

What is Quality?

Quality is a very individual concept and as such is difficult to define. Diverse perspectives of quality from the stakeholders involved, affected by their pedagogy, experiences, training, and personal viewpoints ensure that quality remains an ambiguous term encompassing many concepts (Cottle and Alexander, 2012; Howard *et al.*, 2018; Teach Early Years, 2024). The stakeholders would include parents, practitioners, policymakers, and the children themselves and this extensive collection of interested parties will also hold a range of different ideas on what constitutes quality (Cottle and Alexander, 2012; 2014). It is important to understand what aspects of early years care contribute towards high-quality provision so that children can be provided the best possible start in life (Welsh Government, 2023).

What influence does quality have?

Experiences in early childhood provide the direction for development and emotional growth and will provide strong foundations for life-long learning (Eadie *et al.*, 2022). Research shows that effective quality experiences will have an enduring positive influence on children's development (Leana, Applebaum, and Shevchuk, 2009; Cottle and Alexander, 2014; Siraj *et al.*, 2019). The Welsh Government 2013 document, Building a Brighter Future describes the importance of high-quality settings and states that these have a significant impact on children's development and in turn children's futures (Welsh Government, 2013).

A study conducted in 2004 (Sylva *et al.*, 2004) titled The EPPE Project – Effective Provision of Preschool Education discovered that the quality of settings did have a long-term effect on the academic outcomes of children and also found links between quality provision and improved self-regulation and better social communication. The findings from this report suggest that quality early years provision can enhance children's language, communication, and reading skills and can provide solid foundations for good academic futures. However, this poses more questions, for example, which aspects of early years settings are primarily responsible for enhancing the outcomes for children and which characteristics should be used to measure quality provision (Howard *et al.*, 2018; Gealy *et al.*, 2020).

Overall quality is measured by considering both process and structural aspects (Education Policy Institute, 2018; Eadie *et al.*, 2022). Children's learning and development will be directly impacted by process quality, whereas structural quality will influence the child's experience of process quality (Anders, 2015). To define this further, process aspects seek to capture the experiences of the child every day and assess what the environment feels like to the child. This would include the emotional, physical, and social aspects of the settings and the activities, experiences, and interactions available to the child. Structural aspects include the more regulated parts of early years settings including staff qualifications, ratios, and class sizes alongside the opportunity for professional development and the learning frameworks applied (Howard *et al.*, 2018; Eadie *et al.*, 2022; Welsh Government, 2023).

There has been a broad range of approaches towards improvement in each domain of quality worldwide and some of these improvements have included changes to national policies and regulatory frameworks and enhancements in educator training and enriched career pathways (Eadie *et al.*, 2022). Research has suggested that the quality of care is higher when practitioners have higher levels of formal education (Leana, Applebaum, and Shevchuk, 2009). However, a contradictory study (Early *et al.*, 2007) found no such correlation between the educational standard of practitioners and the quality of the classroom environment.

The REPEY report (Siraj-Blatchford *et al.*, 2002) stated that effective settings were settings that extended thinking and social skills where possible and placed great importance on child-led activities in addition to positive interactions with enabling adults who asked open-ended questions to enhance problem-solving and critical thinking (Welsh Government, 2023). This is referred to in practice as sustained shared thinking and is at the forefront of effective and quality pedagogy in current times (Howard *et al.*, 2018).

The importance of quality improvement and effective leadership is paramount. Quality improvement is a continuous process and should ensure that outcomes for all children are improved through high aspiration and effective pedagogy (Siraj *et al.*, 2019), that development and support are tailored to fit the unique child and involves parents and carers in the process, and that the foundations for well-being, future success, and lifelong learning are solid (Gealy *et al.*, 2020; Early Years Coalition,

2021; Welsh Government, 2023). Furthermore, no measure of quality should be taken in isolation, a high-quality setting will have a mixture of good staff interaction, fluency in sustained shared thinking, positive and enabling environments, and effective leadership which combined would ensure the high-quality provision and therefore positive outcomes for children (Welsh Government, 2023).

What is the Quality-of-Care Report and Self-Assessment of Service Statement?

The Quality-of-care review and Self-Assessment of service statement are a set of mandatory requirements for childcare providers in Wales set by the Welsh Government and used to evaluate the level of service provided to users and how this can be improved (Care Inspectorate Wales, 2016a; 2016b). These mandatory requirements are governed by the Care Inspectorate Wales. The quality-of-care review and Self Assessment of Service statement is completed annually and submitted to Care Inspectorate Wales for review (Care Inspectorate Wales, 2016a; 2016b). This forms part of the inspection and reregistration process that is completed every three years. The quality-of-care review falls under Standard 18 of the National Minimum Standards for Regulated Care for children up to the age of 12 years (Welsh Government, 2016).

The quality-of-care report motivates the setting to think about the quality of the service that it is providing to service users, how this can be improved upon, and what measures can be taken to achieve this (Care Inspectorate Wales, 2016a). Settings evaluate their service provision by collating data received by parents and other stakeholders and preparing a document that helps to analyse this data and highlight strengths and weaknesses in the service provided (Welsh Government, 2021).

Initially, the setting will design and produce a questionnaire, usually digitally, and ask stakeholders to complete this. This information will be collated and will provide data that can be translated to demonstrate the parts of the service that are functioning well or indeed not running as expected. Stakeholders are invited to make further comments on what they would like to see improved within the setting or on what they believe is exceptional. This information can be broken down and will demonstrate gaps in the service or issues that need further work. This report also fulfills the settings' legal duty under section 16 of the Child Minding and Daycare (Wales) Regulations 2010. Standard 18 of the National Minimum Standards (Welsh

Government, 2016), states that settings should have effective quality assurance measures in place and should ensure that these are efficiently monitored. The Quality-of-Care review is such a method of evaluation, and the Self-Assessment of Service Statement ensures that this document is regarded in an official capacity and overseen by the Care Inspectorate Wales (Care Inspectorate Wales, 2016b).

Although questionnaires allow settings to gather large amounts of data in a relatively short time (Lambert, 2019), Linberg *et al.*, (2019) state that measuring childcare quality by the use of questionnaires can be challenging as parents, children, and staff may be inaccurate or biased. In addition to this, young children may be unable to respond adequately to a questionnaire. Linberg *et al.*, (2019) suggest that external observations by professional organisations are a more reliable form of quality assurance. Furthermore, questionnaires can lack depth and can present challenges to those who may have language barriers as well as being notorious for low rates of completion (Lambert, 2019). Moreover, the anonymity provided to respondents to protect their privacy can also provide opportunities for non-completion, however by providing anonymity with the questionnaire, results can be considered more reliable, and simplifying the assessment process for children will allow them to understand and respond to the task and let their views be heard and valued (Lambert, 2019). The self-assessment process allows Care Inspectorate Wales to more efficiently monitor if settings are complying with regulations in between inspection dates. The quality of care review and self-assessment process allows settings to assess the level of service they are providing and to continuously reflect on current practice, and the tri-annual inspection process is a reliable method for ensuring that the quality service claimed is the same service provided (Welsh Government, 2021).

What is the Sustained Shared Thinking and Emotional Well-being (SSTEWS) Scale?

Sustained Shared Thinking refers to interactions that involve two or more individuals who work together to solve a problem, clarify a concept, evaluate an activity, or extend a narrative, and has been increasingly linked to positive child outcomes (Howard *et al.*, 2018; Siraj *et al.*, 2019). The main focus is to promote sustained shared thinking, emotional well-being, and positive relationships among children and adults (Siraj, Kingston, and Melhuish, 2015; Gealy *et al.*, 2020). All parties must

make a contribution towards the thinking and it must therefore develop, deepen, and extend the understanding (Siraj, Kingston, and Melhuish, 2015; Howard *et al.*, 2018). Sustained Shared Thinking is acknowledged in many early years frameworks across the world (Purdon, 2016) and the importance of well-being for children is supported by the Social Services and Wellbeing (Wales) Act 2014 (Welsh Government, 2014; Siraj *et al.*, 2019).

Sustained shared thinking is often poorly understood (Purdon, 2016; Howard *et al.*, 2018), and therefore to establish connections between research and practice the Sustained Shared Thinking and Emotional Wellbeing Scale (SSTEWS) was developed as a means of measuring good practice and assuring quality provision relating to key domains of development (Siraj, Kingston and Meluish, 2015; Siraj *et al.*, 2019). The SSTEWS scale was developed from the evidence base generated by the REPEY study (Siraj-Blatchford *et al.*, 2002).

The SSTEWS Scale supports the practice of sustained shared thinking and encourages practitioners to observe the child at play, to note actions as well as body language, and to communicate and interact with the child appropriately, extending and scaffolding learning (Siraj, Kingston, and Melhuish, 2015). This mirrors Vygotsky and his theory of the Zone of Proximal Development which describes the difference between the child's current abilities and their potential abilities when scaffolded by a more knowledgeable other (Vygotsky, 1978, cited in Smidt, 2009). The main focus of the SSTEWS scale is the emotional well-being of the child and demonstrates how communication and social skills and the development of positive relationships can be grown through the practice of sustained shared thinking (Siraj, Kingston, and Melhuish, 2015; Welsh Government, 2023).

The SSTEWS scale is part of the Curriculum and Intentional Quality Rating Scales and assesses quality across five developmental domains; Building trust; confidence and independence; social and emotional well-being; supporting and extending language and communication; supporting learning and critical thinking; and assessing learning and language. Assessment is undertaken using observations and graded using a seven-point scale (Siraj, Kingston, and Melhuish, 2015).

Furthermore, the SSTEWS Scale is grounded in current thinking and developmental theories and considers practices and pedagogies that encourage educators to

engage in affectionate interactions with children, practices that support and extend the child's critical thinking and concept development, and provide encouragement for learning. Likewise, the SSTEW Scale is also in line with the current curriculum and in particular the focus on wellbeing within the new curriculum for Wales (Welsh Government, 2022). In addition to this, the SSTEW Scale and the concept of sustained shared thinking take into account children's rights in line with the United Nations Convention of the Rights of Child (UNCRC), particularly Article 12; the right of the child to express their views, Article 13; the rights of the child on the freedom of expression and, article 14; the rights of the child on the freedom of thought (UNICEF, 1992; Welsh Government, 2019; 2023).

Of course, to be utilised properly it requires proper training and skilled and knowledgeable practitioners who can accurately assess and use the scale correctly (Melhuish, Siraj, and Kingston, 2015; Purdon, A, 2016). Purdon (2016), suggests that governments need to invest in high-quality training to ensure that practitioners have a deep understanding of what sustained shared thinking is and how to implement this fully in sessions.

Conclusion

Policy and practice changes required to continually drive quality improvement in the early years is a fluid process, reliant on consistently clear, and high-quality evidence from all the domains of quality. A deep understanding of the domains that drive quality forward is essential to improving outcomes for children as research shows that the most effective levers for change are quality interactions, effective pedagogy, and professional development (Eadie *et al.*, 2022).

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