

Developing Quality in Early Childhood Care and Education Services: The Impact of a Continuing Professional Development Programme

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Introduction

Experiences during early childhood, before the age of compulsory education, hold significant relevance, not just to the child's current development, but also to later lifelong learning because these experiences provide the foundation for future development and learning (National Research Council and Institute of Medicine, 2000; Friedman, 2005; Schweinhart *et al.*, 2005). This understanding has occurred side-by-side with changing conceptualisations of 'the child'. Childhood itself is not a biological given, but a socially constructed concept that has been deconstructed and reconstructed quite rapidly in recent years (Moss, 2006). Children are seen as social actors in their own right, social agents and citizens. This conceptualisation of 'the child' holds Early Childhood Care and Education (ECCE) as a right with an emphasis on attending to the development of the quality of services (Department of Health and Children, 2000).

Quality in ECCE is not viewed as a unitary or static concept (Friendly *et al.*, 2006), and most research related to quality measurement makes a distinction between structural and process quality (Ackerman, 2005). The structural aspects of quality relating to adult-child ratios, space, facilities etc. can by their nature be more easily identified and regulated than the more dynamic, process aspects of quality, such as interactions, relationships and behaviours.

So what impacts on those more elusive process aspects of quality?

A critical feature of any high quality early years care and learning programme is a knowledgeable and skilled staff (Sylva *et al.*, 2003; Fontaine *et al.*, 2006) and "*the professional development of teachers is related to the quality of early childhood programs, and program quality predicts developmental outcomes for children*" (National Research Council, 2001: 7).

The Continuing Professional Development (CPD) Programme

The CPD programme was developed by three large community ECCE providers who had identified a need to establish a cohesive focus, vision and framework within their services in order to further the development of quality.

In 2003 these providers decided to implement the High/Scope curriculum and educational approach in their services and the CPD programme began.

"Active learning - whether planned by adults or initiated by children - is the central element of the High/Scope Preschool Curriculum. Children learn through direct, hands-on experiences with people, objects, events, and ideas. Trained adults who understand child development and how to scaffold the important areas of learning in the preschool years offer guidance and support." (High/Scope, 2007)

The programme is based on the understanding that CPD implies *"expertise, pursuit of advanced training, and maintenance of currency in an evolving knowledge base"* (Helterbran and Fennimore, 2004: 268). It aims to create a professional community of practice where practitioners construct their own knowledge through enquiry and reflective practice. Wood and Bennett (2000) suggest that such communities can empower teachers to improve pedagogical practice.

The CPD programme began with a High/Scope Curriculum Implementation Course (CIC). Practitioners attended one full-day workshop a month where a particular aspect of the curriculum was explored. Epstein's (1993) study on inservice training found that for a CPD workshop to have a real impact on practice it needs to be based on a model of experiential learning with active participation, opportunities for sharing with colleagues and follow-up. The CIC workshops are built on this model. The CIC is viewed as a process not an event, and learning as socially and culturally constructed.

Throughout the course, practitioners are required to examine attitudes, perceptions and beliefs relating to their own practice with the aim of supporting them to become reflective about their practice. Reflective practice involves levels of critical thinking and the ability to judge ideas and evidence rather than unquestioningly accepting them. This asking of *"searching questions of the material with which they have engaged and of their own beliefs"* (Bourner, 2003: 269) was actively encouraged and supported through the processes of reflective journaling and constant group discussion. The course ends with a site visit during which the High/Scope Programme Quality Assessment (PQA) tool (High/Scope, 2003) is used to assess the level of implementation and quality of service provided.

Practitioners who had completed their CIC continued to meet as a cluster group up to six times a year to continue to explore aspects of the curriculum and their practice with their colleagues and the High/Scope trainer. These groups were regarded as Discourse Communities where practitioners could draw on the trainer as a resource, and through questioning, dialogue and discussion, develop shared ways of thinking about their practice.

Methodology and Data Collection

The environmental rating scale used in this study was the High/Scope PQA tool (High/Scope, 2003). In the PQA a broad array of programme characteristics are scored on a 5-point scale. This study used the first three sections of the baseline PQA, completed in autumn 2003 before the CPD programme began, and the end of course PQA's completed in autumn 2005. These sections cover Learning Environment, Daily Routine and Adult-Child Interaction and contain thirty-four items in all. These items are listed in the left-hand column of Table 1.

Table 1. Summary Of PQA Mean Scores Across All Three Services

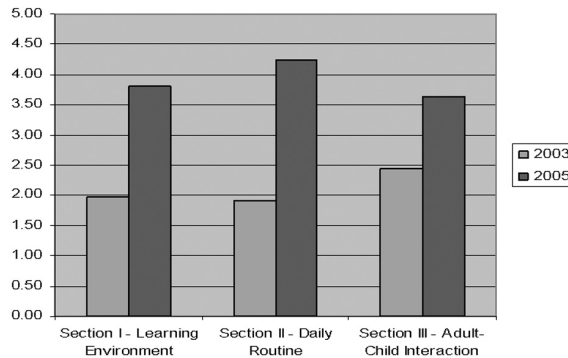
PQA Items	Maximum Score	Mean Scores 2003	Mean Scores 2005	Change
I. LEARNING ENVIRONMENT Section Score	45	17.67	34.33	16.66
A. Safe and healthy environment	5	2.67	5	2.33
B. Defined interest areas	5	1	4	3
C. Logically located interest areas	5	2	4.67	2.67
D. Outdoor space, equipment, and materials	5	2.67	3.33	0.63
E. Organisation and labelling of materials	5	1.67	3.67	2
F. Varied, manipulative, open-ended, and authentic materials	5	2.33	3.67	1.34
G. Plentiful materials	5	2.67	4.67	2
H. Diversity-related materials	5	1	3	2
I. Displays of child-initiated work	5	1.67	3	1.33
Average Learning Environment Item Score		1.96	3.81	1.85
II. DAILY ROUTINE Section Score	55	23	53	30
A. Consistent daily routine	5	2	4.33	2.33
B. Parts of the day	5	3.33	4.67	1.34
C. An appropriate amount of time for each part of the day	5	2.67	4.67	2
D. Time for child planning	5	1.33	4.33	3
E. Time for child-initiated activities	5	3	5	2
F. Time for child recall	5	1	4	3
G. Small-group time	5	1.67	5	3.33
H. Large-group time	5	1	4	3
I. Choices during transition time	5	1.33	4.33	3
J. Clean-up time with reasonable choices	5	2.67	3.67	1
K. Snack or meal time	5	1.67	5	3.33
L. Outside time	5	1.67	4	2.33
Average Daily Routine Item Score		1.91	4.42	2.51
III. ADULT-CHILD INTERACTION Section Score	60	29.33	43.67	14.34
A. Meeting basic physical needs	5	4.67	4.67	0
B. Handling separation from home	5	2.33	5	2.67
C. Warm and caring atmosphere	5	2.67	5	2.67
D. Support for child communication	5	2.67	3	0.33
E. Support for non-English speakers	5	N/A	N/A	N/A
F. Adults as partners in play	5	3	3.67	0.67
G. Encouragement of child initiatives	5	3	3.67	0.67
H. Support for child learning at group times	5	2	3	1
I. Opportunities for child exploration	5	2.33	3.67	1.34
J. Acknowledgement of child efforts	5	2	3	1
K. Encouragement for peer interaction	5	2.67	3.67	1
L. Independent problem solving	5	1.33	4	2.67
M. Conflict resolution	5	1	3	2
Average Adult-Child Interaction Item Score		2.44	3.64	1.2

This quantitative data was combined with qualitative data derived from a focus group interview. All 11 practitioners working in the preschool services, who had completed the CPD programme, were invited to take part and six participated. The interview style most fitting for this was semi-structured with emphasis on the practitioners' perceptions of the development of quality and their personal practice within the context of the CPD programme.

Results

An average score for each item, section and overall total, across all three preschool services, was determined from the 2003 baseline and the 2005 PQA observations. These scores and the differences between them are presented in Table 1.

The average score for each PQA item and section increased over time, indicating an increase in quality as measured by the PQA.

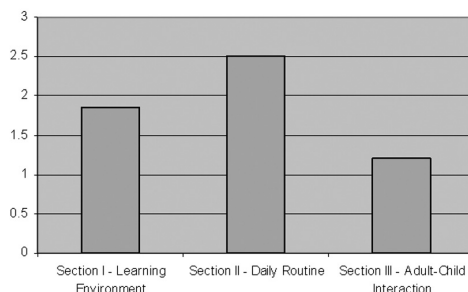


PQA Mean Scores

The learning environments are now divided into distinct interest/play areas and materials are arranged logically, grouped according to function and labelled to allow for the development of a find-use-return cycle.

The services now have a publicly stated, consistent, predictable yet flexible daily routine, planned by the practitioners. These routines are structured to meet the needs of the children and allow for opportunities to engage in different social groupings and activities every day.

PQA Mean Score Change 2003 - 2005



Although Adult-Child Interaction showed the lowest increase over time, the Practitioners perceived the CPD programme as impacting most on these process aspects of quality;

"The children now have a full conversation. I'd say that's the most impact it's had, it's not you talking down to them....now it's a full conversation about what's going on, there's a lot more talking, involving everybody."

Practitioners' Reflections on the CPD Programme

Practitioners' evaluation of the effectiveness of the CPD programme ethos and structure was very positive. They specifically identified sharing and discussion with peers as central to the learning process and the site visits were described as positive, affirming experiences. This sense of progression and continuous development was bolstered by the practitioners' participation in the cluster group training. They reported how collaboration and sharing within a group of colleagues from different services helped them to continue to develop their services.

Practitioners' Reflections on their Practice

Practitioners openly discussed the changes in how they viewed the children, describing a definite movement from a concept of the child as dependent and in need of protection to a view of the child as capable and competent. This new conceptualisation of the children has been accompanied by a dramatic change in how practitioners interact with the children and conceptualise their role.

They have moved from viewing themselves as controlling, directing custodians to supportive, facilitating, enabling partners and they now feel that their relationships with the children are more positive and balanced.

Practitioners' epistemological beliefs have also changed considerably. Epistemological belief can be defined as ranging on a continuum from "a dualistic view that knowledge is simple and certain" right through to a relativistic view that "knowledge is complex, tentative and uncertain" (Berthelsen *et al.*, 2002: 504). The practitioners have moved from a position of certainty about what and how each child should be learning at each stage of development to a more open reflective and relativistic approach.

Didactic and instructive methodologies were used prior to the CPD programme in order to 'teach' the children or 'promote' their development, relying on pre-planned activities selected by the practitioners. However, practitioners' re-conceptualised role in the children's learning and development means that they now work at levels determined by each individual child's stage of development and lead by their current strengths and interests.

"You're actually educating children but it's not in a formal structured way, it's not sitting with a blackboard saying today we are going toYou know they are constantly learning but with your support not with your direction, and it gives you a purpose."

Practitioners identified that the development in their practice is a result of reflection;

"I think what we did (CPD programme) gets you thinking...and even if I do something, or if I say something, I'm thinking, I'll actually reflect on it"

Discussion

Wood and Bennett (2000) state that in order for change to happen, practice must be viewed as problematic; the ECCE services in this study were not satisfied with the quality of their programmes and this was the impetus for change and the establishment of the CPD programme.

Implementing a validated curriculum has been shown to impact on service quality; "curriculum plays a key role in expanding the definition of quality to include process features" (CECDE, 2004: 109) and practitioners in this study clearly stated that the implementation of the High/Scope curriculum gave a framework and guidance to their practice which lead to an increase in confidence and feelings of competence in their practice.

The improvement in structural and process quality, as measured by the PQA, occurred gradually over the years. Structural aspects of quality show more marked increases than process aspects, but it is the process aspects of quality that engage the practitioners'

interest and focus. This would seem to indicate levels of professional self-awareness and reflective practice. Practitioners have found it challenging yet possible, in a short length of time, to effect positive change in the structural aspects of the quality of their service while acknowledging that the more dynamic or process focused aspects require more time, personal attention and reflection.

The programme is a transformative model of CPD incorporating award-bearing training, coaching and mentoring, communities of practice, collaborative learning and action research. Kennedy (2005) surmises that this model would increase the capacity for professional autonomy involving partnerships between practitioners and educators with a focus on 'enquiry'. The study illustrates the possibilities for professional development offered to practitioners when CPD places an emphasis on reflective practice which is ongoing, flexible, framed within a community of practice and linked to a common framework of shared aims.

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