three broad implications for universal EC services working with children and families experiencing vulnerabilities are shared here.

The first implication is for services to *engage* these families well, and once families are engaged (with the service) it is crucial to *sustain* their engagement. As previously mentioned if families experience a sense of *belonging* to a service they are perhaps less likely to disengage from it. If services can sustain parental engagement, their children will participate in EC services, with the obvious outcome being the potential to improve children's learning and development.

Secondly, it takes *time to build relationships* with families, particularly families who may have experienced high levels of stress or social disadvantage and who may have a mistrust of professional services, and a slower orientation into an EC setting is one way to facilitate this process. Training in family-centred practices would support educators to be better skilled in building respectful relationships with every family.

Thirdly, educators (and other EC staff) would benefit from *learning* and *training* in:

- i) Attachment theory (such as Circle of Security training) to understand issues that children with attachment difficulties may be experiencing, and to understand the emotions and needs behind children's behaviours.
- ii) The effects of trauma on children's learning and development so that educators can support children who may be reliving traumatic experiences or may need help with their emotional self-regulation.
- iii) Designing and implementing a holistic approach to curriculum and relational pedagogy that supports and enhances every child's capacity as a learner.



## Conclusion

Recent international research, policies and practices have shown that *quality matters* in the provision of early childhood education and care, and the evidence is very strong in regard to the benefits of quality ECEC for disadvantaged children (Brennan & Adamson, 2014). However, while there is evidence to suggest that Australian universal ECEC services are trying to engage with vulnerable children and their families (Skattebol et al., 2014), the literature also indicates that some of the most disadvantaged children either do not engage, or do not sustain their engagement with universal services (Winkworth, et al., 2010).

ECEC programs that specifically focus on vulnerable families not only ensure that some of the most vulnerable children and families are connected to services that are designed to support them, but they can also assist the universal sector by sharing how they successfully sustain the engagement of vulnerable families with their services.

Although the EYEP is targeted at children and families who experience significant family stress and social disadvantage, it nonetheless operates within a universal framework, and it is delivered in ways that exceed the rigorous standards of evidence in relation to staff qualifications, staff-to-child ratios and curriculum (Brennan & Adamson, 2014).

The key purpose of this qualitative study into the EYEP was to examine the lived experiences of all of its participants (staff, parents and children) in order to describe, translate and disseminate the day-to-day activities of the program with the universal ECEC sector. The EYEP:Q study aimed to:

- 1) Gain a deep understanding of what occurs in the EYEP's everyday practice;
- 2) Describe what is unique and different about it;
- 3) Translate this understanding to enable effective replication of the EYEP;
- 4) Understand, describe and articulate educators' needs in implementing the program;
- 5) Gain an understanding of the EYEP's integrated multidisciplinary practice strategies.

The EYEP is a well-constructed high quality early childhood education and care program that has been sensitively and respectfully designed to support the complex and changing needs of children and families experiencing vulnerabilities. Educators employ attachment-based and trauma-informed practices, which are strengthened by a relational pedagogy that is comprehensively linked to the national Early Years Learning Framework (DEEWR, 2009), and the National Quality Standard (National Quality Standard, ACECQA, 2013).

The integrated interdisciplinary nature of service delivery results in an educational model that is enriched by extensive input from Infant Mental Health professionals enabling educators to have a greater understanding of each child's internal world. In addition, educators are supported by regular professional supervision, relevant ongoing professional development, extensive time allocated for programming and planning and a range of activities that maintain their wellbeing.

Two of EYEP's unique elements are the supportive manner in which families gradually orientate into the program, and the approach taken to include parents in their children's education and care plans. The holistic curriculum is both child- and family-centred and educators employ family-centred practices (Dunst, 1997) that enhance parental belonging and sustain parental engagement with the program.

In their recent report into quality early education (April, 2016) researchers from the Mitchell Institute in Victoria recommended:

*The roll-out of an appropriate suite of evidence-based, high-intensity pedagogical and engagement practices, with the aim of lifting the quality of the learning environment and educative program across all existing early education settings in priority communities ... The suite of practices may*

*include widespread implementation of the evidence-based Abecedarian approach and/or wrap-around models that research indicates should involve greater attendance hours, high child-staff ratios, a strong learning focus with individualised learning plans, connections with other services – including health, family support, cultural workers, early intervention, mental health and other specialist services – and active outreach strategies combined with strategies to build strong partnerships with families (O’Connell, Fox, Hinz, & Cole, 2016, pp. 47-48).*

This extended ethnographic study has provided robust research evidence that the EYEP is clearly one such evidence-based, high-intensity pedagogical and family engagement practice and it is hoped that the detail provided in this report will enable other service providers to consider replicating some, if not all of the elements of the EYEP. The provision of high quality universal ECEC for children and families experiencing vulnerabilities will ultimately depend on the capacity of service providers and policy-makers to understand that *high quality ECEC acts as a protective factor for children* and that children’s outcomes are greatly compromised if they cannot access such programs. Indeed, one of the parents in this study demonstrated her understanding of the current and long term benefits from engagement with the EYEP when she remarked during her interview:

*If that kind of support had been available to my mother so long ago, would I be here?  
Would my son be here?*

## Additional note

The Australian Children’s Education and Care Quality Authority (ACECQA) guides the implementation of the National Quality Framework for Early Childhood Education and Care and ensures consistency of approach (Australian Children’s Education and Care Quality Authority, 2014, p 10).

ACECQA is responsible for developing and managing the Excellent rating application process and for awarding the rating. The Excellent rating is the highest rating that an educational and care service can achieve. It can only be awarded by ACECQA and is not a rating given during the initial assessment and rating process. To be eligible to apply for the Excellent rating a service must first have been rated as exceeding the National Quality Standard (NQS) by its external State or Territory regulatory authority. Subsequently a service can choose to apply to ACECQA for an Excellent rating by completing the application form and demonstrating how their service meets three criteria:

- 1) The service exemplifies and promotes exceptional education and care that improves outcomes for children and families across at least three of six possible domains (see ACECQA ‘Guidelines for applicants –Excellent rating’ for a full description, 2014)
- 2) The service demonstrates leadership that contributes to the development of a community, a local area, or the wider education and care sector
- 3) The service demonstrates commitment to sustained excellent practice through continuous improvement and comprehensive forward planning

In February 2014, the EYEP (known as the CPS Children’s Centre) having been rated as Exceeding the National Quality Standard in November 2013, applied for an Excellent rating.

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## Recommended Resources

- Bridges out of poverty: Strategies for professionals and communities (2006).  
Ruby Kayne, Philip DeVol & Terie Dreussi Smith.
- Calmer classrooms: A guide to working with traumatised children (2007). Victorian State Government.
- From isolation to connection: A guide to understanding and working with traumatised children and young people (2009). Victorian State Government.
- The Circle of Security intervention: Enhancing attachment in early parent-child relationships (2014).  
Bert Powell, Glen Cooper, Kent Hoffman, & Bob Marvin.
- When Lester lost his cool. (2006). Sophie Havighurst.
- Working with vulnerable families: a partnership approach (2013). Fiona Arney & Dorothy Scott.

# Appendices

# Appendix 1

## Charles Sturt University HREC Approval



**OFFICE OF  
ACADEMIC GOVERNANCE**

Private Mail Bag 29  
Panorama Avenue  
Bathurst NSW 2795  
Australia  
Tel: +61 2 6338 4185  
Fax: +61 2 6338 4194

17 September 2013

Dr Loraine Fordham  
School of Teacher Education  
BATHURST CAMPUS

Dear Dr Fordham,

Thank you for the additional information forwarded in response to a request from the Human Research Ethics Committee (HREC).

The CSU HREC reviews projects in accordance with the National Health and Medical Research Council's *National Statement on Ethical Conduct in Research Involving Humans*.

I am pleased to advise that your project entitled "**Qualitative study of the Early Years Education Program (EYEP: Q)**" meets the requirements of the *National Statement*; and ethical approval for this research is granted for a twelve-month period from 17 September 2013

The protocol number issued with respect to this project is **2013/172**. Please be sure to quote this number when responding to any request made by the Committee.

Please note the following conditions of approval:

- all Consent Forms and Information Sheets are to be printed on Charles Sturt University letterhead. Students should liaise with their Supervisor to arrange to have these documents printed;
- you must notify the Committee immediately in writing should your research differ in any way from that proposed. Forms are available at: [http://www.csu.edu.au/\\_data/assets/word\\_doc/0010/176833/ehrc\\_annrep.doc](http://www.csu.edu.au/_data/assets/word_doc/0010/176833/ehrc_annrep.doc) (please copy and paste the address into your browser)
- you must notify the Committee immediately if any serious and or unexpected adverse events or outcomes occur associated with your research, that might affect the participants and therefore ethical acceptability of the project. An Adverse Incident form is available from the website: as above;
- amendments to the research design must be reviewed and approved by the Human Research Ethics Committee before commencement. Forms are available at the website above;

Approval\_after\_further\_information.doc

Last updated: February 2013  
Next review: February 2014

[www.csu.edu.au](http://www.csu.edu.au)

CRICOS Provider Numbers for Charles Sturt University are 00005F (NSW), 01947G (VIC) and 02960B (ACT). ABN: 83 878 708 551

- if an extension of the approval period is required, a request must be submitted to the Human Research Ethics Committee. Forms are available at the website above;
- you are required to complete a Progress Report form, which can be downloaded as above, by 18 July 2014 if your research has not been completed by that date;
- you are required to submit a final report, the form is available from the website above.

YOU ARE REMINDED THAT AN APPROVAL LETTER FROM THE CSU HREC CONSTITUTES **ETHICAL APPROVAL ONLY**.

If your research involves the use of radiation, biological materials, chemicals or animals a separate approval is required from the appropriate University Committee.

The Committee wishes you well in your research and please do not hesitate to contact the Executive Officer on telephone (02) 6338 4628 or email [ethics@csu.edu.au](mailto:ethics@csu.edu.au) if you have any enquiries.

Yours sincerely



**Julie Hicks**  
**Executive Officer**  
**Human Research Ethics Committee**  
**Direct Telephone: (02) 6338 4628**  
**Email: [ethics@csu.edu.au](mailto:ethics@csu.edu.au)**  
cc:

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This HREC is constituted and operates in accordance with the National Health and Medical Research Council's (NHMRC) *National Statement on Ethical Conduct in Human Research* (2007)

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## Appendix 2

### Information Sheet For Parents



#### **INFORMATION SHEET: PARENTS**

##### **A qualitative research study into the Early Years Education Program (EYEP: Q)**

###### **What is this new research project about?**

The Early Years Education Program (EYEP) is a specialist child care program for children who experience significant family stress and social disadvantage. The reason for this new research project (Early Years Education Program: Q) is to have a really good look at the Early Years Education Program (EYEP) in order to understand the experiences of all the children, parents, educators and families as well as to describe, understand and share the day-to-day activities of the program.

###### **Who can take part in the project?**

- i) Parents of children who attend the EYEP, and their children.
- ii) All the CPS staff (educators, team leaders, office manager, chef etc.,)

###### **How is the research project going to answer its questions?**

By interviewing the parents.

By interviewing the EYEP educators and other CPS staff.

By observing the children and educators in the rooms.

###### **What happens after I indicate that I am interested in finding out how to take part in the study?**

The researcher (Lorraine) will meet with you to explain the study and to answer any questions you have about it. Lorraine will then ask you if you would like to be included in the project. If you would Lorraine will ask you to sign a consent form. Signing the form means you agree for yourself and your child /children to be included in the project.

You can arrange for someone else to be with you while the study is explained and the consent form is signed.

After you have signed the consent form Lorraine will contact you to arrange a time to talk to you.

###### **Who is doing the research project?**

This research is being carried out by Lorraine who is a researcher at Charles Sturt University. Lorraine is working with the Children's Protection Society (CPS) to undertake this research. The Children's Protection Society is overseeing this research project. You'll find the names of the researchers involved in the project listed at the end of this pamphlet.

The research project has been approved by the Human Ethics Research Committee at Charles Sturt University.

If at any time you have concerns about the project you are able to contact Shannan Mudie, the Early Years Team Leader (Practice and Development), Phone: 03 9459 2065; Email: smudie@cps.org.au or the Human Ethics Office at Charles Sturt University (ethics@csu.edu.au).

###### **What information will the research project want from my child and me?**

Taking part in the research will involve you being interviewed by Lorraine. These interviews will be digitally audio-recorded. Lorraine will also be observing your child interacting with other children and staff at the EYEP and making written field notes, but these observations will not be digitally recorded.

Lorraine will ask you questions about your experiences with the EYEP as well as your thoughts on the program and your child's progress. Lorraine has a great deal of experience in working with children and families and in interviewing parents.

After you consent to be in the study you will be interviewed at least twice and possibly three times. The first interview will take place soon after you give your consent and the second one will take place about a year later. A third interview would take place about 6 months after that. In each case Lorraine will contact you to arrange a suitable time to meet at the CPS offices for you to take part in the interview. It is likely that each interview will take about an hour.

### **What will happen to the information that is collected?**

All information collected will be analysed by Lorraine and later stored at Charles Sturt University. All information will have your name and your child's name removed from it. You will not be identified in *any* research findings. All information will be stored on a computer in a secure room at Charles Sturt University that can only be accessed by researchers involved in this project.

Only researchers working on this project will have access to data from the EYEP: Q. We can disclose information only with your permission, except as required by law and/or if we have concern for your safety or the safety of others. The data will be kept while the analysis of the EYEP is being undertaken, and then for a sufficient future period as 'proof' that the study was actually undertaken. (This will be for a minimum of 5 years after publication of findings from the study).

If at any time you would like to access the information that has been collected on you, you can do this by contacting Shannan Mudie, the Early Years Team Leader (Practice and Development). Your participation in this research study is voluntary and if you decide you do not wish to continue, you can ask to withdraw at any time, and at the same time, request withdrawal of data that has not already been analysed.

### **How do I get information on what the research findings are?**

When the project is completed and we have analysed the results we will send all participants a summary of the findings. This will be a summary of the findings from the whole group of adults (parents and educators) and the children who took part in the research. You can telephone Shannan Mudie, the Early Years Team Leader (Practice and Development) on 03 9459 2065 to let us know of any change of address, so that we have an up-to-date address to send the summary to you when this project is finished.

In addition findings from this research study will be published in a Research Report, in academic journals and at early childhood conferences. The report will be designed to reach a range of audiences as determined by the CPS Board.

### **Who is involved in this research project?**

#### *Staff at CPS:*

Shannan Mudie - Early Years Team Leader (Practice and Development)  
Dr Anne Kennedy - Early Childhood Consultant

#### *Researchers at Charles Sturt University:*

Dr Loraine Fordham - Department of Early Childhood  
Professor Jennifer Sumsion - Early Childhood Research Leader

### **Who can I talk to for more information about EYEP and the research project?**

Shannan Mudie: Early Years Team Leader (Practice and Development)  
Telephone: 03 9459 2065  
Email: smudie@cps.org.au  
HREC number: 2013/172



## Appendix 4

### Information Sheet For Staff (Plain Language Statement)



#### **PLAIN LANGUAGE STATEMENT: STAFF**

##### **Qualitative study into the Early Years Education Program (EYEP: Q)**

##### **What is the project about?**

The Early Years Education Program (EYEP) is a specialist child care program for children who experience significant family stress and social disadvantage. The objective of this research project (Early Years Education Program: Q) is to conduct a thorough investigation into the Early Years Education Program (EYEP) in order to understand the experiences of the participants (parents, staff and children) as well as to describe, understand and share the day-to-day activities of the program.

##### **Who can take part in the project?**

- i) Parents of children participating in the EYEP and their children.
- ii) CPS staff teaching and caring for children enrolled in the EYEP.

##### **How is the research project going to answer its questions?**

By interviewing the parents of the children enrolled in EYEP.  
By interviewing the staff teaching and caring for the children in EYEP.  
By observing the children and staff interacting and participating in the EYEP.

##### **What happens after I indicate that I am interested in finding out how to participate in the study?**

The researcher (Dr Loraine Fordham) will meet with you to explain this research study and to answer any questions you have about it. Loraine will then ask you if you would like to be included in the project. If you would, Loraine will ask you to sign a consent form. Signing the form means you agree to be included in the project.

You can arrange for someone else to be with you while the study is explained and the consent form is signed.

After you have signed the consent form Dr Loraine Fordham will arrange a time to interview you.

##### **Who is doing the research project?**

This research is being carried out by Dr Loraine Fordham who is a researcher at Charles Sturt University. Loraine is working with the Children's Protection Society (CPS) to undertake this research.

The Children's Protection Society are overseeing this research project.

You'll find the names of the researchers involved in the project listed at the end of this pamphlet.

The research project has been approved by the Human Ethics Research Committee at Charles Sturt University.

If at any time you have concerns about the project you are able to contact the Director of EYEP, Janet Williams-Smith (Phone: 9459-2065; Email: [jwilliams-smith@cps.org.au](mailto:jwilliams-smith@cps.org.au)), or the Human Ethics Office at Charles Sturt University ([ethics@csu.edu.au](mailto:ethics@csu.edu.au)).

##### **What information will the research project want from me?**

Taking part in the research will involve you being interviewed by the researcher and taking part in focus group discussions with other staff. These interviews and focus groups will be digitally audio-recorded. The researcher will also be observing you interacting with children, parents and other staff at the EYEP and taking field notes, but these observations will not be recorded.

The researcher will ask you questions about your experiences in the EYEP as well as your thoughts on the program. The researcher has a great deal of experience in working with children and families and in interviewing.

After you consent to be in the study you will be interviewed by the researcher at least twice and possibly three times. The first interview will take place a few weeks after you give your consent and the second one will take place about a year later. A third interview would take place about a year after that. In each case the researcher will contact you to arrange a suitable time to meet at the CPS offices for you to take part in the interview. It is likely that each interview will take about an hour.

The researcher will also talk to you together with other staff members. These interviews will be called focus group discussions. It is likely that each focus group discussion will also take about an hour.

### **What will happen to the information that is collected?**

All information collected will be analysed by the researcher (Dr Loraine Fordham) and later stored at Charles Sturt University. All information will have your name removed from it. You will not be identified in *any* research findings. All information will be stored on a computer in a secure room at the Charles Sturt University that can only be accessed by researchers involved in this project.

Only the researchers working on this project will have access to data from the EYEP: Q. We can disclose information only with your permission, except as required by law and/or if we have concern for your safety or the safety of others. The data will be kept while the analysis of the EYEP is being undertaken, and then for a sufficient future period as 'proof' that the study was actually undertaken. (This will be for a minimum of 5 years after publication of findings from the study).

If at any time you would like to access the information that has been collected on you, you can do this by contacting the EYEP Director at CPS, Janet Williams-Smith. Your participation in this research study is voluntary and if you decide you do not wish to continue in the project, you can ask to withdraw at any time, and at the same time, request withdrawal of data that has not already been analysed by the researcher.

### **How do I get information on what the research findings are?**

When the project is completed and we have analysed the results we will send all participants a summary of the findings from the research. This will be a summary of the findings from the whole group of adults (parents and staff) and the children who participated in the research. Please contact Janet Williams-Smith, the Director of EYEP on 03 94592065 with any change of address, so that we have an up-to-date address to send the summary to you when the project is finished. In addition, findings from this research study will be published in a Research Report, in peer-reviewed academic journals and at early childhood practitioner conferences. The Report will be available for distribution via websites deemed appropriate by the CPS Board, and will be designed to reach the full range of diverse audiences as determined by the CPS Board.

### **Who is involved in this research project?**

#### *Staff at CPS:*

Ms Janet Williams-Smith - Director of the EYEP  
Dr Anne Kennedy - Early Childhood Consultant

#### *Researchers at Charles Sturt University:*

Dr Loraine Fordham - Department of Early Childhood  
Professor Jennifer Sumsion - Early Childhood Research Leader

### **Who can I talk to for more information about EYEP and the research project?**

Janet Williams-Smith, Director, Early Years Education Program (EYEP).

Telephone: 03 9459-2065

Email: [jwilliams-smith@cps.org.au](mailto:jwilliams-smith@cps.org.au)

HREC number: 2013/172

## Appendix 5

### Consent Form For Staff



#### CONSENT FORM: STAFF

#### QUALITATIVE STUDY OF THE EARLY YEARS EDUCATION PROGRAM (EYEP: Q)

Name of participant: Staff:  
Name of investigator: Dr Loraine Fordham

1. I consent to participate in this project.
2. Details of the project have been explained to me, and I have been provided with and read a 'Plain Language statement' which describes this project.
3. I understand that after I sign and return this consent form, it will be retained by the investigator.
4. I understand that my participation in this EYEP: Q project will involve:
  - (i) me being interviewed;
  - (ii) me participating in a focus group;
  - (iii) observations of me interacting with children and other staff in the EYEP (in the form of hand-written field notes).

Interviews with me will take place at yearly intervals over the 2½ years duration of the project. Focus group interviews with me (and other staff) will take place at regular intervals each year over the course of the project. Observations of me will take place throughout the course of this project. I agree that the investigators may use the results in the way described in the 'Plain Language statement.'

5. I acknowledge that:
- a) The possible effects of participation in this EYEP: Q project have been explained to me;
  - b) I have been informed that my participation in this project is voluntary and that I am free to withdraw from it at any time without explanation or prejudice and to withdraw any unprocessed data I have provided;
  - c) This project is for the purpose of research;
  - d) I have been informed that the confidentiality of the information I provide will be safe guarded, subject to any legal requirements;
  - e) I have been informed that information collected in this project will be kept at Charles Sturt University for a period required to undertake analysis for the project, and then for a period required by professional practice, after which it will be destroyed;
  - f) No information on my name or address will be kept as part of the information collected in this project;
  - g) I have been informed that a copy of a summary of the research findings will be forwarded to me, should I request this.

**I wish to receive a copy of the summary report on the findings from this research project**

**Yes**

**No**

(Please circle)

**Participant signature:**

**Date:**

## Appendix 6

### Charles Sturt University HREC: Approval Of Variations



8 July 2015

**OFFICE OF  
ACADEMIC GOVERNANCE**

Private Mail Bag 29  
Panorama Avenue  
Bathurst NSW 2795  
Australia  
Tel: +61 2 6338 4185  
Fax: +61 2 6338 4194

Dr Loraine Fordham  
School of Teacher Education  
BATHURST CAMPUS

Dear Dr Fordham,

The Charles Sturt University (CSU) Human Research Ethics Committee (HREC) operates in accordance with the National Health and Medical Research Council's *National Statement on Ethical Conduct in Research Involving Humans*.

The HREC has reviewed your report requesting a variation for your research project "*Early Years Education Research Program: A Qualitative study of the Early Years Education Program (EYERP:Q)*", protocol number 2013/172 and I am pleased to advise that this request for a variation meets the requirements of the *National Statement*; and variation for this research is granted for a twelve month period from 8 July 2015.

Please note the following conditions of approval:

- all Consent Forms and Information Sheets are to be printed on Charles Sturt University letterhead. Students should liaise with their Supervisor to arrange to have these documents printed;
- you must notify the Committee immediately in writing should your research differ in any way from that proposed. Forms are available at [http://www.csu.edu.au/\\_data/assets/word\\_doc/0012/963768/Report-on-Research-Project\\_20130503.doc](http://www.csu.edu.au/_data/assets/word_doc/0012/963768/Report-on-Research-Project_20130503.doc)
- you must notify the Committee immediately if any serious and or unexpected adverse events or outcomes occur associated with your research, that might affect the participants and therefore ethical acceptability of the project. An Adverse Incident form is available from the website: as above;
- amendments to the research design must be reviewed and approved by the Human Research Ethics Committee before commencement. Forms are available at the website above;
- if an extension of the approval period is required, a request must be submitted to the Human Research Ethics Committee. Forms are available at the website above;
- you are required to complete a *Report On Research Project*, which can be downloaded as above, by 20 May 2016 if your research has not been completed by that date;

Variation .doc

Last updated: March 2015  
Next review: March 2016

[www.csu.edu.au](http://www.csu.edu.au)

CRICOS Provider Numbers for Charles Sturt University are 00005F (NSW), 01947G (VIC) and 02960B (ACT). ABN: 83 878 708 551

- you are required to submit a final report, the form is available from the website above.

You are reminded that an approval letter from the CSU HREC constitutes **ethical approval only**.

If your research involves the use of radiation, biological materials or chemicals separate approval is required from the appropriate University Committee.

Please don't hesitate to contact the Executive Officer: telephone (02) 6338 4628 or email [ethics@csu.edu.au](mailto:ethics@csu.edu.au) if you have any enquiries about this matter.

Yours sincerely,



**Julie Hicks**  
**Executive Officer**  
**Human Research Ethics Committee**  
**Direct Telephone: (02) 6338 4628**  
**Email: [ethics@csu.edu.au](mailto:ethics@csu.edu.au)**

Cc:

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This HREC is constituted and operates in accordance with the National Health and Medical Research Council's (NHMRC) *National Statement on Ethical Conduct in Human Research* (2007)

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# Appendix 7

## Ethics Variation 1

### Information Sheet For Parents: Recording Children' s Interactions



#### **INFORMATION SHEET: PARENTS – recording**

#### **A qualitative research study into the Early Years Education Program (EYEP: Q)**

##### **What is this research project about?**

The Early Years Education Program (EYEP) is a specialist child care program for children who experience significant family stress and social disadvantage. The reason for this new research project (Early Years Education Program: Q) is to have a really good look at the Early Years Education Program (EYEP) in order to understand the experiences of all the children, parents, educators and families as well as to describe, understand and share the day-to-day activities of the program.

##### **Who can take part in the project?**

- i) Parents of children who attend the EYEP, and their children.
- ii) All the CPS staff (educators, team leaders, office manager, chef etc..)

##### **How is the research project going to answer its questions?**

By interviewing the parents.  
By interviewing the EYEP educators and other CPS staff.  
By observing the children and educators in the rooms.

##### **In 2015 the research project will answer its questions with two additions to the project:**

By recording educators interacting with children; and recording educators interacting with each other.  
By talking with some of the Kinder children about their views of the Centre; and looking at the children's drawings of the Centre.

##### **What happens after I indicate that I am interested in taking part in the additional part of the study?**

The researcher (Loraine) will meet with you to explain the additional part of this research study and to answer any questions you have about it. Loraine will then ask you if you would like your child to be included in the additional part of this research project. If you would Loraine will ask you to sign a consent form. Signing the form means you agree for your child /children to be included in the additional part of this research project.

You can arrange for someone else to be with you while the study is explained and the consent form is signed. After you have signed the consent form Loraine will contact you to arrange a time to talk to you.

##### **Who is doing the research project?**

This research is being carried out by Loraine who is a researcher at Charles Sturt University. Loraine is working with the Children's Protection Society (CPS) to undertake this research. The Children's Protection Society is overseeing this research project. You'll find the names of the researchers involved in the project listed at the end of this pamphlet. The project started in January 2014 and will finish in March 2016.

The research project has been approved by the Human Ethics Research Committee at Charles Sturt University.

If at any time you have concerns about the project you are able to contact the Human Ethics Office at Charles Sturt University (ethics@csu.edu.au).

### **What information will the research project want from my child and me?**

Taking part in the additional part of this research project will involve:

- 1) Your child's interactions with their teachers being digitally audio-recorded by Loraine.

Loraine has a great deal of experience in working with children and families and in talking with children.

After you give your consent Loraine will record interactions between teachers and children when she is in the teaching rooms observing the children playing and learning.

### **What will happen to the information that is collected?**

All information collected will be analysed by Loraine and later stored at Charles Sturt University.

All information will have your name and your child's name removed from it.

Neither you nor your child will be identified in *any* research findings.

All information will be stored on a computer in a secure room at Charles Sturt University that can only be accessed by researchers involved in this project.

Only researchers working on this project will have access to data from the EYEP:Q. We can disclose information only with your permission, except as required by law and/or if we have concern for your safety or the safety of others. The data will be kept while the analysis of the EYEP is being undertaken, and then for a sufficient future period as proof that the study was actually undertaken. (This will be for a minimum of 5 years after publication of findings from the study).

If at any time you would like to access the information that has been collected on you, you can do this by contacting Loraine on 02 6338 4414. Your participation in this research study is voluntary and if you decide you do not wish to continue, you can ask to withdraw at any time, and at the same time, request withdrawal of data that has not already been analysed.

### **How do I get information on what the research findings are?**

When the project is completed and we have analysed the results we will send all participants a summary of the findings. This will be a summary of the findings from the whole group of adults (parents and educators) and the children who took part in the research. You can telephone Loraine on 02 6338 4414 to let us know of any change of address, so that we have an up-to-date address to send the summary to you when this project is finished.

In addition findings from this research study will be published in a Research Report, in academic journals and at early childhood conferences. The report will be designed to reach a range of audiences as determined by the CPS Board.

### **Who is involved in this research project?**

*Staff at CPS:*

Dr Anne Kennedy - Early Childhood Consultant

*Researchers at Charles Sturt University:*

Dr Loraine Fordham - Department of Early Childhood

Professor Jennifer Sumsion - Early Childhood Research Leader

### **Who can I talk to for more information about EYEP and the research project?**

Loraine Fordham: Research Leader

Telephone: 02 6338 4414

Email: lfordham@csu.edu.au

HREC number: 2013/172





# Appendix 9

## Ethics Variation 1

### Information Sheet For Educators: Recording Interactions



#### **INFORMATION SHEET: EDUCATORS – recording**

#### **A qualitative research study into the Early Years Education Program (EYEP: Q)**

##### **What is this research project about?**

The Early Years Education Program (EYEP) is a specialist child care program for children who experience significant family stress and social disadvantage. The objective of this research project (Early Years Education Program: Q) is to conduct a thorough investigation into the Early Years Education Program (EYEP) in order to understand the experiences of the participants (parents, staff and children) as well as to describe, understand and share the day-to-day activities of the program.

##### **Who can take part in the project?**

- i) Parents of children who attend the EYEP, and their children.
- ii) All the CPS staff (educators, team leaders, office manager, chef etc..)

##### **How is the research project going to answer its questions?**

By interviewing the parents.  
By interviewing the EYEP educators and other CPS staff.  
By observing the children and educators in the rooms.

##### **In 2015 the research project will answer its questions with two additions to the project:**

By recording educators interacting with children; and recording educators interacting with each other.  
By talking with some of the Kinder children about their views of the Centre; and looking at the children's drawings of the Centre.

##### **What happens after I indicate that I am interested in taking part in the additional part of the study?**

The researcher (Dr Loraine Fordham) will meet with you to explain this research study and to answer any questions you have about it. Loraine will then ask you if you would like to be included in the project. If you would, Loraine will ask you to sign a consent form. Signing the form means you agree to be included in the project. You can arrange for someone else to be with you while the study is explained and the consent form is signed. After you have signed the consent form Dr Loraine Fordham will arrange a time to interview you.

##### **Who is doing the research project?**

This research is being carried out by Dr Loraine Fordham who is a researcher at Charles Sturt University. Loraine is working with the Children's Protection Society (CPS) to undertake this research. The Children's Protection Society is overseeing this research project. You'll find the names of the researchers involved in the project listed at the end of this pamphlet. The research project has been approved by the Human Ethics Research Committee at Charles Sturt University.

If at any time you have concerns about the project you are able to contact the Human Ethics Office at Charles Sturt University (ethics@csu.edu.au).

### **What information will the research project want from me?**

Taking part in the additional part of this research project will involve:

1) Some of your interactions with children and with other educators being digitally audio-recorded by Loraine. Loraine has a great deal of experience in working with children and families and in talking with children.

After you give your consent Loraine will record some of the interactions between educators and children; and some of the interactions between educators and other educators, when she is observing educators and children interacting.

### **What will happen to the information that is collected?**

All information collected will be analysed by Loraine and later stored at Charles Sturt University.

All information will have your name removed from it.

You will not be identified in *any* research findings.

All information will be stored on a computer in a secure room at Charles Sturt University that can only be accessed by researchers involved in this project.

Only researchers working on this project will have access to data from the EYEP:Q. We can disclose information only with your permission, except as required by law and/or if we have concern for your safety or the safety of others. The data will be kept while the analysis of the EYEP is being undertaken, and then for a sufficient future period as proof that the study was actually undertaken. (This will be for a minimum of 5 years after publication of findings from the study).

If at any time you would like to access the information that has been collected on you, you can do this by contacting Loraine on 02 6338 4414. Your participation in this research study is voluntary and if you decide you do not wish to continue, you can ask to withdraw at any time, and at the same time, request withdrawal of data that has not already been analysed.

### **How do I get information on what the research findings are?**

When the project is completed and we have analysed the results we will send all participants a summary of the findings. This will be a summary of the findings from the whole group of adults (parents and educators) and the children who took part in the research. You can telephone Loraine on 02 6338 4414 to let us know of any change of address, so that we have an up-to-date address to send the summary to you when this project is finished.

In addition findings from this research study will be published in a Research Report, in academic journals and at early childhood conferences. The report will be designed to reach a range of audiences as determined by the CPS Board.

### **Who is involved in this research project?**

*Staff at CPS:*

Dr Anne Kennedy - Early Childhood Consultant

*Researchers at Charles Sturt University:*

Dr Loraine Fordham - Department of Early Childhood

Professor Jennifer Sumsion - Early Childhood Research Leader

### **Who can I talk to for more information about EYEP and the research project?**

Loraine Fordham: Research Leader

Telephone: 02 6338 4414

Email: lfordham@csu.edu.au

HREC number: 2013/172





# Appendix 11

## Ethics Variation 2

### Information Sheet For Parents: Interviewing Kinder Children



#### **INFORMATION SHEET: PARENTS – Kinder children**

#### **A qualitative research study into the Early Years Education Program (EYEP: Q)**

##### **What is this research project about?**

The Early Years Education Program (EYEP) is a specialist child care program for children who experience significant family stress and social disadvantage. The reason for this new research project (Early Years Education Program: Q) is to have a really good look at the Early Years Education Program (EYEP) in order to understand the experiences of all the children, parents, educators and families as well as to describe, understand and share the day-to-day activities of the program.

##### **Who can take part in the project?**

- i) Parents of children who attend the EYEP, and their children.
- ii) All the CPS staff (educators, team leaders, office manager, chef etc..)

##### **How is the research project going to answer its questions?**

By interviewing the parents.  
By interviewing the EYEP educators and other CPS staff.  
By observing the children and educators in the rooms.

##### **In 2015 the research project will answer its questions with two additions to the project:**

By recording educators interacting with children; and recording educators interacting with each other.  
By talking with some of the Kinder children about their views of the Centre; and looking at the children's drawings of the Centre.

##### **What happens after I indicate that I am interested in taking part in the additional part of the study?**

The researcher (Loraine) will meet with you to explain the additional part of this research study and to answer any questions you have about it. Loraine will then ask you if you would like your child to be included in the additional part of this research project. If you would Loraine will ask you to sign a consent form. Signing the form means you agree for your child /children to be included in the additional part of this research project.

You can arrange for someone else to be with you while the study is explained and the consent form is signed. After you have signed the consent form Loraine will contact you to arrange a time to talk to you.

##### **Who is doing the research project?**

This research is being carried out by Loraine who is a researcher at Charles Sturt University. Loraine is working with the Children's Protection Society (CPS) to undertake this research. The Children's Protection Society is overseeing this research project. You'll find the names of the researchers involved in the project listed at the end of this pamphlet. The project started in January 2014 and will finish in March 2016.

The research project has been approved by the Human Ethics Research Committee at Charles Sturt University.

If at any time you have concerns about the project you are able to contact the Human Ethics Office at Charles Sturt University (ethics@csu.edu.au).

### **What information will the research project want from my child and me?**

Taking part in the additional part of this research will involve:

- 1) Your Kinder child talking with Loraine about their views about the Children's Centre
- 2) Your Kinder child doing a drawing of the Children's Centre for Loraine to keep

Loraine has a great deal of experience in working with children and families and in talking with children.

After you give your consent Loraine will ask your Kinder child if they would like to talk with Loraine about their centre, and if they would like to do a drawing of the centre for Loraine to keep.

### **What will happen to the information that is collected?**

All information collected will be analysed by Loraine and later stored at Charles Sturt University.

All information will have your name and your child's name removed from it.

Neither you nor your child will be identified in *any* research findings.

All information will be stored on a computer in a secure room at Charles Sturt University that can only be accessed by researchers involved in this project.

Only researchers working on this project will have access to data from the EYEP:Q. We can disclose information only with your permission, except as required by law and/or if we have concern for your safety or the safety of others. The data will be kept while the analysis of the EYEP is being undertaken, and then for a sufficient future period as proof that the study was actually undertaken. (This will be for a minimum of 5 years after publication of findings from the study).

If at any time you would like to access the information that has been collected on you, you can do this by contacting Loraine on 02 6338 4414. Your participation in this research study is voluntary and if you decide you do not wish to continue, you can ask to withdraw at any time, and at the same time, request withdrawal of data that has not already been analysed.

### **How do I get information on what the research findings are?**

When the project is completed and we have analysed the results we will send all participants a summary of the findings. This will be a summary of the findings from the whole group of adults (parents and educators) and the children who took part in the research. You can telephone Loraine on 02 6338 4414 to let us know of any change of address, so that we have an up-to-date address to send the summary to you when this project is finished.

In addition findings from this research study will be published in a Research Report, in academic journals and at early childhood conferences. The report will be designed to reach a range of audiences as determined by the CPS Board.

### **Who is involved in this research project?**

*Staff at CPS:*

Dr Anne Kennedy - Early Childhood Consultant

*Researchers at Charles Sturt University:*

Dr Loraine Fordham - Department of Early Childhood

Professor Jennifer Sumsion - Early Childhood Research Leader

### **Who can I talk to for more information about EYEP and the research project?**

Loraine Fordham: Research Leader

Telephone: 02 6338 4414

Email: lfordham@csu.edu.au

HREC number: 2013/172



# Appendix 13

## Ethics Variation 2

### Consent Form For Children: Interviewing Kinder Children



Research: "Talking about my Kinder"

Name of Participant:

Name of Researcher: *Loraine*

1. I agree to talk with Loraine about my Kinder



2. I agree to draw a picture of my Kinder for Loraine to keep



Signature:.....



## Appendix 14

### Interview Questions For Children



*"Talking about my Kinder with Loraine"*



1. What games do you like playing at Kinder?



2. What is your favourite food at Kinder?



3. What things do you like doing with your teachers?



4. What do you think you have learned at Kinder?



5. What do you like most about Kinder?



6. Is there anything you don't like about Kinder?



7. Is there anything else you would like to say?

Thank you ☺

# Appendix 15

## Interview Questions For Educators: First Interview

### Questions for educators – first interview

#### **Background questions**

- 1) How long have you been working here in the Early Years Education Program?
- 2) Which is your role here in the Early Years Education Program?
- 3) Can you tell me a little bit about you: your training and qualifications; the types of places and /or early childhood settings where you've worked previously?
- 4) What room are you in and how long have you been working in there?

#### **EYEP**

- 5) In general terms, how would you describe the Early Years Education Program?
- 6) Can you talk me through your typical day?
- 7) How do you go about planning and programming activities for your children? Can you give me an example?
- 8) What strategies and / or tools are integral to your teaching practice here?  
Can you give me an example?
- 9) How do you build relationships with the children?  
Can you give me an example of how you do this?
- 10) How do you build relationships with the families/parents?  
Can you give me an example of how you do this?
- 11) How do you build relationships with the other staff?  
Can you give me an example of how you do this?
- 12) What sorts of things have you learnt / are you learning working here?
- 13) What do you value most about working in this Early Years Education Program?
- 14) Is there anything you would like to change about the Early Years Education Program?
- 15) Is there anything else that I haven't thought to ask you about, but which you think would be helpful for me to know?

Thank you for your time and interest in this research project

## Appendix 16

### Interview Questions For Parents: First Interview

#### Questions for parents – first interview

- 1) How did you hear about this Child and Family Centre?
- 2) How long have you and your child been coming here?
- 3) What do you like best about the Early Years program?
- 4) What do you think your child likes best about the Early Years program?
- 5) In a typical day what sorts of things does your child do here in the Early Years program?
- 6) What sorts of things might your child be learning by coming to the Early Years program?
- 7) What sorts of things are you learning?
- 8) How would you describe your child's relationship(s) with their teachers?
- 9) How would you describe your relationship(s) with your child's teachers?
- 10) Is there anything else you would like to tell me about the program that I have not yet asked you?

Thank you so much for your time

# Appendix 17

## Interview Questions For Educators: Second Interview

### Questions for educators – second interview

#### Background

1. What room are you working in?  
How many children & staff are in that room?  
What is the age range of the children?  
Do you expect any changes to this over the coming year?

#### Reflection on last year's interview

2. Thinking about the interview we did last year – do you have any thoughts that you would like to share in response to reading through our conversation?

#### Education

3. What are the features of the pedagogy in your room, and how does your pedagogy support children's development, learning and well-being?
4. How does your pedagogy connect with the Early Years Learning Framework?

#### Care

5. It seems to me that being a child's primary educator requires a fine balancing act between caring deeply for the children and developing an attachment with them, but also not taking over from the parents. How do you manage this balance?
6. Part of your role is also to help develop attachments between children and their parents. How do you nurture or support the relationships that the child has with their family?

#### Change

7. Last year we saw a great deal of change in the centre. How do you think that impacted on staff and children and families?
8. What strategies were used to reduce the impact of change on children and families?

#### Transitions

9. Another aspect of ongoing change in the EYLP involves the children and families when they are in transition from one room to another or to another service for example.  
What skills and strategies are important in facilitating good transition practices for children and families?

#### Relationships

10. What would you say are the most important skills +/- or strategies in facilitating and sustaining relationships with hard-to-reach families?

#### Professional development

11. What professional development or training have you planned for the next 12 months?
12. What professional development or training do you believe is fundamental for working in this type of program?
13. How do you see reflective supervision supporting your professional learning?

#### Final reflections

14. What has been your biggest challenge over the past year?
15. What has been your biggest learning over the past year?
16. Is there anything you would like to change about the Early Years Education Program?
17. What is the impact on you as a professional in being part of two research projects, especially with having me as a researcher present in the learning spaces?
18. Is there anything else that I haven't thought to ask you about, but which you think would be helpful for me to know?

Thank you for your time and interest in this research project

# Appendix 18

## Interview Questions For Parents: Second Interview

### Questions for parents – second interview

- 1) Have there been any changes since the last time we spoke – for example ... with your child's primary educator?  
with your child's teaching room?  
with your family's circumstances?  
What helped you adjust to these changes?  
Do you think that the centre could have done any other things that would have been helpful for you?  
  
Or : Are there any changes for you and your child on the immediate horizon? How is the centre helping you to prepare for this/ these?
- 2) Since you've been coming to this centre have you connected with any other parents or families? Can you tell me about that experience?
- 3) What would you say are the most important skills for teachers in building relationships with parents?
- 4) One of the features of this centre is that it provides nutritious food for the children? Do you see this as important? Can you tell me why you think that? Have you learnt anything from this aspect of the program?
- 5) What does your child like about the centre now?
- 6) What do you like about the centre?
- 7) What has your child learnt over the past year?
- 8) What have you learnt over the past year?
- 9) Is there any impact on you as a parent in being a part of two research projects, especially with having me as a researcher present in the children's learning spaces?
- 10) Is there anything else you would like to say about this centre?  
- the teachers, the activities – anything at all that you would like to tell me but that I haven't asked you about?

Thank you for your time

## Appendix 19

### Interview Questions For Focus Group 1

#### Focus group topics / questions

1. HIGH QUALITY EDUCATION AND CARE - CHALLENGES AND HOW TO ADDRESS THEM
  1. As expert professionals in this field of work what do you see as challenges to providing high quality education and care for “vulnerable” or “trauma-affected” children?
  2. How do you think these challenges can be addressed or overcome?
  
2. DUAL MODEL – EDUCATION & CARE
  3. How do you integrate the education and care models in your practice with your children? (Can you give me examples of how you do this?)
  4. How would you describe the balance of the education and care models? 50:50? 60:40? 70:30?
  5. How do you use the Early Years Learning Framework to guide your daily practice?
  
3. STAFF SUPPORTS
  6. What are your thoughts about supervision?
  7. What PD is essential for educators and other staff who work with vulnerable children and families? What format do you think PD should take and how often?
  
4. TEAM BUILDING
  8. So how are trusting relationships built and sustained with each other within the context of this rewarding but also challenging program?

Thank you!

## Appendix 20

### Interview Questions For Focus Group 2

#### Focus group topics / questions

#### 1: BELONGING BEING AND BECOMING

- Q1 Do you have sense of belonging to CPS? How so or how not so?
- Q2 What practices contributed to you gaining a sense of belonging in this program?
- Q3 What practices support you being an ECEC professional in the centre?
- Q4 What practices are supporting you becoming an even better EC professional in the sector?

#### 2. UNIVERSAL VS TARGETED SERVICES

- Q5 What are your thoughts about the provision of targeted services for children at risk and their families as opposed to the prevalent notion that all children irrespective of need should attend universal services?

#### 3. ECEC PROFESSIONALS: SKILLS, KNOWLEDGE & VALUES

- Q6 As individual ECEC professionals what do you bring professionally to this work?  
What would you say are your best skills, knowledge and values?

Thank you all so much for your time; it is very much appreciated.



# Appendix 21

## Interview Questions For Focus Group 3

### Focus group topics / questions

#### 1: SUPPORTING CHILDREN'S BEHAVIOURS AND EMOTIONS

*Q1 Can you tell me about some of the effective response strategies that you use to support either a toddler or a 4 year old that is having trouble managing their behaviour?*

*Q2 How have you learnt these strategies?*

*Q3 How are these response strategies different or more effective than strategies you have used in other settings?*

#### 2. UNPACKING THE 12-WEEKLY EDUCATION AND CARE PLANS

*Q4 What do you see as the benefits of the 12-weekly meetings with families?*

*Q5 What do you see as some of the challenges of the 12-weekly meetings with families?*

*Q6 Can you give me an example of a shared goal you have worked on together with a family?*

*Q7 Can you give me an example of a goal that a family has worked on at home? And what was the outcome for the child and for the parent/s?*

#### 3. STAFF WELLBEING

*Q8 Why is staff well-being so important?*

*Q9 How does CPS support your well-being?*

*Q10 What do you do to support your well-being?*

#### 4. KEY MESSAGES FOR THE EC SECTOR

*Q11 Based on your experiences of working with the children and families here, what are the key messages that you would like to share with the EC sector and/or with other educators?*

#### 5. REFLECTION ON YOUR PARTICIPATION IN THIS RESEARCH STUDY –

*Q12 What has been your experience of participating in this type of ethnographic research project?  
(i.e. having me in your rooms and being part of the focus groups)  
Have there been any challenges?*

Thank you all so much for your time.

