Disabled Children's Access to Childcare (DCATCH): Process evaluation of participation and workforce development activity in the DCATCH pilots

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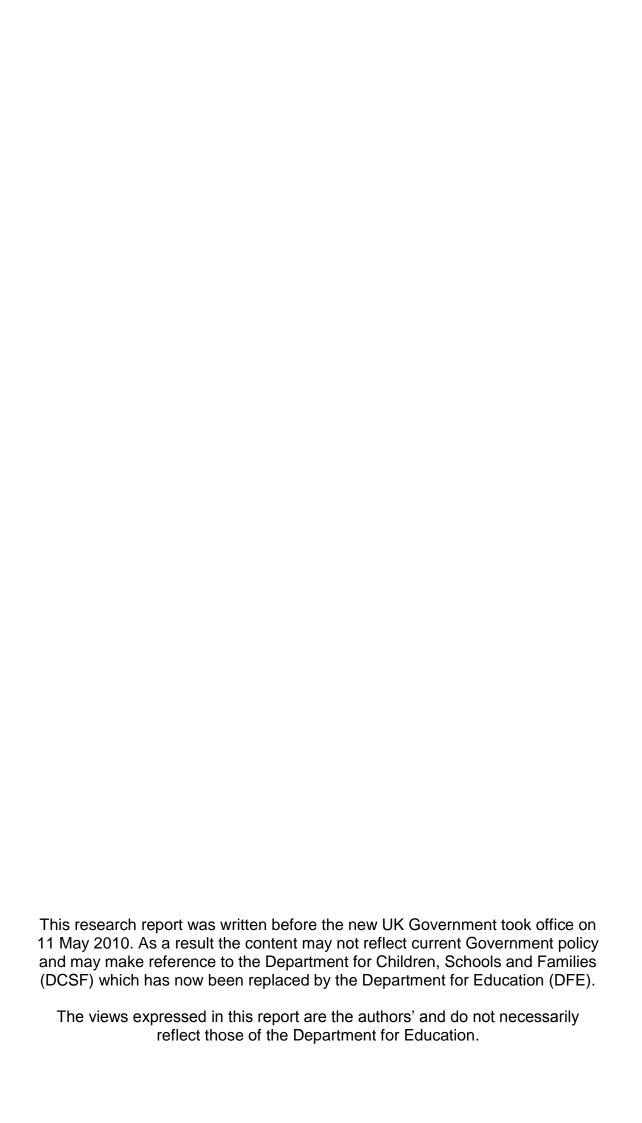Clare Blackburn[2] and David Abbot[3]

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1.1   Background

In May 2007 the Government launched the review *Aiming High for Disabled Children (AHDC): Better support for families* (HM Treasury/DfES 2007), with the intention to improve service provision for disabled children and their families, and enhance equality and opportunity for them. AHDC stressed the importance of appropriate childcare for disabled children and young people and acknowledged the lack of adequate provision to meet need. The *Disabled Children's Access to Childcare* (DCATCH) pilot is the specific AHDC initiative dedicated to developing childcare provision for this group of children and their families. The £35 million initiative running from March 2008 to March 2011 is funding ten local authorities to address the lack of adequate provision to meet the childcare needs of disabled children and their families, and reduce barriers to access. The focus of the pilots has been on improving the range and quality of childcare for families of disabled children, and involving families in shaping childcare services.

The National Centre for Social Research (NatCen) was commissioned in May 2009 to evaluate the DCATCH pilot in collaboration with the School of Health and Social Studies (SHSS) at the University of Warwick, and the Norah Fry Research Centre (NFRC) at the University of Bristol.

This report focuses on the findings of the process evaluation elements of that evaluation with the aim of enabling replication and adaptation of common and successful practice. It focuses on two themes; **parent participation**, and **workforce development**.

This report builds on findings emerging from the scoping study carried out in all ten DCATCH pilot areas in the summer of 2009. As well as exploring all DCATCH funded activity in the ten pilot areas, the scoping study identified areas in which good practice and innovative interventions were being undertaken for both participation and workforce development. Between November 2009 and March 2010 three types of intervention were explored in further detail for each of participation and workforce development, involving four local authorities. The methodology for the process evaluation included:

- 8 face to face interviews with 10 respondents (most were carried out individually; two interviews were carried out with two respondents). The interviews were carried out with professionals working for the local authority, parents employed or participating in activities, and staff in childcare settings. They focused on an exploration of the local authority context pre-DCATCH, the implementation of the intervention, anticipated and perceived outcomes of the intervention, and success factors and barriers to implementation.
- 3 focus groups, each with three or four respondents. Participants were parents involved in DCATCH-funded parent-participation activity, and in one instance this overlapped with a workforce development-related intervention. Again, the focus was on the nature of parent

involvement, anticipated and perceived outcomes of the intervention, and success factors and barriers to implementation.

- 3 telephone interviews with staff in childcare settings which had been in receipt of support around workforce development.
- 2 observations (one of a parent training session; one of a childcare provider event).

1.2 Findings: Participation

The process evaluation concentrated on three participation interventions:

Parent-trainers
This intervention is a parent training scheme, where parents of disabled children are employed to deliver training sessions on disability inclusion. Staff from childcare providers can attend the three-hour training session for free, but attendance is a requirement before applying for the authority's DCATCH-funded specialist equipment grant.

Parental input into the design and delivery of services
The second intervention explored is a parent reference group set up to oversee the implementation of DCATCH in one local authority. The group is comprised of four parents of disabled children who meet monthly with a participation worker and the DCATCH manager. The manager feeds back progress on the DCATCH pilot and parents' views are fed into the DCATCH steering group. Parent's participation is voluntary, although travel costs are covered and parents receive a £20 voucher after three months' involvement.

Parent Champions
The third and final participation intervention explored is a 'parent champion' scheme. The champion role is both to inform and support parents of disabled children, and to provide feedback to the local authority on parents' concerns. The parent champions organise and run parent events including 'meet and greet' lunches, open 'fun days' for families, and regular parent group meetings across the authority area (held in Children's Centres with free use of the crèche). As well as providing emotional support and practical advice and signposting for parents, the champions also feedback the views of parents to the children and young people's strategic board within the local authority.

All three of these interventions have in common an expectation that parent participation is intended to influence the design and delivery of DCATCH-funded activity, therefore improving services for families with disabled children. One (parent champions) is also intended to provide practical and emotional support to parents of disabled children living in the local authority. Although not an explicit intended outcome, most respondents in the study also reported a positive impact on parents directly involved in participation activity.

Challenges faced by the three local authorities include:

- Lack of strategic commitment to participation: While the emphasis on parent participation within the DCATCH pilot might be strong, this does not always reflect a strong culture of participation within the wider local authority.

- Poor data: Staff interviewed during both the scoping and process evaluation stages report difficulties reaching parents of disabled children, compounded by little or no availability of data on disabled children living in the local authority.

- Planning activities that fit with the often limited time and resources available to parents of disabled children.

- Providing emotional support to parents: The impact on participating parents can be negative and respondents were concerned that some forms of participation could be emotionally difficult.

Success factors identified in the development of participation in the three local authorities include:

- Effective management and facilitation: Respondents identified a number of aspects to good management. They include knowledge of local authority services for disabled children, experience in developing and delivering participation strategies, and experience in working with families of disabled children.

- Providing support and training for parents: In the three local authorities this included flexible employment arrangements; reimbursement of costs to parents who volunteer (including travel, childcare etc); emotional support for parents who may find some of the participation activities stressful; and training in the skills required to participate effectively.

- Professional 'buy-in': Parents interviewed during the process evaluation report being motivated to participate by the sense that practitioners and local authority officers involved are committed and value their input.

- An 'Aiming High effect': Both parents and professionals interviewed during the process evaluation report the perception that Aiming High for Disabled Children is different to previous (less successful) initiatives and that participation was more worthwhile.

- Working through the voluntary sector: Two of the participation interventions are delivered through the voluntary sector. This allows those authorities with little or no in-house experience in participation, or links with parent groups, to benefit from expert involvement.

1.3 Findings: Workforce development

Three interventions were examined in the process evaluation of workforce development:

Parent-trainers
This intervention is the same as that described in the participation section above, as it overlaps the two themes.

Inclusion quality standards scheme
The second workforce development intervention explored is an inclusion quality standards (IQS) toolkit designed for use in childcare settings looking after children over the age of five. Its aim is to encourage settings to develop a proactive approach to inclusion. Settings work through three modules, self-evaluating and improving inclusion practice, supported where necessary by one of the authority's play workers. On successful completion of the modules, settings are awarded with an 'Equality Kite Mark'.

DCATCH-employed community nurse and speech and language therapist
The third intervention involves a part time community nurse (0.4 FTE) and speech and language therapist (0.5 FTE) funded through DCATCH to provide support to childcare providers. The health professionals provide training to childcare provider staff to improve their capacity to support disabled children. As well as working in group childcare settings, both healthcare providers provide support to childminders working in the homes of families with disabled children.

Local authority staff interviewed during the scoping study and the process evaluation were optimistic that workforce development activity funded by DCATCH would lead to a sustainable change in provision (as opposed to funding additional support for individual children, which is likely to be withdrawn after the end of the pilot). All three initiatives described above are designed to develop childcare workers' ability to meet the specific needs of disabled children and their families. In one authority this is targeted through the development of specialist training for provider staff to meet the needs of children with complex health or communication difficulties. The parent-trainer and inclusion quality standard schemes are aimed at a more generic 'culture change' approach, actively encouraging settings to promote inclusion.

Challenges faced by the three local authorities include:
- Reaching childminders: In all three initiatives, DCATCH staff reported that reaching childminders had proved more difficult than those staff working in group childcare settings.
- Sustainability: While developing staff capacity is seen as a more sustainable intervention than, say, funding additional staff or support for families, DCATCH staff interviewed during the process evaluation expressed concern that post-funding some of these initiatives were not sustainable.
- Reaching all staff within the setting: While the training in the examples explored here is free, settings still have to find time to free staff to attend and there is no funding available

for staff to cover shifts while others are being trained. This has been a concern for settings in all three authorities.

Success factors identified in the three local authorities include:

- Reducing barriers to training: All three initiatives are designed to make the training and development on offer as accessible as possible. Measures include supplying it at no cost, and in short sessions.
- Providing incentives: Beyond reducing barriers, some authorities have introduced incentives for taking part.
- Providing continuity (repeated support from the same healthcare professional) and ongoing support, rather than one-off training events.
- Designing training with the target audience in mind.

2   Introduction

2.1   Background

In recent years the importance of childcare provision for disabled children of all ages and their parents has increasingly been recognised in research and policy. Affordable, high quality childcare is seen to be one means of facilitating their social inclusion and improving their lives (HM Treasury/DfES 2007), and yet take up is lower along disabled children[1]. Disabled children are included in the entitlements to childcare developed within the National Childcare Strategy but while they need access to the range of types of childcare provision available to their non-disabled peers, some may also require additional services tailored to their needs.

For many parents the lack of affordable childcare appropriate to meet their disabled children's needs, and a lack of suitably trained staff to deliver it, are significant barriers to taking up work or indeed, simply having time out from their caring responsibilities to attend to other important issues (Kagen *et al* 1998&9; Daycare Trust 2001&7; Contact a Family 2002; Audit Commission 2003; Russell 2003; National Audit Office 2004). Increasing parents' opportunities to work outside the home can boost household income and reduce the exclusionary experiences that are linked to family poverty. Having paid work is also associated with a reduction in the relatively high levels of mental distress reported by parents of disabled children (Lewis *et al* 1999; Sloper 1999; Emerson 2003). Families of children with complex care and support needs are recognised to have particular difficulties securing safe and appropriate care to meet their needs (Kirk and Glendinning 2004).

Day care is also seen to have a critical role in reducing disabled children's disadvantage and social exclusion by aiding their development and opening up opportunities for a wider range of social contacts and activities (Audit Commission 2003; Daycare Trust 2007; HM Treasury/DfES 2007).

In May 2007 the Government launched the review *Aiming High for Disabled Children (AHDC): Better support for families* (HM Treasury/DfES 2007), with the intention to improve service provision across the board for disabled children and their families, and enhance equality and opportunity for them. AHDC stressed the importance of appropriate childcare for disabled children and young people and acknowledged the lack of adequate provision to meet need. The *Disabled Children's Access to Childcare* (DCATCH) pilot is the specific AHDC initiative dedicated to developing childcare provision for this group of children and their families. The £35 million initiative running from March 2008 to March 2011 is funding ten local authorities to address the lack of adequate provision to meet the childcare needs of disabled children and their families, and reduce

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[1] Using data from the 2008 Childcare and Early Years Parents' Survey (unpublished), 42% of children with a disability, and 37% of children with a Special Educational Need had received formal care in the last week, compared to 46% of all children. Note that the definition of disability in the survey is very wide and includes a wide range of severity (hence once complex needs are taken into account, the gap is likely to be wider).

barriers to access. The focus of the pilots has been on improving the range and quality of childcare for families of disabled children, and involving families in shaping childcare services.

In December 2009 the Department for Children, Schools and Families (DCSF) announced that the DCATCH initiative would be rolled out to a wider group of local authorities in England from March 2010. Authorities will be funded up to £119,000 for 2010/11 to focus on one area of improvement or several from the following menu of options developed through the pilots, depending on local needs and priorities[2]:

- o Better data: estimating demand and monitoring take up
- o Participation and feedback: consulting with families
- o Improving information for families
- o Supporting families to make choices
- o Workforce development
- o Increasing capacity, inclusion and improving quality
- o Meeting particular childcare needs
- o Affordability and cost

It is planned that support for local authorities will be provided by "Together for Disabled Children" (TDC), part of the "Together for Children" partnership between Serco and 4Children formed to bring together national expertise in children's services and programme management. TDC is providing implementation support to each DCATCH pilot authority, as well as reporting to the Department on delivery progress and identifying, promoting and sharing good practice[3].

2.2   DCATCH evaluation design

The National Centre for Social Research (NatCen) was commissioned in May 2009 to evaluate the DCATCH pilot in collaboration with the School of Health and Social Studies (SHSS) at the University of Warwick, and the Norah Fry Research Centre (NFRC) at the University of Bristol. The key overarching aims of the evaluation are to:

- Provide robust information to assist the implementation of the projects in the pilot authorities, and the wider roll out of projects to other authorities.
- Evaluate the impact of these projects on disabled children and their families.
- Identify the most successful and cost effective projects.
- Identify key lessons for policy development on childcare provision for disabled children.

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[2] DCSF letter to local authorities in England announcing the rollout of the DATCH initiative. 7th Jan 2010 http://www.dcsf.gov.uk/everychildmatters/publications/documents/laenationalextensiondcatch
[3] http://www.togetherfdc.org

The evaluation design involves three key stages; a qualitative scoping study; a quantitative impact study, and a process evaluation. The detailed qualitative scoping study began in summer 2009 in order (a) to select programmes and interventions for further analysis and (b) to carry out detailed preparatory work to inform the design of the impact study. To measure the impact of DCATCH, NatCen are undertaking a quantitative survey of parents in DCATCH pilot authority areas. The precise design of the impact study is still in development at the time of writing this report.

The third key element of the DCATCH evaluation involves process evaluation work on five thematic areas of implementation. The impact and process elements will also be accompanied by a programme of qualitative research to explore acceptability of the programmes and interventions to the beneficiary groups as well as describing the impacts observed and a range of further impacts.

This report focuses on the findings of the process evaluation elements of the evaluation. The research design originally included process evaluation work on five interventions judged to be most promising from both the scoping and impact study. Subsequent discussions with the DCSF made clear their desire that areas for process evaluation should be thematic, rather than the five pilot areas judged most successful. We are therefore not conducting a process evaluation of any one intervention, but rather focusing on enabling replication and adaptation of common and successful practice under five themes. This report focuses on two of those five themes; parent participation, and workforce development.

2.3   Methods

Scoping Study
This report builds on findings emerging from the scoping study, therefore we briefly outline the methodology here.

The scoping study was carried out in summer 2009. It began with a review of policy and service documents in each pilot area, including childcare sufficiency assessments and childcare plans. The original applications for funding from each authority were made available, as well as current DCATCH project plans. Staff from each authority also provided local strategy and policy documentation of relevance to DCATCH.

In-depth face to face interviews were carried out with three key informants from the DCSF, and two from TDC. These interviews focused on the policy objectives informing AHDC and specifically DCATCH; the anticipated outcomes of the pilot; issues around implementation and key risks to success; and expectations of the evaluation. Telephone interviews were also carried out with the TDC advisor for each pilot authority.

Face to face interviews were also carried out with informants from each pilot authority. In some cases these were carried out as individual interviews with up to two staff; other authorities preferred

staff to be interviewed jointly and in some cases more than two members of staff were present. In total 15 interviews were carried out, involving 22 participants. These interviews focused on the antecedents to DCATCH; the intended outcomes of the pilot; the interventions funded by DCATCH and the rationale underpinning them including the mechanisms by which these interventions are intended to work; the intended beneficiaries and target groups for the interventions[4]; and success or otherwise of implementation to date.

Finally, four focus groups were carried out with user groups, three involving parents of disabled children, and one with disabled young people. These focus groups covered participants' experiences of using childcare; views on AHDC and DCATCH; the interventions being implemented by local authorities and their likely success; and evaluation design.

Process evaluation
The scoping study identified areas in which good practice and innovative interventions were being undertaken for both participation and workforce development. Criteria for the selection of themes for process evaluation were agreed with the DCSF in November 2009 and included:

a) The theme emerges in two or more authorities (identified through the scoping study work to date);
b) Lessons can be learnt with regard to barriers and facilitators of successful implementation; and
c) Early potential for roll-out or adaptation of the intervention.

The first two themes chosen for the process evaluation were workforce development, and parent participation (these appear as key areas of implementation in all ten DCATCH pilot areas, easily fulfilling criteria a) above). We selected local authority interventions within these themes that were sufficiently established to allow lessons to be learnt with regard to implementation that would be applicable to other local authorities seeking to initiate similar schemes.

For each theme, we planned that fieldwork for the process evaluation would build on the work carried out during the scoping stage of the evaluation and carry out a further five 'research encounters' (that is, an interview, a focus group, an observation session etc). In practice, more data was collected. The scoping study identified some promising and innovative practice within each theme which was developed enough to allow insight into barriers and facilitators of successful implementation (criteria b), and we agreed with the Department which authorities should be followed up in the process evaluation.

- 8 face to face interviews with 10 respondents (most were carried out individually; two interviews were carried out with two respondents). The interviews were carried out with

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[4] **Beneficiaries** of programmes are those supposed to benefit most from the programme (in most cases this will be disabled children and their parents).
Target group/s for the programme might be the beneficiaries, but might also include others such as workers or organisations (e.g. nurseries) in the case of capacity-building or structural interventions.

professionals working for the local authority, parents employed or participating in activities, and staff in childcare settings. They focused on an exploration of the local authority context pre-DCATCH, the implementation of the intervention, anticipated and perceived outcomes of the intervention, and success factors and barriers to implementation.

- 3 focus groups, each with three or four respondents. Participants were parents involved in DCATCH-funded parent-participation activity, and in one instance this overlapped with a workforce development-related intervention. Again, the focus was on the nature of parent involvement, anticipated and perceived outcomes of the intervention, and success factors and barriers to implementation.

- 3 telephone interviews with staff in childcare settings which had been in receipt of support around workforce development.

- 2 observations (one of a parent training session; one of a childcare provider event)

Table 1 below summarises the nature of the interventions explored, the theme under which the intervention falls, and the type of data collection carried out. Local authorities and respondents have been anonymised in this report. A summary of DCATCH activity in the ten pilot areas (named A-J) is available in Appendix 1.

Table 1: Summary of data collection

Local Authority	Summary of intervention	Process theme: Participation	Process theme: Workforce development	Fieldwork
'G'	Parent-trainers, training childcare providers in disability awareness	✓	✓	• Observation of parent training session • Face to face interview with training manager • Focus group with parent trainers (3 respondents)
'B'	Parental input into the design and delivery of services	✓		• Face to face interview with DCATCH manager • Face to face interview with participation manager • Focus group with parent-members of DCATCH steering group (3 respondents)
'B'	Inclusion quality standards and self-assessment toolkit		✓	• Face to face interview with DCATCH manager • Observation of provider feedback day • Telephone interview with play support worker • Telephone interview with childcare provider • Interview with 2 independent consultants commissioned to write and implement the toolkit
'J'	Parent Champions	✓		• Face to face interview with Parent Champion manager • Focus group with parent champions (4 respondents)
'F'	DCATCH-employed community nurse and speech and language therapist		✓	• Face to face interview with nurse and speech and language therapist • Face to face interview with parent and childminder in receipt of support • Face to face interview with nursery staff member • Telephone interview with Children's Centre Manager

All in-depth interviews and focus groups lasted approximately 90 minutes. Topic guides were developed for each theme, and varied depending on whether the respondent was a professional, or parent (they are included in Appendix 2). Telephone interviews were shorter at around 15-30 minutes, were transcribed and subject to thematic analysis using 'Framework', an Excel-based qualitative analysis tool developed at NatCen. This approach ensured that the analysis process and interpretations resulting from it were grounded in the data and tailored to the study objectives.

3   Summary of interventions across the 10 pilot authorities

The scoping study revealed that the nature of the interventions funded under DCATCH varies widely across the ten pilot areas, as do (to a lesser extent) the intended beneficiaries and anticipated outcomes. This reflects the varying context and 'starting point' in each area, particularly around the pre-DCATCH provision of childcare for disabled children. This is also reflected in the level of funding applied for and granted to each authority. A brief summary of activity in each area at the time of the scoping review is provided in Appendix 1.

Despite this variety, a number of common themes, or types of intervention, were identified through the scoping study and are summarised below:

Information and outreach
All the pilot authorities are working to raise awareness amongst disabled children and their families of the childcare available to them. Mechanisms include the production and dissemination of leaflets, and ensuring DCATCH information is available in relevant existing newsletters and websites. Information is more often parent-facing rather than child-facing. In addition some authorities are targeting local statutory and voluntary agencies likely to come into contact with target families, to improve the rate of referral to DCATCH-funded services. Common targets include health and social care services, voluntary and community-based organisations working with families, and employment/training providers or advisors.

The enhanced duties (since April 2008) on all local authorities to provide high quality, accurate and timely information and advice to parents on childcare and other services that they may need to support their children is most commonly delivered by the Family Information Service (FIS) in each authority. As a result they are a key partner in ensuring that parents of disabled children and young people are aware of the opportunities afforded by DCATCH.

Brokerage
Almost all pilots are working towards an improved brokerage service for childcare for disabled children, in most instances through the FIS, who assess the needs and circumstances of the child and the family, and broker suitable childcare from the range of available provision. In two pilots brokerage is managed by DCATCH staff outside FIS; in one instance through the DCATCH project manager, in the other through inclusion coordinators located in children's centres.

Integrated services

Several local authorities are using DCATCH funding to support greater inter-agency cooperation and integration of services. This ambition usually pre-dates DCATCH funding and reflects a wider piece of work being undertaken by local authorities, often under the AHDC strategy. DCATCH funding has been used to push this work forward, with the aim of preventing parents of disabled children having to 'navigate' through a wide and confusing range of entitlements, funding streams and provision. Integration is also intended to support more efficient use of resources, and sustainability of some DCATCH interventions once funding comes to an end.

Examples of strategies developed to support better integration of services include joint governance arrangements (across DCATCH and other initiatives targeted at disabled children and their families); developing multi-agency steering groups for the DCATCH pilot; developing joint working groups, pooling budgets, and joint commissioning arrangements with other initiatives. Commonly these other initiatives include AHDC-funded programmes (in particular Short Breaks) but are not restricted to these.

Additional provision

All pilot authorities are funding additional childcare provision for disabled children and young people, though the emphasis on this varies. Funding is supporting the set up of new after-school clubs, holiday provision, homecare services, and specialist childminders. It is also used to increase the capacity of existing providers to support disabled children, though funding one to one support workers or 'includers', Some have deliberately limited the amount of DCATCH funding spent on additional places because of the concern that these will not be sustainable post-pilot funding. The sustainability strategy for those authorities funding large amounts of additional provision is not always clear, although some project managers have voiced the hope that once impact is demonstrated, the local authority will continue to fund these places post-2011.

Data

Work to improve the quality and quantity of information held by local authorities on disabled children, their families, and the services they need is a key aspect of the national Aiming High for Disabled Children strategy. Understanding the demand for childcare for disabled children is severely impeded by the acknowledged lack of data held by local authorities on disabled children living in the area. Most pilot authorities acknowledge that their Disabled Children's Register (where they have one) does not capture information about more than a small proportion of the disabled children population.

Six pilot authorities are allocating a proportion of DCATCH funding to support better data collection. Authorities are working to better understand the characteristics of the population of disabled children in their area, both in terms of number but also need, in order to inform service planning. Most are attempting to assimilate data from a range of agencies (e.g. health, education, social care, voluntary sector partners etc) into a single database.

Research, evaluation, and audits

There are a number of research projects being carried out with DCATCH funding, using either existing research staff within the authority, funding (or part-funding) a new post, or commissioning an external consultant to undertake the work. Research topics include parental awareness of entitlements; the needs of parents and disabled children, and transport (provision, and costs). Three authorities are also undertaking research to better understand the unit costs of inclusion. Most pilot authorities are also undertaking local evaluations of DCATCH interventions

Support for parents to access employment and training

One of the aims of the DCATCH pilot is to reduce the barrier of a lack of suitable childcare preventing parents returning to (or remaining in) employment or training. A number of pilot authorities have interventions focused on supporting parents into employment and training. These can centre around advice to parents on welfare rights and childcare costs, access to employment, training and welfare support, and offering work placements and volunteering opportunities to give parents 'tasters' of work, in order to self-assess their capacity to manage employment and childcare responsibilities.

Two further themes, *Participation* and *Workforce Development,* were identified and are the main focus of this report.

4   Participation

4.1   Scoping study findings across the ten pilot areas

Participation is a key theme in Aiming High for Disabled Children, forming one element of the Core Offer published in May 2008. The Core Offer sets out standards for how disabled children and their families will be informed and involved as their needs are assessed and the necessary services are delivered. It covers information, transparency, assessment, participation, and feedback.[5] The Department for Children, Schools and Families allocated £5 million between 2008 -11 to support the development of parent and carer participation.

The scoping study found that examples of both participation and consultation are evident in all 10 areas, though we do not conflate the two; in some authorities consultation is in evidence but the participation of parents (and children) in the design and delivery of DCATCH interventions is less apparent. The range of participation and consultation activity identified during the scoping study is summarized below.

Parent, children and young people consultation
Almost every pilot authority has undertaken some form of consultation with parents of disabled children, either since receipt of DCATCH funding, or immediately prior to it. Most commonly this is carried out via a postal survey, although fun days and consultation events have also been held. Most authorities recognize that they are only reaching those parents of disabled children known to services or registered on the Disabled Children's Register. Consultation with children and young people is not common practice, although one authority did carry out work with children attending special schools, and with the disabled youth parliament. Two authorities have conducted qualitative research into the needs of parents of disabled children.

Parent and young people forums
These are groups of parents brought together regularly by the local authority to inform local strategy and policy around services for disabled children and young people. Often these pre-date DCATCH, but are used by the project as a key source of parental input. In some authorities, parents from these forums sit on DCATCH-related steering and working groups.

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[5] http://www.dcsf.gov.uk/everychildmatters/healthandwellbeing/ahdc/coreoffer/coreofferandni/

> *"We've commissioned a parents group to make sure there are parent reps on all our strategic groups [here]. There's someone on DCATCH, there's someone on Short Breaks, there's someone on the core, there's someone on the Strategic Disability group, there's someone on our transition group. If you look at the whole Aiming High agenda, we've now got parental representation right up to this very strategic level where they understand the mechanics of decision making in the local authority..."*
>
> DCATCH project lead

Parent and Children champions

A number of pilot authorities are developing 'parent champions', although the nature of this role varies, and it can be either a voluntary or a paid post. In most cases it involves outreach work, 'spreading the word' to other parents of disabled children and encouraging them to access the childcare offer. Those authorities where the role is more developed are involving parent champions in activities like training providers, advising other parents on benefits, facilitating parent participation events, as well as involvement in steering and working groups. In some cases the role itself is used as a mechanism for easing parents back into employment; this may be supported by the provision of accredited training. For example, one authority has developed a training course covering safeguarding, benefits advice, education, transition between settings, and professional conduct that is accredited by the Open College Network.

> *"I manage the volunteers… we're building a network of parents who have got children with disabilities who would like to actually contribute something…[]…they feel that they've gone on their journey and they can provide support for other parents."*
>
> Parent Champion

Children Champions are less common, though where they are being developed the role involves training, consultation and inspection (see below).

Parents, children and young people as trainers/auditors

Parents in three authorities are training childcare provider staff in inclusion. Parent trainers are often described as the 'ultimate experts', having more 'clout' with providers than other trainers might have. Again, the role may be paid or voluntary, although it is more common for parents to be paid for their time. One authority commissions a voluntary organisation to train and manage parent trainers. Another has developed a pool of parent 'Access Auditors' to both assess and provide support to providers.

> *"…we've got this level of expertise and when I walk into a nursery with my child and they say, 'I've got loads of experience working with autistic children' and then they try to take his hand…I think, 'well, not with my child you don't'…[]…we've got this huge experience and we understand the diversity of needs; let us do some of this."*
>
> DCATCH manager

Children and young people-led training is less common, although in one authority disability equality training is delivered in schools by disabled children and young people. Two authorities are currently

developing a team of young auditors, where disabled children and young people will carry out inspections of settings. This goes beyond physical accessibility to include wider aspects of suitability, including the attitudes of staff and the activities on offer.

Recruitment

In one authority, parents and children were on the recruitment panel for key DCATCH staff appointments. Parent and children panels are also used to assess providers' suitability for inclusion in an 'Approved Provider Framework' for commissioning services for disabled children and young people.

4.2 Description of interventions explored for the process evaluation

The process evaluation concentrated on three participation interventions in more detail. The scoping study identified these as developing promising and innovative practice which was developed enough to allow insight into barriers and facilitators of successful implementation.

4.2.1 Parent-trainers (Local Authority 'G')

The authority has commissioned a voluntary organisation, Families United Network (FUN) to run a parent training scheme. FUN was already running holiday clubs for families with disabled children in the area, and was running a parent participation network on behalf of the authority.

FUN worked with the Daycare Trust to develop disability inclusion training for childcare providers, and it was initially delivered by a joint team from both organisations. Parents were recruited through FUN's existing networks, trained through observing training sessions, then built up their involvement before delivering whole sessions unsupported. The parent trainers are paid for their work, and will undertake a City and Guilds accredited course in teaching in the lifelong learning sector.

Staff from childcare providers can attend the three-hour training session for free, but attendance is a requirement before applying for the authority's DCATCH-funded specialist equipment grant.

4.2.2 Parental input into the design and delivery of services (Local Authority B)

There are a number of examples of this across the pilot areas; the parent reference group described here has been set up to oversee the implementation of DCATCH.
The authority has commissioned Barnardo's to run the participation elements of their DCATCH-funded activity. Barnardo's employ two participation officers who work across DCATCH and Short Breaks, engaging with parents and developing parent participation across the authority. This work includes the development of an authority-wide 'parent forum', an annual parent and practitioner conference, and regular newsletters to parents. As well as the forum, Barnardo's also facilitate other opportunities for parental involvement, including sitting on grant panels for DCATCH-funded grants; involvement in the recruitment of staff, and delivering training to information officers within

the Family Information Service. The final year's activity funded under DCATCH will concentrate on supporting other agencies within and outside the local authority to develop parent participation. As part of this work, a small group of parents were involved in the recruitment of the DCATCH manager, who subsequently requested that they remain together as a parent reference group to advise on DCATCH. The group is comprised of four parents of disabled children who meet monthly with the participation worker and the DCATCH manager. The manager feeds back progress on the DCATCH pilot and parents' views are fed into the DCATCH steering group. Parent's participation is voluntary, although travel costs are covered and parents receive a £20 voucher after three months' involvement.

4.2.3 Parent Champions (Local Authority 'J')

Five parents are employed (part time), and eight volunteer, as Parent Champions. The authority began using the parent champion model under the Early Support Programme two years earlier (a national programme for families with disabled children under five and practitioners who work with them.) The parent champion model under Early Support was seen as a success in the local authority and hence the model was replicated in the application for DCATCH funding.

All parent champions in authority 'J' parents of disabled children, and it is this experience that qualifies them for the role. There is no formal training for the role, though informal and ongoing 'on the job' training is provided by the manager.

The champion role is both to inform and support parents of disabled children, and to provide feedback to the local authority on parents' concerns. The parent champions organise and run parent events including 'meet and greet' lunches, open 'fun days' for families, and regular parent group meetings across the authority area (held in children's centres with free use of the crèche). As well as providing emotional support and practical advice and signposting for parents, the champions also feedback the views of parents to the children and young people's strategic board within the local authority.

4.3   Intended outcomes

As a process evaluation, and one that has been carried out mid-way through the three year pilot, we are not commenting on actual outcomes or impact at this stage. This will be addressed by the impact evaluation running alongside this study and is due to report in 2011. However, while this aspect of the study focuses on understanding the implementation process and lessons and challenges along the way, we begin by further expanding on the *intended* outcomes of each intervention. We do this to provide a better understanding of the context for the interventions, that is, what they are intended to achieve or what problem they are trying to resolve. This said, if impact or outcomes are evidenced in some way by our research respondents, we do discuss them here.

All three of the interventions outlined in section 4.2 have in common an expectation that parent participation is intended to influence the design and delivery of DCATCH-funded activity, therefore

improving services for families with disabled children. There is also in each case a less explicit impact on those parents who participate. We outline below the specific aims under each of these areas.

4.3.1 DCATCH strategy and delivery

Both the parent champion group and the parent reference group have a specific remit to influence the local authority's DCATCH strategy on behalf of parents of disabled children. The parent champions have already fed back to the children and young people's strategy group about issues raised during parent events – these have included the need for information around summer holiday provision for disabled children to be provided earlier in the year (which has been acted on), and for better transitions support for disabled children moving from reception into year 1, which is being addressed by the Special Educational Needs Co-ordinators (SENCOs). The parent reference group have inputted into decisions such as the DCATCH budget allocation for funding year 3, and cost structure for an annual conference funded by the authority in order to make it more accessible to parents.

The participation structures are also intended to impact on how services are delivered to disabled children and their families. Parents training childcare staff in disability awareness are a clear example of this, with the intention of making provision more accessible to disabled children. Parent Champions are also working with other children's professionals to support their understanding of a child's disability on the wider family life. Parent feedback has indicated a concern that practitioners working in the authority do not always take into account the impact of disability on *all* aspects of family life and see one function of their role as encouraging better understanding of this:

> *"People are seeing maybe the bit at school and forgetting that actually you're living this life 24 hours, 7 days a week, and actually the, your child might always be escaping or something: you have to live with that. Everything that you do as a family, you have to take that into account."*
>
> Parent Champion

4.3.2 Disabled children and their families

The parent champion initiative is intended to provide emotional and social support to parents of disabled children, provided by the champions and also other parents attending the organised events. One parent champion was recruited after attending a meeting and describes the role as follows:

> *"…to be somewhere for people, and to provide as much as we can, but also to bring people through, and build confidence for parents and make people feel that they're not alone… because it is a battle at times."*
>
> Parent Champion

Parent champions also provide information and signposting to services, and encourage families to share advice on childcare options. The provision of a free crèche at events has encouraged some

families to use childcare for the first time and is hoped that this will be a first step into more frequent use of formal childcare provision.

Supporting other parents and preventing them 'going through what I went through' was raised by all the parent respondents interviewed in the during the process evaluation as a key motivator for getting involved.

> *"I couldn't believe, as a parent, having no knowledge of any disability before [my child] came along, and just being chucked in at the deep end and absolutely swimming for your life. It's like, it's like never having swum in your life and someone just dropping you in the middle of the ocean, and I just didn't want that for other parents, and I just want them to be able to access and to do what we couldn't do."*
>
> Parent trainer

4.3.3 Participating parents

Many of the professionals interviewed during the process evaluation said that although it was not an explicit intention, participating was likely to have a positive impact on parents. Both professionals and parents were able to identify a number of outcomes for participating parents.

Some parents reported getting support for coping with their own family situation through meeting other similar parents and networking with staff from a range of services. In addition, some were building confidence and skills, particularly those parents (usually mothers) who had been out of employment for a long time. A number of parents mentioned that involvement 'plugged the gap' left by unemployment with benefits such as '*keeping my brain going*' and getting feedback from others on their input.

> *"Well, I've always said that because that, that's what I miss. When I used to work, I used to do a good job and somebody used to occasionally say 'you, you've done a really good job' or, or I'd get some feedback. You don't get that when you're a parent [chuckles lightly]."*
>
> Parent forum member

Linked to this, some participation activities outlined in section 3.2 are supported through formal training which acts to boost parents' confidence, and leave a record of the skills developed. For example the parent trainers are undertaking a City and Guilds-accredited course 'Preparing to teach in the Lifelong Learning sector'. Other areas have organised training at participants' request, for example around the specific activities they are involved in:

> *"[WE] elicited from parents the kind of skills they felt that they would need, and then over the last nine months…have set that training up. So, we've had recruitment and selection training, as we have a lot of requests for parents to be on interview panels."*
>
> Participation Coordinator

For parents employed as trainers in Local Authority 'G', the DCATCH pilot has provided access to paid employment which would otherwise be considered unachievable because of childcare

responsibilities, and parents' previous experience of inflexible employers or fears about benefit loss:

> "F1: I was just saying, there's, one of the, the really good things about this particular job, you know: if I could have written beforehand a list of things that I wanted out of a job...
>
> F3 [Laughs]... Yeah!
>
> F1 ... this was it! [Laughter.] You know, I, I almost couldn't believe, it was, you know, fallen from the heavens, this job. You know, it's everything I needed it to be…[]… and I feel, if I need to give up my carers' allowance to become more involved, I want to do that, provided I can fit it around [my child]."
>
> Parent trainers

Parent participation also provides an opportunity for parents to utilise their knowledge in new and constructive ways; one respondent recounted how her previous experience of challenging the authority on service provision for disabled children was now being used to support, rather than challenge, service delivery:

> "I heard about Aiming High and about the Parent Participation Service and I felt that was a, a brilliant opportunity to get in and voice, because I'd probably done something of that nature myself but done it with a stick, ended up having to take the, the local council to judicial review and had to fight…[]…Now, this to me seemed a brilliant opportunity because what it was doing was saying what we were saying many, many years ago, that parents as experts on their child and their family were best placed to be, to be the ones to shape the services …[]… I think this was giving me the platform not only for myself but to encourage other parents as well who had been traumatised by the system to say that actually, now the government's given you recognition that your views are, are important and, and now you've got this, this platform to shape services."
>
> Parent forum member

Finally, most respondents interviewed in the study reported feeling satisfaction in helping other parents. Parents recounted poor experiences of childcare and were keen to avoid other parents and children facing something similar.

> "I had such a bad experience [with childcare provision] I think there's some really bad provision out there. I think there's some places that are, you know, are just, they're in it for the money … if I can inform [provision] that's rewarding for me in some way, I think."
>
> Parent forum member

4.4   Challenges

In this section we outline the main challenges to developing participation structures raised by respondents interviewed during the process evaluation, and where applicable, how these were addressed and/or how respondents felt they could be avoided in future.

Lack of strategic commitment to participation

While the emphasis on parent participation within DCATCH might be strong, this does not necessarily reflect a strong culture of participation within the wider local authority. In local authority 'J' the management of the participation activity was unclear for several months and changed a number of times before finally being placed within the Children's Trust. This in turn impacted on the provision of working space for the participation team, and as a result the intervention did not really get up and running until towards the end of year 2 of funding. Unsurprisingly project staff and parents report much faster progress since clear management lines and office space have been established.

Commitment to participation can vary between local authority departments and services. While DCATCH-funded staff may be committed, their partners may be less so. This is problematic for parents and families who access a range of services beyond childcare. Parents and staff in authority 'B' reported some services attempting parent participation but doing it incompletely, for example consulting without providing feedback, or not managing parental involvement in staff recruitment properly. This is being addressed in year three of the project by commissioning a voluntary sector organisation to engage with and train professionals across all children's services in participation, and develop a participation toolkit for use by a range of services.

Lack of Data

Staff interviewed during both the scoping and process evaluation stages report difficulties reaching parents of disabled children, compounded by little or no availability of data on disabled children living in the local authority. In one area ('J') with no disabled children's register, the participation team are having to '*market the participation events from scratch*'. Both authorities 'G' and 'B' in this report have commissioned participation work out to voluntary sector organisations who are experienced in supporting participation, and have established parent networks.

Planning round the time and resources available to parents of disabled children

Effective participation structures are time and resource intensive for parents. For parents of disabled children, finding time to take part can be difficult. As one parent notes:

> *"This type of activity often works better with parents of severely disabled children who have more experience and greater need, but they are least available to train because of the needs of their children."*
>
> Parent trainer

Those employed in the parent trainer and parent champion interventions are done so flexibly; part-time and/or in term-time only and on the understanding that parents may need leave at short notice should their children require additional care. Both examples have also involved employing greater numbers of staff flexibly to allow for absence at short notice:

Parents who participate on a voluntary basis are reimbursed travel costs and often paid in vouchers as a reward for their contribution. Again, meetings are held at convenient hours – weekends, school hours and evenings included. Parents are often deterred from being paid for their time by concerns over disability-allowance payments; details of how this is dealt with by one local authority are outlined in section 4.5.

Providing emotional support to parents

The impact on participating parents can be negative – aside from demands on their time and energy some respondents were also concerned that some forms of participation could be emotionally difficult. For example, parent champions had to deal with becoming intensively involved in supporting individuals through stressful situations, and learning to recognise the difference between a professional and friendship role:

> *"It wasn't always a very positive experience because I think there was something around that sometimes a parent will engage with you and appear to be very close to you sometimes because they need you and then they, their child, will come through that and they would move on and they don't need you anymore and some, and that's quite difficult for some people."*
>
> Parent champion manager

Professionals interviewed during both the scoping study and process evaluation were also conscious that many parents had been involved in participation mechanisms before and had become disillusioned by the lack of impact or feedback .

> *"we get a lot of feedback from parents about is, "Oh, no, I don't want to participate again. I don't want to give you my opinion. Every time I give you my opinion, actually, you know, nothing ever gets done about it." … The parents that are running this, I hope they'll say today that they feel like they are actually making a difference. You know, because I certainly feel like we are making a difference."*
>
> Parent trainer manager

4.5   Success factors in the development of participation

Respondents identified a number of factors in each of the three interventions explored in the process evaluation that has helped make participation 'work'. These include:

Effective management or facilitation

Parents interviewed as part of this study were keen to emphasise the importance of effective managers (where they were employed) or facilitators of voluntary participation activity. It is notable that in all the examples, the managers or facilitators were also mothers of disabled children.

Respondents identified a number of aspects to good management. They include knowledge of local authority services for disabled children, experience in developing and delivering participation

strategies, and experience in working with families of disabled children. Finally, the capacity to provide the specialist support to parents who are employed or volunteer is key.

> *"F1: ... So, yeah, so you're working for [manager], who's a parent herself; she knows the issues involved [others agree], you know, she's got more than two of us on the go, because she knows there will be times when we can't get there, so she can then, there's a few of us, she can juggle us around and make sure the training is covered, so, you know...*
>
> *F3: And it's good to have that right person in place, a good boss in place, because I think if you didn't, if you had someone that you couldn't talk to or you didn't have that flexibility, then I don't think you'd feel that you could do it. [Others agree.]"*
>
> Parent trainers

Support and training for parents

The projects described in section 3.2 are providing specialist support and training for participating parents. The type of support varies according to the intervention. For parent champions, time is built in to allow them to talk through any issues they may have faced in supporting parents and 'offload' any concerns or stresses. If the project could fund it, the parent champion manager would also like to provide training in basic counselling skills, which would be useful for the role.

Some parents are also provided with more formalised training in skills such as understanding specific types of disability; safeguarding children; public speaking and contributing in meetings etc. The parent trainers are initially trained through observing others delivering training sessions, then building up their involvement before delivering whole sessions unsupported. They are also attending a City and Guilds accredited course in teaching in the lifelong learning sector.

Employing parents

Employing parents ensures they are paid for their time and effort, and facilitates them spending the time necessary to run intensive programmes such as training or parent champions which would be difficult to staff on a voluntary basis. Where involvement is less formalised, for example the parent forum example in authority 'B', parents contribute on a volunteer basis. However, many of the parents interviewed in the process evaluation (paid and unpaid) expressed the view that their time should be valued through payment, particularly as local authorities and other agencies call on them more frequently:

> *"F2: I do do it for free. The amount of time I go out - but then I'm speaking on behalf of autistic parents, and… I do go along and do a lot of talks... […] I think once they know that you're on the radar, you know, they'll ask you lots of things, and a lot of the time you don't get paid. It's on goodwill. And actually I find it quite frustrating. You feel quite rude to ask for money, because ultimately at the moment, I always say I'm ok at the moment, but I'm aware that there are also a lot of other families - a special needs family, financially, is so much worse off [others agree] than a typical family, because, you know, if they can't get work, so only one person can work...*

F2 ... Mum can't work, yeah.

F3 ... a lot of the time the stuff they need, the equipment, the clothes, everything is more expensive. You're more tired. And just everything. [Others agree] And you mention money and people just look at you like you're, you know, disgusting for asking for it…"

Parent trainers (speaking about other, unpaid activity)

In two of the three interventions explored for this process evaluation, parents are employees rather than volunteers. Paying parents is often considered difficult because of the potential effect on benefits.

"This comes back to what we were saying about a Carer's Allowance and I think it's ridiculous because on the one hand, the government's promoting parental participation but on the other hand they're making it very difficult for those, because not all parents are going to do it. You've got to have energy, you've got to have ability, you've got to have enthusiasm, you've got to have the commitment and for those few that will be able to make that time and effort and commitment and the, to be valued then means you need to be financially rewarded for that commitment, that you, you can't because Carer's Allowance says if you're getting a certain amount, they're going to take that away."

Parent forum member

In the parent champion example, parents were not concerned about the potential impact of payment on benefits such as the carers allowance because they were previously already in employment, or had been prior to the birth of their child and were intent on returning to work. For these women, finding a job with flexible, childcare-friendly hours had been the more important concern.

In the parent trainer example, mothers are employed and most are also in receipt of carer's allowance. The parents commit to running one paid training session per month, and payment over the year amounts to less than the limit that would affect their benefit income.

Flexible arrangements

Employed or voluntary, all parents of disabled children are likely to need flexible arrangements to allow them to undertake sustained involvement in a project.
Arrangements in these three examples include working part time, in term time only, and with flexible hours. In all cases, parents are reassured that cancelling involvement at short notice because of their child's needs is fine and will not affect their participation. This aspect, particularly for employed parents, was considered invaluable.

"*Someone employing me has to be crazy, or at least, very, very flexible."*

Parent trainer

Funding for childcare

Where parents are volunteering their time, or invited to consultation events etc. free childcare ensures that childcare costs are not a barrier to attending. Many such events are held in children's centres to ensure the childcare is on site. This may have the added advantage of encouraging some parents to make more use of formal childcare.

Professional 'buy-in'

Parents interviewed during the process evaluation report being motivated to participate by the sense that practitioners and local authority officers involved are committed and value parental input. Access to staff senior enough to implement changes was seen to be key.

In the parent reference group example, the group was set up at the request of the DCATCH manager and parents reported that this, coupled with a sense of honest feedback including on what the local authority had *not* achieved, was a refreshing approach compared to what they had previously been involved with.

> *"I think it's fantastic 'cause what, what we, I get the feeling of as well is that [the DCATCH manager] has got some fantastic ideas and because he's senior and, and as manager he's willing to listen to the grass roots in terms of the parents, what we're wanting, means that he then has the power to put those changes into place as opposed to us ranting and raving with the workers… who then have to feed that back and it takes time to filter to the top. We've got the top person there sat in front of us who understands and then will go ahead and, and put that into his programmes."*
>
> Parent forum member

'Aiming High effect'

Both parents and professionals interviewed during the process evaluation report the strong perception that Aiming High for Disabled Children was different to previous (less successful) initiatives, and that participation was more worthwhile because the strategy brought with it real funding and commitment.

> *"When I came in to post most parents had heard of Aiming High, so we were starting from a good base, there seemed a real hope of change."*
>
> Participation coordinator

> *"I think for me it was more the fact that there was government legislation behind this that, that may, because we've had consultations in the past, 'cause I've been around this kind of area for 14, 15 years now and I've been here when we've had consultations in the past and [other respondent chuckles lightly], you know, it's been all very, you know, fluffy and I thought, 'wow, you know, this is very exciting' and then four years later I was like, 'yeah' [in a disillusioned way], and it became a bit like, the fact that there's actually legislation behind from a government level, that that's why it encouraged me."*
>
> Parent forum member

Working through the voluntary sector

Two of the participation interventions explored in the process evaluation are delivered through the voluntary sector. This allows authorities with little or no in-house experience in participation, or links with parent groups, to benefit from expert involvement.

In addition however, some parents report that a history of poor participation practice by local authorities would have prevented them taking part if the intervention was run by the authority again. Having the participation 'badged' by the voluntary sector gave it more credibility:

> *"The one thing, other thing that I think I should mention…[]…is actually one of the things that led me to be interested was the Barnardo's logo as well. I, I have to be honest, as a parent I see that and I see that as an organisation who's interested in children."*

<div align="right">Parent forum member</div>

5   Workforce Development

5.1   Scoping study findings across the ten pilot areas

The second theme explored in the process evaluation is workforce development. The scoping study also identified workforce development as a strong element of DCATCH in every pilot authority, being tackled through a wide range of approaches, summarised in brief below.

Training is most commonly targeted to support inclusion in universal or mainstream settings, for example by training all staff in a nursery or after-school club. Training is not restricted to childcare providers but in many authorities is also targeted towards Family Information Service officers. The development of training packages is sometimes informed by an audit of providers' existing skills and needs. These are most commonly carried out via a survey of providers. In other cases, the package of training is tailored to the provider by an inclusion worker or similar, based on an assessment of staff skills or the needs of a specific child.

Workforce development is being encouraged in some authorities by 'inclusion awards' or similar. These may be informal celebrations of good practice, but in a number of cases they require compliance with a more formal quality standards framework. This may also be linked with the development of an 'Approved Provider Framework' where only settings which have evidenced inclusive practice are funded through DCATCH to support disabled children.

Disability-awareness training
Some authorities are rolling out basic disability-awareness training to all childcare providers. This may also be called equality training or inclusion training. Most often this is delivered by DCATCH staff, but may also be commissioned from an external provider, or through parent/child trainers (see below). In one authority a DVD about disability awareness is being distributed to all providers.

> *"We are, in very general terms we are funding support to childcare settings to reduce their attitudinal barriers to inclusion, the fear factor. A lot of settings because they haven't had the training were fearful of including children with any sort of additional need or disability. So the basic training that we're delivering is to try and reduce that fear. Also to let the practitioners know that there is support for them."*
>
> Early Years and Childcare Inclusion Manager

Inclusion toolkits
A small number of authorities have developed inclusion toolkits, or inclusion *audit* toolkits for self-assessment. Their use is usually supported by an inclusion worker or similar who will develop a targeted package of training based on need.

Targeted training

Beyond generic inclusion training, most authorities are also providing targeted training and support based on providers' and children's needs. This type of training is more focused on specific forms of disability. Examples include training around autism, challenging behaviour, and health interventions. Some areas follow this training up through one to one support to providers during the initial period that a child attends a setting.

Support from specialist health professionals

In one authority workforce development has a strong emphasis on health. DCATCH funding has been put towards the appointment of a community nurse and a speech and language therapist who will provide direct support to children in settings, and also train day care staff to support children's needs.

Parent and peer trainers

Training can be delivered by parents of disabled children, and by children and young people themselves.

Specialist childminders and support workers

In order to become responsive and flexible enough to meet individual needs as they arise, some authorities are developing 'pools' of trained childminders and support workers who can support disabled children and young people. This makes brokering packages of support easier as more trained staff become available.

Family information Service (FIS)

A number of pilots are training FIS officers to better meet the needs of disabled children and their families. This may be delivered 'in house' through funding a specialist FIS post, or by other DCATCH-funded staff.

5.2   Description of interventions explored for the process evaluation

The process evaluation concentrated on three workforce development interventions in more detail. Again, we focused on interventions developing promising and innovative practice which was developed enough to allow insight into the barriers and facilitators of successful implementation.

5.2.1 Parent-trainers, training childcare providers in disability awareness (Local Authority 'G')

This intervention was described in the previous section, as it overlaps both participation and workforce development. In brief, the local authority has commissioned a voluntary organisation, to run a parent training scheme. Staff from childcare providers can attend the three-hour training session for free, and attendance is a requirement before applying for the authority's DCATCH-funded specialist equipment grant.

The session is on generic disability inclusion, and settings are asked to indicate on the evaluation forms what specific follow-up training is required. This information is used by the authority to deliver targeted training, for example in specialist medical needs.

5.2.2 Inclusion quality standards scheme (Local Authority 'B')

This is an inclusion quality standards (IQS) toolkit designed for use in childcare settings looking after children over the age of five. Its aim is to encourage settings to develop a proactive approach to inclusion; not reacting to individual children as they use the setting but instead working to encourage more families with disabled children to use the service. The authority already has similar scheme for early years provision. Settings work through three modules, self-evaluating and improving inclusion practice, supported where necessary by one of the authority's play workers. The modules are designed to be progressively difficult, with module three the most demanding. It is estimated that completion of all three will take between 6 months to a year, depending on the provider's starting point. The toolkit has been written by external consultants and piloted with 15 settings over the past year. The IQS sits alongside disability awareness training and targeted training (Makaton (a communication programme), moving and handling etc.) also being coordinated by the authority.

On completion of the modules, settings submit a portfolio of evidence for moderation by the play support workers and are awarded either bronze, silver or gold depending on their inclusion practice. They then hold that standard (called the Equality Kite Mark) for three years before they have to re-apply.

5.2.3 DCATCH-employed community nurse and speech and language therapist (Local Authority 'F')

This authority has funded a part time community nurse (0.4 FTE) and speech and language therapist (0.5 FTE) to provide support to childcare providers. The health professionals provide training to childcare provider staff to improve their capacity to support disabled children. This can involve building the capacity of childcare providers through a menu of subject specific training (e.g. Makaton), some of which is accredited, or working with families and settings around the needs of a particular child. As well as working in group childcare settings, both healthcare providers provide support to childminders working in the homes of families with disabled children.

Referrals come directly from providers, or from the inclusion coordinators (SENCOs) working in the area. Most of the children they are working with have complex needs and are supported by both professionals.

5.3 Intended impact

The emphasis across all ten pilots on workforce development is addressing the acknowledged lack of childcare provision for disabled children and their families. Staff in authorities interviewed during the scoping study were optimistic that intensive workforce development activity funded by DCATCH would make for a sustainable change in provision (as opposed to funding additional support for individual children, which is likely to be withdrawn after the end of the pilot). We describe below the

specific intended impact on childcare providers, and also the children and families using childcare services, of the three interventions above.

5.3.1 Childcare providers

All three initiatives are designed to develop childcare workers' ability to meet the specific needs of disabled children and their families. For example, the health professionals employed through DCATCH have developed a menu of training publicised to childcare providers in the area that includes topics such as Makaton, alternative and augmentative communication (AAC), use of the Picture Exchange System (PESC), epilepsy, tracheostomy care and the use of Epipens. The team also provide support to staff around the needs of individual children attending the setting when required.

One children's centre in authority 'F' visited as part of the process evaluation is being supported by both the nurse and the speech and communication therapist. The centre has a higher proportion of disabled children attending its nurseries than others in the area and the support provided has increased staff capacity to address both specific medical needs of some children, and develop better communication practice. All staff attended Makaton training and now use it in the nursery with all children (not just those with additional communication needs).

> *"We have children with Down's syndrome, and we do have a lot of children with speech and language problems, so the Makaton is now being used throughout the whole nursery…[]… I think it's had a huge impact on the, on the nursery as a whole. I mean, even the children without additional needs are starting to use it, and you can just see that it's bringing on their speech as well."*
>
> <div align="right">Children's Centre Manager</div>

The parent-trainer and inclusion quality standard schemes are aimed at a more generic 'culture change' approach, actively encouraging settings to promote inclusion. The parent-training event includes a session on designing and promoting inclusion policies, and role-plays on welcoming parents with disabled children as they visit the setting for the first time. The Inclusion Quality Standard has been designed to encourage staff in settings to collaboratively reflect on their inclusion practice and embed change.

> *"[*Childcare providers] *wanted something which was a self evaluation process, a reflective review process, so that centres weren't having change imposed upon them, but were thinking about their practice, thinking about what it should look like and working towards that. …people will find it very easy to shift culture because they'll feel that it's something that they're doing collaboratively … there were people that were telling me about children who are now included in their setting that previously weren't .. which is, is a huge difference in, in really a very short amount of time ."*
>
> <div align="right">Independent consultant</div>

5.3.2 On disabled children and their families

Both the parent training and IQS initiative are working towards a better experience for families of disabled children from the first point of contact with childcare providers, in recognition that many will have to approach several before finding a setting that can meet the needs of their child. Making families feel welcome rather than 'problematised' is a key focus.

> *"What we've noticed as trainers, and what we've also noticed from the evaluation, is that providers feel they haven't got the skills to actually feel like they can welcome parents sometimes…[]… and that it's not just the SENCO that needs to welcome these parents; it's actually everybody. It's the receptionist, it's the, you know, even the dinner ladies. "*
>
> Parent trainer manager

In authority 'F', children with communication needs are benefiting from their communication plan being reinforced by both care staff and parents. The speech and communication therapist refers to the child's communication plan (usually developed by an NHS speech therapist) and train staff and parents in how to implement it. Staff in the children's centre report seeing children 'much less frustrated' as their capacity to understand (and be understood) has improved.

Parents in this authority can benefit from the same skills development as childcare staff, for example both a mother and a childminder have been jointly trained in the Picture Exchange System (PECS) to support the child. In addition, the healthcare staff have trained parents, either individually or through them attending the same training sessions as provider staff.

> *"…the speech and language therapist, also attended a review meeting for the little girl with the tracheotomy, and she was able to provide Makaton training to the staff team in a team training day, and she also came to a staff meeting later on to update and sort of see how it was going and offer us Christmas signs, in December, which was really useful. But she was also able, the parents of that child are separated, and she made time to go to both of their houses on separate occasions to give them some Makaton training as well, which I thought was very different [laughing] to anything we've had before."*
>
> Children's Centre Manager

In one children's centre in authority 'F', staff training arranged when a child with epilepsy was moving from one nursery to another was also attended by the child's mother:

> *"[Mother] came along to one of the training sessions as well. I mean, her child, like I say, she's nearly 3 years old; she's had epilepsy since she was born, but nobody's actually really told her [the mother] what epilepsy is. Which I find absolutely bizarre. So when we'd mentioned that we were getting more staff trained with the child moving up rooms, [mother] asked if she could come along to that."*
>
> Children's Centre Manager

While this model is available under NHS-funded community nursing, practitioners reported that being funded through DCATCH allows health professionals to spend more time with individual families, and work with families who might not otherwise be referred through the NHS. Parents also benefit from individual support from the community nurse being able to more spend time with the child at home.

> *"As I say, sometimes it, [sighs] I don't know what it is, you know, you, you go along to kind of hospital appointments with [child], and people just see a sort of snapshot of him for a very short period, the doctors and things, so it's, it's difficult. …[]…I just think if somebody's actually been in, seen him and, you know, kind of seen him at home and things, then they get a better picture, really."*
>
> <div align="right">Mother</div>

5.4 Challenges

The three initiatives outlined in section 5.2 have faced several challenges to implementation which are recounted below, along with strategies used to address them.

5.4.1 Reaching childminders

In all three initiatives described here, DCATCH staff reported that reaching childminders had proved difficult. Although they were not certain why this was the case, they suspected that time and costs, as well as poor marketing of the training available, were all factors. Childminders have been successfully reached where families are in receipt of specialist health support in the home, usually in periods where the childminder would be present anyway.

5.4.2 Sustainability

While developing staff capacity is seen as a more sustainable intervention than, say, funding additional staff or support for families, DCATCH staff interviewed during the process evaluation expressed concern that post-funding some of these initiatives were not sustainable. The healthcare professional initiative in authority 'F' is seen as particularly vulnerable, and staff have concerns that they are raising expectations of a service that will not be met once they return full time to the NHS.

> *"I think the only potential is that in, when the project comes to an end and we're no longer in the project, is then settings will have the expectation of getting all this extra training, and then where that'll come from?"*
>
> <div align="right">DCATCH-funded community nurse</div>

Providing subject-specific training, while useful, is vulnerable to staff forgetting the skills unless they are required regularly ('use it or lose it'). In addition, staff turnover in childcare settings is often high and training should be ongoing to ensure that staff remain skilled.

> *"..the things that I've been doing training on, things like Makaton signing , I think if there wasn't ongoing training, people tend to either stop using it or they forget the signs, or they*

forget who they're supposed to be using it with. So I think they'll get the initial passion for it and that'll probably continue, and the legacy might be that they know where to go and who to ask for the help, but I think that probably, 'cos of the staff turnover, really, I think they'll probably need to carry on having more training."

<div align="right">DCATCH-funded speech and communication therapist</div>

Some intensive and accredited training is also being provided in an effort to ensure that the training is seen as an investment and hence more likely to be implemented.

"I think if someone's got an accreditation from something, they're much more likely to implement it, rather than little one-off training sessions "

<div align="right">DCATCH-funded speech and communication therapist</div>

The IQS toolkit in authority 'B' is designed to be self-evaluating and to embed culture change and policies that should influence new staff as they come on board.

5.4.3 Reaching all staff within the setting

While the training in the examples explored here is free, settings still have to find time to free staff to attend and there is no funding available for staff to cover shifts while others are being trained. This has been a concern for settings in all three authorities.
Some of the training has been delivered during designated 'staff training days' when settings are closed. Others have delivered training in the setting itself, immediately after the nursery closes, to minimise disruption.

5.5   Success factors in workforce development

5.5.1 Reducing barriers to training

All three initiatives have worked to make the training and development on offer as accessible as possible. Measures include supplying it at no cost, and in short sessions. For example, the parent training in inclusion is free to all providers in the area and lasts three hours. Others have delivered training in the setting itself, or in family homes. The support from health professionals is flexible both in terms of how often, and for how long, support is available. The IQS, because it is a self-evaluation toolkit, can be done whenever staff are available.

5.5.2 Providing incentives

Beyond reducing barriers, some authorities have introduced incentives for taking part. Settings receive £200 on completion of two modules of the IQS, to buy specialist equipment for use with disabled children. Achievement of the standard also allows the setting to display the 'Equality Kite Mark'. Attendance at the parent training is one of the eligibility criteria for another DCTACH-funded grant for equipment.

5.5.3 Continuity and ongoing support

Providers in receipt of support from the healthcare professionals in authority 'F' were keen to emphasise the value in having ongoing support from the same professional. Both staff in the children's centre and a childminder reported the benefits of having 'someone on the end of the phone if you need them'. Furthermore, having access to the *same* individual for support and training was valued.

> *"We would have sourced epilepsy training through the community nurses. However, you get a different nurse every time you ring up; it depends sort of who's on duty, so the staff never really built up a relationship with the community nurses, and there was, there's historically been contradiction between what one nurse says and what another nurse says. So I think having* [the DCATCH nurse] *offers that consistency."*
>
> Children's Centre manager

Play support workers in authority 'B' have been trained in the implementation of the IQS, and are able to provide support to staff in settings working through it. Providers have also been attending IQS 'feedback' meetings allowing them to network and discuss the standards as they work through them.

5.5.4 Designing training to fit the audience

The IQS was developed in partnership with 15 childcare settings, who have been piloting early versions and providing feedback. This has helped ensure it is fit for purpose and meets their needs. One of the results of this collaborative approach has been a reduction in theoretical content and a focus on practical implementation, as a direct result of feedback.

> *"We changed it a couple of times as we went through...I had actually written two quite lengthy chapters on theory and we distilled and distilled and distilled.*
> *Play Workers are hands on people, they've, they're practical learners, they're not academic and for me to move, to really shift their thinking, it had to come through deliberate action."*
>
> Independent consultant

Similarly, the parent training in authority 'G' is continually adapted as a result of feedback and evaluation, and support from health professionals in authority 'F' is provided as and when providers need it.

6   Conclusion

We summarise here the key lessons and challenges that have emerged in the four local authorities involved in this study of participation and workforce development initiatives.

Participation

Participation is one element of the Core Offer, the national statement of expectation of how services to disabled children and their families will be delivered locally was published in May 2008. We have looked at parent participation in more detail in this process evaluation through following up three types of intervention in three local authorities; a parent trainer scheme, a parent participation forum, and a parent champion scheme.

The main challenges faced by the three local authorities have included developing a culture of participation across *all* departments and services involved in the delivery of services to disabled children and their families, and providing extensive and flexible support for parents. The types of support provided in the three interventions explored in this study include:

- Flexible employment arrangements (including part-time, term time only etc. and with regard to the potential impact on benefit income)
- Reimbursement of costs to parents who volunteer (including travel, childcare etc)
- Emotional support for parents who may find some of the participation activities stressful
- Strong management/facilitation
- Training in the skills required to participate effectively
- Feedback on the impact of their participation

Two of the three local authorities involved in the process evaluation have commissioned the participation element of their DCATCH pilots from voluntary sector partners with established parent participation mechanisms. This has allowed those authorities with little or no in house experience in participation or links with parent groups to benefit from more expert involvement.

Finally, we have not explored the participation of disabled children and young people in this study because a) it is less common than parent participation across the 10 DCATCH pilots and b)those initiatives that are focused on children and young people were not sufficiently embedded at the time of the process evaluation to allow lessons to be learned. These two factors lead us to conclude that ensuring the effective participation of disabled children and young people in the design and delivery of services remains an ongoing challenge across the DCATCH pilots.

Workforce development

The three initiatives explored in the process evaluation of workforce development are a parent trainer scheme, training childcare providers in disability awareness; an inclusion quality standards

toolkit for childcare settings; and funding for support to childcare providers from health practitioners (a community nurse and speech and language therapist).

Local authority staff interviewed during the scoping study and the process evaluation were optimistic that intensive workforce development activity funded by DCATCH would lead to a sustainable change in provision (as opposed to funding additional support for individual children, which is likely to be withdrawn after the end of the pilot). The main challenges to achieving this have been reaching all staff within childcare settings, and reaching childminders.

Strategies to address this identified in the process evaluation include reducing the barriers to attending training, particularly addressing costs and staff time. Training has been provided for free, and at times that suit the needs of childcare staff (often in the setting itself). Two authorities in the process evaluation also provide incentives to settings that include accreditation for staff or the setting itself, and access to equipment grants. It is not clear however that these strategies will address the difficulties in reaching childminders.

Next steps in the evaluation of DCATCH
This process evaluation report is part of a wider evaluation of the DCATCH pilot. Other strands include a) a quantitative impact study, and b) qualitative work on acceptability and impact. There also remain three thematic areas that will be subject to process evaluation in Autumn 2010. We will be able to draw together overall conclusions from the process evaluation once the remaining three themes have been studied.
 The final report on the DCATCH evaluation is expected in July 2011.

7 Appendix 1 – Summary of activity within each pilot authority

Local Authority A

A London borough with large pockets of disadvantage, the local authority is keen to support parents into work and training. A recent Joint Area Review identified that provision for disabled children aged over 5 years was in need of improvement.

The authority's DCATCH project plan was changed in September 2009 owing to delays in commissioning new childcare provision for the borough. A study of the demand for provision for 12-18 year olds has begun, which will inform a feasibility study into the provision of services and staff development. A sensory and soft play out-of-school club, and summer holiday hydrotherapy provision, is in place. An equipment grant scheme and equipment loan scheme is also running.

A programme of workforce development for out of school clubs and child minders has begun, followed up by specialist support delivered in the setting.

The authority has undertaken consultation with disabled children and their parents, and appointed a parent engagement officer to continue this work. There is some emphasis on outreach and improving information to parents through the creation and dissemination of leaflets and DVDs. The borough is also working with partners in the employment and training sector to promote the project.

Local Authority B

The authority has both a high proportion of BME residents, and a higher than average proportion of disabled children with complex needs. Work has previously been carried out to increase the take up of childcare by BME families, and six children's centres have been developed to support children with complex physical needs. Need analysis identified that while under-fives were well catered for, work was needed to improve childcare provision for disabled children over 5 years.

The authority has produced a report detailing the results of intensive qualitative research into the specific needs of parents of disabled children in the area, and undertaken feasibility work to determine the training needs of providers to meet the needs of disabled children over five years old. An Inclusion Quality Standard developed for early years settings in 2001 is being redesigned to encompass out of school provision and rolled out to settings, supported by Inclusion Officers. Settings will also receive an individually tailored package of support. Play partners are supporting disabled children to access group childcare sessions.

The project plan has a strong element of user participation, funding a participation worker for parents, and children. Plans are in place to train a group of parents to contribute to childcare design and delivery, and for the development of peer education and empowerment groups.

Local Authority C

39% of children live in workless families, and the number of disabled children and young people is increasing in the local authority area. The authority has an established integrated service for

families with disabled children bringing together a range of health services, social care, participation, child development and the disabled children's register.

The DCATCH project plan places a strong emphasis on employment, training, and welfare support. An information, advice and guidance officer is in place to offer employment and training support to parents of disabled children, and a welfare benefits adviser provides coordinated welfare rights and childcare costs advice. The authority is providing funding for low income parents to help with the cost of childcare while undertaking training, work experience or volunteering.

It is also funding inclusion workers to provide training to childcare settings, and one to one support to disabled children. They are building a pool of specialist child minders, and investing in inclusive play settings. It is hoped that by the end of the pilot there will be at least five parents trained and ready to train childcare providers in inclusive practice.

The pilot is also funding a Family Information service (FIS) disability outreach officer, and working to improve the availability and accessibility of information about childcare options to parents.

Local Authority D

Disabled children are a strategic priority in the authority's Children and Young People's Plan, and both the Childcare Sufficiency Assessment and the Parent Carer Council had identified gaps in provision for older disabled children.

DCATCH funding is going towards brokerage of support workers (who are also teaching assistants) to support disabled children in settings including after school clubs and holiday provision; training specialist child minders; a holiday club for visually impaired and deaf children over 14 years; and a sibling service (providing parents with quality time to spend with their disabled children). The authority is also looking into improving transport provision.

There is a strong participation theme in the project plan, and a parent participation officer has been jointly funded with Short Breaks. Training on inclusion delivered by both parents, and young people, is being developed.

There is also a strong emphasis on improved information. The authority is organizing two parent conferences (one national) and one disabled children's conference. Information 'hubs' are being developed in special schools. A specialist FIS officer is being jointly funded with Two Year Old pilot funding.

The authority is evaluating all DCATCH-funded interventions to gather evidence to inform the mainstreaming of some services post 2011.

Local Authority E

This is a large and rural county, with associated issues around the availability of transport to access services. The authority has been running an inclusion funding scheme since 2002 which supports Private, Voluntary and Independent (PVI) providers requiring additional resource to meet the needs of disabled children. There is also an existing specialist equipment loan scheme for childcare settings. Needs analysis indicated a gap in provision for older children, and children with severe and complex needs.

The authority is working on a Programme for Change for children with additional needs, developing coordinated services across the children and young people's partnership. The DCATCH funding is

supporting this work, and much of the governance and operational groups are jointly run with Short Breaks, under the wider Aiming High for Disabled Children steering group. An example of this is the development of a bank of staff that can support children across a range of settings, reducing the number of staff working with a disabled child in various settings.

Participation is a strong theme within the project plan and parents and children have been consulted on a wide range of DCATCH-related decisions, including the eligibility criteria, and the assessment of providers applying to be part of the Approved Provider Framework.

The pilot has funded a specialist FIS officer to broker packages of care, and develop the capacity of all FIS staff to meet the needs of disabled children and their families. It is hoped that access to childcare will be brokered for those children with severe and complex needs who cannot access group provision. The authority is also developing a scheme of one to one support to enable older disabled children to access group provision.

Local Authority F

Again, the size and rural nature of this authority makes the provision of flexible, responsive childcare services challenging. Consultation with parents consistently raised difficulties in sourcing appropriate childcare for school-age disabled children. Early education settings have been receiving inclusion support since 2001, and DCATCH is being used to raise inclusion to a similar level in settings for older children. In addition, the authority is keen to rationalise the criteria for funding and inclusion practice across the range of professionals working with disabled children and their families.

The authority has appointed three inclusion support workers based in three children's centres around the county. These workers broker individual packages of care, and deliver training and support to providers to improve inclusion practice. Providers, and disabled children, are also being supported by a community nurse and a speech and language therapist. Out of school provision and holiday clubs are also being developed.

The authority is also developing better data monitoring systems to improve knowledge about the demand for childcare for disabled children, and monitoring outcomes for those families in receipt of DCATCH support. Work is also ongoing to improve the information available to parents and disabled children on their entitlements, and available provision.

Local Authority G

A range of demographic and cultural factors determine the size and nature of this urban authority's population of disabled children as well as their profile of need. It is one of the fastest growing local authorities in the UK with large migrant and transient populations. It has a high birth rate, but also a high infant mortality rate, low birth weight and poor perinatal health.

Specifically, there is a large South Asian community; a population with a high incidence of disability amongst children where multiple children with disabilities within the same family are not uncommon. For a range of reasons, such disability may remain hidden or undetected within such families until the child is older and the capacity of parents to cope with such disability may be compounded by pre-existing social and economic disadvantage.

The authority has 19 Children Centres, six of which had resourced places for disabled children (44 places in all) prior to DCATCH. There is a pre-existing culture of high and proactive parental involvement in service development for disabled children. The approach taken under DCATCH is characterised by an emphasis on low-cost structural change, enabling parents and increasing their stake in the development of all services for disabled children and young people. Sustainability is key to this approach; rather than create new posts or childcare places that may not survive changes in funding after 2011, all interventions must be self-sustaining, integrated or mainstreamed.

Local Authority H

In this authority the development of accessible childcare takes place in the context of the challenges of providing services for rural communities. The authority's approach to DCATCH is partly based on inclusion work in the authority pre-DCATCH (for example under SureStart) with DCATCH money allowing this work to be continued or expanded.

The authority is working with different types of providers in a number of ways to enhance inclusion in existing mainstream provision, as well as to grow provision in terms of the number of places and type of provision. Examples are building up a pool of flexible inclusion support staff, growing the authority's specialist childminder network, and the development of a support package to stimulate the growth of home-based childcare provision.

The commissioning of additional provision under DCATCH was preceded by groundwork to support providers in the tendering process with a view to long term sustainability. This included research into the real cost of inclusive childcare places and the dissemination of financial tools for use by providers across the authority and beyond.

Better information for parents is a key objective, and the authority has approached this in a number of ways, for example through the employment of 'Accessible Childcare Information' staff within their Family Information Service. Another project trains up a member of school staff in each special school in the county to have all the relevant information about the local childcare market and funding options for parents.

The authority's plan also focuses on changing mindsets and competence of providers and aims to achieve this aim in a number of ways such as dissemination of a training and promotional DVD to all providers across the county, the creation of "Inclusion Awards" to be awarded to organisations and individuals for outstanding inclusive practice, and workforce training.

In addition, work is on-going to improve the authorities' systems and processes. DCATCH is providing 'additionality' to embedding and enhancing integration of services and initiatives across the authority (e.g. ShortBreaks, Extended Schools and Children's Centres), the various funding schemes and streams available to parents will be reviewed and a review of the transport system has already taken place. Further development of user involvement is also planned under DCATCH.

Local Authority I

The authority's children and family services have been subject to on-going authority-wide review, re-structuring and development with the aims of creating more family-centred and flexible approaches to services, more integrated and partnership working and better alignment of funding

streams. This on-going development work and existing knowledge about gaps in childcare provision and areas for improvement forms the context for the DCATCH pilot. The authority experienced initial capacity issues in relation to DCATCH such as high staff turnover, and whilst initially delayed, strategic and operational arrangements for taking forward the DCATCH work have since been put into place.

Similar to some of the other pilot authorities, much of the work under DCATCH is linked to the on-going re-structuring and development of services in the authority. User involvement and parent partnership will be developed under DCATCH to ensure that the development of services is in line with what parents want and need.

The authority will be undertaking benchmarking and research to provide strategic direction and ensure relevant knowledge to inform the work, such as research around the hidden cost of transport, consultations with parents to establish their awareness of the system of entitlements and funding opportunities, and a workforce training audit. In addition, the authority intends to evaluate any changes and provision initiated under the pilot. It is also involving its providers in taking forward work under DCATCH such as commissioning a voluntary sector provider to review and develop the authority's data collection around disability. The authority plans to develop childcare provision working with the range of different providers.

The authority has also utilised DCATCH funding to directly support individual families' access to provision, by providing brokerage services to families with childcare needs, providing one-to-one inclusion support in settings, funding training and resources for settings to facilitate access, and funding home-based provision some families need.

Local Authority J

Staff in the authority report having a well established model of good practice in integrated services and a historically strong parent partnership. For example, the authority was one of the early implementers of the Early Support programme, for instance, and integrated working across services is embedded throughout the authority. The pilot is designed to build on this good practice (for example DCATCH-funded work around partnership with parents) in order to further embed and enhance these pre-existing models of practice.

The authority has employed 'Parent Champions' under DCATCH and is recruiting more parents into this role, who are undertaking a number of tasks such as parent support groups, parent training and parent consultations. Work around integrated working practices includes research into the barriers to full implementation as well as strategic and financial support.

The authority is emphasising the need for improvements achieved under DCATCH to be sustainable, which the pilot reflects through much of the planned work having been designed to improve relevant processes and systems. For example, the authority will be reviewing the existing resource and equipment base with a view to making improvements to the system, and undertaking work around establishing one single database of families which all relevant partners, agencies, or services will be able to access.

Other projects under DCATCH involve the authority's providers. One project is building up a pool of individuals as 'Access Auditors' to audit existing provision which serves the two-fold aims of supporting providers with inclusion and feeding benchmarking information back to the authority.

Another project is seeking to create 'Centres of Excellence', utilising good inclusive practice models and expertise within the authority to support other, less advanced providers. There are also some small scale projects that providers will undertake themselves, for example a project around working with older children with special needs, and another looking at training for 'play'.

Whilst the pilot is mostly designed to provide 'additionality' to existing practices and structures (for example, DCATCH allows the extension of a scheme which currently supports the inclusion needs of children aged 0-11 to be extended to support children and individuals up to 25 years old), on a small scale it also funds additional provision through grants to existing providers for accessible childcare development with the view to expanding that provision.

8   Appendix 2 – Topic guides

Process evaluation of Disabled Children's Access to Childcare (DCATCH) Pilot
Topic Guide for use with local authority staff/ childcare practitioners
Participation

The primary aim of these interviews is to inform the participation theme of process evaluation.

As this is a process evaluation, we wish to encourage participants to discuss their views and experiences in an open way without excluding issues which may be of importance to individual participants and the study as a whole. Therefore, unlike a survey questionnaire or semi-structured interview, the questioning (and the language and terminology used) will be responsive to respondents' own experiences, attitudes and circumstances.

There will also be variation according to the specifics of the type of participation being discussed (parents vs young people; champions vs trainers etc)

The following guide does not therefore contain pre-set questions but rather lists the key themes and sub-themes to be explored with each participant. It does not include follow-up questions like `why', `when', `how', etc. as participants' contributions will be fully explored throughout using prompts and probes in order to understand how and why views, behaviours and experiences have arisen. The order in which issues are addressed, and the amount of time spent exploring different themes, will vary between participants according to individual circumstances.

---

1.   Introduction

- Introduce self & NatCen
- Introduce study:
    - evaluation of the DCATCH
    - taking place in ten pilot areas
    - looking at participation as one theme of the process evaluation
- Digital recording – check OK, and reassure re confidentiality
- How we'll report findings
- Reminder of interview length – (one hour – 90 minutes) check OK
- Any questions/concerns?

- Respondent to outline their job title, roles and responsibilities; overall, and in relation to DCATCH

2. Local authority context pre-DCATCH (antecedents)

- Can you tell me about the history of parent/yp participation prior to DCATCH funding?
Prompts
  - What happened?
  - Funding
  - Success (or otherwise)
  - Impacts
  - 'culture' of participation within the local authority
  - Was any form of needs analysis in regard to participation carried out prior to applying for DCATCH funding?
  - Was any other means used to identify how DCATCH funding might be used to develop participation activity?
      - Prompt for any issues which were identified but are NOT being addressed (and why)

- Is this participation work linked with any other initiatives currently happening within the local authority? (e.g. short breaks)
- Who leads on participation within the local authority?
- Who else is involved?
- Are these new or established relationships?

3. Approach

- Can you start by providing an overview of parent and/or young people's participation in your DCATCH pilot:

    o What new provision/activities/posts is the money funding?
      - Prompt – may not necessarily be 'new', but revised activity as a result of funding
    o What agencies are involved?
    o Who manages participation (full time post vs add-on to existing post etc.)
    o If voluntary agency managed – why and impact of this.
    o What are you trying to achieve with this participation activity?
    o Prompts
      - Outcomes for parents/yp who participate
      - Outcomes for wider group of parents/yp
      - Better programme design
      - Local authority outcomes/targets
      - Other…
- How were the participation activities identified?
    o Learning from previous experience
    o Research carried out to inform programme design
- Views on the challenges and or constraints of participation activities?
    o DCATCH specification
    o Funding available
    o Activities of other agencies/departments etc

- How are the parents/young people involved identified?
    - Probe for 'reach' vs small group of repeat 'participators'
    - Who are they (age, demographic)
    - How representative are they of the group your DCATCH pilot is intended to reach/support?
- How did they become involved?
- Is their activity paid for/voluntary/expenses only etc
- What training or other support is provided?
- Are there any barriers to becoming involved?
    o Is there any way to overcome these
- How much time would a parent/yp spend on DCATCH participation activities?
- What is the (average) length of their involvement?
- Is this about right? For them? For the DCATCH pilot?
- What happens when parents/yp 'move on'…

4. Outcomes
- To date, what has been the impact of your participation activity
    - Outcomes for parents/yp who participate
        - Personal and social development outcomes
        - Involvement in local decision making etc.
        - Aspirations
        - Accreditation
        - Employment etc
    - Outcomes for wider group of parents/yp
    - Programme design
    - Local authority outcomes/targets
    - Local authority culture
    - In particular, prompt for 'what has changed' as a result of participation
      Other
- To date, is there evidence that these outcomes are being achieved?
    o If so, for whom and why
    o If not, why not
    o What evidence is collected – any internal evaluation?

- Is this what you had expected to happen?
  - Prompt for achieved/exceeded/ didn't reach expectations

- What worked well?
- What do you think were the key success factors?
  - e.g. Staffing
  - Other resources
  - Culture in local authority
  - Contribution of parents/yp
  - Selection of parents/yp

What could have gone better?

What lessons have you learned from this?

Are there plans for the further development of parental/yp's participation?

4. Conclusions

- What would you say are the critical success factors in developing parents/young people's participation?
- Are there plans for the further development of parental/yp's participation in your authority?
- Any questions for the researcher?

- Thank, and close

Process evaluation of Disabled Children's Access to Childcare (DCATCH) Pilot
Topic Guide for use with parents
Participation

The primary aim of these interviews is to inform the participation theme of process evaluation.

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2. Introduction

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- Any questions/concerns?

2. Context

Can you tell me little bit about yourself?
Prompts (will vary depending on young people vs parent)

- Family
- Employment
- Disability
- Caring responsibilities
- Age (or of disabled child)
- How long have you been involved with the DCATCH project (or more generally, services for disabled children) in your area?

3. Approach

Can you start by providing an overview of your role/participation with DCATCH (or services for disabled children…)

- How did you become involved?
- Why did you become involved?

  - What are you trying to achieve with this participation activity?
  - Prompts
    - Outcomes for self
    - Outcomes for wider group of parents/yp
    - Programme design
    - Local authority outcomes/targets
    - Other…
    - Does this differ in any way from what you think the local authority is trying to achieve?
- Is your activity paid for/voluntary/expenses only etc
- What training or other support is provided?
- Is this enough? What has the impact of this training/support been? What more could be provided?
- How much time would you spend on DCATCH participation activities?
- How long do you think you will stay involved?
- Did you have to overcome any barriers to become involved?
- Do you think there are barriers to others being involved?
- If so, what…, and what might be done to reduce them.
- How representative do you think you/others are of the people DCATCH is trying to help?

4. Outcomes

- To date, what has been the impact of your participation activity
  - Outcomes for parents/yp who participate
    - Personal and social development outcomes
    - Involvement in local decision making etc.
    - Aspirations
    - Accreditation
    - Employment etc

  - Outcomes for wider group of parents/yp
  - Programme design
  - Local authority outcomes/targets
  - Local authority culture
  - In particular, prompt for 'what has changed/might change' as a result of participation
  - Other

- Is this what you had expected to happen?
  - Prompt for achieved/exceeded/ didn't reach expectations

- What worked well?
- What do you think were the key success factors?
  - e.g. Staffing
  - Other resources
  - Training/support
  - Contribution of parents/yp
  - Selection of parents/yp
- What could have gone better?
- What lessons have you learned from this?
- Are there plans for the further development of parental/yp's participation?
- Should there be? How do you think it should develop?
- Will you be involved?

4. Conclusions
- What would you say are the most important aspects for developing parents/young people's participation?
- What advice would you give to other parents/yp considering getting involved?
- Any questions for the researcher?

- Thank, and close

NatCen
National Centre *for* Social Research

Process evaluation of Disabled Children's Access to Childcare (DCATCH) Pilot
Topic Guide for use with local authority staff/ trainers
Workforce development

> The primary aim of these interviews is to inform the workforce development theme of process evaluation .
>
> As this is a process evaluation, we wish to encourage participants to discuss their views and experiences in an open way without excluding issues which may be of importance to individual participants and the study as a whole. Therefore, unlike a survey questionnaire or semi-structured interview, the questioning (and the language and terminology used) will be responsive to respondents' own experiences, attitudes and circumstances.
>
> There will also be variation according to the specifics of the type of workforce development being discussed (general training, health-specific etc.)
>
> The following guide does not therefore contain pre-set questions but rather lists the key themes and sub-themes to be explored with each participant. It does not include follow-up questions like `why', `when', `how', etc. as participants' contributions will be fully explored throughout using prompts and probes in order to understand how and why views, behaviours and experiences have arisen. The order in which issues are addressed, and the amount of time spent exploring different themes, will vary between participants according to individual circumstances.

3.   Introduction

- Introduce self & NatCen
- Introduce study:
  - evaluation of the DCATCH
  - taking place in ten pilot areas
  - looking at workforce as one theme of the process evaluation

- Digital recording – check OK, and reassure re confidentiality
- How we'll report findings
- Reminder of interview length – (one hour – 90 minutes) check OK
- Any questions/concerns?

- Respondent to outline their job title, roles and responsibilities; overall, and in relation to DCATCH

2. Local authority context pre-DCATCH (antecedents)

- Can you remind me of the main reason for applying for DCATCH funding?
- Was any form of needs analysis of workforce development carried out prior to applying for DCATCH funding? – prompt for what
  - What data does the local authority have on the capacity of the childcare workforce to support disabled children and young people?
- Was any other means used to identify 'the problem'?
  - Prompt for any issues which were identified but are NOT being addressed (and why)
- Is the workforce development activity linked with any other initiatives currently happening within the local authority? (e.g. short breaks)

3. Approach

- Can you start by providing an overview of workforce development activity in your DCATCH pilot:

  - What new provision/activities/posts is the money funding?
    - Prompt – may not necessarily be 'new', but revised activity as a result of funding
  - What agencies are involved?
  - Who manages the work (full time post vs add-on to existing post etc.)
  - If voluntary agency managed – why and impact of this.
  - Who is targeted?
  - How are their needs identified? Is this working?
  - What are you trying to achieve with this activity?
  - Prompts
    - Outcomes for staff/settings who participate
    - Outcomes for children, young people and their families
    - Local authority outcomes/targets
    - Other…
- How were the training activities identified?
  - Learning from previous experience
  - Research carried out to inform programme design

- How do staff trainees/providers become involved?
- Is their activity paid for/voluntary/expenses only etc
- What follow-on training or other support is provided?
- Is the training accredited?
  Is participation in the training linked to eligibility for other DCATCH-funded activity?
- Are there any barriers to becoming involved?
  - Is there any way to overcome these
- How much time would a trainee spend on DCATCH training?

- Views on the challenges and or constraints of workforce development activities?
  - DCATCH specification
  - Funding available
  - Activities of other agencies/departments etc

4. Outcomes
- To date, what has been the impact of your workforce development?
  - Outcomes for staff who participate
  - Outcomes for parents/yp
  - Programme design
  - Local authority outcomes/targets
  - Local authority culture
  - Other

- To date, is there evidence that these outcomes are being achieved?
  - If so, for whom and why
  - If not, why not
  - What evidence is collected – any internal evaluation?

- Is this what you had expected to happen?
  - Prompt for achieved/exceeded/ didn't reach expectations

- What worked well?
- What do you think were the key success factors?
  - e.g. Staffing
  - Other resources
  - Contribution of parents/yp

- What could have gone better?
- What lessons have you learned from this?
- Are there plans for further workforce development?

4. Conclusions

- What would you say are the critical success factors in developing a successful workforce development programme?
- What are the risks/burdens?
- Any questions for the researcher?

- Thank, and close

Process evaluation of Disabled Children's Access to Childcare (DCATCH) Pilot
Topic Guide for use with providers/settings in receipt of training
Workforce development

> The primary aim of these interviews is to inform the workforce development theme of process evaluation.
>
> As this is a process evaluation, we wish to encourage participants to discuss their views and experiences in an open way without excluding issues which may be of importance to individual participants and the study as a whole. Therefore, unlike a survey questionnaire or semi-structured interview, the questioning (and the language and terminology used) will be responsive to respondents' own experiences, attitudes and circumstances.
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> There will also be variation according to the specifics of the type of workforce development being discussed (general training, health-specific etc.)
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> The following guide does not therefore contain pre-set questions but rather lists the key themes and sub-themes to be explored with each participant. It does not include follow-up questions like `why', `when', `how', etc. as participants' contributions will be fully explored throughout using prompts and probes in order to understand how and why views, behaviours and experiences have arisen. The order in which issues are addressed, and the amount of time spent exploring different themes, will vary between participants according to individual circumstances.

4.   Introduction

- Introduce self & NatCen
- Introduce study:
  - evaluation of the DCATCH

- taking place in ten pilot areas
- looking at workforce as one theme of the process evaluation
- Digital recording – check OK, and reassure re confidentiality
- How we'll report findings
- Reminder of interview length – (one hour – 90 minutes) check OK
- Any questions/concerns?

- Respondent to outline their job title, roles and responsibilities; overall, and in relation to DCATCH

2. Context

- Please tell me a little bit about your service
  - o Numbers of children attending
  - o Numbers of disabled children
  - o Experience/capacity to support disabled children
  - o Staffing
  - o Demand for provision
- Was any form of needs analysis of workforce development carried out in your setting prior to applying for DCATCH funding? – prompt for what
- Is the workforce development activity linked with any other initiatives currently happening within the local authority? (e.g. short breaks)

3. Approach

- Can you start by providing an overview of workforce development activity in your setting

  - o who has been involved?
    - All staff?
- How do staff trainees/providers become involved?
- Is their activity paid for/voluntary/expenses only etc

  - o Who is targeted?
  - o How were the training needs identified? How well do you think that process worked??

- What follow-on training or other support is provided?
- Is the training accredited?
  Is participation in the training linked to eligibility for other DCATCH-funded activity?
- Are there any barriers to becoming involved?
  - o Is there any way to overcome these
- How much time would a trainee spend on DCATCH training?
- What are/were your expectations of the training?
  - o Prompts
    - Outcomes for staff/
    - Outcomes for the setting
    - Outcomes for children, young people and their families
    - Local authority outcomes/targets
    - Other…

- Views on the challenges and or constraints of workforce development activities?
  - o DCATCH specification
  - o Funding available
  - o Activities of other agencies/departments etc

4. Outcomes
- To date, what has been the impact of your workforce development?
  - Outcomes for staff who participate
  - Outcomes for settings
  - Outcomes for parents/yp
  - Programme design
  - Local authority outcomes/targets
  - Local authority culture
  - Other

- To date, is there evidence that these outcomes are being achieved?
  - If so, for whom and why
  - If not, why not
  - What evidence is collected – any internal evaluation?

- Is this what you had expected to happen?
  - Prompt for achieved/exceeded/ didn't reach expectations
  - How informed are parents about the training you received?
  - Has this had an impact on demand for provision/your relationship with parents/children?

- What worked well?
- What do you think were the key success factors?
  - e.g. Staffing
  - Other resources
  - Contribution of parents/yp

What could have gone better?

What lessons have you learned from this?

Are there plans for further workforce development within your setting?

4. Conclusions

- What would you say are the critical success factors in developing a successful workforce development programme?
- What are the risks/burdens?
- Any questions for the researcher?

- Thank, and close

9 Appendix 3 - References

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