



## THE REAL PROGRAMME

Evaluation Report

July 2022

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## About the evaluator

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## Executive summary

### The project

The REAL programme (Raising Early Achievement in Literacy) is an intervention that works with practitioners (usually in the early years) to support children's early literacy development. The programme aims to help practitioners to build parents' knowledge and confidence in creating a home learning environment that supports and encourages children's reading, writing, and oral language. The original Sheffield REAL project was developed in the 1990s by academics at the University of Sheffield.<sup>1</sup> The programme evaluated in this report used REAL approaches including home visits, group literacy events, and the ORIM Framework, which supports parents to create **O**pportunities for literacy learning, **R**ecognise and value small steps, **I**nteract in positive ways, and make a point of being a **M**odel of a literacy user.

Due to the coronavirus pandemic (COVID-19), the REAL programme was delivered over five school terms starting in the spring term (2020) of the nursery year and finishing in the summer term (2021) of the reception year (with a COVID-19-related pause for the summer term of the nursery year). The age of children in the intervention was three to five years across the delivery period. The activities included training and networking events for practitioners and home visits by practitioners to families in the treatment group. Practitioners were originally required to conduct eight to ten home visits per family over the course of the intervention each lasting 30 to 60 minutes and involving the use of the ORIM Framework, sharing of learning resources, modelling of activities for the parents, and high-quality conversations with the parents about the activities and the child's learning.<sup>2</sup> However, due to the impact of COVID-19, it was only possible to hold two in-person home visits before a six-month pause to delivery. Home visits following the delivery pause were delivered remotely. In the original intervention design, practitioners were also expected to arrange up to four group literacy events open to the parents of children in the treatment group, however, due to social distancing guidance these events did not take place.

The programme was delivered in 53 schools in the North West of England. Practitioners delivering the programme were typically nursery teachers or members of schools' senior leadership teams with responsibility for the Early Years Foundation Stage. In total, 719 children were included in the evaluation (363 children in the treatment group and 356 children in the business-as-usual control group).

The evaluation design originally included a two-arm, multi-site, family-level randomised controlled efficacy trial. The intended primary outcome of interest was early literacy development as measured by the Preschool Early Literacy Indicators (PELI) assessment. However, the impact evaluation was cancelled in March 2021 due to the COVID-19 pandemic. This was for two main reasons: (1) perceived risks and ethical concerns around sending external assessors to schools during the pandemic and (2) concerns that the impact evaluation findings would not be reflective of the REAL programme in a typical academic year. A standalone implementation and process evaluation (IPE) was still carried out on the basis that IPE evidence on feasibility and perceived outcomes would still be useful for further development of the intervention. The IPE took place in all participating settings and aimed to assess delivery and perceived outcomes on practitioners, families, and children. Data collection included observations of training and networking events, two surveys of practitioners (baseline and endline), three surveys of parents (baseline, interim, and endline), interviews with practitioners and parents, and compliance data collection. The evaluation started in December 2018 and completed in July 2021.

The programme was delivered by the National Children's Bureau (NCB). The project was funded as part of the Home Learning Environment Round, where EEF partnered with the Department for Education and Leeds-based education charity SHINE to test projects that support parents to help improve their children's learning and development before they start school.

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<sup>1</sup> See the following link: <https://sheffield-real-project.sites.sheffield.ac.uk>

<sup>2</sup> 'High quality' conversations are defined in the REAL guidance documents as conversations that include the initial sharing of the activity, following up how it went, and offering extension ideas. The aim of high-quality conversations is to enhance the parent-teacher relationship to support the development of the home learning environment and build parents' confidence in their role as their child's early educator.

## Key conclusions

1. The intervention was very well received by practitioners, most of whom maintained high levels of commitment to the programme throughout its duration. However, fidelity in the implementation was not very high, both in terms of dosage (the number of home visits delivered during the intervention), with only 60% of practitioners meeting the minimum requirements, and quality, with modelling of activities and high-quality conversations with parents not always being part of 'remote home visits'.
2. Key benefits of the intervention as perceived by practitioners were their improved knowledge of early literacy development, improved knowledge of how to work with families, greater understanding of children's home environments, and increased confidence in supporting parents. In relation to early in-person home visits, practitioners described how visiting homes was 'eye-opening' because it showed the lack of suitable home learning resources.
3. The evidence of positive outcomes for parents and children was less consistent. There was no evidence from the parent surveys that home learning environment in the treatment group families improved over the course of the intervention. However, in the practitioner survey, the majority reported that parents' participation in their children's learning and parents' engagement in early literacy activities—features of a home learning environment—had increased as a result of taking part in the REAL programme.
4. Remote delivery made it more difficult for practitioners to build relationships with parents and engage harder-to-reach families and undoubtedly affected the progress made towards parent and child outcomes, which was perceived by practitioners to be more limited than the progress towards practitioner outcomes. Over half (57%) of practitioners who responded to the survey said REAL home visits would preferably be 'all in-person', and 43% said they would prefer a mix of in-person and online. No respondents said they would prefer delivery to be exclusively online in future.
5. Buy-in from schools' senior leadership teams was a key factor facilitating delivery as it supported adequate ring-fencing of time for practitioners to plan and carry out home visits. Main barriers to delivery included high teaching workloads, the need to schedule home visits around parents' availability, a high rate of short notice cancellations by parents, and low engagement with the programme from some parents. Many of these barriers were exacerbated by the COVID-19 pandemic.

## Additional findings

Due to the COVID-19 pandemic, the primary outcome for this evaluation was not collected and so no measure of impact on early literacy development is reported. Key conclusions are based on qualitative data from the IPE. It is also important to note that the IPE took place in the context of the pandemic, which might have affected perceived benefits of the programme for parents and children. Partial school closures and the need for parents to support their children's remote education interfered with programme activities by blurring distinctions between remote education, the REAL intervention, and business as usual (pre-pandemic) home learning. At the same time, the COVID-19 pandemic was affecting families in a number of ways, including children's learning, social skills, and their emotional development and regulation and parents' capacity for engagement.

However, while the evaluation was unable to ascertain the impact of the REAL programme on outcomes for practitioners, parents, and children, it did find evidence for several outcomes in the logic model. This was particularly the case for perceived outcomes related to practitioners themselves. It was evident that practitioners were highly engaged and that the increased contact with families, compared with what they would normally do, was beneficial to them. Our evaluation also found evidence for two underlying mechanisms for improving parents' participation in their child's learning that we recommend including in the next iteration of the logic model. One was that REAL home visits increased parents' confidence to lead home learning activities, particularly among those who were not highly educated and who benefitted from the reassurance from practitioners that they were 'doing the right thing'. Another mechanism was the knowledge parents gained from the practitioners about different home learning activities and how to best engage the child.

The effects of the pandemic on the schools and families—as well as the specific aspects of how the REAL programme was delivered with these particular cohorts of practitioners, parents, and children—limit generalisability of evaluation findings discussed in this report while at the same time providing insights into how this programme could be delivered in a context that is very different from the one for which it was originally developed. The evaluation also uncovered some unintended outcomes of the REAL programme in the context of COVID-19. Practitioners commented on how the programme was already being used or would be applied in their setting as a tool to aid learning recovery. Nearly three quarters of practitioners (74%) said the REAL programme was 'very' or 'fairly' effective in addressing gaps in children's early literacy linked to partial school closures; the majority (89%) reported that they would recommend use of the REAL programme in other settings as part of COVID-19 learning recovery.

## Introduction

### Background

#### Policy context

The importance of foundational literacy skills for children's development has been reflected in a concerted policy focus on early literacy in England (DfE, 2021; DfE and NLT, 2018). As part of this focus, publication of the Department for Education's (DfE) National Curriculum in 2013 set out the requirement for early years educators to develop children's language and literacy competencies as core areas of the school curriculum. This recognised that acquisition of spoken language, reading, and writing is key to children's progress across the curriculum and fundamental to their wellbeing and achievement (DfE, 2013). Since that publication, there has been a range of supportive guidance for the early years sector in relation to raising standards of early literacy (see, for example, DfE, 2015). Guidance has also highlighted the importance of effective learning and teaching strategies (for example, oral language interventions, phonics approaches, and reading comprehension methods) to improve children's readiness in the transition from nursery to primary school (DfE, 2018; Ofsted, 2017). Government advice in this respect relates to using assessment, notably the Early Years Foundation Stage (EYFS) framework (DfE, 2019), to identify gaps in learning and ensure teaching is tailored and efficient. More recently, the government's drive to close the 'word gap' in early years has prioritised investment in phonics programmes and reinforced commitment to level up literacy outcomes.<sup>3</sup>

The result of policy efforts has been to set some children on a positive learning trajectory, with improvements seen in written and spoken language comprehension for children aged five (DfE, 2019). Despite this, more than a quarter of children were found to leave reception without achieving expected levels of communication, language, and literacy (on the EYFS measure in 2019), with children from socially disadvantaged backgrounds disproportionately represented within this group (DfE, 2019). It is likely that disruption to learning due to COVID-19 will have exacerbated attainment gaps (Nuffield Foundation, 2020). An EEF-funded project found that primary-aged children had made significantly lower achievement in reading during school closures and disadvantaged children were on average seven months behind their peers (Rose et al., 2021). It is essential to understand what works to improve early literacy outcomes for children and pre-emptively target children who need additional support.

A key factor mediating children's literacy development is the number of words and quality of language engagement to which a young child is exposed (Law et al., 2018). Given that children spend considerable time in the parental home in their early years, there has been substantial interest in what happens in the home context regarding communication and interaction and the role of parents in improving their children's literacy outcomes.

#### Existing evidence

Existing research shows that parental involvement in children's learning is associated with a range of positive impacts on children's cognitive and socio-emotional outcomes (Asmussen et al., 2016; Melhuish and Gardiner, 2018), as well as with impacts on academic achievement (Lehrl et al., 2020; McNeal, 2014; Melhuish and Gardiner, 2020). A literature review of the impact of parental involvement on child achievements identified that the extent and form of parental involvement is shaped by socioeconomic factors including social class and parental level of education (Desforges and Abouchaar, 2003). Other related research has shown that parents' interactions with children could also be influenced by the child's gender (Gilkerson et al., 2017; Johnson et al., 2014).

The quality of the home learning environment has been shown to be as important as socioeconomic factors (Melhuish and Gardiner, 2018; Sylva et al., 2004). The 'home learning environment' includes the physical characteristics of the home—for example, the availability of resources such as books, a quiet place to study, and access to IT equipment—as well as the activities that parents and other caregivers engage in with children at home, which implicitly or explicitly support a child's learning—such as reading stories, reciting nursery rhymes, drawing, learning numbers and shapes, and so forth. Several studies have found that positive parental support for home learning has a greater impact on

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<sup>3</sup> A new Centre of Excellence for Literacy Teaching opened in 2019 (DfE and The Rt Hon Justine Greening, 2018). For DfE's published guidance for schools on phonics teaching see DfE, 2022.

children's wellbeing and achievement than any other factor (Axford et al., 2015; Siraj-Blatchford and Siraj-Blatchford, 2010).

The Department for Education published a policy paper in 2018 outlining a behaviour change approach aimed at improving the home learning environment, coproduced with the National Literacy Trust and Public Health England (DfE, 2018). This paper supports the ambition set by the Secretary of State for Education to halve, by 2028, the proportion of children who do not achieve expected levels in the 'communication and language' and 'literacy' areas of learning at the end of the reception year; an initiative that is part of a wider social mobility programme. Recognised barriers to supporting children's early language and literacy development discussed in the paper include capability, opportunity and motivational barriers; interventions in poorer communities to increase the support for parents using existing workforces to deliver messages, prompts, and resources were identified as activities to help overcome these barriers.

The REAL approach has been previously evaluated. Two evaluations that included randomised controlled trials showed the approach to be effective (Hirst et al., 2010; Hannon et al., 2020). A third evaluation showed modest but consistent increases in child-reported family literacy activities (Nutbrown et al., 2003). In addition, there has been a feasibility trial of a project that used REAL approaches called 'Making It REAL' that was carried out as part of the Sutton Trust's Engagement Fund in 2015–2017 (Sylva et al., 2018). 'Making It REAL' aimed to support practitioners to build parents' knowledge and confidence to create an early home learning environment, supporting their children with reading and writing. The study, involving ten nursery settings in Oldham in Greater Manchester, concluded that a larger trial of REAL was needed to provide more robust evidence on effectiveness. The evaluation report highlighted promising results using the Home Learning Environment (HLE) Index, demonstrating a significant effect of the intervention on HLE scores, while recognising the small sample and stated that a larger, more robust trial to demonstrate impact was needed.

The Department for Education are investing £5 million to trial 'what works' in the home learning environments in the North of England, focusing on implementing evidence-based practice into the programme (DfE, 2017). Based on the evidence from the feasibility trial, the EEF selected the REAL programme as a promising intervention aimed at reducing the development gap in key language and literacy skills at an early age.

### **Integrated evaluation design**

The evaluation was originally designed as a two-armed cluster (nursery level) randomised controlled efficacy trial involving 120 nurseries because of a number of benefits of nursery-level randomisation over family-level randomisation in the context of the REAL programme. The original design had lower risk of spillovers, contamination, and non-compliance with treatment assignment, lower risk of mis-targeting of the programme to those not in need, and fewer ethical concerns relating to withholding treatment in the control group compared to randomisation at child level.

However, the evaluation design was revised due to difficulties experienced by the delivery team in recruiting a sufficient number of nurseries into the trial to enable nursery-level randomisation. Recruitment challenges related to nursery capacity, lack of buy-in, and nurseries not wanting to be in the control group. The design was changed in December 2019 to a two-arm, multi-site, family-level randomised controlled efficacy trial.<sup>4</sup> The primary outcome of interest was early literacy development as measured by the Preschool Early Literacy Indicators (PELI) assessment. The impact evaluation was cancelled in March 2021 based on the risks and ethical challenges of continuing with the RCT in the light of the COVID-19 pandemic and its implications for programme implementation and data collection.<sup>5</sup> These factors related to:

- outcome measurement—there were perceived risks and ethical concerns with outcome testing around sending external assessors to settings during the COVID-19 pandemic and burden for school staff; and
- fidelity—due to COVID-19, home visits paused in March 2020 and were conducted remotely from September 2020; COVID-19 also reduced the capacity of early years staff to engage with the

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<sup>4</sup> By family, we refer here to the eligible child (or children, for example in the case of twins) and their primary carer(s), typically their parents. Since part of the intervention consists of home visits involving the whole family, it would not be feasible to conduct randomisation at individual (child-) level since all eligible children in the household will invariably be exposed to the home visits.

<sup>5</sup> The original study protocol and its two amended versions are available from the EEF website:

<https://educationendowmentfoundation.org.uk/projects-and-evaluation/projects/the-real-programme>

programme: the intervention developers, evaluators, and the EEF shared concerns that the impact evaluation findings would not be reflective of the REAL programme in a typical academic year.

With the impact evaluation cancelled, we still carried out a standalone IPE in all settings to assess delivery and perceived outcomes on early years practitioners, families, and children (see Evaluation Objectives).

## Intervention

### Overview

The REAL programme (Raising Early Achievement in Literacy) works with practitioners to support children’s early literacy and development. The programme aims to help practitioners (usually working in early years) to build parents’ knowledge and confidence in creating a home learning environment that supports and encourages children’s reading and writing. The original Sheffield REAL project was developed in the 1990s by Professors Peter Hannon and Cathy Nutbrown at the University of Sheffield.<sup>6</sup> A programme using REAL approaches called ‘Making it REAL’<sup>7</sup> was previously evaluated through a feasibility trial as part of the Sutton Trust’s Engagement Fund in 2017 (Sylva et al., 2018).

The programme evaluated in this report uses several REAL approaches. A core element of the REAL programme is the ORIM Framework (Hannon, 1995; Nutbrown et al., 2005) that sets out four ways parents can create a home learning environment that supports children’s early literacy development by:

- creating **O**pportunities for children’s literacy development, for example, by making children books, CDs, and writing material available and accessible in the home environment and including space and time for literacy;
- **R**ecognising and encouraging children’s developing skills, knowledge, and understanding in early literacy;
- **I**nteracting with children positively and supporting real-life literacy tasks; and
- acting as **M**odels of literacy users, so children see parents use literacy in everyday life.

The ORIM Framework distinguishes four inter-related strands of emerging literacy: environmental print, books, early writing, and key aspects of oral language (storytelling, phonological awareness, and ‘language for literacy’) as shown in Figure 1 (Nutbrown et al., 2005; Hannon, 1995).

Figure 1: The ORIM Framework

		EARLY LITERACY STRANDS			
		Env.Print	Books	Writing	Oral Language
FAMILIES PROVIDE	Opportunities				
	Recognition				
	Interaction				
	Model				

REAL programme activities normally include eight to ten home visits per family by early years staff over the course of the intervention. During home visits, practitioners speak to parents about aspects of early literacy development as set out in the four strands of the ORIM Framework, sharing both theory and practical ideas. For example, practitioners discuss how parents can create **O**pportunities for early literacy development and identify aspects of children’s literacy

<sup>6</sup> <https://sheffield-real-project.sites.sheffield.ac.uk>

<sup>7</sup> <https://www.ncb.org.uk/what-we-do/practice/focusing-early-years/early-childhood-unit/our-current-projects/making-it-real>

achievement so that they can show **R**ecognition. Practitioners also share literacy activities to increase the **I**nteraction and encourage parents to be a strong **M**odel of a literacy-user for their children by visibly engaging in more literacy activities themselves. In addition, practitioners deliver group literacy events for families taking part in the intervention. However, due to COVID-19, REAL programme activities were amended or cancelled during this evaluation.

### **Intervention delivery**

The trial took place in the North West of England in three local authorities: Knowsley, Kirklees, and Salford. Practitioners working with families typically included nursery teachers, early years practitioners, or members of senior leadership teams with responsibility for the Early Years Foundation Stage.<sup>8</sup>

National Children's Bureau (NCB), a national children's charity, coordinated and delivered the intervention training in collaboration with Professors Cathy Nutbrown and Peter Hannon from the University of Sheffield and the national ORIM Network. REAL practitioners were required to attend the four-day training course in January 2020 (split into two two-day sessions spread across two weeks). The training covered the emergent literacy approach to children's reading and writing, understanding and interpretation of the ORIM Framework and how this can be used during interactions with parents and families with confidence, practitioner reflections on working with parents and families, and planning techniques for delivery of the REAL programme. Practitioners received a training pack containing the ORIM Framework grid and academic literature on the REAL approach, a pack of ideas for structuring home visits, research sheets and DVDs containing examples of home visits and literacy events, and other planning materials.

Apart from training, NCB organised four 'networking events' via video conferencing platforms to comply with COVID-19 social distancing requirements. The first two meetings (in June and September 2020) were organised by geographical clusters and the last two (in November 2020 and April 2021) were open to all practitioners. This latter option was introduced so that REAL practitioners who could not attend the meeting in their geographical cluster could attend another meeting; this was decided in consultation with practitioners. The networking events were used to help REAL practitioners prepare for the switch from in-person to remote delivery, to respond to any questions or concerns raised by practitioners about the intervention, and to give practitioners the opportunity to network with others. They also provided opportunities for practitioners to share ideas and discuss challenges, barriers, and find solutions collaboratively. Outside of networking events, NCB also provided ongoing support to REAL practitioners throughout the trial.

In the original trial plan, the REAL programme was intended to be delivered over four school terms, starting when children were in the spring term 2020 of the nursery year and concluding in the spring term 2021 when they were at reception year. However, school closures during the COVID-19 pandemic meant programme activities were paused in March 2020 and only resumed again in the autumn term 2020. Delivery was then extended to the summer term 2021.

Over the course of the delivery period, the trained practitioners were asked to carry out a minimum of eight home visits (ideally, ten) to families of children identified as needing additional support with early literacy development. These children were selected at random to receive the intervention (see Methods). Visits were conducted in children's homes and were planned to last 30 to 60 minutes. At least one parent or carer was asked to be present along with their child because the key aim was to share theory and practical ideas with parents so that they could better support their children. Other people living in the house were welcome to be present too, including children's siblings, as long as the focus remained on the REAL home visit.

Due to the COVID-19 pandemic, from March 2020 in-person home visits were paused. By that point, practitioners had managed to deliver, on average, two home visits per family. From September 2020, the intervention was restarted but all remaining home visits were conducted remotely as a result of social distancing guidance. NCB recommended that remote visits could be delivered using a variety of remote methods (for example, telephone calls, video calls, or sharing resources in the post) and they could be made up of more than one contact with families. NCB also stipulated that one remote visit be completed within a tight timeframe, preferably within a week, in order to ensure continuity (this applied to all elements of a remote visit, from providing resources to having a follow-up conversation). Contact with parents for a remote visit needed to last a minimum of 30 minutes.

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<sup>8</sup> In this report, 'REAL practitioner' refers to staff working with families delivering REAL activities, 'nursery' refers to school-based nursery provision, and 'parents' refers to either parents or main carers of the children who took part in the programme.

In the original intervention design, practitioners were also expected to arrange up to four group literacy events, open to the parents of children in the intervention group. Due to COVID-19 and social distancing guidance, these events did not take place.

During the pause in the intervention delivery due to COVID-19, a discussion took place between the EEF, NCB, and NatCen teams about whether there was a benefit to continuing with the intervention and the evaluation after the pause or whether they should be cancelled. NCB were keen to continue delivering the REAL programme because they believed in the benefits of the intervention for practitioners, parents, and children, even when delivered in a modified format. It was considered particularly useful not to terminate a potentially successful intervention when children were experiencing a significant learning loss because of partial school closures. Moreover, from the research methods point of view, data collection for the IPE could continue with minimal modifications. Based on these considerations, a decision was made to continue with the intervention using a remote delivery mode and to continue with the IPE, but to cancel the impact evaluation.

### Intervention content

REAL practitioners were encouraged to be reflective and reactive in designing the structure and content of the home visits, which could vary according to the practitioner's assessment of the needs of the children and their families. However, each home visit (in-person and remote) was guided by the ORIM Framework. REAL practitioners used the framework and had the option of sharing it with families as a resource to support their child's early literacy. All activities were planned around the four strands of early literacy development in the ORIM Framework and practitioners had access to REAL training packs and resource sheets to help with activity ideas. At the end of the visit, practitioners left parents with further activities to carry out with their child.

In November 2020, in response to the COVID-19 pandemic, NCB shared documentation with REAL practitioners that stipulated that the following conditions needed to be met to be counted as a REAL remote home visit. Each visit should include:

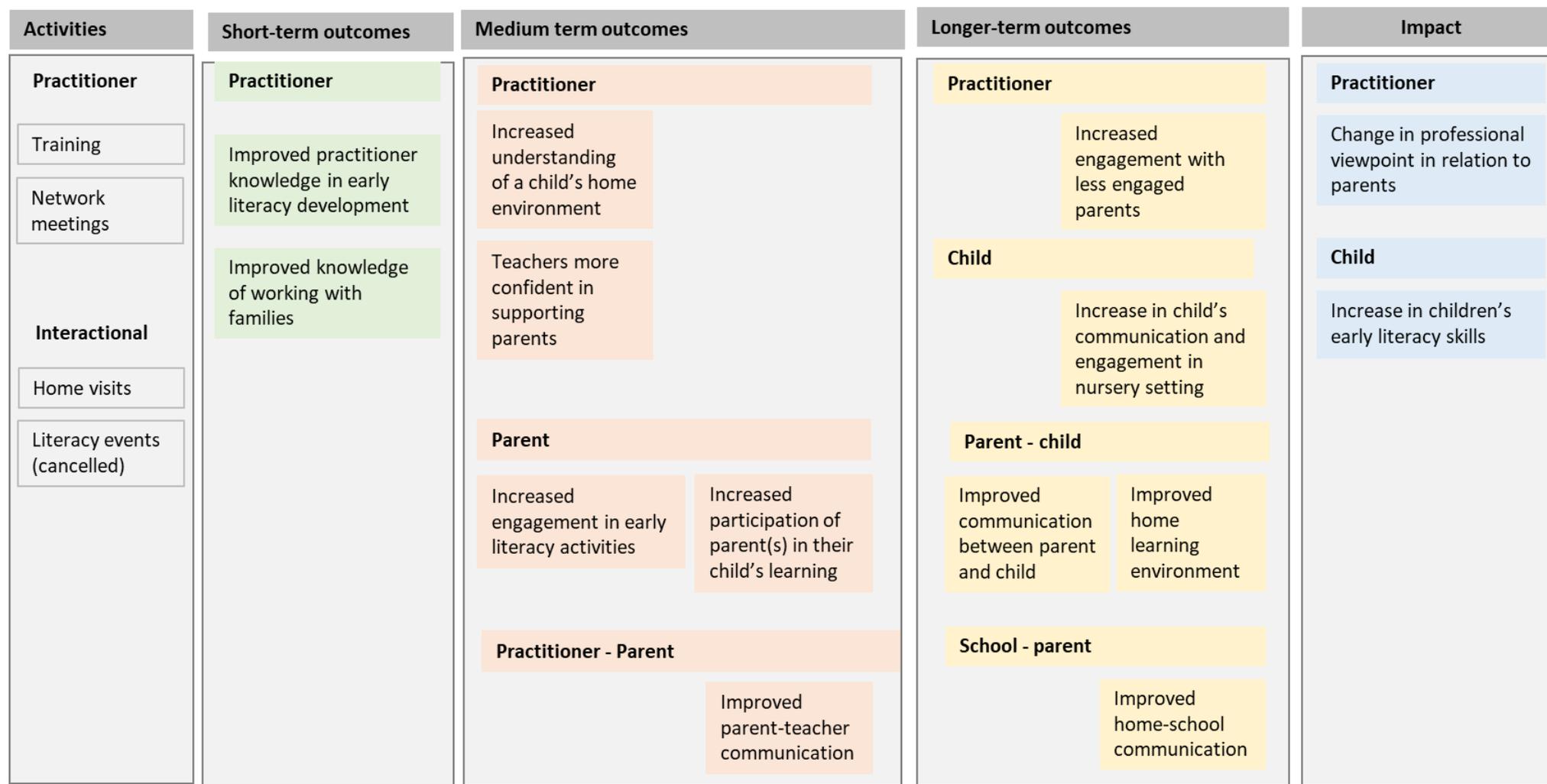
- **modelling activities**—enabled through live modelling through video calls, recorded and sent to families, or through annotated photo activity prompt sheets; modelling best practice was aimed at keeping parents positively engaged in their children's learning at home;
- **resources**—provided in sufficient quantity so that the activity could be repeated and extended at home; and
- **high quality conversations with parent(s)**—designed to enhance the teacher-parent relationship, to support the development of the home learning environment, and to build parental confidence in their role as their child's early educator; conversations needed to include the initial sharing of the activity and a follow-up conversation about how the activity went and to offer extension ideas.

Practitioners were also encouraged to think creatively about the delivery of activities given the context of COVID-19 and to emphasise to parents the importance of positive praise, enjoyment, and having fun through learning.

### Intervention logic model

The REAL programme logic model (Figure 2) was designed in conjunction with the delivery team (NCB) during the project set-up phase. The logic model outlines the sequence of activities implemented by trained practitioners in conjunction with parents of children in the intervention. It sets out the intended impacts of the programme for practitioners and children, as well as the short- and medium-term outcomes that are expected to lead to these impacts. Changes made to the logic model during the trial are included (cancelled literacy events because of COVID-19). No other revisions to the logic model were made during the evaluation.

Figure 2: Logic model for the REAL programme



## Issues that occurred during the project

### **Change of the trial design because of difficulties with recruitment of settings**

This evaluation was originally designed as a two-arm cluster (nursery-level) randomised controlled efficacy trial. Preparations for the trial started in early 2019. The evaluation design was changed in summer 2019 due to difficulties experienced by the delivery team at NCB in recruiting a sufficient number of nurseries into the trial. The revised design was a two-arm, multi-site, family-level randomised controlled efficacy trial.

### **Partial school closures and COVID-19 safety protocols**

#### *Delivery issues*

The delivery of the intervention was paused in mid-March 2020 due to the COVID-19 pandemic and related partial school closures. It was re-started in September 2020, but due to new COVID-19 safety protocols (such as child and staff ‘bubbles’), it was not possible for school staff to visit children in the REAL programme at home. All REAL home visits were conducted remotely via telephone or video calls from September 2020 onwards and all literacy events were cancelled. The end date of the intervention was extended from spring to summer term 2021.

#### *Evaluation issues*

Due to the impact of COVID-19, the RCT was cancelled (see Integrated Evaluation Design). The research questions from the implementation and process evaluation (IPE) were rewritten to incorporate implications of COVID-19 for the programme delivery and outcomes. The intended IPE activities that required in-person data collection were either cancelled (observations of home visits) or modified (interviews with all practitioners and parents were conducted over the telephone, whereas the original plan was to conduct some of the interviews face to face).

## Evaluation objectives

The main research questions for this evaluation are as follows:

RQ1. How is The REAL Programme delivered, and what are the facilitators and barriers to delivery?

RQ2. What are the perceived benefits of the programme for early years practitioners, families, and children?

RQ3. What are the implications of COVID-19 for delivery and perceived impacts?

RQ4. What can be learnt for future delivery of the REAL Programme?

The evaluation protocol was published on the EEF website:

<https://educationendowmentfoundation.org.uk/projects-and-evaluation/projects/the-real-programme>

## Ethics and trial registration

Ethical approval for the proposal of this project was obtained from NatCen’s Research Ethics Committee (REC) in November 2019. The NatCen REC reviewed the study design and confirmed compliance with internal ethical standards.

### **Procedures for obtaining agreement to participate in the trial**

#### *Nursery and parent recruitment*

The programme delivery team at the National Children’s Bureau (NCB) identified and recruited school-based nursery settings, with local authority assistance. The term ‘nursery’ in this report refers to school-based nursery provision, and ‘REAL practitioner’ to early years staff who worked with families to deliver REAL activities. Nurseries were provided with NatCen’s research information leaflet that set out the evaluation requirements. They were also asked to sign a Memorandum of Understanding (MoU) and an addendum that outlined the new design approach and updated requirements when the trial design changed from nursery-level to family-level randomisation (see Appendices A and B).

Schools that signed the MoU and addendum sent out an information leaflet to parents /carers (referred to as 'parents' in this report) of the children selected for the programme. The information leaflet explained the study and the research activities for the trial, data linkage to the National Pupil Database (NPD), and the transfer and storage of anonymised data to the EEF's archive, managed by FFT Education through the Office for National Statistics. Parents could withdraw their children from data linkage at any point during the study by contacting NatCen. The leaflet also included information on the testing process for the impact evaluation.

## Registration

The trial has been registered with the International Standard Randomised Controlled Trial register, trial number: ISRCTN 23292431.

## Data protection

NatCen stored and handled all data securely and confidentially in line with the U.K. General Data Protection Regulation (GDPR). Only the research team and approved third parties listed in the privacy statement (for example, transcription agency, printers, and registered Speech and Language Therapists) have had access to the data collected as part of the evaluation. School- and child-level data was transferred to NatCen via a secure file transfer service. Reports and other publications arising from this research will not identify any individual nursery, school, staff member, parent, or child. NatCen gave nurseries or individual staff members who no longer wished to take part in the evaluation the option to request to have their data deleted at any point prior to the submission of the draft report.

NatCen was the data controller and additionally processed data. The legal basis for NatCen's processing of the data is 'legitimate interest'. NatCen carried out a legitimate interest assessment which determined that child-, parent-, staff-, and nursery-level data was collected and processed on the basis of legitimate interest. This is because the independent evaluation fed into necessary evidence around what works for children's early literacy development in the early years and the home learning environment, which is currently an important area of policy focus for the DfE. In addition, NatCen balanced the impact its processing might have against the reason for its conducting this study; it was not believed that impact would override interest in any way.

No special category data was collected as part of the evaluation. NatCen issued a privacy notice to all concerned parties, which was published on the study website: <https://www.natcen.ac.uk/taking-part/studies-in-field/evaluation-of-the-real-programme/>

## Project team

### Delivery team

Delivery of the REAL programme was coordinated by staff from the National Children's Bureau, Gill Holden and Ellie Suggate-Francis.

### Evaluation team

All members of the evaluation team were staff at NatCen.

Table 1. REAL evaluation team

Name	Role	Description of responsibilities
<b>Children and families team</b>		
Dr Svetlana Speight	Research director, Research lead (May 2020 onwards)	Principal investigator from May 2020 onwards; overall study lead and senior oversight of IPE.
Dr Fatima Husain	Research director, Research lead (Dec 2018 to May 2020)	From December 2018 to May 2020, principal investigator: conceptualisation, logic model, IPE methodology, overall study lead, and senior oversight of IPE.
Dr Yvonne Robinson	Senior researcher	Worked on IPE, final report.

Name	Role	Description of responsibilities
Helena Takala	Senior researcher	Worked on IPE, final report.
Harriet Read	Researcher	Worked on IPE, final report.
Alina Fletcher	Researcher	Worked on IPE, final report.
Dr Berenice Scandone	Senior researcher	Worked on IPE.
Hannah Piggott	Senior researcher	Worked on IPE and on baseline child assessments.
Helen Burridge	Researcher	Worked on IPE and on baseline child assessments.
Sarah Morris	Research director	Logic model.
Migle Aleksejunaite	Senior data manager	Management of sample files and survey datasets.
Jessica Messling	Research data manager	Preparation of survey data for analysis.
<b>Evaluation team</b>		
Robert Wishart	Research director	Lead on impact evaluation, statistical analysis plan.
Kostas Papaioannou	Senior researcher	Analysis of compliance spreadsheets.
Ben Stocker	Researcher	Analysis of compliance spreadsheets.
Martina Vojtkova	Director of Policy Research Centre	Senior oversight of impact evaluation.
Dr Rukmen Sehmi	Senior researcher	Worked on impact evaluation.
Anysia Nguyen	Researcher	Worked on impact evaluation.

## Methods

### Trial design

This evaluation was originally designed as a two-arm cluster (nursery-level) randomised controlled efficacy trial. Preparations for the trial started in early 2019. The evaluation design was later changed due to difficulties experienced by the delivery team in recruiting a sufficient number of nurseries. This was largely due to nursery capacity, lack of buy-in, and nurseries not wanting to be in the control group.

The revised design was a two-arm, multi-site, family-level randomised controlled efficacy trial. It was designed to measure the impact of the REAL programme on early literacy development of three- to five-year-olds in schools with nursery settings in the North West of England. The primary outcome of interest was early literacy development as measured by the Preschool Early Literacy Indicators (PELI) assessment.<sup>9</sup> The secondary outcomes were emergent writing skills measured using the Sheffield Early Literacy Development Profile (SELDP; Nutbrown, 1997) and children's home learning environment (HLE), assessed through a 12-item instrument (Niklas et al., 2016).

Children were randomised either to a treatment group receiving the REAL programme or to a control group receiving 'business as usual' teaching and support from the school staff. NatCen did not offer any incentives to families and schools for taking part in the trial, although there were incentives for completing in-depth interviews and taking part in case studies (see section Research Methods). The delivery team at NCB administered unconditional incentives to control group parents in the form of books. Families in the treatment group did not receive any financial incentives from the delivery team on the basis that it was anticipated that they would be benefitting from the intervention. A detailed description of the trial design and its rationale are included in the study protocol.<sup>10</sup>

The impact evaluation of the REAL programme was cancelled in March 2021 because of the implications of the COVID-19 pandemic for the programme implementation and data collection (see Introduction). The collection of data on the cost of the programme was also cancelled. This was to avoid overburdening schools during the COVID-19 pandemic with data collection that was no longer essential to answering the key research questions.

The IPE continued over the extended programme delivery period.

### Participant selection

#### Schools

##### *Eligibility—nurseries and practitioners*

The REAL programme evaluated in this study was targeted at school-based nursery settings in the North West of England. NCB worked with local authorities to identify nurseries to take part, advising them to focus on those in areas of relative deprivation or with comparatively low Early Years Foundation Stage Profile results for early literacy. The eligibility to take part in the trial was based on:

- **setting type**—only school-based settings with both a nursery and a reception year were eligible;
- **no prior involvement**—only settings and practitioners with no prior involvement in the programme were eligible; and
- **availability**—the school's early years coordinator, in conjunction with the school headteacher, needed to identify one qualified Early Years Foundation Stage Profile teacher to undertake training and commit a half-day per week on programme delivery.

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<sup>9</sup> <https://acadiencelarning.org/acadience-reading/prek-peli/>

<sup>10</sup> The evaluation protocol can be found [here](#).

All nurseries were also required to identify a key point of contact to support NatCen's evaluation activities.

### *Recruitment and attrition*

In the original design, the intention was to recruit 120 school nurseries so that 60 settings would be randomised to receive the intervention and 60 settings to a 'business as usual' control group. The delivery team at the National Children's Bureau were responsible for the recruitment, with the support from participating local authorities. By the deadline of July 2019, they had only signed a Memorandum of Understanding (MoU) for the intervention with 62 school nurseries. This number of nurseries was too low for the planned cluster randomised controlled trial (RCT).

After discussions between the EEF, NCB, and NatCen, NatCen changed the design to a two-arm, multi-site, family-level randomised controlled efficacy trial. Of the 62 nurseries recruited into the trial by NCB, nine were not able to take part. This was for a number of reasons including settings not providing child lists in time for baseline assessments and randomisation (five), settings taking part in another EEF intervention with the same cohort of children (two), one setting realising it did not cover the correct age range of children for the intervention, and one setting no longer being able to commit to the trial because of staff changes over the summer of 2019. This left a sample of 53 nurseries where children were randomised to a treatment or a control group.

Over the course of the evaluation, ten nurseries (19%) withdrew from the trial leaving 43 (81%) continuing to take part until the end. The reasons for withdrawal were all to do with staff capacity, including those related to COVID-19 and associated pressures on staff workload and capacity.

## **Children**

### *Eligibility*

Nurseries agreeing to participate in the trial were asked to identify children eligible to take part. Eligibility was based on:

- **age of child**—children needed to be three years old in August 2019; and
- **potential need for additional support in early literacy**—based on practitioners' prior knowledge of the child and of the child's parent(s).

In practice, nurseries used a broad range of reasons for selecting children into the trial, including children for whom English was an additional language (EAL), summer-born children, children with poor attention skills or behavioural issues, as well as parents' availability and willingness to participate. In some cases, where the setting did not have many children enrolled, the whole cohort of nursery children was considered eligible to take part.

### *Recruitment, randomisation, and attrition*

Parents of eligible children were invited to take part in the trial. NatCen provided an information leaflet for the nursery and a parent information leaflet along with the privacy notice for the study so that all nurseries and parents were fully aware of the requirements of the evaluation. Only one parent per household was named as the child's representative for all purposes of the trial. However, for practical reasons, more than one adult per household could take part in a face to face meeting where the practitioner informed the parents of the nursery's involvement in the trial and of the possibility of receiving an early literacy intervention. They explained how the randomisation process would work and that the trial would involve the processing of personal data and future linking of trial test results to their child's Early Years Foundation Stage Profile (EYFSP). Parents who agreed (verbally) to take part and did not withdraw their child from data processing were considered recruited into the trial sample. Nurseries were required to enter details of recruited children and parents into a template provided by NatCen. NCB collected and collated those templates from the nurseries and shared them with NatCen using a secure server.

Once parents had been recruited into the trial and lists of children had been passed on to NatCen via NCB, NatCen used specially recruited and trained speech and language therapists to administer baseline assessments of all children using the PELI and SELDP instruments. A completed PELI assessment was a condition for taking part in the impact evaluation, with additional conditions being that children had not moved

nursery at the time of randomisation and parents had not withdrawn their child from the trial. In total, 679 children (341 treatment, 338 control) from 53 nurseries were included in the impact evaluation. We also randomly allocated families of 40 additional children to the intervention (22) and control conditions (18). These families were not included in the impact evaluation because they did not complete baseline testing but were included in the implementation and process evaluation (IPE). Another 21 children were not randomised as they did not meet at least one of the eligibility criteria listed above. Where nurseries included twins or siblings in the same year group, they were randomised as one unit on the basis that they had the same home environment. Full details on the randomisation are included in the protocol.<sup>11</sup>

Over the course of the evaluation, a number of children dropped out of the trial; the main reason for the drop-outs was the intervention spanning two academic years—nursery and reception—and a substantial proportion of children moving to a different school to start in reception. Additional reasons for child attrition included families moving out of the area (including abroad), family pressures resulting from COVID-19 (for example, home learning for multiple children), family bereavements, and children becoming Looked After Children. Where a child moved to a school that was already part of the REAL programme, parents continued to take part either with the previous REAL practitioner or one in the new school, based on parental preference. Where a child moved to a school that was not already part of the REAL programme, NCB tried to recruit the new school into the trial for the remaining school terms by sending several emails and offering an incentive. However, these efforts did not result in any new schools being recruited.

While every effort was made to update the study sample file after each child withdrawal, obtaining accurate information from schools via NCB about which children dropped out of the evaluation and why was a challenge. This was particularly the case once children started in reception year and we needed each school to update us on which children stayed at their school and which left. Once the impact evaluation was cancelled in March 2021, we continued to record child withdrawals when NCB informed us; however, when children moved to a new school that was not part of the project, it was not always possible for NCB to find out which school they had moved to. This means that we do not hold accurate information about how many children were still in the evaluation across the 43 schools that were still taking part at the end of the intervention. In the endline survey of practitioners as part of IPE, 69% reported that at least one child at their nursery dropped out of the REAL programme since starting it in their nursery year.

## Implementation and process evaluation

### Research methods

The IPE synthesised the data collected through three main research methods: observations, surveys, and interviews. We conducted the following research activities:

- observations of training and networking events;
- two surveys (baseline and endline) of practitioners taking part in the intervention;
- three surveys (baseline, interim, and endline) of parents taking part in the intervention;
- interviews with practitioners and parents, including as part of case studies; and
- compliance data collection.

We made a number of changes to the IPE design due to the COVID-19 pandemic. These were mostly because of changes to the delivery of the intervention. The original IPE design included observations of literacy events and home visits. These were no longer applicable, as the literacy events had to be cancelled and home visits were being delivered remotely (for example, practitioners dropping off resources followed by a phone call with the parent), and therefore could not be observed. In the absence of observations of home visits, we agreed with the EEF to change the timing and mode of second case study interviews with practitioners. Originally, those interviews were meant to take place face to face just before an observation of a fourth home visit to a family (that is, at the mid-point of the intervention). The mode was changed to telephone or online interviews (via MS Teams) and the timing was shifted towards the end of the intervention so that all practitioners (that is,

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<sup>11</sup> The evaluation protocol can be found [here](#).

original case study practitioners and also the additional practitioners) could be interviewed in the same time period, using the same topic guide. In addition, after the impact evaluation was cancelled we removed the planned eight interviews with parents of children in the control group from the IPE design.

#### *Observations of the training event (Appendix E)<sup>12</sup>*

- The training of practitioners in how to deliver the REAL programme took place over four days in January 2020 in Sheffield. Members of the evaluation team observed sections of the second and third days of that training. The aims of these observations were:
- to gather information on coverage of training and practitioners' responsiveness to it;
- to obtain detailed information on what the practitioners were asked to do and the full range of materials available to them; and
- to gain insights into the specificity and flexibility of the REAL programme and how it was communicated to practitioners.

These observations were conducted by one researcher per training day. Researchers took notes using a template, which was specially designed based on the research questions and the training day agenda. The mode of the observations was in-person. The duration of each observation was one day.

#### *Observations of networking events (Appendices F and G)*

The delivery team organised networking events for REAL practitioners in September 2020 and April 2021 (one event per geographical area of the intervention in the autumn and one in the spring). Members of the evaluation team observed two of these in the autumn and two in the spring. The aims of these observations were:

- to build an understanding of delivery issues encountered by practitioners and how those were addressed; and
- to obtain information on knowledge exchange and changes to practice discussed by practitioners.

These observations were conducted by one researcher per event. Researchers took notes using a template, which was designed based on the research questions and the agenda. The mode of the observations was online as the events were conducted online using Zoom software. The duration of the events was two hours in the autumn and one and half hours in the spring, with an option for practitioners to stay longer to ask questions of the delivery team.

#### *Surveys of practitioners—baseline and endline (Appendices H and I)*

The baseline (pre-intervention) survey of REAL practitioners aimed to capture information on the key challenges in relation to early literacy development of children, practitioners' levels of experience, reasons for taking part in REAL, how parents were approached about REAL, previous or additional early literacy interventions the nursery was engaged in, and what 'business as usual' looked like in relation to interaction with parents. The survey was designed in-house by NatCen and took place in October 2019. The mode of data collection was online. No incentives were used. The expected completion time was ten minutes. The response rate achieved was 98% (52 out of 53 practitioners completed the survey).

The endline (post-intervention) survey collected information about programme delivery (in-person and remotely), including details of the number of home visits made in different time periods and what those home visits comprised (for example, resources used and modes of communication with parents). Practitioners were asked to reflect on parental engagement and how well different resources and modes of communication worked during remote delivery. The survey also collected information on practitioners' attendance at the networking events and their views on the original training event. We also asked about perceived outcomes of the programme following the logic model for the intervention. Finally, the survey included questions about the perceived impact of the COVID-19 pandemic on children's learning and how effective the programme was in addressing gaps in children's early literacy that were linked with school closures. The survey was designed in-

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<sup>12</sup> All the appendices can be found in a separate document of technical appendices published alongside the report.

house by NatCen and took place in June 2021. The mode of data collection was online. No incentives were used. The expected completion time was ten minutes. The response rate achieved was 86% (37 out of 43 practitioners). (There were 43 schools remaining in the evaluation at this point compared to 53 at the start.)

#### *Surveys of parents—baseline, interim, and endline (Appendices J, K, and L)*

The original objective of the parent surveys was to collect a measure of the home learning environment (HLE) at three time points so that changes in HLE could be compared between treatment and control groups and the HLE index could be analysed as a secondary outcome. However, as a result of COVID-19, the evaluation team and the EEF agreed changes to the objectives and design of this IPE component. Instead of comparing changes in the HLE between treatment and control groups over time, we examined changes in the HLE in the treatment group only. In addition, we added new objectives to capture information on remote schooling during partial school closures as well as parents' perceptions of the REAL programme.

Changes made to the surveys included adding an additional module of questions to the interim survey about whether children taking part in the evaluation attended school during the period from the Easter holidays to May half-term 2020, when schools were partially closed. If not, parents were asked what schoolwork schools set for them, how much of it they completed, and whether parents felt they were spending more or less time than usual doing HLE activities with their children during this period. This module of questions was repeated again for the endline survey but for the period from January to February 2021 when schools were partially closed again. Lastly, the endline survey included a module of questions about access to IT technology and the internet as well as parents' perceptions about the programme (for example, how helpful different resources and modes of communications with their REAL practitioner were and whether they found the programme helpful overall). An additional change to the parent survey design was that only parents of children in the treatment group were invited to take part in the endline survey: in the absence of an impact study, control group data was no longer needed data as the decision had been made not to report on control group activity.

The parent surveys were designed in-house by the evaluation team at NatCen. They were paper self-completion surveys distributed to parents via practitioners and afterwards sent to NatCen by the same practitioners for processing. The baseline survey was four sides of A4, the interim survey was two sides (not including the front page with the name of the child and the school, which parents were instructed to tear off before returning the questionnaire to the practitioner), and the endline survey was four sides (not including the front page with confidential data). The baseline survey took place from September to November 2019, the interim survey in October and November 2020, and the endline survey from May to July 2021. No incentives were used. At baseline, the response rate was 72% (543 completed questionnaires out of 753 issued); at the interim point, the response rate was 40% (256 of 643 issued), and at endline, the response rate was 45% (127 of 285 issued).

However, the estimates of response rates to the interim and endline survey should be treated with caution because of problems with recording child withdrawals from the evaluation discussed earlier in this section. It is likely that the response rates we report here for the interim and endline surveys are somewhat lower than the 'true' figures because of some ineligible children being included in the base.

Data collected from the control group parents was not analysed and is not reported on here. In the absence of an impact study, this report focuses exclusively on data collected from treatment group parents in line with IPE objectives.

In all three parent surveys, parents were asked to fill in the Home Learning Environment index, which asked them what home learning activities (such as drawing, singing, or games) they had taken part in with their child over the previous seven days (Niklas et al., 2016). The surveys asked about 12 activities in total.<sup>13</sup> Each question was scored from zero (where the parent did not do that activity with their child in the past seven days) to seven (where the parent did that activity every day). Given the total number of activities asked about was

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<sup>13</sup> The activities asked about were: reading to the child, telling a story, drawing pictures, musical activities, board games, everyday activities like cooking, games outside, learning letters or alphabet, learning numbers and shapes, computer games/internet, messy activities like painting, and activities outside of the home such as ballet or swimming.

12, the values of the HLE index varied from zero to 84 (where all of the 12 activities were done for seven days). If one or more questions in the HLE index were not answered, the HLE index for that parent was not calculated.

#### *Interviews with practitioners and parents (Appendices M, N, and O)*

The IPE design included in-depth research on nursery-parent interactions, which was based on a case study approach. There were eight case studies completed in total. They were sampled based on the local authority area, practitioners' previous experiences of conducting home visits, number of pupils in the evaluation, proportion of pupils eligible for the Early Years Pupil Premium, and proportion of pupils with English as an Additional Language (EAL). The original design was for each case study to consist of two interviews with the same practitioner (in the beginning of the programme delivery and towards the end) and interviews with two parents with whom that practitioner worked on the REAL programme. However, only five of the completed eight case studies include both the early implementation and the endline practitioner interview as well as interviews with parents. This was because of school-level attrition from the programme, practitioners being reluctant to take part in an endline interview, and difficulties recruiting parents to complete interviews. The other three case studies, which replaced the original case studies, do not include practitioner early implementation interviews. In addition, while originally the case study design also included an observation of a home visit, this component was not included once the delivery switched from in person to remote.

The aim of the *practitioner early implementation interview* was to gain insights into their planning and gather early impressions from the programme after carrying out one or two REAL visits. Interviews were semi-structured following a set of key themes and related prompts (see Appendix M). These interviews were conducted over the phone from March to June 2020. They were about 45 minutes long.

The aim of the *practitioner endline interview* (including when part of a case study) was to collect data on practitioners' experience of delivering the intervention remotely, their perceptions of parental engagement, achieved impacts, and barriers and facilitators to achieving the intended outcomes. The interview also included questions about the perceived impacts of COVID-19 on children's learning and parental engagement with children's learning, as well as about the extent that the REAL programme helped address impacts of the pandemic on the children and their families. Endline interviews were semi-structured and followed a set of key themes and related prompts, reflecting the logic model (see Appendix N). They were conducted over the phone in May and June 2021 and were, on average, 55 minutes long.

The aim of the *parent interview* was to capture parents' experiences of home learning and of taking part in REAL home visits (in-person and remotely). The interviews also included questions about parents' views of the impacts of the COVID-19 pandemic on home learning and the relevance of the REAL programme for them and their child. We asked practitioners to recruit two parents per school. We instructed the practitioners that, ideally, we wanted to interview one parent who engaged well with the programme and one who struggled so that we could gain a better understanding of barriers and facilitating factors, however, in practice, the data collected from the parent interviews suggested that all parents who were interviewed were fairly well-engaged. Parent interviews were conducted over the phone in May and June 2021. They were semi-structured and followed a set of key themes and related prompts (see Appendix O). Interviews lasted up to 30 minutes.

In total, we conducted the following number of interviews:

- practitioners—eight early implementation interviews as part of the original case studies;
- practitioners—16 endline interviews: five as part of the original case studies, three as part of new/replacement case studies, and eight other interviews with practitioners; and
- parents—15 interviews: two parents per school in seven case studies and one in the eighth case study.

The eight schools participating in the case studies each received a £50 e-voucher from Love2Shop. The 15 parents participating in the interviews each received a £20 e-voucher from Love2Shop.

The original study protocol also included a plan to conduct eight interviews with control group parents towards the end of the intervention. These interviews were cancelled when the impact study was cancelled.

### *Compliance data collection*

Once a term, practitioners were asked to submit data on how many REAL visits each child taking part in the evaluation received, some information about those visits, and some information about children in the control group. Practitioners sent those Excel spreadsheets to NCB. NCB checked them for completeness, liaised with schools about any inaccuracies and then uploaded final spreadsheets onto a secure server for the NatCen evaluation team. The following number of schools completed those returns:

- spring term 2019/2020—49 schools (out of 52 schools in the evaluation at that point);
- summer term 2019/2020—no compliance forms requested as the intervention was paused;
- autumn term 2020/2021—35 schools;
- spring term 2020/2021—32 schools; and
- summer term 2020/2021—31 schools (out of 43 schools remaining in the evaluation at that point).

Feedback from practitioners to NCB suggested that they struggled with accurately recording details of their activities (for example, because of low levels of Excel skills). In addition, analysis of the data itself suggests that there were a lot of errors and gaps in the data that were submitted (and those were not rectified before the spreadsheets were shared with the evaluation team). One of the issues was erroneous pupil IDs. Across all schools, the returned spreadsheets contained 112 pupil IDs for pupils in the treatment group, and they were missing 80 valid IDs in the treatment group. Another issue was data gaps. Returns from all four school terms were available for only 107 children with valid IDs (which is 29% of 363 children randomised to receive the intervention). For the remaining children, data was returned in some but not all four school terms, so the total number of REAL visits received could not be calculated accurately. Moreover, where children were included in spreadsheets for all four school terms (the 107 children mentioned above), some of the data for these children was missing (for example, the cells for dates of REAL visits and activities completed were occasionally empty). Having considered the scale of errors and gaps in the compliance data, we decided not to include analysis of compliance spreadsheets in this report. Where we discuss dosage in the report, we draw on the practitioner endline survey data.

We note that if the impact study was not cancelled, lack of accurate compliance data would have been a major limitation of the study. However, we are confident that the data on compliance we have from surveys and in-depth interviews is sufficient to allow us to comment on perceived outcomes.

### **Analysis**

Interviews were digitally audio-recorded and professionally transcribed. We managed the qualitative data using the Framework approach (on Excel software), which means that the collected data is summarised and collated by theme and case. In this project, we used a mixed deductive/inductive approach to charting, with data synthesised according to themes pre-established by the evaluation team (and that had been set out in the topic guides), along with emerging themes. Thematic analysis aimed to describe patterns in the data in relation to these themes.

Quantitative data was analysed by means of frequencies, cross-tabulations, and dependent t-tests using IBM SPSS Statistics 25. Syntax files were used to ensure a record was kept of how analysis was conducted. Cases with missing data were excluded from the analysis.

Anonymised quotes from practitioner and parent interviews, and from responses to open-text survey questions, were included to illustrate IPE findings.

Table 2: IPE methods overview

Research methods	Data collection methods	Participants/data sources	Data analysis methods	Research questions addressed	Implementation/logic model relevance
Quantitative	Survey (baseline)	REAL practitioners (52/53)	Descriptive analysis	RQ1	Programme relevance and appeal; usual practice
Quantitative	Survey (endline)	REAL practitioners (37/43)	Descriptive analysis	RQ1, RQ2, RQ3, RQ4	Programme delivery; fidelity and dosage; responsiveness; perceived outcomes
Quantitative	Compliance monitoring forms	REAL practitioners	Descriptive analysis (not included)	RQ1 (analysis not included)	Fidelity and dosage
Quantitative	Survey (baseline)	Treatment and control parents (543/753) (data from control group was not analysed)	Descriptive analysis, dependent t-tests	RQ2	Home learning environment
Quantitative	Survey (interim)	Treatment and control parents (256/643) (data from control group was not analysed)	Descriptive analysis, dependent t-tests	RQ2	Home learning environment
Quantitative	Survey (endline)	Treatment parents (127/285)	Descriptive analysis, dependent t-tests	RQ1, RQ2, RQ3, RQ4	Home learning environment, programme delivery
Qualitative	Observations	Practitioner training (2 days of the 4-day long training)	Thematic analysis	RQ1, RQ4	Programme delivery; fidelity
Qualitative	Observations	Networking events (4)	Thematic analysis	RQ1, RQ3, RQ4	Programme delivery; fidelity
Qualitative	Case-study interviews (early implementation)	Practitioners (8)	Thematic analysis	RQ1	Programme relevance and appeal; early implementation; usual practice
Qualitative	Case-study interviews (endline)	Practitioners (8)	Thematic analysis	RQ1, RQ2, RQ3, RQ4	Programme delivery; perceived outcomes
Qualitative	Case-study interviews (endline)	Parents (15)	Thematic analysis	RQ1, RQ2, RQ3, RQ4	Programme delivery; perceived outcomes
Qualitative	Interviews with additional practitioners (endline)	Practitioners (8)	Thematic analysis	RQ1, RQ2, RQ3, RQ4	Programme delivery; perceived outcomes

## Timeline

Table 3: REAL evaluation timeline

Dates	Activity	Staff responsible / leading
Jan–Mar 2019	Finalise recruitment materials, number of schools to be recruited	NCB
Mar–Jul 2019	Recruit schools, sign MOUs	NCB, REAL LA leads
Sep–Nov 2019	Child identification for the trial, parent information leaflets handed out, child lists sent to NatCen	NCB, schools, NatCen
	Parent baseline survey administered, treatment and control	NatCen, schools
	REAL practitioner baseline survey administered	NatCen
Oct–Dec 2019	Baseline assessment of children	SLTs, NatCen
Jan 2020	Randomisation of children	NatCen
Jan 2020	Schools informed of randomisation (after baseline testing)	NCB
Jan 2020	NCB delivers the REAL programme training to practitioners; observations conducted by NatCen	NCB, NatCen
Jan 2020	Schools start delivering the REAL programme	Schools
Mar–Jun 2020	Early implementation Interviews with REAL practitioners conducted	NatCen
<i>Apr–Aug 2020</i>	<i>REAL programme delivery paused due to COVID-19 school closures</i>	
Sep–Dec 2020	Children move to reception year, updated child lists requested from schools	NCB, schools
	NCB hold networking events – observations conducted by NatCen	NCB, NatCen
	REAL programme delivery restarts using remote mode	Schools
	Parent interim survey administered, treatment and control	NatCen, schools
Apr–Jun 2021	NCB hold networking events; observations conducted by NatCen	NCB, NatCen
	Parent endline survey administered, treatment only	NatCen, schools
	Practitioner endline survey administered	NatCen
	Telephone interviews with practitioners and parents	NatCen, schools
	REAL programme delivery completed	Schools
Jul 2021–Jan 2022	Data management, analysis, and reporting	NatCen
Nov 2021	NCB hold an end-of-programme event for the participating schools; NatCen present at the event on the evaluation methodology	NCB, NatCen
Jan 2022	First draft of the report submitted to the EEF	NatCen

## Implementation and process evaluation results

### Usual practice

This section explores usual practice in nurseries. 'Usual practice' refers to nurseries' typical engagement with *all* nursery children's parents/carers *prior* to the REAL programme delivery period. It does not refer to the engagement with control group children over the course of the trial. As findings in this section relate to the period immediately before the start of the trial (early autumn 2020), they do not cover usual practice in the context of COVID-19. The evaluation did not collect data on usual practice post-intervention, including in the control group. This approach was taken in response to the cancellation of the impact assessment and the revision of the IPE research objectives.

### Usual level of engagement with parents

*Nursery engagement with parents prior to children starting nursery*

#### Home visits

The majority (73%) of practitioners (staff delivering REAL activities in this report) who responded to the baseline practitioner survey (52 in total took part in the baseline survey) said that visiting nursery children and their parents at home was part of their usual practice. Of those nurseries that conducted home visits, the vast majority (92%) said that the only home visit they conducted with families occurred prior to children starting nursery.

In interviews, practitioners spoke about these 'transition' home visits being a key interaction with parents. They described how they were used to gather information about families and children in their home environment, introduce families to the nursery, and describe what the nursery year would look like to children. They reported that transition home visits typically occurred in the summer prior to children starting nursery, or throughout the year for children starting later. Home visits lasted between 30 to 90 minutes and involved one or two staff members (if two, usually one qualified teacher and one other member of staff) visiting children at home. Nurseries also, in some cases, offered parents activity packs for children to complete in the summer before starting nursery.

Nurseries typically offered one or two nursery visits to families prior to their children starting. Where two visits were offered, one usually happened before and one after children were offered a place. Visits either took place during or after the school day and allowed parents to look around the nursery, meet key members of staff, and provided an opportunity for them to discuss their child's transition to nursery and any concerns they had. There were differences across nurseries in whether nursery visits were a mandatory or optional activity for families. Practitioners working in nurseries where home visits were optional reported varied levels of uptake.

There were also reports from practitioners that visits to new children sometimes occurred at those children's early years settings instead of at home (in cases where children were enrolled at another early years setting prior to starting at the nursery). Practitioners reported that in the past, they used to conduct visits at *both* children's homes and early years settings but those visits had been reduced in recent times and now occurred in only one place.

*'We have either a home visit or a visit to the children's setting. If the child is not at a setting, any early years setting at all, then we do go to the home visit. This is a new procedure that we've only just done this year. We've got a new head who wanted to change how much visiting we did, so it's either/or' (Practitioner 7, early implementation interview).*

There were also nurseries or nursery practitioners that conducted no home visits or visits to early years settings at all. Practitioners explained that this was due to lack of capacity. In these nurseries, practitioners reported that home visits used to occur a few years ago but the decision was taken by school leadership teams to remove them due to high numbers of children on roll or applying for places as well as difficulties relating to staffing and resourcing.

## *Nursery engagement with parents once children have started nursery*

### **'Stay and play' sessions and other events**

Once children had started nursery, practitioners reported that parents were encouraged to stay after dropping off their children (for 30 minutes or so) to help with their child's transition to nursery. Typically, parents would then stay for less and less time as children felt more comfortable in the nursery environment. Practitioners explained how parental uptake of this option was extremely varied and depended largely on whether parents had the time to stay.

The majority (87%) of practitioners who responded to the baseline survey said their nursery offered 'stay and play' sessions. In interviews, practitioners described how these sessions focused on arts and crafts, early literacy and maths, and were a chance for practitioners to inform parents about how they could best support their child's learning. Practitioners reported variation in how these sessions were administered. There were nurseries which only held 'stay and play' sessions as part of children's 'phasing-in' process in the weeks after they started. Others held these sessions regularly, either every term or half-term. In addition, there were differences in whether sessions were 'optional' or 'mandatory' (that is, strongly encouraged by the nursery). In some nurseries, the first few 'stay and play' sessions were mandatory because the nursery felt it was important to meet parents face to face. Other nurseries only had one mandatory session and the rest were optional. In others, all sessions were optional. Practitioners reported very mixed levels of engagement with optional 'stay and play' sessions. On the whole, practitioners thought it was difficult to engage parents in this way due to their busy schedules.

Other events included:

- information evenings—just over half (60%) of practitioners who responded to the baseline survey reported that their nursery held information evenings for parents;
- themed events—held every term or half-term to promote different elements of the EY curriculum or focusing on particular activities (such as gardening and crafts) or themes; parents were invited to come into the nursery and involve themselves in activities; and
- whole-school events (such as book fairs).

### **Home visits and phone calls to address concerns**

A very small minority (3%) of practitioners who responded to the baseline survey said that home visits were conducted when there was a particular issue with a child. In interviews, practitioners reported that occasionally a member of staff would visit a family at home to discuss a serious concern about a child or if there was a safeguarding issue. However, it was much more common for nursery staff to make phone calls. The vast majority (92%) of practitioners who responded to the baseline survey reported that they had made phone calls to families to address an issue.

Practitioners did not discuss any instances of nursery staff making home visits in a routine manner throughout the school year for any other reason than to address concerns about a child.

### **Ongoing communications**

All (100%) of the practitioners who responded to the baseline survey said they had informal contact with parents and carers (for example, a quick chat at school drop-off or a small note in children's workbooks). In interviews, practitioners also described having daily contact with parents and carers at the school gate before and after school.

Practitioners described how nurseries also sent out weekly newsletters to families. They included content such as explanations of learning objectives and suggestions for practical, accessible activities for families to do with children. These practitioners remarked that newsletter activities were very similar to those included in the REAL programme.

Nurseries also had regular communication with families through online platforms (for example, Tapestry). Communication included updates about children's progress and information about upcoming events taking place in school.

## Fidelity

This section explores implementation fidelity, or the extent to which the REAL programme was delivered as intended. This includes how much of the intervention was delivered (dosage), the extent to which delivery adhered to the intended model (adherence), and how well the intervention was delivered (quality). As most of the intervention was delivered after the COVID-19-related pause and therefore remotely rather than in-person as originally intended, the fidelity is assessed in relation to the remote model.

*RQ1, part 1: How is the REAL Programme delivered?*

### Training

#### *Initial practitioner training*

Prior to delivery, practitioners were required to take part in REAL training. There were four days of training across two weeks in January 2020 with a REAL home visit to a family between days two and three. Practitioners from different areas taking part in the programme participated together in face to face training sessions.

All (100%) practitioners who took part in the endline survey found the training to be 'fairly helpful' or 'very helpful' in preparing them for programme delivery. In interviews, practitioners also described feeling well prepared for in-person REAL work with families.

*'I felt really, really prepared and I think that was because of the training. If we hadn't have had that sort of training and that time, then I don't think I would have been very confident at all'*  
(Practitioner 1, early implementation interview).

Practitioners described the training content as relevant and engaging, even if familiar to more experienced practitioners. They thought the balance between theory and practical elements (such as problem solving) was well managed and helped prepare them for in-person delivery. Observations of training showed that through the different elements of training, trainers were able to give specific suggestions and recommendations in relation to preparation for home visits, the format, structure, and focus of home visits, and the logistical and practical aspects of home visits. Trainers also highlighted the need for flexibility and adaptation when delivering.

*'There were opportunities to get the theory first and then to have the opportunity to look at different activities and think about how we might plan that for our particular cohort of children. There was a good balance between sitting and listening and direct teaching, and then also application of what we had been taught and what that might look like in our own setting'*  
(Practitioner 2, early implementation interview).

Researchers who observed the training found the delivery to be professional and authoritative. Trainers explained concepts methodically and dealt with practitioner questions well, although there were some instances of complex and inaccessible language being used. Practitioners also reflected that delivery was high quality and that they came away with a sound understanding of the ORIM Framework. They thought the trainers were approachable and put them at ease, making it easier to ask questions and voice concerns about home visits. Practitioners described the trainers as knowledgeable, experienced, and well-placed to deliver the training effectively as they had delivered the course elsewhere. Co-delivery added to the range of experience on the training team and enhanced the quality of delivery.

We observed that practitioners were highly engaged in training sessions, listened attentively, and made thoughtful contributions. They participated in practical activities enthusiastically. Practitioners conveyed that the variation in activities and the relevance of the content helped them to engage.

However, observations of the training found that while the aims and learning objectives of sessions were covered on the whole, some content was rushed or omitted entirely towards the end of the schedule. Practitioners similarly reflected that there was a lot of content to get through in the allotted time. They felt some activities, especially the reflective writing, could have been shortened to help with timings.

*'I really enjoyed the reflective writing at first, but I think as it went on, we had quite a lot of opportunities to reflect. I think that was really nice at the beginning but towards the end of it, I*

*think everyone was a little bit, like, we've got to grips with this now; I don't think we need to do quite as much reflection' (Practitioner 4, early implementation interview).*

Less confident practitioners also thought that more time for role-playing would have helped them feel more prepared. These practitioners described still feeling very nervous about home visits even after the training.

Additionally, one view among practitioners was that the location and structure of the training was a challenge. In some cases, practitioners noted that they had to travel quite long distances to attend (although travel and accommodation was refunded). In addition, those with very busy schedules or additional responsibilities in school found that attending training on two separate weeks was too much school to miss and they would have preferred a condensed timetable. However, others really valued the opportunity to have conducted a home visit prior to the third day of training, even though it was tricky to schedule. These practitioners liked how the home visit provided useful context for discussion and gave them a chance to explore reflections with trainers and other practitioners.

*'It was quite tricky getting a visit done between the second and third day because of the amount of time we were given to plan it ... but actually that was really useful because it meant we could come back having done a visit and talk about any issues that had been raised and our experiences' (Practitioner 2, early implementation interview).*

### *Networking events*

NCB invited all REAL practitioners to attend four 'networking events' organised by area and attended by the delivery team in autumn 2020 and spring 2021. These events were held using video conferencing platforms. When REAL moved to a remote delivery model, part of the autumn session was used as a refresher training to prepare practitioners for remote home visits and to provide additional support.

Just over half of surveyed practitioners (57%) attended both networking events, according to the endline survey. A significant proportion (37%) only attended one event; 6% attended neither. Practitioners who did not attend an event cited COVID-19 as a barrier to participation. They also reported communication and information issues, especially around the second event, which meant they did not know it was happening and missed it for this reason; all teachers, however, had the opportunity to select preferred dates using a Doodle poll.

Of those that attended at least one event, the vast majority (91%) thought the events were helpful (55% reported in the survey that they were 'very helpful' and 36% said they were 'fairly helpful'). Just one in ten (9%) thought they were 'not very helpful'. Practitioners reported that the refresher training segment of the autumn events was very dense, and they preferred the Q&A aspect of the networking events. As shown through observations, this was reflected in practitioners' levels of engagement, which lessened over the course of the lecture style content, perhaps due to fatigue. Practitioners appreciated being able to voice concerns about remote delivery, and hearing from other practitioners was reassuring and an opportunity to share learning. They reported that this aspect of the training mitigated feelings of isolation, which were prevalent with remote delivery. Practitioners also described the practical advice from trainers in response to questions as 'very useful'.

*'Sometimes you go, "Oh, my God, I'm on my own and I just don't know what to do", but having that interaction with the others and seeing where they're doing, and obviously bouncing ideas off each other, it definitely does help' (Practitioner 16, endline interview).*

However, observations found that there was variation across networking events in the extent to which participants were encouraged to raise questions and concerns. In one observed networking event, the Q&A element with the delivery team was not taken up, which we found reduced the overall effectiveness of the event. Additionally, some practitioner groups were more forthright in their discussion of challenges with remote delivery, which made the quality of the discussion higher in some sessions compared with others.

Practitioners reported that the in-person training was much more collaborative than the networking events held using video conferencing platforms as the online mode inhibited participation and networking. Observations of the events showed that some practitioners were muted and had their videos off, meaning they did not contribute to sessions and did not engage with other practitioners.

Practitioners who attended neither, or only one, networking event reported receiving low levels of guidance around remote delivery. Practitioners who *did* attend remarked that they would have felt very confused about remote delivery had they not attended. They suggested that there could have been better communications around events (such as reminders), more events available to practitioners who could not attend, and meeting notes sent around to everybody after the event.

*'It was good to catch up, to see other people who are doing the REAL project in their own school. It was the main thing that kept me in the loop. I think if I hadn't attended, I would have been, like, "What am I doing?"' (Practitioner 1, endline interview).*

## Ongoing support

### Ongoing support from NCB

The vast majority (94%) of practitioners said the support they received from NCB was either 'good' or 'excellent'. Those who accessed the resource bank, set up by NCB on Microsoft Teams, found it to be helpful, although it was not regularly accessed by all. Additionally, practitioners found their contact at NCB easy to get hold of and quick to respond to questions or concerns.

*'With [name of NCB contact], I could message her anytime. I messaged her a few times with a few questions, and she was really good at getting back to me. I felt supported, yes. If I ever was unsure about anything, I could message her and yes, I got a response and I was, like, "Okay, right, that's fine"' (Practitioner 1, endline interview).*

Practitioners described this support as being available as requested. Those who did not get in touch with NCB had minimal ongoing support. This led to some practitioners feeling alone during remote delivery. They thought ongoing support could have been improved through increased levels of proactive contact from NCB.

### Ongoing support from other practitioners

There was wide variation in the levels of peer support REAL practitioners experienced over the course of delivery:

- low-level peer support—some described not being in contact with other practitioners at all outside of networking events;
- medium-level peer support—others set up WhatsApp groups with other REAL teachers (who met in 2020 training); they asked each other how they were and exchanged ideas about activities; some WhatsApp groups had very minimal activity or no activity at all after the start of the COVID-19 pandemic; and
- high-level peer support—three REAL settings worked collaboratively and regularly shared ideas and resources together and communicated via email.

*'One of us would plan some resources and then we would share those resources between us' (Practitioner 5, endline interview).*

Practitioners attributed this variation to the fact that peer networks developed on an individual and ad hoc basis, that is, individuals were allowed to make their own decisions about when and how to engage with each other as opposed to there being formalised means through which peer networks were developed.

Practitioners who delivered REAL with little or no peer support felt there should have been more opportunities to meet with other local practitioners, or at least to have pooled ideas. Not all schools worked collaboratively with others, but practitioners suggested this could have been more encouraged or formally set up through the training events.

*'It would have been helpful to have opportunities where we can discuss with the other practitioners in the schools locally about what they are doing in certain areas, just to support that, because I think that makes a big impact, and it just helps you think about the activities you want to deliver and how you can do it' (Practitioner 15, endline interview).*

## **In-person home visits**

### *Preparing for an in-person home visit*

There was some variation in how practitioners prepared for REAL in-person home visits. Broadly, preparation involved practitioners creating an outline of the home visit and planning three to five different activities to do with children. Practitioners reported thinking about how activities might look in a house setting and basing plans off NCB training guidance, resources, and templates. They also used school resources to help them plan, as well as their own knowledge and experience of early years practice. Practitioners emphasised the use of the ORIM Framework when planning in-person visits and they tended to focus on a particular strand when planning activities for one round of visits.

For in-person home visits, practitioners reported tailoring activities for individual children's interests and needs. After the first home visit, they also used their knowledge of each child's home learning environment and their family situation to plan tailored activities. They considered the types of resources available to families in the home as well as the layout of the accommodation and the people typically present during visits. They then spent time assessing resourcing needs and preparing resources (for example, from shops, collecting resources from within school, and printing).

Practitioners described different levels of time spent planning one visit: this varied between 15 minutes and three hours and between one hour and half a day to collect resources. Those who planned visits that were highly tailored to each child or family tended to spend significantly longer planning than those who differentiated minimally. Practitioners reported using their normal PTA-planning-management time, allocated 'REAL hours', or their own time to complete planning and resourcing.

### *Practicalities of in-person home visits*

- Timing: practitioners tended to schedule visits at the start or end of the day to make easier for parents in terms of travel to and from nursery. They also based scheduling on when it was easiest to provide cover in the nursery or school.
- Length: in-person home visits ranged in length from 35 mins to one hour.
- Location: visits typically took place in the living room or most used communal space in the family's house.
- Individuals present: practitioners reported variation in who was present for REAL home visits. Typically, it was either:
  - one parent (usually the mother) and REAL child;
  - one parent (usually the mother) and multiple children including REAL child; or
  - multiple adults (for example, mother, father, grandparents, aunts, uncles) and multiple children (for example, cousins, siblings, other friends or children living nearby).

The data outlined above suggests a high level of fidelity in the delivery of the programme.

### *Activities during in-person home visits*

Activities for in-person home visits tended to involve:

- an introductory chat—to see how child's day had gone and what they had been up to;
- a recap—to briefly discuss the previous session and to see how the family had got on with the activities;
- planned activities—such as storytelling and reading, scrapbooking and crafting, drawing and colouring, environmental print activities and letter-finding, puppet games, and shopping games;
- unplanned activities—guided by children's own home learning environment and anything they spontaneously wanted to speak about; this sometimes meant that planned activities were longer or shorter than intended or omitted entirely;

- modelling—engaging parents in activities by showing them step-by-step how to do things and explaining why things are done;
- discussion of the ORIM Framework— practitioners discussed the ORIM Framework with parents if they thought parents had good enough levels of English to understand; practitioners reported using a much simplified version of the framework, or not discussing it at all, with parents with lower levels of English; where ORIM was not discussed, this was an adaptation to the guidance as practitioners were advised to discuss the framework with parents as they felt appropriate;
- conversation—with parent(s) around any questions or concerns relating to their child’s communication and literacy development; this also included encouragement and reassurance of parents; and
- suggestions—of activities for parents to do with children before the next visit.

On the whole, home visits adhered closely to NCB guidance on how to conduct a visit (based on reports from the practitioners themselves). In addition, practitioners recognised and responded well to the requirement for flexibility in response to individual needs and preferences.

### Remote home visits

Due to the COVID-19 pandemic, from September 2020, NCB advised that all REAL project delivery was carried out virtually (remotely) and that no home visits were done in-person.

#### *Preparing for a remote home visit*

Practitioners reported planning fewer and simpler activities per home visit when delivering remotely. They felt it was sensible to keep activities simple due to not being present when families completed activities and not being able to model how to do things. This meant that activities for remote visits tended to be chosen based on how well they could be explained virtually and with minimal support.

*‘I didn’t want to overwhelm Mum too much, because I know she’s got her hands full with older siblings, so making activities simpler was important’ (Practitioner 1, endline interview.)*

Although activities were simplified on the whole, this did not represent a deviation from the guidance since practitioners were encouraged to think flexibly and respond to contextual factors.

There was wide variation in the extent to which practitioners were guided by the ORIM Framework when planning activities for remote delivery. Generally, practitioners explained how the ORIM Framework became less of a central focus when planning for remote home visits because activities were based on other priorities (such as appropriateness for remote delivery and ease of explanation). Practitioners also thought ORIM was difficult to convey to parents remotely, especially where there were language barriers. This meant there were increased problems with adherence to the NCB guidance around use of the framework with remote delivery. Even when planning for remote visits, practitioners were expected to plan using the four strands of literacy and the ORIM Framework.

*‘I’ve tried to keep it as basic as I can for them to understand because I felt like when I gave a lot out, which I did in some of the packs, it was too much. “Less is more” became the motto’ (Practitioner 13, endline interview).*

Practitioners also reported much more variation in whether they adapted activities for individual families when it came to remote delivery. They described how they were more inclined to plan the same activity for all the REAL families regardless of individual children’s interests. This was due to increased pressures resulting from the COVID-19 pandemic, increased weariness with the intervention over time, and a feeling of being ‘distanced’ from children and their individual home learning environments. Where tailoring of activities did happen during remote delivery, it was mainly in response to children’s differing communication and literacy levels.

*‘Some of the children we’ve got—one little girl in particular is a fluent reader and really strong writer; that would have seemed a bit silly to be asking her to do things that were a little bit easy for her, so I’ve had to change hers a little bit to try and make them still interesting and fun’ (Practitioner 10, endline interview).*

Practitioners had opposing views on whether planning for home visits took longer for in-person or remote delivery: some thought it took roughly the same amount of time for each whereas others thought that planning for remote home visits took longer since there was more compiling and sending out of resources (sometimes doorstep dropping) as well as filming and navigating the online platforms. However, other practitioners experienced a reduction in planning time for remote delivery because they did not have to travel to, and spend time in, families' homes and they could record one video and send it instantly to all families.

### *Literacy activities*

As discussed above, practitioners reported that activities tended to be less tailored to individual children when using remote delivery. They thought simplicity was key and therefore based activities on day-to-day activities and chores. It was common for practitioners to suggest basic challenges for children to complete at home (for example, finding letters and signs, taking photos, writing shopping lists or diaries, and sending postcards). They also reported that story-based activities were effective in engaging children remotely or through a screen and so these were popular. Story-based activities were sometimes followed by an activity such as arts and crafts centred on story characters, completed independently. Other activities included crafts (for example, making a telescope), gardening (for example, growing a sunflower), and baking. Practitioners described sending resources to parents where necessary.

### *Mode of delivery*

Practitioners and parents reported a number of different modes through which practitioners delivered REAL remotely. Practitioners also used a variety of resources and a combination of methods of communicating with parents.

The following modes of delivery involved parents completing activities with children in their own time and with no in-person support or direction from the REAL practitioner.

### **Physical activity packs**

Nearly all (97%) practitioners said they used activity packs—such as crafts, games, or cooking—during remote delivery. Packs were typically pre-prepared and sent out to families either in the post, on the doorstep, or direct to parents through school pick-up/drop-off. Of those practitioners who used them, 91% said they worked 'very well' or 'fairly well' as a resource.

### **Books, printed resources, and videos**

Other resources included books (used by 86% of practitioners), printed instructions for activities (86%), and videos shared via a website or an app (74%). Most of those who used these types of resources found they worked well—94% for books, 88% for printed instructions, and 85% for videos.

### **Phone calls**

Phone calls were the most common means of communication. The majority (77%) of practitioners reported making phone calls to parents about REAL. Phone calls were used to prepare parents for upcoming activities uploaded to an online platform, to remind parents to do an activity if not completed already, or to talk through activities after physical materials were sent out. Of those practitioners who used phone calls, 83% said they were 'very' or 'fairly' helpful in delivering REAL remotely; one in six (17%) said they were 'not very' helpful or 'not helpful at all'. Those who found them less helpful highlighted that it was incredibly difficult to model activities over the phone without any visual instruction. They also reported frequent instances of parents failing to respond to calls when contacted.

### **Online platforms**

Online platforms (for example, Tapestry, SeeSaw, Showbie, and 2 Simple Evidence Me) and messaging apps (ClassDojo) were used by 71% of practitioners to communicate with parents. They were used to upload instructions for activities, to upload photos or videos of practitioners modelling an activity, or for storytelling. Online platforms were used by parents to share evidence of participation and completion of activities (see follow-up). Of those practitioners who used online platforms, 79% said they were 'very' or 'fairly' helpful in delivering REAL remotely while 21% said they were 'not very' helpful. Practitioners and parents liked how online platforms were familiar (as they were already typically used in schools) and could be used to model activities fairly effectively. However, online platforms were less accessible to families who possessed limited means to access the internet or who experienced connectivity issues at home.

## **School websites**

School websites were also used to demonstrate activities to be done with children at home.

### *Alternative modes of delivery*

The following modes of delivery were more similar to an in-person home visit since they were conducted in real time with the REAL practitioner, parent, and sometimes child present.

### **Video calls (Zoom)**

Less than one third (31%) of practitioners reported having video call contact with parents. Video calls were used to model activities with parents or to complete activities with parents and children present on camera, often with more than one REAL family at a time. Where more than one family was present on the call, this negatively affected adherence to the delivery model as practitioners were unable to have high-quality conversations with parents and they could not properly interact with parents on an individual basis. Of those practitioners who did use video calls, 89% said they were 'very' or 'fairly' helpful in delivering REAL remotely while just over one in ten (11%) said they were 'not very' helpful.

### **'Doorstep' visits**

In-person, socially distanced, 'doorstep' home visits were used by REAL practitioners to engage with the parent(s) and child and model activities in person, but at a distance.

### *Adherence to delivery model*

Where practitioners used different modes to deliver home visits remotely, adherence to the intended delivery model was affected in various ways. There were practitioners who delivered remote visits without having conversations with parents and, in some cases, without modelling activities. These practitioners relied heavily on activity packs and online messaging and did not use phone calls or video calls or upload video clips. Additionally, there were practitioners who modelled activities for parents via video clip but did not have conversations with parents. This meant there were home visits which did not qualify as proper REAL visits because they did not adhere to NCB's stipulations around modelling of activities and high-quality conversations with parents.

### *Follow-up*

Similarly, there was wide variation in the extent to which practitioners followed up with parents after remote visits. There were practitioners and parents who reported that no follow-up occurred at all after some remote visits. Again, this negatively affected adherence to the delivery model. Where some sort of follow-up did occur, typically, parents shared or fed back information about completed activities through online platforms. Practitioners highlighted that it was mainly the most engaged parents who shared evidence of participation in this way. It was less common for practitioners to call parents after the activity to see how it went and to answer questions from parents, although there were some practitioners who did make this type of call.

### *Timeframe*

NCB guidance stated that 'all elements of the remote home visit should be completed within a close timeframe, preferably within a week, rather than over a more prolonged period'. However, practitioners described conducting the different elements of remote home visits over various different timeframes, some longer than one week. Practitioners found it difficult to conduct the entire visit, with follow-up (if it occurred at all), within the period of a week. Reasons for this included practitioners only working part-time, dealing with other work pressures, COVID-19-related pressures such as staff sickness, and parents not completing activities with children in a timely way or not notifying the practitioner of completion. Practitioners and parents reported that during remote delivery, it was common for parents to complete activities over the course of more than a week, delay completing activities due to other responsibilities, or not upload evidence of completing activities.

## **Dosage**

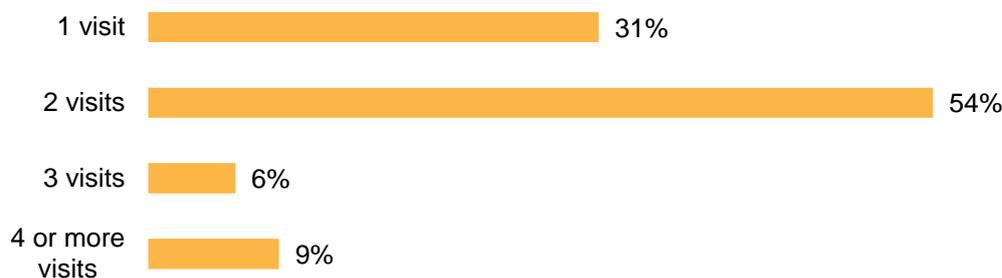
According to the REAL programme logic model, practitioners were expected to deliver a minimum of eight home visits (ideally, ten) per family over the course of the delivery period. Below, we discuss the number of visits delivered before the intervention was paused due to COVID-19 (from January to March 2020), the remaining period of the intervention after the pause (from September 2020 to May half-term 2021), and after the official intervention period was over (after May half-term 2021).

### Home visits delivered prior to March 2020

Once REAL practitioners had completed their training in the programme delivery in January 2020, they could start delivering the programme to families in their treatment group. Typically, they managed to complete two home visits on average per family before the intervention was paused in late March 2020 (54% of practitioners reported in the endline survey that they completed on average two home visits in that period; see Figure 3). Less than one in three (31%) delivered one home visit per family on average, and only a fraction (6%) said they had delivered three on average per family. An additional 9% of practitioners who responded to the endline survey reported that they had delivered more than three home visits per family on average prior to March 2020. However, we have concerns about the accuracy of these reports due to the low likelihood of practitioners having delivered more than three visits per family in such a short timeframe before delivery was paused.

Figure 3: Number of REAL in-person home visits (average per family) delivered from January to March 2020

Base: All practitioners in the endline survey (n=35)

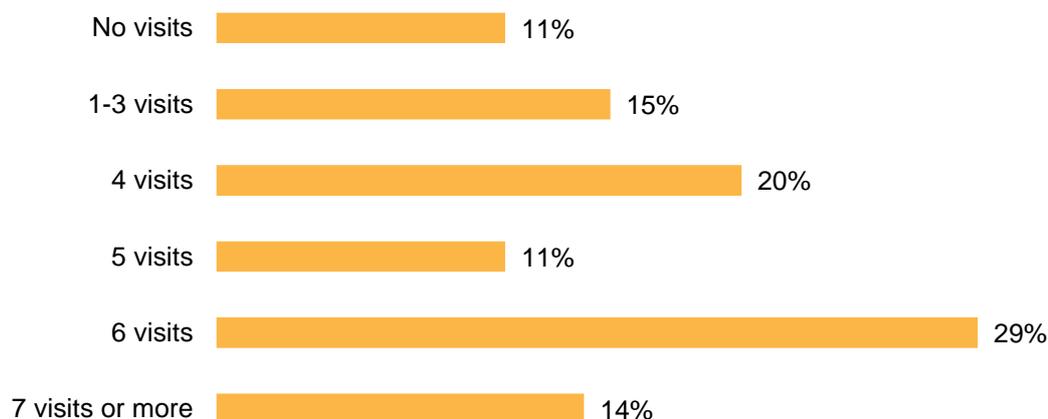


### Home visits delivered between September 2020 and May half-term 2021

Delivery of home visits was paused between March 2020 and September 2020 as a result of the COVID-19 pandemic. Home visits resumed remotely from September 2020. Based on responses to the endline practitioner survey, the average (median) number of visits delivered remotely between September 2020 and May half-term 2021 was four per family (see Figure 4). Over one in ten practitioners (11%) reported that they had delivered no visits at all.

Figure 4: Number of REAL remote home visits (average per family) delivered from September 2020 to May half-term 2021

Base: All practitioners in the endline survey (n = 35)



### Home visits delivered after May half-term 2021

There was no expectation for practitioners to continue delivering home visits after May half-term 2021 as the official delivery period had ended. However, when asked about this in the endline survey (which was conducted in June), about half (51%) of practitioners said they had. Of those who continued delivering REAL visits, 56% delivered one extra visit per family, 22% delivered two extra visits per family, and 22% delivered three extra

visits or more. The likelihood of practitioners being able to deliver three or more visits per family in such a short timeframe is low, though, so these estimates should be treated with caution.

At the time of the endline survey completion, over half (51%) of practitioners said they had plans to deliver more remote visits before the end of the school year.

Although the survey estimates of the number of REAL home visits must be viewed with a degree of caution, there is evidence that many practitioners had a strong level of commitment to the programme, which translated to continuing to deliver visits beyond the end of the official delivery period.

### *Meeting the requirements of the intervention*

As described, practitioners were expected to deliver a minimum of eight home visits (ideally, ten) per family over the course of the delivery period. This expectation did not change with the move to remote delivery. Table 4 shows the total number of visits delivered on average per family over the course of the intervention (including in-person and remote visits and including in the period after the official intervention end date). Based on analysis of survey data, 60% of practitioners met the minimum requirements of the programme and delivered eight or more home visits. Of all practitioners, just over a quarter (26%) reported delivering ten visits on average or even more (although responses provided by some practitioners seem unfeasibly high). However, a substantial minority of practitioners did not meet the minimum requirements of the programme: 40% delivered fewer than eight visits per family over the course of the intervention. Of all practitioners, just over a tenth (11%) delivered just one or two visits per family in total. These were the practitioners who did not deliver any visits remotely, and all their REAL home visits were before the pandemic. This means a sizeable number of REAL children received a much reduced, and in some cases, barely recognisable, version of the REAL programme.

Table 4: Total number of REAL home visits (average per family) delivered during the intervention

Total number of REAL home visits, average per family	Percentage of practitioners
No visits	-
1–2 visits*	11%
4–5 visits	11%
6–7 visits	17%
8 visits	23%
9 visits	11%
10 visits or more	26%
<i>Base: 35 practitioners completing the endline survey</i>	

\* There were no practitioners reporting delivering three visits on average per family.

## Facilitators and barriers to delivery

*RQ1, part 2: What are the facilitators and barriers to delivery?*

### **Senior leadership buy-in**

In interviews, practitioners reported that buy-in from schools' senior leadership teams facilitated delivery; such buy-in from senior members of staff enabled the adequate ring-fencing of time for practitioners to plan and deliver home visits. Practitioners described how dedicated time for REAL activities within normal working hours helped minimise the pressure associated with delivering REAL on top of usual teaching responsibilities.

Practitioners who did not have good levels of support from senior members of staff were more likely to struggle to find the time to deliver REAL and reported higher levels of stress related to programme delivery.

### **Teacher workload and resourcing**

Overall, practitioners thought that REAL was a very time-consuming programme, adding pressure to an already packed teaching schedule. Senior leadership buy-in was not always evident: some practitioners reported receiving no extra planning time for home visits. This meant they had to fit planning in around the

school day, within normal planning hours, or in their own time, which added to their workloads and made delivery more difficult, especially for part-time practitioners. There were practitioners who described buying resources for home visits and dropping them off to families' houses in their own time and at their own expense.<sup>14</sup>

*'As a teacher there's so much pressure on your time. You've got your class, and then to do a REAL programme on top of that, I found it quite challenging really to fit it in' (Practitioner 5, endline interview).*

In some cases, COVID-19 issues added to teachers' workloads, especially where nurseries were already struggling with staffing issues. Practitioners described how schools were increasingly dealing with staff sickness and class 'bubbles' closing, which made delivery more challenging. As set out in the section on dosage, a proportion of practitioners did not engage in any one-to-one remote sessions with families between September 2020 and June 2021. In interviews, practitioners attributed missed visits to workload stresses resulting from the pandemic.

On the other hand, there were practitioners who said remote sessions with families alleviated workload pressures as such sessions were quicker to deliver than in-person. From their point of view, the remote mode facilitated delivery of the REAL programme. These practitioners described saving time with remote visits because they could plan or film an activity and then send it instantaneously to all the families at once.

Furthermore, practitioners working in large nurseries with lots of staff, or in nurseries which operated with generous staff-to-child ratios, perceived that resourcing was less of a barrier to delivery because staffing issues were easier to resolve internally.

### **Scheduling**

Practitioners thought that delivering the REAL programme required a level of flexibility around scheduling which a lot of teachers did not have, especially those working part-time. They reported that it was difficult scheduling in-person home visits and video/phone calls for remote visits at times when parents were free. If parents worked, it usually meant practitioners had to schedule visits early in the morning or in the evening, which lengthened practitioners' working hours. Practitioners also reported that it was common for parents to cancel visits at short notice and they spent a lot of time rearranging visits. When in-person visits were cancelled at short notice, it was difficult for schools to manage staffing and to rearrange cover.

*'I've got two or three families where parents work, they've got siblings at school, so trying to find a time when people are in and also when I can be released from school. I think that's been the biggest challenge' (Practitioner 2, early implementation interview).*

Practitioners explained how remote delivery offered more flexibility around scheduling because practitioners could film themselves modelling activities without parents and children being present. Families could then complete REAL activities at a time which best suited them.

### **School protocols**

Some schools had policies to protect staff safety while entering families' homes, which meant that more than one member of staff had to be present when conducting in-person visits. This made such visits more difficult to organise in practice because schools had to arrange cover for two members of staff at once. Practitioners also felt that having an added member of staff present in a family's home felt too formal and added pressure on children and parents (some of whom had low levels of confidence). Practitioners in these schools reflected that the remote delivery model helped alleviate this particular barrier.

### **Parental engagement**

Practitioners felt that parental engagement was a key element which affected delivery of the programme. They described some lack of parental engagement with in-person home visits, which made it difficult to conduct the visits properly. For example, there were reports of parents being distracted by their phone or the TV during

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<sup>14</sup> Schools were able to invoice NCB following completion of set delivery criteria and data submissions, however, submission of invoices to NCB and practitioners receiving reimbursements from schools was impacted by COVID-19 disruption.

visits, not interacting with their child, leaving the room to go elsewhere, and completing housework during visits. In these instances, practitioners felt that delivery was more challenging since the intervention relied on parents' involvement with activities. However, low parental engagement with in-person visits was resolved in most cases through practitioner perseverance and encouragement.

Low parental engagement with home visits was a factor which more heavily affected remote delivery (see Implications of COVID-19 for further detail). During the remote delivery period, it was more difficult for practitioners to promote parental engagement because there was no in-person communication for long periods of time and parents were preoccupied with home learning and other pandemic-related issues.

On the other hand, where there were high levels of parental engagement with the programme, visits were easier and quicker to schedule because parents recognised the value of the programme and they were more communicative. High levels of parental engagement also made visits run more smoothly and successfully because practitioners spent less time encouraging parents to focus during in-person visits and less time asking parents to confirm that they had completed remote activities.

In some cases, engagement was facilitated through practitioners communicating with parents clearly and accessibly and providing them with timely and consistent information about REAL. In interviews, there were parents who described becoming disengaged and losing motivation with the REAL programme after experiencing long periods of silence from their REAL teacher and not being updated on the teacher's plans for future visits. Parents recommended that a schedule for planned visits and activities be sent to parents in advance so they knew what to expect going forward and had a greater awareness of the structure of the programme. Parents felt this would have helped their engagement with the programme.

### **Two-year delivery period**

The two-year delivery period meant many REAL practitioners no longer taught REAL children as they had moved to reception. Practitioners explained that this made the programme much harder to deliver because they were having much less regular contact with children (sometimes none at all). This led to feelings of disconnection that made it harder for practitioners to tailor activities for individual children and to track their progress. Parents also reported that their children became less excited about REAL visits once they moved out of the REAL teacher's class.

*'I don't see them very often. Barely at all. Only in the corridor, if they're walking to lunch or something, and I might say hello or something, but I feel like I don't have that connection with the children anymore and I don't really know in detail about their progress in class' (Practitioner 1, endline interview).*

### **COVID-19 pandemic**

Many of the barriers to delivery discussed above were exacerbated by the COVID-19 pandemic. Additional implications of the pandemic for the delivery of the REAL programme and its outcomes are discussed in the section Implications of COVID-19 for the REAL Programme.

### **Preference for in-person versus remote delivery**

When asked what delivery mode they would prefer for REAL home visits if they took part in the programme again, over half (57%) of practitioners who responded to the survey said 'all in-person' and 43% said they would prefer a mix of in-person and online. No respondents said they would prefer delivery to be exclusively online in future.

Those who thought delivery should be all in-person thought that this mode was the most effective for engaging parents and children, modelling activities, promoting understanding of the home learning environment, and creating strong communication and bonds between practitioners, parents, and children. They thought in-person delivery was more personal, individualised, and valuable. These practitioners also highlighted the difficulties engaging some parents with remote visits and the reduced effectiveness of activities when delivered remotely.

*'My families haven't engaged with the online visits. I really believed they were overwhelmed with the home learning requirements during lockdown and just found my activities an extra burden. Most of them didn't even respond to activities sent home. I loved the home visits and found this*

*very positive. Thanks to the first lockdown all momentum was lost, and I just didn't feel the programme translated easily into a remote one. REAL was all about working WITH the families, whereas online felt a bit like working AT them' (Practitioner endline survey).*

Practitioners who preferred a mixed mode of delivery highlighted how in-person delivery with lots of families felt unmanageable in terms of workload; they appreciated the time saved through delivering remotely. They suggested that once relationships had been established between practitioners, parents, and children through some in-person visits, home visits should move online. They also highlighted that this could be beneficial for engaging parents who felt judged when practitioners entered their homes.

*'Nothing beats face to face and going to someone's home. The ability to personalise the delivery, notice and model early literacy skills, and build a relationship can be done best when you are face to face. However, I think a mix of video, apps, call etc. alongside the home visits can make the project more manageable and time efficient. I have found that virtual connections can be very strong and when backed up with a face to face—even if from a doorstep!' (Practitioner endline survey).*

## Perceived outcomes

*RQ2: What are the perceived benefits of the programme for early years practitioners, families, and children?*

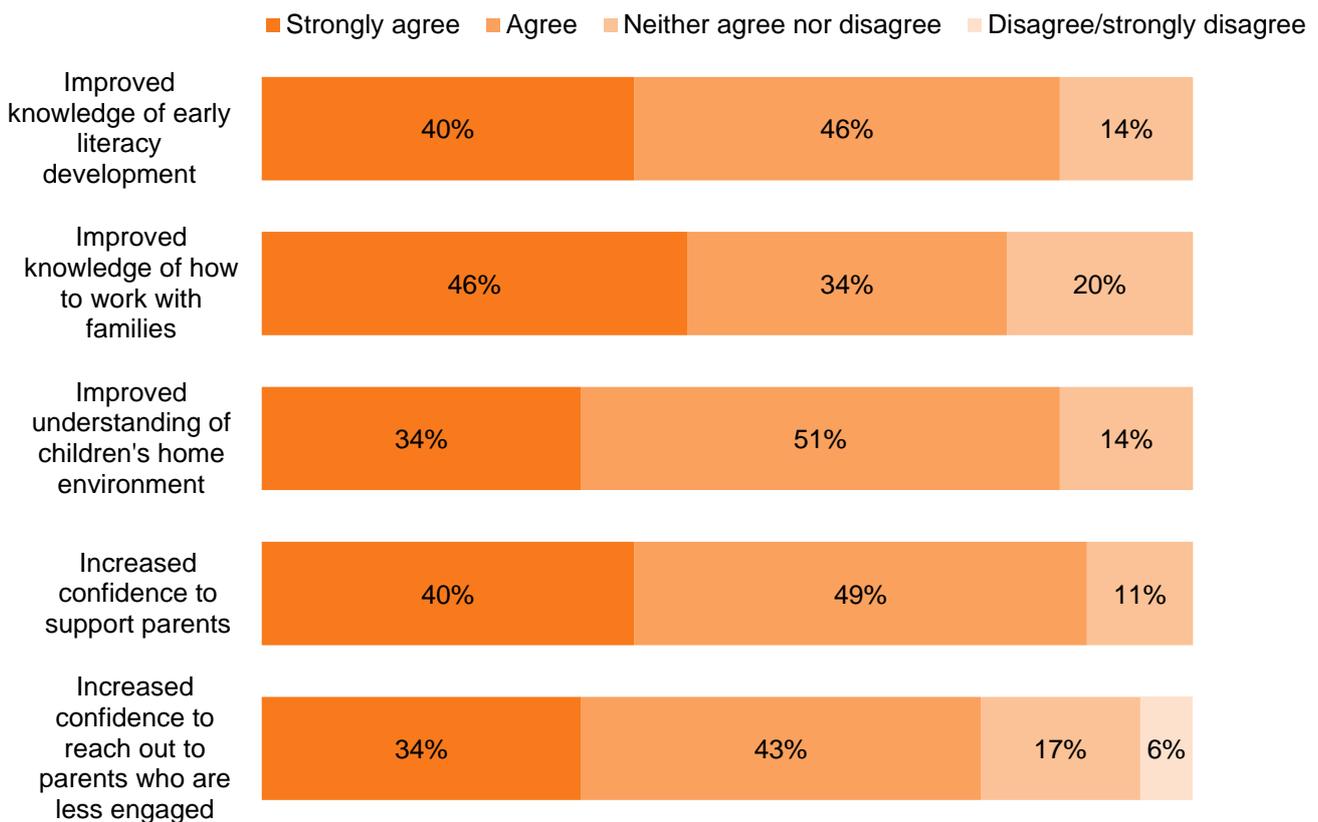
This section explores the perceived outcomes of the programme for practitioners, families and children. It draws on surveys and qualitative interviews with practitioners and parents. As the impact evaluation was cancelled, we are unable to discuss early literacy outcomes for children outside of how parents and practitioners perceived them. The outcome areas we discuss refer to the REAL programme logic model (Figure 2, page 11).

### **Practitioners**

Practitioners were overwhelmingly positive about the outcomes of the programme for their knowledge and confidence, as shown in Figure 5.

Figure 5: Perceived outcomes for practitioners

Base: All practitioners in the endline survey (n = 35)



*Knowledge of early literacy development (short-term outcome)*

In the practitioner endline survey, 86% of practitioners strongly agreed or agreed that their knowledge of early literacy development had improved as a result of taking part in the programme (Figure 5).

In interviews, practitioners discussed varied ways in which their knowledge had developed. One group said that the training and home visits added to their knowledge of the importance of home learning environments. For them, the programme was not about increasing their own knowledge about early literacy development as much as it was about learning how to share that knowledge with parents. Another group highlighted that learning to use the ORIM Framework added to their knowledge of early literacy development. For example, practitioners cited environmental print as a previously unfamiliar activity.

Lastly, a set of practitioners reflected that while the REAL programme did not add to their knowledge of early literacy development, the in-person training still 'refreshed' or 'strengthened' their existing knowledge of the topic. Therefore, the programme contributed to this short-term outcome.

*Knowledge of how to work with families (short-term outcome)*

In the practitioner endline survey, 80% of practitioners strongly agreed or agreed that their knowledge of how to work with families had improved as a result of taking part in REAL (Figure 5).

In qualitative interviews, practitioners described different ways in which the programme shaped their knowledge. For some, the training showed that activities you do with parents are different to activities you do in the classroom. This was valuable because it helped practitioners see that a parent does not always know what a practitioner knows.

For others, the REAL programme changed how they communicated with parents. Before, they spoke to parents in a 'formal' way. Home visits taught them to be more informal. This helped them build relationships with families.

*'I feel like I've really adapted the way I speak to parents, to help them understand better and, hopefully, make them more comfortable talking to me' (Practitioner 1, endline interview).*

Others explained that the programme shifted their understanding of their own role in supporting families. Instead of 'teaching' parents about early literacy, they now saw their role as 'sharing knowledge' with parents. Part of this was learning about the different home learning contexts of each family and offering tailored support on that basis, rather than passing on generic knowledge about early literacy.

Contrasting these views, one group of practitioners said the programme did not make a difference for this short-term outcome area. These practitioners perceived that their knowledge of how to work with families was already strong.

#### *Understanding of children's home environments (medium-term outcome)*

In the practitioner endline survey, 86% of practitioners strongly agreed or agreed that their understanding of children's home learning environments had improved as a result of taking part in REAL (Figure 5).<sup>15</sup> In interviews, a common viewpoint was that it was 'eye-opening' to visit homes in-person at the start of the programme. This was because the visits showed the deprivation and lack of suitable home learning resources among many of the families taking part in REAL.

*'I was shocked at how little they had in terms of just a pencil to write with. Not a single book in the house, not even a newspaper, magazine, or anything like that. That was really eye-opening' (Practitioner 1, endline interview).*

The in-person home visits allowed practitioners to note down what resources (for example, toys, books, outside space) families did and did not have. Practitioners said this helped them plan future REAL activities, including remote visits. The perceived benefit of visiting families in person was that it allowed practitioners to gain knowledge about home learning environments in a non-judgemental way compared to, for example, asking parents about resources over the phone.

In other instances, practitioners found the programme did not result in improvements for this medium-term outcome. The rationale for this was that their setting already delivered home visits when a child started nursery. As a result, the limited number of in-person REAL home visits did not significantly add to their understanding of home environments.

#### *Confidence in supporting parents (medium-term outcome)*

In the practitioner endline survey, 89% of practitioners strongly agreed or agreed that they were more confident supporting parents as a result of taking part in REAL (Figure 5).

In interviews, practitioners explained that the increased contact with families through the REAL programme made them more confident speaking to parents about their child's development. It also helped them communicate in a new way. Before, if parents asked questions about their child's early language development, they gave generic answers; now, they were confident to ask follow-up questions.

*'Sometimes they come with a worry and you give a broad answer, whereas this time it was, like, "Well, let's really delve deep into this and see what we can do specifically to help that"' (Practitioner 14, endline interview).*

Practitioners also described growing more confident to challenge parents over the course of the programme.

*'I probably am a little bit more confident with them, especially to be a little bit more upfront and say, "This is what we should be doing. This needs to be done if progress is going to be maintained"' (Practitioner 18, endline interview).*

Another set of practitioners said that REAL did not make a difference for this medium-term outcome. A key reason they gave was that they already felt confident supporting parents, and so there was no room for improvement.

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<sup>15</sup> The slight discrepancy between 86% mentioned in the text and the sum of 34% (strongly agree) and 51% (agree) being 85% is due to rounding.

### *Engagement with harder-to-reach parents (longer-term outcome)*

In the practitioner endline survey, three-quarters (77%) strongly agreed or agreed they were more confident about reaching out to parents who were less engaged with their child's learning as a result of taking part in REAL (Figure 5). The survey, because of unfortunate phrasing, asked about the practitioners' 'confidence' to reach out to harder-to-reach families and not if they did or did not reach out to these families more. This limits our ability to interpret these findings, though they were supplemented by qualitative interviews that also explored this longer-term outcome. Nonetheless, it is to the REAL programme's credit that practitioners felt more confident in this area. This is likely due to similar reasons as explored in the section about practitioners' confidence to support parents.

In interviews, practitioners cited examples of individual cases where a parent who had previously been disengaged from schoolwork became more involved over the course of home visits. In these families, practitioners said progress was achieved because home visits increased the communication they had with these families. This sometimes meant following up with parents several times, which practitioners said required 'tenacity' on their part.

On the whole, however, practitioners considered that the programme achieved mixed results for this longer-term outcome. For them, barriers to reach these families remained in place despite their best efforts. In addition, remote delivery made it significantly harder to build relationships with families (see section Implications of COVID-19 for the REAL Programme). Still, they considered that the programme made a positive difference to harder-to-reach families because the resources parents received meant they were better-placed to support home learning going forward, even if they did not seem engaged at the time of delivery.

Finally, a group of practitioners reported that all intervention-group parents in their setting were engaged with the REAL programme as well as their children's education more generally, and so were not 'harder-to-reach' at any point.

### *Change in professional viewpoint of practitioners in relation to parents (intended impact)*

In interviews, practitioners discussed how early in-person home visits challenged their preconceptions of what home learning resources families did and did not have. Families often had fewer resources than practitioners had anticipated, although in other cases, families surprised them by already having books and other resources at home. Seeing the resource gaps allowed practitioners to better appreciate why learning barriers exist. Before, they had thought parents in their setting were disengaged because they were not motivated or interested to take part in their child's learning. Now, they saw that parents wanted to support their child—they just needed the guidance, confidence, and resources to do so.

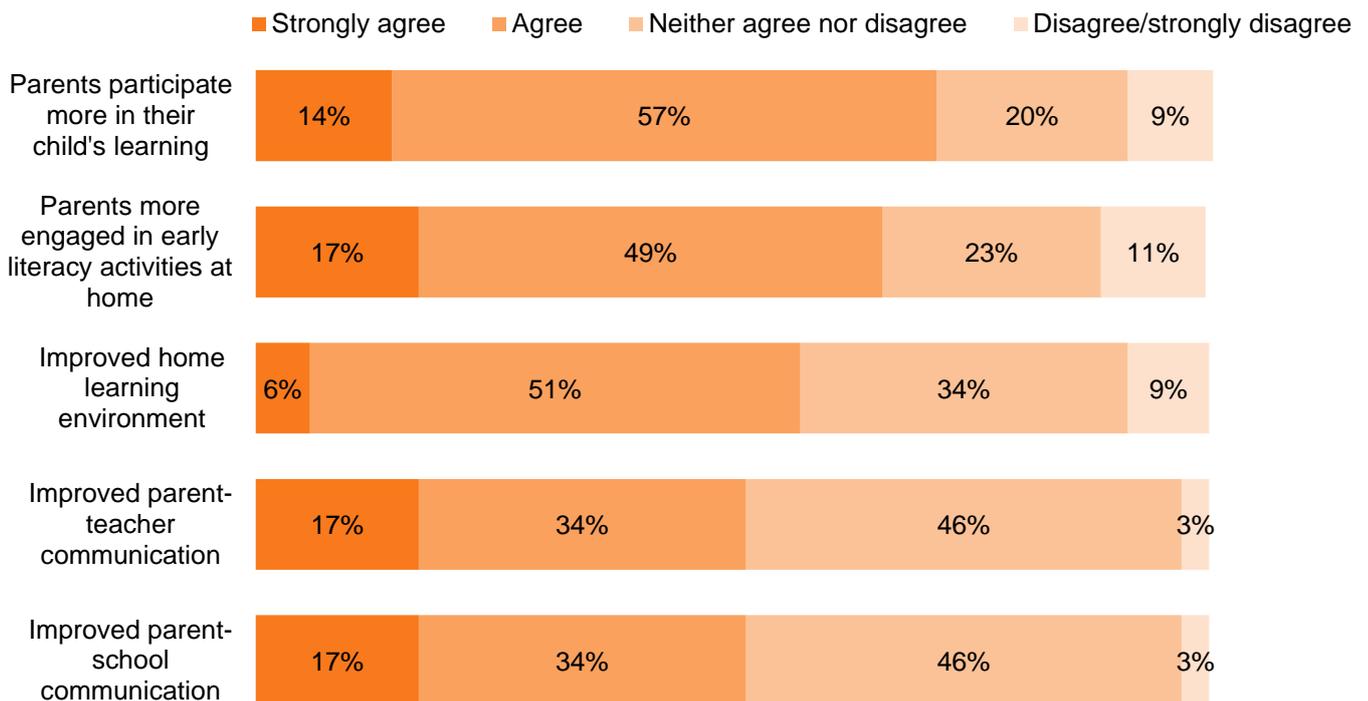
Practitioners, in interviews, did not discuss this intended impact of the REAL programme in relation to remote visits. This could be because remote visits gave practitioners less insight into home learning environments.

## **Families**

The majority of practitioners believed that the REAL programme had positive outcomes for the families that took part, as shown in Figure 6. However, they were notably less positive about the outcomes for parents than they were about the outcomes for themselves (discussed above and shown in Figure 5). There were also large proportions of practitioners (from 20% to 46% for different questions) who neither agreed nor disagreed with the survey statements about benefits for parents. This suggests that these survey questions were difficult for them to answer.

Figure 6: Perceived outcomes for parents, according to practitioners

Base: All practitioners in the endline survey (n = 35)



#### Parents' participation in their child's learning (medium-term outcome)

In the practitioner endline survey, 71% strongly agreed or agreed that parents participated more in their child's learning as a result of taking part in REAL (Figure 6). Interviews with practitioners and parents suggest several different mechanisms for achieving this medium-term outcome. First, REAL home visits increased parents' confidence in leading activities in the home. This then had the positive effect of improving their participation in learning. Practitioners found that those parents who were not highly educated were particularly likely to benefit from the reassurance that they were 'doing the right thing'.

Another mechanism was the knowledge parents gained from the practitioners about different home learning activities and how to best engage the child. Before, parents described not knowing where to start or feeling that they lacked structure or ideas. Now, they were more informed about different options for home learning, which meant they were more motivated to start an activity.

*'It's taught me a bit more about how to present the phonics to him, and we've done it a bit more professionally. But that's because they've given us a programme of activities and I knew what I was doing, whereas before it was just making it up as I go along' (Parent 3 interview).*

Parents and practitioners agreed that 'simple' and 'fun' home learning activities were most effective in getting parents involved in home learning. In interviews, parents described gaining a new perspective through REAL that learning can be enjoyable and made up of simple activities incorporated into daily activities. Practitioners similarly said that these types of activities made parents realise that home learning does not have to feel like homework.

*'It showed them that it's fun to be doing things like this. It's not a task' (Practitioner 9, endline interview).*

Practitioners who took part in interviews noted that the remote delivery model limited parental engagement and the quality of interactions between parents and practitioners. These factors meant that progress in this area was not as strong as it could have been had the in-person visits continued.

### *Parents' engagement in early literacy activities (medium-term outcome)*

Just under two-thirds (66%) of practitioners strongly agreed or agreed that parents were more engaged in early literacy activities at home as a result of taking part in REAL (Figure 6); 11% did not agree that parents were more engaged, whereas 23% neither agreed nor disagreed with the question.

Within case study settings, parents and practitioners shared similar views on whether or not the REAL programme made a difference to this medium-term outcome. Where practitioners said progress was limited, parents were unable to provide examples of how their engagement changed. By contrast, where practitioners described parents' engagement as good, parents cited examples of how they engaged with early literacy activities differently.

Interviews with case study practitioners and parents suggest that increased knowledge about how early literacy develops is a key mechanism that helps with parental engagement. One way this was achieved was through practitioners sharing knowledge with parents. From the practitioners' point of view, home visits were an opportunity to address incorrect assumptions parents often had about early literacy development. In one example, a parent had thought that their child was behind their peers because they were 'scribbling' and not writing. The practitioner explained that the child was engaging in 'early writing' and was therefore making progress.

From the parents' point of view, practitioners suggested adding new elements to literacy activities, such as reading. This is illustrated in the following examples:

*'I've always read to her, but we just read the book. Now we'll talk about the book and then maybe ask some questions and make a silly ending up of our own, that type of thing. I'll ask more questions about the book, we'll expand on ideas about the book' (Parent 4 interview).*

*'[I am] exploring the pictures in the book more and getting [child] to ask questions and answering her ("and what would happen if [book character] had done this"). I don't know, it just gave me more of an insight, like you can do more with a book than just read it and look at the pictures' (Parent 12 interview).*

Another way parents' knowledge of early literacy increased was through the increased one to one time they spent with their children when completing REAL activities. In interviews, practitioners explained how this gave parents a greater insight into how their child learnt and developed their early literacy skills. This then had the positive benefit of increasing their engagement with early literacy activities.

Practitioners and parents both discussed how early literacy activities rooted in everyday tasks in the home were a successful way of engaging parents. The REAL programme gave parents a new insight that early literacy activities can happen anywhere (for example, while putting the shopping away or baking a cake). Before, parents had a more limited view of learning taking place either at school or while doing homework.

*'I wouldn't have thought of teaching a child how to read from packages. I think it's helped me realise that there's a lot more to learning than just reading everyday books and sitting down at a table and doing reading and writing' (Parent 4 interview).*

*'I wouldn't have thought to write the recipe down ... I know he can't read but then I could explain to him this is what you do when you make cakes, you go off a recipe and stuff' (Parent 13 interview).*

In case study settings where progress was limited, practitioners explained that parental participation in the REAL programme was low throughout. Often, parents were disengaged from schoolwork to start with. They also perceived that the remote delivery model was a barrier to more engagement from parents (see section Implications of COVID-19 for the REAL Programme).

### *Home learning environment (longer-term outcome)*

The majority of practitioners (57%) believed that the home learning environments of the families taking part in the REAL programme improved as a result of the intervention (Figure 6). This finding, however, is not supported by data from the surveys with parents. In all three parent surveys, parents were asked to fill in the Home Learning Environment (HLE) index, which asked them what home learning activities (for example, drawing, singing, games) they had taken part in with their child over the previous seven days. The surveys

asked about 12 activities in total. The minimum value of the index was zero (where the families had done none of the activities in the previous seven days) and the maximum was 84 (all 12 activities done every day; for more details on the scoring, see section Research Methods). As shown in Table 5, there is no evidence that for those treatment-group parents who completed the surveys and answered all 12 HLE questions, the HLE index increased as the intervention progressed (see row 'Mean HLE index, per survey'). ('HLE availability' refers to the number of parents who answered all 12 questions when completing the survey. If one or more questions in the HLE index were not answered, the HLE index for that parent was not calculated.)

Table 5: Values of the HLE index for treatment-group parents at three waves of the parent survey

	Baseline survey	Interim survey	Endline survey
Number of parents for whom HLE index was available, per survey	218	108	104
Mean HLE index, per survey, calculated on the bases above	39.72	38.12	37.20
Number of parents for whom HLE index was available at all three surveys (baseline, interim, and endline)	54	54	54
Mean HLE index, per survey, calculated on the basis above (n = 54)	39.13	36.57	37.98
Number of parents for whom HLE index was available at baseline and endline surveys	79	n/a	79
Mean HLE index, per survey, calculated on the basis above(n = 79)	40.35	n/a	37.75

Overall, findings from the HLE index analysis suggest that the frequency of home learning activities did not change as a result of the REAL programme as it was delivered during this evaluation. Differences between values of HLE index were tested using a series of dependent t-tests (see Table 6). There were no significant differences between values of the HLE index between baseline, interim and endline surveys.<sup>16</sup> There is no evidence that the HLE index was higher at the endline survey than at baseline. Non-significant differences between the means suggest that, if anything, it was slightly lower at endline than at baseline. (For the 79 families who completed both baseline and endline, HLE index had a mean of 40.35 at baseline and a mean of 37.75 at endline.)

Table 6: Results of paired samples tests of differences in values of the HLE index for treatment-group parents

Paired samples test	Mean	S.E. mean	t	Sig. (2-tailed)	Number of cases in analysis
HLE index at baseline – HLE index at endline	2.61	1.67	1.56	0.12	79
HLE index at baseline – HLE index at interim	0.90	1.61	0.56	0.58	84

<sup>16</sup> As these results did not reach the threshold of being statistically significant, there was no requirement to correct for multiple comparisons.

HLE index at interim – HLE index at endline	-1.74	1.49	-1.17	0.25	61
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All cases with available data were included in each of the tests. As the availability of HLE data varied by survey, this explains why base sizes are different for the three tests. Where the mean difference between HLE index values (column Mean) has a positive value (see the first two tests), this means that there was a deterioration in the home learning environment found for the analysis sample. Where the mean difference has a negative value (see the last test), this means that the home learning environment improved in the analysis sample.

Looking at individual activities contributing to the index (at baseline and endline), most activities were done slightly less frequently at endline than at baseline. Most differences were not statistically significant. Some activities were done slightly more frequently at endline but again, none of the differences were statistically significant (results not shown).

Qualitative interviews with parents partly support findings from the parent surveys. Parents expressed a mix of positive and negative views when asked if they did more home learning activities following the REAL programme. One view among parents was that they had continued to do some of the REAL activities at home since the visits (for example, baking, arts and crafts) or that they had increased how often they did an existing activity (such as reading everyday instead of just occasionally).<sup>17</sup>

Another view among parents was that the programme did not increase how *often* they engaged in home learning but it changed *how* they did the activities. For example, they learnt to ask the child questions about the book and use voices for different characters. This often came with the broader realisation that learning can be fun and simple and that learning can happen everywhere. For these reasons, while home visits did not increase the frequency of home learning activities (for example, reading), parents still perceived them as valuable.

#### *Parent-teacher communication (medium-term outcome)*

In the practitioner endline survey, half (51%) strongly agreed or agreed that communication between parents and their child's class teacher had improved as a result of taking part in REAL (Figure 6). Only 3% of practitioners disagreed with the question. It is noteworthy that 46% neither agreed nor disagreed with the question. This can, to a degree, be explained by the fact that fewer REAL practitioners were the children's class teacher in reception (46%) compared to nursery (68%), according to the endline survey. It is therefore likely that practitioners in the survey were unsure how to respond to this question because they did not have enough knowledge about the communication between parents and class teachers.

In interviews, practitioners offered several positive examples of how communication between them and parents improved. A common theme in these answers was that the REAL activities opened up more 'avenues of communication' with families. This helped to keep up the conversation about early literacy and home learning, including with those parents who were not generally well-engaged with schoolwork.

Practitioners said the increased communication was evident in longer and more frequent conversations with parents. Over time, parents also became more comfortable saying if something was not clear to them about the programme.

*'I think they're much more open to talking to me and questioning things if they don't quite understand something, whereas maybe before they might have felt like they couldn't, or it was a bit of a silly question. Now they know that no question's silly' (Practitioner 18, endline interview).*

For their part, parents who took part in case study interviews considered communication with the REAL practitioner to be without problems. They thought the REAL activities were well-explained and that that it was

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<sup>17</sup> It should be noted that the sample of parents who took part in interviews appeared relatively engaged with the programme compared to practitioners' reported experience with parental engagement overall. Therefore, parent interviews may be biased towards those who had positive examples of the home learning environment changing.

easy to understand the practitioner. It was also straightforward to get in touch with the practitioner to ask follow-up questions when needed and that the practitioner was ‘approachable’ and ‘friendly’.

In some cases, practitioners thought that the programme achieved only limited improvement for this medium-term outcome. In their view, remote delivery hindered how much communication could improve between them and parents. Another reason was that parents that were harder to reach before the programme continued to be so throughout the programme duration.

#### *Parent-school communication (longer-term outcome)*

In the practitioner endline survey, half (51%) strongly agreed or agreed that communication between parents and the school had improved as a result of taking part in REAL (Figure 6). As with the question about parent-teacher communication, a large proportion (46%) neither agreed nor disagreed with the question, and 3% disagreed. (Most practitioners gave the same answers to the questions about parent-teacher and parent-school communication.)

In interviews, practitioners explained that it was difficult to estimate the change because of the impacts of lockdowns and partial school closures. Another reason was that parent-school communication was already good in the nursery and therefore did not need improving.

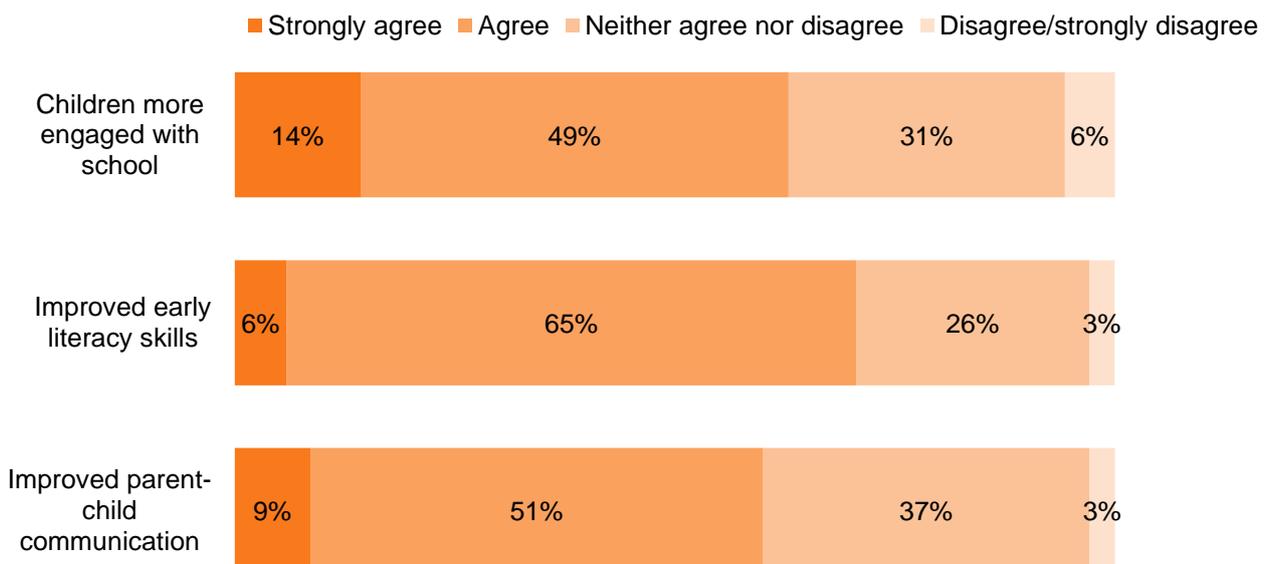
In other instances, practitioners said that the REAL programme made a difference to how the school communicated with parents as a whole. In one example, the school adopted a new messaging platform as a result of taking part in the REAL programme. They perceived that this change improved communication between families and the school.

### **Children**

When asked about outcomes of the REAL programme for children taking part, the majority of practitioners believed that there had been benefits for children’s engagement at school and the communication between parents and children, and that children’s early literacy skills had improved (Figure 7). However, as with the outcomes for parents, substantial proportions of practitioners were not sure whether there had been benefits and due to the cancellation of the impact evaluation, it is not possible to ascertain this otherwise.

Figure 7: Perceived outcomes for children, according to practitioners

*Base: All practitioners in the endline survey (n = 35)*



#### *Communication and engagement in school (longer-term outcome)*

In the practitioner endline survey, two-thirds (63%) of practitioners strongly agreed or agreed that children were more engaged in school as a result of taking part in REAL (Figure 7); 31% neither agreed nor disagreed with this statement: this number is likely to be high because of the limited in-person teaching time practitioners had with children in the 2020/2021 school year.

In interviews, practitioners discussed how, after in-person home visits, children spoke up more at school. Children also came to tell them about the REAL activities they had done at home.

*'They were coming in and telling me, "I read Shark in the Park!" (a book by Nick Sharratt) and telling me all about the story or show the things that they had made' (Practitioner 8, endline interview).*

Practitioners attributed these improvements to children growing more confident during in-person visits. In their view, a key aspect of in-person visits was the one to one interactions between the child and teacher. It helped children overcome initial shyness and grow more confident communicating with an adult outside the family. Parents, in interviews, also noticed these positive benefits, particularly for those children who they said were shy and introverted.

In general, practitioners perceived that children became more confident and engaged following in-person visits. They did not discuss these improvements in relation to remote visits, indicating perhaps that they were less of a prominent feature in remote visits. In other instances, practitioners said that COVID-19 and remote delivery meant they did not have enough interaction with the children to assess impact for this longer-term outcome area.

#### *Children's early literacy skills (intended impact)*

In the practitioner endline survey, 71% agreed or strongly agreed that children's early literacy skills improved as a result of taking part in REAL (Figure 7); 3% disagreed and 26% neither agreed nor disagreed with the question.

In interviews, practitioners found it difficult to distinguish between normal progress in children and that attributed to the programme. Parents discussed general impacts of the programme on their children's engagement with reading and writing (for example, helping children discover a new-found enjoyment in reading) but could not comment on whether it had improved early literacy skills. Our ability to assess this expected impact was limited because the impact assessment had been cancelled.

#### *Communication between child and parent (longer-term outcome)*

In the practitioner endline survey, 60% strongly agreed or agreed that communication between parents and children had improved as a result of taking part in REAL (Figure 7); 37% neither agreed nor disagreed and 3% disagreed with the statement.

In interviews, practitioners discussed how REAL activities gave parents and children a chance to spend more quality time together. For instance, practitioners reflected that the REAL activities gave parents 'permission' to just sit down with their children and read. They expected that the increased one to one interactions would have made a difference to parent-child communication, even if they did not witness it in person. Other practitioners said they did not feel able to assess the difference made to this longer-term outcome as remote delivery meant they were too far removed from child-parent interactions to comment on whether communications had improved or not.

## Implications of COVID-19 for the REAL programme

### *RQ3: What are the implications of COVID-19 for delivery and perceived impacts?*

In September 2020, NCB advised REAL practitioners that no visits should be taking place in children's homes because of risks to health associated with COVID-19 (see Remote Home Visits) and that the delivery should continue in 'remote' mode. By this point, practitioners had carried out between one and two in-person home visits, so they proceeded to carry out the rest of the visits (out of the eight to ten REAL visits required per family in total) remotely. This section explores the implications of COVID-19 and the remote delivery mode for delivery and outcomes. It draws on interviews and surveys with practitioners and parents. Several aspects of the discussion in this section relate to the IPE dimension of 'responsiveness'.

## Implications of remote delivery model and COVID-19 for delivery

### *Planning and delivering visits*

In interviews, practitioners expressed opposing views about whether remote delivery increased the time it took to plan and deliver home visits. One group of practitioners said that planning remote activities was more challenging and time-consuming because it required extra creativity on their part. A contrasting view was that in-person visits took longer because they required finding a time that parents were available and visiting each home. Remote visits took less time to plan and deliver and could also be organised more flexibly around parents' schedules, which was an added benefit.

Practitioners described several ways in which remote delivery changed how they planned and delivered home visits:

- It was *more difficult to apply the ORIM Framework and four strands of literacy* when planning remote home visits. This is because other factors took priority during remote delivery, such as choosing activities that were feasible for the virtual rather than in-person format.
- Practitioners were also less able to *tailor activities for individual children and families* during remote delivery. This was mainly due to increased time pressures practitioners faced resulting from the COVID-19 pandemic. In interviews, practitioners described how staff sickness and closures of class 'bubbles' created resourcing gaps that added to their workload. These workload pressures made it more challenging to find the time to deliver home visits.
- Remote visits did not leave space for *unplanned activities* during visits. During in-person delivery, practitioners got ideas for unplanned additional activities based on what they learnt about families' home learning environments. Practitioners did not report doing any unplanned activities during remote delivery.

As a result of these constraints, remote working was, overall, not as varied as in-person visits. Practitioners reported planning fewer and simpler activities: for instance, they were more likely to choose activities that were easy to explain through a remote connection and that required minimal support from the practitioner. This took priority over delivering something new and different for each home visit.

### *Modelling activities and high-quality conversations*

The REAL guidance on home visits advised practitioners to model early literacy activities to parents, provide resources to families, and have high quality conversations with parents. Adherence to these principles was high during in-person delivery. However, in interviews, practitioners said it was more difficult to incorporate these components into remote delivery.

First, practitioners found that *modelling* in person was more 'hands-on' and visual, which made it easier to explain what to do and how. Remote delivery made it especially hard to convey concepts and activities that parents found more challenging (for example, difficult words or the use of different voices when reading).

*'If I said a tricky word, the mum wouldn't be aware of what the tricky word was. If the book was in front of me and I could model ... for them to see visually what I'm doing with the child would be much easier. I can't demonstrate as clearly over a video' (Practitioner 18, endline interview).*

During in-person visits, practitioners had *in-depth conversations* with parents about questions and concerns relating to their child's communication and literacy development. In comparison, remote conversations lacked depth and quality. One reason was that the in-person visits typically lasted longer as they had been planned in advance to ensure that parents were available. During remote delivery, practitioners often reached parents in moments when they were free, which in practice meant a shorter session around the parents' other commitments. In addition, the practitioners could not easily read from the parents' body language and facial expressions how they were responding to the proposed activities. This contributed to remote conversations lacking depth and quality.

*'[In-person] you can see by a facial expression, "They don't understand what I mean here", or "I think this needs a little bit more discussion"' (Practitioner 13, endline interview).*

Practitioners did, however, continue to provide families with *resources* during remote delivery (see section Fidelity). In the endline practitioner survey, 97% reported sharing physical activity packs with families. Packs

were typically pre-prepared and sent out to families by post, shared on the doorstep in a socially distanced manner, or given directly to parents during school pick-up and drop-off times.

## Implications of COVID-19 for parental engagement

### *Remote delivery model*

In the practitioner endline survey, nine in ten (91%) described parents' engagement with in-person visits as either good or excellent. By contrast, the corresponding figure was only just over a third (35%) for remote home visits. Another third (35%) of practitioners said the parents' engagement with remote home visits was fair; 15% said it was poor. In interviews, practitioners gave several reasons for why parental engagement was higher during in-person delivery.

First, as discussed above, practitioners perceived the quality of interaction between practitioners and parents to be better during in-person delivery. This enabled good parental engagement during home visits. The quality of personal interactions was not the same during remote delivery, and for this reason parents became less engaged.

Second, practitioners found that parents were more easily distracted during remote visits (for example, by other family members, chores, or mobile devices). During in-person visits, parents were more likely to pay full attention.

Third, practitioners found that in-person visits had a more 'relaxed' and 'enjoyable' atmosphere, which enabled higher parental engagement. Calls and messages did not have the same personal touch and therefore felt more 'formal' and less enjoyable to parents.

*'The chat over a cuppa made it more informal and the parents were much more responsive' (Practitioner endline survey).*

The more relaxed set-up for in-person visits encouraged parents to ask more questions. During remote visits, parents were more reticent: in interviews, parents mentioned that they felt less able to ask questions. From their point of view, in-person visits felt less 'rushed', which gave them more time to reflect on the activities. Even though practitioners made themselves available to answer questions during remote delivery, questions did not come as effortlessly from the parents.

*'I was able to ask more easily [and] think [of] questions, because sometimes when you're on the Zooms, they might say, "Have you got any questions?", and you can't quite think. I think in person, it's a lot better' (Parent 4 interview).*

Lastly, practitioners reported on technological barriers being a particular issue affecting parental engagement with remote working. In the endline practitioner survey, 37% said that lack of access to equipment (such as computers, smartphones, and tablets) made it challenging for some parents to participate in activities. A third (31%) of practitioners cited lack of internet access as a problem and a quarter (26%) said that some parents experienced technical problems with the online materials.

Practitioners tried to engage quieter parents and those reluctant to use online platforms using alternative ways (for example, using printed activity packs instead of video calls). However, it remained difficult to engage harder-to-reach parents and indeed the move to remote communications meant it was easier for them to not respond to messages and calls.

### *Other COVID-19 implications*

Outside the remote delivery model, other COVID-19-related barriers also affected parental engagement. First, anxieties related to COVID-19 and lockdowns made it difficult for parents to take part. In interviews, practitioners discussed how worries about restrictions, feelings of isolation, and health concerns made it difficult for parents to focus on REAL activities. This wider context of the pandemic also meant that taking part in the programme was not always a priority to families.

*'When your basic needs aren't met, that's your priority, isn't it? Not your child's literacy. It's been a very hard year, hasn't it, for all families really' (Practitioner 5, endline interview).*

Second, lack of time negatively affected parental engagement during the period the programme was delivered. Over half (51%) of practitioners mentioned this. In interviews, parents and practitioners discussed how remote education, during school closures in particular, put added pressure on families' time, with parents perceiving it as a priority over completing REAL activities. In addition, parents reported needing to prioritise work commitments.

### **Implications of COVID-19 for child engagement**

In the practitioner endline survey, 29% reported that lack of interest from the child made it difficult for some parents to take part in the remote home visits. Evidence from interviews with parents suggests that we did not manage to interview any of the parents whose children were not engaged with the intervention. Parents reported that the activities were 'fun' and 'enjoyable' for their children.

*'She really, really did enjoy it, I could tell, and she'd talk about it after. She really did take it in' (Parent 12 interview).*

*'When I see the videos and the pictures, they all seem really happy and smiley, and if I see them in the playground, then I'll say, "Did you do this?" They're like, "Yes!" and they'll tell me about it' (Practitioner 16, endline interview).*

However, video calls were not perceived as a successful way of engaging children. Practitioners and parents explained that children this young typically found it difficult to maintain concentration over a video call. Some were also shy and reluctant to speak up. On the other hand, children liked parents capturing them in photos and videos doing the REAL activities and enjoyed watching themselves on the screen afterwards. Children also looked forward to receiving messages and videos from practitioners where they addressed them personally.

*'He used to say, "Mummy, has [practitioner] sent a message back?"' (Parent 13 interview).*

Practitioners found that, overall, children engaged better with in-person visits, even while they enjoyed doing remote activities. For them, a key aspect of home visits was lost when children no longer experienced the 'excitement' of their practitioner visiting them at home. This one to one time made children feel special, enabling high child engagement. Receiving personalised videos and messages from practitioners captured this feeling to some extent, but it was hard to recreate remotely.

### **Implications of COVID-19 for building relationships with families**

In the practitioner endline survey, three-quarters (77%) of practitioners said remote delivery made it 'more difficult' to build relationships with parents. In the open-text box, practitioners gave two main reasons for this: (1) parents—especially harder-to-reach parents—were not as responsive to remote communications (such as calls and emails) compared to in-person delivery and (2) the lower quality of interaction using technology made it harder to build relationships.

These findings are reflected in the interviews with practitioners. They discussed how a key benefit of in-person visits was being able to break through barriers between the school and the home. They explained that many parents had negative preconceptions of education at the start of the programme. In-person visits tackled these notions by allowing parents to get to know the teacher on a personal level and not just as a representative of the school. It helped that parents invited the practitioner into their home. This allowed them to build the relationship on their own terms.

*'I had to ask their permission to go into their house, so they ... felt more in control. It was like saying, yes, I will allow you to come into my house and build up that relationship. As soon as the pandemic happened, it was another barrier to try and overcome' (Practitioner 14, endline interview).*

Losing the personal relationships that underpin home visits meant that remote visits felt comparatively more formal and therefore similar to other communications schools had with families. This made it more difficult for practitioners to build relationship with parents. For them, remote visits worked best if they had already built strong relationships with families during in-person delivery. If parents were hard to reach at the start of remote delivery, they often remained so throughout the programme, which led to them becoming unresponsive to communications.

## Implications of remote delivery model and COVID-19 for outcomes

The REAL logic model (Figure 2, page 11) includes outcomes for practitioners, parents, and children. As discussed in section Perceived Outcomes, the programme made inconsistent progress against intended outcomes. COVID-19 and the remote delivery model were greater barriers to achieving some outcomes than others.

Practitioner-specific outcomes were the least affected by COVID-19 and the remote delivery model. For example, practitioners perceived improvements in their knowledge of how to work with families and in their confidence in supporting parents. While not directly discussed in interviews, it is clear that a generally high level of practitioner engagement helped to achieve these outcomes. The majority (60%) delivered the required number of home visits while a quarter (26%) went further and delivered ten visits or more (see Dosage)—this despite the perceived limitations in the remote delivery model and COVID-19 curtailing their capacity to deliver visits. Continuing to deliver home visits even through remote delivery created opportunities for practitioners to improve their knowledge and confidence.

Parent and child outcomes were the most affected by COVID-19 and the remote delivery model. For example, remote delivery limited practitioners' ability to engage with harder-to-reach families: they were less responsive to remote communications and it was harder for practitioners to build relationships. Remote delivery also affected parents' responsiveness to home visits and the overall programme, which limited progress against parent outcomes. The quality of remote interactions was not as high as during in-person visits and the visits less enjoyable for parents. This made it difficult for practitioners to gain buy-in from parents in the activities and the overall programme. As a result, parents' participation in home visits also dropped during remote delivery.

## Implications of COVID-19 for unintended outcomes of the REAL programme

The evaluation uncovered unintended outcomes of the REAL programme, which mitigated somewhat the negative impacts from the COVID-19 pandemic. These were linked to partial school closures and the move to remote delivery, which led to perceived setbacks in children's learning and their social and emotional development (for more details, see section Implications of COVID-19 and Partial School Closures for Families). Practitioners were asked to consider whether the REAL programme addressed gaps in early literacy caused by the COVID-19 pandemic. Their responses included spontaneous reflections on how the programme was already being used or would be applied in their settings as a tool to aid learning recovery. This section summarises the themes that emerged from the surveys and interviews with practitioners, which highlighted outcomes not originally envisaged for the programme.

### Addressing early literacy impacts of COVID-19—How the REAL programme was used

Nearly three quarters of practitioners (74%) said the REAL programme was 'very' or 'fairly' effective in addressing gaps in children's early literacy linked to partial school closures. In interviews, they also expressed positive views in terms of the programme's perceived ability to tackle learning setbacks. Their responses, along with those to open questions, identified how programme activities were being used or would be used in practitioner settings and positively reinforced possibilities for engagement with the intervention longer term. Activities fell under two broad approaches:

#### 1. Embedding programme activities into early years curricula

One approach was to fully embed elements of the programme into the Early Years Foundation Stage curriculum. For instance, a practitioner noted that they would start working with children in the school's nursery setting for a full year, during which time activities would be sent to children's homes, home visits conducted, and children's progress monitored. Work with children would then continue when they entered the school. The main motivation for taking a phased approach was to work with children over a longer period of time. This could strengthen the practitioner's relationship with children and facilitate the tailoring of activities to match children's abilities and address literacy gaps.

#### 2. Using programme ideas in teaching and pedagogy

Another approach was for practitioners to use ideas and resources from the intervention (for example, from activity learning packs) to inform direct teaching of whole-class activities. They noted the utility of activities which encouraged 'imagination' and 'creativity' and developed areas of children's literacy that were 'weaker'.

Such activities, which spanned children's different learning needs, helped to engage children of varying abilities and introduce topics which practiced literacy skills. Practitioners emphasised that programme strategies made a difference to in-class teaching. They stressed that activities were not only applicable for use in children's homes and could be replicated in the classroom context.

As evidenced in the above approaches, practitioners felt able to make small adaptations to programme activities to suit their teaching requirements as well as the needs of the children.

### **Addressing early literacy impacts of COVID-19—Why the REAL programme was used**

The majority of practitioners (89%) reported that they would recommend use of the REAL programme to other settings as part of COVID-19 learning recovery. Endline survey responses and interviews showed that practitioners welcomed the opportunity to continue using the intervention; reducing gaps in learning caused by COVID-19 disruption was a key incentive. Practitioners expressed confidence that their settings would take up programme strategies. The reasons they gave rested on several perceived strengths of the programme:

- **It ensured grounded knowledge of early literacy.** Using the ORIM Framework ensured all areas of early literacy skills (for example, environment, books, writing, and oral language) were developed. This was true for children but also for practitioners and parents. Oral language and environmental print were considered especially useful for parents who found writing and reading difficult themselves.
- **Doable daily tasks.** Informal, everyday opportunities to support children's literacy underpinned the effectiveness of the programme. They pointed to activities children were able to do at home (for example, book sharing) and those that could be undertaken outside the home (for example, identifying objects while out on walks).
- **It facilitated learning in the home.** 'Fun' and practical elements of the programme were thought to be particularly conducive to home learning. Practitioners said they would continue to share activities and resources with parents to help focus learning within the home. This was thought to be an effective way to engage parents in their children's learning and 'level up' children's literacy.
- 'Next year once parents have not had to do full home schooling, it will be a great tool to engage parents and utilise them to close gaps' (Practitioner endline survey).
- **Children's literacy journeys.** The programme helped establish pathways to early literacy by encouraging systematic 'love of reading', language, and writing. Particularly innovative elements of programme activities, such as role play, enabled children to explore their feelings about, and extend their understanding of, books and characters and helped to enhance children's vocabulary and wider language skills.
- **It was easy and accessible.** The accessible and uncomplicated nature of the activities was a key strength of the programme. They felt the programme did not rely on high levels of literacy skills and could be accessed by 'all' parents.
- **The training tool.** Aspects of the programme could be integrated into staff training content to increase awareness of the strands within early literacy development. Practitioners considered this particularly useful for Initial Teacher Training (ITT), to set out the core principles of teaching literacy in early years and primary school settings.

### **Ongoing use of the REAL programme during periods of remote learning**

The COVID-19 pressures meant that settings pivoted to remote learning. This tested the ability of schools and teachers, who had to quickly adapt their teaching methods and deliver lessons online. The value of using the REAL programme in the event schools closed again was highlighted in survey responses and interviews. Practitioners noted the utility of the programme as a tool to support children's learning, citing benefits of programme activities including continued support for families and the ability to more effectively engage children. For example, one practitioner described using ideas from the programme when creating home learning packs. They said that the programme's 'accessible' and 'practical' features offered possibilities for engaging children, particularly younger children who were more challenging to engage.

At the time of the interviews, it was unknown how long schools would be affected by the pandemic. Given the likelihood of further school closures and the instability posed to schools by COVID-19 at the time, practitioners suggested that having access to the REAL programme—a tool that can actively support children’s literacy—would be beneficial to children.

## Implications of COVID-19 and partial school closures for families

This section explores the implications of COVID-19 and school closures for families more generally, including parents’ engagement with remote learning and the impacts on children’s learning. While not directly related to the evaluation of the REAL programme, we collected this additional information at the request from EEF which was interested to find out more about this topic.

### School contact with parents during partial school closures

The REAL programme evaluation took place across two distinct periods of partial school closures (where schools were closed to all children except those considered vulnerable or those with key worker parents/carers). The first period was from 20 March to May half-term 2020, after which children in the REAL programme were able to go back to nursery. The second period of partial closures was in spring term 2021, from the start of January to 5 March inclusive.

Based on our parent survey data (the interim survey of parents carried out in October and November 2020 and the endline survey carried out in May and June 2021) and consistent with published Ofqual data for England (Leahy et al., 2021), we found that REAL children were attending school in person more in the period from January to February 2021 (the 2021 closure period) than in the period between the Easter holidays and May half-term 2020 (the 2020 closure period). When asked about the 2020 closure period, 68% of parents who responded to the survey said their child did not attend school in person at all and just less than a quarter (24%) said their child attended school every weekday. However, when asked about the 2021 closure period, a smaller proportion—52% of parents who responded to the survey—said their child did not attend school in-person at all. And over one third (37%) said their child attended school every weekday.

The surveys asked parents about school contact when their child was not attending every day. We found that contact during school closures increased between the 2020 closure period and the 2021 closure period. A very small minority (5%) of parents who responded to the interim survey said that their child’s teacher contacted them using live or online lessons during the 2020 school closure period. The comparable figure in the endline survey—relating to the later closure period—was 63%. Similarly, the proportion of parents saying they received emails or messages from the school via an app rose from 58% in the 2020 closure period to 71% in the 2021 closure period. Only 15% of parents who responded said they received written feedback on their child’s work from teachers in the 2020 closure period compared with 35% in the 2021 closure period. Finally, parents saying they received contact via phone or video calls stayed about the same (52% in 2020 and 53% in 2021).

In terms of schoolwork set by teachers during remote education, nearly a quarter (23%) of parents whose children did not attend school every day or at all during the 2020 school closure period received work from schools every day for the child to do. This figure rose to 68% for the 2021 school closure period. Likewise, in the former period, almost a third (32%) of parents who responded to the survey said they received work from school less often than every week or not at all; this figure fell to only 8% for the 2021 school closure period. Our findings therefore suggest that schools were more consistently setting work for children to do at home in the 2021 school closure period than in the 2020 period. Parents taking part in the evaluation would have had to provide a substantial amount of support for their children to complete schoolwork set by the teachers, probably more so during the 2021 school closure period than in 2020.

### Parents’ engagement with remote learning

The survey findings on completion of schoolwork for the two periods of school closure were very similar. The vast majority (70% for 2020 and 73% for 2021) of parents who responded to the surveys said that their child completed over half or all of the schoolwork set by teachers. However, just over a quarter (26% for 2020 and 26% for 2021) said their child completed less than half of the work sent home. A very small minority (4% for 2020 and 1% for 2021) said their child completed none of the schoolwork provided.

In interviews, practitioners reported large variation in engagement with remote learning across families. There were families that engaged with *all* expected work and regularly returned children’s work to the teacher and

were in frequent contact with the school. But there were also reports of families that inconsistently engaged with remote learning and other families which the school did not hear from at all and who did not ever engage with remote learning.

However, it must be noted that the discussion of remote learning in qualitative interviews was dominated by both parents and practitioners reflecting on different factors that made it *difficult* for families to support their child's learning during school closures, rather than any facilitators.

Practitioners highlighted the following factors as key to determining parents' levels of engagement with remote learning:

- **Access to devices at home and levels of connectivity.** Families with greater access to devices showed higher levels of engagement with remote learning. Practitioners thought this was linked to economic factors and whether families could afford multiple devices for children. However, this was mitigated through schools buying or subsidising devices for remote learning.
- **Conflicting responsibilities and time pressures.** Parents working long hours, shift work, or with other caring responsibilities had less time to engage with remote learning, and children were more likely to be expected to work independently and with minimal support or guidance. Practitioners reported that in these cases, children were more likely to complete remote schoolwork if they had other relatives, such as grandparents, who could engage and support them. Added to this, parents reported that remote learning was intensive, especially when combined with REAL activities, and sometimes it was very difficult to fit everything in. They found it difficult to engage, particularly when there were multiple children at home (even more so when children were at different educational stages and completing completely different types of work) and their attention and support was stretched thin.
- **Parent attitude to remote learning.** There were parents who expressed reluctance to engage with remote learning or who could not see the value in helping children complete the work being sent home. Schools tended to find these parents more difficult to contact. There were views from practitioners and parents that parents lost motivation with remote learning as the pandemic went on and therefore engagement dropped over time. Parents also highlighted that they struggled to engage with remote learning because they wanted their home to 'feel like home' and 'not like school' and that home should be a space in which children should have fun and play games rather than complete work.
- 'People just either got a little bit bored of what they were doing, or either maybe doing the work and not wanting to reply to us on Tapestry. Definitely across both the nursery and reception class, everybody tailed off a little bit' (Practitioner 10, endline interview.)
- **Parent ability to support remote learning.** In some cases parents lacked the confidence, knowledge, or skills to successfully support children and meaningfully engage with remote education. Practitioners thought these parents were more likely to have fewer educational qualifications or struggle with learning themselves.
- 'You might get parents who feel really, really stressed and full of anxiety. They panic when they see any remote learning, so they just do their own thing, or they don't even engage in anything. Then you get the ones who then lack confidence and they feel like they don't know whether they're doing the right or wrong thing, so they don't really want to respond in case they're giving a wrong answer or they're sharing something that isn't good enough' (Practitioner 3, endline interview).
- In other cases, parents also expressed that they felt unable to fully engage with remote education because they felt overwhelmed by the responsibility of educating their children and that they lacked the necessary skills.
- 'We were struggling because it's different, because ... we're not teachers, are we?' (Parent 13 interview).
- **Language barriers.** Some parents did not engage with remote learning due to language and communication issues whereby they could not understand the English language work which was being sent home.

In addition to these practitioner-reported issues, parents reported a lack of guidance from their school or nursery—that sometimes schoolwork was set with minimal guidance or instruction attached, making it difficult for them to understand what was required. They described being sent large quantities of work to complete with their children but without any in-depth communication from teachers. This made parents feel alone and as if they could not ask for help, leading to lower engagement.

In other cases, parents reported that, while they did not engage with the schoolwork sent by the school, they did complete other learning activities and games. This was either because parents did not feel the work sent by school was appropriate or accessible for their children (for example, because their child was very young for their year and it was too difficult) or because they saw greater value in focusing on other activities such as building life skills—cooking, sewing, gardening, and shopping.

Practitioners and parents expressed views that completing *both* work set by schools as part of remote education and REAL activities during school closures was a lot for parents to contend with. There were parents who reported that they chose to focus on REAL activities *instead* of remote learning because they found them to be better explained, easier to follow, and their children found the work to be more fun.

*'I chose to do mainly the REAL stuff with her. Like with the schoolwork, if it's about phonics, it'd be like a page with like just a few words or whatever, whereas the REAL one would have like pages and pages of different sounds and different pictures to show the sounds' (Parent 6 interview).*

## **Perceived impacts of school closures on children**

### *Perceived impacts on learning and early literacy*

The vast majority (89%) of practitioners who responded to the endline survey said that school closures during the COVID-19 pandemic had either a 'somewhat negative' or 'very negative' impact on reception class children's overall learning. Nearly one in ten (9%) said it had 'neither a positive nor negative' impact, and a very small minority (3%) said it actually had a 'somewhat positive' impact.

Responses to the survey question about the impact of school closures on reception class children's early literacy were almost identical. The vast majority (89%) of practitioners who responded to the endline survey said that school closures during the COVID-19 pandemic had either a 'somewhat negative' or 'very negative' impact on reception class children's early literacy, nearly one in ten (9%) said it had 'neither a positive nor negative' impact, and a very small minority (3%) said it had a 'somewhat positive' impact.

In interviews, practitioners reflected very similar views. There were reports that the pandemic had caused a large, negative impact across reception age children, including those involved in the REAL programme. Practitioners thought this was shown through end-of-year data and their own observations in class.

*'I've just done my end-of-year data and they're all not really where they should be for literacy, and certainly not meeting GLD.<sup>18</sup> It's a huge impact' (Practitioner 18, endline interview).*

Practitioners explained how many children had been shut away, inside their homes, and with little support for learning for long periods of time during the pandemic. There were children who had completed very little of the work sent home by school and had therefore missed out on opportunities to engage with a range of literacy activities. Many children also had limited access to resources, books, and games at home and had also missed school staff modelling activities.

*'We know a lot of them spent a lot of time in front of the TV. A lot of them probably didn't pick up a pen or a pencil, hadn't been out, hadn't had a lot of experiences' (Practitioner 9, endline interview).*

On the whole, practitioners reported that many children had not come back 'school-ready' in terms of their learning and early literacy; they were unable to sustain conversations as well as previous cohorts and were not meeting their early learning goals as expected. They described having to play catch-up with children to

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<sup>18</sup> GLD stands for 'Good Level of Development'. This refers to a summative assessment judgement which is made for each EYFS child at the end of the reception year. It is a measure of attainment, not progress.

build the skills they would typically have developed in nursery. These practitioners tended to express a view that the loss of learning experienced by this cohort of children would be evident for many years to come. There were parents who supported this view and expressed concern that their children had 'gone backwards' or were showing signs that they were below age-related expectations for language and literacy development. However, there was variation amongst practitioners in whether the negative impacts of the pandemic on early learning amounted to an actual loss of learning, or just a slowing down of progress.

There were also views from practitioners that COVID-19 had had a more mixed impact on children's learning and early literacy and that the most negative impacts were felt by particular groups of children rather than being universal. These practitioners emphasised that some children kept learning and progressing in spite of partial school closures because they had a positive and effective home learning environment or because they were still attending nursery or school throughout. Some parents agreed and expressed confidence that their home schooling and home learning environments in general had mitigated any negative impacts of school closures on their children's early literacy development.

Practitioners who reported a mixed impact thought that the children who experienced a slowing down or regression in development tended to be those already struggling before the pandemic. They described more pronounced negative impacts for children with:

- English as an additional language (EAL)—were children may have only been speaking and learning in a language other than English at home (while learning and speaking in languages other than English is still valid learning, it may have been less recognised by nurseries and practitioners);
- chaotic or unsupportive home lives (as identified by practitioners)—where parents and carers were focused on things other than their children's learning; and
- limited access to devices or the internet—where children were least able to access the work sent home by school and older siblings were often prioritised.

One group of practitioners thought the negative impacts of COVID-19 on children's early learning were unrelated to socioeconomic factors but were more to do with individual children's attitudes to remote learning and how much they enjoyed it. These practitioners reported that more independent children coped better with remote learning because they were more able to get on with things themselves. This served to widen gap between children that were more inclined towards learning independently and those that were not.

Another group of practitioners thought negative impacts depended primarily on levels of parental engagement and parents' ability to support remote education—they observed that children who were now performing the 'best' in school had received the most support at home during lockdowns. They felt that parents' own educational background, levels of confidence, and amount of free time influenced how well they could engage and support children.

*'They're the parents who aren't as educated themselves and don't really know how to approach the work with them, so they wouldn't know where to start' (Practitioner 18, endline interview).*

Finally, others said that it was too early to say what the impacts of school closures had been on early literacy.

## **Other perceived impacts**

### *Social skills*

Practitioners reported that the COVID-19 pandemic had also had a negative impact on children's social skills. They felt children were coming back to school with a weakened ability to make and maintain friendships, especially for those who were already quieter. Practitioners provided examples of this, including an example of children being unable to maintain good behaviour while on a school trip and interacting with unfamiliar people outside of school.

*'They really need to build their social skills up again because they've been at home just with parents. I don't think most of them have even ventured to the park or gone for a daily walk. I think a lot of them have been stuck in' (Practitioner 18, endline interview).*

There were parents who believed their children had become increasingly reluctant to go outside and meet other people as a result of school closures. There were children who spent many months only seeing and

talking to the people they lived with, or a very limited wider circle. Parents reported that children were expressing reluctance to take part in activities and meet up with family and friends once COVID-19 restrictions eased because they had reduced social confidence and skills or had lost interest in developing social connections.

However, practitioners believed that there had been less of a negative impact for children living in stable, talkative, busy, and communal home environments where they were encouraged to speak and bond with others. Practitioners emphasised that this finding was not determined by socioeconomic factors but rather by the healthy functioning of the family and home environment. Parents also agreed that having people to talk to at home, including other siblings, helped to maintain children's social skills during school closures.

#### *Emotional development and self-regulation*

Practitioners reported that there had been a negative impact on children's emotional development from the COVID-19 pandemic and that children were displaying less emotional maturity than previous cohorts. This was evidenced by poor emotional regulation in class and an increase in incidents of poor behaviour since returning to school. They also reported children experiencing elevated levels of separation anxiety from their parents and carers, and teachers having to reassure and comfort children more than usual. Practitioners thought the negative impacts on emotional development were due to a lack of exposure to other people and situations, which normally teach children how to regulate their emotions, as well as children absorbing the COVID-related anxieties and poor mental health of the adults around them.

*'It was almost like they were having to do it all over again, so the attachment issues with parents, and being away from mums and dads again, and learning that whole, "Well, we're in school every day now"' (Practitioner 16, endline interview).*

There were parents who agreed that their children had struggled emotionally with school closures and this was having a negative impact on their behaviour. They reported that children had become frustrated, felt creatively stifled, and were becoming less able to regulate themselves.

*'It was really hard, they had no creative outlet and couldn't see anyone and, to be quite honest, it was having a really negative effect on my son. He's a typical boy but he's very, very active, and he was really—he was starting to act out quite a bit, which was concerning me' (Parent 10 interview).*

On the other hand, there were also parents who felt their children were very adaptable and resilient (both adapting to the constraints of the pandemic and also adapting back to school life once schools reopened) and this meant they were less affected emotionally. These parents were more likely to think that their children would 'bounce back' and quickly close any gaps in development.

#### *Coping with structure and routine*

Finally, practitioners highlighted that some children were finding it difficult to cope with the structure and routine of school after long periods of being at home. They felt the transition back to full-time school was most challenging for those who had experienced very little structure and routine at home. They reported children struggling to concentrate in lessons, becoming tired and frustrated more easily than previous cohorts, and having trouble with adapting to school practices and rules. There were parents who agreed that it had been a big adjustment for their children to go back to school and that they were coming home more tired and irritable than usual.

## Conclusion

### Key conclusions

1. The intervention was very well received by practitioners, most of whom maintained high levels of commitment to the programme throughout its duration. However, fidelity in the implementation was not very high, both in terms of dosage (the number of home visits delivered during the intervention), with only 60% of practitioners meeting the minimum requirements, and quality, with modelling of activities and high-quality conversations with parents not always being part of 'remote home visits'.
2. Key benefits of the intervention as perceived by practitioners were their improved knowledge of early literacy development, improved knowledge of how to work with families, greater understanding of children's home environments, and increased confidence in supporting parents. In relation to early in-person home visits, practitioners described how visiting homes was 'eye-opening' because it showed the deprivation and lack of suitable home learning resources among families.
3. The evidence of positive outcomes for parents and children was less consistent. There was no evidence from the parent surveys that the home learning environment in the treatment group families improved over the course of the intervention. However, the majority of practitioners reported that parents' participation in their children's learning and parents' engagement in early literacy activities had increased as a result of taking part in the REAL programme.
4. Remote delivery of the REAL programme made it more difficult for practitioners to build relationships with parents and engage harder-to-reach families (including both making contact with harder-to-reach families and engaging their interest in, and support for, the intervention). Given the key role that relationship building is meant to play in achieving the outcomes of the REAL programme, the remote delivery undoubtedly affected the progress made towards parent and child outcomes, which was perceived by practitioners to be more limited than the progress towards practitioner outcomes. The majority of practitioners expressed a preference for all delivery of the REAL programme in the future to be in-person.
5. Buy-in from schools' senior leadership teams was a key factor facilitating delivery as it supported adequate ring-fencing of time for practitioners to plan and deliver home visits. Main barriers to delivery included high teaching workloads, the need to schedule home visits around parents' availability, a high rate of short notice cancellations by parents, low engagement with the programme from some parents, and the delivery across two school years. Many of these barriers were exacerbated by the COVID-19 pandemic.

## Implementation and process evaluation findings

### Evidence to support the logic model

The programme delivery team (NCB) made substantial changes to intended activities in response to the COVID-19 pandemic. These included cancelling the community literacy events and changing the home visit from in-person to remote. As a result, delivery of the REAL programme was not as originally intended. While NCB provided guidance on remote delivery, IPE evidence showed that, in practice, compliance with the guidance was inconsistent.

Despite changes to activities and mixed levels of adherence to the intended delivery model, our evaluation found evidence for several outcomes in the REAL logic model. This was particularly the case for outcomes related to practitioners themselves. It was evident that practitioners were highly engaged and that the increased contact with families, compared with business as usual before and during the COVID-19 pandemic, was beneficial to them. However, IPE evidence was more mixed for outcomes related to parents and children. For these outcomes, the remote delivery model was a significant barrier to progress.

Overall, our evaluation supports the existing logic model for the REAL programme but we recommend that future research further develops the logic model, particularly in relation to underlying mechanisms. It is important to note that the logic model remained the same throughout the evaluation despite significant changes made to the programme delivery. The programme delivery team did not feel it was necessary to amend the logic model except in minor ways (that is, cancelling literacy events as a programme activity). The rationale for keeping the same logic model was that the core elements of home visits remained the same in the programme delivery guidance, even though the delivery was no longer in person, and the intended outcomes also stayed the same.

Table 7 summarises the strength of evidence and data collection tools used to assess logic model activities and outcomes. Areas of the logic model with strong or weak evidence are discussed below along with

additional considerations for developers and delivery teams. The level of evidence collected during the IPE was generally strong; where the evidence was moderate or weak, this was generally due to inconclusive survey findings. We were also unable to assess the impact of the REAL programme on children's early literacy skills as the impact evaluation was cancelled.

Table 7: Logic model evidence

Participant	Measurement tool	Outcome	Level of evidence
Practitioners	Practitioner baseline and endline surveys, practitioner early implementation and endline interviews, compliance data, observation data.	In-person training	Strong
		Networking meetings	Strong
		Community literacy events (cancelled)	N/A
		Home visits	Strong
Practitioners	Practitioner endline survey, practitioner endline interviews.	Improved knowledge in early literacy development	Strong
		Improved knowledge of working with families	Strong
		Increased understanding of a child's home environment	Strong
		Increased confidence in supporting parents	Strong
		Increased engagement with harder-to-reach parents	Moderate
		Change in professional viewpoint in relation to parents	Moderate
Parents	Practitioner endline survey, endline practitioner interviews, parent surveys (baseline, interim and endline), parent interviews.	Increased engagement in early literacy activities	Strong
		Increased participation of parents in their child's learning	Strong
		Improved communication between parent and child	Moderate
		Improved home learning environment	Moderate
		Improved parent-teacher communication	Moderate
		Improved parent-school communication	Moderate
Children	Practitioner endline survey, endline	Increased communication and engagement in setting	Moderate

	practitioner interviews, parent endline survey, parent interviews.	Increase in children's early literacy skills	Weak (endline child assessments cancelled)
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### Areas of the logic model with strong evidence

- In-person training at the start of the intervention helped practitioners feel prepared to deliver home visits and develop a sound understanding of the ORIM Framework. In surveys and interviews, practitioners described the training content as relevant and engaging and the delivery as high quality. We observed the practitioners to be highly engaged in training sessions. However, practitioners found that there was a lot to cover in the sessions. Additionally, the training location and timetable were challenging for some participants though NCB did reimburse those who attended.
- Networking meetings were moved online, which had mixed success. Attendance in the meetings was inconsistent, with just over half (57%) of practitioners saying they attended both events, just over a third (37%) attending one event only, and 6% not attending any events. Practitioners cited COVID-19 and insufficient communication about the second meeting as barriers to attendance. Most (91%) of those who attended at least one networking event found the events helpful. Practitioners most appreciated the opportunity to share learning about remote activities with other practitioners. They also valued the space to ask NCB questions about remote delivery. However, we observed that the networking and Q&A elements were not consistently taken up in all meetings. In addition, participants found the training session of the first meeting too dense in the online format. We, too, observed less engagement with this section. Overall, practitioners reflected on the importance of the collaborative elements of the in-person training event and felt this was not replicated in online meetings.
- Practitioners were expected to deliver a minimum of eight, but up to ten, home visits per family over the course of the delivery period. This expectation did not change with the move to remote delivery. Before the delivery was paused because of the COVID-19 pandemic and partial school closures in mid-March 2020, practitioners had delivered on average two in-person home visits per family. Once the delivery re-started in September 2020, it was all in a remote mode, with occasional instances of socially distanced, in-person, 'doorstep' home visits. Over the course of the intervention, the majority of settings met the minimum requirements of the programme in terms of the number of home visits delivered. Survey findings show that six out of ten (60%) practitioners delivered eight or more home visits per family. However, 11% delivered just one or two REAL visits per family in total; these were the practitioners who did not deliver any visits remotely and all their REAL visits were from before the pandemic. Practitioners used a variety of resources during remote delivery including activity packs (used by 97% of practitioners), books (86%), printed instructions for activities (86%), videos shared via a website or an app (74%), and interactive video sessions (for example, on Zoom), often with more than one family. Most practitioners used phone calls (77%) and online platforms (71%) for interacting with parents during remote delivery; 57% used face to face conversations (for example, on the doorstep), 57% emails and messages, and 31% video calls.
- In-person visits closely followed NCB guidance on planning and delivering home visits but fidelity was not as high during remote delivery. The revised guidance for remote delivery set expectations to still use the ORIM Framework in planning and to adhere to the three principles of REAL home visits during delivery: modelling early literacy activities, sharing resources, and having high-quality conversations with parents. The perceived limitations of the remote delivery model made modelling and high-quality conversations more difficult. However, practitioners did continue to share resources with parents throughout remote delivery.
- Evidence supports several short- and medium-term outcomes for practitioners set out in the logic model. In surveys and interviews, a large majority of practitioners reported greater knowledge of early literacy development and of how to work with families, greater understanding of children's home environments, and increased confidence in supporting parents. Continuing to deliver home visits through remote delivery allowed practitioners to

increase the contact they typically had with families, which created opportunities for practitioners to improve in these outcome areas.

- Evidence supports two medium-term outcomes for parents. The majority of practitioners said that parents' participation in their children's learning and parents' engagement in early literacy activities increased as a result of taking part in the REAL programme. However, they perceived that progress towards these outcomes was limited by the remote delivery model and in particular the inconsistent engagement of parents in remote home visits. In their view, had in-person visits continued, outcomes would have been even stronger. What is more, our evaluation found evidence for two underlying mechanisms for the medium-term outcome of improving parents' participation in their child's learning that we recommend including in the next iteration of the logic model: one was that REAL home visits increased parents' confidence to lead home learning activities, particularly among those parents who were not highly educated and who benefitted from the reassurance practitioners gave that they were 'doing the right thing'; another mechanism was the knowledge parents gained from the practitioners about different home learning activities and how to best engage the child.

### **Areas of the logic model with moderate or weak evidence**

- Evidence was weaker for one impact (change in the professional viewpoint in relation to parents) and one longer-term outcome for practitioners (engagement with harder-to-reach parents). In both cases, this was due to missing or inconclusive survey evidence. However, interviews with practitioners indicated that learning about children's home learning environments had shaped practitioners' viewpoint in relation to parents. Regarding engagement with harder-to-reach parents, practitioners reflected how barriers remained despite their best efforts and also that the remote delivery model made it more challenging to build relationships with families.
- The level of evidence was only moderate for the medium-term outcome of improving parent-teacher communication and the longer-term outcome of improving parent-school communication. Only half (51%) of practitioners thought that communication between parents and teachers improved over the course of the programme. The same proportion (51%) thought that communication between parents and the school improved. However, practitioners' ability to assess progress against these two outcome areas was complicated by the fact that after September 2020 many practitioners delivering REAL were no longer the children's class teacher. The partial school closures and remote learning also affected practitioners' and the schools' communication with families outside the context of the REAL programme. This is evident in the high proportions of practitioners who said they neither agreed nor disagreed when asked in the survey if these outcome areas improved.
- Evidence was also moderate for the longer-term outcome of improving the home learning environment. Analysis of the HLE index for treatment-group parents found that home learning environments did not improve during our evaluation. However, the survey findings were inconclusive due to low response rates. In interviews, parent views on the question were mixed. One group of parents cited examples of new home learning activities that they had been introduced to through home visits. Findings from other parents suggest that the programme did not increase how often they engaged in home learning, but how they did the activities. For example, they now asked the child questions about a book and used voices for different characters. This often came with the broader realisation that learning can be fun and simple and that early literacy activities can happen everywhere.
- IPE evidence for one longer-term outcome (children's communication and engagement in the setting) and one impact (early literacy skills) for children was either moderate or weak. While a majority of practitioners (63%) said that children's communication and engagement at the setting improved, a third (31%) neither agreed nor disagreed with the statement. This indicates that they found it difficult to answer the question, probably due to the limited in-person teaching time they had with children in the REAL programme in the 2020/2021 school year. Lastly, evidence was weak for increased early literacy skills in children. This is due to our impact evaluation having been cancelled due to the COVID-19 pandemic. While the majority of practitioners said that children's early literacy skills improved, in interviews, parents and

practitioners found it difficult to disentangle the impact the REAL programme from the progression children would have made anyway.

### **Additional considerations for developers**

- Practitioners were positive about the overall quality of training, the course structure, the knowledge and skills of the trainers, and were highly engaged. However, quality and engagement were higher for in-person delivery of training. Practitioners valued opportunities for participation and to ask questions of the trainers and felt this worked best when trainers were physically present. If training on the REAL programme is to be delivered online in the future, further thinking about the structure and format of sessions will be important and, in particular, opportunities for Q&A should be prioritised.
- There was an appetite amongst practitioners to build on opportunities to pool ideas, expertise, and skills following the in-person training events. In the main, however, online network meetings did not provide the opportunity to do so. Networking events, as set out in the logic model, were envisaged as a key mechanism to share learning, therefore hosting events in person wherever possible would be beneficial. If future networking events were to be conducted remotely, it will be important to have increased support for practitioners to form peer support networks, perhaps through assigning practitioners to work in groups to encourage collaboration.
- The REAL programme delivery was meant to span the nursery and reception years, starting in the spring term of the nursery year and finishing in the spring term of the reception year. (Because of the pause in the delivery, the programme actually finished in the summer term of the reception year.) Whereas this did not present issues for some practitioners (for example, those who moved with children, switching from teaching in nursery to teaching in reception), others lost everyday contact with the families when the children left nursery. Practitioners commented that delivering the programme to children whom they were not currently teaching made it much harder for them to tailor activities for, and track the progress of, individual children. It also occasionally led to feelings of disconnection from children and families. Programme developers may want to consider whether the programme could be delivered within the same school year, either in nursery or in reception.
- Most practitioners in the evaluation remained enthusiastic about the REAL programme throughout its whole delivery period, including when it was delivered remotely in the context of the COVID-19 pandemic. However, the majority of practitioners (57%) expressed a preference for all delivery to be in person, were they to take part again, with 43% preferring a mix of in-person and online delivery, and no one expressing a preference for all REAL home visits to be online. We also found that REAL home visits that were delivered remotely often did not meet all the requirements of a REAL home visit (for example, they lacked the modelling of activities or conversations with parents about how the activities went, or both). Programme developers might want to reflect on whether the REAL programme can be delivered remotely while keeping its key features based on the existing logic model. One suggestion could be that a separate remote-delivery version of the programme be developed and evaluated, with revised requirements for home visits (for example, reduced compared to in-person delivery) reflected in an amended logic model. Another suggestion would be to consider whether it might be useful to incorporate particular elements of remote delivery into a largely in-person delivery model, building on the positive aspects of remote delivery identified in this IPE.
- Buy-in from senior members of staff was a key factor facilitating delivery. It supported adequate ring-fencing of time for practitioners to plan and deliver home visits. It also demonstrated the value schools placed on REAL. Practitioners who did not have good levels of support from senior members of staff were more likely to struggle to find the time to deliver REAL and reported higher levels of stress related to programme delivery. Developers might want to consider additional strategies for keeping senior leadership teams in participating schools on board throughout the programme delivery period.
- REAL home visits (both in-person and remote) required flexibility around scheduling from practitioners that they did not necessarily have. They reported that it was difficult scheduling the programme visits for times when parents were free. If parents worked, it usually meant

practitioners had to schedule visits early in the morning, or in the evening, which lengthened practitioners' working hours. Practitioners also reported that it was common for parents to cancel visits at short notice and they spent a lot of time rearranging visits. When in-person visits were cancelled at short notice, it was difficult for schools to manage staffing and to rearrange cover. These issues can present a challenge to the longer-term sustainability of REAL.

## Interpretation

This IPE focused on evaluating the REAL programme as it was delivered in practice, which was very different from how it was meant to be delivered at the outset. The changes to the programme activities (for example, moving from in-person to remote visits and cancelling literacy events) had significant consequences for programme delivery and outcomes. Remote delivery made it more difficult for practitioners to build relationships with families. Parents' engagement with home visits also suffered. These barriers meant that progress towards parent and child outcomes was limited. Progress towards practitioner outcomes was better; this was largely due to high practitioner engagement with the overall programme.

Adherence to the guidance for remote delivery was mixed but our evidence shows that this was because of the limitations associated with this delivery mode. We are not confident that with a different cohort of practitioners and in a different geographical area or different time period, the REAL programme could be delivered with a much higher degree of fidelity than found in our evaluation while still being delivered in a remote mode.

In some ways, the drawbacks of the remote delivery model highlight a unique value of the REAL programme when delivered as originally intended, that is, in person. Findings of our evaluation draw attention to the importance of parental engagement and relationship-building with families for achieving parent and child outcomes. In addition, our evaluation found evidence for two mechanisms that facilitate parents' participation in learning: increased parent confidence to direct home learning activities and increased parent knowledge about different home learning activities. Parents and practitioners agreed that fun and simple home learning activities were the best way to involve parents. In addition, our evidence suggests that increased parent knowledge about how early literacy develops is a key mechanism for improved parent engagement in early literacy activities. This was achieved through practitioners sharing knowledge and parents spending more time doing early literacy activities together with their child. Practitioners and parents agreed that early literacy activities rooted in everyday tasks in the home were a successful way of engaging parents.

One of the key limitations of our evaluation was the cancellation of the impact evaluation, which means we do not know whether early literacy outcomes for the children taking part in the intervention were different from those for the children in the business-as-usual control group. The cancellation was partially for logistical reasons (it was not feasible to carry out endline child assessments in person given high levels of COVID-19 infections in the community) and partially because of doubts about the value of impact findings in relation to a delivery model that is unlikely to be ever repeated again (that is, only two in-person home visits followed by a six-month pause, no literacy events, and the rest of the home visits delivered remotely).

Comparisons between findings in this IPE study and the previous feasibility trial (Sylva et al., 2018) reveal that the earlier study found evidence of positive changes in the home learning environment that could be attributed to the intervention. Our study, however, did not find evidence of such changes. This could be because of differences in how the programme was delivered in these two studies (there was a number of substantial differences in the number and nature of activities that parents took part in) or it could also be because of differences in the methodology of data collection and analysis. What was common between the two studies was that participants were generally positive about perceived benefits of the programme, particularly with regard to the training and outcomes of the programme for parental engagement. There was also a common theme of challenges associated with scheduling in-person home visits. Another previous evaluation on the REAL approach (Hirst et al., 2010) found significant positive effects for children and parents who took part, while a third one (Hannon et al., 2020) found positive effects on children's literacy, particularly in families where mothers had no educational qualifications. As discussed above, our evaluation found progress towards child and parent outcomes to be more limited compared to practitioner outcomes, largely due to the remote delivery mode. In addition, we were not able to measure impacts on children's literacy due to the cancellation of the impact study.

## Limitations and lessons learned

### Logic model

Although most parts of the original logic model for the intervention were still relevant when the programme switched delivery from in-person to remote mode, some of the underlying mechanisms—not articulated explicitly in the model but underpinning the achievement of the programme outcomes and impacts—did not work as well when practitioners were no longer visiting families' homes. We now realise that it would have been prudent to hold another logic model workshop with the delivery team when the intervention was adapted in response to the COVID-19 pandemic. This would have allowed the implications of switching to remote delivery to be fully discussed and incorporated into the revised logic model as appropriate. If the REAL programme were to be delivered in a remote mode again in the future, we would suggest that both the guidance for the programme delivery and the logic model are reviewed and revised.

### Data collection tools

The evaluation achieved high response rates in both practitioner surveys (baseline and endline) and was successful in recruiting practitioners and parents to complete case study and additional depth interviews. However, other data collection tools used did not work as well.

- Practitioners struggled to complete the compliance spreadsheets. The scale of errors and data gaps in the submitted spreadsheets was such that they could not be used in the evaluation report. Instead, for assessing dosage, we had to draw on the practitioner endline survey data, which was less precise. If compliance spreadsheets are to be used again in a future evaluation of the REAL programme, we would suggest using a simplified format, pre-filling the spreadsheets with unique pupil IDs in each school and carrying out comprehensive checks of submitted data by the evaluation team as soon as spreadsheets have been received.
- It was difficult to obtain accurate data from schools on children who were no longer taking part in the study because of moving schools for their reception year or for other reasons. We decided to stop pursuing schools for this information because we did not want to overburden them during the pandemic with requests for data that was not essential for answering our key research questions. However, as a result of this decision—and in the context of endline child assessments not having taken place because of the cancellation of the impact evaluation—we do not hold accurate data on child attrition from the study. This means our evaluation has not collected data that could be used in future evaluations of REAL for estimating likely child-level attrition. Given the span of the intervention across the nursery year and the reception year, children dropping out from the intervention because of moving schools after their nursery year present a significant challenge for REAL, both the intervention itself and any future evaluations of it. We recommend that more scoping work around likely attrition levels is carried out ahead of any future RCTs of REAL.
- Response rates achieved in the surveys of parents were rather low and, more importantly, the proportion of families completing all three waves (baseline, interim, and endline) was even lower. This meant that a measure of the home learning environment at all three timepoints was available for a very small proportion of parents taking part. In the future, we would recommend avoiding a design that involves collection of outcome data from parents on the basis that it is unlikely that sufficiently high response rates could be achieved in a longitudinal survey where the evaluation team has to communicate with parents via schools or practitioners and is not able to employ costly survey data collection methods such as face to face interviews. If a survey of parents is essential, a two-wave longitudinal survey would be better than a three-wave one as it would mean less burden on both parents and schools, and it would be worth considering incentives for parents completing the surveys.
- Interviews with two parents per practitioner for the case studies worked well as an approach in terms of numbers of interviews achieved. However, we did not get the mix of parents that we aimed for. We asked practitioners to recruit one parent who was very engaged with the REAL programme and one who was not well engaged. In the end, interview data suggests that all the parents interviewed for the evaluation had fairly high levels of engagement. In the future, more

thought should be given to the best way of accessing participants who were randomised to receive the intervention but for one reason or another, did not engage with it as much as others.

### **Effects of COVID-19 on delivery**

Partial school closures and the necessity for parents to support their children's remote education interfered with programme activities by blurring distinctions between remote education, the REAL intervention, and normal home learning. This might have affected perceived benefits of the REAL programme for parents and children. For instance, we found some parents had felt overwhelmed with home learning when schools were closed, were not always clear about the amount of time spent on REAL activities, and found it hard to separate remote education activities set by the school from those that were linked to the programme.

### **Generalisability of evaluation findings**

The extent to which the IPE findings can be generalised is somewhat limited given that it is unlikely that the REAL programme would be delivered in the same format ever again (that is, about two in-person REAL visits per family, followed by a pause of about six months, then remote REAL visits for the rest of the programme delivery, and no literacy events) and within the same broader context of the COVID-19 pandemic (including long periods of partial school closures and remote education). In addition, without an impact evaluation, which was cancelled because of the pandemic, there are limits to how much the perceived outcomes can be attributed to the intervention.

### **Future research and publications**

Our IPE provides evidence about the feasibility and perceived outcomes of the REAL programme for practitioners, parents, and children. The limitation of the study is that it did not include an impact evaluation for assessing impacts on children's literacy. Therefore, we recommend that future research about the REAL programme includes an impact evaluation with objective measures of children's literacy outcomes.

We also recommend that the programme logic model is further developed, particularly in relation to the underpinning mechanisms. Our evaluation found evidence for two underlying mechanisms for the medium-term outcome of improving parents' participation in their child's learning that we recommend including in the next iteration of the logic model. One was that REAL home visits increased parents' confidence to direct home learning activities, particularly among those parents who were not highly educated and who benefitted from the reassurance practitioners gave that they were 'doing the right thing'. Another mechanism was the knowledge parents gained from the practitioners about different home learning activities and how to best engage the child. We suggest that further research is carried out into the underlying mechanisms for the other outcomes for parents, practitioners, and children.

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## Appendix A: Memorandum of Understanding

### Evaluation of the REAL Programme in the North of England: REPLY FORM

If you would like to participate in the REAL Programme Evaluation, please read and sign the below reply form and Memorandum of Understanding (MOU), and return it to NCB, scanned and emailed to

[[contact email](#)]. Once we have received your reply form we will send you a confirmation email confirming receipt and outlining the next steps.

	Contact's Details	Please amend if necessary
<b>School Name:</b>		
<b>Headteacher:</b>		
<b>Tel. No:</b>		
<b>Fax No:</b>		
<b>Email address:</b>		

My school **will** take part in this evaluation and agrees to the conditions stated in the Memorandum of Understanding (MOU).

**Headteacher signature**.....

**Name of nominated REAL contact in the school:**

Mr/Mrs/Miss/Ms/Dr: .....

Job title: .....

Contact phone number: .....

Contact email address: .....

Best time to contact you: .....

## Evaluation of the REAL Programme in the North of England: Memorandum of Understanding

The following outlines our expectations from schools and teachers taking part in the evaluation. Please read the following statements and sign the reply form provided to confirm that you have read the document, please also sign and keep this copy for your reference.

Separate information sheets containing further detail about The REAL Programme and the independent evaluation are appended to this form.

### **Our overall expectations of the school:**

- The school must allocate a named contact to the project to work with NCB (guidance can be provided on who this should be). They should have sufficient capacity to be able to respond promptly to requests and facilitate requirements as appropriate. If they leave the school or are no longer able to meet the requirements for the role, NCB must be promptly informed of this, and details of a replacement contact provided.
- All data required by NCB in relation to the project must be provided in a timely fashion.

### **Specific expectations of all schools**

- Schools will use the provided guidelines to allocate 10 children in Nursery Year to the programme, with 8 of these going on to be part of the programme.
- Schools will be supportive in working with NCB and NatCen to allow programme children to be tested at baseline and post programme.
- Schools will administer questionnaires to families as agreed.

### **Schools allocated to the Intervention group**

- Schools will agree to release 1 Nursery or Reception teacher to attend four days of training in January 2020.
- Trained teachers will complete the expectations of the programme, undertaking 10 home visits per child and 4 events.
- Head Teachers agree to release the trained teacher for half a day per week for which to undertake the expectations of this programme.
- The intervention will take place in Spring and Summer terms of the Nursery year (2020), and Autumn and Spring terms (2020-2021) of the Reception year. Schools must agree to continue to release the trained teacher from September 2020 to February 2021 to work with their project children once they have transitioned into Reception year.
- Trained teachers will attend termly twilight network meetings within their LA.
- Teachers will log details about their interactions with target families, including length and summary of content of home visits, engagement level of parent.
- Schools will receive £5,600 to work with 8 pupils. This used to support their delivery of this programme, split into two payments, the first payment once teacher has completed training.

### **Expectations of Schools allocated to the Control group**

- There will be no change to the normal school practices.
- The school will not take part in any other evaluations or trial any other literacy programmes with the Nursery or Reception cohort for the duration of the programme.
- Schools will receive a figure of £1000 for taking part as a control school.

### **Timetable of Activities for Schools**

Date	Activity
<b>Jan – July 2019</b> <b>All Schools</b>	<b>Sign-up to take part in the trial</b> <ul style="list-style-type: none"> <li>• Return reply form and signed Memorandum of Understanding to NCB</li> <li>• Schools take a copy of the MoU to keep for their records</li> <li>• Schools provide NCB with the names and contact details for their Nursery teacher</li> </ul> <i>Only when a school has completed all the above steps have they completed the sign up process. At this point schools will receive a confirmation email from NCB confirming that their school will go forward to randomisation.</i>
<b>September / October 2019</b>	<b>Schools select 8-10 pupils to be part of the programme</b> <ul style="list-style-type: none"> <li>• Parent consent is gained for selected pupils</li> </ul>

	<ul style="list-style-type: none"> <li>• Pupil data is collected from the school and shared with NatCen</li> </ul>
<b>November/December 2019</b>	<ul style="list-style-type: none"> <li>• Schools will find out whether they are delivering REAL or are in the 'control' group</li> </ul>
<b>January 2020 Intervention Schools</b>	<p><b>Schools receive the training</b></p> <ul style="list-style-type: none"> <li>• 60 teachers from intervention schools take part in 4 day training delivered by Professor Cathy Nutbrown and NCB</li> <li>• Dates: 14<sup>th</sup> &amp; 15<sup>th</sup> January 2020, and 21<sup>st</sup> &amp; 22<sup>nd</sup> January 2020</li> <li>• Training to be held in central Sheffield, travel costs covered</li> <li>• On completion of training, schools receive first half of funding allocation</li> </ul>
<b>January 2020- July 2020 Intervention Schools</b>	Teachers deliver minimum of 5 home visits and 2 literacy events, plus one postal communication
<b>Summer holiday 2020</b>	Teachers provide minimum one postal communication or other contact with project families
<b>September 2020 – February 2021</b>	Teachers deliver a minimum of 3 home visits and 2 literacy events.

**Please read the following statements and sign at the bottom if you agree with the statements:**

I confirm that I have read and understand the information provided about the project and I have passed a copy of the Memorandum of Understanding and School Information Sheet to my designated named contact. I have had the opportunity to ask questions, and have had these answered satisfactorily. If you have further questions please raise these with [name and email of NCB contact].

This is a project that aims to evaluate the impact of The REAL Programme; I understand that my school will be randomly assigned to either deliver the REAL programme or take part as a control group. The project is to be delivered Spring 2020 to Spring 2021.

	Please tick
I agree to my school taking part in the trial of The REAL Programme as described above and in the school information sheet provided by the National Children's Bureau.	
I agree to my school taking part in the evaluation and to support the completion of all evaluation activities as set out in the information sheet provided by NatCen Social Research.	

I know who I can contact if I have any concerns or complaints about the The REAL Programme and the evaluation.

I agree that my school will take part in the above study.

Signed.....

Print.....

Position.....

Date.....

## Appendix B: Memorandum of understanding: addendum

### Evaluation of the REAL Programme in the North of England: Memorandum of understanding and information sheet ADDENDUM

1<sup>st</sup> July 2019

Thank you for signing up to take part in the REAL Programme with NCB, which is being evaluated by NatGen and funded by the EEF. We have decided to change the trial design in order to make it robust with a smaller number of schools. This means that **all schools** will receive the programme for some parents.

Where previously, 120 schools would have been randomly allocated to either receive the intervention or be in the control group, we will now be working with approximately 70 schools which will all receive the intervention. As a result, participating schools will need to identify 14 -16 pupils who would most benefit from the programme. Only half of these pupils will take part in the intervention, and the remaining pupils will take part in the evaluation but will not receive the intervention.

Following the information contained in the attached Memorandum of Understanding (MoU), information sheet and privacy notice, please note the following updates have been made to the research design:

#### MOU:

<b>Previous</b>	<b>Updated</b>
<p><b>Specific expectations of all schools</b></p> <ul style="list-style-type: none"> <li>Schools will use the provided guidelines to allocate 10 children in Nursery Year to the programme, with 8 of these going on to be part of the programme.</li> </ul>	<p><b>Specific expectations of all schools</b></p> <ul style="list-style-type: none"> <li>Schools will use the provided guidelines to allocate 14-16 children in Nursery Year to the programme, with half of these going on to be part of the intervention group and the other half forming the control group.</li> </ul>
<p><b>Schools allocated to the Intervention group</b></p> <ul style="list-style-type: none"> <li>Schools will agree to release 1 Nursery or Reception teacher to attend four days of training in January 2020.</li> <li>Trained teachers will complete the expectations of the programme, undertaking 10 home visits per child and 4 events.</li> <li>Head Teachers agree to release the trained teacher for half a day per week for which to undertake the expectations of this programme.</li> <li>The intervention will take place in Spring and Summer terms of the Nursery year (2020), and Autumn and Spring terms (2020-2021) of the Reception year. Schools must agree to continue to release the trained teacher from September 2020 to February 2021 to work with their project children once they have transitioned into Reception year.</li> <li>Trained teachers will attend termly twilight network meetings within their LA.</li> <li>Teachers will log details about their interactions with target families, including length and summary of content of home visits, engagement level of parent.</li> <li>Schools will receive £5,600 to work with 8 pupils. This used to support their delivery of this programme, split into two payments,</li> </ul>	<p><b>All schools</b></p> <ul style="list-style-type: none"> <li>Schools will agree to release 1 Nursery or Reception teacher to attend four days of training in January 2020.</li> <li>Trained teachers will complete the expectations of the programme, undertaking 10 home visits per child and 4 events.</li> <li>Head Teachers agree to release the trained teacher for half a day per week for which to undertake the expectations of this programme.</li> <li>The intervention will take place in Spring and Summer terms of the Nursery year (2020), and Autumn and Spring terms (2020-2021) of the Reception year. Schools must agree to continue to release the trained teacher from September 2020 to February 2021 to work with their project children once they have transitioned into Reception year.</li> <li>Trained teachers will attend termly twilight network meetings within their LA.</li> <li>Teachers will log details about their interactions with target families, including length and summary of content of home visits, engagement level of parent.</li> <li>Schools will receive £5,600 to work with up to 8 intervention pupils. This will be used to support their delivery of this programme, and will be split into two payments, the first</li> </ul>

<p>the first payment once teacher has completed training.</p> <p><b>Expectations of Schools allocated to the Control group</b></p> <ul style="list-style-type: none"> <li>• There will be no change to the normal school practices.</li> <li>• The school will not take part in any other evaluations or trial any other literacy programmes with the Nursery or Reception cohort for the duration of the programme.</li> <li>• Schools will receive a figure of £1000 for taking part as a control school.</li> </ul>	<p>payment once teacher has completed training.</p> <ul style="list-style-type: none"> <li>• Families in the control group will receive a minimum of a £20 book voucher once data collection for the evaluation has been completed.</li> <li>• The school will not take part in any other evaluations or trial any other literacy programmes with the Nursery or Reception cohort for the duration of the programme. <ul style="list-style-type: none"> <li>▪</li> <li>▪</li> </ul> </li> </ul>
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**Information sheet:**

<b>Previous</b>	<b>Updated</b>
<p>The evaluation will be a randomised control trial involving 120 school nurseries. This means that staff at half of the nurseries taking part in the evaluation will take part in The REAL Programme, and staff at the other nurseries will carry on with their usual childcare and education activities with children. At the end of the study, NatCen will compare children's early literacy across nurseries that do and do not take part in The REAL programme, to see if there is any difference.</p>	<p>The evaluation will be a randomised controlled trial involving approximately 70 school nurseries. In each school, half of the children selected will be allocated to the intervention (their parents will work with the Early Years practitioner to improve their skills for supporting children's early literacy), and half of the children will be allocated to the control group (they will continue with the usual parental engagement). Practitioners will continue to teach all children following normal practice. At the end of the study, NatCen will compare the early literacy of children that do and do not take part in The REAL programme, to see if there is any difference.</p>
<p>Participating settings will need to:</p> <ul style="list-style-type: none"> <li>▪ Select 8-10 children based on the criteria set by the National Children's Bureau</li> </ul>	<p>Participating settings will need to:</p> <ul style="list-style-type: none"> <li>▪ Select 14-16 children based on the criteria set by the National Children's Bureau</li> </ul>
<p><b>Timetable of Activities for Schools</b></p> <p>September / October 2019: Schools select 8-10 pupils to be part of the programme</p> <p>January 2020: 60 teachers from intervention schools take part in 4 day training delivered by Professor Cathy Nutbrown and NCB</p>	<p><b>Timetable of Activities for Schools</b></p> <p>September 2019: Schools select 14-16 pupils to be part of the programme in early September 2019.</p> <p>January 2020: 1 teacher from each intervention school to take part in 4-day training delivered by Professor Cathy Nutbrown and NCB.</p>
<p><b>What research activities will be carried out?</b> ...</p> <p><b>Schools delivering the REAL programme</b></p> <p><b>Staff</b></p> <ul style="list-style-type: none"> <li>- Surveys with Head Teachers and staff</li> <li>- Observations of some staff-parent interactions</li> <li>- In-depth interviews with selected staff</li> </ul> <p><b>Parents</b></p> <ul style="list-style-type: none"> <li>- Short surveys with parents</li> <li>- Observations of selected staff-parent interactions</li> <li>- In-depth interviews with some parents</li> </ul> <p><b>Schools which are in the 'Control Group'</b></p> <ul style="list-style-type: none"> <li>- Survey with the Head Teacher</li> <li>- Short surveys with parents</li> </ul>	<p><b>What research activities will be carried out?</b> Research activities will be carried out in all schools. NatCen will communicate details about upcoming activities in a timely way.</p> <p>Anticipated research activities are:</p> <p><b>Children</b></p> <ul style="list-style-type: none"> <li>- assessment</li> </ul> <p><b>Staff</b></p> <ul style="list-style-type: none"> <li>- Surveys with Head Teachers and staff</li> <li>- Observations of some staff-parent interactions</li> <li>- In-depth interviews with selected staff</li> </ul> <p><b>Parents</b></p> <ul style="list-style-type: none"> <li>- Short surveys with all parents administered by the Practitioner</li> <li>- Observations of selected staff-parent interactions</li> </ul>

	<ul style="list-style-type: none"><li>- In-depth interviews with some parents</li></ul> <p>CRITICAL DATES for the AUTUMN term:</p> <p><b>By Friday September 13</b></p> <ol style="list-style-type: none"><li>1. Discuss intervention with eligible parents (guidelines provide by NCB)</li><li>2. administer parent survey</li><li>3. send details of eligible pupils to NatGen (instruction will be provided September 2-3)</li></ol> <p><b>Monday October 14 – Friday November 29</b></p> <ul style="list-style-type: none"><li>- Assessment of children</li><li>- Trained assessors will start to schedule and carry assessment of all children selected for the trial</li><li>- Once testing is complete we will let each setting know which children will receive the intervention</li></ul> <p><b>Monday December 2 – Friday December 13</b></p> <ul style="list-style-type: none"><li>- Practitioners ensure all parents are informed of their allocation – that is whether they will receive the intervention or not (part of the Control Group)</li><li>- Guidance on how to communicate this will be provided.</li></ul>
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All other content remains unchanged. No changes have been made to the privacy notice. To confirm your agreement to participate in this trial, please complete and sign the form below, as well as the Reply Form shared with the MOU.

<p>My school <b>will</b> take part in this evaluation and agrees to the conditions stated in the MOU and this addendum.</p> <p><b>School name:</b> .....</p> <p><b>Headteacher name:</b> .....</p> <p><b>Headteacher signature:</b> .....</p> <p><b>Estimated number of 3-year-olds starting nursery in September 2019:</b> .....</p>
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## Appendix C: Nursery information leaflet

# Evaluation of The REAL Programme

## Information for nurseries and schools

The Education Endowment Foundation (EEF) have funded NatCen Social Research (NatCen) to carry out the independent evaluation of The REAL Programme which will be run by the National Children's Bureau.

### What is the evaluation trying to find out?

Our evaluation will answer four key questions:

- How is The REAL Programme delivered?
- What is needed to successfully deliver REAL, and what are the challenges?
- What, if any, impact does REAL have on children's early literacy?
- What are the effects of The REAL Programme on the home learning environment?

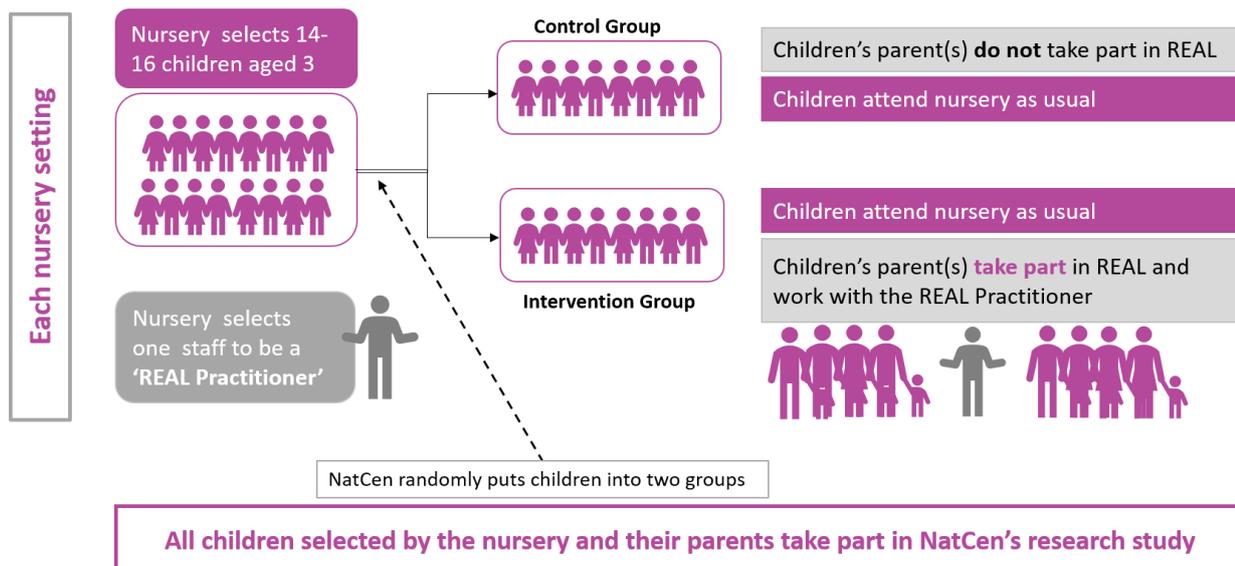
In the future, EEF may look at participating children's Early Years Foundation Stage profile to see if there is a difference in early literacy development between children who were part of the REAL programme and those who were not.

### What is the evaluation design?

The evaluation will be a randomised control trial. This means each nursery that has signed an MoU and the Addendum, will need to do the following:

- Select a nursery teacher to be the REAL practitioner
- Select 14-16 children aged 3 years old to take part in the research study.

NatCen will then randomly select children to form two groups – a control group and a treatment group. Each group will have 7-8 children. This process is depicted in the diagram.



### What does taking part involve?

Signing the MoU is a commitment to take part in all evaluation activities and to participate for the duration of the evaluation (until March 2021). Participating schools will need to:

- *Provide the name of a key contact* who will help the NatCen research team to schedule evaluation activities.
- *Hand out a parent information leaflet* explaining the evaluation.
- *Select 14-16 children* aged 3 years old based on the criteria set by the National Children's Bureau.
- Provide the *names, unique pupil number (UPN), and date of birth* for each of the selected children, and *the name and contact details of the main carer* of each child. We will let you know how to share this information securely.
- Be *responsive to NatCen's requests for information* and support the completion of evaluation tasks within agreed timeframes.

## What research activities will be carried out?

The evaluation will run from September 2019 through to March 2021. Participation in research activities is voluntary. We will provide participating schools with a detailed timetable at the start of the evaluation and for each school term. Research activities will include:

### REAL Practitioner

- Online surveys
- Observations of some staff-parent interactions
- Interviews with selected staff

### Parents

- Paper surveys with parents
- Observations of selected staff-parent interactions
- In-depth interviews with some parents

### Children selected to be in the study

- Early literacy assessment in October/November 2019 and in February 2021. This will be administered in school settings by Speech and Language Therapists.

## How will the information be used?

NatCen will use the information gathered to write a report which will be published on the Education Endowment Foundation's website. The report will be published in early 2022.

## GDPR and data security

NatCen is the data controller who also processes data for this evaluation. For the use of personal data to be lawful, we need to meet one (or more) conditions in the data protection legislation, as set out in Article 6(1) of the General Data Protection Regulation (GDPR). For this project, the relevant condition that we are meeting is condition 'legitimate interest'. The link to our privacy notice will be shared in September 2019.

NatCen will store and handle all data securely and confidentially in line with the GDPR. Only the research team will have access to the data. Reports and other publications arising from this research will not identify any individual nursery, school, staff member, parent or pupil.

## What will NatCen promise to do in return?

The research team at NatCen commit to:

- Providing information about each stage of the evaluation in a timely way.
- Storing information about your nursery and children securely.
- Ensuring the confidentiality and anonymity of all findings.
- Being a point of contact for any questions about the evaluation.

## Who do I contact for more information about the evaluation?

The NatCen team are happy to answer any questions about the evaluation and research activities. Please contact us at: [real@natcen.ac.uk](mailto:real@natcen.ac.uk)

## Appendix D: Parent information leaflet

### The REAL Programme Taking part in the research study

Dear parent or carer,

We are writing to let you know that your child's nursery is participating in an exciting research study focused on children's early literacy development. To do this the nursery will deliver a programme called The REAL Programme. REAL stands for Raising Early Achievement in Literacy.

Between 14-16 children aged 3 and their parent/carer will take part in the study. You and your child have been selected by the nursery to take part in the research study.

The research study is a randomised control trial. This means that **half** of the selected children and their parent/carer will be able to take part in The REAL Programme, and the other half will attend the usual nursery activities. However, **all selected children and their parent/carer** will be part of the research study.

For your child, taking part will involve a short literacy assessment carried out by trained professionals at your child's nursery. You may also be asked to take part in research activities.

The following organisations are involved:

- The **National Children's Bureau** is running The REAL Programme in your child's nursery
- One staff member at your child's setting will receive training and will be the '**REAL practitioner**' for the study
- **NatCen Social Research** will carry out the research which includes assessing all children selected to take part in the research study.
- The **Education Endowment Foundation** and the **Department for Education** are co-funding the research study

For more information please refer to the **Frequently Asked Questions** accompanying this letter. If you have any questions, please contact us at: [real@natcen.ac.uk](mailto:real@natcen.ac.uk)

Your participation in the study is very important and I look forward to working with you to deliver this research study.

Best wishes,

**[Name of researcher]**

The REAL study project manager

# The research study of The REAL Programme

## Information for Parents/Carers Frequently Asked Questions

### Who are NatCen?

NatCen Social Research is an independent research organisation. We have been asked by the Education Endowment Foundation to carry out this study.

### What is the purpose of this study?

The aim of the research is to find out if the programme makes a difference to children's early language and communication.

### What is the difference between the research study and The REAL programme?

The REAL Programme is run by the National Children's Bureau. It consists of activities that will be delivered to the parents of some children at the nursery. These will be delivered by a trained member of staff. NatCen's research study is looking at The REAL Programme to find out if it helps to improve children's early language and communication, and early reading and writing skills (literacy).

### Who is the REAL practitioner?

The 'REAL practitioner' is a name we have given to the member of staff who will be trained by the National Children's Bureau to deliver the REAL programme. This may be a nursery teacher, the Early Years lead or even a Reception year teacher at the school.

### Why has my child been chosen to take part in the study?

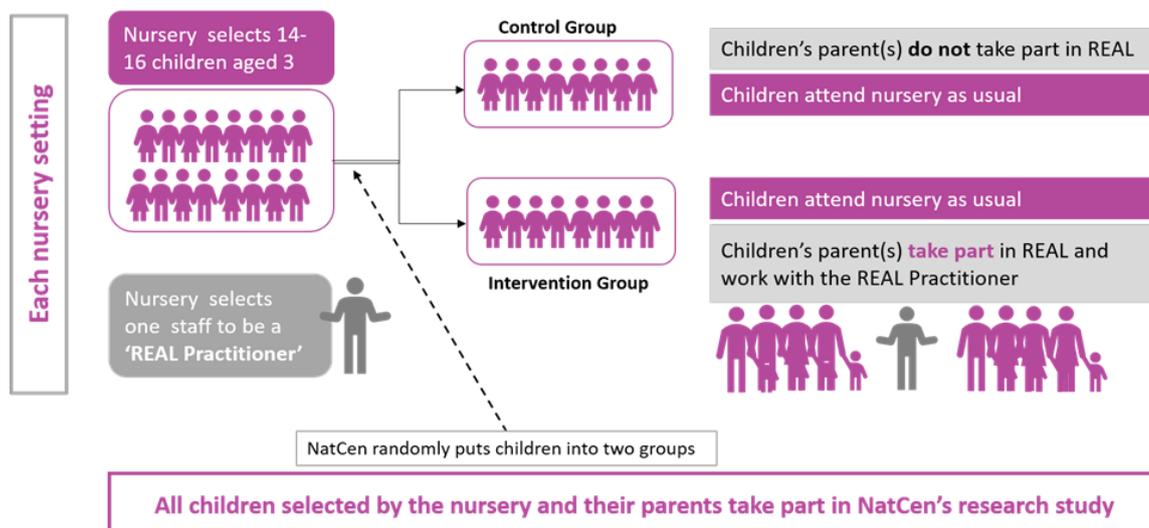
At your child's nursery, staff chose between 14-16 children to take part. If you have questions about how your child was chosen, please ask the staff at your child's nursery.

### What is a randomised control trial?

A randomised control trial is a study in which a group of people are divided into two groups – the intervention group and the control group. The division is random, that is, it is by chance. This type of study helps to understand if a programme is useful.

### What does a randomised control trial of The REAL Programme mean?

It means that the 14-16 children selected for the REAL study will be divided into two groups by chance – the parents of 7-8 children will take part in The REAL programme and the other 7-8 children and their parents will attend nursery activities as usual.



### If my child is in the intervention group, what do I have to do?

In January 2020 NatCen will let your child's nursery know if you and your child are in the intervention group or in the control group. The '**REAL practitioner**' will explain what is involved if you are in The REAL Programme

### What does taking part in the research study mean for my child and myself?

**All children** selected for the study and their parents will be asked to take part in:

- 1. Literacy assessments.** **Your child** will take part in a literacy assessment specially designed for children aged 3-5. A registered Speech and Language Therapist will conduct the assessment at your child's nursery. The assessment will take a maximum of 25 minutes to complete. Your child will be assessed twice:
  - in November 2019 at the nursery, and
  - in February 2021 when your child is in Reception year.
- 2. Survey completion.** **You** will be asked to complete a short questionnaire about the literacy activities you do at home with your child. This survey will be given to you by the REAL practitioner at your child's nursery. It will take 5 minutes to complete and you will need to complete it right away. You will be asked to complete the survey:
  - in September 2019
  - in June 2020
  - in January 2021 – only parents who are taking part in The REAL Programme will be asked to complete the survey at this point.
- 3. In-depth interviews with parents.** **You** may be asked to take part in a short 30-minute telephone interview about your experiences. Only a **small number of parents** will be invited to take part.

### What other research activities are there?

If your child is in the intervention group, one of our researchers may accompany a REAL practitioner to a meeting with you. A very small number of parents will be asked to help with this.

### How will my child's data be used?

The **nursery will share** the following information about your child with NatCen:

- Name
- Date of birth
- Home postcode
- Unique Pupil Number (UPN)
- Days your child attend nursery
- Whether receives Early Years Pupil Premium
- Expected school child will attend in Reception year

We will also record the scores (marks) from the assessment your child takes. All data will be stored securely and only NatCen researchers and the SLT carrying out the assessment will be able to see it. We will give your child a unique code so that others cannot identify them by name.

### How will my data be used?

Your nursery will also share following information about you with NatCen:

- Name
- Contact details (phone number and email)
- Name of your child

We will also assign a unique number to your data, so that you cannot be identified by what you tell us in the survey and any interviews. We may look at what you tell us alongside your child's assessment scores (this is called data linkage). At the end of the project, we will write a report, which will be published by the Education Endowment Foundation. We will not name any nursery, child, parent or staff member in the report.

### What is data linkage?

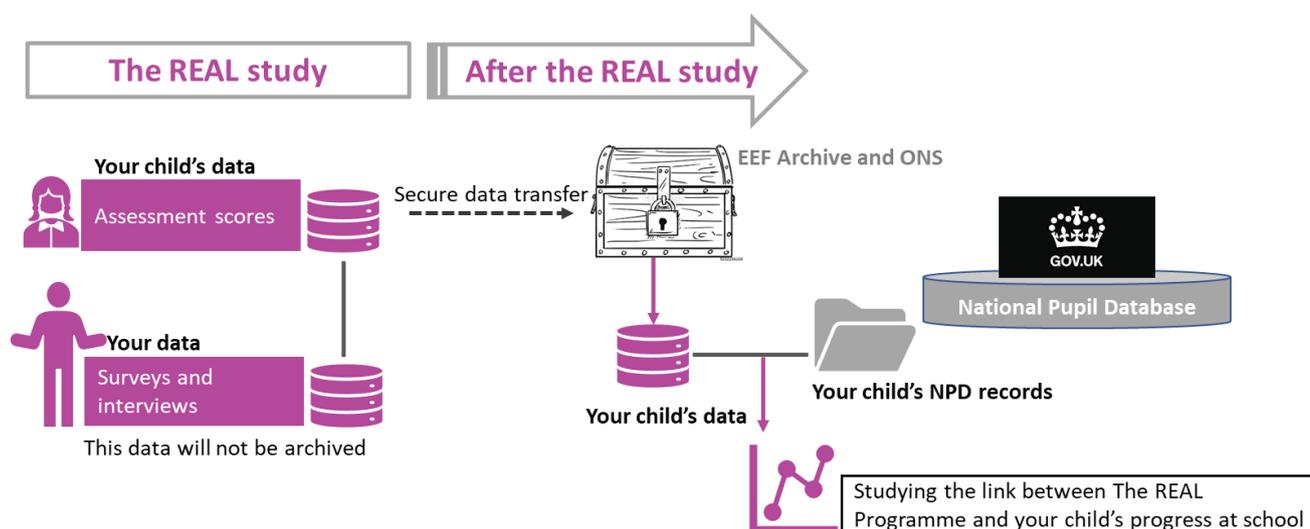
Data linkage is when information from different places is combined to help researchers understand what is happening. This may happen in a study by bringing together information from a parent and a child. This may happen also with information gathered outside of the study, for example government records. Data linkage happens also when information collected in a study is linked to other information.

### For this study, what data will be linked?

The Department for Education keeps records on every child that attends school in England. This information is kept in the **National Pupil Database**. These records start when a child begins nursery and finish when a child leaves school (at 16 or 18 years of age). These records help the government to understand how well children in England are doing at school and make plans for changes to education.

For this study, data linkage with the **National Pupil Database** may take place in the future. There are two steps to this:

1. The first step is **archiving**. When the REAL study is complete, we will send your child's assessment data to the Education Endowment Foundation's secure archive and the Office of National Statistics (ONS). Only your child's UPN, date of birth and assessment score will be in the data we send.
2. In the future, researchers may link your child's assessment data with your child's records in the National Pupil Database. This process is explained in the diagram:



### Does NatCen keep the data?

No, NatCen will permanently delete all data six months after the REAL study ends (by March 2022 at the latest)

### What if I am not happy about data linkage?

By law you have the right raise concerns or to object. Please contact your child's nursery teacher or the 'REAL practitioner'.

### Can I contact NatCen for more information or if I have questions about the study?

The NatCen team are happy to answer any questions you have. Please get in touch at [real@natcen.ac.uk](mailto:real@natcen.ac.uk) or by calling 0808 168 1503.

#### General Data Protection Regulation (GDPR)

All information will be treated with the strictest confidence – no nursery, staff member or child will be identified in any reports or documents.

For this research study, NatCen is a data controller who also processes data. This means that we are responsible for deciding the purpose and legal basis for processing data. The legal basis is “legitimate interest”. This means that we believe that there is a genuine reason for us to process this data (to evaluate the impact of the REAL programme), that this data is needed to fulfil this purpose (we couldn’t evaluate the programme without this information), and that using this data won’t interfere with individuals’ interests, rights or freedoms.

Our privacy notice can be found here: [www.natcen.ac.uk/RealProgramme](http://www.natcen.ac.uk/RealProgramme)

You have the right to raise any concerns with the Information Commissioner’s Office (ICO) via their website at <https://ico.org.uk/concerns/>. You also have the right to object to your child’s information being used in this study. If you object to your child’s data being used please let us know by getting in touch at [real.@natcen.ac.uk](mailto:real.@natcen.ac.uk) or by calling 0808 168 1503.

## Appendix E: Training event observation template

### P13582 REAL Training Observation

	Day 2	Day 3
<b>Time and date of observation</b>		
<b>Location</b>		
<b>Trainer(s)</b>		
<b>Observer</b>		

#### 1. Attendee details and setting.

Record who was present (trainers and number of nursery practitioners).

Record the setting of the training (location, set up of room, technology used).

**Day 2**

**Day 3**

#### 2. Day 2: The Home Learning Environment and Home Visiting.

Aims:

- To show how the ORIM framework can be used to plan and reflect on home visits.
- To revisit the 4 elements of the parents' role in of ORIM with respect to home visiting.
- To identify 'keys and padlocks' around home visiting and working with parents on their role in children's learning at home.

Learning objectives:

- Feel confident about why the home visits are important to this approach.
- Feel equipped to undertake their first literacy home visit.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered
- Whether specific prescriptions or recommendation given to practitioners in relation to: format and structure of home visits; content of home visits; preparing for home visits; logistical and practical aspects.

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

- Record materials and resources used

**3. Day 2: Planning your literacy home visit.**

**Aims:**

- To work alongside peers to plan a home visit using the ORIM framework.

**Learning objectives:**

- Draw on case studies of home visits
- Consider how other practitioners have planned and reflected on the visits.
- Plan their first literacy home visit focussing on either books or environmental print.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered
- Whether specific prescriptions or recommendation given to practitioners in relation to: format and structure of home visits; content of home visits; preparing for home visits; logistical and practical aspects.

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

- Record materials and resources used

**4. Day 2: Plenary and timescale (and Reflection on Day 2).**

**Aims:**

- To ensure that teachers feel confident to carry out a home visit before Day 3.

**Learning objectives:**

- Be clear about their planned visit
- Know how they will be supported over the next week.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

- Record materials and resources used

## 5. Day 3: Welcome and outline of the day.

Aims:

- To welcome back colleagues and to facilitate the collaborative ethos.

Learning objectives:

- Be clear about the work to be covered to complete the PD Programme.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

Record materials and resources used

## 6. Day 3: Literacy 'events' which successfully engage families and how these can be facilitated.

Aims:

- To encourage participants to 'think outside the box' and to use the ORIM framework when planning the group-based events to engage families back in the school/ setting environment.

Learning objectives:

- explore how using the ORIM framework to plan literacy events
- understand the underpinning research and the resources to support them

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

Record materials and resources used

## 7. Day 3: Reflection and planning time to think about events and how they build on the relationships established through home visiting.

Aims:

- To encourage participants to think about what they have just heard in relation to their own settings. To start to put together a planning grid.

Learning objectives:

- have considered some of the 'padlocks and keys' about planning events in their schools
- have a clear sense of how they are using the events to promote a knowledge of child development with the parents. Consider how the ORIM framework can be used to plan and evaluate literacy events.

- Collaborate to draft 10 plans for literacy events

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

Record materials and resources used

## 8. Day 3: USING ORIM with families

Aims:

- To set the scene for the afternoon session – setting up the future.

Learning objectives:

- focus on the programme and identify networking opportunities.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

Record materials and resources used

### 9. Day 3: Timetable for the rest of the programme.

Aims:

- To welcome back colleagues and to facilitate the collaborative ethos.
- To give a clear understanding of how the programme is rolling out and the expected time scales.
- To think about ways of networking and the importance of the network meetings in the 3 areas: Kirklees, Salford and Knowesly (Liverpool)

Learning objectives:

- have a clear understanding of how the programme will roll out over the next few months and will have had a chance to plan the pace.
- Teachers will know where the support networks are and how they can work collaboratively.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

Record materials and resources used

### 10. Day 3: Focus on the children as individuals

**Aims:**

- To consider how REAL can be tailored to individual children who have unique lives, life stories and families.

**Learning objectives:**

- Appreciate the uniqueness of each child in their programme group and how ORIM can be tailored to different needs.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered
- Whether specific prescriptions or recommendation given to practitioners in relation to tailoring or adapting home visits to families.

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

Record materials and resources used

## 11. Day 3: Final thoughts

**Aims:**

- To end the 4-day programme by ensuring that participants feel well equipped for the work ahead.
- To be confident about using the ORIM framework and the REAL resources to lead the project in their setting. To remind colleagues of the next meeting dates.

**Learning objectives:**

- Feel that they have learned how to successfully use the ORIM framework and the REAL materials.
- Recognise the importance of building parental knowledge about early literacy development and the importance of enjoyment in learning.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners

- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

- Record materials and resources used

## 12. Day 3: Reflections

**Aims:**

- To reflect on the 4 day programme and their next steps and feelings.

**Learning objectives:**

- Record their reflection in their reflective journals.

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

- Record materials and resources used

## 13. Day 3: Individual meetings

**Aims:**

- Individual meetings with members of the course team as required.

**Learning objectives:**

- *No learning objectives given.*

Record content of the session. Include specific information on:

**Content:**

- Were the aims for the session covered

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

- Record materials and resources used

**14. Overview and any other observations**

**Day 2**

**Day 3**

## Appendix F: Networking event in September 2020 observation template

### P13582 REAL Network events training observation – Autumn 2020

**Network events background:**

Network meetings are used for teachers to reflect on their work and support each other through regular networking meetings. Training is participative covering the ORIM framework, four strands of emerging literacy, literacy research and theoretical perspectives, and relationships with parents, home visiting and events.

*Note. This network meeting is also being used to provide a training refresh for practitioners.*

**Aim of observation:**

The aim of the observation, as detailed in the protocol, is to gather information on:

- Delivery issues encountered by practitioners and how these are addressed.
- Knowledge exchange between practitioners.
- Changes to practice discussed by practitioners.

**The observation template:**

The template is split into five sections to record notes on:

1. Training context and attendee details
2. Introduction to the meeting
3. Refresher training session
4. Network meeting discussion / catch-up
5. Any other observations

<b>Date of observation</b>	
<b>Time and duration of training session</b>	
<b>Location</b>	
<b>Trainer(s)</b>	
<b>Observer</b>	

## 1. Training context and attendee details.

Record the context of the training (technology used, training set-up).

Record who was present (trainers, number of practitioners, observers).

## 2. Introduction to the meeting

Record content of the Introduction. Include specific information on:

**Content:**

- Possible topics might include: overview and schedule of meeting

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).

**Materials/resources:**

- Record materials and resources used

## 3. Refresher training session

**Aims:**

- Refresh on the 4 strands of literacy
- Refresh on the ORIM framework
- Refresh on ideas for activities to do on home visits /events combined with ideas for how to do these socially distanced

Record content of the session. Include specific information on:

**Content:**

- Were the aims of the session covered
- Whether the session is reactive to contributions / questions from practitioners
- Whether specific prescriptions or recommendation given to practitioners in relation to: format and structure of home visits; content of home visits; preparing for home visits; logistical and practical aspects

**Issues/concerns:**

- Raised by practitioners
- Responses from trainer (full explanation or dismissive)

**Engagement:**

- How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).
- Whether practitioners actively share their knowledge and experiences, including changes to practice

**Materials/resources:**

- Record materials and resources used

--

**4. Network meeting discussion / catch-up**

<p>Record content of the session. Include specific information on: <b>Content:</b> <i>Note. the content is expected to be participant led.</i></p> <ul style="list-style-type: none"><li>• Topics covered in the discussion (possible topics might include: delivery timeline; Covid-19 adaptations and changes to practice; ideas for literacy events)</li></ul> <p><b>Issues/concerns:</b></p> <ul style="list-style-type: none"><li>• Raised by practitioners (e.g. delivery issues)</li><li>• Responses from trainer (full explanation or dismissive)</li></ul> <p><b>Engagement:</b></p> <ul style="list-style-type: none"><li>• How engaged practitioners are (e.g. whether they are actively taking part in the session, answering questions, asking questions).</li><li>• Whether practitioners actively share their knowledge and experiences, including changes to practice</li></ul> <p><b>Materials/resources:</b></p> <ul style="list-style-type: none"><li>• Record materials and resources used</li></ul>
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**5. Any other observations**

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## Appendix G: Networking event in April 2021 observation template

### P13582 REAL Network events observation – Spring 2021

<p><b>Background</b> Network meetings are used for teachers to reflect on their work as part of the REAL programme, and also to support each other. The Spring 2021 meetings will focus on: 1) updates from NCB, 2) practitioners sharing ideas about remote home visits and supporting/answering each other's questions and 3) discussing ideas about which children's books to buy the control group children and also what is a good children's book.</p> <p><b>Aim of observation:</b> To gather information on:</p> <ul style="list-style-type: none"> <li>• NCB updates on delivery timelines and where practitioners are with delivery</li> <li>• Information about remote home visits and any adaptations made</li> <li>• Delivery issues encountered by practitioners and how these are addressed.</li> <li>• Knowledge exchange between practitioners.</li> <li>• Changes to practice discussed by practitioners.</li> </ul>	
<b>Observer</b>	

#### 1. Meeting context and attendee details.

Record the context of the meeting (technology used, set-up).

Record who was present (NCB programme lead, number of practitioners, observers).

## 2. Introduction to the meeting

Record content of the Introduction

Record materials and resources used

## 3. Updates from NCB/information from participants on timelines

Record NCB updates on delivery timelines and any other updates

Record information from participants on where they are with delivery

## 4. Network meeting discussion / catch-up

*Note. the content is expected to be participant-led.*

Record content of the main session. Include specific information on

- Remote home visits, including content of visits and any adaptations made
- Delivery issues/concerns raised by practitioners
- Response from trainer (e.g. full explanation or dismissive)

Record materials and resources used

## 5. Engagement of participants

Record information on:

- How engaged practitioners are (e.g. whether they actively take part in the session, answering questions, asking questions).
- Whether practitioners actively share their knowledge and experiences in the group, including changes to practice
- Interaction between participants: whether practitioners respond to each other's comments and questions

## 6. Anything else

### Appendix H: Baseline survey of practitioners

# REAL Practitioner Baseline Survey

Questions are documented as follows:

{Question routing- who is asked the question}

**Question Name**

Question text

: Question response options

(Variable label)

## 1. Introduction

We are delighted that you are taking part in THE REAL Programme study.

We would like you to complete this short survey to help us better understand your nursery setting's background. The survey will gather information on:

- The reasons your nursery is taking part in The REAL programme
- Challenges to improving children's early literacy at your setting
- Experience of delivering early literacy interventions

Your answers will provide us with valuable information for the evaluation.

Please note: this survey should be completed by the member of staff who has been selected to take part in training for the REAL Programme.

If you have any questions when completing this survey, please contact the NatCen team directly on 0808 168 1503 or email [real@natcen.ac.uk](mailto:real@natcen.ac.uk).

[HELP BUTTON: If you have any questions when completing this survey, please contact the NatCen team directly on FREEPHONE or email [real@natcen.ac.uk](mailto:real@natcen.ac.uk)]

{Ask if Confirm=1}

**Confirm** (VARLAB: Confirmation respondent is receiving REAL training)

Are you the member of staff who has been selected to take part in training for the REAL Programme?

1. Yes
2. No
3. Don't know
4. Prefer not to answer

{Ask if Confirm=2}

**Ineligible** (VARLAB: Respondent is not correct)

Thank you for taking the time to do this survey.

The survey must be completed by the member of staff who has been selected to take part in training for the REAL Programme.

If you received the email invitation to complete the survey by mistake, please forward the email on to the correct member of staff.

If you have any questions, please contact the NatCen team directly on 0808 168 1503 or email [real@natcen.ac.uk](mailto:real@natcen.ac.uk).

{Ask if Confirm=1}

**ResRole** (VARLAB: Role of the respondent)

What is your role?

1. Assistant/Deputy Headteacher, Early Years Foundation Stage
2. Assistant/ Deputy Headteacher of School
3. Early Years Foundation Stage Lead/Manager/Co-ordinator
4. Headteacher
5. Nursery Lead
6. Nursery Teacher
7. Reception Teacher
8. Reception Year Lead
9. Other (please specify)
10. Don't know
11. Prefer not to answer

{Ask if Confirm=1}

**ResQual** (VARLAB: Qualification of respondent)

What is the highest **UK Early Years or teaching related** qualification you hold?

1. Level 1
2. Level 2
3. Level 3
4. Level 4
5. Level 5
6. Level 6 or higher
7. Overseas qualification(s)
8. No relevant qualifications

HELP: What do these qualification levels mean? The qualifications list that we sent you shows a list of all the types of qualifications that we would consider to be relevant.

{Ask if Confirm=1}

**REALSelection** (VARLAB: How respondent selected)

How were you selected to take part in the REAL training?

1. I am the only teacher in Early Years Foundation Stage.
2. I am the only staff member able to attend the four-day training course.
3. I am the only staff member able to commit the required amount of time to take part in REAL (half a day per week)
4. I volunteered to take part in the training.
5. The senior leadership team at the school asked me to participate.
6. Other (please specify)
7. I do not know how I was selected
8. Prefer not to answer.

## 2. Staff numbers and characteristics

{Ask if Confirm=1}

## ChildIntro

We will now ask you about staff that work in the Early Years Foundation Stage (EYFS) at your school (Nursery and Reception Year).

{Ask if Confirm=1}

### **StaffNo** (VARLAB: Number of staff working in EYFS)

How many paid and unpaid staff members work in nursery and reception at your school?

This **only** includes senior managers and those staff who are directly involved in delivering ANY childcare and early years provision at your school - support staff such as receptionist should **not** be included.

: Numeric

{Ask if Confirm=1}

### **StaffNoPT** (VARLAB: Number of PART-TIME staff working in EYFS)

Of those, how many staff members work **part-time**?

: Numeric

{Ask if Confirm=1}

### **StaffNoFT** (VARLAB: Number of FULL-TIME staff working in EYFS)

And how many staff members work **full-time**?

: Numeric

{Ask if Confirm=1}

### **StaffQuals** (VARLAB: Number of staff with each qualification level)

How many of the staff involved in the delivery of your EYFS provision hold their highest **UK Early Years or teaching related** qualification at each of the following levels?

Please include your early years coordinator in these figures.

1. Level 1

0..300

2. Level 2	0..300
3. Level 3	0..300
4. Level 4	0..300
5. Level 5	0..300
6. Level 6 or higher	0..300
7. Overseas qualification(s)	0..300
8. No relevant qualifications	0..300
9. Unknown	

### 3. Child characteristics

{Ask if Confirm=1}

#### ChildInt2

We will now ask you about numbers and characteristics of the children in nursery.

{Ask if Confirm=1}

#### ChildNo (VARLAB: Number of children)

How many children in total are enrolled in **nursery this year**?

Please do not include the number of children in Reception year.

: Numeric

Don't know

Prefer not to answer

{Ask if Confirm=1}

#### ChildAgeNo (VARLAB: Number of children by each age)

How many children of each age are enrolled in nursery?

1. Age 2 and under	0..300
2. Age 3-4	0..300
3. Age 5 and over	0..300
4. unknown	

{Ask if Confirm=1}

#### ChildPTNo (VARLAB: Number of children that attend nursery PART-TIME)

How many children attend nursery **part-time**?

Part-time is **less** than 30 hours a week.

: Numeric

Don't know  
Prefer not to answer

{Ask if Confirm=1}

**ChildEYPPNo** (VARLAB: Number of children that receive EYPP)

For how many children in nursery do you receive the **Early Years Pupil Premium** (EYPP)?  
Please include any pending applications.

EYPP is additional funding for nurseries to improve the education they provide to disadvantaged children.

: Numeric

Don't know  
Prefer not to answer

{Ask if Confirm=1}

**ChildEALNo** (VARLAB: Number of EAL children)

In your nursery, how many children have English as an Additional Language?

: Numeric

Don't know  
Prefer not to answer

## 4. Children's early literacy development children

{Ask if Confirm=1}

### LitDevIntro

This section asks about the challenges that you believe your nursery faces to support the literacy development of children and whether you have taken part in any other interventions to support literacy development.

{Ask if Confirm=1}

### LitDevKeyChal

 (VARLAB: Top 3 literacy development challenges nurseries face)

Nurseries may face challenges when developing children's literacy skills. In your experience, what are the top three challenges at your nursery?

By literacy development, we are referring to children learning how to use and recognise sounds, words and language in preparation to learn how to read and write.

*Please select **up to three** challenges that you believe are the most relevant to your nursery.*

1. Children who enter nursery with low speech and language skills

2. Children who are not exposed to English at home
3. Children who have parents/carers with low literacy levels
4. Children with special educational needs and difficulties (SEND)
5. Children who attend nursery for a short period each week or infrequently
6. Children who lack confidence or interest to engage in literacy activities
7. Parents/carers are not involved in developing their child's literacy skills
8. Other (please specify)
9. There are no literacy related challenges at my nursery
10. Don't know
11. Prefer not to answer

{Ask if Confirm=1}

**LitDevInt** (VARLAB: Whether delivered any other early literacy interventions)

To your knowledge, did the nursery deliver any early literacy interventions in the past 12 months?

1. Yes
2. No
3. Don't know
4. Prefer not to answer

{Ask if LitDevInt = 1}

**LitDevIntNum** (VARLAB: Number of interventions delivered in last 12 months)

How many different early literacy interventions did the nursery deliver in the past 12 months targeted to three and four year olds?

1. One
2. Two
3. Three or more

{Ask if LitDevIntNum > = 1}

**LitDevIntName** (VARLAB: Which other early intervention they have delivered)

Please list the name(s) of the interventions.

: String NODK (300 characters)

Don't know

Prefer not to answer

## 5. Interactions with parents and carers

{Ask if Confirm=1}

**ParIntro**

We will now ask about the interaction your nursery has with the parent/carers of children.

{Ask if Confirm=1}

**ParIntearct** (VARLAB: Types of interactions with parents)

During the school year, which types of interactions do you have with parents/carers?

*Select all that apply*

1. Informal contact (ex: A quick chat during drop-off or a small note in a pupil's workbook)
2. Formally scheduled parent-teacher meetings
3. Phone calls to parents/carers when there is an issue
4. Formal notes home with children for their parent/carer
5. "Stay and play" days
6. Information evenings
7. Home visits
8. Other (please specify)

{Ask if Confirm=1}

**HomeVisit** (VARLAB: Whether nursery does home visits)

Do you or members of your staff ever conduct home visits with parents/carers and children?

1. Yes
2. No
3. Don't know
4. Prefer not to answer

{Ask if HomeVisit = 1}

**HomeVisitFrq** (VARLAB: How often nursery conducts home visits)

How often do you conduct home visits with parents/carers and children?

1. Only once before they start nursery
2. Only when there is an issue with a pupil
3. Once a year for each pupil
4. Two-three times a year for each pupil
5. Four-five times a year for each pupil
6. Six or more times a year for each pupil
7. Other (please specify)

{Ask if HomeVisit = 1}

**HomeVisitWho** (VARLAB: Whether visit all children or a specific group)

Do you visit the homes of all children in nursery or only a specific group?

*If you visit the homes of a specific group, please check all that apply.*

1. All children
2. Children receiving Early Years Pupil Premium (EYPP)

3. Disadvantaged children (measured by a method other than EYPP)
4. Children with Special Educational Needs and Disabilities (SEND)
5. English as an Additional Language (EAL) children
6. Children with speech and language difficulties
7. New children
8. Other (please specify)

## 6. Parents/carers involvement in children's early literacy development

{Ask if Confirm=1}

### EngParIntro

We will now ask about the involvement of parents and carers in the early literacy development of their children.

{Ask if Confirm=1}

### ParInvIt

What are the **top three** ways in which parents and carers get involved in their children's literacy?

1. Talk to me or other teaching staff informally about their child's progress in literacy
2. Ask for materials to use at home (i.e. resources to help with learning the alphabet)
3. Ask for books to read to their children
4. Ask what games they can play with their child to support their literacy development
5. Ask about additional literacy support available for their child
6. Attend literacy events at the nursery or school
7. Parents do not get involved in their children's literacy development

{Ask if Confirm=1}

### ParEvent (VARLAB: Whether nursery offers events to parents)

Does your nursery put on any events (i.e. Parent/carer information nights, workshops, etc.) to inform parents/carers about how they can help develop their child's literacy?

1. Yes
2. No
3. Don't know
4. Prefer not to answer

{Ask if ParEvents = 1}

### ParEventFreq (VARLAB: Frequency of parent events)

About how many child literacy events did you hold last year for parents/carers?

1. None
2. One
3. Two
4. Three
5. Four or more

{Ask if ParEvents = 1}

**ParEventWh** (VARLAB: Which activities nursery offers to parents)

Could you briefly describe each event you held last year for parents/carers?

: String NODK (500 characters)

Don't know

Prefer not to answer

{Ask if ParEvent = 1}

**ParEventFrq** (VARLAB: How many parents attend events)

On average, how many parents/carers of children in nursery attend the events and activities ?

1. Parents/carers do not attend
2. A few parents/carers attend
3. About half of the parents/carers attend
4. Most parents/carers attend
5. Almost all parents/carers attend
6. Don't know
7. Prefer not to answer

{Ask if Confirm=1}

**ParEngKeyChal** (VARLAB: Key challenges engaging parents in literacy development)

What are the top three challenges your nursery faces in encouraging parents/carers to get involved in their child's early literacy development?

*Please select **up to three** challenges*

1. Parents/carers have low levels of literacy
2. Parents/carers are too busy to get involved
3. Parents/carers speak no or limited English
4. Parents/carers lack the confidence to get involved
5. Parents/carers lack the interest to get involved
6. Parents/carers think it is the job of the nursery to develop their child's literacy
7. Other (please specify)

## 7. Taking part in REAL

TakPartIntro

This final section asks about the reasons your nursery signed up to take part in the REAL programme, whether you have any concerns, and the children you selected to take part in the programme.

{Ask if Confirm=1}

**TakPartReason** (VARLAB: Reason nursery signed up for REAL)

Why did your nursery sign up to take part in the REAL programme?

Please select **up to three** reasons.

1. Opportunity for Continuing Professional Development (CPD) for staff
2. To learn more about how to engage parents in their child's early literacy
3. Nursery staff are concerned about the literacy development of disadvantaged children at the nursery
4. Requirement to raise the attainment levels of disadvantaged children at the nursery
5. The nursery recognises that the home learning environment is very important for developing early literacy skills
6. Other (please specify)

{Ask if Confirm=1}

**ConcernsPract** (VARLAB: Any concerns about taking part)

Please tell us any concerns you have about taking part in the REAL programme.

: String NODK (500 characters)

{Ask if Confirm=1}

**ChildrenSelected** (VARLAB: Did all children and parents agree)

Did the parents/carers of all the children that you selected for the REAL programme agree to take part?

1. Yes
2. No
3. Don't know
4. Prefer not to answer

{Ask if ChildrenSelected=2}

**ChildnHowMany** (VARLAB: How many children selected did not agree)

How many of parents/carers **did not** agree to take part?

: String NODK (2 characters)

{Ask if ChildrenSelected=2}

### **ChildnWhy (VARLAB: Reasons for not agreeing)**

Why did they not agree to take part?

*Please select all that apply.*

1. Parent/carer did not give consent in the time frame
2. Parent/carer did not believe the programme was necessary for their child
3. Parent/carer could not fulfil the time commitment
4. Parent/carer did not want a nursery practitioner to visit their home
5. Parent/carer was not receptive to receiving guidance on the home learning environment
6. Parent/carer was not interested in improving the learning environment
7. Parent/carer is already involved in another intervention
8. Other (please specify)

{Ask if Confirm=1}

### **OtherProNow**

In addition to the REAL Programme is your nursery delivering any other literacy interventions targeted at three- to four-year olds this school year?

1. Yes
2. No
3. Don't know
4. Prefer not to answer

{Ask if OtherProNow=2}

### **OtherLitIn**

Please list the other literacy intervention(s) your nursery is delivering this school year.

: String NODK (200 characters)

### **End**

Thank you very much for completing the survey!

If you have any questions when completing this survey, please contact the NatCen team directly on 0808 168 1503 or email [real@natcen.ac.uk](mailto:real@natcen.ac.uk).

## Appendix I: Endline survey of practitioners

# REAL Practitioner Endline Survey

## Introduction

**Intro** This survey will help us understand practitioners' experience of the REAL programme during the past two school years.

The information you provide will only be used to inform the evaluation. No setting or individual will be named in the evaluation report.

If you have any questions when completing this survey, please contact the NatCen team by email ([real@natcen.ac.uk](mailto:real@natcen.ac.uk)) or calling Helena Takala at 0207 549 7175 .

## Background information

**Intro:** First, we want to collect some background information about you and your setting.

{ASK ALL}

**SchoolName** What is the name of your setting?

[free text – 200 characters]

{ASK ALL}

**SchoolID** – What is the research ID of your setting? (You can find it in the email we sent you.)

[free text – 5 characters]

{ASK ALL}

**StaffChang** Were you involved in delivering the REAL programme **last school year** (2019-20), before the Covid-19 pandemic?

1. Yes
2. No

{ASK ALL}

**ClassLast** Were you the classroom teacher for children in the REAL programme **last school year** (2019-20)?

1. Yes
2. No

{ASK ALL}

**ClassNow** Were you the classroom teacher for children in the REAL programme **this school year** (2020-21)?

1. Yes
2. No

{ASK ALL}

**ResRoleW2** What is your role at the setting? (please select all that apply)

1. Assistant/Deputy Headteacher, Early Years Foundation Stage
2. Assistant/Deputy Headteacher of School
3. Early Years Foundation Stage Lead/Manager/Co-ordinator
4. Headteacher
5. Nursery Lead
6. Nursery Teacher
7. Reception Teacher
8. Reception Year Lead
9. Other – please specify

## Delivery

**Intro:** The following questions are about your experience of delivering REAL. Please note that we are only collecting this information for the purpose of the research and will not share your answers with anyone else.

{ASK ALL}

**ChildREAL** How many children have been in the REAL programme at your setting **this academic year**?

{ASK ALL}

**Attrition** Have any children dropped out of the REAL programme since the last school year (2019-20)?

1. Yes
2. No

{ASK if Attrition=Yes}

**DropNo** How many children dropped out of the REAL programme since last year?

1.
2. Don't know

{ASK if Attrition=Yes}

**DropWhy** Why did children drop out of the REAL programme?

Please select all that apply.

1. Child moved to a different setting
2. Family moved out of the area
3. Parent did not want to stay on the REAL programme
4. Health problems in the child's family, including Covid-19
5. Safeguarding concerns in the family
6. Other – please specify

{ASK ALL}

**EarlVisits** Before March 2020, how many **in-person** REAL home visits did you deliver per family on average?

1.

{ASK ALL}

**RemotVisits** Between September 2020 and the May half-term 2021, how many **remote home visits** did you deliver per family on average?

1.

{ASK ALL}

**LateVisits** Have you delivered any remote home visits since the May half-term 2021?

1. Yes
2. No

{ASK IF LateVisits=Yes}

**LateVisitsNu** How many remote home visits have you delivered after the May half-term 2021 (per family on average)?

1.

{ASK ALL}

**Carryon** Are you planning to deliver more remote home visits before the end of this school year?

1. Yes
2. No

{ASK IF Carryon=Yes}

**EndVisits** How many remote home visits are you planning to deliver between today and the end of the school year (per family on average)?

1.

## Mode of delivery

**Intro:** Next, we are interested in your thoughts about in-person and remote delivery.

{ASK ALL}

**DelMode** What delivery mode would you prefer for REAL home visits if you took part in the programme again?

1. All in-person
2. All online
3. A mix of in-person and online
4. Don't know

{ASK ALL}

**DelModeWhy** Please tell us why you selected this option.

1.

{ASK ALL}

**RelDiff** Did **remote** delivery make it more or less difficult to build relationships with parents?

1. More difficult
2. About the same
3. Less difficult

{ASK ALL}

**RelWhy** Please tell us why you selected this option.

1.

{ASK ALL}

**Engnpers** How would you describe parents' engagement with the **in-person** home visits? (If it varied for different families, what was it overall?)

1. Excellent
2. Good
3. Fair
4. Poor
5. Can't answer, it differed too much between families

{ASK ALL}

**EngRem** How would you describe parents' engagement with the **remote** home visits? (If it varied for different families, what was it overall?)

1. Excellent
2. Good
3. Fair
4. Poor
5. Can't answer, it differed to much between families

## Remote home visits

{ASK ALL}

**Intro:** We want to know more about the content of the **remote** home visits.

{ASK ALL}

**Resources** What resources did you use for the **remote** home visits?

*Please select all that apply.*

1. Books
2. Videos shared via website or app
3. Printed instructions for activities
4. Activity packs (e.g. crafts, games, cooking)
5. Other – please specify

Free text - <500 characters>

{ASK ALL}

**Books** How well did **books** work as a resource for remote delivery?

1. Very well
2. Fairly well
3. Not very well
4. Not well at all
5. Did not use books as a REAL resource

{ASK ALL}

**Videos** How well did **videos** work as a resource for remote delivery?

1. Very well
2. Fairly well
3. Not very well
4. Not well at all
5. Did not use videos as a REAL resource

{ASK ALL}

**Print** How well did **printed instructions for activities** work as a resource for remote delivery?

1. Very well
2. Fairly well
3. Not very well
4. Not well at all
5. Did not use printed instructions for activities as a REAL resource

{ASK ALL}

**Activity** How well did **activity packs** work as a resource for remote delivery?

1. Very well
2. Fairly well
3. Not very well
4. Not well at all
5. Did not use activity packs as a REAL resource

{ASK ALL}

**Contact** What contact did you have with parents in the REAL programme during remote delivery?

*Please select all that apply.*

1. Phone calls
2. Face-to-face conversations
3. Video calls
4. Emails or messages
5. Online platforms (e.g. Tapestry, SeeSaw, Classdojo)
6. Other – please specify

Free text - <500 characters>

{ASK ALL}

**PhoneHelp** How helpful were **phone calls** with parents for remote delivery?

1. Very helpful
2. Fairly helpful
3. Not very helpful
4. Not helpful at all
5. Did not use phone calls for remote delivery

{ASK ALL}

**ConvHelp** How helpful were **face-to-face conversations** with parents for remote delivery?

1. Very helpful

2. Fairly helpful
3. Not very helpful
4. Not helpful at all
5. Did not have face-to-face conversations for remote delivery

{ASK ALL}

**VideoHelp** How helpful were **video calls** with parents for remote delivery?

1. Very helpful
2. Fairly helpful
3. Not very helpful
4. Not helpful at all
5. Did not use video calls for remote delivery

{ASK ALL}

**MesHelp** How helpful were **emails or messages** to parents for remote delivery?

1. Very helpful
2. Fairly helpful
3. Not very helpful
4. Not helpful at all
5. Did not use emails or messages for remote delivery

{ASK ALL}

**PlatHelp** How helpful were **online platforms** to parents for remote delivery?

1. Very helpful
2. Fairly helpful
3. Not very helpful
4. Not helpful at all
5. Did not use online platforms for remote delivery

{ASK ALL}

**ParentBarries** Did any of the following make it difficult for parents to take part in the **remote** home visits?

*Please select all that apply.*

1. Lack of internet access
2. Lack of access to equipment (e.g. computer, tablet)
3. Technical problems with the online material
4. Lack of quiet space
5. Lack of time
6. Lack of interest from the child
7. Lack of interest from the parent
8. Language barrier

Free text - <500 characters>

9. Anything else (please specify)
10. None of these (exclusive code)

## Training, events and support

**Intro:** We have some questions about the training involved in the REAL programme.

{ASK ALL}

**Training** How helpful was the training you received in preparing you to deliver the REAL programme?

1. Very helpful
2. Fairly helpful
3. Not very helpful
4. Not helpful at all

{ASK ALL}

**NetEvents** Did you attend the online networking events in September 2020 and April 2021?

1. I attended one networking event
2. I attended both networking events
3. I did not attend the networking events

{ASK ALL}

**NetHelp** If you attended networking events, how helpful did you find them?

1. Very helpful
2. Fairly helpful
3. Not very helpful
4. Not at all helpful
5. I did not attend the networking events

{ASK ALL}

**NCBHelp** How was the support you received from the National Children's Bureau?

1. Excellent
2. Good
3. Fair
4. Poor

## Outcomes of the REAL Programme

**Intro:** The next few questions are about the outcomes of the REAL programme for **you**.

To what extent do you agree or disagree with the following statements?

{ASK ALL}

**Literacy** My knowledge of early literacy development has improved as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**Families** My knowledge of how to work with families has improved as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**HLE** My understanding of children's home learning environment has improved as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**Support** I am more confident supporting parents with early language development as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**DisFam** I am more confident about reaching out to parents who are less engaged with their child's learning as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**Future** Do you think you will do any of these things in the future as a result of taking part in REAL?

*Please select all that apply to you.*

1. Give more support to parents outside the school or nursery
2. Reach out to parents who are less engaged with their child's learning
3. Share ideas and resources from the REAL home visits with parents
4. Share learning from the REAL programme with colleagues
5. Use learning from the REAL programme to set future learning priorities
6. None of these

{ASK ALL}

**Recommend** Would you recommend the REAL programme to other schools?

1. Yes
2. No

**Intro:** We now want to know about the outcomes of the REAL programme for **parents**.

To what extent do you agree or disagree with the following statements?

{ASK ALL}

**ParLit** Parents are more engaged in early literacy activities at home as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**ParLearn** Parents participate more in their child's learning as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**ParTeach** Communication between parents and their child's class teacher has improved as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree

5. Strongly disagree

{ASK ALL}

**ParComm** Communication between parents and the school overall has improved as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**ParHLE** Home learning environments have improved as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

**Intro:** Lastly, we want to understand the outcomes of the REAL programme for **children**.  
To what extent do you agree or disagree with the following statements?

{ASK ALL}

**ChildLit** Children's early literacy skills have improved as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**ChildEng** Children are more engaged in school as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

{ASK ALL}

**ChildComm** Communication between parents and children has improved as a result of taking part in REAL.

1. Strongly agree
2. Agree
3. Neither agree nor disagree
4. Disagree
5. Strongly disagree

## Impact of Covid-19

**Intro:** In the next few questions, we want to understand your views on the effects of the Covid-19 pandemic on children's learning generally.

{ASK ALL}

**CovAttain** Thinking of the **reception class** pupils in your setting, did school closures during the Covid-19 pandemic have negative or positive impacts on their learning?

1. Very positive
2. Somewhat positive
3. Neither positive nor negative
4. Somewhat negative
5. Very negative

{ASK ALL}

**CovLit** Did school closures during the Covid-19 pandemic have negative or positive impacts on reception class pupils' **early literacy**?

1. Very positive
2. Somewhat positive
3. Neither positive nor negative
4. Somewhat negative
5. Very negative

{ASK ALL}

**CovGaps** How effective was the REAL programme in addressing those gaps in children's early literacy that were linked with the school closures?

1. Very effective
2. Fairly effective
3. Not very effective
4. Not effective at all
5. (Not applicable – there were no early literacy gaps linked with the school closures)

{ASK ALL}

**CovOther** Would you recommend that other settings use the REAL programme to address gaps in children's early literacy following the Covid-19 pandemic?

1. Yes
2. No

{ASK ALL}

**CovWhy** Please tell us why you selected this option.

Free text - <500 characters>

## Overall experience

**Intro:** Finally, we want to get a sense of your overall experience of the REAL programme.

{ASK ALL}

**RealExp** Overall, how would you describe your experience with REAL?

1. Very positive
2. Somewhat positive
3. Neither positive nor negative
4. Somewhat negative
5. Very negative

{ASK ALL}

**WhyRealExp** Please tell us why you selected this option.

Free text - <500 characters>

{ASK ALL}

**Barriers** Did any of the following challenges make it difficult for you to take part in the REAL programme?

*Please select all that apply.*

1. Didn't fit with my professional interests
2. Lack of time to plan and deliver home visits
3. Lack of support from senior management
4. Lack of support from the National Children's Bureau
5. Lack of engagement from parents
6. Covid-19
7. Other (please specify)
8. There were no challenges [Exclusive code, i.e. no other answers may be chosen]

**Other** If there is anything else you would like to share about the REAL programme, please write it here.

Free text - <500 characters>

**End**

Thank you very much for taking the time to complete this survey and for all of your help with our evaluation. We really appreciate your contribution and wish you a restful summer.

Stop page:

This survey has been stopped and answers have not been saved. You will need to come back and answer all questions to complete the survey.

## Appendix J: Baseline survey of parents (treatment and control condition)

### The REAL Programme: research study Parent questionnaire: Autumn 2019

We are asking you to complete this questionnaire because your child has been selected to take part in the REAL study

Name of **nursery**

Full name of **parent**  
**or carer**

Full name of **child**  
selected for the REAL study

Date of birth of **child**

Day

Month

Year

Thank you for your help with this important research study. When answering these questions, please think about your child who has been selected for this study.

- We are interested in your honest answers.
- Only the research team will know what you have said.
- You do not have to answer any questions if you do not want to.

When you have completed the questionnaire, please place it in the envelope provided and hand it back to your child's nursery teacher. If you have any questions, or need help, please ask your child's nursery teacher.

**Thank you for taking part in this research study**

**First, we would like to ask you a few questions about you and your family.**

**Q1.** What best describes your relationship to the child selected for the REAL study?

*Tick one box*

- Mother/adoptive mother
- Father/adoptive father
- Step-mother
- Step-father
- Foster carer
- Grandparent
- Other family member

<input type="checkbox"/>

**Q2.** How many children **age 7 and under** live in the same household as the child selected for the REAL study?

*Write in*

<input type="text"/>
----------------------

**Q3.** To which of these groups do you most identify?

*Tick one box*

- A.** White
- B.** Mixed
- C.** Asian / Asian British
- D.** Black / African / Caribbean / Black British
- E.** Other ethnic group

<input type="checkbox"/>

**Q4.** What is the **highest** level of education you have?

*Tick one box*

- No formal education
- Primary school
- Secondary school/high school
- College/university

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

**Q5.** What is the **main** spoken language at home?

*Write in*

**Q6.** What is your **current** working status? If not working, go straight to **question 8 on the next page**.

*Tick one box*

Working full-time

Working part-time

Not working

**Q7.** Do you work evenings and / or weekends on a regular basis?

*Tick one box*

Yes – evenings

Yes – weekends

Yes – evenings and weekends

No

**Q8. The following questions ask about some of the things parents or carers might do with their children at home. Thinking of the past 7 days, on how many days have you or someone in your family done the following with the child selected for the study?**

		Days							
		0	1	2	3	4	5	6	7
		Tick <u>one</u> box per row							
1	Read to the child from a book?								
2	Told the child a story, not from a book?								
3	Drawn pictures or done other art or craft activity?								
4	Played music, sang songs, danced, or done other musical activity with the child?								
5	Played with toys or games inside like board or card games with the child?								
6	Involved child in everyday activities like cooking or caring for a pet?								
7	Played games outside together like walking, swimming or cycling?								
8	Done activities with the child that helped them learn letters or alphabet?								
9	Done activities with the child that helped them learn numbers and shapes?								
10	Done activities using a computer such as a computer game or internet search?								
11	Done activities at home that are messy, like painting?								
12	Taken the child to a special or extra-cost activity outside of the home, like ballet, gymnastics, swimming or language lessons?								

**Thank you for answering these questions.  
Please return this questionnaire to the nursery teacher in the envelope provided.**

## Appendix K: Interim survey of parents (treatment and control condition)

### The REAL Programme: research study

#### Parent questionnaire: Autumn 2020

We are asking you to complete this questionnaire because your child is taking part in the REAL study.

**School ID**

<<SchoolSerialNumber>>

**Child name**

<<Pupil\_Name>>

**Child ID number**

<<NatCen\_Pupil\_ID>>

Thank you for your help with this important research study.

- We are interested in your honest answers.
- Only the research team will know what you have said.
- You do not have to answer any questions if you do not want to.

Instructions:

- Please complete this questionnaire about the child who is named in the box above.
- Tear off this front sheet before placing the questionnaire in the envelope provided.
- Return the envelope to your child's school teacher.

If you have any questions, or need help, please ask your child's school teacher.

**Thank you for taking part in this research study**

**Q1. The following questions ask about some of the things parents or carers might do with their children at home. Thinking of the past 7 days, on how many days have you or someone in your family done the following with the child selected for the study?**

		Number of days in the last 7 days							
		None of the last 7 days	1 day	2 days	3 days	4 days	5 days	6 days	7 days
Tick <u>one</u> box per row									
1	Read to the child from a book?								
2	Told the child a story, not from a book?								
3	Drawn pictures or done other art or craft activity?								
4	Played music, sang songs, danced, or done other musical activity with the child?								
5	Played with toys or games inside like board or card games with the child?								
6	Involved child in everyday activities like cooking or caring for a pet?								
7	Played games outside together like walking, swimming or cycling?								
8	Done activities with the child that helped them learn letters or alphabet?								
9	Done activities with the child that helped them learn numbers and shapes?								
10	Done activities using a computer such as a computer game or internet search?								
11	Done activities at home that are messy, like painting?								
12	Taken the child to a special or extra-cost activity outside of the home, like ballet, gymnastics, swimming or language lessons?								

The next questions are about home learning and school work during the strict lockdown and, specifically, the period **after the Easter holidays and before the May half term break.**

**Q2. Did your child attend school in person during this time period?**

Tick one box

- Yes – every weekday  → Go to question 6  
Yes – some weekdays  → Go to question 3  
No  → Go to question 3

**Q3. Did your child’s teacher contact you or your child in any way during this time period about your child or about their school work?**

Select all that apply

- Live or online lessons in real time   
Phone or video calls from the child’s teacher   
Emails or messages via an app   
Written feedback on the child’s work

Other (please write in)

None of the above

**Q4. Did your child’s school provide any work for them to do at home during this time period?**

Tick one box

- Yes – every day   
Yes – every week   
Yes – less often than every week   
No

**Q5. How much of the school work did your child complete?**

Tick one box

- None of it   
Less than half   
Half or more   
All of it

**Q6. Did you spend more or less time than usual doing home learning activities (e.g. reading, writing, drawing) with your child during this time period?**

Tick one box

- More time   
About the same   
Less time

**Thank you for answering these questions.  
Please return this questionnaire to your child's teacher in the envelope provided.**

P13582 REAL Project Child ID number: <<NatGen\_Pupil\_ID>> <<CKL>> <<Barcode>>

## Appendix L: Endline survey of parents (treatment condition only)

### The REAL Programme: research study

#### Parent questionnaire: Spring 2021

We are asking you to complete this questionnaire because your child is taking part in the REAL study.

**School name** <<School\_Name>>

**School ID** <<SchoolSerialNumber>>

**Child name** <<Pupil\_Name>>

**Child ID number** <<NatCen\_Pupil\_ID>>

Thank you for your help with this important research study.

- We are interested in your honest answers.
- Only the research team will know what you have said.
- You do not have to answer any questions if you do not want to.

Instructions:

- Please complete this questionnaire about the child who is named in the box above.
- Tear off this front sheet before placing the questionnaire in the envelope provided.
- Return the envelope to your child's school teacher.

If you have any questions, or need help, please ask your child's school teacher.

**Thank you for taking part in this research study**

**Q1. The following questions ask about some of the things parents or carers might do with their children at home. Thinking of the past 7 days, on how many days have you or someone in your family done the following with the child selected for the study?**

		Number of days in the last 7 days							
		None of the last 7 days	1 day	2 days	3 days	4 days	5 days	6 days	7 days
Tick <u>one</u> box per row									
1	Read to the child from a book?								
2	Told the child a story, not from a book?								
3	Drawn pictures or done other art or craft activity?								
4	Played music, sang songs, danced, or done other musical activity with the child?								
5	Played with toys or games inside like board or card games with the child?								
6	Involved child in everyday activities like cooking or caring for a pet?								
7	Played games outside together like walking, swimming or cycling?								
8	Done activities with the child that helped them learn letters or alphabet?								
9	Done activities with the child that helped them learn numbers and shapes?								
10	Done activities using a computer such as a computer game or internet search?								
11	Done activities at home that are messy, like painting?								
12	Taken the child to a special or extra-cost activity outside of the home, like ballet, gymnastics, swimming or language lessons?								

The next questions are about home learning and school work during the latest lockdown in **January-February 2021**.

**Q2. Did your child attend school in person during this time period?**

Tick one box

- Yes – every weekday  → Go to question 6  
Yes – some weekdays  → Go to question 3  
No  → Go to question 3

**Q3. Did your child's teacher contact you or your child in any way during this time period about your child or about their school work?**

Select all that apply

- Live or online lessons in real time   
Phone or video calls from the child's teacher   
Emails or messages via an app   
Written feedback on the child's work

Other (please write in)

None of the above

**Q4. Did your child's school provide any work for them to do at home during this time period?**

Tick one box

- Yes – every day   
Yes – every week   
Yes – less often than every week   
No

**Q5. How much of the school work did your child complete?**

Tick one box

- None of it   
Less than half   
Half or more   
All of it

**Q6. Did you spend more or less time than usual doing home learning activities (e.g. reading, writing, drawing) with your child during this time period?**

Tick one box

- |                |                          |
|----------------|--------------------------|
| More time      | <input type="checkbox"/> |
| About the same | <input type="checkbox"/> |
| Less time      | <input type="checkbox"/> |

**Q7. Did you have internet access at home during this time period?**

Tick one box

- |                 |                          |
|-----------------|--------------------------|
| Yes – always    | <input type="checkbox"/> |
| Yes – sometimes | <input type="checkbox"/> |
| No              | <input type="checkbox"/> |

**Q8. Did your child have access to a computer or tablet during this time period?**

Tick one box

- |                                      |                          |
|--------------------------------------|--------------------------|
| Yes, my child had exclusive access   | <input type="checkbox"/> |
| Yes, but the device had to be shared | <input type="checkbox"/> |
| No                                   | <input type="checkbox"/> |

**Q9. Did your child have a quiet place to do their school work during this time period?**

Tick one box

- |     |                          |
|-----|--------------------------|
| Yes | <input type="checkbox"/> |
| No  | <input type="checkbox"/> |

The next questions are about your experience of the REAL programme.

**Q10. Overall, how helpful or unhelpful did you find the REAL programme?**

Tick one box

- |                    |                          |
|--------------------|--------------------------|
| Very helpful       | <input type="checkbox"/> |
| Somewhat helpful   | <input type="checkbox"/> |
| Not very helpful   | <input type="checkbox"/> |
| Not at all helpful | <input type="checkbox"/> |

**Q11. What resources did the REAL teacher use?**

Select all that apply

- |  |                          |
|--|--------------------------|
| Books  | <input type="checkbox"/> |
| Videos shared via website or app             | <input type="checkbox"/> |
| Printed instructions for activities          | <input type="checkbox"/> |
| Activity packs (e.g. crafts, games, cooking) | <input type="checkbox"/> |

Other (please write in)

**Q12. How helpful or unhelpful did you find the following resources?**

*Tick one box per row*

	Very helpful	Somewhat helpful	Not very helpful	Not at all helpful	Not applicable
Books	<input type="checkbox"/>				
Videos shared via website or app	<input type="checkbox"/>				
Printed instructions for activities	<input type="checkbox"/>				
Activity packs (e.g. crafts, games)	<input type="checkbox"/>				

**Q13. What contact did you have with the REAL teacher?**

*Select all that apply*

- Phone calls
- Face-to-face conversations
- Video calls (e.g. on FaceTime or WhatsApp)
- Emails or messages

**Q14. How helpful or unhelpful did you find the contact with the REAL teacher, overall?**

*Tick one box*

- Very helpful
- Somewhat helpful
- Not very helpful
- Not at all helpful

**Q15. Did any of the following make it difficult for you to take part in activities?**

*Select all that apply*

- Lack of internet access
- Lack of access to equipment (e.g. computer, tablet)
- Technical problems with the online material
- Lack of quiet space
- Lack of time

Other (please write in)

None of the above

**Q16. Is there anything that would have made the REAL programme better for you?**

*Select one box*

Please  
write  
in

Nothing

**Q17. Is your child eligible for the Early Years Pupil Premium?**

*Tick one box*

Yes

No

Don't know

**Thank you for answering these questions.**

**Please return this questionnaire to your child's teacher in the envelope provided.**

P13582 REAL Project Child ID number: <<NatGen\_Pupil\_ID>> <<CKL>> <<Barcode>>

## Appendix M: Practitioner early implementation interview topic guide

### The REAL Programme

#### Early planning and delivery – Spring term 2020 Practitioner topic guide

**Aim:**

The aims of the interview are to capture experiences and views of:

- Participation: in REAL and pupil selection
- Reach: children selected are the ones needing support – who is not included
- Training: to understand what practitioners learned from the training
- Planning: to capture how practitioners are communicating with parents and planning visits
- Relationships: to record how a visit was conducted, materials used, responsiveness of parents
- Fidelity: to understand whether practitioners did what they were supposed to, any changes made, views on how much flexibility they have to make changes.

At the end of the interview, discuss organizing a visit and explain what need to be communicated to parents.

**The topic guide:**

This guide sets out a number of topics and questions that will be covered during interviews. The guide does not contain follow-up probes and questions like 'why', 'when', and 'how', etc., as participants' contributions will be explored in this way, as far as is feasible, during the 60 minute interview. Researchers will use prompts and probes in order to understand how and why views, behaviours and experiences have arisen. The interview will last no longer than **60 minutes**.

*Have the following as reference: the research information leaflet, outline of training content, ORIM framework description*

### Introduction

- Introduce self and NatCen Social Research, conducting the evaluation for EEF and independent from NCB.
- Info leaflet sent – Have they read it? Any questions? If they have not read info leaflet cover key points
- Participation is voluntary.
- Data collected will be stored securely. Only the research team will have access and it will be deleted within 12 months of the end of the project.
- Your information will be used to produce a report for the EEF. We will not identify any nursery, staff member, parents or children in the report.
- Anonymity and confidentiality: We will do our utmost to ensure that individuals are not identified. If you have any concerns about what you tell us during the interview, we are happy to discuss this at the end of the interview.
- We would like to record the interview – to have an accurate record of what is said.
- Any questions

*Start recording and ask permission to start recording. If they don't agree to recording take hand written notes.*

## 1. Background – staff and nursery

*Aim: gather background information on staff member and nursery/pupil profile*

Staff - current role

- Role and key responsibilities in the nursery
- How long in role
- Experience of working with nursery age children
- Experience/interest in early literacy

Nursery's practice (interactions with parents of 3-4 year olds)

- How many 3-4 years olds
- Usual level of engagement with parents– (home visit, meetings, groups sessions)
  - before child starts nursery (2-3 years)
  - during year when child is 3-4
- General profile of 3-4 years olds – level of language, EYPP, EAL, SEND
- Previous/current participation in early literacy programmes
  - All or specific children

## 2. Participation in REAL

*Aim: Explore why nursery is taking part in REAL, and how children selected*

Intervention participation

- who decided
- Reasons for/value of taking part

Children

- how children selected – criteria, perceived need – child/parent
- who was involved
- appropriateness of selection (who else could have benefitted/ who is already doing well)
- parent reactions
  - particular to different types of parents
  - reasons for not taking part

## 3. Training

*Aim: explore experience and views of training*

- Attendance – all days?
- Views on content for each day (knowledge/skills development)
  - topics
  - balance of theory and practice
- Views on ORIM framework

- Views of trainers
  - delivery
  - engagement with attendees
- Any changes needed to training:
  - content
  - format (for each day – presentations, groups discussions, paired working)
  - length and timing
- Usefulness of training to conduct home visits

## 4. Home visits

*Aim: capture what is involved when planning a visit and when carrying out a visit*

### Planning

- What is involved in planning a home visit
  - Discussion with parent(s)
  - Staff cover arrangements
  - Resources – materials, books
  - Time needed for planning of one visit
- Things that need to be considered when planning a visit
  - Variation in children's needs
  - Variation in family/parent needs

### Conducting a visit

- The most recent visit: describe the visit in as much detail as possible (let participant speak first and only probe/prompt afterwards – this is not a survey questionnaire)  
If needed, prompt them to speak: '*Start from when you arrived at their house, what happened....*'  
[Remind participant they do not need to use names, but if they do, we will not use names in the report]
  - timing (day, morning/afternoon/evening)
  - length of visit
  - where in home does visit take place
  - adults present
  - child(ren) present
  - topics covered and discussions (inc. use of Orim framework)
  - materials handed out
  - parent(s) engagement
  - child involvement
  - planned activity vs. any changes
  - overall view of visit – useful/challenging/productive
  - anything to consider for next visit

## 5. Overall views of all visits so far

- whether working as expected
- challenges/benefits
  - children's early literacy and communication
  - parents
  - practitioner-parent relationship
    - Changes over time
- any additional support or resource needs

### **TURN OFF RECORDER**

Ask if any concerns about what they have told us (if concerns, we can redact sections, share transcript for review).

**Discuss arranging a visit** – to accompany practitioner on one visit (ideally visit number 4). Practitioner can decide which parent/child would be most suitable. The purpose is for us to learn how home visits work. Explain what researcher will do during visit – sit away at a distance and observe and only take very brief notes. Would also like to conduct interview with parent (either after the observation, or via telephone).

**Explain that prior parent agreement will be needed** - We will email a consent form for the parent to sign to confirm they are happy for us to visit their home to observe a home visit and complete an interview. The practitioner can hold onto the form and give it to us on the day of the home visit.

**Conduct additional parent interview** – we would like to conduct one interview with a different parent. Practitioners can decide which parent would be most suitable. We will send an information sheet/consent form for parent to sign to confirm they are happy to take part in interview.

### **Agree when we will next be in touch**

Thank participant

We are offering £50 book vouchers to the nursery for taking part in this

We will also be offering parents £20 each for taking part in an interview

Thank participant and close.

## Appendix N: Practitioner endline interview topic guide

### REAL discussion guide: practitioner interviews

***Please review the wave 1 interview transcript for respondent if available.***

The **aim** of the interviews with REAL practitioners is:

- To gain a detailed understanding of the remote visits
- To understand the practitioners' views on support for remote visits
- To explore perceived benefits of the REAL programme; barriers and facilitators
- To understand the impact of Covid-19 on parents and children

**Note on delivery:** Delivery was paused in March 2020. The delivery model was changed to remote home visits in September 2020 with new guidance supplied by NCB.

**Note on REAL:** The programme is based on the **ORIM framework**. 1. Creating opportunities for children's literacy development by making resources available in the home environment; 2. Recognising and encouraging children's literacy milestones; 3. Interacting with children positively and supporting real-life literacy tasks and; 4. Acting as models of literacy users, so children see parents use literacy in everyday life. REAL practitioners are also trained on how to share the **four key strands of literacy** (books, early writing, environmental print, and oral language) with families.

#### Introduction

- Introduce yourself and NatCen Social Research
- Introduce the study:
  - Independent evaluation commissioned by the Education Endowment Foundation
  - Overall aim is to evaluate the programme and see how it works
- Participation in this interview is voluntary. You can choose to have a break at any time or not to discuss any topic without giving a reason.
- The interview isn't about testing how well you are 'doing' REAL. There are no right or wrong answers to any of the questions. We just want to understand your views and experiences of the programme to see how it works in the real world.
- We will be recording the interview so that we have an accurate record of what is said. Only the research team will have access to the recordings. Check OK.
- Information you share will be kept securely in accordance with GDPR.
- The findings from this and other interviews will be used to write a report at the end of the evaluation. We will not mention your name, names of parents or children, or names of settings when reporting findings. Everything you say will be kept confidential within the research team and not shared with EEF or NCB.
- Reminder of interview length – will last around 60 minutes. Check OK.
- Any questions/concerns?
- Check for permission to start recording.

## 1. Background and experience of delivery (5 mins)

*Aim: to 'warm-up' the participant, to understand their role and experience of delivery*

- Role and responsibilities at setting

- Overview of their role delivering REAL

If delivered REAL since 2019

Whether teaches the children in the programme at school (this or last year)

Number of in-person home visits delivered by March 2020 (average per family; number of families delivering to)

Number of remote home visits delivered by May half-term 2021 (average per family)

Any visits planned for after May half-term 2021 (if so, what/when/how)

## 2. Experience of remote home visits (15 mins)

*Aim: to understand in detail what the planning and delivery of a remote home visit involves, to explore practitioners' views on the remote home visit model*

### Overview of remote home visits

Activities, resources, mode of communication with parents

Frequency of remote visits (approximate)

### Planning a remote home visit

Time needed to plan one round of visits

Adaptations by child/parent

Resources used to plan

### Conducting a remote visit

- The most recent remote visit: describe the visit from start to finish in as much detail as possible. (Let participant speak first and only prompt afterwards.)
  - Mode of remote visit (telephone, video conferencing, messaging apps, post)
    - Reason for choosing this mode over others
  - Focus/topic of the visit
    - Use of ORIM framework and how
    - Use of four strands of literacy how
  - 'Modelling' the activity
  - Resources provided to parent
  - Interaction with parent
- Reflections on what worked well/less well about the visit
- Similarity or difference compared to other remote home visits

### Reflections on remote delivery model

Views on remote and in-person delivery models

Key differences

What works equally well/less well with remote delivery

### 3. Support for remote delivery (10 mins)

*Aim: to understand what support has been on offer to REAL practitioners in the context of remote delivery, and how suitable it has been*

Networking and training event in September 2020 (check if attended)

[If attended] Views on content and delivery

[If *not* attended] Why not attended/ suggestions for improved accessibility

- Any alternative training/support received

Networking event in April 2021

[If attended] Views on content and delivery

[If *not* attended] Why not attended/ suggestions for improved accessibility

- Any alternative networking support offered

[If any event missed] Impact of missed event on ability to deliver REAL remotely

Ongoing support from NCB for delivery of remote home visits

Availability

Adequacy

Ongoing support from peers (i.e. other REAL practitioners)

Availability

What worked well/less well about support for remote delivery

Suggested improvements to how support was delivered

Content

Mode of delivery

Frequency

### 4. Perceived impacts, barriers and facilitating factors (15 mins)

*Aim: to explore outcomes of the REAL programme, to understand how the remote delivery model has influenced the extent to which outcomes were achieved*

Perceived impact of the REAL programme on (ask all prompts):

Practitioner

Knowledge of early literacy development

Knowledge of how to work with families

Understanding of a child's home environment

Confidence in supporting parents

Engagement with harder to reach parents

Parents

Engagement in home learning and in early literacy activities in particular

Parent-teacher communication

Children

Communication and engagement at school

Communication between child and parent

School

Home-school communication

### Barriers and facilitating factors

Main barriers to achieving desired outcomes

Facilitating factors: what helped

## 5. Impact of Covid-19 and school closures (10 mins)

*Aim: to understand the impact of Covid-19 and school closures on parents, children*

Children's learning

How much in-person schooling REAL children missed

Impacts of the pandemic on their early literacy development

- Differences by groups of children (e.g. cohort, socio-demographic characteristics)

Other impacts on children

Parents' engagement with remote learning

Differences between parents

Reasons for reaching/not reaching parents

Extent to which REAL addressed impacts on parents and children

Views on schools using REAL as part of Covid-19 learning recovery

## 6. Final reflections

- Anything else to add

### **TURN OFF RECORDER**

#### **Thank interviewee for their participation**

- Reiterate confidentiality and anonymity

#### **Next steps**

- Thank them for their time and support with the evaluation
- The report will be published in 2022

## Appendix O: Parent interview topic guide

# The REAL Programme

## Parent experiences – Topic guide

### Aim:

The aim of the interview is to capture parents' experiences and views of:

- Home learning, and how it has been affected by Covid-19
- Taking part in home visits (before Covid-19) and remote visits (during Covid-19)
- Engaging in activities and making changes to the home learning environment
- Relevance of REAL for them and their child.

### The topic guide:

This guide sets out a number of topics and questions that will be covered during interviews. The guide does not contain follow-up probes and questions like 'why', 'when', and 'how', etc., as participants' contributions will be explored in this way as far as is feasible during the interview. Researchers will use prompts and probes in order to understand how and why views, behaviours and experiences have arisen. The interview will last no longer than **30 minutes**.

*Have the following as reference: the research information leaflet*

## Introduction

- Introduce yourself and NatCen Social Research.
- Thank you for agreeing to take part.
- Introduce the study:
  - Independent evaluation of The REAL Programme, for the Education Endowment Foundation
  - Interview is to understand your experience and views of The REAL Programme.
- We are also interviewing other parents and the information you give will be used to write a report for the Education Endowment Foundation. All information will be treated confidentially. No individual or school will be named in the report and nothing you say will be attributed to you.
- We would like to record the interview, so we have an accurate record of what is said.
  - Recorder is encrypted, and files stored securely in line with General Data Protection Regulation (GDPR)
  - Only the research team will have access to the recordings.
- The interview will last around 30 minutes.
- Any questions?
- Permission to start recording.

**Turn on recorder** - obtain verbal consent to participate.

## 1. Background – about family and participation

*Aim: to gather information on the family's characteristics and participation in the REAL programme [max 5 min]*

#### Parent/family background

- Relationship to child taking part in REAL
- Adults in household
- Children in household and ages
- Main activities of adults (in work/out of work)
- Main language spoken at home
- Any other languages

#### Engagement

- Who told them about the home visits
- What information they gave
- Initial views of REAL programme/ reasons for participation

## 2. REAL visits

*Aim: to explore what happens during REAL visits, participants' views of the visits and any changes to the home learning environment due to REAL [15 min]*

#### Activities with REAL teacher

- This school year (whether teacher shared resources, explained activities to do with child, arranged contact to discuss how activity was for parent/child)
- Last year / before school closed (if remembered)
  - What they liked/ did not like about in-person home visits

#### Last activity

- How did the REAL teacher share activity
  - Whether they dropped off/sent some resources
  - Whether a device e.g. phone was needed to access the activity
- Whether the REAL teacher discussed the activity with them and how (face-to-face, telephone, video call)
- What they liked / did not like and why
  - Child engagement
- Whether they discussed experience of doing the activity with the child with the REAL teacher afterwards and how (face-to-face, telephone, messages, video)
- Any problems with the activity (internet connection, difficult to understand what teacher said, lack of time/quiet space, lack of interest from the child)

#### Other activities they did this year

- Similar or different to what described above – how / what they did
- What they liked / did not like and why

#### REAL teacher

- How easy / difficult it is to understand what teacher says and asks them to do
- Were they able to discuss openly their experience of trying activity / why not
- What was the most helpful thing the teacher did / what worked least well

#### Learning

- Anything they do differently with child, after taking part in REAL
  - Any new activities
  - Frequency / quality of activities they already did
  - Is this a good change or not – why / why not?
- Anything the child does differently
  - Any new activities
  - Frequency / quality of activities
  - Is this a good change or not – why / why not?

### 3. Overall views of all visits so far

*Aim: to understand relevance of REAL programme and suggestions for improvements [max 5 min]*

*[Note for interviewer: draw out context (in-person or remote)]*

- Helpful for them – reasons why
- Helpful for child – reasons why
- Suggestions for improvements
  - Any other support
  - Any other activities / resources
- Preference for in-person visits or remote visits (and why)

### 4. Activities with REAL child

*Aim: to capture usual activities with REAL child and how these changed with Covid-19 [max 5 min]*

#### At home activities with child – this week or last week

- Reading – language, types of books
- Playing – games, toys
- Music – singing, rhymes, dancing
- Crafts – painting

#### Outside the home

- Meeting up with people/family
- Activities with other children (e.g. sports)

#### Anything they did less of because of Covid-19

- Time spent with child
- Any activities that stopped

## 5. Impact of Covid-19 on child's learning

*Aim: to understand how Covid-19 affected the child's engagement with school activities [max 5 min]*

Contact with child's school when schools closed – e.g. from start of this year to March

- Did child go to school in-person – how often
- Resources and activities to do at home – type of resources / activities, examples
  - Key differences with REAL activities
- School contacted them about child's work – how often, how
- Any difficulties completing school work (internet connection, lack of time)

### **Turn off recorder**

- Thank participant
- Mention thank-you vouchers and collect email to send e-code
- Close.

## Appendix P: Privacy notice

### Evaluation of The REAL Programme Privacy Notice

In this privacy notice, we explain the legal basis for data processing, who will have access to personal data, how the data will be used, stored and deleted, and who can be contacted with a query or a complaint.

#### The legal basis for processing data

The National Centre for Social Research (NatCen) is the data controller and also processes data for this project. This means that we are responsible for deciding the purpose and legal basis for processing data. We have been commissioned by the Education Endowment Foundation to conduct this evaluation.

The legal basis for processing the data is 'legitimate interest'. NatCen will process the data for the legitimate purpose of conducting the evaluation of the REAL Programme.

#### Who will have access to personal data?

NatCen is carrying out this research and will have access to information on early years settings, primary schools the child will attend, practitioners, children, and parents taking part in The REAL Programme.

For children, we will collect unique pupil numbers (UPN), date of birth, first name and last name. This data will be collected by the developer of The REAL Programme (the National Children's Bureau) and will be securely transferred to the NatCen research team.

In addition, NatCen will collect, process and analyse:

1. Audio interview recordings, transcripts, observation notes, and survey data collected from parents and practitioners
2. Child assessment data, collected by Speech and Language Therapists using a standardised test.

All data will be treated with the strictest confidence.

McGowan Transcriptions (<https://www.mcgowantranscriptions.co.uk/>) is the transcription service we use to transcribe our interview and focus group data. They will have access to recordings and transcriptions from all interviews. McGowan Transcriptions is on our approved supplier list and compliant with all of our information security policies.

Formara Print+ (<http://www.formara.co.uk/>) is the printing company we use to print our materials. They will have access to pupil names, dates of birth and UPNs, and parent name, for printing pupil lists, test paper labels and parent questionnaires. Formara Print+ is on our approved supplier list and compliant with all of our information security policies.

#### How will my data be treated?

The data we collect will be used for research only. All personal information, and any other data held on the project, will be securely deleted within six months of the project's completion by October 2022 at the latest.

However, before being deleted, the data will be transferred to the archive managed by FFT Education, EEF's data contractor, who will keep data from this study indefinitely for use in future. The archive is accessed through the Office for National Statistics Secure Research Service.

#### Who can I contact with a query or complaint?

If you have any questions about how your data will be used, please contact NatCen's Head of Data Protection at [dpo@natcen.ac.uk](mailto:dpo@natcen.ac.uk)

For questions about the evaluation, please speak to NatCen's evaluation team:

[real@natcen.ac.uk](mailto:real@natcen.ac.uk)

Under UK GDPR, you have the right to lodge a complaint with the Information Commissioner's Office if your complaint is not satisfactorily addressed by us. Please go to [www.ico.gov.uk](http://www.ico.gov.uk) for more information.

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