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Exploring practitioners' views on the purpose of continuous professional development and the barriers to engagement

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A dissertation in part fulfilment of the requirements of the M.Ed. in Childhood Practice at The University of Glasgow

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Abstract

This dissertation is an exploration of practitioners' views on continuous professional development (CPD) and the barriers they encounter to effective engagement. The Scottish Government have presented their commitment and investment in children's early years, with many policies produced and aimed for the early learning and childcare (ELC) sector, to reduce inequalities and ensure children have the best start in life with lasting impacts on outcomes. The Scottish Government set out actions that supported their vision and asserted if children are to benefit from ELC, the provision needs to be of high quality with professional development of staff incremental to facilitate this. My intention was to explore practitioners' understandings of the purpose of CPD, through a questionnaire open to staff working with children in ELC and explore ways in which barriers to engagement were being encountered. I will be introducing the theoretical perspectives that underpin the argument for professionals to undertake CPD and show the intertwined connections between CPD, reflective practice and organisational culture. Drawing on the data gathered from the questionnaire, I argue that the opportunities and environments created for practitioners to participate in CPD and reflective practice, play a significant role in determining the effectiveness of any CPD undertaken, and in turn, affect the quality of provision and opportunities available for children to achieve their potential.

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List of Abbreviations

CfE Curriculum for Excellence

CPD Continuous professional development

ECEC Early childhood education and care

EE Equity and excellence leads

ELC Early learning and childcare

NICHD National Institute of Child Health and Human Development

OECD Organisation for Economic Co-operation and Development

PLS Plain language statement

QAA Quality Assurance Agency

SSSC Scottish Social Services Council

SCP Standard for Childhood Practice

RP Research participant

Chapter 1 – Introduction and rationale

The aim of this research project is to explore the perceptions early years practitioners hold about continuous professional development (CPD) and any barriers they experience using CPD to inform their practice. All Scottish early learning and childcare (ELC) workers are required to adhere to the behaviours and values set out in the expectations specified in the Scottish Social Services Council (SSSC) Codes of Practice (SSSC, 2020). These include taking responsibility for sustaining and enhancing their own learning and development to enrich their skills. A Rapid Evidence Review for NHS Health Scotland (Scobie and Scott, 2017) identified that while assessing quality in ELC was a complex matter, continuous development and training were fundamental elements for staff being equipped to provide high-quality care in ELC which resulted in improved outcomes for children.

The initial incentive for this research came from the conjunction of my job role as an ELC inspector involving scrutiny and improvement in the sector, and feedback from practitioners received during inspections. The impression gained from some, that learning and development opportunities and best practice document review, were not being used effectively to support improved outcomes for children. Sakr and Bonetti (2021) recognised that CPD was an essential aspect of early years workforce planning but identified there was still confusion around what constituted CPD and how this was supported in settings. This research intended to explore practitioners' understanding of CPD and how they felt it supported them in their job role, through the use of a questionnaire (see section 3.4) which invited participants to share their voices and concerns (Benner, 1994). There have been many studies that have identified changes in attitudes and beliefs following CPD (for example Wilde, 2005; Bolam and Weindling, 2006; Pedder, 2006), and studies that focused on knowledge improvement following CPD (such as Miller and Glover, 2007). By undertaking a thematic analysis (Braun and Clarke, 2006), subjective conclusions were drawn in this interpretive research (see section 3.3), to aim to understand practitioners' views on CPD and reflective practice to support new understanding or knowledge. It was intended this may allow identification of potential barriers in future scrutiny work to support positive outcomes for children and enable me to support settings to meet the identified aspects of the Rapid Evidence Review (Scobie and Scott, 2017) that states

if children are to benefit from ELC a high-quality workforce must provide it. My intention would be to share any relevant insights with colleagues working in the sector, to support the development of good practice towards CPD across Scotland, as I will have an insight into how I can support practitioners and managers to understand each other's intentions and potential barriers and use examples with practitioners of how CPD can support outcomes for children. For participants, there is potential for re-evaluating and reflecting on opportunities for CPD that might be available to them.

The next chapter will present a review of relevant literature, legislation, and documents related to areas of significance for this study. I will then go on to describe the methodology in Chapter 3; position my research within an appropriate paradigm; before discussing the methods used and illustrating ethical considerations. Chapter 4 is where I will present my analysis and interpretation of the qualitative data gathered, following an inductive thematic analysis (Braun and Clarke, 2006) where two themes were identified. The final Chapter (5) will provide an overview of the study; detail limitations considered; and summarise findings, before discussing implications and recommending areas for possible future research.

Chapter 2 – Literature review

2.1 Introduction

The aim of this research was to explore practitioners' views on the purpose of CPD and any barriers encountered towards engagement. This chapter presents a review of relevant documents, legislation, and literature, related to the field of study connected with this research. There is a plethora of documents and study related to ELC, so to ensure appropriate knowledge, key documents were reviewed to support the formation of focus areas. This allowed for a clearer interpretation of the research participants' intended perspectives and experiences (Burrell and Morgan, 1979) through data gathered from questionnaires (see section 3.4.1). I will now go on to discuss some of those initial reviews and documents assessed.

The Scottish Government (2017a) Blueprint was created to support the expansion of ELC (see section 2.5.2) and provided essential characteristics of quality, including a high-quality workforce and professional collaboration, and identified that CPD was 'an essential component of ELC quality and is linked to children's development' (ibid.:4). This was reinforced in Education Scotland's (2020) Realising the Ambition, and the Care Inspectorate's new Quality Framework for daycare of children, childminding and school-aged childcare (Care Inspectorate, 2022), that detail how care provided should be of high quality, with a number of researchers (Sosu and Ellis, 2014; Siraj and Kingston, 2015; Scobie and Scott, 2017) stating outcomes for children are maximised if care is provided from a high-quality service. The Care Inspectorate are Scotland's regulatory body of daycare services in Scotland. Their new Quality Framework (Care Inspectorate, 2022) has a quality indicator that assesses staff: 'Indicator 4.1 - staff skills, knowledge and values' (see appendix A). Examples of high quality for this indicator include: staff undertaking qualifications; engaging and reflecting on professional learning; maintaining registration requirements; and ensuring professional discussions are held regarding research, best practice and policy, to enhance outcomes for children.

Following these considerations, I begin by reviewing the registration requirements of working in ELC in Scotland and present the underpinning legislation. Some of the leading policies are then considered, based on both international evidence and local

policy contexts. This led to consideration of professionalisation in the sector which followed with an investigation of the role of reflection within the statute of a professional, having studied evidence from Craft and Paige-Smith (2011) who noted the vital purpose of reflective practice of all educators. The final area reviewed was culture within services to achieve the support required from the organisation and management and leadership, as Keay (2006) and Pedder (2006) acknowledged management and culture as important elements in respect of effective application of learning objectives in practice following CPD.

Prior to exploring these areas, I will firstly present a review of the term 'quality'.

2.2 Quality

The use of the term 'quality' derived from various studies including that carried out by the National Institute of Child Health and Human Development (NICHD) that explored progression of children being cared for in childcare provisions as opposed to receiving maternal care (NICHD, 2006). The study established the amount of time children spent in provisions was not the only factor determining the results, but the quality of care being provided was also significant. The overall quality of care being provided is now widely accepted as a strong influential factor on children's outcomes (Dowsett et al., 2008). Although defining the term quality continues to be challenged and studied (Krieg et al., 2015), most research has trusted a consensus as to what constitutes key elements of quality (Fenech, 2011), such as: staff qualifications; spaces and environments; and staff interactions with children. The Scottish Government's indication in the new National Standard (Scottish Government, 2018) of the expectation for services to maintain Care Inspectorate quality evaluations of good or better, can be taken as the level of expectation to provide some clarification over identifying relevant factors that determine quality.

The Care Inspectorate new quality framework (Care Inspectorate, 2022) offers descriptors of what will be assessed during an inspection, to create openness and transparency to what constitutes high quality care. The framework (ibid.) details exemplars of what constitutes as high-quality provision, therefore, to offer clarification for the purposes of this project, the researcher's ideological perspective

of what constitutes quality, is based on the expectations set out by the Care Inspectorate's quality framework (Care Inspectorate, 2022), mapped as key questions and quality indicators (see figure 2.1). Whilst one definition of quality cannot be provided, factors below are considered and assessed as to their 'potential to influence children's outcomes' (Scobie and Scott, 2017).

Key question 1: How good is our care, play and learning?	Key question 2: How good is our setting?	Key question 3: How good is our leadership?	Key question 4: How good is our staff team?					
1.1 Nurturing care and support	2.1 Quality of the setting for care, play and learning	 3.1 Quality assurance and improvement are led well 3.2 Leadership of play and learning 3.3 Leadership and management of staff and resources 	4.1 Staff skills, knowledge, and values					
1.2 Children are safe and protected1.3 Play and learning	2.2 Children experience high quality facilities		4.2 Staff recruitment*4.3 Staff deployment *					
1.4 Family engagement 1.5 Effective transitions			*4.2 & 4.3 do not apply to childminders who do not					
Key question 5: What is our overall capacity for improvement?								

Figure 2.1 Key questions and quality indicators from the Care Inspectorate Quality Framework (Care Inspectorate, 2022:9)

2.3 Registration requirements

To provide some context as to the regulatory requirements of those working in ELC and the adherence expected that comes with registration, I will detail the requirements for working in ELC in Scotland. Job roles in the social service sector, which includes people who work in ELC, requires registration and adherence to specified codes and standards of working, with either the Scottish Social Services Council (SSSC) (SSSC, 2020) or General Teaching Council Scotland (GTCS) (GTCS, 2012). The sixth code (SSSC, 2020) states as a registered worker, individuals will take responsibility for improving their skills and knowledge. There are also codes of practice employers of registered workers must follow that include having a culture and systems in place that supports workers to meet their Codes of Practice (ibid.). There are a variety of expectations, with one being to promote best

practice and support continuous improvement, inevitably therefore, the connection between the impact of the management and leadership of a setting, the culture, and the staff team completing the process of professional learning may overlap.

2.4 Legislation

To further present requirements of working in ELC, I will now highlight the legislation that underpins the regulatory body and expectations. The Regulation of Care (Scotland) Act 2001 saw the requirement to improve standards of care with more services and staff coming under scrutiny to regulate conformity to standards. The Public Services Reform (Scotland) Act 2010 introduced Social Care and Social Work Improvement Scotland (SCSWIS), later adopting the working name of The Care Inspectorate. This Act identified the purpose of the regulatory role of the Care Inspectorate was to review and evaluate services effectiveness and encourage improvement. The Scottish Ministers created further legislation to allow the exercise of the powers confirmed by the Public Services Reform (Scotland) Act 2010 and they underpin the new National Standard (Scottish Government, 2018) (discussed in section 2.5.2). The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), specifies staff should be suitably qualified and competent and that the provider of a service must ensure persons employed receive training and suitable assistance to obtain further qualifications appropriate. Principles are the third regulation of the legislation that specifies a provider of a care service must provide a service in a way which promotes quality. This brings the discussion back to reviewing and determining the understanding of quality. Many of the points covered in this literature review show the link between high-quality service provision as a resulting factor of high-quality staff.

2.5 Policy

UNESCO (2004) stated 'quality is at the heart of education' (ibid.:431) and identified the acceptance of this was reflected in policy agendas worldwide. I now aim to

demonstrate the connection between a strong governmental lead and an encouraged, skilled workforce to achieve quality, by reviewing international and Scottish policy.

2.5.1 OECD Starting Strong

The Organisation for Economic Co-operation and Development (OECD) launched a thematic review in 1998 with the aim of improving policy making in early childhood education and care (OECD, 2001). There had been international ministerial recognition of the importance of securing strong foundations in the early years in partnership with parents, to lay the foundations for lifelong learning. Two main crossnational trends appearing from the review that are relevant to this research, was the recognition of the requirement to raise the quality of provision, and the necessity to improve staff training and work conditions. Part of the theme related to raising the quality of provision however, was directly linked to concerns around the low status and training of staff. The review identified common training gaps with irregular opportunities to participate in training and professional development. Policy lessons from the review included a more participatory approach to quality assurance that included all stakeholders, however the report highlights the differing definitions of quality among stakeholders and across countries involved.

2.5.2 ELC Expansion

With the recognition of increased provision of funded ELC in Scotland improving outcomes for children (Scottish Government, 2017b), funded ELC entitlement was increased to 1140 hours per year, with an approach named Funding Follows the Child adopted, underpinned by a new National Standard (Scottish Government, 2018) to ensure children receiving this entitlement experienced an equitable level of high quality. There were several criteria within the new National Standard (ibid.) relevant to this research: to maintain Care Inspectorate quality evaluations of good or better; for all SSSC registered workers to achieve a minimum of 12 hours annual CPD; and for employers and/or managers to foster and promote capacity in their

staff and support them to fulfil their potential (Scottish Government, 2018). Part of the ELC expansion was to review the workforce and increase capacity, with recognition that 'delivering a high-quality early learning experience for children requires a dedicated, skilled and well-qualified workforce' (Scottish Government, online).

In response to Scotland's expansion policy, the ELC National Induction Resource (Scottish Government, 2019) was produced to support the increasing workforce and recognised initial training and CPD enabled staff to fulfil their potential and support children to do the same (ibid.). The resource promotes reflective practice by posing questions for discussion, which are linked to the common core essential characteristics (Scottish Government, 2012), developed to acknowledge the core skills, knowledge, and values required in individuals working in ELC in Scotland. Within the values and principles of the Common Core (ibid.), an essential characteristic is described as commitment 'to continuing individual learning and development and improvement of inter-professional practice' (ibid.:8). A further quote from the consultation in creating the common core, evidenced the Scottish Government's desired commitment from practitioners and impact of reflection:

It is important that the children's workforce is encouraged to be self-reflective in their practice and to continually consider the ways in which their own attitude and behaviour might impact on the individuals they work with (ibid.:11).

An increased understanding of the importance of providing high quality care to maximise children's opportunities led to the development and focus on professionalism and the standard and effectiveness of leaders required to achieve the desired status (Siraj and Kingston, 2015; Wingrave and McMahon, 2016; Education Scotland, 2018). This concurs with Mujis et al. (2004) and Rodd's (2006) research which associated high quality experiences and outcomes for children with high quality leadership. I will now go on to look at the aspect of professionalism in more detail.

2.6 Professionalisation

The recommendation from the OECD that early childhood education and care (ECEC) should be viewed as being a vital contributor to providing children with a good start in life (OECD, 2006), was reflected by the ambitions of the Scottish Government in the Early Years Framework (Scottish Government, 2008). The Scottish Government had joined the European policy focus to invest in the sector, to some extent by raising the professional status of provision managers and leaders (Honeyball, 2011). Policy changes and framework introductions related to ELC, contributed to Scotland's stance and commitment to increase the recognition of professional status, with contributory documents supporting this being the introduction of the Curriculum for Excellence (Education Scotland, online) and the Standard for Childhood Practice (SCP; Quality Assurance Agency (QAA), 2007). The introduction of the Curriculum implemented into education in 2010, saw a continuous 3-18 curriculum to incorporate early years. This inclusion of early years recognised the value of the sector which had traditionally been disdained in relation to contributing to children's educational development (Mooney and McCafferty, 2005).

The review conducted by Davis, (SSSC, 2014) showed the positive impact the qualification was having on manager's knowledge; leadership; and confidence to collaborate with other professionals to work together to achieve positive outcomes for children. It identified the sector workforce as starting to see themselves as skilled professionals and acknowledged the recommendations that followed the national review in 2006 (Scottish Executive, 2006), of achieving a degree level qualification for managers underpinned by the revised SCP (SSSC, 2016a) as a factor in this shift. There are benchmarks and expected features of the current Standards (SSSC, 2016a) which identify professional learning as a sign of value placed on their own role, and how managers should take ownership and responsibility for ensuring development of their staff through professional learning. The Standards look at reflection as a tool to continually improve practice describing manager's responsibilities to create a culture which enables and incorporates reflective practices to promote continuous development and learning. McGillivray (2008) claimed the rise of the professional status within ELC would allow for greater capacity for staff to reflect on their practice and share their learning with colleagues

to promote improvement (more will be discussed on reflection and sharing of practice in section 2.7).

The Rapid Evidence Review (NHS Health Scotland, 2017) related higher quality children's outcomes with higher levels of staff qualifications. In response, the Scottish Government created new staff positions known collectively as equity and excellence leads (EE). These staff would be degree level qualified and were brought in to support the ELC expansion, by ensuring children benefitted from attending settings with staff who had the knowledge and skills required to enable them to achieve high quality positive outcomes. The EE leads developed a theory of change in 2019 (Scottish Government, 2021) alongside strategic leads from individual local authorities, with the long-term goal of the role to create an enhanced culture of learning within ELC, which would also have a positive impact on closing the attainment gap (Sosu and Ellis, 2014). This reflects an expected feature from the revised SCP (SSSC, 2016a), which states that a manager/lead practitioner should work together with colleagues to establish a culture of continuous learning and development. Whilst this demonstrates an investment in managers and senior staff, the Scottish Government (2017a) Blueprint recognises practitioners as 'professionals' and asks for them to be 'equipped with the skills and resources they need to deliver the best possible outcomes for children' (ibid.:2). Davis et al. (2014) also addressed the collective approach required, as while they agreed with the investment needed for managers and leading staff, they identified there was a need to develop knowledge and practice across all levels of staff.

2.7 Engagement of reflection and learning communities

There has been suggested impact of reflection to support CPD and whilst reflection as a sole topic is too vast for the purposes of this review, the relevance of reflection to support effective CPD; high quality outcomes and association between that and professionalism to support the workforce was evident, therefore some literature was reviewed to support these topics.

Scotland's current national practice guidance, Realising the Ambition (Education Scotland, 2020), recognises that 'engaging in continuous reflection and self-

evaluation for improvement is vital to deliver high quality provision' (ibid.:86). McGillivray (2008) claimed reflection would validate good practice, whilst allowing improvements to be made by restructuring elements of practice informed by theory. Early years workers need to have support in place and a culture that supports autonomy to seek the identification of potential areas for improvement through reflection and moderation, which Buck (2016) suggests is 'at the heart of what really drives improvement and performance' (ibid.:102). The SCP (SSSC, 2016a) supports this by asserting the expectation of managers to create conditions that supports and encourages reflection to identify CPD needs which was found by Jensen and lannone's (2018) study that identified one crucial element of CPD was critical reflection, which has been found as essential to enrich practice as a result of CPD (Edwards et al., 2002; Reed and Canning, 2010; McLeod, 2011). The second crucial element of Jensen and lannone's (2018) study identified communities of practice as essential to enable effective CPD with supportive conditions, mutual respect and a team culture with shared values and vision (Cherrington and Thornton, 2015). Bennett (2012) also classed communities of practice as an effective element of high quality ELC and stated these were particularly beneficial to support children from disadvantaged backgrounds, a key policy focus of the current Scottish Government which Jensen and lannone (2018) classed as the third crucial element to effective CPD - to have an increased focus on policy that addresses social inequality. This was highlighted earlier in section 2.1 as an element of high quality by the Care Inspectorate (2022). Osgood (2011) identified members of a community of practice need to be highly trained and knowledgeable, which is agreed by Rankin and Brock (2011), however they lend their focus towards an organisations culture, particularly when looking at sustainability and effectiveness of a community of practice. McLeod (2015) argued in order to identify the starting point for critical reflection, practitioners need to develop open-mindedness and willingness to accept views which may contradict and question their own ideas, which again highlights the need for an embedded culture with staff having opportunities to come together to discuss aspects of their practice and be open to critical reflections, which resonates with Stoll's (2011) description of a community of practice as a collective of people critically analysing work undertaken by themselves and others to enhance effectiveness. Therefore, these arguments would suggest effective CPD would need to contain elements of reflection and collaboration with colleagues who share vision

and understanding of current Government policy drivers within an embedded supportive culture focussed on improvement (Rodd, 2015; Siraj and Kingston, 2015; SSSC, 2016a).

The next section will look further into culture and briefly examine the organisational leadership within a setting to support effective CPD.

2.8 Culture and organisational leadership to support CPD

A recurring theme identified whilst reviewing literature available on CPD, was the impact of a setting's culture, to promote and embed career long professional learning (Gilchrist, 2016). Studies by Arbour et al. (2016) and Whalen et al. (2016) indicated practice is influenced by the organisational climate and culture which is impacted by the leadership of settings. Leadership which promotes CPD and dedicates time to encourage staff to collaborate, supports improvement and in turn enhances outcomes for children. The Quality Framework (Care Inspectorate, 2022) key theme for staffing assesses the extent to which children benefit from staff that are well trained and competent and reviews how staff development and reflective practice is promoted. A quality illustration of very good practice states this level is evident when staff engage in CPD and maintain effective records of the impact of any new learning. Emphasis is placed on building effective professional relationships to promote improvement and development through reflective practice. The quality illustration (ibid.) identifies that performance needs to be constructively and critically reviewed with effective supervision to enable opportunities for accountability in individual roles. This shows the link required between reflective practice and an effective support structure and culture, to enable the time and opportunities for team collaboration and development. The view that reflective practice should progress to a collective approach is argued by theorists including Brookfield (1998) and Brown (2003), with Ghaye and Lillyman (2012) discussing 'reflective-conversational communities' are a key principle of reflective practice. This type of practice and 'community' development is an important element of effective teamwork which Barnett and O'Mahony (2006) suggest should form naturally as teams develop. Evolvement of teams and settings' cultures are driven from leadership that promote

and strengthen values-based practice (Peterson and Deal, 2002). Improvement is effectively achieved and more importantly holds sustainable change in settings whose culture predominates reflection (Barnett and O'Mahony,2006), therefore reflection and culture are intrinsically linked when reviewing effectiveness of CPD, as was evidenced in section 2.7, the significance of reflection on CPD. This supports Moyles et al. (2002) who found:

The ability of practitioners to articulate and reflect upon practice, appears to be related to their level of training and to an ethos within settings which positively promotes self-evaluation and reflection and adopts strategies for developing these (ibid.:13-14).

Baldwin and Ford, (1988) recognised the difficulties of new skills learned during formal training being transferred to the workplace with Van der Heijden et al. (2009) affirming that to embed new learning to positively impact practice, individual learners were required to modify their behaviours appropriately to understand their own actions that may be supporting or obstructing new learning being adopted. A culture of adapting is needed to support any new learning and managers need to support staff to develop and understand their own experiences. Collin et al. (2012) report 'leaders have to create a climate in which employees are allocated time, support each other in all kinds of daily tasks and are provided with ample opportunities for learning' (ibid.:158). This resonates with Garvin et al. (2008) who highlight effective employee development comes from having a workplace culture that supports staff to ask questions, try out new ideas and reflect on results. Mitchell and Cubey (2003) identified that outcomes following engagement with CPD were better when the experience and learning were specific to the needs of individual staff in a meaningful context. Peeters et al. (2014) identified mentoring support available during noncontact time was a feature of effective CPD. Their study highlighted how reflection of learning supported the successful implementation of new learning on practice, a key element identified in the Care Inspectorate's quality framework (Care Inspectorate, 2022). The connection between CPD and reflective practice being considered as essential elements of high-quality are shared by many, such as Bleach (2011) and Dahlberg et al. (1999). Therefore, how well a manager knows their staff and

understands their motivation factors (Herzberg et al., 1959), will impact on the outcome of the CPD on practice. Herzberg et al. (1959) argued motivation factors were critical to improve job satisfaction, however their study concluded there was no reliable measurement of satisfaction. The report by the OECD (2001) stated 'quality ECEC depends on strong staff training and fair working conditions across the sector' (ibid.:132). It can be very difficult however to precisely define and measure what 'fair' means for individuals, without understanding their own expectations based on their motivating factors and their previous experiences. Misener and Cox (2001) suggested that satisfaction in work was relative to individual employees and highly subjective, dependant on personal and professional perspectives. Herzberg (1966) argued motivation factors that could lead to job satisfaction, included those that fulfilled needs for growth and advancement. It could therefore be argued if an employee is looking for the possibility of growth, in a fast-changing sector steered by policy, a motivational factor which could lead to increased job satisfaction, would be the opportunity to seek advancement through CPD. Dexter et al. (2016) supported this concept in their study of meaningful work and mental health, as they advocated satisfaction was predicted by self-efficacy, working conditions and goal progress. The OECD (2022) report on education policy perspectives identified staff's on-going professional development and working conditions, shaped their interactions with children, thus, the overall quality of services. Enser and Enser (2021) noted the environment in which you work and the experiences offered within the workplace have a great impact on the desire and self-efficacy to make changes based on new learning. Staff need to feel empowered that new learning can be adopted into practice, and that opportunities to test new theories or practice are not contingent on external drivers.

2.9 Conclusion

This chapter has shown the importance of CPD on achieving maximised outcomes for children through high quality care and the suggested reliance reflective and collaborative practice, along with a setting's culture and leadership have on the effectiveness of CPD undertaken. Concluding here, managers need to empower, support, and trust staff to make positive changes in light of new learning in order for

staff to feel CPD is valued and can be used to make worthwhile changes and improvements to practice. This is echoed by Bove et al. (2018) who highlighted the effectiveness and impact of CPD is governed by interpretations influenced by social, cultural, and pedagogical aspects. Whilst the efficacy of CPD has been highlighted, CPD has also contributed to the focus on professionalism in a sector that has long been undervalued and considered less valuable than establishments providing compulsory education (Mujis et al., 2004; McGillivray, 2008) due to the level of education previously required to manage and lead settings providing noncompulsory care and learning (Wingrave, 2015) strengthening the importance and purpose of CPD.

The next chapter will investigate two main empirical paradigms and situate this research appropriately within those before identifying the methodologies used, followed by a discussion of the data collection and analysis methods.

Chapter 3 - Methodology and Methods

3.1 Introduction

In this chapter I will refer to two main empirical paradigms detailed by Rehman and Alharti (2016); position my research within the appropriate paradigm; and identify the influences of the methodological approaches taken. I will detail the methods used and present the reasoning behind those. Following Groundwater-Smith and Mockler's (2007) statement that 'ethicality cannot be divorced from quality in practitioner research' (ibid.:209), I will be including the ethical factors and choices made related to the research.

There is a considerable variety of research types, with different researchers holding their own opinions and beliefs about how research should be undertaken. The perception of the individual researcher and purpose of their work can account for differing views on how it should be carried out. Mukherji and Albon (2010:10) describe research as 'asking questions and seeking information to answer the questions that we pose'. The formulation of the questions that generates data for the research are therefore ultimately influenced by individual ideas and conceptions. Burrell and Morgan (1979) stated that researchers could be grouped together based on common perspectives in their work reflected by shared views. This commonality, described as a theoretical framework by Mackenzie and Knipe (2006), is a paradigm.

3.2 Paradigms

Willis (2007) stated the number of research paradigms varies, and each holds differing philosophical underpinnings. Weaver and Olson (2006) suggested these underpinnings drive the research, depending on how the question is situated. Guba and Lincoln (1994:107) defined paradigms as 'basic belief systems based on ontological, epistemological and methodological assumptions'. Therefore, to identify the paradigm in which the research would be situated, an appreciation and exploration of assumptions for the research were considered at an ontological and epistemological level, as proposed by Burrell and Morgan (1979). My axiological

position will also be identified following Guba and Lincoln's (2005) identification of this as a key component of consideration when identifying the paradigm.

As highlighted, whilst there are many paradigms, I will be discussing the philosophical underpinnings of two paradigms of empirical research. The positivist paradigm, which seeks to gain information and represents the belief there is only one reality, and the interpretivist paradigm which seeks to uncover new knowledge and understanding.

Within a positivist paradigm, an ontological perspective would be that there was one truth to be found and data could be analysed to discover or prove an area of research. This truth or discovery would be consistent irrespective of the respondents and the results would fundamentally be measurable. The ontology within the interpretivist paradigm is socially constructed. Outcomes of the research can be perceived autonomously dependant on the external forces. The results do not seek to uncover one truth and are therefore not generalisable, merely an understanding created and factored from an individual's frame of reference (Thompson, 1997). Epistemologically, the results derived from data in a positivist paradigm are not subjective and can be measured through observation of a highly generalisable understanding and accepted social reality, irrespective of the individual researcher. There is belief that there is an objective reality to be found (Hudson and Ozanne, 1988). Within an interpretative paradigm, individual perceptions and opinions support construction of new knowledge with the researcher making subjective assessments about the information received. The role of values and ethics which guide the research are the axiological assumptions. The researcher's previous experience and personal beliefs are separated from the research for it to be free of values within a positivist paradigm. Whereas within an interpretivist paradigm the researcher and their values have a direct effect on how the findings are summarised and any provisional conclusions drawn from them. Considering this structure, I will now describe the positioning of my research project.

3.3 Positioning my research

This project has been designed as a practitioner enquiry, as described by Campbell et al. (2004) to explore my own professional understanding through a small-scale investigation. Habermas (1972) recognised practitioner enquiry has supported a collective array of professional interests from explaining and gaining insight into problems, to understanding an issue within a wider societal context. McLaughlin et al. (2004) contends those who engage in research create opportunities to challenge assumptions and often embedded subconscious habits, by reflecting and reviewing their own practice. This could lead to a developed understanding and more mindful practice that could positively impact children's experiences (GTCS, online). The aim of this research was to improve practice rather than prove a belief or concept (Ford-Gilboe et al., 1995; Menter et al., 2011) with the intention being to directly use the findings to support my day-to-day work (Stenhouse, 1975). This research aimed to understand participant's previous experiences and their own feelings towards their roles and current reality, to comprehend the topic as it is understood from their own subjective experiences (Cohen et al., 2018). Ontologically seeking individual 'truths' (Lincoln et al., 2011) based on social constructions and independent experiences. I planned to be an active part in the research by drawing subjective conclusions, therefore epistemologically believed it possible to create knowledge by understanding and interpreting the participant's responses. My axiological position would be to fully value participant's perspectives and input and I would ethically present any conclusions honourably (further discussions of ethics are discussed in section 3.5). From these analyses of assumptions, the research is situated in an interpretative paradigm. As detailed by Benner (1994) the research aimed to evidence participant's voices, concerns and practices. An interpretive reality does not seek to search for universal laws, it is exploratory and looks to investigate the interpretations of subjects. The interpretative paradigm concentrates on understanding and interpreting the data, not on explaining the results established by predefined facts. As discussed, the philosophical underpinnings of the paradigm hold the foundations that drive the research, therefore, following Kuhn (1962) and Mukherji and Albon (2010) the methodological approach and in turn the methods adopted, are influenced by the paradigm. I will now go on to discuss the chosen research methods.

3.4 Methods

Following Aubrey et al. (2012), interpretive research tends to draw on qualitative methodology and associated methods, however Roberts-Holmes (2005) highlighted this is not a blanket approach. It was the expectation of this research that primary qualitative data would be gathered and evaluated (Ercikan and Roth, 2006). This would provide opportunities for participant's voices and views to be heard (Cole, 2006; Weaver and Olson, 2006) by sharing their experiences and more importantly their thoughts and perspectives (Sutton and Auston, 2015).

When identifying methods to adopt it was important to acknowledge the inherent imbalance between the researcher and the participants according to Raheim et al. (2016). The current role of the researcher as an ELC inspector, could have caused participants to provide responses they believed would resonate with the researcher if anonymity was not available. Creswell (2014) noted how information given by participants may not be accurate due to issues of power imbalance. It may become inevitably clear the researcher's views on the benefit of practitioner's engagement with best practice documents, however, in the position of researcher at the University of Glasgow, I accept and recognise my positionality as a practitioner-researcher and that of someone whose perspective has developed based on having viewed practice across a number of establishments. I have seen varying levels of quality practice and have been involved in supporting services to improve, based on research and best practice examples and it is likely this knowledge and insight would be used as part of the research (Winter, 1996; Heron, 1996). Considering this, critical reflection underpinned the work involved in this study (Taylor, 2011) to ensure transparent and honest accounts that reflected goodness throughout (Tobin and Begley, 2004). ('Goodness' will be discussed in section 3.5.3). Whilst there was acceptance that individual perspectives and emphases can change over time or across situations (Braun and Clarke, 2006), anonymous questionnaires were used to attempt to gather unbiased representative input from participants, as Menter et al. (2011) highlighted anonymity could encourage openness and honesty from participants. I will now discuss the questionnaire process in more details.

3.4.1 Questionnaires

The questionnaire aimed to explore practitioners' views on the importance of CPD, reflective practice and time honoured by management teams to undertake such opportunities. I will now review questionnaires as a method and discuss how the questionnaire for this research was derived and distributed. I will specify later in the chapter, further methods that were considered as part of the project.

Walliman (2001) identified great benefits to using questionnaires such as their adaptability and widespread capability, with Cohen et al. (2018) recognising advantages such as their validity, reliability, and low cost to formulate. There were many ethical considerations given during the questionnaire development, including the imposition on the participant's time to take part, and the potential intrusion of their privacy (Cohen et al., 2018). Dichotomous questions clarified acceptance to proceed and ensured ethical considerations were adhered to. Further details on the ethical considerations will be discussed later in the chapter. For now, I will focus on the development and distribution of the tool.

Consideration was initially given to the layout of the guestions. Muhkerji and Albon (2010) identified open questions can often give valuable information about ideas, values and feelings as they allow participants to take ownership of their responses. Simmons (2008) however, noted if too many questions require a lot of thought participants may not take the time to consider their answers to respond fully, with Champagne (2014) cautioning about burdening participants by asking them to rely on their recall. Accordingly, not all questions requested reflective accounts to support responses. Multiple choice options were available for participants, to identify and reflect on previous undertakings as the questionnaire was principally asking participants to consider their experiences with engagement in CPD and aimed to open their reflections to what experiences they could consider, to portray an appreciation of what activities could potentially be evoked. Mukherji and Albon (2010) detailed ranking questions as useful when seeking the participants views on the importance of individual elements of a particular concept or issue, however the objective here was not to place importance on particular types of CPD, but to prompt participants to encompass all activities that could be included in their reflections.

Therefore, rank ordering was not considered necessary for the multiple-choice selections (ibid.).

Following Malmqvist et al. (2019) the questionnaire was piloted to better inform the research and achieve greater confidence as a tool. The electronic access link was sent to a trusted former colleague who agreed to participate in the initial pilot, to review the questions, trial the estimated time given for completion, and ensure confidentiality in response. Some minor adaptations were suggested, considered, and effected small changes to question design and format. It was then sent to another former colleague who works in ELC who offered their support with trialling the questionnaire. Bassey (1999) highlighted that in research pursuing a depth of understanding rather than a distinct viewpoint, the requirement to use data gathering tools that are well tested increases confidence in the trustworthiness of the data gathered. Completing the pilot supported the validity of the research which will be discussed in more details later in the chapter.

3.4.2 Consideration of alternative methods and their validity

I initially planned to hold a group interview or focus group, with up to eight voluntary participants who would be given the option to register their interest to take part during completion of the questionnaire. Following Kerlinger (1970) and Cohen et al. (2018), an interview may have allowed opportunities for the researcher and participants to discuss their interpretation of the world to give context to their responses in the questionnaires. It could have allowed issues to be explored in greater depth which Hochschild (2009) noted cannot be done through written based forms of data collection, such as questionnaires. Dyer (1995) observed that interviews are more than an average discussion where people can exchange views, but they are aimed to be purposeful and informative. Mills (2001) spoke about the differentiation of power between the interviewer and participants, and it has been noted earlier in the chapter with Raheim et al. (2016) acknowledging the inherent imbalance with the role of the researcher as an inspector. Morrison (2013) suggested it may be beneficial to have another interviewer conduct the interview, however the format would have required to be structured leaving no opportunity to

consider and utilise prompts and probes which could have added richness and depth (Cohen et al., 2018). Following Robson (2002) the inability to overlook respondent bias, instigated the omission of the considered group interview from the research. There was added potential for participants to answer aspects of the questionnaire in a way they felt expected according to the terms of their registration as a professional worker, if they proposed to take part in the interview group (Creswell, 2014). Therefore, it was concluded the stand-alone anonymous questionnaire would give the most valid and reliable results.

3.4.3 Identifying potential participants

To gain a broad overview of experiences and understandings the questionnaire link was posted on two well used early years professional Facebook sites dedicated to people who are committed to sharing good practice. Microsoft forms were used to create the questionnaire due to the ability for participants to respond using almost any web browser or electronic device. Many people are accessing the internet via their smartphones (Evans and Mathur, 2018) and posting the link on Facebook meant the questionnaire was being distributed to an appropriate target audience. Submitted responses would be visible to the researcher instantly and the application offered built-in analytics to evaluate and export results to support the analysis of the data presented. Using electronic questionnaires allowed for responses to be received from a wide range of participants accumulating responses from a broad variety of settings (Bravery, 2002), to attempt to capture a representative view of the sector (Mukherji and Albon, 2010). The aim was to receive 50 completed questionnaires to enable an adequate breadth of responses to interpret. 72 responses were submitted, and the original Facebook post was deleted by the researcher once a thank you message had been posted which contained the researcher's contact details for any follow up questions regarding the research. Having outlined how I collected the data, the next section details the analysis of the data gathered from the submitted questionnaires.

3.4.4 Data analysis

The data produced was examined using thematic analysis which is described by Braun and Clarke (2006:79) as 'reporting patterns (themes) within data'. To identify themes, the data was initially coded as described by Saldana (2021:6) as 'a word or short phrase that symbolically assigns a summative, salient, essence-capturing, and/or evocative attribute for a portion of language-based or visual data'. Braun and Clarke's (2006) stepped approach was followed with the data presented being read repeatedly to allow encompassment of the data. To ensure interpretations of the data were comprehensive, the process of identifying codes was repeated to allow for any further areas of interest be acknowledged that arose from continued reading which allowed for clarifications of both interpretation and coding rational. This followed Braun and Clarke's (2006:86) proposal that 'engagement with the literature can enhance your analysis'. The codes were then combined into categories and finally incorporated into overarching themes. The approach and analysis were inductive, with the organisation of the data being open and categories created according to the responses (Elo and Kyngas, 2008), creating themes from the bottom up (Creswell and Creswell, 2018) rather than the deductive approach where data is reviewed for content to be coded against already identified categories (Polit and Beck, 2004).

While there has been considerable deliberation regarding suitable terms for assessing qualitative research validity, with suggestions of terms of reliability and trustworthiness (Koch and Harrington, 1998), Elo et al. (2014) discuss the commonly accepted measures for evaluating qualitative content are those developed by Lincoln and Guba (1985). The next section of the chapter will go on to discuss validity in greater detail.

3.4.5 Limitations on chosen methods and validity

As identified by Cohen et al. (2018:246), 'validity is the touchstone of all types of educational research', and whilst the strengths of the chosen methods have been highlighted throughout, there are limitations that should be acknowledged. It has

been identified the principal purpose of using questionnaires was to permit and certify anonymity, therefore following Cohen et al. (2018) there could be some concerns with the validity of responses as there was no way of checking the data submitted, with Mukherji and Albon (2010) drawing attention to participants providing socially acceptable responses. The participants who engaged with the questionnaire would be mindful of their professional responsibilities towards their involvement with CPD, therefore may subconsciously provide responses based on professional expectations, to present their responses in a more positive way by providing what they perceive as the 'right' answer (Menter et al., 2011). To ensure the questionnaires were dependable, open ended questions supported validity as any potential or perceived bias of the researcher would not steer responses.

A further limitation that was considered was the online Facebook groups used to request responses and completion of the questionnaire. It was recognised if participants were engaging with the group, their focus for following the page may be to develop their professional practice. The responses may be from participants who were keen to, and already actively engaging with CPD, therefore perhaps not capturing a true reflection of the sector status by seeking responses from people who already shared the high value and importance of CPD. However, Cohen et al. (2018) indicated if someone has no interest in the subject or it holds no importance, they are not likely to fully respond anyway.

By deciding to use only questionnaires to gather data, and as participants were anonymous, the amalgamated themes derived from the data analysis, were unable to be shared with participants prior to completing the interpretation of data. Hsieh and Shannon (2005) suggested to capture identifiable themes truly and fully, participants can be presented with themes and categories, which would also demonstrate the value placed on their contributions. Therefore, the duplication of coding discussed earlier in section 3.4.4, ensured for thorough reflections and considerations be drawn from the data presented. As noted by Murdoch et al. (2014), anonymous methods seem to encourage greater disclosure with higher levels of reflective accounts in the response based on the participants own 'truths'. The researcher's purpose was to gain a reportable account of participant's reflections (Maxwell, 1992), therefore the analysis was completed without bias and

conformed to the ethical considerations of the project. These factors will be represented in further details in the next section.

3.5 Ethics

3.5.1 Introduction

Ethical standards are constructed to protect participants, the researcher, and their associated institutions, as all activities that report data can generate ethical queries (Alderson and Morrow, 2020). Undertaking academic research at the University of Glasgow, required approval from the University's Ethics Committee. The process will be detailed later in this section, as will the recognition that ethics is more than conformity to guidelines, furthermore it relates to goodness (Tobin and Begley, 2004).

The guidelines posed by Groundwater-Smith and Mockler (2007) were observed during the completion of this research, as they proposed whilst compliance should be adhered to for protocols such as applying for ethical approval, ethicality is concerned with certifying quality. Supplementary criteria, over and above procedural protocols, such as research process transparency; collaboration; transformative intent; and purposeful value added to the community of practice, should be contained within ethical consideration (ibid.:205-206). I will now go on to provide a brief outline of the procedural conformity undertaken for this research and discuss measures taken to ensure the remaining guidelines described above were adhered to.

3.5.2 Procedural conformity

Approval from the University ethics committee was granted in advance of data collection commencement (University of Glasgow, online) and permission was requested from the administrators of the Facebook pages used for distribution of the questionnaire. Considerations were given to the participants being invited to take part which included recruitment and participatory rights to withdraw their

involvement, and the power dynamic inherent in the role of the researcher (discussed in section 3.4). The questionnaire was available for any participant to take part over the age of 16. While the Children and Young People (Scotland) Act 2014, includes all people up to the age of 18 as children and young people, the Age of Legal Capacity (Scotland) Act 1991 states from the age of 16, a person has full legal capacity to enter into any form of agreement. This made allowance for people aged 16 and 17 to participate in the questionnaire if they were employed in ELC, for example, as a modern apprentice, and allowed all staff the potential to be actively involved (Kirby, 2004). The questions asked for clarification that participants had read and understood the Plain Language Statement (PLS, appendix B) posted alongside the link to the questionnaire, which provided participants with a clear description of what their participation involved and what would happen to their responses. The PLS also detailed that following the link to contribute to the questionnaire acted as their written consent to progress and for their responses to be included in the research. Having evidenced that procedural requirements were adhered to, I will next demonstrate ethicality in terms of certifying quality.

3.5.3 Ethical quality

The recognition of the need to protect participants is encompassed by the criteria posed by Groundwater-Smith and Mockler (2007), to ensure observance for the inclusion of goodness for the entirety of the project, not merely the application and approval process and that ethics should be classed as a main overarching consideration to signify quality. Tobin and Begley's (2004) assertion that goodness should be encompassing with data presented honourably and that accounts presented of participant's responses are authentic, is supported by Arminio and Hultgren (2002) who discuss goodness as a required consideration of the planning approach to research; the data collection; and the interpretation of the data. Whilst the anonymity of the questionnaire did not allow for participants to validate their contributions, mitigations of this limitation were discussed in section 3.4.5.

The next chapter will go on to present and discuss the data and distinguish the themes and categories identified, which allowed the researcher to interpret the data

and generate ideas (Bazeley, 2009), which became the basis of the tentative conclusions that will be revealed in section 5.4.

Chapter 4 - Findings and discussion

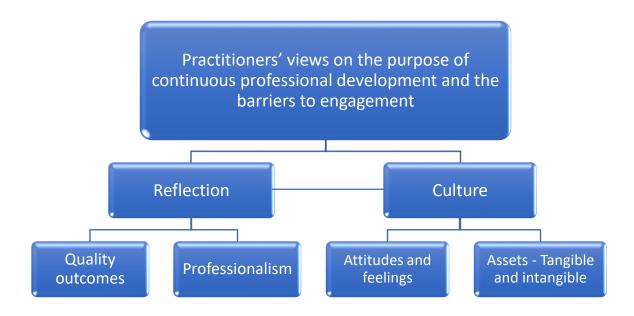


Figure 4.1 Thematic analysis of questionnaire data

4.1 Introduction

The purpose of this research project was to examine practitioners' perceptions on the purpose of CPD and understand any barriers encountered to engagement. This chapter will record the analysis and interpretation of the qualitative data gathered from anonymous questionnaires, which aimed to assess practitioners' perspectives on the purpose and value of CPD and the contribution made to their practice and children's outcomes. As detailed in section 3.3, this research is situated within an interpretative paradigm and the data presented will be critically analysed from perspectives drawn from the review of literature discussed in Chapter 2. Whilst coding and analysing the data, further reading was undertaken following the initial review of literature, to allow for clarification of interpretations and coding rationale, as suggested by Braun and Clarke (2006). This allowed for the research to follow an iterative approach and allow for the redefining of the categories and themes to reach its final interpretation as shown above (Figure 4.1).

The two overarching themes that were identified by the researcher were 'reflection' and 'culture' and these will be individually presented following a description of the questionnaire and information gathered about the participants.

4.2 Questionnaire layout

This section aims to describe the layout of the questionnaire and provide a breakdown of the working context of participants that responded. The first section in the questionnaire asked for acknowledgment of understanding of the project by confirming participants had read the PLS and that participants were over 16 years of age, (see section 3.5.2). Responses were received from 72 participants. The data gathered indicated the responses were received from staff across all levels within the sector, for example, managers, qualified practitioners, learning support practitioners and staff undertaking their qualification. The participants were from a range of provisions with 51 participants working in local authority settings. 10 participants worked in private settings, 8 worked in the voluntary sector with 3 responses declaring they worked in another setting not covered under these categories (see below Figure 4.2).

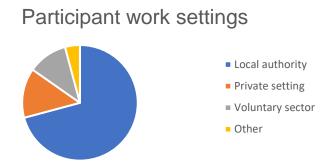


Figure 4.2 Participant work settings

Most responses were from participants who worked full time with 55 participants declaring their full-time work. (see below Figure 4.3).

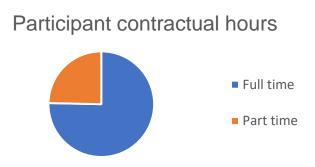


Figure 4.3 Participant contractual hours worked

The questions that followed ascertained participants wide-ranging and varied understanding of what constituted CPD and asked of those, which ones had they participated in over the previous 12 months. Within this section, questions were asked to gather information about how participants felt about CPD, for example, if they felt it was beneficial or a mandatory element of their work. The next section was designed to gain an understanding of how reflection was considered when undertaking CPD. The final set of questions grouped, asked participants to detail any barriers they had encountered to either undertaking CPD or using new knowledge gained from learning to effect change or improvement.

Participants' comments will be used throughout the chapter to highlight the analysis point made from the data. All participants were given a code which will be used as an anonymous identifier, signified by letters 'RP' (research participant). For example, a comment from participant one will be coded RP1. A table of full extracts of data used from the questionnaires can be found in appendix C and appendix D.

The identified themes will now be presented individually.

4.3 Reflection

This section focuses on 'reflection' - the first theme derived from the data. As detailed in the introduction of this chapter, following Braun and Clarke's (2006) stepped approach, the data presented was repeatedly analysed to ensure interpretations were comprehensive and further analysis was enhanced through additional engagement with literature. There was acknowledgment that reflective practice was an essential step in identifying any learning requirements to support improved outcomes for children as one participant summarised:

Reflections following CPD play an important role in raising the quality of practitioners' practice in hand ensuring better quality of provision to children and their families, which directly impacts children's development (RP55).

This resonated with classifications of reflections by Schon (1991) and Bleach (2014) who identified reflection as learning with the purpose to add value. There was recognition that CPD not only added value to practitioner's ability to support high quality care and improved outcomes for children, but an acceptance that reflective practice was part of being a professional, as one comment that offered a representative view stated they felt this was necessary 'to continue to develop as a professional' (RP13). These findings are in line with those from Ragland (2006) who recognised reflections contribute to personal developmental growth. They are also consistent with the expectations from the Codes of Practice (SSSC, 2020) that registered workers should adhere to that highlights the importance of reflecting on practice to identify continual improvement. Reflection was also described to be carried out to refresh old knowledge and revive practitioners' passion for their role, rather than seeking significant changes. One participant stated: 'ELC is always evolving we need to reflect this in our practice' (RP39). This is part of the commitment that Osgood (2011) used to define professionalism. Whilst there was indication that reflection was part of what contributed to effective CPD and therefore both high quality staff and outcomes, there was also an underlying element that the

requirement for reflective practice before, during or following CPD, was a barrier to the primary undertaking of any new learning. One participant responded stating 'we don't have the time it takes to change people and bring them on board to have them consider their own practice if not all staff attend training' (RP10). This view is consistent with previous research undertaken by Appleby and Andrews (2012) who recognised shifting instilled working ways and introducing reflective practice can be difficult. The impact of the working day following the implementation of the expansion in ELC also has an impact on time to collaborate and share any new learning undertaken by individuals. One response to the questionnaire stated, 'I feel with the 1140 expansion there is zero time within the working day to meet as a staff team to discuss development, initiatives etc' (RP61). The inability or time restraints affecting collaboration as a collective team, contradicts the expectations set out at a national level, as Scotland's current national practice guidance Realising the Ambition (Education Scotland, 2020) states that quality settings are developed when the workforce reflect on practice and collaborate with others, 'this includes taking time to visit other settings to share practice and moderate approaches' (ibid.:84).

I will now go on to present and examine two categories within the theme of reflection and highlight where theory was used to develop a greater comprehension of understanding of what was inferred through comments in the questionnaire following the iterative approach described in the chapter introduction.

4.3.1 Quality outcomes

When the category 'quality outcomes' was identified, further reading was undertaken to clarify for the purposes of the project, the characterisation and classification of the term 'quality' (see section 2.2). Due to my own professional experience as an ELC inspector, I held personal ideas of what constituted high quality which had been formed both from personal experience and had adapted and grown after being influenced by changed frameworks and best practice documents. Whilst most participants related CPD to directly achieve improved outcomes for children, some responses indicated a twofold process by suggesting inner investment and refreshment of their own skills enabled them to directly influence the outcomes for children. This resonates with the study conducted by Bove et al. (2018) who

concluded links between theory and practice were vital qualities to achieve for practitioners to refresh their skills and capabilities. It was those skills and capabilities that would be used to promote improved outcomes for children, based on up-to-date guidance, theories and best practice illustrations which resonates with a number of sources such as Realising the Ambition (Education Scotland, 2020) and the Blueprint (Scottish Government, 2017a). Some participants gave a broad overview to include all children's general outcomes by suggesting CPD ensures 'we are basing our practice on the most up to date research and therefore providing the best possible outcomes for children' (RP30). Some responses suggested CPD was used to benefit individual children's outcomes and meet their needs with responses including, 'I completed a course as I was looking for specific strategies to help one child' (RP19). Responses signified personal achievement and outcomes for the participants were an important result of CPD. There was a mixed sense of CPD being both undertaken for job security and stability as a requirement for their role, and for progression. There was a perceived inference that CPD was required to support the continual level of quality within early years settings, as the sector is fast paced and forever changing -

I have identified gaps of knowledge that I wanted to fill in order to be able to better support my colleagues but also to deliver a better-quality provision to children in my care (RP45).

The feeling of job satisfaction as a personal outcome to enable practitioners to undertake their role with confidence was construed as both a personal outcome to support their current practice, and to enable the ability to promote positive outcomes for children. When asked about the main purpose of CPD, one participant responded: 'Improve practice, more knowledge, enrich reflective practice and change the outcomes for children and their families' (RP71). There was recognition from participants that taking responsibility for their own learning contributed to the development of their service which directly resulted in the improvement in the quality of the provision being provided. CPD was typically seen as a key element and appreciation of sector standard with one participant saying they undertake CPD 'to stay current, up to date and knowledgeable about our ever-changing profession'

(RP26). Almost all participants suggested CPD resulted in positive outcomes with indication that for some, it was used to promote improved personal outcomes with intention of seeking alternative or promoted employment. Participants spoke of furthering themselves and increasing job prospects to achieve promoted posts, therefore there was some cross over between the two categories within the theme of quality, as some interpretations of the data reviewed regarding personal outcomes to support progression, overlapped with professionalism. I will now move on to look at professionalism as an independent category that emerged as an equal parallel with quality outcomes, within the overarching theme of reflection.

4.3.2 Professionalism

Whilst only 16 out of the 72 participants directly regarded themselves as professionals, most responses indirectly suggested they regarded themselves as professionals by undertaking CPD to support their practice. When asked why CPD was undertaken, one participant responded saying, 'I was keen to further my knowledge and understanding. I have completed a few courses and have started to put into practice skills I have developed from the courses' (RP2). This reflects the expectations of the standard for the ELC workforce which state that one principle of achieving professional positioning is for practitioners to take responsibility for their own personal development (SSSC, 2016a). Whilst Labaree (1997) highlighted credentialism as a generally accepted signifiable indicator of being classed as a professional, Eraut (1994) described professionalism as including accountability as well as qualifications, which highlights the need to have an awareness of practice standards and expectations. The identification and self-classification of professionalism came from all levels of participants of varying positions, for example, support workers, practitioners, and managers. The idea that personal development is required for all workers is in line with the findings from Davis et al. (2014:32) who reported the increased 'understanding that knowledge and practice has to be developed across all levels of staff'.

Whilst my general interpretation from responses was that CPD contributed to the professional status of the workforce which resulted in providing a quality service, an emergent factor was the idea that a quality staff team was required to undertake

effective CPD, not the idea that CPD alone generated quality staff. I concluded this was due to the fact a sense of willingness to learn and an appreciation of the benefits of CPD is held by staff who are already high-performing as they see the benefits CPD can achieve or support. This was evidenced by responses that indicated the effectiveness of CPD is dependent on the individual staff undertaking the learning - their personal characteristics and willingness to embrace new ways, rather than their qualifications. One participant's response which was a representative view stated: 'Some staff I have worked with undertake CPD but if they are set in their practice and closed to trying new approaches, the benefits of CPD cannot be reaped and participation does not affect change' (RP34). These findings are broadly in line with the Scottish Government's common core essential characteristics (Scottish Government, 2012), which identify the important characteristics that practitioners should hold to support them to build positive relationships and promote children's rights. Siraj and Kingston's (2015) review, detailed these elements as important skills and traits that practitioners should have to provide a high-quality service and facilitate positive outcomes. This ideology of professionalism stemming from personal attributes and devotion to the sector's purpose is supported by Osgood (2011) who described professionalism as being interlinked with emotional commitment and passion for the job. This is further endorsed by Wingrave and McMahon (2016) who argued the emergence of a new profession was developing which contained elements of personal skills and attributes, as well as professional qualifications.

4.4 Culture

There were two categories identified within the second overarching theme of culture, when participants were reflecting on their experiences. There were views related to individual personal attitudes and feelings on the purpose of CPD: the effectiveness of CPD, and the feeling of support within their service. There was also the idea of assets as a support or hindrance to their role, both tangible and intangible. I will now go on to present the analysis of the data reviewed. As discovered when reviewing the interpretations for the previous overarching theme, the two categories of attitudes and feelings, and assets, were often interdependent on each other.

4.4.1 Attitudes and feelings

It cannot go unmentioned that at the point of undertaking this research, the world has gone through economic and social disruption caused by the Covid-19 pandemic. The data was gathered in January 2022, almost two years into a global pandemic. The impact of this for some, has been truly devastating with changes and adaptations required from us all. Comments made in the questionnaire identify this, as one participant comment that represented a typical view stated, 'time this year has been challenging. We are all feeling the pressure Covid-19 has placed on us' (RP57). Additional comments included 'due to Covid-19, CPD has been limited due to many factors such as extra cleaning, working in bubbles, and lack of time and energy' (RP72). This sense of enervation is only one element of this category of attitudes and feelings, as many participants have shared some personal reflective realisations of why CPD has either not been engaged with or used to affect practice.

There was a strong sense of CPD being undertaken to fulfil the requirements set by the SSSC as part of practitioners' terms of registration (SSSC, 2020), discussed in section 2.3. Participants shared they felt CPD was often seen to satisfy procedural conditions, such as impending annual reviews or external scrutiny expectations, with one participant stating they saw the purpose of CPD as 'it ticks a box to make settings look good' (RP32), or to undertake mandatory annual refreshment courses such as health and safety or child protection. One comment which represented the view of many participants stated,

The 1140 expansion has made it increasingly difficult to meet as an entire staff team to discuss progress and learning from any CPD. This results in a tokenistic approach towards CPD just to meet mandatory expectations, where staff don't feel it is a high priority as it's not spoken about enough in order to embed and be implemented properly (RP61).

Whilst some participants acknowledged CPD that was directed from the management team was often to support areas in the improvement and development plans, there appeared to be a lack of understanding as to the perceived outcome of

the learning and development and a lack of shared vision of the longer-term plans, as one participant commented 'if there is a 'new' focus, CPD can be a box ticking exercise often with no regard to how real-life application can be implemented' (RP56). Mitchell and Cubey (2003) ascertained the need and benefit of learning being specific and meaningful to individual staff to fully reap the benefits and achieve measurable improved outcomes.

Recognition must be given to the difficulties some practitioners found introducing new learning, which caused negative attitudes and feelings towards the purpose and benefit of CPD. There was a high repetition of responses that suggested colleagues' unwillingness to change, caused frustration to those who were attempting to introduce new ideas or tests of change as a result of undercovering new knowledge and understanding, with one response stating 'staff who are set in their practice and closed to trying different approaches' (RP39) and 'not all colleagues were accepting of new ideas and reluctant or dismissive of my CPD learning' (RP57). These findings are consistent with the recurring theme that was identified when undertaking the literature review for Chapter 2, of the significance and impact of the culture in a setting to support CPD effectiveness, and resonates with Van der Heijden et al. (2009) whose study recognised a suitable culture of learning and adapting, led by a supportive and embracing management team, was necessary to embed new learning to positively affect change.

In restating the formerly mentioned interdependency of the main categories which formed the overarching theme of culture, the category of assets related to effective CPD will now be examined.

4.4.2 Assets – tangible and intangible

Although some participants shared their frustration of the impact of the pandemic on time available, as discussed in the previous section, different outcomes due to time restraints became apparent. There was the attitudes and feelings that time reduction caused for participants, but there was also the identification of time as a resource. This allowed me to generate a different understanding of time acting as a barrier and the culture within a setting to address this. Time was also indicative of the effect on

working conditions. The ELC expansion, detailed in section 2.5.2, has resulted in radical changes to some services working patterns – '1140 hours and shifts linked to these can make it difficult to let staff out for training, especially when there is no supply staff to cover' (RP28). The reduction in opportunities for uninterrupted collaborative discussions, previously available in the old model of childcare, in between children's morning and afternoon nursery sessions, has impacted on opportunities to take the time needed to communicate ideas and embed a shared pedagogy - 'having opportunities to discuss with all part time staff and embed a shared pedagogy can sometimes be difficult as this can be important to implementation to ensure consistency' (RP39). Responses indicated the time required to achieve a shared understanding and teamwork approach was seen as an impediment to both commitment and implementation of ideas generated from CPD, with one participant suggesting 'I think there should be greater time put on reflecting CPD to allow for consolidation and time to implement practice' (RP42), with another suggesting 'evaluation and reflection is not given enough consideration with regards to the time it takes to be effective' (RP59). Studies by Arbour et al. (2016) revealed the influence leaders in settings have on the organisational climate and culture supported by Jackson et al. (2015) who advised a workplace culture of shared values and learning that is outcome focussed is required. A focus needs to be on evaluating children's experiences and using appropriate leadership styles to achieve sustainable child centred approaches and team work to enable individualised care, support and understanding of approaches used.

Another element of this category was the newfound delivery of CPD using technology. The questionnaire responses indicated a change in CPD's delivery methods, with more opportunities to learn using technology, often by engaging with a learning opportunity at a convenient time to individual needs. This does counteract the need to be available for CPD during hours staff are required to provide care during nursery sessions, but also then encroaches on personal time, impacting their work life balance. One participant advised 'I have to do the majority of my CPD in my own time. I don't believe enough time is given by employers' (RP56). Cvenkel (2021) identified the impact of positive wellbeing and effective work life balance on productivity and performance therefore directly benefitting organisations. The use of technology itself was construed as a barrier as one participant summarised by

declaring 'I don't have confidence with technology and unfortunately the ongoing pandemic has resulted in lots of opportunities being cancelled or being delivered in a way that is less engaging' (RP2).

4.5 Conclusion

This study has provided an understanding and perspective of the importance some practitioners place on CPD. From the responses to the questionnaire, it is evident that practitioners value CPD as part of their professional role and the positive impact it can have on achieving quality outcomes for children. However, due to the negative mindset formed and directed from the constraints and barriers described, these can disable practitioners from being able to fulfil their roles and responsibilities. There does not appear to be a lack of commitment or desire to achieve high quality, however the responses have raised questions as to the importance of a shared pedagogy to embed new learning which stems from how practice is both underpinned and overarched by effective management and leadership. These will be further examined and described in the following chapter when detailing limitations, recommendations, and impact on practice.

Chapter 5 - Limitations, Implications and Recommendations

5.1 Introduction

In this final chapter, I will review the research and consider the limitations of this project as a small-scale study. I will highlight the implications for my own practice as well as the wider sector and draw tentative conclusions to summarise my findings, before making recommendations for possible future research avenues. I will now go on to provide an overview of the dissertation so far.

5.2 Overview

Throughout my career in ELC, I have been committed to CPD and have been encouraged by leaders I have worked with, to source learning opportunities that would both support my own personal development and contribute to the service improvement plan; further embed their values; or to support innovative or new practice that could potentially lead to improved outcomes for children. Whilst I have always known how fortunate I was to work with many colleagues who held similar values and recognised the importance of upskilling and refreshing knowledge, I have worked with others who have not embraced this mindset. When undertaking my current role as an ELC inspector, I became interested in the way in which practitioners felt CPD influenced high-quality provision. I also wanted to examine the barriers experienced towards engagement with CPD to allow me to support services to identify tensions or overcome issues, to reframe these as opportunities for change (O'Keefe and Ward, 2018).

The recognition from The Scottish Government (2017a) that CPD is 'an essential component of ELC quality and is linked to children's development' (ibid.:4), and the increased investment to support practitioners' development, for example the National Induction Resource (Scottish Government, 2019), offered acknowledgement towards the importance of engagement with CPD to enable and sustain high-quality care in ELC (Sosu and Ellis, 2014; Siraj and Kingston, 2015; Scobie and Scott, 2017).

Section 2.1 provided further examples of where the importance of CPD was being recognised in the ELC sector and introduced other factors that were important for effective CPD, such as reflective practice (with further investigations in engagement with reflection in section 2.7). Relevant background information was provided as to the registration and legislative requirements (sections 2.3 and 2.4) with key policies then being reviewed (section 2.5). The rise of the professional status of workers in the sector was highlighted in section 2.6, following the findings from Wingrave and McMahon (2016) of the sense from early years practitioners that their professional identities were being remodelled to meet the needs of new policy introduction and curricular frameworks (Scottish Government, 2008). With increased focus towards the importance of a setting's culture to support CPD, as found in the study conducted by Reeves et al. (2010), section 2.8 considered the impact of organisational culture and leadership to promote effective CPD.

Section 3.3 situated my practitioner enquiry within an interpretive paradigm (Lincoln et al., 2011) focussing on the views of practitioners as participants, as to how they understood the purpose of CPD and sought to understand any barriers they encountered with engagement of CPD. Chapter 3 discussed the guidelines followed that were posed by Groundwater-Smith and Mockler (2007) highlighting the purpose of the practitioner enquiry to understand participants' truths by taking a systematic and meticulous approach that conformed to ethical expectations. Following Holloway and Wheeler (2013) who stated that 'the ultimate goal for the researcher is to understand the reality of the participants, and not to make decisions about a specific issue or problem (ibid.: 127), a questionnaire was used to gain insight into participant's ideas, values and feelings, with careful consideration to the use and mix of questions, to allow participants to take ownership of their responses (Muhkerji and Albon, 2010). The prospective imbalance of power between the researcher and participants was recognised (Raheim et al., 2016) and the questionnaires were developed to provide anonymity in responses following Menter et al.'s (2011) recognition of this approach to encourage openness and honesty.

Before summarising the data gathering process and presenting tentative conclusions, the limitations of this study will now be considered.

5.3 Limitations

This study was intended to be small scale; therefore, the data cannot claim to be indicative of Scotland's workforce. The scope of this research was limited by the job role of the researcher as an ELC inspector and the potential power imbalance (Raheim et al., 2016) detailed in section 3.4, however an anonymous questionnaire was used to encourage participants to provide honest representations of their voices, to avoid receiving socially expected responses (Mukherji and Albon, 2010). Whilst some limitations of the project were highlighted in sections 3.4.2 and 3.4.5, so too were the mitigations to account for the limited scope and method of data collection. Had the data been received from identifiable participants, the initial interpretations could have been checked to clarify intended messages as suggested by Cohen et al. (2018). Additionally, the opportunity for a focus group or discussion could have provided extension to the data gathered and provided further depth to the research (Cochran-Smith and Donnell, 2006).

Another deliberation is again related to the role of the researcher and their 'insider knowledge' (Denscombe, 1998:63). Whilst it is important for any researcher to be engaged in the chosen subject field to interpret elements of importance to the study (Dudovskiy, online), there is the possibility this knowledge can create 'blind spots, obscuring a vision of the obvious' (Denscombe, 2010:91) due to conventionally accepted practice methods. The iterative approach taken (discussed in section 4.1) allowed for the monitoring of this knowledge to ensure a faithful reflection of participants voices were presented.

The findings from this study will now be discussed, followed by their implications.

5.4 Summary of findings

Upon gathering data though the questionnaire, an inductive thematic analysis process was undertaken (Braun and Clarke, 2006). A stepped approach was adopted (ibid.) (see section 3.4.4) to allow a comprehensive interpretation of individual responses from the questionnaire to be reflected as faithfully as possible,

before the data was coded; categorised; and grouped into two themes – reflection and culture. The findings from those themes will now be individually summarised.

Chapter 2 identified that CPD is 'an essential component of ELC quality and is linked to children's development' (Scottish Government, 2017a:4). My first finding shows practitioners recognise the contribution CPD makes towards providing quality provision, as participants acknowledged the significance of CPD to determine improved outcomes for both children, and individual efforts personally and professionally. There was a strong message in the literature review (Chapter 2) that CPD would support Scotland's workforce to provide the high-quality provision desired in ELC with the current national practice document highlighting that engagement with 'continuous reflection and self-evaluation for improvement is vital to deliver high quality provision' (Scottish Government, 2020:86). The second finding in my research appears to support this statement as reflective practice was seen as a vital element of achieving high quality outcomes through enhanced or refreshed practice following CPD, however my findings would suggest that whilst the importance is recognised, there is insufficient time and support in the sector to achieve the required shared approach that embraces change and offers purposeful collaboration to affect development. This resonated with Manley et al.'s (2009) study, which recognised time as a resource is a required enabler of achieving a work place culture of shared values and learning.

Other connections were identified within organisation culture and leadership that determined CPD effectiveness. The third finding from practitioners' responses allowed tentative conclusions to be drawn that showed effective engagement with CPD supported them to feel satisfied in their work as they could identify their practice was up to date and informed by theory, however felt less motivated to engage in CPD opportunities as the time required to share any learning or introduce and trial new practice was not available nor appreciated by some managers and colleagues. This highlights Barnett and O'Mahony's (2006) evidence that called for a culture that advocates reflection to support effective practice with practitioners in this research calling for supportive and embracing management teams, shown to be a necessary element to embed new learning to positively affect change, which was also identified in the study conducted by Van der Heijden et al. (2009). The fourth point I will summarise from the results of my research reflected the findings from Mitchell and

Cubey (2003) who identified learning should be specific and meaningful to individual staff as some participants suggested CPD was being undertaken to adhere to procedural conditions set by managers, rather than to promote development. This aspect and responses provided suggested whilst practitioners are willing to undertake CPD to enhance their knowledge, appropriate opportunities are not being made available to effectively engage practitioners' motivation and passion, which Herzberg et al. (1959) argued were critical factors managers should understand to support practitioners to effectively engage in CPD to inform practice.

The analysis and presentation of the findings of my research suggest the interconnected relationships between reflective practice, organisational culture and leadership, and the impact they have on effective CPD, influence the quality of the provision being offered, and in turn, children's outcomes. The implications of the points raised will now be discussed.

5.5 Implications

The goal of this small-scale study was to understand practitioners' views on CPD and the barriers they encountered to engagement. The findings suggest that whilst considerable investment has been made in the sector in recognition of the importance of the early years to children's development (OECD, 2006), and the rise of professionalism within the sector (McGillivray, 2008) to support higher quality outcomes for children (NHS Health Scotland, 2017), more needs to be done to support the practitioners involved in this research to engage in meaningful work practices that support the full cycle of practice involved in CPD. If the findings from this research are a representative view of the wider ELC workforce, more needs to be done to ensure the sector are getting it right for not only children, but for practitioners across the sector, by supporting sustained quality and innovative practice that is generated through CPD and based on up-to-date guidance, theory, and evidence.

5.5.1 Personal practice and practitioners

In line with Groundwater-Smith and Mockler (2007), to have 'quality of purpose' (ibid.:207), this research was carried out to develop my professional practice on a personal level. I have found the process of undertaking practitioner enquiry challenging as a novice researcher, whilst at the same time I have been able to take time to understand how my experience has informed my professional development, as critical reflection underpinned this research to ensure faithful accounts were reflected (Taylor, 2011). My interpretations from this research will be taken forward into my own scrutiny work and it is anticipated, whilst the practitioners cannot contribute to the effect participation has had on their own practice due to their anonymity, my future work will be discussed with other practitioners as I strive to share the voices of the anonymous participants, which may invoke reflective practice in others.

5.5.2 Continued commitment to professionalisation

Whilst the value of the sector has been recognised in relation to its contribution to children's educational development (Mooney and McCafferty, 2005) and the introduction of the degree-level qualification for managers signifying the importance of quality learning opportunities (Wingrave, 2015; Wingrave and McMahon, 2016; Stewart et al., 2017) more needs to be done to recognise and support all involved in the sector to achieve the expected levels of practice desired which is associated with the status of being a professional. Wingrave and McMahon's (2016) study highlighted the misrepresentation of the sector which had led to a misunderstanding of the prerequisites required to work in the sector from school career advisory services, as students from less academic backgrounds were still being encouraged to seek advancement within the field. It has been demonstrated the importance of adherence to the common core essential characteristics (Scottish Government, 2012), however working in the ELC sector requires more than common values to build relationships, a greater emphasis on a competent workforce who are committed to CPD to improve knowledge and contribute effectively to interprofessional practice is required. The sector needs continued support and

recognition of the professional status and requirements of working in ELC from those involved in encouraging practitioners into the field.

5.5.3 Leadership and culture

This research has highlighted the impact organisational culture and leadership within settings has on the effectiveness of both staff being motivated and inspired to undertake CPD, and the effectiveness of any CPD completed, which resonates with Moyles (2001) who stated, 'educational improvement depends on practitioners feeling they want to make a difference; upon them feeling empowered and professional' (ibid.:89). Sakr and Bonetti (2021) recognised that CPD is an essential aspect of early years workforce planning, while the SSSC (2016b) identified the need to build relationships across teams, to ensure everyone can feel valued to contribute to planned approaches to improvement. This feeling of worth from practitioners is required to enable managers to adhere to the requirements set out by the Standard for Childhood Practice (SCP) (SSSC, 2016a) that explicitly requires managers to develop a culture of collaboration and distributed leadership (Ebbeck and Waniganayake, 2003; Rodd, 2015; Siraj and Kingston, 2015). With the unprecedented rise in childcare places following the ELC expansion (Scottish Government, 2017a), leaders have had to build new teams and have often been overextended by taking on more tasks and responsibilities, whilst supporting their staff, children and families through a global pandemic. This research has highlighted the need for more time for practitioners to engage in reflective practice to consider and embed new learning following CPD to affect positive change, but there also must be consideration given moving forward as to the time taken by leaders to engage team members as partners, as Fullan (2005) argues downwards innovations is not an effective route to change. The commitment from leaders to understand staff's motivation factors (Herzberg et al., 1959) and work in true partnership with staff to seek opportunities that meets organisational and personal goals, can determine staff's commitment to their work and in turn, shape their interactions with children (Enser and Enser, 2021; OECD, 2022).

5.5.4 Policy commitment

The new National Standard (Scottish Government, 2018) calls for services to maintain Care Inspectorate grades of good, in order to deliver funded ELC, with CPD documented in the Care Inspectorate's quality framework (Care Inspectorate, 2022) as a fundamental element of very good practice, yet practitioners in this study have indicated there is not enough time or commitment to undertake all of the necessary elements that this research has highlighted, for effective CPD. This resonates with a call for an urgent discussion (Clark, 2022) among practitioners and policy makers, related to the relationship with time in ELC settings and high-quality practice, with time having a multi-faceted impact on outcomes for children.

5.6 Recommendations for possible areas of further study

Beginning my research career by carrying out this study, has given me foundational skills required to further extend my research capacity, and whilst a number of extensions could add further value to this small-scale study, as detailed in the limitations in section 5.3, I would be interested in carrying out more in-depth research into the impact of leadership styles and organisational culture, on staff's motivational desire to undertake effective CPD, for personal development, perhaps through doctoral study. Whilst there has been a plethora of research (Askew and Carnell, 1998; Fullan, 2002; Appleby and Andrews, 2012; Lukacs, 2015) to highlight the requirement of effective management of change being a prerequisite for an ELC leader, and how critical reflective practice must underpin this leadership ability, I would be interested in understanding how these skills and abilities are shared and encouraged throughout a setting, across all levels, to build the capacity within teams to develop a culture of collaboration and distributed leadership (Ebbeck and Waniganayake, 2003; Rodd, 2015; Siraj and Kingston, 2015).

A further recommendation is related to the ELC National Induction Resource (Scottish Government, 2019) which was developed to support the increased workforce following the ELC expansion and offered acknowledgement towards the importance of engagement with CPD to enable and sustain high-quality care, and I

would recommend research into the document's usage and effectiveness, to ensure the sector are supporting leaders of the future and building capacity within teams.

5.7 Conclusion

This study aimed to explore practitioners' views on CPD and understand any barriers they had to engagement of CPD. It has been mentioned throughout this study the job role of the researcher as an ELC inspector. As well as the responsibility to provide assurance and protection for children using services, a large part of the role is to work in partnership with services to support continuous improvement by providing advice, guidance and sharing specialist knowledge and expertise. It is concluded, whilst practitioners are committed to providing opportunities to support children to reach their potential, the lack of support and enablement to undertake CPD to stay abreast of current policy and research, is demotivating practitioners to practice in the way that is being described as that of high-quality. Leaders need to support staff as individuals so they can achieve the confidence needed to undertake their role and be given the opportunities to be the competent professionals they are. A review of support in place for staff to fully recognise their CPD needs and be given time to reflect and collaborate on new learning to impact change, is required to ensure the right people with the right skills and characteristics are recognised, valued and supported, to provide the high-quality care for children our government expects.

Appendix A – Extract of the Care Inspectorate's 'A quality framework for daycare of children, childminding, and school aged childcare' (Care Inspectorate, 2022:61-63)

Quality indicator 4.1: Staff skills, knowledge, and values

This includes the extent to which children's rights are respected and promoted through the following key areas:

- · staff support children's wellbeing through compassionate and responsive care
- effective feedback and support enable staff to develop and improve through reflective practice
- children and families benefit from staff that are well trained, competent, skilled and registered with the relevant professional body.

Descriptor

This indicator focuses on the ability of staff to build strong relationships with children and families. It highlights the importance of skilled interactions to promote children's confidence and to have a positive influence on their lives as they develop and learn. It looks at how staff development and reflective practice is promoted through feedback and support. Professional learning is well planned, reviewed and matched to identified needs and draws on local, national and international evidence and research.

It looks at how staff practice is underpinned by the United Nations Conventions on the Rights of the Child (UNCRC), the Health and Social Care Standards, and relevant codes of practice. This is used to foster a culture where children thrive and flourish.

A quality framework for daycare of children, childminding and school-aged childcare 61

Quality illustrations

Very good

Weak

Staff support children's wellbeing through compassionate and responsive care

Staff warmth, kindness and compassion enables children to feel valued, loved and secure. Staff recognise the importance of nurturing, warm, responsive attachments and interactions. Staff provide individualised support by effectively engaging with children and take account of their views and experiences. Effective team working fosters a warm atmosphere where staff are courteous and respectful. This enables staff to have time to support, speak and listen to children.

Interactions from staff lack compassion and do not fully support children's needs and interests. Staff do not always make themselves physically accessible to children for example, they do not consistently sit at a low level or are generally not close to children. Staff rarely initiate conversations with children. They sometimes respond negatively to children's verbal and nonverbal communication. The quality of working relationships between staff result in children sometimes not experiencing a warm atmosphere.

Effective feedback and support enable staff to develop and improve through reflective practice

Support and feedback are used constructively to build effective and professional relationships and is valued by staff. They receive and participate in regular support and supervision from skilled leaders which enables them to feel empowered.

Highly effective supervision provides an opportunity for staff to be clear on their responsibilities and accountable for their role. Staff reflect on and improve their practice which enables learning needs to be identified which is centred on improving outcomes for children. Performance is constructively reviewed, with effective support planned and evaluated.

Support and feedback is infrequent or not tailored to the needs of individual staff. Where staff require support to develop their skills and knowledge, this is not consistently identified and addressed. This means there are poor outcomes for children. Feedback does not always support staff to reflect on their practice and identify learning needs. There is poor professional knowledge and limited skills.

⁶² A quality framework for daycare of children, childminding and school-aged childcare

Quality illustrations

Very good

Weak

Children and families benefit from staff that are well trained, competent, skilled and registered with the relevant professional body

Staff have a clear understanding of how children develop and learn. They make very good use of professional development opportunities that link directly to enhanced outcomes for children, individual staff learning needs and the setting's improvement plan. Research, best practice, national and local policy, UNCRC and the Health and Social Care Standards are used in this process. There is a wide range of opportunities for staff to hold professional discussions and use these to inform practice. Staff reflect and implement their learning to improve practice and children receive high quality interactions and experiences.

There are limited opportunities for ongoing development for staff. Where learning needs are identified, these are not fully taken forward. This results in gaps in professional knowledge and skills which impacts negatively on the quality of children's experiences. There may be avoidable incidents or accidents that have the potential to put children at risk due to a limited understanding of childcare practice. Training and development opportunities have not improved outcomes for children.

Staff are aspirational and have an enabling attitude which supports children to achieve their potential. Staff use skilled questioning and interact in a sensitive, responsive and stimulating way to promote curiosity, independence and confidence. They recognise the importance of fun in children's play to enable learning to be taken forward.

Staff undertake qualifications relevant to their role and engage in continuous professional learning. They maintain effective records of the impact of their learning and development and have a clear learning action plan. Where required they maintain a registration with a professional body and follow the codes of practice.

Staff do not fully understand their responsibility to maintain professional registration. Where registration with professional bodies is required, this is incomplete or may have lapsed. They do not fully understand their responsibilities for continuous professional learning as detailed in the relevant codes of practice. They may not take sufficient account of the codes of practice in their work. The principles of the UNCRC and the Health and Social Care Standards do not underpin the practice of some staff.

A quality framework for daycare of children, childminding and school-aged childcare 63

(Care Inspectorate, 2022:61-63)

Appendix B – Plain Language Statement



Plain Language Statement

Researcher: (name removed to maintain anonymity for submission) xxxxxxxx@student.gla.ac.uk

Supervisor:

Ms Elizabeth Black elizabeth.black.2@glasgow.ac.uk

Degree Programme:

MEd in Childhood Practice

School / Subject area:

School of Education

Project title:

Exploring practitioners' views on the purpose of continuous professional development and the barriers to engagement

Invitation paragraph:

You are being invited to take part in a Masters research study. Before you decide to take part, it is important that you understand why the research is being done, what it will involve and your role, if you choose to participate. In order for you to gain a clear understanding of this research project, please take some time to read the following information carefully. Please do not hesitate to ask me questions before you make any decision regarding your participation. You can contact me, xxxxxx xxxxxxx, or my supervisor, Ms Elizabeth Black, via the contact details above.

What is the purpose of the study?

This study will be conducted for the purpose of my Master's dissertation. The focus of the study is to explore Early Years Practitioners' understanding and views about continuous professional development (CPD) and identifying any barriers to engagement in CPD. I intend to use a questionnaire to explore this with you.

Why have I been chosen?

You have been chosen to take part in this study because you work in an Early Years setting. Your involvement in this study will give you an opportunity to explore your views and contribute your opinions of the impact and accessibility of CPD in your setting. Please note there are no right or wrong answers. As a Care Inspectorate Inspector for Early Years, I hope this research will inform my professional development and practice as well as that of a wider community.

Do I have to take part?

Participation in the questionnaire is purely voluntary. You do not need to take part in this study and during the course of the research project you may withdraw at any time without giving a reason. Once you have clicked submit on your questionnaire, however, it will no longer be possible to withdraw your response, as the questionnaires are anonymous. Participation, non-participation or withdrawal from the research will not affect your position, or any future scrutiny work undertaken in your setting.

What will happen to me if I take part?

If you decide to participate in the study, you will be required to follow the link at the bottom of this document, to access the online questionnaire and submit your responses by Friday 11 February 2022 at 8pm.

The questionnaire will take approximately 15 minutes to complete.

Will my taking part in this study be kept confidential?

By completing and submitting the questionnaire, applicants will be agreeing to their contributions to be used in the research. Any data collected will be kept confidential and anything that can identify you will be removed from any writing arising from this project. You will be identified by a code. If, however, there is evidence of wrongdoing or potential harm is uncovered, I will be obliged to contact relevant statutory bodies/agencies.

Any data collected from the questionnaires will be kept in the researcher's property and any files stored on the computer will only be accessible using a password. At the end of the research period, December 2022, any files containing any data collected will be deleted.

What will happen to the results of the research study?

The results of the research study will be used in my submission for my MEd dissertation and may be used for a journal article or conferences. A summary of findings can be accessed through the online forums originally posted in.

What has reviewed the study?

The research study has been reviewed by the School of Education Ethics Forum.

Contact for further information

(name removed to maintain anonymity for submission) (researcher) <u>xxxxxxxx@student.gla.ac.uk</u> or

Elizabeth Black (supervisor) Elizabeth.black.2@glasgow.ac.uk

If you have any concerns regarding the conduct of the research project you may contact:

The School of Education ethics administrator: Education-ethics@glasgow.ac.uk

Please click the link below to access the questionnaire:

Experiences and understanding of CPD questionnaire

Appendix C – Extract of coding analysis: Reflection

Reflection							
Quality Outcomes		Professionalism					
Support for all	Individualised support	Personal growth and appreciation of sector standard	Collaborative working				
Ensure we are basing our practice on the most up to date research and therefore providing the best possible	Specific courses are only undertaken to support individual children with ASN (RP7)	To develop my own practice and contribute to the development of the setting (RP3)	Mentor other professionals in the setting (RP25)				
outcomes for children (RP30) Seek strategies to support all children (RP24)	I completed a course as I was looking for specific strategies to help one child (RP19)	To continue and improve on my professional development and knowledge (RP5)	Through manager supporting with professional development discussions in the team (RP50)				
I have identified gaps of knowledge that I wanted to fill in order to be able to better support my colleagues but also to deliver a better-quality provision to children in my care	I had little understanding of how to care for one child with ASN let alone support their learning and development (RP45)	To continue to develop as a professional (RP13) Updating professional knowledge and exploring new ideas (RP38)	The success of CPD depends on the quality of staff you employ – personal characteristics of individual members of the team, rather than specific qualifications (RP56)				
(RP45) Reflections following CPD play an important role in raising the quality	I have just completed advanced autism training to introduce specific guidance for individual children with ASN (RP66)	ELC is always evolving we need to reflect this in our practice (RP39)	To ensure our team keep evolving and are up to date with policies, legislation, and procedures (RP58)				
of practitioners' practice in hand ensuring better quality of provision to children and their families, which directly impacts children's development (RP55)		To stay current, up to date and knowledgeable about our everchanging profession (RP26) CPD helps me to further my	Some staff I have worked with undertake CPD but if they are set in their practice and closed to trying new approaches, the benefits of CPD cannot be reaped and participation				
My learning around quality environments with colleagues, ensured children can fully access		knowledge, learn new skills and develop as a practitioner (RP2) I wanted to undertake professional	does not affect change (RP34) Practitioners need to reflect on their own practice and work together as a				
learning experiences and practice		study (RP15)	team, to continue to be aware of				

skills, inquiries, investigation,	To main purpose of CPD is to develop	current best practice and new theory	
curiosity and creativity (RP57)	as a practitioner and learn new skills	that we can all adopt for a collective	
	(RP 70)	approach (RP44)	
Being reflective after learning helps			
to improve practice as well as	I wanted to enhance my knowledge		
improving the quality of children's	as I am looking to uptake a Team		
learning (RP72)	Leader post when available (RP26)		
Updated knowledge ensures you	I was keen to further my knowledge		
provide high quality and purposeful	and understanding. I have completed		
learning to young children (RP26)	a few courses and have started to put		
	into practice skills I have developed		
Ensuring we are basing out practice	from the courses (RP2)		
on the most up to date research and			
therefore providing the best possible	Bettering and reflecting on your		
outcomes for children (RP30)	practice (RP42)		
CPD helps provide better outcomes	You need to have awareness and		
for children and families through	understanding of various areas and		
improved expertise (RP20)	keep up to date with current thinking		
	to reflect on and improve current		
I like to support children's areas of	practice (RP50)		
interest and support children's			
learning by understanding any			
underlying issues (RP23)			
Improve practice, more knowledge,			
enrich reflective practice and change			
the outcomes for children and their			
families (RP71)			

Appendix D – Extract of coding analysis: Culture

Culture							
Attitudes and feelings			Assets – Tangible and intangible				
Staff resistant to change	Mandatory requirement	Enervation – we're spent!	Delivery methods	Time and staff cover			
It's difficult to ensure the whole team is on board (RP4) Not enough support from staff to implement change (RP12) Staff are not always on board with sharing my learning (RP30) My own confidence stops me (RP38) Staff who are set in their practice and closed to trying different approaches (RP39)	I feel management make most of the CPD decisions. Sometimes we will be informed about CPD opportunities that have become available through email and some CPD is mandatory, and we all must complete this (RP72) It ticks a box to make settings look good (RP32) If there is a 'new' focus in the setting, CPD can be a box ticking exercise often with no regard to how real-life application can be	Covid has impacted a lot. I have a wealth of knowledge and experience of working with parents, this is my passion. Being unable to do this has really frustrated me and stopped me seeking new avenues (RP73) Lockdown main barrier, lack of staff and staff burnout. These have all been barriers for my own CPD to help improve the practice of the setting (RP63) Time this year has been challenging. We are all	I don't have confidence with technology and unfortunately the ongoing pandemic has resulted in lots of opportunities being cancelled or being delivered in a way that is less engaging (RP2) Poor delivery of training or training not appropriate to the level of position (RP43) Cost of some courses is too high (RP23) Often costs associated with implementing new	Not enough time during operating hours (RP4) Not enough time to find a work life balance (RP13) 1140 hours and shifts linked to these can make it difficult to let staff out for training, especially when there is no supply available to cover (RP28) Having opportunities to discuss with all part time staff and embed a shared pedagogy can sometimes be difficult as this can be			
Not all colleagues were accepting of new ideas and reluctant or dismissive of my CPD learning (RP57) Staff can be difficult if they find change hard (RP32)	implemented (RP56) If annual reviews are impending and CPD is discussed, opportunities become available, but it's treated as box ticking by many headteachers (RP66)	feeling the pressure Covid- 19 has placed on us (RP57) Due to Covid-19, CPD has been limited due to many factors such as extra cleaning, working in bubbles, and lack of time and energy (RP72)	strategies are a barrier (RP33) Management don't have budgets for some thirdparty training seen online (RP25)	important to implementation to ensure consistency (RP39) I think there should be greater time put on reflecting CPD to allow for consolidation and time to implement practice (RP42)			

We don't have the time it takes to change people and bring them on board to have them consider their own practice if not all staff attend training (RP10)

It can be difficult to engage colleagues who do not actively engage in CPD to reflect on their practice and be motivated to make change (RP58) The only reason I undertook CPD this year was to cover my hours required by the council (RP11)

I was told by my manager CPD was required so picked something (RP14)

The 1140 expansion has made it increasingly difficult to meet as an entire staff team to discuss progress and learning from any CPD. This results in a tokenistic approach towards CPD just to meet mandatory expectations, where staff don't feel it is a high priority as it's not spoken about enough in order to embed and be implemented properly (RP61)

I have to do the majority of my CPD in my own time. I don't believe enough time is given by employers (RP56)

Evaluation and reflection is not given enough consideration with regards to the time it takes to be effective (RP59)

I feel with the 1140 expansion there is zero time within the working day to meet as a staff team to discuss developments, initiatives etc. This means you are relying on people's good grace to do extra and stay longer to be able to embed new learning and reflect and evaluate. This isn't a sustainable or long-term solution (RP61)

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