

**EXPLORING THE INCLUSION OF CHILDREN WITH SPECIAL EDUCATION  
NEEDS AND DISABILITIES (SEND) TO MAINSTREAM PRESCHOOL SETTINGS:  
A GOOD PRACTICE CASE STUDY.**

**by**

**EMMA ELIZABETH DOVE**

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## **ABSTRACT**

The numbers of children with special educational needs and disabilities (SEND) and an Education, Health and Care Plan (EHCP) in English nursery schools, continues to rise year on year (National Statistics, 2021). Inclusive educational practice is the espoused approach of support for children with SEND within policy (DfE & DoH, 2015). Factors which are known to support effective inclusion for children with SEND in the early years (EY) include practitioner attitudes and beliefs. For instance, practitioner views can shape the ethos of inclusion and inclusive policy within the setting, as well as the approaches to practice (Harwood, 2009; Ross-Watt, 2010; Thornton & Underwood, 2013). In recent years, theories have been developed based on practitioner views which aim to explain how effective inclusive practices in early childhood education can be achieved (Bartolo et al., 2019; Bryant, 2018).

A mixed methods, single case study design was employed to explain the practice and views of EY practitioners in a setting which was identified as an exemplar of good inclusive practice for children with SEND. The findings from the current research support the existing evidence base for inclusive early childhood education (IECE) in English speaking countries and are closely aligned to the adapted ecosystems model of IECE (Bartolo et al., 2019). For example, the findings highlighted the importance of collaboration and communication between a range of professionals and parents; the importance of professional development; inconsistencies in the inclusive practices of settings in the region; and the impact of resources including people and funding. In addition, practitioners held mixed beliefs

about SEND and inclusion and they perceived some children's needs as more challenging than others; namely safety concerns related to health and behaviour. The findings also revealed that practitioner morale and the recognition of a job well done was a perceived facilitator of inclusion. Finally, it was found that inclusive practice and practitioner views were closely aligned.

Implications for Educational Psychologists (EPs) regarding professional development, service involvements and availability to EY settings, and supporting positive views and experience of inclusion across EY settings were also discussed.

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## LIST OF ABBREVIATIONS

<b>AER</b>	Application for Ethical Review
<b>APDR</b>	Assess, Plan, Do, Review
<b>ASC</b>	Autism Spectrum Condition
<b>CFA</b>	Children and Families Act
<b>CoP</b>	Code of Practice
<b>CR</b>	Critical Realism
<b>CYP</b>	Children and Young People
<b>EHCP</b>	Educational, Health and Care Plan
<b>EP</b>	Educational Psychologist
<b>EPPE</b>	Effective Provision of Preschool Education
<b>EPS</b>	Educational Psychology Service
<b>EY</b>	Early Years
<b>EYFS</b>	Early Years Foundation Stage
<b>ICP</b>	Inclusive Classroom Profile
<b>IECE</b>	Inclusive Early Childhood Education
<b>IPPs</b>	Individual Provision Plans
<b>LA</b>	Local Authority
<b>RQ</b>	Research Question
<b>RTA</b>	Reflexive Thematic Analysis
<b>SEMH</b>	Social, Emotional and Mental Health
<b>SEN</b>	Special Educational Needs
<b>SEND</b>	Special Educational Needs and Disability



**SENDCo** Special Educational Needs and Disabilities Coordinator

**SES** Socio-economic Status

**TEP** Trainee Educational Psychologist

**UoB** University of Birmingham

## **CHAPTER 1: INTRODUCTION**

### **1.1 Introduction**

This chapter will outline the context in which the research was conducted – orienting the research in relation to its purpose, and the national, local and individual setting context. A summary of the research rationale will also be provided alongside an overview of the remaining chapters which constitute this research volume.

### **1.2 Research Background**

The following research comprises volume one of the two-volume academic thesis of the Applied Educational and Child Psychology Doctorate at the University of Birmingham (UoB). The thesis was completed alongside a supervised practice placement, within a Local Authority (LA) Educational Psychology Service (EPS) in England, as a Trainee Educational Psychologist (TEP) undertaking the practice requirements of the doctoral award.

This research explored the views of Early Years (EY) key workers and practitioners (hereafter referred to collectively as practitioners) in providing inclusive education for preschool age children with special educational needs and disabilities (SEND). This research also explored the espoused and enacted practice of inclusion for these children within an EY education setting (hereafter referred to as settings) which has been identified as a good practice example by pertinent professionals within the LA. By focusing on one case study the research aims to explore practitioner perceptions and practice whilst recognising that settings and practitioners are heterogeneous. Given the context of the research completion and my role as

TEP, specific consideration will be given to the implications for the practice of Educational Psychologists (EPs).

### **1.3 Key Concepts and Policies**

#### **1.3.1 SEND**

##### **1.3.1.1 Definitions of SEND**

The UK's conceptualisation of additional needs and disabilities has developed over time (see Table 1). There are several key models which have shaped thinking about the definition of SEND in England which include the social, medical and biopsychosocial models of disability (Oliver, 2013; Rolfe, 2019). It is important to recognise that educational policy regarding SEND has also been shaped by the philosophies of education, economics, and politics in England (Rolfe, 2019).

The medical, or individual, model of disability focuses on impairments within the child as a problem (Glazzard, 2011) which leads to policies of assessment, identification and required support (Hodkinson, 2016). The social model conversely sees society as a producer of barriers which lead to impairment (Oliver, 2013) and therefore policies and action relate to the responsibility of society to move barriers (Runswick-Cole & Hodge, 2009). This "became the big idea" (Oliver, 2013, p.1024) due to the equality movement and is used by many advocacy groups, yet the required focus on removing barriers in society has not matched the dominance of the model (Oliver, 2013). The biopsychosocial model was proposed by Engel (1977) and aims to explain how psychological and social factors influence biological functioning. The International Classification of Functioning, Disability and Health (World Health Organisation, 2022) is an example of this model in practice. It helps to encompass

the holistic and complex interactions related to SEND and balance the social and individual model ideas (Hodkinson, 2016).

**Table 1**

*Summary of Key Policy Relating to SEND in England in the Last 50 Years (Capper, 2020; Open University, 2022; www.parliament.uk, 2006)*

Year	Title	Description	Conceptualisation of CYP with SEND
Prior to 1978			Labels used included terms such as ‘handicap’ and ‘maladjusted’. Definitions of disability were given.
1978	The Warnock Report	Government review of education for ‘handicapped children’.	Introduced the ideas of ‘special education needs’ and moved away from diagnosis and categorisation. The term ‘integrative education’ was also introduced, which called for all children to be educated to common goals and in ‘ordinary schools’ where possible.
1981	Education Act	Statutory guidance which introduced recommendations from The Warnock Report.	Carried special education needs and integrative education into legislation. However, special school placements continue to exist where resources and provision requirements are deemed to necessitate this.
1993	Education Act	Statutory guidance which set out a legal requirement for SEN codes of practice to be developed.	Definitions of SEN relate to learning difficulties and disabilities. Education of children in ‘ordinary schools’ is still encouraged.
1994	Education (Special Educational Needs Code of Practice) Order	The first Code of Practice as set out in the Education Act (1993). It gave guidance on identification, assessment, and support for children with SEN.	Processes of assessment, identification, and SEN categories were outlined. However, both environmental and individual factors are identified as possible causes of SEN and it is expected that most children will be educated in mainstream settings.

2001	Special Educational Needs and Disability Act	An amendment to the Disability Discrimination Act (1995) and extended the educational legislation to cover disabled people's rights. It made educational discrimination unlawful.	Processes of assessment, identification, and SEN categories were outlined. However, both environmental and individual factors are identified as possible causes of SEN.
2001	Education (Special Educational Needs Code of Practice) Order	An update to the 1994 Code of Practice. It gave guidance on identification, assessment, and support for children with SEN.	SEN and disability remain separate. Inclusion in mainstream settings is encouraged for children with SEN although schools could refuse to accept placement of children within their setting.
2014	Children and Families Act	Statutory guidance on services for vulnerable children, young people and their families. Educational, health and care plans are introduced to replace Statements of SEN. Increased multi-disciplinary working is outlined. Families and children are given more rights to be involved in decisions about themselves.	Disability is formally linked with the SEN legislation and the terminology changes to SEND.
2015	Special Educational Needs and Disability Code of Practice:0 to 25 years	An update to the 2001 Code of Practice and bringing into practice the laws and provisions of the Children and Families act (2014).	Disability is formally linked with the SEN legislation and the terminology changes to SEND. Categories of SEND remain but are updated.

*N.B. the terms referenced in this table represent the historical conceptualisation of people with SEND. They are not indicative of the author's view and it is recognised that some are discriminatory and offensive.*

The term special educational needs (SEN) began to be used in the UK following the Warnock Report (Warnock, 1978) and directed thinking about the educational needs of children and the provision required to support these needs (Norwich, 2016). Subsequent Acts brought in by UK and then English governments have continued to use this terminology. The most recent SEND Code of Practice (CoP) (Department for Education [DfE] & Department of Health [DoH], 2015) added children and young people (CYP) with disabilities to the legislation as there is overlap between CYP with SEN and disabilities although the groups are not homogenous (Norwich, 2016).

The definition of a CYP with SEND in England (see Figure 1) encompasses those who have a learning difficulty or disability which requires additional educational provision to that generally provided to their age equivalent peers or those who will likely meet this criterion when they reach compulsory school age (DfE & DoH, 2015). This means that a medical model of identification and assessment as well as relevant support is the basis for the current conceptualisation of SEND in England (e.g. Norwich, 2016; Rolfe, 2019).

Within the category of SEND there are four broad areas of SEND outlined in the Code of Practice (DfE & DoH, 2015). These are:

- communication and interaction
- cognition and learning
- social, emotional and mental health difficulties (SEMH)
- and sensory and/or physical needs

## Figure 1

*The Definition of SEN and Disability from the SEND CoP (DfE & DoH, 2015, p.15-16).*

- xiii. A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.
- xiv. A child of compulsory school age or a young person has a learning difficulty or disability if he or she:
  - 1. has a significantly greater difficulty in learning than the majority of others of the same age, or
  - 2. has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions
- xv. For children aged two or more, special educational provision is educational or training provision that is additional to or different from that made generally for other children or young people of the same age by mainstream schools, maintained nursery schools, mainstream post-16 institutions or by relevant early years providers. For a child under two years of age, special educational provision means educational provision of any kind.
- xvi. A child under compulsory school age has special educational needs if he or she is likely to fall within the definition in paragraph xiv. above when they reach compulsory school age or would do so if special educational provision was not made for them (Section 20 Children and Families Act 2014).
- xvii. Post-16 institutions often use the term learning difficulties and disabilities (LDD). The term SEN is used in this Code across the 0-25 age range but includes LDD.
- xviii. Many children and young people who have SEN may have a disability under the Equality Act 2010 – that is ‘...a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities’. This definition provides a relatively low threshold and includes more children than many realise: ‘long-term’ is defined as ‘a year or more’ and ‘substantial’ is defined as ‘more than minor or trivial’. This definition includes sensory impairments such as those affecting sight or hearing, and long-term health conditions such as asthma, diabetes, epilepsy, and cancer. Children and young people with such conditions do not necessarily have SEN, but there is a significant overlap between disabled children and young people and those with SEN. Where a disabled child or young person requires special educational provision they will also be covered by the SEN definition.

These categories were designed to direct schools to appropriate provision and are not intended to be used to label a child or young person (DfE & DoH, 2015).

CYP identified with SEND receive support at different levels to meet their needs. The majority of CYP with SEND will have their needs met within the ‘SEN



support' level where a cycle of assess, plan, do, review (APDR) is employed (often referred to as the graduated response), which iteratively identifies what is working well and what needs to be changed to effectively support the CYP to attain good outcomes (DfE & DoH, 2015). However, some CYP will require a higher level of provision to meet their needs and so will be assessed for an educational, health and care plan (EHCP) (DfE & DoH, 2015). A CYP's EHCP aims "to secure the best possible outcomes for them across education, health and social care and, as they get older, prepare them for adulthood" (DfE & DoH, 2015, p.142) by providing information such as their needs, views and aspirations of parents and carers (hereafter referred to as parents) and the CYP, outcomes and provision (see Figure 2).

## Figure 2

*Guidance on EHCP Purposes and Content for LAs (DfE & DoH, 2015, p.142)*

The purpose of an EHC plan is to make special educational provision to meet the special educational needs of the child or young person, to secure the best possible outcomes for them across education, health and social care and, as they get older, prepare them for adulthood. To achieve this, local authorities use the information from the assessment to:

- establish and record the views, interests and aspirations of the parents and child or young person
- provide a full description of the child or young person's special educational needs and any health and social care needs
- establish outcomes across education, health and social care based on the child or young person's needs and aspirations
- specify the provision required and how education, health and care services will work together to meet the child or young person's needs and support the achievement of the agreed outcomes.

In this research the definition of SEND provided by the SEND Code of Practice (DfE & DoH, 2015) (see Figure 1) will be used, as it is the legal framework for SEND in England. However, due to the changes in terminology use the terms

relevant to the particular time and context (e.g. SEN or SEND) will be used in relation to literature discussed in this thesis.

### **1.3.1.2 Prevalence of SEND**

There has been a steady increase in the numbers of CYP who have SEN and/or a disability in England since 2017 (National Statistics, 2021)<sup>1</sup>. In 2021, 12.2% of pupils in England were categorised as receiving SEND support (having SEND with no EHCP) and 3.7% had an EHCP (National Statistics, 2021). The most commonly identified area of need identified on CYP's EHCPs was communication and interaction needs related to a diagnosis of Autism Spectrum Condition (ASC) and this was reflected in the fact that the most common designation of specialist schools in England is ASC ( $N=657$ ) (National Statistics, 2021). However, the most common area of need for CYP who required SEND support (without needing an EHCP) was speech, language, and communication needs (National Statistics, 2021).

As may be expected, through identification of SEND in early childhood, the percentage of pupils identified with SEND increased with age up to age 10 years, when 19% of 10 year-old pupils were identified as having SEND (National Statistics, 2021). The trend then decreases to age 15 years when 15.8% of pupils were identified with SEND (National Statistics, 2021). A similar trend was seen in the percentage of pupils with an EHCP, where the peak is reached at age 11 years (the age at which children move from primary to secondary education) with 4.6% of pupils

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<sup>1</sup> National statistics data on pupils with SEN and/or a disability includes pupils in England from "state funded nursery, primary, secondary, special, non-maintained special, pupil referral units and independent schools" (2021).

having an EHCP at this age, before declining slightly to 4.2% of pupils by age 15 years (National Statistics, 2021). This suggests that the majority of children with high level needs will be identified within the Early Years and primary education and that few CYP are likely to have their EHCP ceased before the age of 15 years. However, it should be remembered that this data is based on the reported SEND identification statistics from the national school census and therefore does not offer insights into why these differences in identified SEND may occur within pupil populations.

The educational provision of CYP with the most complex or highest level of SEND, those with an EHCP, is currently most likely to be provided by a mainstream school in England (50.5% of pupils with an EHCP) due to an increase of 1.7% in the year 2020-2021 (National Statistics, 2021). Specialist provision is still commonly considered as an educational option for children with an EHCP, with 98% of pupils accessing special schools holding an EHCP and an increase of 6,167 pupils attending special schools in the year between 2020 and 2021 (National Statistics, 2021). This increase has led to over subscription and limited resources within this special school system. When coupled with policies of inclusive education, this means that many mainstream schools have additional SEND educational provision on site to support the needs of pupils with SEND. For example, in 2021, 352 schools in England had SEN units<sup>2</sup> (down from 361 in 2020) and 1,066 schools in England had resourced provision<sup>3</sup> (up from 1,028 in 2020) (National Statistics, 2021).

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<sup>2</sup> SEN units are placements in a mainstream school where a child with specific SEN (and typically an EHCP) are taught mainly in specialist classes, with some teaching in mainstream classes.

<sup>3</sup> Resourced provision are placements in a mainstream school where a child with a specific SEN (and typically and EHCP) are taught mainly in mainstream classrooms with access to some specialist facilities.

### 1.3.1.3 Assessment of SEND

To be identified as having SEND in England, CYP have to be assessed. Anyone can refer a CYP who they suspect has SEND for assessment but parents and education providers have an “important role in doing so” (DfE & DoH, 2015, p.23). The LA has a duty to identify CYP with SEND in their community through assessment by education providers, and assessment information can be gathered to support this identification in a range of ways (DfE & DoH, 2015). When CYP with identified SEND do not make expected progress despite effective assess, plan, do and review cycles then an assessment for an EHCP should be requested (DfE & DoH, 2015). The principles of assessment are outlined in Figure 3.

#### Figure 3

*Principles of SEND Assessment from the SEND CoP (DfE & DoH, 2015)*

Certain principles of assessment are outlined in the CoP which include:

- Early identification,
- Regular assessment and monitoring of CYP making slower than expected progress,
- Providing high quality targeted teaching in the first instance,
- Undertaking an assessment of SEN if a CYP’s difficulties persist despite effective targeted educational provision,
- Including the CYP and parent/carer views in the assessment,
- Go beyond progress and attainment information in the assessment and explore factors such as the environment to help establish causal factors (for example through a multi-agency approach),
- Engage in a pattern of APDR which ensures that intervention is matched to needs and is effective,
- And utilise the knowledge and guidance of other professionals such as EPs.

Despite having underpinnings of the medical model of disability through the focus on identification and categorisation of SEND, this assessment guidance refers to a holistic assessment which includes consideration of the CYP within their context

which draws on a biopsychosocial model of disability (Norwich, 2016). It also includes ideas related to assessment through response to intervention (Ridgeway et al., 2012). For example, the references made to cycles of APDR and tiers of support (i.e. universal, targeted, and individual teaching) (Norwich, 2016). Rolfe (2019) believes that these policies are also driven by neoliberal politics, a focus on national debt reduction and economic growth, and an educational standards agenda. Rolfe (2019) suggests that this leads to policy which aims to reduce the power of LAs, reduce spending on SEND, drive up training and qualifications in the workforce and focus on academic league tables. This is at the expense of other aspects of education which is likely to lead to “long-term difficulties for individuals with SEND” (Rolfe, 2019, p. 440).

Following the SEND reforms in the most recent CoP (DfE & DoH, 2015), EHCPs were introduced which replaced the Statements of SEN. EHC needs assessments should be sought if an EHCP is deemed necessary to support a CYP with SEND who continues to make slower than expected progress despite the effective implementation of the graduated response of support (DfE & DoH, 2015). The LA is responsible for completing an EHC needs assessment and does this by drawing on assessment information provided which includes the view of the CYP and/or parents, educational settings, EPs, health care professionals, social care professionals, and other relevant professionals (DfE & DoH, 2015). The LA then identify if an EHCP is relevant for a CYP, and if required produces the plan to meet the purposes outlined in the CoP (see Figure 2).

#### **1.3.1.4 Vulnerability of CYP with SEND in Schools**

It is well established that children with SEND can experience poorer outcomes, in a range of areas, compared to CYP without SEND (e.g. Fisher & Meyer, 2002; Timmons & Wagner, 2009). For example, children with SEND can have lower levels of general health (Fisher & Meyer, 2002), they often experience low academic success (Timmons & Wagner, 2009), and are more likely to experience social and emotional difficulties (such as social participation and self-esteem difficulties) than their peers without SEND (e.g. Dyson et al., 2004; Fisher & Meyer, 2009; Timmons & Wagner, 2009). Children with SEND are also more likely to be excluded from school (Timpson, 2019). This is particularly evident at the SEN support level where a child is three times more likely to receive a permanent or fixed-term exclusion than the general school population (Timpson, 2019).

The occurrence of SEND is not the only factor which may contribute to these poorer outcomes. For instance, one concern is that of effective teaching for SEND. A study of teachers across four LAs in England found that 70% felt their initial teacher training was inadequate preparation for teaching pupils with a range of SEN (Ellis et al., 2012). Furthermore, approximately 60% of teachers indicated that they needed more training on SEN and only 49% felt able to effectively teach the pupils with SEN in their class. The large scale of responses to this survey (n=1500) supports the generalisability of the findings to the teaching population. However, due to the methodology of the online survey, there is limited information to understand why these challenges were experienced by teachers and how they could be overcome. It has also been suggested that school funding does not account for the context of the school which leads to children with SEN in disadvantaged schools perhaps being at

risk of underfunding causing inequalities in identification and support for CYP with SEN (Lupton et al., 2010).

### **1.3.2 Inclusion**

#### **1.3 2.1 Definitions of Inclusion**

When trying to establish a definition of inclusion there is confusion due to a lack of consensus over meaning and practice related to the term (Norwich, 2016). Even in research, the word inclusion has been “increasingly been used to denote the whole field” (Göransson & Nilholm, 2014, P.266) without due consideration of the variety of meanings regularly applied. In a review of the inclusion literature, Göransson and Nilhom (2014) found four commonly used definitions of inclusion which they organised into hierarchical categories (see Figure 4) which move from an integration description of inclusion, through social and educational inclusion for only children with SEND, inclusion for all, and finally a community description.

#### **Figure 4**

*Definitions of Inclusion (Göransson & Nilholm, 2014, p.268)*

<p>“(A) Placement definition – inclusion as placement of pupils with disabilities/in need of special support in general education classrooms; (B) Specified individualised definition – inclusion as meeting the social/academic needs of pupils with disabilities/pupils in need of special support; (C) General individualised definition – inclusion as meeting the social/academic needs of all pupils; (D) Community definition – inclusion as creation of communities with specific characteristics (which could vary between proposals).</p>
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Inclusive education became an international goal following the Salamanca Statement (UNESCO, 1994) (see Figure 5) when many countries, including the UK,

signed an agreement which identified that CYP with SEN would have access to general education as this provided “effective education to the majority of children” (UNESCO, 1994, p.3). In the UK this concept was enacted within the cultural context following social and political change that began in the 1960s through mediums such as the equity and social justice movements which created a discourse on valuing diversity (Thomas, 2013). Conversely, this thinking came from a history of segregated education which included the idea of special education versus general education (Thomas, 2013). The understanding and practice of inclusion, therefore, holds both ideas within its conception.

## Figure 5

*Salamanca Principle (UNESCO, 1994, p.3)*

We believe and proclaim that:

- every child has a fundamental right to education, and must be given the opportunity to achieve and maintain an acceptable level of learning,
- every child has unique characteristics, interests, abilities and learning needs,
- education systems should be designed and educational programmes implemented to take into account the wide diversity of these characteristics and needs,
- those with special educational needs must have access to regular schools which should accommodate them within a child-centred pedagogy capable of meeting these needs,
- regular schools with this inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all; moreover, they provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system.

The Salamanca Statement’s (UNESCO, 1994) adoption in UK policy guidance highlighted how, “Inclusion is about much more than the type of school that children attend: it is about the quality of their experience, how they are helped to learn, achieve and participate fully in the life of the school.” (Department for Education and Skills, 2004, p.12). Inclusive education is therefore considered to be about both



educational and social inclusion (Lauchlan & Grieg, 2015) which would “remove barriers, improve outcomes and remove discrimination” (Lindsay, 2003, p3).

Therefore, for inclusion to be truly enacted we have to move on from aspiring to the education of children in merely the same location, and consider the context, curriculum and learning culture, attitudes, and the psychology of difference (i.e. how people feel about themselves and their identity) (e.g. Hodkinson, 2011; Thomas, 2013).

In the present study, a definition of inclusion was chosen which is in line with the Salamanca Statement (see Figure 5) and encompasses the social and educational inclusion of all children, considering the environmental factors regularly included in definitions of inclusion. Therefore, the definition that inclusion is “increasing the participation of students in, and reducing their exclusion from, the cultures, curricula and communities of local schools” (Booth & Ainscow, 2002, p.3) will be used within this study.

### **1.3.2.2 Legislation and Policy**

Views on the education of CYP with SEND have changed over time in England. Prior to The Warnock Report (Warnock, 1978) there was a segregated system of education. CYP with additional needs were educated or ‘treated’ in separate institutions or schools. The Education Reform Act (1988) introduced an entitlement for all children to a National Curriculum which was seen by some as progressive and positive in terms of quality of education and access for all pupils. However, in practice, rigid assessments and an ethnocentric curriculum were exclusionary to many pupils (Thomas, 2013). Following this, the supporting

framework for action (UNESCO, 1994) aimed to inform policy and practices for implementation of the Salamanca statement in action including a principle of equality, and guidance on pedagogy and ethos (Rolfe, 2019).

In England, inclusive education policy has been enacted through the same lens of social, educational, political and economic philosophies as discussed within the definitions of SEND above. For instance, the definition of SEND in the CoP (DfE & DoH, 2015) (see Figure 1) conflicts with inclusion due in part to the focus on identification (Rolfe, 2019) and perpetuates a model of individual deficits in SEND and not “the inability of schools as currently designed and resourced to provide equitably for the needs of all children” (Lupton et al., 2010, p.281). Future policy needs to move away from a model of identification and support to a model of community development, student identity and self-belief as part of a learning community (Thomas, 2013).

In the UK currently there is a “general presumption of mainstream education” for all CYP (DfE & DoH, 2015, p.28) through legislation such as the Children and Families Act (CFA) (2014) and SEND CoP (DfE & DoH, 2015), whilst the Equality Act (2010) further protects disabled CYP from discrimination in relation to education access based on their disability or SEN. To enable this inclusive practice in education, the CoP states that “reasonable adjustments and access arrangements should be considered” (DfE & DoH, 2015, p.17) and that “the best” educational settings “do what is necessary to enable children and young people to develop, learn, participate and achieve” (DfE & DoH, 2015, p.27). Despite this recognition of the need of some CYP with SEND for additional support, the CoP (DfE & DoH, 2015)

also advocates for universally available high quality teaching which leads to fewer CYP requiring additional support.

Policies which support inclusion of CYP with SEND are not isolated in the context of UK schools (Curran, 2019) and “inclusive education is inextricably linked to a political critique” (Thomas, 2013, p.11). It is argued that there is a tension between educational policies and legislation which promote inclusive practice and those which focus on raising standards through greater attainment results (e.g. Ellis & Tod, 2014; Rolfe, 2019). Economically, government funding cuts have been criticised for cutting budgets to schools including funding for SEND, staffing and resources (Rolfe, 2019). Furthermore, the two systems of mainstream and special education are believed by some to stop England from the full development of an inclusive policy (Lindsay, 2003) and inclusive policy in England has been criticised as integration (Hodkinson, 2011). Policies regarding equality have even been criticised for deepening inequalities by excluding some individuals in their own distinct legislation (Armstrong et al., 2016). These tensions may lead to a reduced emphasis or wholesale enactment of the inclusion agenda in schools.

### **1.3.2.3 Impact of Inclusion**

Inclusive education has been espoused as an aim of education in England (e.g. DfE & DoH, 2015; UNESCO, 1994) so it is important to consider the evidence for this practice. The evidence base is mixed, although there is a consensus that inclusion is beneficial to children with SEND, especially in earlier education, and that it is not harmful to the outcomes of all children (e.g. Dyson et al., 2004).

Internationally, benefits of inclusive education, such as social and academic progress, have been seen for CYP with SEND (e.g. Lawrence et al., 2016; Timmons & Wagner 2009). For instance, children with disabilities in inclusive early childhood education (IECE) showed improved engagement with social and emotional skills, and this was especially true for children with more severe needs (Lawrence et al., 2016). The impact can be preventative, as children with SEN were found to be over three times more likely to have social difficulties if they attended low inclusive settings compared to highly inclusive settings (Fisher & Meyer 2002). However, the literature identified mixed outcomes related to academic and social development for children with disabilities in inclusive education programmes (Salend & Garrick Duhaney, 1999). In England, children with SEN had better academic outcomes in Key Stage 1 when they attended inclusive schools (Dyson et al., 2004). However, the opposite was seen in secondary schools and the effect was larger than the positive impact at Key Stage 1, leading to an overall negative effect across statutory school age (Dyson et al., 2004). It should be noted that the definition of inclusion used within the research was a model of integration based on schools with higher percentages of children with SEN and no causation was established between higher levels of SEN in the school demographics and lower attainment; in fact, other factors such as low SES appeared to drive the correlation (Dyson et al., 2004).

Inclusive practices not only impact on CYP with SEND but also their peers without SEND. Evidence suggests that inclusion typically does not have a detrimental effect on academic outcomes for pupils without SEND (Dyson et al., 2004; Salend & Garrick Duhaney, 1999). Indeed, social and emotional benefits were found for children without disabilities in inclusive programs as they developed greater tolerance

and awareness of individual needs and inclusion (Salend & Garrick Duhaney, 1999). There is also a perception of English children and teachers that inclusion supports social and emotional development for all children (Dyson et al., 2004). However, for secondary pupils there is a greater negative correlation between higher numbers of children with SEN at school and academic attainment than at primary level (Dyson et al., 2004).

### **1.3.3 The EY**

#### **1.3.3.1 What is the EY?**

In England the EY is the stage in a child's life from 0 to 5 years old (DfE, 2014). Within the EY there is a statutory framework called the Foundation Stage which sets the standards for safeguarding, welfare and learning/development for children in the EY (DfE, 2014). The Early Years Foundation Stage (EYFS) framework (DfE, 2021b) is mandatory for all EY providers in England including childminders, independent and non-maintained schools. It outlines the EYFS areas of learning, Early Learning Goals, and characteristics of effective learning and is applicable up to the end of the child's Reception Year in school (DfE, 2021b). EYFS is sometimes used interchangeably with the term EY to denote the period of development from birth to five years of age. For this research the term EY will be used.

During this period, children may access early education through a range of registered settings such as nurseries or childcare (see Table 2) as well as unregistered EY provision such as toddler groups and au pairs. Several terms are used to discuss the phases of EY provision, for example Nursery age which can relate to birth to five years, and the Preschool Year which typically relates to the

academic year before starting school. The Reception Year begins in the September of the academic year that the child turns five years old, although parents of children born in the summer term can opt to defer school start until the next academic year. EY provision is commonly used by parents in England, and prior to compulsory school age most children over three years of age attend some form of EY provision (DfE & DoH, 2015).

**Table 2**

*Types and Phases of Ofsted Registered Early Years Provision with Related Ages*

Type of provision	Description	Age(s) of child
Day nurseries	These are run by individuals, private companies, or community groups. They tend to offer provision all year round.	0 to 5 years of age
Preschools and play groups	Often voluntary and charity run provision which opens in line with school terms.	2 to 5 years of age
Nursery schools	These can be independent, private or state funded schools which typically educate children for the academic year or two prior to starting school. They tend to be run by qualified teachers.	around 2 to 5 years of age
Childminders	Provide childcare in their own home for up to six children below the age of 8 years. They may provide a range of provision across term time and holidays.	0 to 16 years of age

**1.3.3.2 SEND in the EY**

As with older CYP, the definition of SEND for children in the EY is “a learning difficulty or disability which calls for special educational provision to be made” (DfE &

DoH, 2015, p.15). However, the definition is extended for children in the EY to include those who would require special educational provision by the time they reach school age and recognition that for children under the age of two years any educational provision required to support their needs is additional (DfE & DoH, 2015) (see Figure 6).

### **Figure 6**

*The Definition of SEN and Disability in the EY from the SEND CoP (DfE & DoH, 2015, p.16).*

A child under compulsory school age has special educational needs if he or she is likely to fall within the definition in paragraph xiv. above when they reach compulsory school age or would do so if special educational provision was not made for them (Section 20 Children and Families Act 2014).

For children aged two or more, special educational provision is educational or training provision that is additional to or different from that made generally for other children or young people of the same age by mainstream schools, maintained nursery schools, mainstream post-16 institutions or by relevant early years providers. For a child under two years of age, special educational provision means educational provision of any kind.

#### **1.3.3.2.1 Prevalence**

English EY education settings have historically had high levels of pupils with emotional, behavioural or specific learning difficulties compared with other countries (Robson, 2005). In the current day, there is an increasing trend for the number of children who have an EHCP at nursery; rising to 1.4% of all children in nursery education in 2021 (National Statistics, 2021). The percentage of children identified at the SEN support level was 13.3% which is below the prevalence for all CYP of school age in line with the trend for increasing levels of identified SEN over childhood (National Statistics, 2021). However, there was a small reduction year on year in the

prevalence of children identified at the SEN support level in the EY (National Statistics, 2021). It is unclear what may be the reasons for these trends, but the data suggests that prevalence of SEND in the EY is remaining reasonably consistent whilst the severity of need is increasing over time.

#### ***1.3.3.2 Policy and Legislation***

Policy and Legislation related to SEND in England is also applicable to the EY, although some specific elements apply in addition to, or instead of, the requirements for older CYP. In the CFA (2014), the specific categories of ‘EY action’ and ‘EY action plus’, were replaced with ‘SEN support’ so that the terminology for younger children is no longer different. Certain aspects are highlighted due to the young age of the children in the EY, such as the positive impact of early intervention for children aged 2 to 5 years old at reducing the child’s needs later in development, and the recommendation to review EHCPs more frequently (i.e. every three to six months). In line with the general guidance, the SEND CoP (DfE & DoH, 2015) also sets an expectation of inclusion for children with SEND in EY, presenting a model of inclusion which includes participation, equality and engagement. This practice of educating children with SEND in general EY education settings has been the norm for all but a minority of children in England (Robson, 2005).

#### ***1.3.3.3 Assessment***

The policies and legislation surrounding SEND in the EY continue to promote assessment and identification of SEND in children. Early identification, and early support, is encouraged to support the best long-term outcomes for children (DfE & DoH,



2015). Assessment is therefore key to support this identification. Settings are directed to clear processes for assessing SEND which fits within the whole setting approach to monitoring children's development and draws on progress checks such as the two year check or EYFS profile, and the knowledge of parents and other professionals (DfE & DoH, 2015). The SEND CoP warns against settings seeing all delays in development as a sign of SEND at this early age, and encourages a holistic assessment to be undertaken where concerns arise which determines "whether there are any causal factors such as an underlying learning or communication difficulty" (DfE & DoH, 2015, p84).

#### **1.4 Inclusion of Children with SEND in the EY**

To draw together the key concepts of SEND, inclusion, and EY education, the following section will present an overview of research which considers what quality of inclusion of children with SEND in the EY looks like. Given the increasing severity of SEND of children in EY, the increase in children with SEND overall, and the vulnerability of this group (see Sections 1.3.1.2, 1.3.1.4 and 1.3.3.2) it is vitally important to get educational practice right for children with SEND at the earliest opportunity. In the EY specifically, research suggests that several factors impact on the effectiveness of inclusive education. Due to the focus on the English context, research from the UK will be included in this summary.

### **1.4.1 The Unique Child**

Research suggests that early identification and provision for young children with SEND matters (e.g. Tickell, 2011). Guldberg (2010) reviewed literature in the UK related to the inclusion of children with ASC in the EY. They found that treating the child as a unique individual was important and could be seen through practices of interventions which were based on assessment of need and identification of strengths and interests. Guldberg (2010) also identified a need for the practitioners supporting children to have an understanding of the developmental and learning implications of specific disabilities such as ASC, to enable effective intervention planning and implementation. Although this paper looked at the inclusion of children with a specific disability, further studies considering a wider population have drawn similar conclusions. For instance, a large-scale longitudinal study of over 1000 young children in England found that preschool settings which were more successful at reducing the number of children 'at risk of SEN'<sup>4</sup> had formal policies which aided individual identification of SEN (Sylva et al., 2006). Although published prior to the current legislation and policy regarding SEND and inclusion in England, these approaches link to the government guidance including early identification, identification of needs, individual plans of support, and person-centred approaches (e.g. DfE & DoH, 2015).

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<sup>4</sup> 'At risk of SEN' was determined through scores at set thresholds below age related expectations on assessments in cognition, social and behavioural development at three years of age (Sylva et al., 2006).

### **1.4.2 Collaborative Working**

Collaboration between practitioners, parents and other professionals is another key aspect of effective inclusion of children with SEND in the EY. For instance, Harwood (2009) researched training implications for practitioners in the EY related to inclusion of children with SEND through a single case study, but from this they proposed a model of effective inclusion in preschools. In this model Harwood (2009) identified key principles for practice. These included communication between parents and staff, and clarity over roles and responsibilities (such as the who, what and how of action). This is supported by another single case study conducted in Scotland of a child with Spina Bifida (Ross-Watt, 2010). Through the study, Ross-Watt (2010) found that the multi-agency team around the child worked closely together to support inclusion, including at review meetings, and that parents were important partners for practitioners in inclusive education practices. Larger scale reviews and research have also found evidence to support the importance of collaborative working. For instance, effectiveness in reducing risk of SEN in young children correlated with collaborative practices between the setting and parents and other professionals (Sylva et al., 2006). Furthermore, positive relationships, along with collaborative working practice, was identified as a feature of effective inclusive practice for autistic children in the EY (Guldberg, 2010). Studies suggest that parental involvement is particularly important (Nutbrown & Clough, 2004), and that this view is held by parents themselves as well as setting staff (Owen, 2019).

### **1.4.3 Attitudes and Beliefs**

The views of practitioners, and ethos of the settings, have also been found to be a key component of effective inclusive practice for children with SEND in the EY. For example, Ross-Watt's (2010) study of a successful inclusive example found that the actions taken were underpinned by the attitudes and beliefs of the team of adults around the child. These adults held a social view of disability and inclusion, and this led to an ethos of kindness, positivity, and flexibility in dealing with challenges as they arose. This is supported by research which identified that commitment to a shared ethos was a key component of inclusive preschool practice for children with SEND (Harwood, 2009). Harwood's model of inclusive preschool practice also outlined how policy is enacted following its interpretation, and is therefore impacted by the values, attitudes and interpretations of the leaders and practitioners in EY settings. This is important because practitioner views of inclusion have been found to be mixed (Clough & Nutbrown, 2004), and do not all align to the attitudes of social inclusion seen in Ross-Watt's (2010) research, which will impact how policies are interpreted and enacted. In fact, studies which collected practitioner views on inclusion of children with SEN in the EY found that the majority of practitioners believed in inclusion in principle but had concerns regarding appropriate support and the impact on other children of inclusion for all children (Clough & Nutbrown, 2004; Nutbrown & Clough, 2004). This was termed the 'yes ... but' factor.

### **1.4.4 Barriers**

Alongside the requirements for effective inclusion of children with SEND in the EY, research has identified some key barriers to the enactment of inclusion practice

in the EY. A study of over 100 educators for four European countries including the UK, found that the majority of educators appraised their professional development through formal training as inadequate to prepare them to facilitate the inclusion of children with SEN (Nutbrown & Clough, 2004). Therefore, educators gained their professional development mainly through experience, and those who did report having good training experiences, tended to be educators with higher degrees. Owen (2019) added to this in their research focused specifically on inclusion in seven English preschools, through the perceptions of practitioners, volunteers and parents. They found that practitioner expertise, along with lack of resources and funding were perceived to be barriers to effective inclusive practice.

#### **1.4.5 Summary**

UK research has identified some specific elements which are required for the effective inclusion of children with SEND in the EY. These include:

- Understanding and supporting the unique child,
- Collaboration with parents, between setting staff, and with external professionals,
- and inclusive attitudes and beliefs in practitioners.

Barriers to this were also identified (e.g. Nutbrown & Clough, 2004; Owen, 2019) which include:

- practitioner expertise,
- effective training,
- resources,

- and funding.

## **1.5 Research Context**

### **1.5.1 National Context**

In England there has been a continued increase in the number of CYP categorised as having SEND, including an increase in children with SEND in maintained nurseries in England and those attending specialist settings (National Statistics, 2021). The attainment gap for CYP with SEND widens as they get older (Hutchinson et al., 2020) which suggests that early intervention is important to support good educational outcomes.

To meet the needs of the increasing numbers of children with SEND, inclusive education is advocated in international guidance (e.g. UNICEF, 1990). Inclusion is a debated term but is generally described as the participation of all children in ordinary schools and links to the rights of all children to access education. This practice is a useful approach to support the increasing numbers of children with SEND in English schools. For example, inclusive education has a positive impact on the outcomes for children and young people with SEND, such as their academic performance, social interactions and attitudes to school (e.g. Salend & Garrick Duhaney, 1999). In addition to this, concerns over the impact of the inclusion of children and young people with SEND in mainstream schools on their non-SEND peers are known to be unfounded (e.g. Kalamouka et al., 2007). Therefore, inclusive practice is now built into UK law through the statutory SEND COP (DfE & DoH, 2015) and CFA (2014) in England.

## **1.5.2 Local Context**

Details of the LA where the research was carried out will be given to help orient the research in its context (details of the setting are included in Chapter 3). However, to protect confidentiality, pseudonyms will be used with the LA area named Countyshire and specific data which may make the LA identifiable are withheld.

### **1.5.2.1 The LA Area**

Countyshire LA was a growing LA area. Within Countyshire, the number of CYP with an EHCP level had been steadily increasing year on year and was just higher than the national average and its geographical neighbours. Countyshire's areas of lowest SES had higher levels of children with an EHCP (almost double the rate of other areas). Compared to the national average, more children attend specialist schools or resourced provision within Countyshire LA. Despite this specialist provision, outcomes for CYP with SEND in Countyshire are lower than for the rest of England in academic attainment and progress, and they are more likely to be not in education, employment or training at ages 16-18 years. CYP with SEND also have higher levels of absence than CYP with no identified SEND which suggests that engagement and participation for these children is a challenge.

### **1.5.2.2 The EPS**

Countyshire LA had an EPS that operated a traded model of service delivery, alongside statutory and core work for the LA (e.g. EHC needs assessments) and commissioned services (e.g. centralised training). Countyshire EPS did not work directly with EY settings through its traded model, although EPs carried out

assessment work in EY settings for statutory and core involvements with children. The LA also had an EY service, which included quality and inclusion, funding, parent support and training teams. They offered support to settings including support for children with SEND. This support took the form of guidance on processes, training courses, visits, and advice. The EY teams also worked in multi-disciplinary teams. This included commissioning the EPS to facilitate a series of drop in consultations for practitioners aimed at supporting children with SEND.

### ***1.5.3 Researcher Positionality***

Positionality, and its impact on the current study, will be further discussed in Chapter 3, but to position me as the researcher within the focus of this study on the inclusion of children with SEND in EY, the following information may be useful:

- I attended a community preschool prior to starting school the term before my fifth birthday. I have positive memories of my early educational experiences.
- I have family members with SEND who have had varied experiences of education which were impacted by their individual SENDs and the perspectives of SEND by educators and wider society.
- I believe that inclusive educational practice should be the aim of education for all children but that the practicalities of implementation within our current educational context can make this challenging to implement with success for some children.
- As a TEP, I have often been disappointed by what education settings I work with consider to be effective inclusive practices for children with SEND, especially what they consider to be reasonable adjustments.



- I have experience teaching in the EY and primary schools and have seen the difficulty some children with SEND experience in participating in school, which they did not experience in their preschool or Reception settings. This suggests to me those EYs settings were getting something right which can be learnt from.
- I believe that EY education forms the foundation for children's views of themselves, their place in the world and their future development. It is, therefore, vital to get this foundation right for all children.

I became interested in IECE after working as a primary school teacher, which included work in the EYs. I found it was challenging as a teacher to support the needs of children with SEND in mainstream settings, although I believed in inclusion as a principle. This was an experience voiced by many of my colleagues and resonated with the research base when I read the paper by Clough and Nutbrown (2004). In this paper the authors identified the 'yes ... but' factor which described the way the majority of participants believed in the principle of inclusion but believed there were barriers which stopped it being possible. I began to be more curious about the views of practitioners and how these beliefs and perceptions impacted on the experience of inclusion for children with SEND. This led to my discovery of Thornton and Underwood's (2013) Canadian research which suggested that practitioner views were directly linked to the reported practice they engaged in to support children with SEND. I felt that it was important to better understand the views that practitioners in the UK held around inclusion and SEND and how these might influence practice.

However, in working with a range of EYs settings and children through my roles as a researcher and TEP, I noticed the varied success of EYs settings in including young children with SEND. Having been an educator myself, who often felt that there was a lot of negative judgement and pressure in the profession, I wanted to be able to celebrate the good work that our educators do, rather than spotlight areas which are not working as well. Therefore, I wanted to conduct research that would amplify the voices of practitioners and recognise their successes as models for learning. I also found within my role as a TEP that EPSs did not consistently work closely with EY settings and practitioners. I hoped to work with EY settings as an EP, so was interested in understanding what EY settings needed to successfully implement inclusive practice which could be pertinent to EP practice.

## **1.6 Rationale**

The purpose of the current research is to add to the body of research into inclusion in EY education by exploring practitioner perceptions of inclusion and what inclusion looks like in practice to better understand how these perceptions and actions link together. EPs work with CYP from birth, yet the EPS in which I undertook my professional practice placement had limited involvement with EY settings. Therefore, a deeper appreciation of the facilitators and barriers to inclusive practice in the EY may also help to better understand how EPs can support settings to meet the needs of the increasing number of children with SEND in the EY.

## 1.7 Structure of Thesis

This thesis is comprised of two volumes: Volume 1 being the substantive research project and Volume 2 being a series of Professional Practice Reports. This paper is the first volume and is comprised of five chapters. The chapters and a summary of their contents is provided in Table 3.

**Table 3**

*Summary of Chapters Comprising Volume 1*

Chapter	Summary
Chapter 1 Introduction	Orientates the current research by outlining the key concepts and legislation related to SEND and inclusion in England. Initially this is discussed broadly before specifically focusing on the EY context. The local context for the research is also provided. This leads to the identification of a rationale for the study.
Chapter 2 Literature Review	Outlines the process undertaken to conduct a narrative literature review and presents the research from this review. Limitations of the research are identified leading to the specific research questions of the study.
Chapter 3 Methodology	Provides information on the philosophical position, design, methods of data collection and methods of analysis used in the study. Ethical considerations, rigour and quality of the research are also discussed.
Chapter 4 Findings	Outlines the findings from the analysis of data with reference to each research question.
Chapter 5 Discussion	Summaries the findings related to each research question before orienting the current study's findings to the existing literature including theories of IECE. Limitations of the research are identified, future implications for research and EP practice are given, followed by concluding comments.

## **CHAPTER 2: LITERATURE REVIEW**

### **2.1 Introduction**

In the previous chapter, I outlined the concepts of SEND and inclusion, prevalence, and related legislation in England, with specific reference to the EY. I went on to briefly introduce the existing literature on effective inclusion of children with SEND in English EY settings. From this it was discovered that an individual assessment and intervention, collaborative working with parents and professionals, and inclusive practitioner attitudes and beliefs are important for effective inclusion. The research also suggests that English EY practitioners do not hold fully inclusive views. Due to the impact that practitioner views can have on the interpretation and enactment of policy, this chapter will review the literature related to practitioner views and experiences of the inclusion of children with SEND in the EY, through a narrative review. Throughout the review I will be referring to the staff by their job title as stipulated in their studies respectively, for instance Early Childhood Educators etc. From the outcomes and limitations of this review, implications and the related RQs for the current study will be identified.

### **2.2 Literature Review of Practitioner Views and Experiences of the Inclusion of Children with SEND in the EY**

As the number of children with SEND in the EY continues to increase in the UK, and inclusive practice is the currently accepted approach to education for children with SEND, and practitioner attitudes towards inclusion were found to be important to successful inclusion, the current research aimed to explore practitioner

views and practice in the EY. This also included facilitators and barriers to inclusion to provide insight into how EPs could better support inclusion.

To better understand what is already known in this area, a narrative literature review was undertaken. To do this, a literature search was conducted which focused on key terms related to inclusion, SEND and the EY (see Table 4). The search focused on the views or practices of staff through the specific search terms applied (see Table 4). The databases EBSCO educational databases, Proquest Social Sciences, and PsycINFO–Ovid were searched for related literature. Papers were rejected or included based on the inclusion and exclusion criteria (see Table 5). Papers were included if published in a peer reviewed journal to ensure quality. Included papers were written in English for ease of access and so were based in countries which are English speaking (e.g. UK, Ireland, North America, or Australasia). This left 12 papers to be considered (see Appendix A for an overview of these studies). A further study was included from reading around the literature in the area, due to its relevance to the field; Bartolo et al. (2019). A narrative synthesis of the research papers is outlined in the following part of this chapter.

**Table 4**

*Search Terms for Literature Review*

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Search terms (used in various combinations)
Special Education* Need* OR SEN* OR disability
AND
Early year* OR EY* OR preschool OR pre-school OR foundation stage
AND
Inclusi* OR include*
AND
views OR perceptions OR beliefs OR attitudes
AND
experience* OR practice* OR enact*

---

**Table 5***Inclusion and Exclusion Criteria for Literature Review*

Inclusion Criteria	Exclusion Criteria
<ul style="list-style-type: none"> <li>- Published article subject to peer review,</li> <li>- Available as full text,</li> <li>- Written in English for ease of access,</li> <li>- Published within the last 20 years,</li> <li>- Qualitative or mixed methodology,</li> <li>- Related to enactment or perception of inclusive education practices,</li> <li>- Related to children with SEND up to 5 years of age,</li> <li>- Including in-service staff of EY settings,</li> <li>- Sample from UK, Ireland, North America, or Australasia.</li> </ul>	<ul style="list-style-type: none"> <li>- grey literature,</li> <li>- thesis or dissertations</li> <li>- evaluation of a specific intervention or tool,</li> <li>- focused on specific type of setting or disability,</li> <li>- non-English language texts,</li> <li>- published prior to 2002,</li> <li>- quantitative methodology,</li> <li>- including children over the age of 5 years or those without SEND,</li> <li>- including parent or child population.</li> </ul>

**2.2.1 EY Practitioners' Attitudes Towards Inclusion of Children with SEND****2.2.1.1 Understanding Inclusion**

EY practitioners do not have a consistent view of what inclusion means.

Research in Ireland used an online survey to collect the views of 194 EY practitioners related to the access and inclusion model introduced in Ireland in 2016 (Roberts & Callaghan, 2021). They found that EY practitioners have a clear understanding of what inclusion means, and that this was in-line with the Salamanca Statement (UNESCO, 1994) with practitioners understanding inclusion to mean applying adaptations to the environment to meet children with SEND needs so that they are actively involved (Roberts & Callaghan, 2021). However, a study of four early childhood educators in Canada found, through iterative cycles of interviews, that the

educators views of disability and inclusion were split along individual based or socially moderated lines (Thornton & Underwood, 2013). The individual based views related to within-child deficit models of disability (i.e. the medical model of disability), whilst the socially moderated view related to beliefs that a child's needs could be diminished by changing their environment (i.e. the social model of disability).

### **2.2.1.2 Positive Perceptions of Inclusion**

Despite these differences, views held by EY practitioners regarding inclusion of children with SEND were generally positive (e.g. Bryant, 2018; Hamilton & Vermeren, 2016). Practitioners believed that inclusion has potential to benefit the development of children with disabilities (Mitchell & Hegde, 2007). Anderson and Lindeman (2017) surveyed and interviewed 16 paired general and special prekindergarten teachers in eight integrated classrooms, and found that in this environment (where children with a disability were educated alongside their 'typically developing' peers) participants believed that all children benefitted through the development or experience of acceptance and that children with disabilities were able to learn skills from peer role models. However, this integrated classroom model with both general and special education teachers working together in one class is not a common model and so further evidence is important to identify if it is a generally held belief. For example, in Leatherman (2007), 8 early childhood teachers were interviewed about their perceptions of inclusion from a convenience and purposeful sample of teachers known to the researchers through their prior association with the university who self-reported successful inclusive educational practice. Through thematic analysis of participants' interview transcripts, Leatherman identified that the

teachers viewed inclusive classrooms as a good place for children as they felt that inclusion led to learning for all children and learning opportunities for adults (2007). The participants also talked about non-academic benefits including children with SEND not being separated out as different from their peers (Leatherman, 2007). Further benefits were identified by educators in Thornton and Underwood's (2013) study who perceived inclusive classrooms to have social benefits for children with disabilities.

However, it should be noted that many of the studies above included purposeful or volunteer sampling (e.g. Leatherman, 2007) and these EY practitioners may be biased towards an interest or positivity regarding inclusion given that they have been identified as coming from successful inclusive settings, or volunteered to take part in research specifically related to inclusion.

### **2.2.1.3 The 'Yes ... But' Factor**

However, there are some concerns held by EY practitioners related to inclusive education. A questionnaire study of 27 New Zealand teachers from kindergartens and early childhood centres found that although teachers saw inclusivity as beneficial to children's learning and integration to society, the participants viewed the inclusion of children with more severe needs as impractical leading to negative impacts for other children (Hamilton & Vermeren, 2016). This same shift in the practitioners' perception of inclusion found in a study of preschool teachers in the USA (Mitchell & Hegde, 2007). They surveyed 35 preschool teachers and saw the same positive beliefs overall which shifted when considering children with more significant needs to a belief that children would disrupt the learning of their



peers and that the participants would not be able to meet the children's needs (Hamilton & Vermeren, 2016; Mitchell & Hegde, 2007). Both Mitchell and Hegde (2007) and Hamilton and Vermeren (2016) used relatively small samples and conducted their studies outside of England, so their findings may not be generalisable to the English context. However, similar findings were seen in an Irish questionnaire study of a larger sample ( $n=193$ ) of EY practitioners (Roberts & Callaghan, 2021). This view also appeared to be shared by setting leaders, as a Canadian study of 354 interviews with day care directors found that the majority would not enrol children at their setting because of the child's disabilities (Killoran et al., 2007).

One of the studies identified in this review explored practitioner perceptions of inclusion in an English context (Clough & Nutbrown, 2004). Their study of 94 preschool educators from across the UK found that the majority of participants held positive views of inclusion in principle, but in reality, there were conditions related to their view of its appropriateness for some children. This included adult to child ratios, severity of the child's needs and the impact of their inclusion on other children. Clough and Nutbrown (2004) coined the term 'the yes... but factor' to encapsulate this perception. Whilst it appears to align with the research outlined above, Clough and Nutbrown's (2004) research was conducted nearly 20 years ago and the establishment of an inclusive agenda in English EY settings has moved on through legislation such as the CFA (2014) and the researcher's themselves stated that "there is still much to learn about the ways in which various policies of UK countries are realised in practice and how practitioners' views are embodied in their setting-based work" (Clough & Nutbrown, 2004, p.208). Therefore, EY practitioner attitudes

in England may have changed over the last two decades and more research is needed to understand how practitioner views and practice relate.

#### **2.2.1.4 The Impact of Experience**

There is evidence that practitioner views on inclusion are impacted by their experiences both professionally and through their education. For example, early childhood teachers' positive views of inclusion were found to be fostered by their successful experiences of inclusion through their own practice and from the ethos of the setting (Leatherman, 2007; Leatherman & Niemeyer, 2005). Leatherman and Niemeyer (2005) interviewed and observed four early childhood teachers in the USA and found that their practical experience in work or training helped to shape their view of inclusion. For example, positive social interactions between the teacher and child with a disability (Leatherman & Niemeyer, 2005). Furthermore, EY practitioners with advanced training and qualifications in special education (e.g. post-graduate level) felt their training was effective in preparing them for teaching children with learning disabilities leading to positive views of inclusion (Clough & Nutbrown, 2004). However, findings related to this correlation are inconsistent across studies. For example, education level was not found to impact on beliefs about inclusion in Mitchell and Hegde's (2007) study, and in Thornton and Underwood's (2013) research those with higher levels of education actually held more individualised views of disability which did not align with the social basis for inclusive practices.

## **2.2.2 Perceived Facilitators of Effective Inclusion of Children with SEND in the EY**

Positive views of inclusion were not the sole facilitator of the successful inclusion of children with SEND in the EY, and literature regarding EY practitioners' views on inclusion suggest that it is also helped through:

- collaborative working
- understanding of a child's needs to tailor a programme of support
- and resources

These factors are discussed below.

### **2.2.2.1 Collaborative Working**

A commonly identified facilitator of inclusion was being able to work in collaboration with others. For instance, participants specifically reflected on the benefit of practitioners facilitating parental involvement (Clough & Nutbrown, 2004; Leatherman & Niemeyer, 2005). EY practitioners were also supported to facilitate inclusion through working with other professionals, from both inside and outside their setting (e.g. Roberts & Callaghan, 2021). Across studies, participants mentioned how the practice of working together helped to establish a shared understanding and goal for supporting the child with SEND (Hamilton & Vermeren, 2016), allowed them to share knowledge and learn from each other (Anderson & Lindeman, 2017; Leatherman, 2007) and enabled them to receive moral support (Leatherman, 2007). The Canadian study of over 300 preschool directors (Killoran et al., 2007) also found that the preschools which were more inclusive had greater links with visiting professional services. As this was a qualitative study, no causation can be

established in this relationship and Killoran et al. (2007) defined inclusive settings as those with SEN care integrated to their setting, which means it is unclear if these settings are actually more inclusive than the other settings. However, the findings suggest that such involvements with visiting services at least support integration.

Mccormick et al. (2003) found that professional collaboration supports inclusive practice through an illustrative case study example of four practitioners around a four-year-old boy with Down's syndrome. They focused on specific practices in a participating EY setting including individual education plans and the 'ecological planning matrix' (Mccormick et al., 2003), which was designed to identify the child's needs and how to support them. This matrix was completed by parents and professionals (both from within and outside of the setting). Such collaborative planning was advocated as a way of identifying where and how adaptations should be made to the environment to support inclusion and skill development for a child (Mccormick et al., 2003). However, Mccormick et al.'s (2003) paper outlined the ecological planning matrix with a single case study example and the paper offered no consideration of the strengths or limitations of the approach. One such limitation may be that the feasibility of the approach was not explored; such as the implications for resources such as time, access to services/professionals and capacity of staff.

#### **2.2.2.2 Understanding a Child's Needs and Tailoring Support**

Using assessment and identifying how to support children with SEND, was also perceived by EY practitioners as a facilitator of inclusion. A number of papers focused on the need to understand the individual child and plan for their needs (Roberts & Callaghan, 2021) as well as adapt the environment to allow access and

participation for all children (Leatherman & Niemeyer, 2005). This is based on the premise held by the teachers that all children should be involved in the full range of classroom experiences, and that the teachers need to treat children individually and provide learning opportunities which are linked to a child's specific needs or interests (Leatherman & Niemeyer, 2005). This aligns with the warning in some research against the idea that individualised education is provided through 1:1 adult support alone but that what adults do should also be considered (McCormick et al., 2003).

Johora (2021) collected observation, interview and document data over eight months to conduct a case study of three educators' perspectives and practice related to a four-year-old with SEN in Australia. Their research highlighted the need for practitioners "to enter into the child's developmental trajectories and support his further development" (Johora, 2021, p.12) by finding alternative strategies or different conditions to enable participation and learning. This was coined the 'pedagogical password' (Johora, 2021). Processes have been developed to aid this approach, which are based on identifying how the environmental supports can be adapted to meet an individual child's development needs through routine opportunities within the setting (e.g. McCormick et al., 2003). McCormick et al.'s (2003) case study, outlined a process account of this type of strategic planning for inclusion which included:

- identifying the expectations for all children,
- assessing the child's current development by including parent views alongside practitioners,
- mapping individual goals onto the universal expectations,

- identifying adaptations (including with the support of external professionals) and supporting where required to bridge the gap between the child's development and the expectations and allow full participation,
- Monitoring the child's response to these interventions to feed into cycles of assessment and planning.

### **2.2.2.3 Resources**

Additional resources were identified by practitioners as facilitators of inclusive practice. For instance, having enough staff to enable smaller child to adult ratios to be in place (Roberts and Callaghan, 2021) and for staff to have time to work with children with disabilities and the specialist professionals supporting them (Mitchell & Hegde, 2007). Linked to the facilitator 'collaboration' participants also felt it was helpful when such specialists were available to visit on a weekly basis (Mitchell & Hegde, 2007). Personnel resources were also identified as a resource by teachers in Leatherman and Niemeyer's (2005) study. Participants talked about having help to solve problems by using specialists such as speech therapists who were available in the setting, as well as other teachers. Training as a resource was also viewed as improving teaching, the classroom environment and teacher comfort in applying inclusive practices (Bryant, 2018). To address the limited availability of training and support, some EY practitioners pursued professional development through their own research (Leatherman, 2007).

### **2.2.3 Perceived Barriers to Effective Inclusion of Children with SEND in the EY**

Across the studies reviewed, EY practitioners perceived the main barriers to inclusion to be related to:

- the needs of the child
- limited resources
- training
- and a lack of a shared understanding amongst the team around a child

#### **2.2.3.1 Needs of the Child**

The needs of the children with SEND, was of particular importance to EY practitioners' views on barriers to inclusion. Student behaviour was reported as the greatest challenge for pre-kindergarten teachers in the USA (Anderson & Lindeman, 2017). This is supported by Clough and Nutbrown's (2004) UK study in which preschool educators identified emotional and behaviour difficulties (now referred to as SEMH) as the most challenging area of SEND to support (alongside Autistic Spectrum Disorder and multiple and physical learning difficulties). The severity of the child's needs (Clough & Nutbrown, 2004) and uniqueness of needs (Roberts & Callaghan, 2021) in particular linked to practitioners' beliefs that not all children's needs can be met in an inclusive mainstream setting (Clough & Nutbrown, 2004; Killoran et al., 2007; Roberts & Callaghan, 2021).

#### **2.2.3.2 Limited Resources**

Indicating their importance to inclusive practice, resources were not only a facilitator of inclusive practice but perceived as a key barrier to inclusion. Linking to

the view that inclusion was a positive idea but had limits in practice (e.g. Clough & Nutbrown, 2004) the feasibility of implementation was a concern for practitioners (Hamilton & Vermeren, 2016). Resources such as equitable funding, time to carry out the practices, staff retention, maintaining lower adult to child ratios, and lack of physical resources were highlighted as difficulties to bringing about inclusion for children with SEND (Clough & Nutbrown, 2004; Hamilton & Vermeren, 2016; Mitchell & Hegde, 2007). In addition, external support through services or specialists, provided in a timely manner, was identified as a barrier to the effective inclusion of children with SEND, as practitioners reflected that it could take a long time from referral to receiving support (Mitchell & Hegde, 2007; Hamilton & Vermeren, 2016). Support through resources was highlighted as a perceived facilitator of inclusion, and so these barriers highlight the impact that is felt by practitioners when the facilitator is not present.

However, studies of inclusion are not consistent in how 'inclusion' is measured or conceptualised. In Mitchell and Hegde (2007) inclusive settings were identified by the integration (i.e. the physical enrolment and presence of a child with SEND in a setting rather than the full participation of the child) of at least one child with a disability in the setting. This means that the findings may not be indicative of practitioner views in an inclusive EY setting, but rather an integrative one, which is more about the location of children rather than their participation in the setting. It can reasonably be expected, given this difference, that practitioners' practices, experiences, and reflections may not be consistent between integrative and inclusive settings. Therefore, it is important for research which purports to be studying inclusive practice, to ensure that inclusion, and not integration, is the phenomena under study.



### **2.2.3.3 Training**

Another common resource barrier identified by EY practitioners is the quality of and access to training. The practitioners' experience of training included limited time specifically on SEND and inclusion, so training happened on the job (Leatherman, 2007). Whilst this was a small study of only eight practitioners in the USA, there is evidence to support this issue across other countries. For instance, Roberts and Callaghan (2021) found there was limited availability for continued professional development in Ireland across their study of 194 EY practitioners. Furthermore, in the UK, when training had occurred, it was not viewed as effective in preparing the practitioners to teach children with SEND - except when a postgraduate qualification in the area was obtained (Clough & Nutbrown, 2004). Further literature highlights the need for additional training, including practical learning opportunities, to address the challenges and realise the benefits of inclusion (Anderson & Lindeman, 2017; Mitchell & Hegde, 2007). An interpretive phenomenological analysis of open ended interviews with eight preschool teachers in the USA found that received training had been of inconsistent quality and the teachers felt they needed formal, ongoing, and on-the-job training/support, including visits to settings and consultations with specialists (Bryant, 2018). Such professional development opportunities were believed to develop:

- teaching skills,
- the classroom environment,
- and teachers comfort in enacting inclusive practices (Bryant, 2018).

#### **2.2.3.4 Lack of Shared Understanding**

Differing views about children with SEND, including specific children's needs and how to support them, were also identified by EY practitioners as a barrier to inclusion. In the USA, some settings had a blended model where both a teacher of SEND and a mainstream teacher worked together in an integrated setting with special needs classes (Anderson & Lindeman, 2017). However, this led to a split in perceived responsibility for children with SEND and a false dichotomy which the practitioners felt needed to be addressed. As this was a specific model of integration, and this barrier was not raised by practitioners in other studies it is unclear if this was specific to the sample in Anderson & Lindeman's (2017) study. A more common tension was identified when staff felt at odds with other stakeholders, such as differing views of a child's needs between parents and staff (Hamilton & Vermeren, 2016; Johora, 2021), feeling parents were not supporting children at home (Clough & Nutbrown, 2004), or professionals having perceived unrealistic expectations for children with SEND (Roberts & Callaghan, 2021). This barrier reflects the other side of collaboration, including working together and achieving a shared understanding, which was identified as a facilitator of inclusion.

#### ***2.2.4 Linking EY Practitioners' Views of, and Enactment of, Inclusion of Children with SEND***

EY practitioner views on inclusion are important as evidence suggests that these views impact inclusive education practices. For instance, practitioners' positive views regarding inclusion were linked to self-reported effectiveness and comfort with inclusive practices (Bryant, 2018). Bryant (2018) proposed a model to develop

inclusive practices through positive practitioner attitudes and suggested, from the findings of their research, that EY practitioners required professional respect, adequate training and transition plans for students with SEND for this attitude to be nurtured. Furthermore, early childhood teachers reported that the more positive experiences they had of inclusion the more they felt that inclusion was possible, whereas ineffective experiences of inclusion shifted the teachers' views of inclusion overall (Leatherman, 2007).

Beliefs about disability were also linked to views about inclusion in Thornton & Underwood's (2013) Canadian study of early childhood educators. They explored this link in more detail through iterative interviews with participants and found that the practitioners who viewed disability through an individual lens believed that inclusion involved minimising differences, were focused on academic goals, and thought inclusion may not be appropriate for all children (which they referred to as pathognomonic beliefs). On the other hand, the practitioners with a social view of disability viewed inclusion as a responsibility they had to change peoples' perspectives, adapt environments, and reflect on their practice to ensure they met the individual child's needs (which they referred to as interventionist beliefs).

Conversely, in a recent survey study in Ireland, despite conceptualising inclusion as the need to adapt the environment to meet the needs of children with SEND, less than a quarter of the EY practitioners reported doing this in practice (Roberts & Callaghan, 2021). In this instance, practitioner views about inclusion aligned with the policies of an Access and Inclusion Model introduced to Ireland in 2016, but the difference in reported practice did not align with the policy. Similarly, the policy in New Zealand around inclusion was perceived to link to practice by many

participants, but for those with concerns over enacting inclusive practice, the policy did not provide enough clarity to guide their practice effectively (Hamilton & Vermeren, 2016). It should be noted as a limitation that all these studies used self-reports of inclusive educational practices through interviews and questionnaires and did not use any objective measure of inclusive practice.

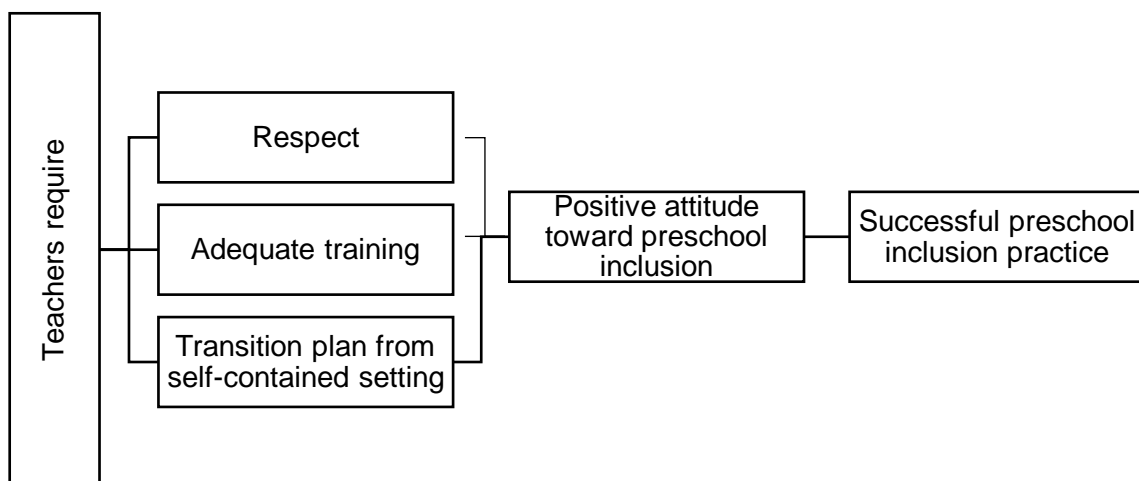
Studies which used observation data alongside interviews or questionnaires have supported the link between practitioner views and practice. For example, in a single case study of a 4-year-old child's experience in an Australian preschool, educators' assumptions about the child's needs led to lower expectations of the child compared to their peers (Johora, 2021). The research proposed that these reduced expectations led to negative experiences for the child through unintentional exclusion caused by not utilising opportunities to support their needs by drawing on their strengths and environmental supports (Johora, 2021). Whilst this study gave in-depth information regarding interactions, it was a single case study and therefore constrains any opportunity for generalisation. However, in support of these findings, another small scale study which looked at the inclusive views and practices of four early education teachers through interviews and observations, found that the teachers' positive attitudes towards inclusion supported the successful inclusion of all children (Leatherman & Niemeyer, 2005). Due to the limited evidence which draws together both espoused views and observed practices of EY practitioners, further research is advisable.

### 2.2.5 Theories of Inclusion in the EYs

From the literature surrounding practitioner views of inclusion in EYs education, researchers have proposed theories of IECE. One such theory is the model of best practice for preschool inclusion (Bryant, 2018). This model was developed from the study of the experiences and perspectives of eight preschool teachers in the USA. The researcher interviewed the participants and used this data to identify common themes through interpretive phenomenological analysis which were then interpreted into a model of best practice for inclusion in preschools (see Figure 7).

**Figure 7**

*Model of Best Practice for Preschool Inclusion (adapted from Bryant, 2018, p.7)*



This model suggests that teachers need three components to enable a positive attitude towards preschool inclusion to develop:

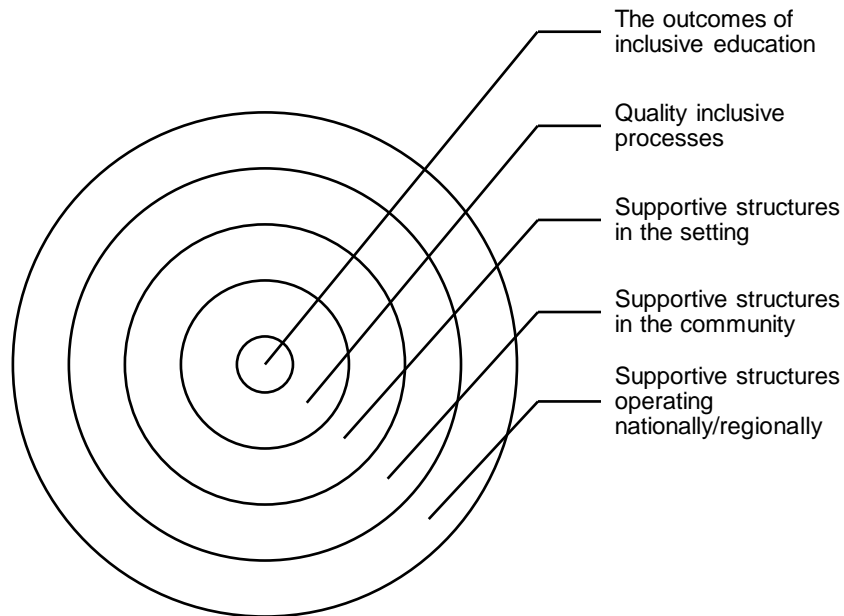
- Respect: from understanding of the preschool curriculum and recognition of the role of preschool teachers by stakeholders.
- Adequate training: to ensure effective teaching and a positive learning environment for academic and social skills.
- Transition plan from self-contained setting: so that suitability for inclusive preschool education can be identified from effective transition plans.

As this model focuses on what teachers need to lead to successful preschool inclusion practices, it is a strength of the model that it is founded in research which was based on their views and experiences. However, the study which led to the framework's development was a small sample of teachers within one district in the USA. Also there were generally homogeneous responses from participants in the data (Bryant, 2018). Therefore, the model has limited generalisability to the wider IECE teacher and practitioner population.

An alternative theory of IECE is the adapted ecosystem model for IECE (Bartolo et al., 2019) (see Figure 8). This model was developed from research which collected and thematically analysed observation and interview data from eight IECE settings across countries in Europe that were identified as the best examples of IECE from 32 proposed settings. The adapted ecosystem model for IECE identified 25 themes from the data which were organised into five dimensions based on an ecological systems theory (Bronfenbrenner, 1979) approach.

## Figure 8

*Adapted Ecosystem Model for IECE (adapted from Bartolo et al., 2019)*



Bartolo et al. (2019) described these dimensions as:

1. The outcomes of inclusive education: child belonging, engagement, and learning.
2. Quality inclusive processes: social interaction, involvement in daily activities/routines, child-centred approaches, individualised assessment, and support.
3. Supportive structures in the setting: welcoming children and families, accessible environment, well-rounded curriculum, qualified staff, cultural responsiveness, shared leadership, collaboration.

4. Supportive structures in the community: links with family, relevant in-service training, community commitment, inter-disciplinary co-operation, smooth transitions.
5. Supportive structures operating nationally/regionally: entitlement and access to mainstream early childhood education, rights-based approach, national curriculum and standards, monitoring and evaluation systems, research on IECE, good governance and funding, initial teacher and support staff training specific to IECE.

The model is a tool by which quality IECE can be identified and planned for by evaluating existing practice and identifying ways forward. As it draws together the child, setting, family, community and regional/national structures, a strength of the model is the way it encourages a holistic and participatory approach to this evaluation (Bartolo et al., 2019). It is also based on a larger sample than Bryant's (2018) model; from across countries and stakeholders within the participant group. This means the model offers more rigorous evidence for a generalisable theory of IECE. However, there are aspects of the model which the researchers identify need further investigation to understand, including the point of view of policy makers and the interaction of child level factors with the systems (Bartolo et al., 2019).

### **2.2.6 Summary**

As outlined from this literature review, EY practitioners perceive there to be several factors which are important to enable successful inclusion of children with SEND in the EY. EY practitioners seem to have positive views of inclusion of children with SEND in mainstream settings (e.g. Bryant, 2018), which is supported by having



positive experiences of including children with SEN in mainstream settings (e.g. Leatherman, 2007). This is important because practitioner views of inclusion appear to impact self-reported practice (Thornton & Underwood, 2013), although positive attitudes do not necessarily lead to enacted inclusive practice (Roberts & Callaghan, 2021). In addition to this, aspects of successful inclusion were perceived to relate to collaboration and shared understanding between professionals, and between professionals and families (e.g. Hamilton & Vermeren, 2016); access to effective and ongoing training and support (e.g. Clough & Nutbrown, 2004); understanding of individual child's needs and how to support them (e.g. Leatherman & Niemeier, 2005); and human, financial and physical resources (e.g. Mitchell & Hegde, 2007).

Theories of inclusive practice in the EYs have used the perceptions of practitioners, alongside other stakeholders, to identify the key components of effective inclusion. Such models have included aspects found in the literature around the barriers and facilitators; such as quality training in Bryant's (2018) model of best practice for preschool inclusion. In the case of the adapted ecosystems theory of IECE, this model also develops the thinking around these barriers and facilitators beyond the macro system of the setting and into the wider community and national systems. This is important as these system levels also influence the direct experience of barriers and facilitators to enacting inclusive practice, for example through funding for resources and capacity within external services.

However, there are several limitations to the current literature which suggest that further study is required in the area of EY inclusion. In particular, the literature typically involves studies which purport to focus on inclusion but actually use integration as the measure of inclusion (e.g. Anderson & Lindeman, 2017) or self-

reported inclusion (e.g. Leatherman and Niemeyer, 2005). This means that the findings may relate more to integration of children with SEND into EY settings and offer limited insights into truly inclusive EY settings. Furthermore, research suggests a link between attitudes and practice (e.g. Thornton & Underwood, 2013) but few studies included data to explore this link beyond self-reports of practice, which are open to bias. Some researchers acknowledge this limitation and call for further research which uses observations of practice alongside reported practice to explore this link further (e.g. Thornton & Underwood, 2013). In addition, the theories of IECE developed in recent years have had little critical application to further research to provide evidence to support or hone these models. Lastly, limited research has been published related to the English context specifically, and that which has been published was conducted nearly 20 years ago (e.g. Clough & Nutbrown, 2004). Due to the changes in many areas of English legislation in the last 20 years, including the Equality Act (2010), SEND CoP (DfE & DoH, 2015) and CFA (2014), an understanding of EY inclusion within the current English legislative context is missing from the body of literature in the area.

### **2.3 Research Questions (RQs)**

Due to the identified limitations of the literature base, the focus of this study is to explore the realities of good inclusive practice (which, for the purposes of this study, is defined as EY settings that demonstrate the principles of inclusion as defined by Booth and Ainscow [2002, p.3] of “increasing the participation of students in, and reducing their exclusion from, the cultures, curricula and communities of local schools”) in English EY settings, by investigating both espoused and enacted

inclusion of children with SEND. The findings of this study address the theories provided in the current models of IECE with an aim to identify implications from the findings for theory from the current research. Therefore, the research purpose is driven by the gaps in the current literature: to update the UK context research on practitioner views of SEND and inclusion, draw together practitioner views and practice, and explain the facilitators and barriers of IECE rather than integrative education. There is a top-down purpose to the research (Yin 2018), as the aims also include identifying whether the current theories of IECE are manifest in the research findings. IECE is a complex phenomenon, so, as the adapted ecosystems model of IECE (Bartolo et al., 2019) is a more holistic view which takes account of the wider systems around the inclusive practice within a setting, this model was selected as the most likely to relate to the findings of the current study.

Due to the availability of free childcare hours over the age of three years and the difficulties in identifying SEND below the age of 2 or 3 years, the preschool year of EY was identified as a focus as this gave the most opportunity to explore inclusion for children with SEND within the scope of the study. The study will also aim to explore an inclusive (rather than integrative) preschool setting in England to update and better understand the barriers and facilitators of inclusive practice within English EY settings, following the publication of current SEND legislation. Therefore, the research was carried out in a preschool that was considered by colleagues to be a good example of an inclusive setting within the LA (this will be discussed in more depth in Chapter 3: Methodology).

The following RQs were designed to meet the study aims outlined above:

- RQ1: What views of inclusion and SEND do EY practitioners hold in an inclusive English preschool?
- RQ2: What are the perceived barriers and facilitators of effective inclusive practice for children with SEND in an inclusive English preschool?
- RQ3: How do EY practitioners' views of SEND and inclusion relate to the inclusive practices of an inclusive English preschool?

## CHAPTER 3: METHODOLOGY

### 3.1 Introduction

This chapter will outline the philosophical position of the research and the research design, methodology and analysis which was developed to answer the identified RQs (Section 2.3). An overview of this can be seen in Table 6. The chapter will go on to describe the sample and will end with a consideration of the management of ethical concerns and the quality and rigour of the research.

**Table 6**

*Summary of Research Framework*

Aspect of research framework	Summary of current research
Philosophical Position	<ul style="list-style-type: none"><li>• Critical Realism</li></ul>
Ontological Position	<ul style="list-style-type: none"><li>• Realist</li></ul>
Epistemological Position	<ul style="list-style-type: none"><li>• Interpretivist</li></ul>
Research Design	<ul style="list-style-type: none"><li>• Single Case Study</li><li>• Mixed methods</li></ul>
Research Methods	<ul style="list-style-type: none"><li>• Qualitative methods</li><li>• Quantitative methods</li></ul>
Data Collection	<ul style="list-style-type: none"><li>• Inclusive Classroom Profile (Soukakou, 2016)</li><li>• Researcher developed semi-structured interview schedule</li><li>• Document analysis</li></ul>
Analysis Approaches	<ul style="list-style-type: none"><li>• Reflexive Thematic Analysis</li><li>• Descriptive Statistics</li></ul>
Sample	<ul style="list-style-type: none"><li>• One good practice inclusive preschool</li><li>• Four EY practitioners</li></ul>

## **3.2 Research Philosophy**

The overarching philosophical paradigm of this research is critical realism (CR). The ontological and epistemological stance of CR is discussed in more detail below including how this impacts the research framework.

### **3.2.1 Ontological Position**

Ontology in research helps to establish the philosophical assumptions of how our reality is created (Searle, 2008) or “the theory of the nature of reality” (Delanty & Strydom, 2003, p.6). Typically, ontology is considered from two opposing positions regarding the nature of reality: realism and relativism (Robson & McCartan, 2016). CR constructs reality as existing independent of our views about it (Sayer, 1999) and therefore has a realist ontology. In CR this means that the objects of study are separate from the theories about them and that the social and physical world should not be confused with our experience of it (Sayer, 1999). However, CR moves beyond realism as merely the structures and processes which can be experienced and observed (the empirical), to include structures and processes which have occurred (the actual) and that may possibly occur (the real) (Sayer, 1999). In addition to this, CR identifies the causal power of these structures by proposing that conditions, or causes, act upon such structures and processes to produce effects, or outcomes, in the world (Booker, 2021; Sayer, 1999). In psychology specifically, it is suggested that there are both efficient causes (i.e. the cognitive processes) and material causes (i.e. the social and cultural structures) which are ontologically ‘real’ and lead to agency and so action in an individual (Booker, 2021).

### **3.2.2 Epistemological Position**

Epistemology in research helps to further define the philosophical position of the research as it pertains to the theory of knowledge (Hollis, 1994). The epistemological position often follows directly from the ontological position with realism linked to positivism and therefore objective, measurable, value-free knowledge researched through experiments (Rosenberg, 2012). However, CR does not follow this linear pattern and whilst the ontological position is realist, the epistemological position is interpretivist, although it allows for causal explanations not typical of interpretive positions (Sayer, 1999). This means that in CR knowledge is viewed as inseparable from its context (McChesney & Aldridge, 2019), including the perceptions of people (Sayer, 1999).

### **3.2.3 Rationale for Critical Realism**

CR fits with my philosophical worldview that there are some objectively real concepts and structures in the world but that our understanding of these is influenced by the environment and our own experiences, bias, and values, and that concepts and structures are influenced by their environments. This extends to the influence I will have as a researcher and a CR lens can “sharpen our insights into the influences” (May, 2011, p.51) such as bias and fallibility. CR also marries well to the RQs of the current research. The RQs are contextually focused as they are interested in the mechanisms which support inclusive practice for children with SEND in preschools. CR allows the phenomena of inclusion to be studied, with an understanding that the context will be as important as the outcome of inclusive

practice itself. The literature, outlined in Chapter 2, also suggests that perceptions of practitioners are an important condition which acts upon or is part of the mechanisms which lead to inclusive practice. CR embraces this whilst allowing the phenomena of inclusive practice to be viewed as a social process which is real.

### **3.3 Research Design**

#### **3.3.1 Case Study Design**

A case study design was chosen for this research as case studies develop a deep understanding of a particular subject or case (Stake, 1995). There are several kinds of case studies but in this research, the approach of Yin (2018) was used. Yin (2018) proposes that the goal of case studies is “to expand and generalise themes (analytic generalisations)” (p.20) and so aligns with the RQs drawn from the current literature in the area which aim to explain how inclusion is brought about in a particular setting to identify how closely this aligns with current understanding of IECE through existing theories. Therefore, in the current research, based on the RQs identified in Section 2.3, an explanatory, single snapshot case study was employed which is further explained in Figure 9.

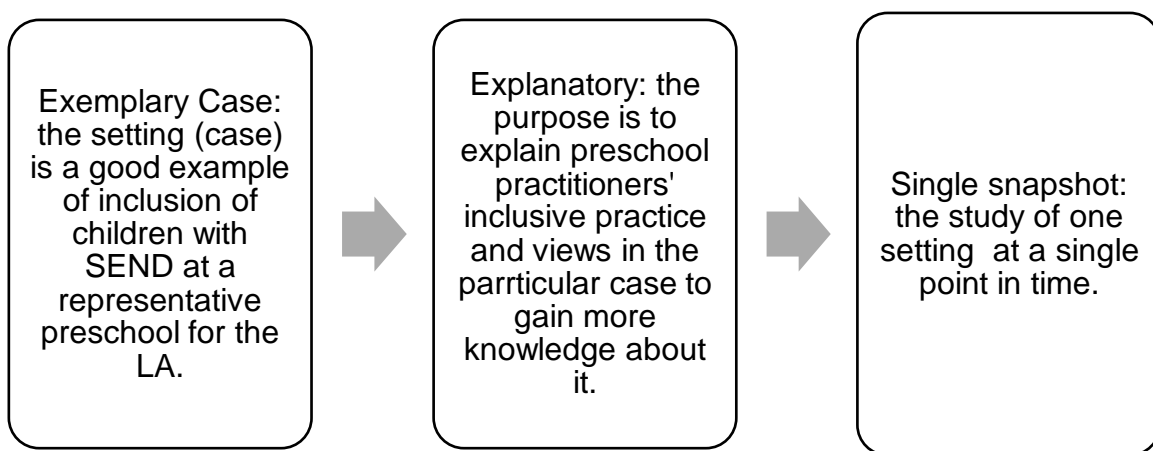
Case studies have been criticised by authors for a lack of validity to their findings (Andrade, 2009), subjectivity (Stake, 1995), and a lack of scientific rigour and impact (Gorard, 2013). However, these criticisms tend to be rooted in a positivist view of research which is incompatible with the CR paradigm of this research and can be challenged by following approaches to ensure quality in case study research. Such quality tests will be discussed in Section 3.8. Authors writing specifically about



case study research argue that a case study is as legitimate a scientific research design as other approaches (Thomas, 2016).

### Figure 9

*Type of Case Study Design for Current Research*



### 3.3.2 Mixed Methods Design

Within the case study design, mixed methods were also employed as a design framework. Mixed methods research was developed to analyse complex problems (Creswell & Clark, 2018) which makes it useful for research into complex phenomena such as inclusion. Mixed methods include both qualitative and quantitative research methods and this follows the logic of enquiry when taking a CR stance, which marries both realist and interpretivist positions (Creswell & Clark, 2018). CR also identifies the importance of a breadth of data sources due to the complexity of social systems (Sayer, 1999), which mixed methods can provide. Furthermore, this aligns with the

case study design where depth of knowledge is required and developed through multiple data sources without a preference for methodological approaches (Thomas, 2016). However, convergent mixed methods can be challenging to apply as differing samples, purposes of methods, types of data sets, and possible contradictions across data sets lead to difficulties in interpreting the data (Creswell & Clark, 2018). In this research, the advantages of mixed methods were believed to be greater than these limitations.

### ***3.3.3 Rationale for a Case Study and Mixed Methods***

A CR perspective supports the choice of a range of research designs and methodology dependent on the object and aims of the research (Sayer, 1999). The RQs developed from the literature, focus on understanding the phenomena of inclusive educational practice for children with SEND in preschools. The aim is to then consider how these findings relate to the current theories in the field such as that proposed by Bartolo et al. (2019). Therefore, the research purpose is to explain the mechanisms or structures, and the context which leads to inclusive practice in the example setting so that this can be compared to current literature including theoretical models. Case studies are well suited to this endeavour as they aim to understand the details of what is happening (Thomas, 2016) in a “real world phenomenon that has some concrete manifestation” (Yin, 2018, p.31). They reveal novelty (May, 2011) and offer a chance to develop understanding of particular cases (Stake, 1995) by linking knowledge to people and their contexts (Schwartz-Shea & Yanow, 2012). This knowledge can then be used to illuminate theoretical ideas through analytic generalisation which can identify new concepts that alter or reject

theories, as well as validate the ideas (Yin, 2018). This is particularly relevant to the current research aims.

To do this, case studies work on developing a ‘thick description’ (Geertz, 1973) of context so that explanatory theories and applicability to other contexts can be developed (Schwartz-Shea & Yanow, 2012). A “major strength of case study data collection is the opportunity to use many different sources of evidence” (Stake, 1995, p.126). Therefore, multiple data sources and methods, using a mixed methods design, can help to create this thick description and provide a strong evidence base (Yin, 2018). In the current research this helps to answer the identified RQs, as different methods are more appropriate to collecting data to answer aspects of the RQs related to practitioner views and practitioner practice. This also aligns with CR, as the collection of multiple data sources is encouraged to gain knowledge of the phenomena (Sayer, 1999).

### **3.4 Case Selection**

In an interpretivist epistemology, choosing cases for study is a selection process rather than sampling as the cases are not representative of a wider population (Yin, 2018). The selection of the case for this study is outlined below.

#### **3.4.1 *The Exemplary Case***

An exemplary case was chosen in this research, as the RQs were concerned with a good practice case of inclusion which captured this phenomenon in an everyday context in an English LA. To do this, LA EPs and EY advisory teachers were asked to recommend settings to me that were considered to be good examples

of a preschool engaging in inclusive practice. Colleagues were given a set of inclusion criteria, which included them having worked with the setting for at least a year (so that they had time to form a rounded understanding of their practice). See Table 7 for inclusion criteria. Following this, no settings were identified by the EP team in the LA as no members of staff had worked with an EY setting for over a year. A senior EY advisory teacher, who had extensive experience of EY setting in the LA, did respond to me as being able to help with recruitment. Following a discussion about the inclusion criteria, they identified two EY settings which they felt met the inclusion criteria. However, as one of the settings had recently undergone a change of senior staff, they felt this may have had an impact on the practices of the setting, so the advisor felt more confident recommending one of the settings, referred to here by the pseudonym Apple's Preschool, as meeting the criteria for inclusive practice. Apple's Preschool was then approached to participate in the research.

This selection approach enabled me to recruit a setting which had been judged as a good example of inclusive practice by an experienced professional in the field of EY education, who had ongoing involvements with a range of EY settings within the LA. This was important to the rationale of the study as I aimed to be able to study the phenomena of inclusion rather than integration. However, as only one professional replied to my correspondence to say they could support recruitment, in practice this selection approach relied on the judgement of this sole professional making it prone to subjectivity and limited reliability: I cannot be sure that another professional would have made the same judgement that this setting showed inclusive practice which met the inclusion criteria definition. There are also possibilities that

other suitable settings were not identified as the EY advisory teacher may not have had the required one year's experience with all EY settings in the area.

Therefore, the case selection was a purposeful process. This is suitable for key case studies, as cases and data sources are selected to provide rich information about the phenomenon under study (Schwartz-Shea & Yanow, 2012) and target a specific population who holds the knowledge the researcher wishes to access (Cohen et al., 2017). In reality, the process is also influenced by access and other practical implications such as time and money rather than simply design ideology (Cohen et al., 2017). In this research, this included the limitation of selecting a case within a specific geographical area as this may have biased the interpretation of good inclusive practice during the selection process (e.g. what is viewed as inclusion within that LA area or how good the setting is viewed as due to the comparison with other settings in the LA).

Apple's Preschool, was a term time only preschool setting providing for children aged 2 to 4 years old. Apple's Preschool also provided wrap around care for children aged 2 to 11 years, in the form of breakfast and after school provision. The preschool had two rooms which accommodated children of mixed ages. Each room accommodated up to 20 children at a time with sessions split over half days (e.g. a child attended for mornings or afternoons) in one room, and full day sessions provided in the other room. Apple's Preschool therefore had around 60 spaces available in its provision. Apple's Preschool had higher practitioner to child ratios than recommended, at one adult to three children for the 2- to 3-year-olds, and one adult to six children for the 3- to 4-year-olds. The setting used in-the-moment planning to

respond to focus children’s learning and provide opportunities which respond to the child’s strengths, interests, and development needs at the time.

**Table 7**

*Inclusion Criteria for Case and Participants*

	Inclusion Criteria	Rationale
EY setting	Engaged in practice which was ‘increasing the participation of students in, and reducing their exclusion from, the cultures, curricula and communities of local schools’ (Booth & Ainscow, 2002, p.3).	To help to identify that the phenomena of study was inclusion rather than integration.
	Around the average size of an EYFS setting within the geographical area (e.g. roughly 70 spaces for children).	To aim for the setting to be representative of the settings in the local area as a common, whilst exemplary, case.
	Preschool-age children on roll (aged 3-4 years).	To allow a focus on the preschool stage of EYs as this was identified as a stage where the inclusion of children with SEND could be more easily studied within the scope of the research. This was due to the access to EYs settings for children over the age of 3 years (who receive free childcare) and the challenges and limited identification of SEND in children below the age of 2 years.
	Known to the EP or EY advisor recommending them for at least 1 year.	To ensure that the recommendation was based on first-hand knowledge of the setting.
EY Practitioners	Aged 18 years and over.	To be able to give their own informed consent to participate.

Employed by the identified case study setting.	To ensure the participants could offer insight into the particular case being studied.
Practising Early Years practitioners supporting children with SEND aged 3-4 years.	To ensure the participants could offer insight into the particular age group being studied.
Practitioners who held an Early Years qualification to a minimum of level 2 as outlined by the DfE (2021a).	To ensure the participants were qualified EY practitioners and so able to give share their individual and particular knowledge of the case from this standpoint.

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### **3.4.2 Participants**

The participants were EY practitioners who support children with SEND. They were selected as the participant group, as they could provide the best knowledge to answer the RQs. As will be discussed in Section 3.5, one element of data collection was carrying out observations of the practitioners whilst they went about their daily practice in the setting as part of a profile of inclusive practice quality; therefore, consent was also gained from parents of the children who were being supported by the EY practitioner participants.

EY practitioners working within the setting were approached based on specific inclusion criteria (see Table 7). Participation was voluntary and four practitioners gave informed consent to be interviewed and observed. Consent procedures are discussed in more detail in Table 9 and Table 15. Some information was obtained regarding the practitioner participants to help contextualise the data (see Table 8).

Informed parental consent was also gained for the children with SEND, who attended the setting on the day of the data collection, to be observed. Although the observation was focused on the inclusive practice of the practitioner, this would

naturally involve me observing the child too; as such, consent was gained from parents. No information was gathered on the children as they were not participants. This is in line with the fact that the views and practice of practitioners was the focus of the current study's RQs, and that children were not included as participants in the studies which informed this research design (e.g. Bartolo et al., 2019; Bryant, 2018; Thornton & Underwood, 2013).

**Table 8**

*Participant Demographic Information*

	Role	Years in role	Qualifications
Ppt. A	Manager	17 years	BA Honours Level 3 SENDCo Qualification Level 3 EY professional qualification
Ppt. B	EY Practitioner Trainee	Less than one year	Level 2
Ppt. C	Deputy Room Leader	8-9 years	Level 3 equivalent diploma Level 2 understanding challenging behaviour, understanding autism and children with SEN
Ppt. D	EY practitioner	11 years	Level 2 and Level 3 EY professional qualifications

**3.5 Research Methods**

This research employed qualitative and quantitative methods of data collection through mixed methods design. The specific methods and tools for data collection will be outlined in more detail in this section.



### **3.5.1 Data Collection Methods**

Three research methods were selected to explore the RQs through both qualitative and quantitative methods. The data collection had three approaches:

1. Document analysis of key documents (e.g. policies) from the setting regarding inclusion and SEND.
2. Profiled the quality of inclusive practices in the preschool using the Inclusive Classroom Profile (ICP) (Soukakou, 2016) which collected data through researcher observation, review of documents and interview of practitioners.
3. Researcher developed semi-structured interviews of participants.

These methods were employed in parallel, as a convergent design, so that the qualitative and quantitative data were collected alongside each other (see the research procedure in Table 9).

**Table 9***An Overview of the Research Procedure and Corresponding Activities*

No.	Research activity	Comment
1	Development of research proposal	Development of initial research interests, scoping of literature and development of research proposal.
2	Presentation of the research proposal to a research panel	Presentation of research proposal to research panel including other students from the Applied Educational and Child Psychology Doctorate course and tutors from the education department.
3	Application for Ethical Review (AER)	Completion of the UoB's AER.
4	Ethics board approval obtained	Approval given for the research by the UoB's ethics board.
5	Recruitment email and conversations with LA EPs and EY team	LA EPs and EY advisory teachers were approached via email (see Appendix B) and asked to identify an EY setting which met the inclusion criteria. The EPs did not feel able to do this, but a member of the EY Team volunteered to help with recruitment. I spoke to this EY advisor in a virtual meeting to give more detail about the study and recruitment requirements. The EY advisor identified two possible settings which were prioritised in order of perceived closeness to the inclusion criteria for contacting.

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6	Recruitment email and conversations with setting manager	Following the identification of the settings, the manager of the highest priority setting was approached by the EY advisory team and then myself through email with an information sheet (see Appendix C) and later phone call to inform the manager about the study. Consent was then gained from the manager through the consent form for managers (see Appendix F).
7	Participant consent gained	After gaining the consent of the setting manager, participants for the study were voluntarily recruited through participant information sheets for practitioners and parents (see Appendix D and E) and consent forms (see Appendix G and H). The practitioners who met the inclusion criteria (see Table 7) were identified by the setting manager and recruited to voluntarily participate in the ICP and semi-structured interviews. The children who would be observed as part of the ICP were identified by the setting manager. These children's parents were approached, and informed consent was gained for the children to be observed. All children's parents and practitioners present in the room where the observation was conducted were informed of the observation taking place through the setting's notification procedures.
8	Data collection planned and postponed	Data collection visits including pilot interviews, main interviews and profiling of practice were planned with the setting manager and postponed on two occasions due to risk assessments within the setting related to COVID-19.
9	Data collection reorganised	Data collection visits planned with the setting manager.
10	Pilot interview undertaken	An initial pilot of this semi-structured interview was conducted prior to data collection in the main phase of the study (see Appendix I). This was carried out with a participant who volunteered to undertake the pilot interview. This interview was conducted via video call with the agreement of the participant for ease of access. Following the interview, the participant was asked if any aspects of the interview were unclear or felt repetitive.

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11	Adaptations to interview schedule made	Following the pilot interview, the interview schedule was adapted to remove a question which was deemed to be extraneous to the required data to answer the RQs. No other changes were made to the research schedule. See Appendix J for the adapted research schedule.
12	Selection of documents for analysis	Documentation relevant to the RQs was selected and obtained from their website: namely copies of the settings' inclusion and SEND policies.
13	ICP and semi-structured interviews carried out	A two-and-a-half-hour profile using the ICP (Soukakou, 2016) was conducted which included observation, review of classroom displays, planning documents and children's work. This was followed by a half-hour interview with the setting manager to clarify points related to the ICP. See Appendix L for an example extract of the completed schedule. Three face-to-face semi-structured interviews were conducted with participants. The interviews took place in a private room. Please see Appendix J for a copy of the interview schedule. Some information about the participants (e.g. role, teaching experience) was gathered through the interview to provide contextual and background information. See Table 8 for information on participants.
14	Data transcription completed	The audio recordings of the interviews were saved on the secure system and deleted from recording devices. This raw data was transcribed verbatim and the original audio files deleted. See Appendix M for an example extract from the interview transcriptions.
15	Content analysis completed on documents	In keeping with the guidance on document analysis (Bowen, 2009) the policy documents were skimmed and read to identify which aspects of the content should be included in analysis.

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16	Data analysis completed	The two stages of data analysis were completed: <ul style="list-style-type: none"><li>- Reflexive thematic analysis of interviews and documents (see Appendices M and N).</li><li>- Descriptive statistics and qualitative notes from the ICP (see Appendix L).</li></ul> See Section 3.6 for further detail regarding the data analysis processes.
16	Summary report	A summary report of findings will be shared with the setting manager for dissemination to the staff and parents. It will also be disseminated to the LA EY and EP teams.

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By using a convergent mixed methods approach the qualitative and quantitative data were combined to develop a more complete understanding of the phenomenon of inclusion and corroborate findings to reduce the weaknesses of individual methods, such as researcher bias (Bowen, 2009; Creswell & Clark, 2018). For example, even within the one tool of the ICP, this included observation, review of documents and semi-structured interview methods. Still, as with all methods, there are advantages and disadvantages to these choices and so the strengths and limitations of these methods are outlined in Table 10.

**Table 10***Strengths and Limitations of the Research Methods Employed (adapted from Bowen, 2009; Cohen et al., 2017)*

Observation	Semi-structured interview	Document analysis
<b>Strengths</b>		
Provides first-hand data on naturally occurring phenomena.	It aligns with interpretivist epistemology in that knowledge is seen as constructed between people.	Provides triangulation of methods and data when combined with other qualitative methods.
Is time efficient in analysis.	Can explore concepts in depth including the how and why of phenomena.	Is applicable to case studies as literature is a potential source of data on the context and phenomena of study. Is time efficient and cost-effective.
Provides rich contextual information.	A flexible tool which allows for some spontaneity in lines of enquiry.	
Can focus on facts, events or behaviours.	Allows multi-sensory channels to be used to explore or understand verbal responses (e.g. non-verbal).	Documents are often publicly available and therefore accessible.
Can complement other data sources.		Documents are not subject to reflexivity concerns.
Allows an a priori hypothesis to be tested.		Documents are stable and exact so they not altered by being studied. They provide access to a broad range of contexts, events, and times.
<b>Limitations</b>		
Can be impacted by researcher bias.	Can be impacted by research bias.	Documents can lack detail specific to RQs as they are produced for other purposes.
Prone to problems such as small sample sizes, access and anonymity.	Time consuming for researcher and participants.	Documents are not always accessible; they may be blocked or irretrievable.

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The naturalistic setting makes it difficult to control the environment of study.

May miss aspects of the phenomena in context which are outside the researcher's agenda and predetermined hypotheses.

Is time consuming to complete preparation of tool and develop skill in using it.

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Prone to problems of access, convenience, interviewee fatigue and anonymity.

Selecting documents and the availability of documents can lead to biased selectivity.



### **3.5.2 Specific Instruments**

#### **3.5.2.1 The ICP**

It has been suggested that measuring the quality of inclusive practice may need different tools to general quality assessments of educational practice, as these general tools are based on predictors of outcomes for children without SEND (Odom et al., 2011). Therefore, to understand inclusive practice within the setting the Inclusive Classroom Profile (Soukakou, 2016), or ICP, was used. This is a profiling tool which can be used by a range of professionals, including researchers, by providing ratings which “indicate the extent to which classroom practices intentionally adapt the classroom’s environment, activities and instructional supports in ways that encourage access and active participation in the group through adjustments that might differ from child to child.” (Soukakou, 2016, p.1). The ICP provides ratings on 12 items which were drawn from the research base for IECE:

- Adaptations of space, materials, and equipment.
- Adult involvement in peer interactions.
- Adult’s guidance of children’s free-choice activities and play.
- Conflict resolution.
- Membership.
- Relationships between adults and children.
- Support for communication.
- Adaptations of group activities.
- Feedback.
- Family-professional partnerships.
- Monitoring children’s learning.

These ratings are developed through data collection (from direct observation; consideration of documents in the environment such as displays, children’s work or plans; and questioning of practitioners) which is carried out over a roughly three hour data collection session. The data is then used to score each item using given criteria, and a quality rating given (on a scale of 1 to 7, where 1 is inadequate and 7 is excellent) based on the interpretation of the data collected against these criteria (see Table 11).

**Table 11**

*Scoring Procedure for the ICP (Soukakou, 2016)*

Step	Description of process
1	The descriptors within each item on the ICP are rated as ‘yes’, ‘no’, or ‘not observed’ following observation, perusal of documents and discussion with a staff member.
2	Each item is given a score based on the rating of the descriptors. The descriptors relate to a score section under the odd numbers (e.g. 1, 3, 5 and 7). Odd number scores are given if all the descriptors within that section were rated yes (or no for descriptors in score section 1). The even number scores are given if all the descriptors in the score section below were rated yes, and some of the descriptors in the next section were rated yes.
3	Scores are split into rating categories with 1 being ‘inadequate’, 3 being ‘minimal’, 5 being ‘good’ and 7 being ‘excellent’. A rating category is given to scores for each item.
4	An overall score and rating category is given by finding the mean score from the items (i.e. adding up all the item scores and dividing by the number of items).

The ICP was chosen for this research as it is specifically designed for UK EY settings and inclusive practice (Soukakou, 2016). The ICP is not yet widely used in research, as it is a relatively new tool, yet pilot studies of the ICP (Soukakou, 2012;

Soukakou et al., 2014) found that the tool was valid as it had moderately high correlations with other rating scales of early childhood interactions and environments, such as the Early Childhood Environment Rating Scale-Revised (Harms et al., 2017). However, the ICP was designed specifically as a profile for quality of IECE for children with disabilities. Therefore, rather than some more established tools which consider the overall quality of educational practice in the EY, the ICP was chosen for this study as it was believed to be a better tool for answering the specific RQs which focused on the inclusion of children with SEND.

There are challenges to employing the ICP as a research tool which must be considered when using and interpreting this profile. Data is collected over a snapshot of a few hours, and whilst information beyond direct assessment is collected it is still possible that the range of activities and interactions which occur in a EY setting will not be fully represented in a snapshot of data collection. The ICP manual, also recommends that users of ICP receive training to help ensure that data collection and scoring guidelines are applied accurately and reliably (Soukakou, 2016). However, I relied on the manual and guidance in the item criteria to implement this profiling tool, which may have led to inconsistency in its application. Further reflection on the limitations of the ICP and its use in this study are included in Section 5.5.

### **3.5.2.2 Semi-structured Interview**

For the participant interviews, a semi-structured interview schedule was developed. The interview schedule aimed to last between 30 and 45 minutes. Due to the similar focus on seeking to collect data on practitioner views of disability and inclusion, as well as their inclusive practices, the schedule was adapted from the

interviews in Thornton and Underwood's (2013) study of early childhood educators' self-reported views and practice related to inclusion of children with disabilities. In keeping with the interview schedule developed by Thornton and Underwood (2013) the interview schedule of the current study was designed to include definitions of inclusion and SEND which the participants were asked to comment on. However, rather than give one definition for the participants to comment on as was done in the Thornton and Underwood (2013) interviews, I gave participants a range of definitions of SEND and inclusion. The aim of this was to provide a framework for participants to reflect on their views around these complex concepts. However, I aimed to avoid leading the participants too much in their views by presenting just one definition, as this could lead the participants to respond favourably to the presented definition due to social desirability bias. Within the context of an explanatory study, this also enabled me to understand how their views related to existing models of SEND and inclusion (e.g. a medical or social model of disability). Some questions were included to be specific to the current research such as to ask about the participants' experience of facilitators to inclusion as well as barriers (see Appendix I for the pilot interview schedule and Appendix J for the final interview schedule).

Semi-structured interviews were chosen as a tool for data collection in this research as they enabled direct access to practitioners' views, which were identified as a key factor within inclusive practice from the prior research. Semi-structured interviews also allowed for a depth of data to be obtained which is in line with the CR paradigm. However, rather than an unstructured interview, they maintain focus on specific areas of interest to answer the specific RQs.

Issues of bias are essential to consider with interviews and observations (see Table 10). However, the use of mixed methods data collection through several methods and tools helps to ameliorate this concern.

### **3.5.3 Pilot Study**

As the interview schedule was untested, a pilot of the interview was conducted. This allowed for the interview schedule to be tested in terms of length, clarity, and purpose. The participant was asked for their feedback following the interview and they did not identify any questions which were confusing or unclear. Following the pilot interview, one question from the schedule was deemed to be extraneous and removed (see Appendices I and J). The pilot data was included in the main study with the participant response to the deleted question removed from the transcript prior to analysis.

## **3.6 Data Analysis**

### **3.6.1 Qualitative Data Analysis**

Following transcription of interviews, Reflexive Thematic Analysis (RTA) was used to analyse the qualitative data from the semi-structured interviews. In a separate analysis activity, the pertinent content from the setting's policies were identified through document analysis and RTA was used as the thematic analysis stage of the document analysis (see Figure 10 for an account of the document analysis process). Yin (2018) outlines that case study analysis involves "searching for patterns, insights or concepts that seem promising" (p. 167) and that this can involve both deductive and inductive processes. Therefore, in line with other research

studies in the field of IECE, an inductive approach to RTA was undertaken in the current study.

### **Figure 10**

*Description of the Document Analysis Process (Bowen, 2009, p.32)*

“Document analysis involves skimming (superficial examination), reading (thorough examination), and interpretation. This iterative process combines elements of content analysis and thematic analysis. Content analysis is the process of organising information into categories related to the central questions of the research. ... it entails a first-pass document review, in which meaningful and relevant passages of text or other data are identified. The researcher should demonstrate the capacity to identify pertinent information and to separate it from that which is not pertinent (Corbin & Strauss, 2008; Strauss & Corbin, 1998).

Thematic analysis is a form of pattern recognition within the data, with emerging themes becoming the categories for analysis (Fereday & Muir-Cochrane, 2006). The process involves a careful, more focused re-reading and review of the data. The reviewer takes a closer look at the selected data and performs coding and category construction, based on the data’s characteristics, to uncover themes pertinent to a phenomenon. Predefined codes may be used, especially if the document analysis is supplementary to other research methods employed in the study. The codes used in interview transcripts, for example, may be applied to the content of documents. Codes and the themes they generate serve to integrate data gathered by different methods. The researcher is expected to demonstrate objectivity (seeking to represent the research material fairly) and sensitivity (responding to even subtle cues to meaning) in the selection and analysis of data from documents.”

RTA is a widely used analysis for qualitative data which involves a six-phase process. This process and its application in this research can be seen in Table 12.

**Table 12***RTA Process (adapted from Braun & Clarke, 2022)*

Phase of RTA	Description of phase	Application in current research interview analysis	Application in current research document analysis
Phase 1: Familiarising yourself with the dataset	Immersion in the data through reading, re-reading, listening to and making initial notes on the data.	I listened to the interview recordings before transcribing them verbatim. Initial notes were made on ideas for codes and reflective journal entries begun.	I read the policies from document analysis and the key sections for RTA were identified. Initial notes were made on ideas for codes and reflective journal entries begun.
Phase 2: Coding	Code the whole data set systematically to identify sections of meaningful description and interest to the RQs. The data is then organised by the code labels.	Initially I coded the interview transcripts. They were then recoded (in a different order) to ensure codes captured all of the data. I coded all of the data using Nvivo for the initial codes and hand coded in MS Word for the second code. Code labels and descriptions were noted and reflective journal entries continued.	The codes from the RTA of interviews were used to deductively code the documents and additional codes were added to ensure all data was included. They were then recoded (in a different order) to ensure codes captured all of the data. I coded all of the data using Nvivo for the initial codes and hand coded in MS Word for the second code. Code labels and descriptions were noted and reflective journal entries continued.

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Phase 3: Generating initial themes	Bring together clusters of codes which share broader core ideas and concepts than the code labels, and provide meaningful answers to the RQs. These form the candidate themes.	I manually organised the code labels for the RTA of the interviews alone into initial themes which represented shared meaning. These candidate themes were developed into a candidate thematic map. I continued to keep reflective journal entries.	I manually organised the code labels for the RTA of the documents alone into initial themes which represented shared meaning. These candidate themes were developed into a candidate thematic map. I continued to keep reflective journal entries.
Phase 4: Developing and reviewing themes	Consider and review the candidate themes by returning to the original data set and code labels to ensure that the themes identify the key patterns of the data in relation to the RQs. This can require substantial revision of themes.	For the interview RTA, I re-read the original data and code labels in Nvivo. The candidate themes were re-organised and re-labelled to better reflect the patterns I saw in the data including hierarchies of superordinate and sub themes. I continued to keep reflective journal entries.	For the interview RTA, I re-read the original data and code labels in Nvivo. The candidate themes were re-organised and re-labelled to better reflect the patterns I saw in the data including hierarchies of superordinate and sub themes. I continued to keep reflective journal entries.

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Phase 5: Refining, defining, and naming themes	Ask 'what story does this theme tell?' and 'how does this theme fit into my overall story about the data?'. Write a name and description for each theme.	For the interview RTA, I wrote names and descriptions (being careful to make the names represent the core concept the codes clustered around rather than being merely descriptive) for the themes which had been identified in phase 4. I reviewed the themes in relation to the RQs and checked that the themes gave meaning beyond description to answer the RQ. I continued to keep reflective journal entries.	For the interview RTA, I wrote names and descriptions (being careful to make the names represent the core concept the codes clustered around rather than being merely descriptive) for the themes which had been identified in phase 4. I reviewed the themes in relation to the RQs and checked that the themes gave meaning beyond description to answer the RQ. I continued to keep reflective journal entries.
Phase 6: Writing up	Informal writing up through familiarisation notes and reflection journals should begin during earlier phases of the process. Writing up in a formal way tells the story of your data in relation to the RQs by bringing together your analytic narrative with illustrative examples from the data.	I kept a reflective journal throughout the RTA, extracts of which can be found in Appendix P. I formally wrote up the findings in Chapter 4 of this thesis to answer the RQ.	I kept a reflective journal throughout the RTA, extracts of which can be found in Appendix P. I formally wrote up the findings in Chapter 4 of this thesis to answer the RQ.

RTA was used in the current research as it asserts that the subjectivity of the researcher is a tool to be used and understood as it will shape how the data is identified, collected and interpreted (Braun & Clarke, 2022). Therefore, my impact as a researcher, on the data collection and analysis, is not problematic if dealt with in a reflexive way (this is discussed further in Section 3.8.5 and Section 5.5). This fits the CR interpretivist view of knowledge, as not being free of researcher bias. Furthermore, RTA also allows for codes to be inductively developed which can lead to unexpected insights (Braun & Clarke, 2022). As this research is explanatory, RTA therefore fits with the study's aims. Additional general strengths of RTA alongside the limitations are presented in Table 13.

**Table 13**

*Strengths and Limitations of RTA (Braun and Clarke 2022 p.261)*

Strengths or opportunities	Limitations or challenges
Flexible with regard to theory, research question, data collection method, dataset size and generation strategy, and analytic orientation (inductive-deductive, semantic-latent, experiential-critical) and purpose (descriptive-interpretive, in-depth examination of selected data domains versus rich description or interrogation of meaning across entire dataset). This means it has potential for wide ranging application.	Flexibility and wide range of potential applications can lead to 'analytic paralysis', especially for those new to qualitative research.
Status as a method, rather than a theoretically informed and delimited 'off-the-shelf' methodology. This means researchers must actively engage with questions of underlying theory and philosophy; knowing and reflexive use of TA is crucial for quality.	The researcher must engage with theory before data analysis or risk theoretical assumptions and concepts being unknowingly and unreflexively imported into the analysis.
An accessible 'starter method' for those new to qualitative research.	Flexibility with regard to theory and analytic orientation and purpose means it is difficult to formulate

	precise guidance for higher-level (more interpretative) analysis. As with many other qualitative approaches, doing TA involves 'craft skills' that are difficult to distil into recipe-like guidance.
Can highlight similarities and differences across the dataset.	Limited interpretative power if not used in combination with a particular theory or concepts.
Can generate unanticipated insights.	Cross-case orientation means the complexities and contradictions in the accounts of individual participants can be difficult to retain/capture in the analysis (especially in research with larger samples).
Allows for social as well as psychological interpretations of data.	Can't be used for a fine-grained analysis of language practice.
Useful for experienced qualitative researchers seeking to produce complex, nuanced, sophisticated and conceptual analyses.	
When used with experiential framework, results are accessible to an educated general public.	
Easy to incorporate into ethnographic and participatory designs; theoretical flexibility avoids theoretical tensions and contradictions.	
Flexibility and accessibility make it a useful method for community research designs, where participants are co-researchers and contribute to the data analysis; also useful for designs where participants are invited to reflect on the resulting analyses or these are returned to participants.	
Can be used to produce analyses with actionable outcomes that can inform policy development.	

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### 3.6.2 Quantitative Data Analysis

Quantitative data was analysed to support the development of a rich picture regarding the case being studied (i.e. the preschool setting). In this instance, this was to better understand the actual inclusive practice of practitioners as enacted. Case studies encourage the development of a rich picture because the context is understood to be vital to the phenomena (Schwartz-Shea & Yanow, 2012). The stages of quantitative data analysis outlined by Creswell and Clark (2018) were followed and are outlined in Table 14.

**Table 14**

*Quantitative Data Analysis Procedure (adapted from Creswell & Clark, 2018)*

Quantitative data analysis step	Application in current research
Prepare the data for analysis	<ul style="list-style-type: none"><li>• Numeric values assigned to scores on the ICP.</li><li>• Checked for data entry errors.</li><li>• Computed new variables e.g. total and mean scores.</li><li>• Established a code book for each variable's name and definition.</li></ul>
Explore the data	<ul style="list-style-type: none"><li>• Conducted descriptive analyses.</li></ul>
Analyse the data	<ul style="list-style-type: none"><li>• Analysed the data to answer the quantitative RQs (i.e. RQ3).</li></ul>
Represent the data analysis	<ul style="list-style-type: none"><li>• Summarised results in text, tables and figures.</li></ul>
Interpret the results	<ul style="list-style-type: none"><li>• Summarised the main results.</li><li>• Examined results with respect to prior predictions and explanations drawn from the literature.</li></ul>
Validate the data and results	<ul style="list-style-type: none"><li>• Identified limitations and implications of the research.</li><li>• Considered through reflection on the instrument used for data collection (see Section 3.5.2)</li></ul>

The final step of validation was not stringently applied although triangulation of data is discussed further in Section 3.8.1. However, in the selection of the ICP tool, the validity of the tool was considered (see Section 3.5.2.1). The data was obtained by following the scoring procedure for the ICP which is outlined in Table 11. Due to the single data set, the ICP data obtained was reported directly and analysed using descriptive statistics as further statistical analysis would not be supported in a single key case sample. However, as the case study is not aiming to provide generalisable causal relationships, this limitation is mitigated within the study design.

### **3.7 Ethical Considerations**

To ensure the research met ethical standards, the study was designed and conducted in accordance with the British Psychological Society's (BPS) Code of Ethics and Conduct (BPS, 2021), Health Care Professionals Council's Standards of Performance, Conduct and Ethics (HCPC, 2018), British Educational Research Association's Ethical Guidelines for Educational Research (BERA, 2018) and the UoB CoP for Research (UoB, 2018a). The UoB's Ethical Review Board approved the AER. The following key areas of ethical practice were considered:

- Confidentiality
- Informed consent
- Right to withdraw
- Feedback to participants
- Data management
- Risk to participants.

The action taken to ensure ethical research practice in these areas is outlined in Table 15.

**Table 15***Ethical Concerns and How They Were Addressed Within the Current Study*

Area of ethical practice	Actions to mitigate ethical concerns in the current study
Confidentiality	<p>To ensure confidentiality, the names of participants, the LA, schools, staff, and pupils were removed, and pseudonyms were adopted for the name of the setting and LA. Participant identities were pseudo-anonymised with an ID code and a key stored, linking the ID code to the participant's name, on a password-protected file in the secure storage system. Identifying information discussed in interviews or obtained through the ICP was redacted or anonymised in the records.</p> <p>Participants' data were treated as confidential; however, participants were informed that confidentiality may need to be breached during the research project if a participant made a disclosure which raised safeguarding concerns such as if the participant or another individual were judged to be at risk of harm or if there was an indication of illegal activities. In this case LA procedures would have been followed. There may also be moral or ethical reasons to consider a breach in confidentiality, for example if I was made aware of inappropriate or unprofessional practice, such as discrimination or a breach of the Equality Act (2010). Consideration of how to act if this scenario arose was undertaken and a plan made to:</p> <ul style="list-style-type: none"> <li>- seek advice from my research supervisor before proceeding with any disclosure if and when appropriate.</li> <li>- inform the participants of my intentions and reasons for disclosure in a manner that would not undermine or prevent the disclosure, or risk researcher safety.</li> <li>- any decision to override agreements on confidentiality and anonymity would be taken after careful and thorough deliberation.</li> <li>- any such decisions would be accompanied by contemporaneous notes including the reasoning behind them.</li> <li>- I would also consider whether overriding confidentiality and anonymity compromises the integrity and/or usefulness of data and withdraw any compromised data from the study.</li> </ul>
Consent	<p>Informed consent was gained through informing participants about the research. This included steps to inform the EY advisors and preschool managers of the aims of the research and what it would entail</p>

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through emails (see Appendix B) participant information sheets (see Appendix C) and phone/video calls. Staff and parents who were recruited within the setting were also given participant information sheets (see University D and E) to explain the aims, procedure and ethical implications of the study. Whilst many of the children in the setting did not participate in the study, the whole parent community were informed of my attendance in the setting for the observation within a research capacity. This was done through their usual parent communication channels.

Right to  
withdraw

Participants were able to withdraw their consent and data at any time between completing the consent form and analysis of the data, which began one month following data collection. After this time, data could not be removed as it was included in analysis. If participants chose to withdraw their data it would be identified through the pseudo-anonymisation process and their data would be destroyed securely, following which the participant would be notified.

The participants were informed of their right to withdraw through the Practitioner and Parent Information Sheets (see Appendices D and E) and consent forms (see Appendices G and H), and contact details to do this were shared on these forms. During the interviews, a further verbal reminder of the participant's right to withdraw was given. During this research, no participants asked for their data to be withdrawn.

Feedback for  
participants

Following completion and external assessment of this thesis, a summary report of findings and implications will be written and shared with the local authority EY and EP Team. It will also be shared with the setting manager for dissemination to parents and practitioners. Participants will be offered the opportunity to meet with me to discuss the research findings through this report and the setting manager will be notified of any future publications related to this research.

Data  
Management

A data management plan was completed and implemented in line with the UoB's Research Data Management Policy (UoB, 2018b) and CoP for Research (UoB, 2018a). A secure electronic storage system, was used for the storage of data including:

- Video and audio recordings (until transcription was completed)
- Transcripts of recordings
- Scanned copies of the ICP schedule and notes
- Scanned copies of consent forms.



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Paper records were securely stored and then shredded once they were transferred to the secure electronic storage system. The data related to the study will be stored electronically for 10 years and set expire automatically after this time.

Risk to  
Participants

Taking part in the study involved a time commitment from the manager and practitioners within the EYFS setting. Therefore, benefits from participation such as opportunities to reflect on their beliefs and practices, and the opportunity to support the wider development of knowledge in the field were important.

There was a small psychological risk to participants due to exploration of experiences and views of sensitive topics such as inclusion and SEND, and the profiling of their practice. To mitigate this risk, as a researcher I was mindful of these sensitivities and conducted the interviews and ICP in a sensitive, respectful and empathic manner.

To protect the LA, setting or individuals from the possibility of negative information that was shared being linked to them, any identifiable information was excluded from the final report. If information was provided which may have presented a risk to organisational reputation, advice would have been sought through research supervision regarding the inclusion and communication of this data.

Due to the COVID-19 pandemic, there were increased health risks to participants in conducting face-to-face interviews. Therefore, participants were offered a virtual or face-to-face interview. Government guidance and setting risk assessments were followed regarding wearing masks in communal spaces in schools and during face-to-face interviews.

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### **3.8 Rigour and Quality**

Yin (2018) suggests that case studies should use four tests of quality which are often seen as the standard for quality social sciences research: construct validity, internal validity, external validity, and reliability. Therefore, these four areas will be discussed below, alongside positionality as this is an important aspect of rigorous interpretivist research.

#### **3.8.1 Construct Validity**

Construct validity is concerned with ensuring the measures used in research match the concepts of study. Yin (2018) proposes that quality case studies can ensure construct validity through use of data triangulation, which comes from multiple evidence sources. Therefore, triangulation improves the credibility of interpretations (Stake, 1995). This aligns with case studies which use different sources of evidence to build a description and understanding of a case (Stake, 1995) and have several perspectives within the data to account for the heterogeneity of interpretations which relate to the same phenomenon (Schwartz-Shea & Yanow, 2012). In this study, triangulation is established through a variety of methodology and data sources. Triangulation was obtained using a parallel mixed methods design which combined qualitative and quantitative methods and by employing several data collection methods to explore the concept of inclusion from different perspectives (see Section 3.5).

A further way to ensure construct validity is through the specific measures used. In this study, the measures were chosen to closely match the data required. For example, the ICP to measure inclusive classroom practices and semi-structured

interviews to measure practitioner views. The validity of these measures is discussed in relation to each tool in section 3.5.2 and limitations of the measures considered.

However, this study did not include a further approach to raise construct validity; the participants reviewing the draft manuscript. The timeframes in the procedure made this prohibitive. However, it is acknowledged that asking participants to review parts of the research (such as their own interview transcripts or a summary of the findings) may have allowed participants to identify, in particular, if the semi-structured interviews had represented their views as they understood them.

### ***3.8.2 Internal Validity***

Internal validity is concerned with the research's ability to make cause and effect links between variables. In case studies Yin (2018) describes this as establishing where certain conditions are believed to link to other conditions. This is challenging in real world contexts such as a preschool setting as variables cannot be controlled for. However, Yin (2018) proposes a number of approaches which may enable this to be established. Within the current research this was addressed through the act of 'pattern matching' to find where the findings of the study match or diverge from the theory and research which has driven the design, for instance in relation to the adapted ecosystems model of IECE (Bartolo et al., 2019) alongside other current knowledge from literature the field. This action was undertaken through the discussion in Chapter 5 where each RQ findings are discussed in light of where they match or diverge from the current literature. In addition, section 5.6.2 addresses how the findings can be seen to concur with or add novel or challenging evidence to the

existing theories of IECE. This adds weight to the evidence through critical appraisal of the implications of the findings being discussed.

### **3.8.3 External Validity**

External validity relates to the generalisability of research beyond the confines of the study. The purpose of a case study is not generalisation to a wider population but the development of a context-specific understanding (McChesney & Aldridge, 2019), which is an “opportunity to shed empirical light on some theoretical concepts or principles” (Yin, 2018, p.37). This is referred to by Yin (2018) as ‘analytic generalisation’. Through this approach, the findings of this study, whilst deriving evidence from a particular setting, can have relevance to wider implications by supporting, adapting or rejecting theories and therefore having implication for future research and practice (see Chapter 5).

Despite the application of this approach, the quality of the case study will relate to the rigour with which the approach is applied and this will be discussed further in relation to reliability in the current study.

### **3.8.4 Reliability**

Reliability in research related to the replicability of the procedures and analysis to reach the same findings. Yin (2018) explains that to do this, researchers must aim to reduce bias and errors in their studies, and make the processes explicit to other researchers.

Within the current study, transparent processes have been aimed for through a number of means. Firstly, the study protocol is included with the methodology and includes details of the overall processes (see Table 9) as well as specific processes related to data collection (see Section 3.5.2), analysis (see Tables 11, 13 and 14) and ethical management (see Table 15). Detail of the processes is further given through the inclusion of documents used at recruitment and examples from the process of data collection and analysis (e.g. participant information sheets, transcription examples and thematic map examples in the appendices). The case study data is also stored through UoB systems so that the raw data is available before it was analysed. This means that the data could be analysed again to see if the same findings were identified although the impact of the researcher cannot be removed from the research and this is discussed more related to positionality in Section 3.8.5.

Another way in which reliability can be achieved is through what Yin (2018) describes as a 'chain of evidence'. This is where research has a clear link from the RQs to the conclusions, including through the design, procedures, evidence and presentation of findings. This research aims to achieve this through the record of the research process which is this thesis. Guidance from other researchers and reflection on my part as the researcher has led to the development of research questions and subsequently a study design which links the research and current knowledge in the area of IECE to the specific aims of this study and those aims have driven the case study and mixed methods design, specific measures for data collection and analysis, generation of findings and drawing of conclusions. However, there are limitations to

this study which will impact on the reliability of the research and these will be discussed in Chapter 5.

### **3.8.5 Positionality**

In interpretivism, there is a shift away from the view of researchers as objective and an understanding that researchers bring their own experiences and perspectives (i.e. position) that will become part of the research itself (Thomas, 2016). Therefore, reflexivity on the part of the researcher is required to understand their positionality (Cohen et al., 2017). My positionality is outlined in section 1.5.3. I acknowledge that my positionality may have influenced the research through my choices and interpretations. For instance, my own experience of working in EYs education and my belief in the principles of inclusion initially interested me in this area of study. Therefore, throughout the process of analysis using RTA, I kept a reflective journal to help to be transparent about the impact of my positionality, understand it better and mitigate the effects of biases in my interpretation of the data. This journal was not kept through the data collection process which means that the impact of my positionality during the initial design and data collection phases was not formally recognised, although informally this took place through supervision and self-reflection. This is a limitation which will be discussed further in Chapter 5. Extracts of this journal are included in Appendix P.

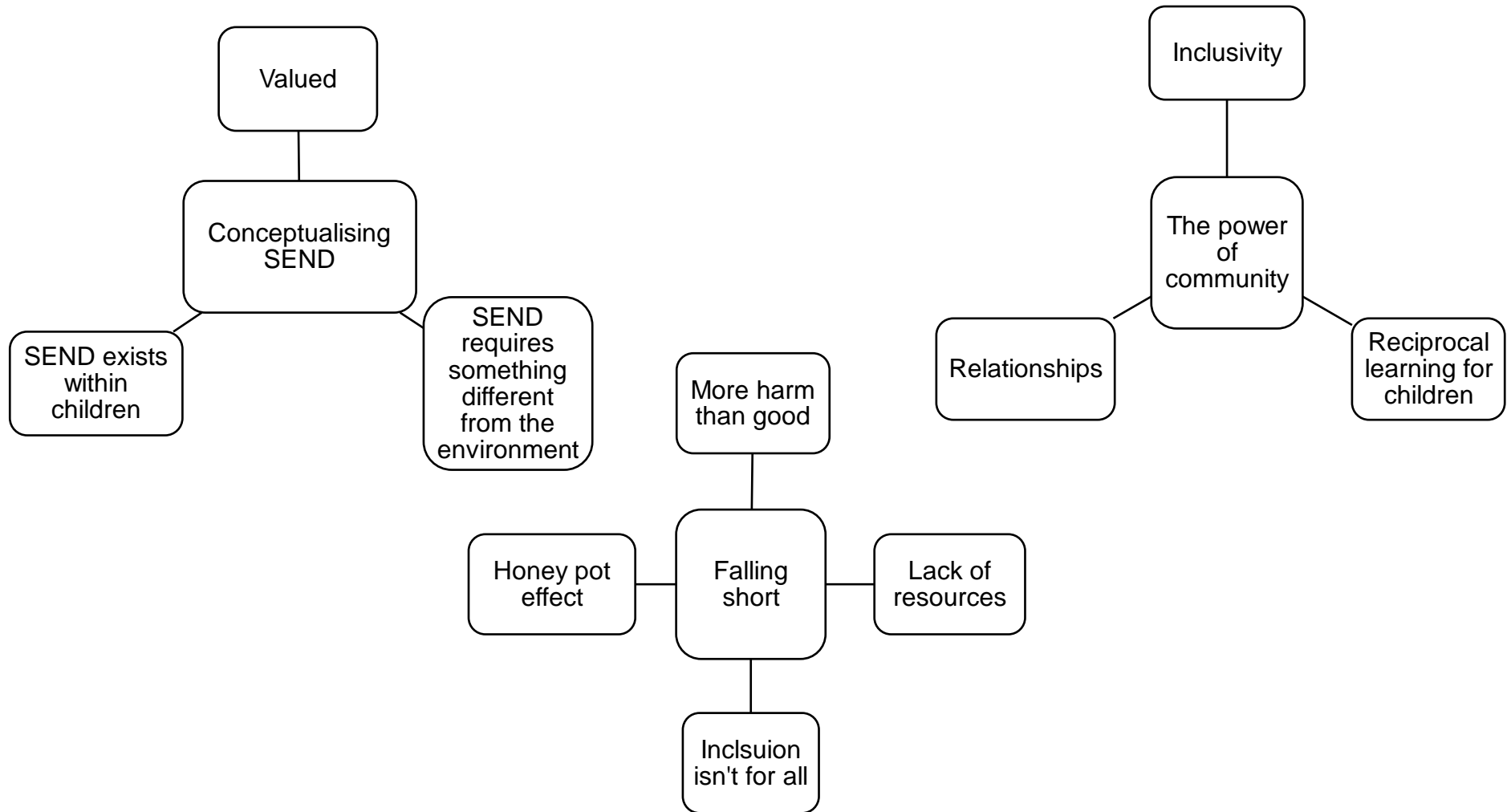
## CHAPTER 4: FINDINGS

### 4.1 Introduction

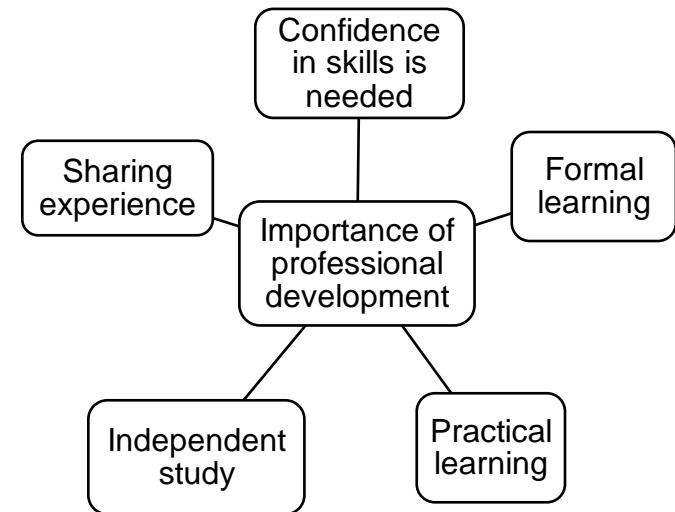
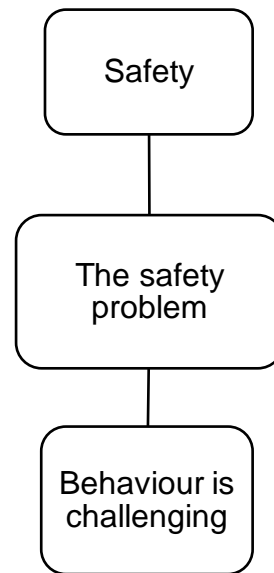
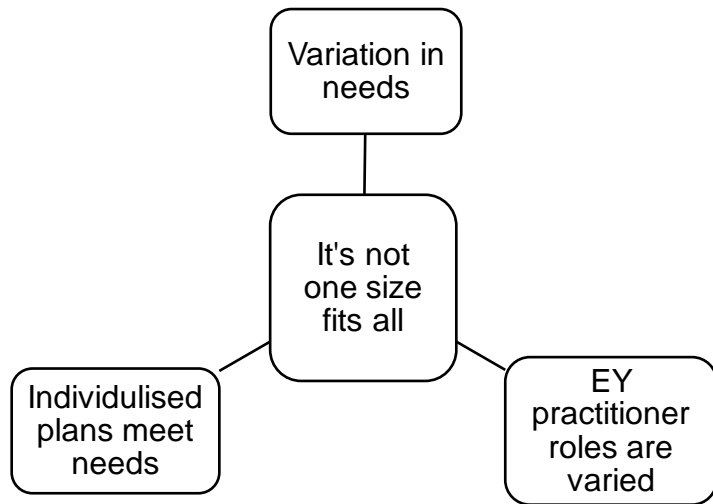
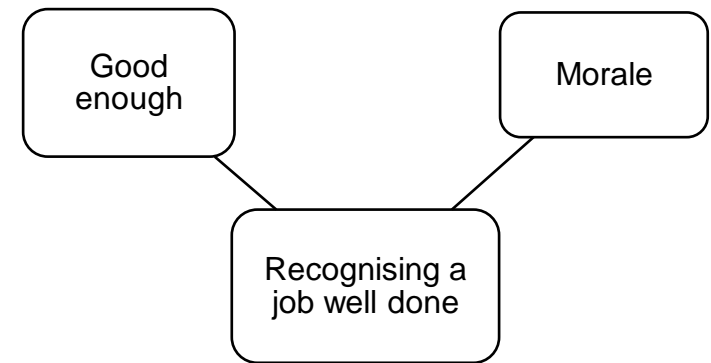
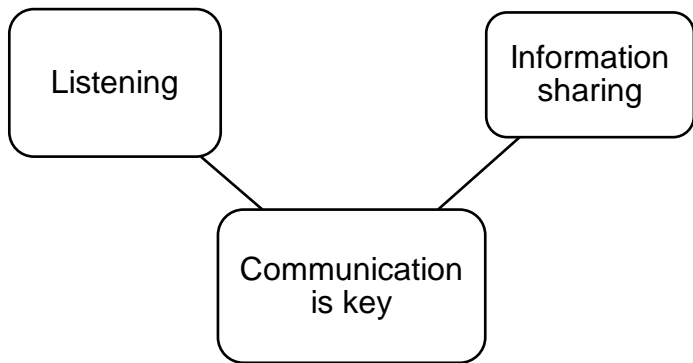
This chapter presents the findings of the research in relation to the RQs. The results of the qualitative and quantitative data analysis will therefore be blended throughout this chapter, based on the relevance of the findings to each RQ. The raw data obtained from the ICP can be found in Appendix L and examples of coded sections from interview transcripts and document analysis are in Appendices M and N respectively. An overall summary of the thematic map for the interview analysis can be found in Figure 11, and document analysis in Figure 12. An example of the RTA themes alongside related codes and illustrative data examples can be found in Appendix O.

**Figure 11**

*Thematic Map from RTA of Interview Data*







## **4.2 Findings for RQ1: What Views of Inclusion and SEND do EY Practitioners Hold in an Inclusive English Preschool?**

To answer RQ1 the RTA of interview data was used, an overview of which can be seen in Figure 11. For the purposes of this section, relevant themes and sub-themes to RQ1 have been drawn out and will be discussed in more detail below. These include: 'Conceptualising SEND', 'The power of community' and 'It's not one size fits all'. Additional themes from the overall analysis will be discussed in relation to RQ2 and RQ3 as relevant.

### **4.2.1 Conceptualising SEND**

A theme identified from the EY practitioner interviews was 'Conceptualising SEND' which contained the sub-themes 'Valued', 'SEND requires something different from the environment', and 'SEND exists within children'.

Within the 'Valued' sub-theme, practitioners showed the value they hold for the children with SEND by striving to meet the children's needs, and through the development of tolerance and understanding of difference. For example, Participant A stated that "if something's not working, um, what can we do to make things better?" and,

"I think they need to be able to see children with additional needs, um, and understand, ... we treat everybody equally and as an individual, so everyone is celebrated for what they can do or um, who they, who they play with. I think they need to have that at an early, early age of mixing for children with additional needs".

Additionally, working with children with SEND was valued by EY practitioners as providing rewarding work and meeting personal aims/motives. For example, Participant B said, “But I do like the reward that comes after as soon as you may manage to get them to reach that milestone.”

Participants’ conceptualisation of SEND was also represented in the sub-theme ‘SEND exists within children’. Some of the EY practitioners held views that SEND was related to individual impairment and could be identified and categorised. For example, Participant A said, “it can be something that’s been direct to them, what they’ve been born with”.

In addition to this, SEND was conceptualised by the sub-theme ‘SEND requires something different from the environment’. Views were held by the EY practitioners which related to the need for inclusion specifically for children with SEND and specific provision for children with SEND. For instance, Participant D shared that for children with SEND, “They’re all included in the in the same classroom as everybody, whereas when I was at school, in like the 80s, they would have gone to somewhere else”, and Participant A said, “there are times when we do have to do some work with our children on our own, it could be that they have to have a distraction free environment to do them intensive interactions”. This also related to how barriers related to SEND can be understood to be environmentally driven. For example, Participant C said, “quite often I think sometimes children with special educational needs, it’s not necessarily the child that has the barrier, it’s other people”.

#### **4.2.2 It's Not One Size Fits All**

The practitioners' views of SEND and inclusion could also be seen in the theme 'It's not one size fits all'. This theme is linked to the theme 'Conceptualising SEND' although its focus is related to the variation and individuality within SEND and SEND supports. Three sub-themes are held under the umbrella of the theme, namely: 'Variation in needs', 'EY practitioner roles are varied', and 'Individual plans work for SEND'.

'Variation in needs' is related to the range of SEND seen in the setting, how new needs arise over time and the impact of specific groups such as younger children or those impacted by COVID-19. For instance, Participant A reflected on the changing needs of a child they worked with,

"it could be that there is a small change with how much water he's having in his feed, it could be about if he's got a new hand splint" and "if anything changes with his needs and with any of his outcomes, if he's not here for a long period of time that's also been a challenge. If you start working on something and he's been off for a period of time, you always worry about, um, 'Where are we going to go next?' because we might have to go back to what we were working with before".

While Participant C shared that a child they worked with was being "monitored because they don't know whether she's what they're now calling COVID babies."

This range is mirrored in the 'EY practitioner roles are varied' sub-theme which relates to the different ways in which adults support children with SEND. These are often related to their specific needs (e.g. physical). For example, Participant A said, "I

also help with the lifting, so, he does have a sling and we use a hoist with him, so I do help with liftings”. However, it can include supporting the needs of parents and completing specific SEND processes. For instance, Participant C reflected on how their role included the process of reviewing individual plans, “the IPPs are reviewed every six weeks”, and supporting parents because “you feel for the parents that have to deal with it constantly, and actually the children coming here is a good respite for the parents as well”.

Due to this variation in needs and support, individualisation is important, and this relates to the sub-theme ‘Individualised plans work for SEND’. The practitioners’ interviews commented on the individual plans for support which were developed with the team and included targets and advice on how to support the children best. Participant C described using these individual support plans with a child she worked with,

“at the minute we have an IPP in place, so that’s our individual play plans. And so um, we will work closely with her on, at the minute she’s only got two targets. Um, to encourage her to, to, to grow and develop”.

#### ***4.2.3 The Power of Community***

‘The power of community’ theme identifies the impact of being part of a community and what this means for children with SEND and those who work with them. This theme includes the sub-themes ‘Relationships’, ‘Inclusivity’ and ‘Reciprocal learning for children’.

The sub-theme 'Inclusivity' includes practitioner views of, and enactment of inclusion, which support equal and fair access for all to participate in educational settings of their, or their family's choosing. For example, Participant D said, "Like I said, all children are unique, and they need to be included and interact".

The sub-theme 'Relationships' includes relationships between parents and the setting staff, and the importance of these people working together, as well as relationships developing between children when they are included in mainstream settings together. For instance, Participant A gave an example of how a typically developing child would respond to children with SEND in an inclusive classroom, "They'll just think 'Oh, they're in today. Great, I'm really, I'm so glad they're in I get to play with them'".

In addition to building relationships, the sub-theme 'Reciprocal learning for children' identifies the practitioners' views that children with and without SEND learn from each other in an inclusive classroom. Participant B explained that "I know it's classed as mimicking, but they can start to follow what everybody else is doing, and then they start to get to that point".

#### **4.2.4 *Falling Short***

Finally, the theme 'Falling short' includes sub-themes related to practitioner views of the concepts of SEND and inclusion; 'More harm than good', 'Inclusion isn't for all' and 'Honey pot effect'. The sub-theme 'Lack of resources' will not be explored here but is detailed in section 4.3.4 as it relates to RQ2.

Some aspects of the 'Falling short' theme highlight views which are negative towards specialist provision for children with SEND. For instance, the sub-theme

'More harm than good' is related to practitioner views that special school attendance can negatively impact development for children. For instance, Participant A reflected on children who attended specialist provision part time and said, "in previous experience of children that have, just when they've been to them provisions and then they come back to us, some of their skills they've learned, even though they've been with us longer, have dwindled away".

Further practitioner views within this theme identify how some practitioners and their colleagues were perceived to hold a view that there are instances where children with SEND will not be able to be included in mainstream education. This was called the 'Inclusion isn't for all' sub-theme. For example, rather than believing all children could be included, Participant B reflected that inclusion of children with SEND "just all depends on what kind of support they need" and Participant A shared the experience of other "schools aren't accepting their children, whilst we go through EHCP statements".

Moreover, practitioners believed that settings that were inclusive end up with high numbers of children with SEND in attendance in the sub-theme 'Honey pot effect'. This was viewed to be challenging and was directly related to the lack of inclusivity of other settings in practitioners' minds. To illustrate this, Participant C shared, "children with SEND should be in mainstream school. I do think it needs to be balanced. Otherwise, it turns into a specialist educational practice... I think the other settings in the area were wrong by not taking them on and not giving these children the opportunities that they deserve.".

#### **4.2.5 Summary**

The themes identified from the practitioner views cover a variety of areas and show heterogeneity within the views of the practitioner group. The practitioners' views give insight to their understanding of SEND in the themes 'Conceptualising SEND', 'It's not one size fits all', and 'Falling short'. These themes include how the participants' understanding of SEND includes within-child models linked to recognition of the variety of needs and support, including the need for specialist provision for some children. However, the themes also highlight how the practitioners believe in providing an inclusive education for all children; namely 'The power of community' and 'Conceptualising SEND', '

#### **4.3 Findings for RQ2: What are the Perceived Barriers and Facilitators of Effective Inclusive Practice in an Inclusive English Preschool?**

Again, the RTA of interview data was used (see Figure 11) to answer RQ2. For the purposes of this RQ, relevant themes and sub-themes were identified from the whole analysis, and these will be outlined below. These themes include: 'Communication is key', 'Importance of professional development', 'The safety problem', 'Falling short', and 'Recognising a job well done'.

##### **4.3.1 Communication is Key**

The 'Communication is key' theme identifies a facilitator of effective inclusive practice for the EY practitioners interviewed. In the 'Listening' sub-theme, participants reflected on how communication included being listened to and listening, particularly in relation to managers and practitioners. Participant C noted how the SENCo



included her in conversations about key children with SEND, “as a key person and the SENCo, we work really closely together to work out what, what we feel would be good for their targets to encourage the child to grow with it”.

Practitioners also spoke about aspects of practice which included ‘Information sharing’ between staff and parents and within the setting. For example, Participant B shared, “and if you see any concerns, you can always talk to the parents as well to see how they’re doing at home”. This sharing of information was viewed positively as a facilitator of knowledge development. For example, knowing how to support a child, or what has happened at home that could explain the child’s presentation on a particular day.

#### ***4.3.2 Importance of Professional Development***

Further facilitators of inclusive educational practice are identified in the theme ‘Importance of professional development’. The sub-themes which support inclusion include ‘Formal learning’, ‘Practical learning’, ‘Independent study’, and ‘Sharing experience’. These sub-themes identify different ways in which the practitioners develop their knowledge and skills. For instance, they learn from training programmes such as those directly related to SEND in ‘Formal learning’. Participant C had taken a number of such courses “I also have a Level 2 in understanding challenging behaviour, understanding autism, and children with special educational needs”.

In the ‘Sharing experience’ sub-theme the learning came from working with peers and other professions such as the experiences of Participant A,

“we spoke to different professionals as well, so we spoke to education psychologist and we had, um, obviously the early years specialist provision there so you got to ask questions, um, about things that we may not have cropped up before”.

In the ‘Independent study’ sub-theme professional development took the form of reading and research such as Participant D’s reflections that, “I can go back to my book and look at stuff as well, and I’ve researched stuff on, all time on, on the Internet as well”. Lastly, on-the-job experience was identified in the sub-theme ‘Practical learning’. Participant A articulated this ‘practical learning’ as,

“you have to learn on the job. Um, there isn’t a ‘You go on this training course and you’re going to have a child with this need and they’re going to come to your setting tomorrow’ because all the children are completely different”.

However, within the sub-themes a barrier to inclusive practice is found in the sub-theme ‘Confidence in skills is needed’. This sub-theme related to the worry and fear that some practitioners felt about working with children with SEND in the preschool. For instance, Participant D said, “Scary, I was scared to come back and work in the room”.

#### **4.3.3 The Safety Problem**

A barrier theme is ‘The safety problem’ as this theme relates to the challenges of behaviour and safety in the preschool setting. The practitioners felt that ‘Safety’, for themselves and the children, was difficult to achieve. In some instances, this was

due to the health needs of the children, for example, Participant A noted that practitioners who supported a child with a percutaneous endoscopic gastrostomy feeding tube “were a bit scared when we had the training, um, because with the link to the epilepsy as well, I think the trainer said ‘it’s life or death’ and that scared the staff”. In other instances, safety concerns regarding the behaviour of the children were voiced, for instance by Participant B who used the example,

“you just make sure that all the other children are away from that scene for minute just in case any throwing happens or any kicking or head banging or anything really.

So, just make sure everybody safe, and just where they are. So it is a lot of monitoring”.

This links to the second sub-theme ‘Behaviour is challenging’ which identifies the difficulties of knowing how to support behaviour. Participant C said, “They do obviously have challenging behaviour. We have a child that throws toys. You know, constantly fearing for your life, when a train’s coming flying at your head”. This also links to the theme ‘importance of professional development’ as several practitioners discussed not feeling equipped to cope with the challenging behaviour they witness in the setting.

#### **4.3.4 *Falling Short***

Another theme linked to barriers to inclusion is ‘Falling short’. This theme relates to the difficulties where the practitioner’s aims, related to inclusive practice and SEND support, are not achieved due to limitations within the system. This

includes the sub-themes 'Lack of resources', 'Honey pot effect', 'Inclusion isn't for all', and 'More harm than good', although this last theme will not be expanded upon here as it does not relate directly to the RQ.

Participant C said,

“whilst I said I do fully believe that they should be in a mainstream setting and we should give them the best care we can. It does get to the point where you go, 'Well, I don't know that we are doing the right thing? 'cause are we now a mainstream setting?’”

This exemplifies the 'Honey pot effect' where the practitioner felt the success of the setting at including children with SEND meant that too many children with SEND attended the setting. This links to the sub-theme 'Inclusion isn't for all' as other settings were perceived by some practitioners as blocking access to mainstream education on the basis of a child's SEND. For example, Participant A said, “it's quite upsetting whilst you have that family in front of you that say no one wants their child”. Some practitioners in the setting also held a view that children should be included in mainstream education yet identified reasons why this couldn't be. For instance, Participant D shared that, “if they can't settle into mainstream school, then they might need to go to a school that is specifically for their abilities”.

'Lack of resources' is also a perceived barrier to inclusion and the sub-theme includes limited resources and long waiting lists for specialist services, funding and training. For instance, Participant A reflected that access to funding was a concern, “we've had it in the past, where you try to apply for money but there's not money

there because other people have applied for it, and not use it effectively, so the pots gone” and that “money will always have a impact, I don’t think that will ever change”. Furthermore, Participant B noted that,

“when I was doing my level one and my Level 2, I did keep asking them to send me somewhere, but that had a special additional needs child, but I suppose I did go to one setting and that did have a SENCo child, but I wasn’t really around that child as such”.

So, the practitioner struggled to find the training experiences she needed. This sub-theme links to the theme of ‘Importance of professional development’, as a lack of appropriate professional learning was seen as a barrier to inclusion.

#### ***4.3.5 Recognising a Job Well Done***

‘Recognising a job well done’ is a theme which celebrates the ways in which practitioners recognise their efforts in their job. This is a facilitator to inclusive practice as it is the antidote to the previous theme ‘Falling short’ and acknowledges the power of recognition and praise to support morale and feelings of competence. The sub-themes are ‘Good enough’ and ‘Morale’.

The sub-theme ‘Good enough’ highlights how a reframe of practitioners’ efforts to be good enough rather than expect perfection can help practitioners who do not feel confident. Participant A reflected on this idea by saying, “We’re doing the best we can for him.’ Um, I think that helps, having that reassurance so we’re not expecting them to be singing and dancing”.

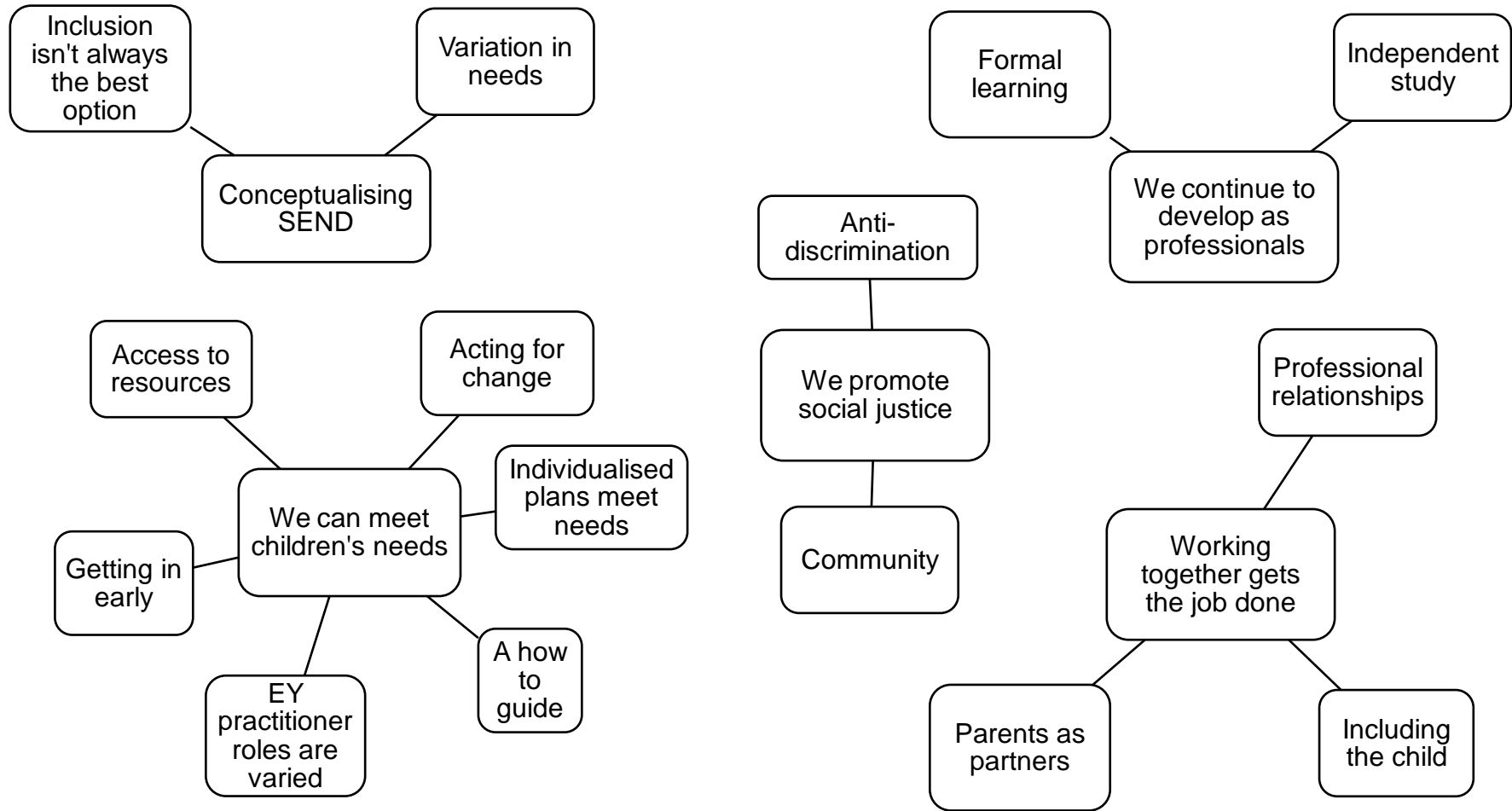
'Morale' was discussed in relation to how praise and recognition of their work also helped develop confidence in practitioners. For instance, Participant D said that "I'm getting on all right, I've been praised up ... knowing what I'm doing right, yeah". Some practitioners also expressed a sense of confidence in their role in supporting children with SEND. For instance, Participant C shared, "I would say most of the time it's, I'm quite happy and confident".

#### **4.3.6 Summary**

The themes from the practitioner interviews identify clear aspects which the practitioners viewed to be facilitators and barriers to inclusive practice for children with SEND. The facilitators included communication, professional development, and recognition of a job well done. Conversely the barriers identified included safety, lack of resources, lack of inclusive practice in other settings and the impact this has on high ratios of children with SEND attending more inclusive settings.

**Figure 12**

*Thematic Map from Document Analysis*



#### 4.4 Findings for RQ3: How do EY Practitioners' Views of SEND and Inclusion Relate to the Inclusive Practices of an Inclusive English Preschool?

RQ3 draws together the data from EY practitioners' views and inclusive practice (which is here represented by the ICP data and document analysis of the settings SEND and inclusion policies). Therefore, findings from the ICP (see Tables 16 and 17) will be used to identify the enacted inclusive practice of the setting (see Appendix L for more detail on the ICP data), and policy document analysis (see Figure 12) will be used to identify the espoused inclusive practice of the setting. These findings will be compared to the themes identified from RTA of practitioner interviews (see Figure 11) to present the practitioners' views of SEND and inclusion (see Section 4.2). The following section will outline where the findings align and where they diverge. Illustrative examples from the ICP, policies and interviews are provided.

**Table 16**

*Summary of Scores on the ICP*

Individual Item	Score	Rating
Adaptations of Space, Materials and Equipment	7	Excellent
Adult Involvement in Peer Interactions	6	Between Good and Excellent
Adults' Guidance of Children's Free-Choice Activities and Play	5	Good
Conflict Resolution	NA	NA
Membership	6	Between Good and Excellent
Relationship Between Adults and Children	2	Between Inadequate and Minimal
Support for Communication	4	Between Minimal and Good
Adaptations of Group Activities	NA	NA
Transitions Between Activities	2	Between Inadequate and Minimal



Feedback	4	Between Minimal and Good
Family-Professional Partnerships	4	Between Minimal and Good
Monitoring Children's Learning	7	Excellent
OVERALL (mean score)	5	Good

**Table 17**

*Exemplar Practice for Items on the ICP*

Item from ICP	Examples of practice
Adaptations of space, materials, and equipment	<ul style="list-style-type: none"> <li>• Materials were organised at child height and with picture and word labels.</li> <li>• Children independently accessed and used resources and were supported by adults to extend this play and keep themselves safe.</li> <li>• Resources were also brought to the child if physical accessibility is a barrier (e.g. providing a sand tray for the child in a wheelchair to access with their feet), and modelled how to use the resource before giving time for the child to use it independently.</li> </ul>
Adult involvement in peer interactions	<ul style="list-style-type: none"> <li>• Adults joined children's play and encouraged co-operative play with their peers. They modelled turn taking and narrated their play and interactions.</li> <li>• Adults intervened when necessary to support children if disagreements arose. Adults balanced this with allowing spontaneous interactions between children.</li> <li>• Adults encouraged children to join their peers when children were isolated.</li> </ul>
Adults' guidance of children's free-choice activities and play	<ul style="list-style-type: none"> <li>• Adults showed enjoyment when engaging in play with children.</li> <li>• Adults gave children opportunities to make choices in their play e.g. who and what to play with.</li> <li>• Adults supported children's engagement in play-based learning through the application of individualised scaffolding strategies such as verbal and non-verbal prompting, modelling, commenting or asking questions, and utilising peer support.</li> </ul>
Membership	<ul style="list-style-type: none"> <li>• Adults consistently and intentionally promoted belonging by encouraging participation and modelling inclusive behaviours towards individual differences</li> </ul>

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	<p>e.g. moving a child's wheelchair into a larger space and modelling turn taking with a peer so they could participate in shared play.</p> <ul style="list-style-type: none"> <li>• Children showed understanding, respect, and acceptance of individual differences.</li> <li>• Adults acknowledged children's strengths and individuality through their interactions, provision, and support.</li> </ul>
Relationships between adults and children	<ul style="list-style-type: none"> <li>• Adults used the principles of intensive interaction with children.</li> <li>• Adults sourced resources for children that were known to link to their individual interests.</li> <li>• Adults responded to children with individualised approaches to emotional support such as redirection, hugs, movement, food, and use of dummies. They remained calm and focused on soothing when children were distressed.</li> </ul>
Support for communication	<ul style="list-style-type: none"> <li>• Adults clarified to children what another child had said.</li> <li>• Adults modelled turn taking during conversations.</li> <li>• Adults used assistive technology (e.g. switch toys) to develop the foundations for communication skills with an individual.</li> </ul>
Transitions between activities	<ul style="list-style-type: none"> <li>• Adults supported children to separate from care givers through co-regulation strategies such as hugs, or direction to self-regulating resources such as dummies.</li> <li>• Adults gave children frequent verbal reminders of what activity was coming next.</li> <li>• Extra time was given to individual children to complete the activities required for transition at home time.</li> </ul>
Feedback	<ul style="list-style-type: none"> <li>• Adults used verbal and non-verbal feedback with children depending on their individual needs e.g. facial expression, tone of voice and physical touch to support feedback to a child who was pre-verbal.</li> <li>• Adults gave frequent general positive feedback to children e.g. "good boy".</li> <li>• Adults used simple verbal instructions to teach a child to alter their response to a task and develop their learning.</li> </ul>
Family-Professional partnerships	<ul style="list-style-type: none"> <li>• Families provided feedback to the setting through a questionnaire.</li> </ul>

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	<ul style="list-style-type: none"> <li>• Learning books, which include photos, were shared with parents to keep them apprised of their children's progress.</li> <li>• Families were supported to connect with each other through coffee mornings in the setting and social media groups.</li> <li>• The setting used home books, learning books, social media groups, the website, parent mail, open door policies and parent attendance at meetings to share information regularly. These approaches encourage bidirectional communication.</li> </ul>
Monitoring children's learning	<ul style="list-style-type: none"> <li>• Intervention plans are reviewed and adjusted every six weeks for children with individual provision plans (IPPs) and early help records. They are also updated as required in between these formal reviews e.g. when a professional is involved and sends a report.</li> <li>• Professionals' reports are read by the SENDCo who then allocates focuses and targets and shares these with the child's key person.</li> <li>• Fortnightly room meetings are held with all practitioners to discuss children's learning profiles based on daily records of observation etc.</li> </ul>

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#### **4.4.1 Inclusion is the Guiding Principle**

The overall quality rating on the ICP was 'good' (see Table 16), which means that there are emerging higher level inclusive practices within the setting. For example, adults were observed to support children's engagement in play-based learning through the application of individualised scaffolding strategies such as verbal and non-verbal prompting, modelling, commenting, or asking questions, and utilising peer support. Linked to the concept of inclusion as making adaptations to reduce barriers to participation for children, the practice related to the area 'Adaptations of space, materials and equipment' as 'excellent' (see Table 16). For example, children independently accessed and used resources and are supported by adults to extend their play and keep themselves safe. Examples of practice in these areas can be seen in Table 17.

Document analysis provided support of the espoused inclusive practice of the setting as linked to participation and equality, in the theme 'We promote social justice' and the sub theme 'Anti-discrimination' which included policy text related to the removal of barriers to inclusion. For example, "Ensuring that barriers to inclusion are identified and removed or minimised wherever possible; for example, we complete Access audit form.". However, the policies also presented the practice of using specialist settings/provision if required. This was represented in the document analysis theme 'Conceptualising SEND' and the sub-theme 'Inclusion isn't always the best option'. However, whilst seeking specialist advice and support was mentioned a number of times, children attending specialist provision due to inclusion in mainstream not being the right option was only alluded to once in the SEND policy, "For children who appear to be making little or no progress, further expertise will be sought with the view for shared care with a Targeted Provision (specialist provider)."

The practitioners' views expressed through their interviews showed a mixed conceptualisation of SEND and inclusion. Firstly, they espoused that 'SEND requires something different from the environment' in that environmental adaptations were needed to support children with SEND. For instance, Participant A reflected that SEND "can be something that, um, the environment has an impact on". Linked to this, practitioners held the view that inclusion was for all children and related to participation, in the sub-theme 'inclusivity'. For example, Participant C said, that "all children get the chance to take part in all lessons and they receive the support.". However, this was not the only view held by practitioners, and the contrasting conceptualisation that 'SEND exists within children' and that 'Inclusion isn't for all' were also seen in practitioner views. For example, Participant A reflected that

barriers faced by children with SEND “can be a direct, a direct consequence of their impairment” and Participant C felt that suitability of inclusion “depends on their level of SEND and what ... their needs are essentially”.

#### ***4.4.2 Individuality of SEND and Support***

An area for inclusive practice which came through in the practitioners’ practice and views was how individual the needs of children with SEND are and how practitioners planned for, supported and monitored these needs. In enacted practice, the ICP identified this as an area of strength within the practitioners’ practice as the item ‘Monitoring children’s learning’ was rated ‘excellent’ (see Table 16). This included practice such as intervention plans being reviewed and adjusted every six weeks. In the ICP, it was also found that ‘Adult’s guidance of children’s free-choice activities and play’, and ‘Adult involvement in peer interactions’ was ‘good’, while their ‘Support for communication’ and ‘Feedback’ was ‘between minimal and good’ (see Table 16). The observed practice related to the item ‘Transitions between activities’ looked specifically at practitioners’ support of children as they navigated transitions throughout the session. The practice in this area was rated as ‘between inadequate and minimal’. This suggests that the practitioners typically provide at least the minimum required inclusive practice to support children’s needs. However, there are areas for development in practice related to supporting transitions whilst practice goes beyond the minimum requirements when supporting learning and social development. See Table 17 for further examples of practice.

This is also identified in espoused practice, through the document analysis theme ‘We can meet children’s needs’ which included the sub-theme ‘How to guide’.

This encapsulated how legislation and processes related to SEND and inclusion were implemented. For instance, in relation to the policy “The Graduated Approach as outlined in The SEND Code of Practice 0 – 25 years (2014): Below is the SEN Support that we provide for identifying and supporting children with SEN or disabilities within our setting” which then goes on to outline in detail at the levels of APDR. The sub-themes from document analysis that ‘Individualised plans work for SEND’ and ‘EY practitioner roles are varied’ also related to how specific plans and supports were put in place for children with SEND by the practitioners across the categories of SEND. For example, “the IPP will show the short-term targets set for the child and the teaching strategies to be used. It will also indicate the planned outcomes”. This theme also includes ‘Access to resources’ as the supports identified for individual children can “include the financial implication to the Preschool i.e. additional staffing & purchase of specialised equipment, etc.”. Finally, the ‘Acting for change’ sub-theme outlined the cycles of APDR which monitor process and support change. For example, the SEND policy stated, “If the IPP review identifies that support is needed from outside services ... children will be seen in the preschool by external support services. This may lead to ‘additional’ or ‘different’ strategies”.

Within the document analysis theme ‘Conceptualising SEND’ the policies followed a model of identification and categorisation of SEND. The sub-theme ‘Variation in needs’ captured the policy documents’ references to the uniqueness and range of SEND. For example, in the SEND policy it says that “each child’s needs are unique” and outlines several specific types of need, for example, “has communication and/or interaction difficulties”. The ‘Variation in needs’ sub-theme also relates to ‘Identifying SEND’ in children and how ‘Needs change over time’. For instance, the

SEND policy stated, “These needs may be short term lived for a particular time in the child’s life or may require longer term or lifelong support. At all times we will work ... to identify need”. Related to these ideas, the sub-theme ‘Getting in early’ related to the early identification and preventative approaches to both SEND (and discrimination which will be discussed in Section 4.4.3) as they were referenced in the policies. For example, the SEND policy stated, “we recognise the importance of early identification and assessment.”

Convergence can be seen between this practice and the views of the practitioners through the theme ‘It’s not one size fits all’. In this theme, comments were clustered around three sub-themes, the pertinent ones being ‘Individualised plans work for SEND’ and ‘EY practitioner roles are varied’ which also appeared in the document analysis. In the practitioner views they reflected on the different ways they supported children with a variety of needs and used individual support plans in the setting. Participant C shared an example of how individual plans were enacted and what their role was in this,

“So her, one of her targets is to recognize objects of reference. Um, so every day we will show her a cup and a bowl for snack time. We will sign, wash hands. Um we will show her a coat and wellies and sign outside when she needs to go outside, and we will show a nappy at nappy changing time just to reinforce her understanding of those objects and the routine.”

Such individual plans were in place and perceived to be successful in supporting and monitoring the needs of the children with SEND. For example, Participant D talked

about the areas on a child's IPP, "Well, it's got the IPP sheets so I can look to see what the goals are, what is her target? What's smart measures and what's expected of the adults", and Participant C explained how "the IPPs are reviewed every six weeks."

#### **4.4.3 Equal Opportunities, Belonging and Tolerance**

Convergence of inclusive views and practice can be seen in belonging. 'Membership' in the ICP is described as the quality of practices which promote equal opportunities, belonging and tolerance (Soukakou, 2016). The ICP findings suggest that enacted practice in this area was 'between good and excellent' (see Table 16). For example, practitioners promoted participation and belonging by moving a child's wheelchair into a larger space and modelling turn taking with a peer so they could participate in shared play. Table 17 provides further examples of practice.

In addition, the policies of the setting paint a picture where equality, belonging and tolerance are valued and promoted through their espoused practice. This is represented in the theme 'We promote social justice' with the sub-themes 'Anti-discrimination' and 'Community'. For example, in the diversity and inclusion policy it stated that the setting would promote, "a welcoming atmosphere that genuinely appreciate British values, different cultural and personal perspectives, without stereotyping and prejudicing cultures and traditions on raising children, by always involving parents." And "understanding, supporting and promoting the importance of identity for all children". The policies also encouraged preventative approaches to discrimination in the sub-theme 'Getting in early'. For example, "creating an environment that pre-empts acts of discrimination so that they do not arise".



Within the practitioner views, similar beliefs and practices were championed which are captured in the theme 'The power of community'. The sub-theme of specific note here relates to 'Inclusivity', as this encapsulates the views of practitioners that there should be equality, inclusion, and participation for all children. An example of this can be seen in the following response from Participant B, "I think everybody should be treated the same way, no matter what". This links to the 'Valued' sub-theme within the theme 'Conceptualising SEND', where developing tolerance and understanding of difference was reflected on by practitioners. For example, Participant B said, "if you have like a child in a wheelchair, you'll make sure that you have room, and all the children are aware. So, it could be scary at first, but they do get used to it after a while".

#### ***4.4.4 Collaboration and Relationships***

A further area of agreement between the enacted and espoused practice and beliefs of practitioners was in working collaboratively. In the ICP, the item 'Family and professional partnerships' was rated 'between minimal and good' (see Table 16). This means that the enacted practice was at least the minimum expected for inclusion, with aspects of good practice. For example, the setting used home books, learning books, social media, parent mail, an open-door policy and parent attendance at meetings to help share information regularly with parents in a bi-directional way. Further examples of practice can be seen in Table 17.

The policies support this focus on collaboration. The theme 'Working together gets the job done' includes how the practitioners work with a range of other people including parent professionals and children through the sub-themes 'Professional

partnerships', 'Parents as partners' and 'Including the child'. For example, the SEND policy mentioned how "the child's views, feelings and wishes will be sought whenever possible" and practitioners would "work alongside each child's parents, key worker and any relevant professionals to share information, to identify need and help the child and their family access the support they need."

The continuity of collaboration and relationships between practice and views of practitioners continues into the themes from practitioner interviews. 'The power of community' theme included aspects of espoused collaborative practice through the sub-theme 'Relationships'. This sub-theme encompassed the practitioner views and reflections on working in partnership with parents, building good relationships with parents and children experiencing positive relationships with practitioners and each other. For example, Participant D talked about working with parents, "Working alongside parents is brilliant because they can help, understand what's happening and then you're working with them so that they're included as well, and they feel valued as a parent.". In relation to children, Participant A shared how relationship building started at visit days to the setting "the children then start to make relationships with, with the staff whilst their parent is still there".

However, the practice related to relationships was inconsistent across the findings from the ICP and document analysis. The practitioners' views, therefore, aligned with the document analysis (and espoused practice), but not the enacted, practice in its entirety. For example, the ICP included the item 'relationships between adults and children', which assessed the quality of social interactions between practitioners and children (Soukakou, 2016). This item was rated 'between inadequate and minimal' which means that some practice was at the minimum

expected quality or above on the ICP, but some practice fell below. Practice within this item included practitioners responding to children's emotional needs in an individualised way, such as co-regulating with hugs or movement. See Table 17 for further examples.

#### ***4.4.5 Professional Development***

The theme 'We continue to develop as professionals' was identified from the document analysis codes. This theme related to how practitioners learnt and developed their skills and knowledge. The sub-theme 'Formal learning' contained the policy content which referred to the access and learning from provided training, including SEND specific training and qualifications such as the SENDCo award. This sub-theme can be seen in the example, "[SENDCo] and [Manager] both hold a Level 3 qualification in Special Educational Needs and have undertaken training in relation to specific needs" and "attend relevant training to support individual children". 'Independent study' was also a sub-theme related to how knowledge and skills were developed but this related to practitioners' own research. For instance, "we will research relevant publications" to aid contributions to children's plans. Professional development was not related to items observed within the ICP.

Whilst not within the professional's perceptions of SEND and inclusion as constructs which formed the results related to practitioner views in this comparison between beliefs and practice (see Section 4.2), the analysis of their interviews did identify a theme related to professional development; the 'Importance of professional development'. This interview analysis also identified the sub-themes 'Formal learning' and 'Independent study' which directly match to the document analysis (see Section

4.3.2). For example, Participant A shared, “I think the SENCO course did help us with identifying in using different tools” and that learning could also “be reading up on stuff”. However, the practitioners also spoke about other ways that professional development occurred, through the sub-themes ‘Practical learning’ and ‘Sharing experience’. For example, Participant B reflected on learning from the other members of staff “you can always ask a member of staff.”. These themes do not match as directly as the other sub-themes to the espoused practice represented in the document analysis, but link to, and expand on, the overall concept of staff continually developing and learning.

#### **4.4.6 Summary**

There are several areas where the enacted and espoused approaches of the setting and practitioners, through their policies and practice, align with the beliefs and self-reported practices of the practitioners, through their interviews. These were related to a positive experience of inclusion overall as well as approaches which bring about inclusive education for children with SEND such as adapting the environment, the individual needs and supports for children with SEND, and collaboration and relationships between adults. There is also convergence on some of the concepts underlying inclusive ideology including equal opportunities, belonging and tolerance. There was also an area in document analysis which did not relate to practice, namely ‘We continue to develop as professionals’. However, this did relate to the practitioners’ views.

Areas where practitioners’ practice and views did not align were identified, but these were fewer in number. For instance, the views of practitioners showed that

they held a view of SEND and inclusion which was not inclusive in all instances. In addition to this, the relationships and collaborative ideas discussed in policies and practitioner views regarding their relationships with children were not as effectively enacted in practice as the relationships between practitioners and families and other professionals.

## **CHAPTER 5: DISCUSSION**

### **5.1 Introduction**

This chapter will summarise the research findings outlined in Chapter 4, with reference to each RQ and, in the spirit analytic generalisation, expand on this to consider how the findings of the current research relate to the existing literature in the field, including theories of IECE. This will draw on the literature reviewed in Chapter 2, as well as additional literature where findings have been identified which go beyond the literature review of this research. The limitations of the current research will be discussed leading to implications for future research. Implications for practice will also be detailed, with special consideration given to the practice of EPs. The chapter will end with a conclusion to draw together the key messages of this thesis.

### **5.2 Discussion of RQ1: What views of inclusion and SEND do EY practitioners hold in an inclusive English preschool?**

The findings suggest that EY practitioners in an inclusive English preschool held varied perspectives of inclusion and SEND. Despite this, these views were clustered around some consistent principles of inclusion and were generally positive in nature. A summary of the findings (see Section 4.2 for more detail on the findings) alongside consideration of the existing literature is outlined below.

The practitioners' views of SEND were seen through the themes 'Conceptualising SEND' and 'It's not one size fits all'. These views included both the individual and social models of disability, with practitioners talking about SEND being part of the child, and something they were born with, as well as barriers due to the

environment which should be removed. The finding that practitioners hold a range of views related to SEND is seen in existing research. For instance, Thornton & Underwood (2013) found that amongst early childhood educators in Canada, both individual and social perspectives of disability were held. Such mixed perspectives are perhaps understandable given that the SEN legislation and debate in England has purported both a social model (of barriers that can be removed through adaptations of the environment) alongside SEN being about child characteristics, categorisation of needs and medical diagnosis (which aligns with the individualist models) (Norwich, 2016). Therefore, Norwich (2016) suggested that SEN practice in England did not match the ideology, although Hornby (2015) suggested that this was actually the desired approach for inclusive educational practices. He proposed that inclusive educational practices should combine the approaches of 'special education' and 'inclusive education' to "ensure children with SEND are effectively educated in either special or mainstream facilities .... In order to achieve their maximum inclusion and full participation in the community when they leave school." (Hornby, 2015, p. 251). This creates a distinction with social inclusion, which Hornby suggests is often falsely conflated with educational inclusion (2015).

This dichotomy can be seen in the findings of the current study as practitioners also spoke about the individuality and range of needs they experienced in the setting and how these were assessed and identified. Therefore, SEND was viewed individually by practitioners which links with how individual plans were seen as a requirement to meet the needs of children within the policies of the setting and practitioner views. Existing research found that whilst EY practitioners purported to be inclusive in their approaches, they focused on individual characteristics of children

when planning to support needs (Roberts & Callaghan, 2021). Furthermore, studies also outlined how to apply practices to the individual needs and strengths of a child to ensure inclusion and meet children's needs (e.g. Hamilton & Vermeren, 2016). However, in contrast to the current findings, some early childhood educators have been found to view specificity of needs as detrimental to consistent inclusive practice, due to the fixed views about SEN it elicits (Hamilton & Vermeren, 2016).

The findings also give insight into how the practitioners viewed inclusion as related to the theme 'The power of community' which presented the ideology and self-reported practice of practitioners which relate to an inclusive ethos. They talked about aspects related to community such as equality of access for all children, development of an understanding of individual differences, relationships and belonging, and how children with and without SEND learnt from each other. This adds to the emerging evidence that recent research into practitioners' views of inclusion show an understanding that inclusion means participation for children and not just integration (e.g. Roberts & Callaghan, 2021). This is in line with research into inclusive practice which has long encouraged approaches to support children's participation within education, not just presence (e.g. McCormick et al., 2003).

The current study also identified how practitioners reported positive feelings about their work through the theme 'Recognition of a job well done'. They spoke about having confidence in their skills to support children with SEND, recognising when they were doing a good job. Linked to this, in the theme 'Conceptualising SEND', practitioners' also valued working with children with SEND. They viewed inclusion as positive approach and of benefit to all children through reciprocal learning and development of tolerance and understanding of difference. This adds to



the body of evidence in EY educator views of inclusion which suggests that practitioners believe inclusion leads to:

- Learning and development for all children (Hamilton & Vermeren, 2016; Leatherman, 2007) as well as specifically for children with disabilities (Mitchell & Hegde, 2007).
- Social benefits for children with disabilities (Thornton & Underwood, 2013).
- Children with and without SEND being viewed in the same way (Leatherman, 2007).

Conversely, practitioners in the current research also conceptualised inclusion as not always matching best practice for children with SEND. Some practitioners did report feeling that not all children's needs could be met within the mainstream setting in the theme 'Falling short' within the sub-theme 'Inclusion isn't for all'. This aligns with a previous study of preschool educators in the UK, who found that although the general view of inclusion was positive, educators had provisos which related to an individualised perspective such as severity of needs, impact on other children and resources such as adult ratios (Clough & Nutbrown, 2004). This 'yes...but' factor can be seen in further studies of EY educator views of inclusion where positive views are held, but this is not seen as a panacea that can support all children's needs in mainstream education (Mitchell & Hegde, 2007; Roberts & Callaghan, 2021). The nature and severity of children's needs was also found to influence teacher views of inclusion in England outside the EY (e.g. Avramidis & Norwich, 2002).

### 5.3 Discussion of RQ2: What are the perceived barriers and facilitators of effective inclusive practice for children with SEND in an inclusive English preschool?

The practitioners' interviews identified both barriers and facilitators to successful inclusion of children with SEND in their setting. These are summarised in Table 18 and further detail can be found in Section 4.3.

**Table 18**

*Perceived Facilitators and Barriers to Inclusive Practice from Current Research*

*Findings*

Facilitators	Barriers
<p>Communication facilitated inclusion, including listening and information sharing between practitioners and parents and between practitioners. This was identified in the theme 'communication is key'.</p>	<p>Keeping all children safe was a barrier to inclusion, including the challenge of safety related to behaviour and health needs, and the difficulty of coping with children's behaviour in the setting. This was identified in the theme 'the safety problem'.</p>
<p>Professional development facilitated inclusion, including learning through formal training, on the job practical experiences, independent study and having expertise shared between professionals. This was identified in the theme 'the importance of professional development'.</p>	<p>Lack of resources was a barrier to inclusion, including access to funding, availability of training, recruitment of practitioners and timely support from specialist professionals. This was identified in the theme 'falling short'.</p>
<p>Recognition of doing a good job facilitated inclusion, including acknowledging when a good enough job was done, and being confident in skills and role. This was identified in the theme 'recognising a job well done'.</p>	<p>Lack of willingness of settings and practitioners to include children with SEND was a barrier to inclusion, including stopping access to other mainstream settings for children and increasing numbers of children with SEND in the setting itself. This was identified in the theme 'falling short'.</p>

Some of the identified facilitators and barriers to inclusion within the current study add weight of evidence to the existing literature in this area which was identified in the literature review (see Chapter 2). This includes communication, professional development, and resources.

Communication, including listening and information sharing between parents, practitioners and specialist professionals, was viewed as supporting inclusion of children with SEND within the current study. Given the positive view towards inclusion seen in the current research, the descriptions of practice which involves parents in communication may be expected – as there is the evidence that early education teachers who have positive attitudes towards inclusion facilitate parental involvement (Leatherman & Niemeyer, 2005). The findings add further evidence to the existing research that parent involvement is believed to be important by preschool educators, and when there was a lack of parental support this was a barrier to inclusion (Clough & Nutbrown, 2004). The current study did not identify challenges of communicating with parents which were voiced in some prior research, such as differing parental expectations or views to that of staff (e.g. Johora, 2021). This suggests that the practice in the current setting of seeing parents as partners and engaging in two-way communication was helpful in overcoming this barrier.

The current findings also point to communication between professionals as a facilitator. This is echoed in existing research where practitioners valued the support they gained from working with specialist professionals (Roberts & Callaghan, 2021) and approaches to identify children's needs and appropriate support recommended collaborative planning processes (McCormick et al., 2003). Literature had also identified lack of shared understanding between teachers as a barrier (Anderson &

Lindeman, 2017), but this was not seen in the current study so may reflect specifics of the setting that Anderson and Lindeman researched (e.g. that it was a blended teaching model with a shared classroom for specialist and general education teachers), which created more challenges in developing a consistency.

Learning through professional development was identified as a facilitator in the current study, and so lack of access to training was a barrier. The findings broke this down further into learning through formal training, on the job practical experiences, independent study and having expertise shared between professionals. Each of these learning approaches may have its own merits. Developing through practice (e.g. Leatherman, 2007), specific training courses (e.g. Clough & Nutbrown, 2004), and consultation with professions (e.g. Bryant, 2018) have all been previously identified as supports to practitioner attitudes, confidence and practice in inclusion. The findings that practitioners undertook independent study was also seen in Leatherman (2007), but in this case it was suggested that this was necessitated by the lack of access to formal training. As this problem of access to training was seen in the current findings, it suggests that this relationship could again be at play between the barriers and facilitators related to professional development.

Lastly, the facilitator of inclusion identified in the current research was recognition of a job well done including practitioners acknowledging good work, receiving praise and being confident in their role and skills. Existing research suggests that practitioners can lack feelings of confidence and competency in including children with SEND (Frankel, 2004; Roberts & Callaghan, 2021) and that early childhood teachers needed moral support from their managers and peers when enacting inclusive practice (Leatherman, 2007). However, in the current findings,

specific recognition of a 'Good enough' job (rather than perfect job) suggests that some pragmatism and recognition or praise of what is working is helpful in supporting inclusion and managing the feelings of confidence and competence for practitioners.

Lack of resources was identified as a barrier to inclusion from the perspective of the practitioners, including access to funding, specialist professionals and recruitment of practitioners. Therefore, the findings of this study add to the body of evidence that physical resources are important to support inclusion (e.g. Mitchell & Hegde, 2007) as well as a barrier of accessing external professional support when required (Roberts & Callaghan, 2021). Funding was also specifically mentioned within the current research. Whilst this was identified in a review of one researchers experience in the field across Australia, Canada and the USA, where funding was difficult to access and inequitable leading to inconsistencies of provision (Frankel, 2004), this may also reflect the current political and economic climate in England (given educational funding sits within a wider financial crisis model where the focus is on funding cuts to ensure economic recovery/reduction of debt leading to budget cuts for education and impacting on reduction in SEND, staffing and resource spending) (Rolfe, 2019). This suggests that whilst some of the existing studies give an international or early 2000's perspective, resources persist as a perceived challenge for practitioners in the English EY.

The perceived challenges of supporting children with particular needs can further be understood through the findings that safety was a barrier to effective inclusion. Clough and Nutbrown (2004) found that behaviour of children was perceived as the most challenging need for preschool educators in the UK. Other studies identified how practitioners were concerned with the 'disruption' to children's

learning from inclusion of children with SEND (e.g. Mitchell & Hegde, 2007). The current findings suggest that we can further understand this perceived challenge as due to concerns over safety issues due to behaviour, alongside practitioners not feeling they know what to do to support the child when behaviour is challenging.

Finally, the barrier identified in the current study of 'Inclusion isn't for all' to or belief in inclusion of children with SEND can also be seen in previous research. For example, the 'yes ..but' factor identified by Clough and Nutbrown (2004) in UK settings can still be seen 18 years on in the views of practitioners in the current study, with the type or severity of need being a factor in believing some children would be better educated in a specialist setting. Furthermore, the findings from Canada that setting directors were found to use disability as a reason not to accept children at their preschools (Killoran et al., 2007) was a reported experience at other settings within the current study. The impact of this was illuminated by the current study as practitioners perceived that those settings which were inclusive became more popular with families of children with SEND and this led to increased numbers of children with SEND in the setting. This has implications for setting demographics and resources.

#### **5.4 Discussion of RQ3: How do EY practitioners' views of SEND and inclusion relate to the inclusive practices of an inclusive English preschool?**

The enacted and espoused practice (assessed in this study via the ICP and examination of setting policies) of practitioners was closely aligned to their views of SEND and inclusion. Several areas were identified which represented this cohesion including:

- Inclusion is the guiding principle,
- Individuality of SEND and support,
- Equal opportunities, belonging and tolerance,
- and collaboration and relationships between practitioners and parents.

The area of professional development was also identified as linking between practice and practitioner views. However, this link was through document analysis and practitioner views on barriers and facilitators to SEND rather than perceptions of inclusion and SEND itself. One area was identified where practice and views diverged: relationships between adults and children. These findings are discussed in detail in Section 4.4 and will here be considered in summary with specific focus on how they answer the RQ and relate to prior research.

Inclusion was found to be a guiding principle to the setting and its practitioners through action, policy, and their views. The practitioner views demonstrated this through their belief that inclusion meant equality and participation for all children (in the sub-theme 'inclusivity'), whilst identifying times when this principle might not be appropriate or feasible (in the sub-theme 'inclusion isn't for all'). This idea that inclusion was the ideal whenever possible was also seen in the setting policies. The sub-theme 'Anti-discrimination' included guidance from the policies related to the removal of barriers to facilitate inclusion for all, whilst also identifying that 'Inclusion isn't always the best option' and that some children would require specialist provision to meet their needs. The principle of inclusion was also enacted through the 'good' quality of inclusive practice that was observed. There were many examples of practice in the ICP which demonstrated how practitioners adapted the environment to overcome barriers or accommodate individual differences for children. Prior research

in other small sample studies has found that positive views in supporting the inclusion for all linked to inclusive educational practices (Leatherman & Niemeyer, 2005) and that more limiting beliefs about children with SEND led to ineffective inclusive practice (Johora, 2021). However, the current research presents a balance across practitioner beliefs and practices related to inclusion which have previously been presented as separate and opposing approaches (e.g. as interventionist and pathognomonic beliefs) (Thornton & Underwood, 2013). This balance of views is also consistent with national policy on SEND and inclusion (e.g. DfE & DoH, 2015) and the recommended understanding of inclusive education practice as distinct from inclusive practice (Hornby, 2015). This indicates that after over 15 years of embedding the policies into practice, the bidirectional relationship between policy and practice suggested by Harwood (2009) has occurred (where interpretation of policies feeds down into practice, and practice feeds back into policy construction).

Practitioners' views of SEND and how to support children with SEND was closely linked to seeing SEND and the roles of practitioners in supporting children with SEND as varied, alongside the use and success of individual plans. These were described in the theme 'It's not one size fits all'. This coincided with their espoused practice in their policies encapsulated in the theme 'We can meet children's needs' which linked to process and legislation, APDR approaches, individual plans, and practitioner roles in supporting SEND. Furthermore, enacted practices (as per the ICP) related to monitoring learning, guiding learning, and supporting social interactions were of good or excellent quality. There is much in the existing research to support the perception that individual needs must be understood, planned for, given effective support, and monitored. For example, planning approaches, such as



the ecological planning matrix, identify individual needs of the child before identifying how these needs can be met to support access to the activities of the setting (McCormick et al., 2003). This is also seen in alternative planning processes (e.g. Filler & Xu, 2006) and practitioners reported practice related to SEND support (Roberts & Callaghan, 2021). The specific consideration of the practitioner's role and how they support children with SEND is also highlighted in case studies which have warned against simply assigning a child one to one support, but instead identifying the pedagogical approaches required to facilitate the child's participation in educational provision (Johora, 2021; McCormick et al., 2003).

Equal opportunities, belonging and tolerance were a further area of consistency across practitioners' practice and views. In practice, the practitioners exhibited 'good' to 'excellent' quality of practice related to this area in the ICP item 'membership'. They also had strong links to these ideals through their policies which was represented by the theme 'We promote social justice' and their views through the theme 'The power of community' and sub-theme of how SEND is 'Valued' in the 'Conceptualising SEND' theme. There is some evidence in existing research that inclusion of children with SEND in mainstream early years settings led to the development of tolerance and understanding of difference amongst children who did not have SEND (Anderson & Lindeman, 2017). In addition to this, inclusion promoted practitioners to take an equal view of children (Leatherman, 2007) and increased the social development of children with disabilities (Thornton & Underwood, 2013).

The partnership that practitioners and parents shared was clear through the practice and views of practitioners. There were examples of a good quality partnership through the ICP (although overall the rating on this item was between

minimal and good) and the policies included this partnership which was identified with the theme 'Working together gets the job done'. The views of practitioners also linked directly to working with parents through partnership and building relationships in the theme 'The power of community'. This supports, and updates to the current legislative context, the findings of existing UK research that parent involvement is important to inclusion (Clough & Nutbrown, 2004) and that communication with parents is a key component of inclusive practice in the EY (Harwood, 2009).

Conversely, relationships between adults and children did not show this cohesion between enacted practice and practitioner views. This came through the practitioners' views in the theme 'The power of community' where relationships, including those between setting practitioners and children, were discussed. This was also reflected in the document analysis, within the themes 'Working together gets the job done' where the sub-theme 'Including the child' included practitioner interactions with children and how their voice is gathered and used within the setting. However, the ICP revealed that whilst some excellent practice occurred in 'Relationships between adults and children' the quality of this practice was between 'inadequate' and 'minimal'. This suggests that the espoused belief and aims related to relationships between practitioners and children were not fully enacted in practice. The literature review did not identify studies which found a similar concern regarding practitioner-child relationships. However, it is a widely understood right that children should be included in matters that relate to themselves (e.g. Lundy, 2007; UNICEF, 1990). Specifically in the context of SEND, child voice has been identified as helpful in developing inclusive practice (Nutbrown & Clough, 2009). Furthermore, practitioners responses to children in quality EY settings were found to be respectful,

engaged and positive toward the children and their emotional needs, and that more highly effective settings included more social interactions between practitioners and children (Siraj-Blatchford et al., 2002). There can be challenges to enabling participation of young children with SEND, but due to the positive impact of effective relationships and communication with children these challenges should be overcome (Nutbrown & Clough, 2009).

Practice related to professional development was espoused through the document analysis in the theme 'We continue to develop as professionals'. However, this was not identified in enacted practice through the ICP. This may be because this tool sought to rate the quality of inclusive practice and did not include professional development within its focus items rather than not being a part of practice, but this cannot be established from the findings. Also, the practitioner views on the concepts of SEND and inclusion did not relate to this theme, although their views on the facilitators and barriers to inclusion did. This was through the theme 'Importance of professional development'. A discussion of the findings related to this theme can be found in Section 5.3. In addition to this discussion, the findings from the document analysis suggest that 'Independent study' is undertaken as a form of professional development due to its own benefits (i.e. intentionally). This is contrary to the suggestion from the Leatherman (2007) that independent study is undertaken due to a lack of formal training opportunities. In fact, both the document theme 'We continue to develop as professionals' and the interview theme 'Importance of professional development' suggest that intentional professional development can take many forms which all facilitate learning for practitioners.

Overall, limited research was identified from the literature review in Chapter 2, which related practitioner views to actual, rather than self-reported, practice. Furthermore, that which exists often claimed to be studying inclusion when, after investigation of their sampling and inclusion criteria, the settings were in fact integrative (Mitchell & Hegde, 2007). Some studies tried to address this by using self-report of inclusiveness (e.g. Leatherman, 2007) but the current research goes further by seeking to quantify and describe this enacted inclusive practice. The present findings thereby extend the existing literature base and offer an example of how good quality inclusive practice in an English preschool relates to practitioner views of SEND and inclusion.

## **5.5 Limitations**

The current research, and any implications, should be considered in light of its limitations. The limitations related to this study are discussed in detail below.

### ***5.5.1 Limitations to Study Design***

There are a number of limitations which should be considered, related to the study design. Firstly, a single – rather than multiple – case study design was undertaken. Within the practical scope of the current research a single case study, rather than multiple case study, enabled three sources of evidence to be gathered through mixed methods which supported data triangulation and a greater depth of knowledge about how the theory of IECE applied to the case. However, Yin (2018) identifies that multiple case studies have the capacity to “address more complicated

research questions and collect a richer and stronger array of evidence” (p.63). This can be through providing more evidence which increases internal validity of the findings and allows for direct replication within the study. Therefore, having a single case study design in the current research will have reduced the aspects of research design which help to establish rigour and quality; such as validity and replicability.

A key aspect of case study design is the definition of and identification of the case. This is supported through the development of inclusion and exclusion criteria for the case. See Table 7 for the inclusion criteria of the current study and the rationale for these. These criteria were developed with the aim of identifying a case which provided an example which reflected a real-life example of the context of Countyshire LA (e.g. an exemplary case) and was inclusive rather than integrative to avoid a limitation commonly found within the existing research base. However, analytic generalisations were also drawn from this case study specifically regarding the application of adapted ecosystems model of IECE (Bartolo, et al., 2019) later in this chapter. Therefore, observance of the same case definitions as the research which developed the theory is preferred, in order to ensure a rigorous design which supports the reliability and generalisation of findings (Yin, 2018). The current study’s use of a different definition for inclusive practice to Bartolo et al.’s (2019) research, and a criteria for being of average size for the area, rather than its “exemplary” (Bartolo et al., 2019, p.5) nature as an example of inclusive practice would have provided a more rigorous inclusion criteria.

A further limitation to consider within the current research design is that of the selection of the case. Similar to existing research in the field (e.g. Leatherman, 2007) the selection was purposive and included voluntary participation, which means there

is a bias inherently within the sample due to it being chosen as a good practice example of inclusion. This may also mean that the practitioners who participated are more interested in, or supportive of, inclusion. This is important as self-selection bias can impact findings and reduce the generalisability of them (even to the wider population of the practitioners within the setting) due to the case and participants not being representative of the population (Breakwell et al., 2020). However, within this research, the voluntary participant sample did end up representing a range of roles, qualifications and years of experience within their characteristics (see Table 8). The selection of an exemplary case also involved the recommendation of one EY advisor and some of the limitations of this, including possibly missing other relevant settings or the advisor's view of inclusion being different to other professionals, are discussed in Chapter 3. However, practically this was the only professional who came forwards to offer help in recruitment. As a mitigation to some of these limitations, although the ICP measure was not initially intended for the purpose, data from the tool did help to identify that Apple's Preschool was effective in IECE practices as had been identified by the EY advisor. Furthermore, whilst two settings were initially identified by the EY advisor, they did raise concerns regarding a change of leadership at one of the settings which meant the advisor did not feel fully confident in what inclusive practice would be like within the setting in question at the current time.

Finally, as discussed in Chapter 3, the current research focused on practitioner participants. By doing this, the participant group may have missed nuances in the enactment of inclusion from the points of view of other stakeholders e.g. parents and children. This lack of participation of the whole community is also an ethical issue and contrasts with the ideology of the phenomena under study:

inclusion. For instance, working collaboratively with parents and other professionals was viewed highly by practitioners but the current research was not able to reflect on this collaboration from the views of the parents or professionals involved. A broader representation of stakeholders would also have gone some way to replicate the contributions to Bartolo et al.'s (2019) research which alongside pairs of practitioners and academics, also included stakeholders such as policy makers and families within their data collection. However, their participants were described as a practitioner (who included teachers, leaders and inspectors) and academic pairing who collected the data within the chosen settings in their country. In the current research's single scale case study design, having practitioners from within the setting as participants therefore fitted more appropriately with the study design.

### ***5.5.2 Limitations to Study Methods***

There are limitations regarding the tools used to collect data in this study; these will now be discussed. The ICP was chosen as a tool as it was designed specifically for the profiling of quality of inclusive practice for children with disabilities in EYs settings. However, the novel nature of this tool, means that there is limited research completed to consider its validity, reliability and application. Meanwhile, that which has been conducted includes the researcher who developed the tool and so is inherently at risk of bias. Within the current research, the ICP was completed by only myself as a sole researcher, on one morning. Whilst this is in line with the guidance in the ICP manual, this snapshot and single researcher approach means that behaviour may have been missed as it was not observed or identified. Also, whilst the ICP was found to have good inter-rater consistency in the pilot studies

(Soukakou, 2012; Soukakou et al., 2014) I had not undergone the ICP training, which is advised in the manual. Therefore, although I spent time familiarising myself with the tool, and had research experience of using other similar tools, this may have led to issues of reliability and validity. Furthermore, the ICP tool used for the profiling of practice had a strict scoring system. This meant that on two items the score gave a low rating despite some descriptors at higher quality ratings being met within the items. While this gave a quantifiable quality score it offered limited insight into what this meant. Some narrative observation notes were kept as part of the data collection procedure for the ICP, but detail of these was not included in final profile, as per the ICP manual. However, this was included within my own reporting of the ICP findings (see Table 17) in an attempt to mitigate the limitations of the profile scores alone being reported.

Within the interview schedule, some questions require reflection as a researcher as to the extent to which they were worded to meet the research question goals. The questions in the interview schedule regarding the practitioner's views of SEND and inclusion were asked alongside examples of definitions of these terms. Whilst this sort of closed question is not uncommon in interviews, it would be more typically aligned to a structured interview protocol. This type of questioning leads to data which is described as,

“easily quantified, ensures comparability and consistency of questions and response elements across respondents, and makes certain that the necessary topics are included.” (Breakwell & Timotijevic, 2020, p.225).



However, in semi-structured interviews the researcher can “enter into a dialogue with the interviewee” (May, 2011, p.134) to seek further detail or clarification, and open-ended questions are helpful to provide more scope for interviewees to share what they would like to. In this approach, “comparability across respondents is sacrificed for the sake of individual relevance” (Breakwell & Timotijevic, 2020, p.226). Within the current study’s context of collecting data to answer RQ1, ‘What Views of Inclusion and SEND do EY Practitioners Hold in an Inclusive English Preschool?’, open-ended questions about practitioners’ views on inclusion and SEND would therefore have fitted more closely to the aim of eliciting the views of the practitioners. There would be a reduced chance of leading them with the question wording and there was no aim to quantify or require uniformity in their responses.

A further area of research methodology which highlights some limitations in terms of the rigour and quality of the current research is the reliability and validation of data collection and analysis. For example, whilst measures were undertaken to support the validity and reliability of the current research (see Section 3.8) only a single researcher completed the ICP tool and coded the data from the interviews and policies through RTA. This means that there was no opportunity for corroboration between researchers to ensure that the findings were as reliable as possible. Furthermore, the piloting of the semi-structured interview schedule involved only one pilot interview and this constrained the opportunity to ensure that the interview schedule was an effective operational measure for the concepts of the views on inclusion and SEND of practitioners.

### ***5.5.3 Limitations Related to my Impact as a Researcher***

There were also limitations to the current study which relate to the impact of myself as the researcher. Firstly, as a novice research interviewer, I reflected through my research journal at the time of analysis that my own skills as an interviewer may have impacted the data collected through this method. For example, accepting the responses given to the question in the interview schedule, and not delving further into why practitioners gave these responses, or missing opportunities to prompt them to elaborate on their responses. This means that key information could have been missed which would have added to the richness of the data about how certain practices were brought about, or the implications of views and beliefs. This in turn will have limited the findings and the conclusions that could be drawn from the data. As the data collection procedure of the interviews had to be condensed into half a day in the setting (as timescales had been significantly impacted by cancellations of data collection sessions due to COVID 19 restrictions), the interviews were also conducted back-to-back. This gave me little opportunity, beyond piloting the interview schedule, to reflect on each interview and develop my interview approach.

In order to consider my impact as a researcher on the current study, and to support reflection through the analysis process, I kept a reflective journal. The entries made to this journal supported me to keep track of the processes involved in the analysis of the data, as well as identify areas of strength and weakness in my analysis, and be reflexive about how my own experiences, values and beliefs were impacting on the analysis. However, there were strengths and limitations even within my application of this research tool. For instance, an area of weakness in the application of the reflective journal to the current study was that I did not keep the reflective journal in detail throughout the whole process. Instead, for the stages of

planning, design and data collection my notes from my own thoughts and supervision conversations were not formalised into a reflective journal but were more descriptive of my thinking. This meant that the crucial element of reflection and reflexivity was not fully explored and so the impact I had as a researcher, on the current study during these stages, cannot be clearly understood by myself or others reading my work.

## **5.6 Implications**

### ***5.6.1 Implications for Research***

The limitations of the current research proposed in Section 5.5 provide an opportunity to identify implications for future research which addresses these limitations.

Future researchers should look for opportunities to explore the views and practice of practitioners in a wider range of English EY settings to gain a rich picture of views and practice and better understand the relationship between differing practitioner views and inclusive practice. This would help to mitigate some of the possible self-selection bias by increasing the participant group size. Practitioners could also be sampled in a more randomised way to try and reduce the likelihood of self-selection bias impacting on results. For example, future researchers could randomly identify members of the whole practitioner population who meet the inclusion criteria to be approached. Alternatively, the practitioner population could be grouped by a characteristic (e.g. years of service, level of qualification, role etc.) and then a randomly identified practitioner from each group could be approached to

participate. However, as practitioners would be able to voluntarily participate, this would still contain some issues regarding bias as to why they are volunteering.

Future research should also aim to cover a greater scope than this study in sources of evidence by drawing together the views of parents, children, and specialist professionals within research into inclusion of preschool children with SEND. This will add additional sources of evidence to support data triangulation and so improve reliability and construct validity in the study. Furthermore, it will make the research more participatory and provide insights from other viewpoints.

I would recommend that future researchers using the ICP, familiarise themselves well with the ICP before using it so they are aware of what sort of data they are looking out for, and if possible, attend training in using the ICP to increase reliability of its use. This could also be improved by additional researchers acting as data collectors, so that decisions on quality ratings could be made across researchers to improve reliability and validity in the measure's data. In addition, when reporting findings of the ICP I would recommend that researchers, and practitioners using the tool for development purposes, report their narrative data alongside the quality rating profile as this helps to bring to life what is meant by these ratings. This would provide a richer picture of what enacted inclusion practice looked like in the setting and so greater interpretation of how this relates to the espoused practice and views of practitioners may be possible.

Similar to the ICP recommendation, it would be beneficial for researchers using semi-structured interviews, document analysis and RTA to increase triangulation methods. This may include sharing the transcripts of interviews with participants prior to analysis to ensure they feel the transcripts represent their views,

asking participants to review drafts of the study findings and including a second researcher in analysis to ensure consistency of approaches and findings within this process. This would improve the reliability of the findings and conclusion and validity of the findings presented by researchers from the measures used.

One of the further limitations was related to the impact I had as a researcher due to my researcher biases and novice skills. I would recommend that future researcher who are relatively new to the use of semi-structured interviews consider ways to mitigate the effect this will have on their design, data and analysis. For example, ensuring that the procedure allows time for piloting the interview schedule with more than one participant and that there is time between the piloting and data collection when the researcher can reflect on their skills as an interviewer as well as the data obtained. Time within the procedure between interviews would also be beneficial to be able to engage in a reflexive and reflective process which could identify how the researcher is impacting the interviews through their own positionality and skills and develop ways to address this in future interviews. A reflective journal kept throughout the study design, data collection and analysis phase which includes reflexivity would also help the research to be more aware of their own positionality and how it was impacting the research. Whilst researcher positionality cannot be separated from the research, this would allow some biases to be addressed.

Finally, the strength of this study, that it focused on inclusion and not integration, should be continued through further studies to build on the evidence base for inclusive (not integrative) practice.

### **5.6.2 Implications for Theory**

As part of analytic generalisation, the findings from the current study were used below to deductively map onto to the findings of existing theories within the literature on IECE discussed in Chapter 2. Yin (2018) describes this process as pattern matching. The aim of this comparison is to identify where the current study findings concur with the theories, and where the findings offer additional or contradictory insights.

The adapted ecosystem model of IECE by Bartolo et al. (2019) was the main theory considered in relation to the current findings as through the literature review (see Chapter 2) this was identified as the most robust and holistic theory of IECE reviewed. Bartolo et al.'s model contains five dimensions which were used as deductive themes for pattern matching:

1. outcomes of inclusive education,
2. quality processes within the IECE setting,
3. supportive structures within the IECE setting,
4. supportive structures within the community,
5. and supportive structures at regional/national levels.

The findings identified within the analysis for RQs 1-3 were then mapped onto these five themes. The mapping was concerned with both where the current study findings related to the themes of the model, and where they offered alternatives to the model (i.e. the findings did not fit with or added novelty to the model's themes).

The findings of the present study map closely to the adapted ecosystem model of IECE (Bartolo et al. 2019) as presented in Table 19.

**Table 19**

*Mapping the Current Research Findings to the Adapted Ecosystems Model of IECE (Bartolo et al., 2019)*

Dimension of model	Related findings from the current research which support the model	Related findings from the current research which offer an alternative narrative to the model
1 – Outcomes of inclusive education	<ul style="list-style-type: none"> <li>• The ICP, policy and practitioner views converged on an understanding and enactment of inclusion which was related to belonging, participation, and equality of access for all.</li> <li>• Practitioners felt that children learnt from each other in inclusive education.</li> </ul>	<ul style="list-style-type: none"> <li>• In the policy and practitioners’ beliefs there was recognition that this would not be possible in a mainstream setting for all due to the individual children’s needs.</li> </ul>
2 – Quality processes within the IECE setting	<ul style="list-style-type: none"> <li>• Policies and practitioner views showed a commitment to including children within decisions about their provision.</li> <li>• The ICP, policy and practitioner views closely aligned in identifying the individualisation of assessments, understanding needs, planning for, implementing provision, and monitoring this provision.</li> <li>• The ICP and practitioner views identified how children learnt from each other and from adults in the setting. For example, through adults guiding children’s free choice activities and adults supporting communication.</li> </ul>	<ul style="list-style-type: none"> <li>• Adult to child relational practice and adults’ support for transitions within the setting was profiled to be of a quality just below the minimum expected for inclusive practices on the ICP.</li> </ul>
3 – Supportive structures within the IECE setting	<ul style="list-style-type: none"> <li>• The ICP, policy, and practitioner views converged around working with parents as partners and sharing information with them.</li> <li>• The ICP, policies and views identified how education should be made accessible for all children by removing barriers.</li> <li>• Practitioners’ roles included supporting different aspects of development and their practices and views represented the use of individualised planning.</li> </ul>	<ul style="list-style-type: none"> <li>• Adult to child relational practice was observed to be of a quality just below the minimum expected for inclusive practices.</li> <li>• Practitioner views identified how important it was to recognise that they were doing their best and that was ‘good enough’.</li> </ul>

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4 – Supportive structures within the community

- Policies and practitioner views identified formal learning opportunities including SEND specific qualifications for some staff members.
  - Consideration of community and culture were aspects of setting policy including representation, belonging, different communities and individual identity. The policies and practitioner views also identified how understanding of difference developed from inclusive education.
  - Practitioners' views and setting policies showed how practitioners worked together, supported each other, and were aided by the sharing of experience from colleagues including leaders within the setting.
  - Practitioners viewed lack of resources to be a barrier to effective inclusion.
- 
- The ICP, policy, and practitioner views all identified collaboration with families and specialist professionals as embedded into practice and important for inclusive practice.
  - Support for transition into the setting and between settings was seen within the varied role of the practitioners in their views and the setting policies.
  - Policies and views of practitioners both referred to professional development through formal and independent research approaches. Practitioner views also identified how they learnt through sharing experience and practical experience on-the-job.
  - Practitioner views identified barriers to engaging in professional development and working with specialist services in the theme 'Falling short'.
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5 – Supportive structures at regional//national levels

- The ICP, policies, and practitioner views drew on national policies regarding the conceptualisation of SEND and guiding principle of inclusion. For example, the policies reference legislation regarding the graduated response (e.g. APDR cycles).
  - Practitioner views and setting policies identified how children should be consulted and given a voice, there should be equality and fairness, and anti-discriminatory practices. This relates to a rights-based approach.
  - Practitioner views identified a challenge with high numbers of children with SEND attending the setting, which was attributed to their good reputation and lack of inclusivity in other settings within the region.
  - Practitioner views identified how wider national and regional factors created barriers to inclusive practice such as access to resources, training, and availability of specialist professional support.
- Policies and practitioner views did not advocate for inclusion in all circumstances and included the belief and practice that some children would need specialist educational provision.
  - National and regional standards, curriculum, evaluation systems, initial staff training and research were not reflected within the research findings.
-

For instance, practitioner views, policy documents and the ICP profile tool all identified a number of quality processes and supportive structures within the setting and community which helped or hindered IECE (e.g. individualisation of understanding needs and implementing provision, collaboration, information sharing and professional development).

Despite these many areas of convergence, there are some aspects of the current study findings which suggest that the model is not fully enacted within the setting (see Table 20). For example, policies and practitioners' beliefs identified that positive outcomes for individual children would not be possible for all. Also, despite the ICP suggesting overall good quality inclusive practice within the setting there were areas within the current findings where Apple's Preschool did not exhibit quality processes and supportive structures within the setting (e.g. the support for transition and adult to child relational practice was rated as just below 'minimum' quality on the ICP).

There were also a small number of areas within Bartolo et al.'s (2019) model which were not represented within the findings of the current research. These were clustered within dimension five 'Supportive structures operating regionally/nationally' as the current research findings identified aspects related to regional structures but not national. For example, no findings related to curriculum, evaluation systems, initial staff training or research within the current findings. There was also a finding from the current research which did not relate to the model, the recognition of a 'good enough' job. This finding related to the importance of practitioner morale and accepting when practitioners had done enough to include children with SEND,

suggesting that practitioners' appraisals of their own practice are an additional important factor in inclusive educational practices for the current research setting.

Although the adapted ecosystem theory of IECE maps closely to the current research findings, rival theories must also be considered. For example, the model of best practice for preschool inclusion which has three components: respect, adequate training and transition plans (Bryant, 2018). The component of respect for the role of the practitioner by stakeholders did not correspond to the current findings directly. Other components from the model, such as adequate training, were more clearly represented in the current findings. Quality professional development was an important facilitator to quality inclusive practice and lack of it was perceived to be a barrier by the practitioners in the current study. The training component is also related to the impact of the training to ensure effective practices. The ICP data suggests that there was effective teaching and a positive learning environment in Apple's Preschool and the practitioner views and policy identified ways in which this was brought about in an inclusive way, for instance through consideration of community and culture. Lastly the component of transition plans did have some overlap with the current research findings. For example, the practitioner views, practice (as profiled on the ICP) and policies identified the importance of identifying needs and planning to meet these needs. Although this was not specific to a transition plan into the setting as in Bryant's (2018) model.

However, there are aspects within the current research findings which do not fit easily within the model of best practice for preschool inclusion (Bryant, 2018) such as the focus on collaboration and information sharing between stakeholders or the impact of being perceived as inclusive when other settings in the region were

perceived as less inclusive. Therefore, this model has limited scope to encompass the complex factors which lead to quality inclusive practices in the EYs from the perspective of the views and practices of the practitioners. On the other hand, Bartolo et al.'s (2019) model provides a broader perspective of the elements involved in bringing about inclusive practice in an EYs setting and maps more closely to the findings of the current research than Bryant's (2018) model.

Overall, the alignment between the study findings and the adapted ecosystems model of IECE (Bartolo et al., 2019) suggests that whilst the current research was a single case study, its findings are indicative of wider good inclusive practice for children with SEND in preschools. Due to the novelty of Bartolo et al.'s model, its consistency with the findings in the present study also lends confidence to the model's assertions.

### ***5.6.3 Implications for Practice***

As well as future research and theory, the current study has implications for the practice of both practitioners and EPs which will be focused on here.

#### **5.6.3.1 Implications for EY Practice**

Two areas which came through strongly in the findings were collaborative working and the individual nature of needs and support. These are both supported by existing literature as important to facilitating inclusion and link directly to the adapted ecosystems model of IECE (Bartolo et al., 2019).

Given the prominence within the findings, the current research suggests that collaboration between setting practitioners and each other, parents, children, and specialist professionals is important. This includes how these groups are listened to, how information is shared in a bidirectional way, and how they are supported to participate. Based on the current research, this is particularly needed for children as the practitioner and child relationships aspect of practice were not of as high quality as working with other adults.

Addressing the needs of children with SEND to facilitate their inclusion was also a prominent theme across the current findings. This related to the uniqueness of SEND for each child, early identification of needs, understanding the child's individual needs, planning for their needs on an individual basis, implementing planned provision and monitoring and adapting this based on evaluation of effectiveness. The implications for EY practitioners and settings are how to ensure quality within these processes, and their embedding within the settings systems.

In addition, some of the novel findings from the current research point to implications for EY practice. The finding that being good enough at enacting inclusion was supportive of inclusive practice suggests that EY leaders and practitioners should consider the ethos of their settings and promote recognition of positive work by practitioners and pragmatic narrative around what has been achieved to foster morale. There are also implications for all settings to be reflective of their conceptualisation of children with SEND and inclusion. The finding that some settings and practitioners did not see inclusion as possible due to children's needs linked directly to the challenge of increased ratios of children with SEND in the research setting. It is important that, as with this good practice example, practitioners and

settings hold true to inclusion as the guiding principle. Finally, as safety concerns regarding children's behaviour and health needs was a perceived challenge in inclusion, settings should consider how they prepare practitioners for supporting these specific areas of need. For instance, in the research setting the manager sourced training or support from specialist professionals, leaders worked alongside practitioners and explicitly recognised their good work to help build their confidence, and practitioners and parents were encouraged to share their expertise.

### **5.6.3.2 Implications for EP Practice**

As aimed from the outset of the research, there are lessons to be taken from the research into EP practice. Given the strong theme of collaborative working to support inclusion, which included specialist services, there are clear implications for EPs to draw from the findings.

There are implications for EP training and support for settings through ongoing involvements to develop the confidence, experience of success and therefore views of inclusion that practitioners hold. As practitioner views were found to align with practice, professional development should consider how to build a true understanding of inclusion as well as the structures and skills to enact it. The findings suggest that understanding the benefits of inclusion, feeling confident to enact inclusion and experiencing effective inclusion all help to develop positive views of inclusion. Therefore, EPs, through their involvements with EY practitioners and training offers, should consider how to support practitioners to understand the inclusion through its participatory and equality aims, as well as experience success in including children with SEND.

Linked to this, access for practitioners to quality training, specifically around SEND, behaviour and safety are also implicated in the findings. EPs are well placed to deliver training in these areas given their knowledge base and skills in training development and delivery. Given how some EP services work with EY settings, this training could be delivered to individual settings or as centralised training offer. It may be appropriate to work in a multidisciplinary team to facilitate this, such as working with health or EY, although this would have implications if resources are joint commissioned across these services.

In addition to training in multidisciplinary teams, the findings have implications for working more broadly in collaboration with other professionals both in and out of schools. EPs have been found to offer welcome support for EY settings through individual involvements and support for parents and staff (Douglas-Osborn, 2017). EPs should consider how they are working with EY settings (e.g. are there statutory or traded services available which facilitate ongoing involvement between EPs and EY settings?). The applied psychology that EPs offer could be useful in supporting practitioners in several areas highlighted through the findings of this research, such as:

- Identifying needs,
- Creating and implementing provision plans,
- Monitoring and reviewing systems and provision at individual, targeted and universal levels,
- Developing parent and child participation,
- Meeting professional development needs,
- and working with other professionals.

This has implications for commissioning across services in a LA such as with EY support teams to allow joint working and add value to existing services. The service model and commissioning arrangements also have implications for EPs in supporting EY settings and practitioners to provide a good inclusive environment for children with SEND. This may be through the availability of the EP service. The findings showed that practitioners found accessing services in a timely manner challenging, so consideration should be given to:

- the availability of EP services for involvement with EY practitioners, children and families,
- referral and commissioning processes between individual EY settings and EP services,
- and capacity within EP services and waiting times for involvement.

## **5.7 Conclusion**

The current research supports the literature base around inclusion of children with SEND in preschools in English speaking western countries and brings the research in this area from England up to date following the embedding of the most recent legislation in the SEND context (e.g. SEND COP [DfE & DoH, 2015]). In particular, the findings corroborate the adapted ecosystems model of IECE (Bartolo et al., 2019) as well as further highlighting that collaborative working and an individualised approach to assessment and support facilitate effective inclusion. Furthermore, the research supports the literature base on how the availability of resources are a barrier to inclusion, including access to training, physical resources, funding, personnel and waiting lists for professionals.



However, the current research offers new insight into the experiences of a good practice setting which identifies how even in this context where the setting is externally perceived to be effective at inclusion, the perception of doing a good enough job and having staff morale was important. Furthermore, the effectiveness of the setting also created what could be termed 'a success related problem', in that practitioners felt that more families of children with SEND applied for places at the setting due to the setting being seen as the best environment. This was related to other settings prioritising other values over the inclusion of children with SEND, and so not upholding the guiding principle of inclusion for all.

The research also gives nuance to the existing literature that some practitioners hold a view that inclusion is the ideal but not possible for all children. Prior research in this area suggests that concerns regarding the needs of children is an important factor to this view (e.g. Clough & Nutbrown, 2004) and that practitioners believe that other children's learning will be disrupted (e.g. Hamilton & Vermeren, 2016). The identification of safety as a specific barrier to inclusion through the current research gives an indication that feeling challenged by health and behaviour needs, and concern regarding keeping all members of the classroom community safe, may be contributing to this overall concern regarding the inclusion of some children based on their needs.

Finally, the finding that practice, policy, and practitioner views were closely aligned within this case study, and that they in turn align to national policy provides evidence that in effective inclusive settings these parts of the system work together.

Despite some limitations in the current research (identified in Section 5.5) implications have been drawn from the findings for future research, and practice. Specifically, implications for EPs were focused on and included:

- Providing professional development which addressed specific SEND, behaviour, and safety related concerns.
- Developing views of inclusion in line with social justice and building confidence and opportunities to experience successful inclusion of children with SEND.
- Support for EY practitioner and settings to develop inclusive systems which promote the participation of children and parents.
- Consideration of models of service delivery to facilitate EP involvements with EY settings and multi-disciplinary working.

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## APPENDICES

### Appendix A: Overview of Research Papers for Inclusion in Literature Review

Paper	Sample	Methods	Results
Anderson and Lindeman (2017)	Eight inclusive 'special classes in an integrated setting' where general and special education takes place in the same class with two teachers. 16 Prekindergarten teachers from these settings (eight general education and eight special education) Purposeful sample. USA.	Mixed methods design. Surveys and semi-structured interviews were given to all teachers. two-hour unstructured observations of each teacher were completed but not included in analysis.	<ul style="list-style-type: none"> <li>• Student behaviour was the greatest challenge for respondents (43%) although all reported being confident at dealing with challenging behaviour.</li> <li>• Teachers felt well prepared (71%) to develop activities for a wide range of learners.</li> <li>• The Primary themes identified were that teachers:               <ul style="list-style-type: none"> <li>- value collaboration.</li> <li>- believe inclusive settings have the potential to benefit all children.</li> <li>- face significant new challenges.</li> <li>- need additional resources to address the challenges and realise the benefits of inclusive practice (including training).</li> </ul> </li> </ul>
Bryant (2018)	Eight general education public preschool teachers volunteer sample. USA.	Narrative phenomenological approach using interpretive phenological analysis Conducted open ended interviews.	<ul style="list-style-type: none"> <li>• Preschool teachers have positive attitudes to teaching in an inclusive setting. Their attitudes (and those of their students) impact the effectiveness of inclusive practices.</li> <li>• There is a need to better understand the role of preschool teachers as they are often considered 'babysitters'</li> <li>• All teachers had received training in special education but with variety of effectiveness.</li> <li>• More training in inclusion is needed. This should be formal, ongoing and on the job (e.g. visiting inclusive settings, consulting with specialists) as</li> </ul>

Paper	Sample	Methods	Results
			<p>this is perceived to improve teaching and the classroom environment as well as increase the comfort preschool teachers feel in applying inclusive practices.</p>
Hamilton and Vermeren (2016)	<p>27 teachers from not-for-profit kindergartens and early childhood centres. New Zealand. Convenience sample.</p>	<p>Survey design with open questions. Qualitative data analysed for themes.</p>	<ul style="list-style-type: none"> <li>• Early childhood teachers see inclusivity as beneficial. For example, it supports learning for all and the inclusion of children with SEN in society.</li> <li>• Perceptions of the severity of a child's needs led to views of inclusion as impractical and hindering other children.</li> <li>• Teachers believed that clarity of what special needs are was missing from national policy but teachers were also concerned over too much specificity leading to inflexibility in practices. They were also concerned that there was not consistency of inclusive practices.</li> <li>• Use of an individual education/development plan was seen as positive by teachers. They felt it helped parents and professionals to have a shared understanding and goal for supporting the child. The importance of the team around the child working together on these was raised.</li> <li>• Feasibility of implementation (e.g. time pressure), timely support from outside professionals, and parent expectations were also perceived as barriers by the teachers.</li> </ul>
Johora (2021)	<p>4-year-old child with additional needs related to suspected Autism.</p>	<p>Case study from cultural historical perspective. Data collection included eight hrs of video</p>	<ul style="list-style-type: none"> <li>• There were tensions between staff and parent views of the child's needs.</li> <li>• The child was supported to physically access resources.</li> </ul>

Paper	Sample	Methods	Results
	Three educators from the child's setting. Australia	observations collected over eight months, semi-structured interviews and documents (e.g. records and work). Data was analysed qualitatively, coding the videos and looking for patterns.	<ul style="list-style-type: none"> <li>• The educators missed opportunities to support the social interaction of the child.</li> <li>• Educators' assumptions about the child's needs led to low expectations of child compared to their peers.</li> <li>• Unintentional exclusion occurred when deficits were the focus and educators did not support the child's strengths.</li> <li>• Understanding a child's traits, interests, strengths and needs can help to create a 'pedagogical password'.</li> </ul>
Leatherman (2007)	Eight early childhood teachers employed in 'inclusive settings'(this was identified by teachers' self-reported positive and successful experiences of inclusion). Convenience and purposeful sampling (known to researchers through prior association with the university). USA.	Narrative study. Data collected through open ended interviews and qualitatively analysed for themes.	<ul style="list-style-type: none"> <li>• <i>The inclusive classroom is a great place for children.</i> Although teachers identified challenges with inclusive education, they also felt that it led to leaning for children and adults, and a lack of distinction between children with and without SEN.</li> <li>• <i>The teacher needs additional education.</i> Teachers reported that learning happens on the job and there is limited time in training to focus on SEN or inclusion.</li> <li>• <i>The teacher needs support from administrators, peers and therapists.</i> Managers and peers contributed to successful inclusion through moral support and advice. Specialists were also helpful, but staff needed to work closely with these professionals to learn from them. Reading and resources found on through the teachers' own research also help.</li> <li>• <i>Positive experiences foster successful inclusive classrooms.</i> The teachers' own experiences and the ethos of the environment foster inclusion. The more teachers practiced inclusively the more they saw it could be done. Although experience of inclusive education which was not effective for a child changed teachers views.</li> </ul>

Paper	Sample	Methods	Results
			<ul style="list-style-type: none"> <li>• <i>Being included in decision making.</i> Some teachers reported not being consulted and initially felt some concern. However, they went along with decisions and felt they were successful.</li> </ul>
Leatherman and Niemeyer (2005)	Four early education teachers working in inclusive pre-kindergarten classrooms. Convenience and purposeful sampling. USA.	Part 2 of Leatherman (2007) study. Data was collected through, interviews, observations of classrooms, field notes from observations, and follow up interviews.	<ul style="list-style-type: none"> <li>• Children with and without disabilities were involved in the classroom activities,</li> <li>• Teachers' attitudes appear to be influenced by experiences in inclusive classrooms. Positive attitudes were supported by prior experience. This led to teachers supporting inclusion through parent involvement, meeting individual needs, facilitation of participation.</li> <li>• Teachers addressed children's individual needs in the classroom activities,</li> <li>• Teachers facilitated family involvement,</li> <li>• Resources and personnel were available in the classroom.</li> </ul>
Mitchell and Hegde (2007)	35 in-service teachers from 'inclusive preschools' (defined by classes with at least one child with SEND). Participants had a wide range of ages and work experience. All settings in the area which met the criteria were contacted and participation was voluntary. USA.	Mixed methods design. Data was collected using questionnaires through a survey. Both descriptive statistics and thematic analysis were used to analyse the data.	<ul style="list-style-type: none"> <li>• Teacher's self-reported beliefs and practices were related.</li> <li>• Teachers were comfortable with inclusion and believed development of children with disabilities would be enhanced through the practice of inclusive education.</li> <li>• More significant needs in children related to teacher perceptions that it would be difficult to meet the child's needs and that they may disrupt the learning of their peers.</li> <li>• There was a need for support in class for children with disabilities including staff, resources, external support, working with specialists and additional training.</li> </ul>

Paper	Sample	Methods	Results
			<ul style="list-style-type: none"> <li>• Teachers would like training including knowledge development e.g. specific disabilities. 30% of teachers wanted hands on training. They also wanted support from specialist professionals.</li> <li>• Teachers' education level did not impact on beliefs or practices related to inclusion.</li> </ul>
Clough and Nutbrown (2004)	94 preschool educators. Convenience sample from professional networks and development groups with voluntary participation. UK	Majority gave questionnaire responses, a few engaged in email dialogues and four participants were interviewed. Data was analysed for themes and descriptive statistics.	<ul style="list-style-type: none"> <li>• Almost all educators had experience of working with children with learning difficulties in education where children with learning difficulties are educated alongside peers of the same chronological age.</li> <li>• Some educators purposefully sought work with children with SEN and in inclusive settings.</li> <li>• Educators found that emotional and behavioural difficulties, autism and multiple and physical learning difficulties were the most challenging types of needs.</li> <li>• Educators did not feel that their professional development was effective in preparing them to teach children with learning difficulties. Advanced level qualifications (e.g. post-graduate) were reported to help prepare educators.</li> <li>• Educators learnt from experience, such as speaking with professionals.</li> <li>• Educators viewed childhoods as a vulnerable time requiring protection. They also saw it as a time for discovery requiring encouragement and facilitation.</li> <li>• Most educators held a positive view of inclusion in principle but there were conditions to this. For example, severity of need, numbers of adults, and impact on other children. This was termed the 'yes ...but' factor.</li> </ul>

Paper	Sample	Methods	Results
			<ul style="list-style-type: none"> <li>• Educators perceived adequate resources/support as vital to successful inclusion.</li> <li>• Educators believed parents were important partners in education. However, some barriers to this included parents' needs and lack of parent support.</li> </ul>
<p>Roberts and Callaghan (2021)</p>	<p>194 EY practitioners with experience of the Access and Inclusion Model. Recruited through national agencies who support EY. Ireland.</p>	<p>Survey design. Questionnaires were thematically analysed and numerical responses collated.</p>	<ul style="list-style-type: none"> <li>• The Access and inclusion Model introduced in 2016 in Ireland is working effectively to support preschools to work towards inclusive education for all.</li> <li>• Practitioners believe inclusion means actively involving children with additional needs through adaptations to meet their needs. Although only 20% of practitioners report adapting the environment to meet needs.</li> <li>• The majority of practitioners focused on individual characteristics when planning to meet needs.</li> <li>• Practitioners valued the support of EY advisors.</li> <li>• Smaller child to adult ratios were perceived as supportive.</li> <li>• Barriers to inclusive practice remained despite these successes. These included: <ul style="list-style-type: none"> <li>- Mainstream settings not meeting children's needs.</li> <li>- Negative attitudes to inclusion.</li> <li>- Lack of training and continuous professional development which is needed.</li> <li>- Practitioner confidence (as 10% of participants doubted their capacity to support children with SEN.</li> <li>- Delays in receipt of, or refusal to provide specialist support.</li> </ul> </li> </ul>



Paper	Sample	Methods	Results
			<ul style="list-style-type: none"> <li>- Uniqueness of children's needs make it hard to prepare for and meet their needs in the settings.</li> <li>- Unrealistic expectations for children with SEN.</li> </ul>
Thornton and Underwood (2013)	Four educators (two early childhood educators working in childcare centres and two elementary school teachers). Convenience sample. Canada.	Grounded theory design. Data was collected using questionnaires and semi-structured interviews. Follow up interviews were also held to develop meaning and clarify items from the first interview. Data was analysed using the coding approaches of grounded theory.	<ul style="list-style-type: none"> <li>• All educators expressed positive views of inclusion.</li> <li>• Educators' views of disability were split across individually based or socially moderated constructs.</li> <li>• Educators' beliefs about inclusion closely linked to their views of disability. Those who viewed disability as individually constructed felt inclusion involved minimising differences, focus on academic goals, and an understanding that it might not work for some children (Pathognomonic beliefs). The educators with a social view of disability viewed inclusion as their responsibility to changing perspectives, adapting the environment to the child, and self-reflection on provision (interventionist beliefs).</li> <li>• Challenges to inclusion were thought to be related to the personal characteristics of the child and the environment.</li> </ul>
Mccormick, Wong, and Yogi (2003)	4-year-old boy with Down's syndrome attending an inclusive early childhood program. The practitioners making up the team around child (e.g. director of setting, teaching assistant, teacher, early childhood	Illustrative case study example.	<p>Outlined the process of individual assessment and planning to support inclusion of children with special needs in preschool. The 'ecological planning matrix' was designed to be applied to collaborative working between professionals and parents, and included:</p> <ol style="list-style-type: none"> <li>1. List expectations of all children - positively framed, developmentally appropriate, involve participation/engagement.</li> <li>2. Determine present performance including parent voice - identify children's current development against expectations of setting as: does independently, does only with help, needs to learn.</li> </ol>

Paper	Sample	Methods	Results
	<p>special education teacher consultant). How the sample was identified is unclear. Hawaii.</p>		<ol style="list-style-type: none"> <li>3. Consider the individual education plan goals- map goals onto the expectations of the setting to see where these goals can be practiced and learned through daily activities.</li> <li>4. Decide on adaptations and supports to enable full participation in the preschool's daily activities/expectations - support thorough scaffolding, adapting the task, adult assistance, adapt expectations, modify materials, and peer assistance. Specialists should support practitioners to feel comfortable in what this looks like and how to achieve this. Monitoring procedures of target behaviours and response to intervention should also be established.</li> </ol>
<p>Killoran, Tymon and Frempong (2007)</p>	<p>354 preschool directors or owners. In all settings which met the selection criteria the directors were invited to participate (504 day-care centres approached). Canada.</p>	<p>Data was collected through semi-structured interviews. Data was coded and themes developed from this analysis. The codes were also used to calculate quantitative data in the form of descriptive statistics.</p>	<ul style="list-style-type: none"> <li>• <i>Inclusion and refusal of children with disabilities.</i> Over half of settings reported having at least one child with disabilities in their setting. The majority of directors would turn a child away from their preschool due to the child's disabilities.</li> <li>• <i>Accommodations.</i> Directors recognised the need to accommodate children with disabilities. The most common accommodation made for children with disabilities was extra support.</li> <li>• <i>Accessibility and service models.</i> 51% of the settings were not physically accessible, often due to the structure of their buildings. More inclusive settings (identified as 'special needs centres due to their integrated programs) had links with visiting professional service providers.</li> <li>• <i>Perceived barriers.</i> Barriers were identified by 79% of the directions, including the majority of directors in a setting identified as special needs within the study. In</li> </ul>

Paper	Sample	Methods	Results
			particular, physical needs and accessibility, training, funding and numbers of staff.
Bartolo et al., (2019)	<p>32 inclusive preschools identified as having exemplary inclusive practice by an IECE academic from the country. The preschools were from European countries including England, Wales and Scotland. For each preschool there was a pair of participants – a practitioner and an IECE academic. There were 14 academics and 14 practitioner participants.</p> <p>In 8 of these settings were identified to have most reflected inclusivity across different areas of Europe.</p>	<p>Participant descriptions of inclusive provision.</p> <p>In the 8 settings, participant pairs (e.g. an practitioner and academic) visited for 3 days to conduct observations and interviews with stakeholders.</p> <p>Data was analysed using thematic analysis (Braun &amp; Clarke, 2006) and reviewed by all participants. .</p>	<ul style="list-style-type: none"> <li>• 25 subthemes were identified which were organised into a model based on the ecosystems model and the structure-process-outcome framework. This was called the adapted ecosystems model of IECE.</li> <li>• The model included 5 dimensions which the 25 subthemes were grouped around: outcomes of inclusive education, quality processes within the IECE setting, supportive structures within the IECE setting, supportive structures within the community, supportive structures at regional/national level.</li> </ul>

## **Appendix B: Recruitment Email for Local Authority Staff**

### **Research study title: Exploring the inclusion of children with special education needs and disabilities (SEND) to mainstream preschool settings: a good practice case study.**

My name is xxxx, and I am a Trainee Educational Psychologist on the doctorate for Applied Educational and Child Psychology at the University of Birmingham. I am currently on placement at xxx Council and am writing to you to request your help in identifying a good practice inclusive preschool setting to be included in my research study.

#### What is the purpose of the study?

The purpose of the study is to add to the body of research into inclusion in the Early Years Foundation Stage (EYFS) by exploring what a good practice example of an inclusive EYFS setting looks like in relation to practitioner perceptions of inclusion, how inclusion looks in practice for children with SEND, and how these perceptions and actions sit within the wider context of inclusion for this setting.

#### Who can take part?

I am looking for recommendations from local authority staff of an early years setting which meets my study inclusion criteria and which the member of staff has worked with for at least a year.

The criteria for a good example inclusive setting will be:

- 'increasing the participation of students in, and reducing their exclusion from, the cultures, curricula and communities of local schools' (Booth & Ainscow, 2002, p.3).
- Around the average size of an EYFS setting within the geographical area (e.g. roughly 70 spaces for children).
- Have preschool age children on roll (aged 3-4 years).

#### What will taking part involve?

If consent is obtained, the data collection for the study will have three phases: *Document analysis* - an analysis of documents relevant to inclusive practice and policies within the setting, local authority and English government will be carried out. For example, the setting manager will be asked to provide a copy of the settings' policies relating to SEND and inclusion.

*Observation* - there will be a 2.5-3 hour structured observation of the setting followed by a 20 minute interview and document review with a key adult from the setting. The observation will focus on children within the setting with SEND and observe them across a range of learning contexts including interactions with staff and peers.

*Interviews* – a series of semi-structured interviews will be conducted with the EYFS practitioners working within the setting. These will be conducted via video call or face-to-face. I will aim to interview four to six practitioners, taking around 45-60 minutes each. The interview will include questions to explore the practitioners' views on inclusion and SEND and their experiences working with children with SEND. Interviews will be audio/video recorded and subsequently transcribed.

The greatest care will be taken to safeguard participant confidentiality and data security at all stages of the study, in line with the rigorous requirements of the University of Birmingham Humanities and Social Sciences Ethical Review Committee, by whom this proposed study has been approved.

If the participant agrees to take part, can they change their mind?

Yes, if a participant decides they no longer wish to take part in the research, they can withdraw their (or their child's) data up to 30 days after the date of their interview or observation, either by speaking to me in person or by using my contact details below. They will not be expected to 'justify' or provide a reason for any such decision to withdraw; such requests would simply be respected.

What are the possible disadvantages and risks of taking part?

Taking part in the study will involve a time commitment of up to 60 minutes for the practitioners who are interviewed, plus time for liaison via email and / or telephone to discuss the nature of the research and to make arrangements for the interviews and observations.

Inclusion and SEND can be sensitive topics, especially when exploring person views, experiences and observations of practice. As a researcher I will be mindful of these sensitivities and hope to conduct the interviews and observations in a sensitive, respectful and empathic manner.

Due to the COVID-19 pandemic, there could be health risks to participants in conducting face-to-face interviews. Therefore, government guidance regarding social distancing and working from home will be followed and virtual interviews using Zoom or Microsoft Teams will be held if a work from home order is in place. Participants will be offered a virtual or face-to-face interview in event that no national or local restrictions on working on site are in place. Related to this, the observation will only take place if no national or local restrictions on working on site are in place.

### What are the possible benefits of taking part?

The setting staff who take part in the study may find that the experience provides an opportunity for reflection on their beliefs and practices related to inclusion and SEND. Therefore, participation may encourage them to enhance how inclusion is enacted, discussed or conceptualised for themselves and their setting.

By participating, all participants are also supporting the wider development of knowledge and understanding of the experience of providing inclusive education for young children with SEND. This understanding can be utilised to better support EYFS practitioners in providing effective inclusion which may be through policy and structures, professional development, case work, or initial training.

### What will happen to the data collected?

All data will be treated as confidential. Data will be anonymised through using pseudonyms so the names of participants will not be reported, nor will any identifying information (e.g. names of other individuals, the school, organisations or geographical locations etc.). As is always the case in schools, confidentiality may need to be breached if a disclosure is made which suggests that a participant or others are at risk of harm and/or which indicates illegal activity.

A Data Management Plan (DMP) will be put in place for this research within the University of Birmingham. Immediately after each participant interview, the electronically audio/video-recorded data will be transferred from the audio-recording device to a password-protected folder on 'BEAR DataShare', (a secure data storage system used by The University of Birmingham).

The audio/video files will then be erased from the audio-recorder/computer. Electronic transcripts and notes will be held in a password protected folder on BEAR DataShare. Paper observation records, printed transcripts, and written notes will be stored in a locked cabinet to which only I have access; they will then be scanned to pdf. and transferred to BEAR DataShare. In accordance with university research policy, data will be stored on BEAR DataShare for 10 years after completion of the project. A 10-year expiry date will be set for the electronic data stored on BEAR DataShare.

### How will the findings be reported?

Following data analysis for all data sources (the documents, interviews and observation), a summative research report will be sent to participants, outlining the

main findings of the research and agreed actions. Participants will be offered the opportunity to meet me to further discuss the research findings.

A write-up of the research will form part of my doctoral thesis. Reports or presentations on the research may be submitted for publication in academic and professional publications or conferences.

What if I have questions or require more information?

If you have any questions regarding the project, please contact me at  
xxxx@student.bham.ac.uk

My supervisor is Dr xxx, who can be contacted at xxx@bham.ac.uk

Finally, can I thank you for taking the time to read this email. If you have any information regarding a possible early years setting which would be a suitable good practice example of inclusive practice please do get in touch.

Yours faithfully,

xxxx

## Appendix C: Information Sheet for Setting Managers

**Research study title: Exploring the inclusion of children with special education needs and disabilities (SEND) to mainstream preschool settings: a good practice case study.**



UNIVERSITY OF  
BIRMINGHAM

My name is xxxx, and I am a Trainee Educational Psychologist on the doctorate for Applied Educational and Child Psychology at the University of Birmingham. I am currently on placement at xxx Council and am writing to you to request your consideration of allowing my research study, exploring the inclusion of children with special educational needs and disabilities (SEND) in mainstream preschools, to be undertaken in your setting.

### What is the purpose of the study?

The purpose of the study is to add to the body of research into inclusion in the Early Years Foundation Stage (EYFS) by exploring what a good practice example of an inclusive EYFS setting looks like in relation to practitioner perceptions of inclusion, how inclusion looks in practice for children with SEND, and how these perceptions and actions sit within the wider context of inclusion for this setting.

### Who can take part?

You have been contacted because your setting has been identified by local authority staff who work with you, as a good example of inclusive practice within the local authority. If you agree for your setting to take part in the study you will be asked to invite the practitioners working with children in the preschool age group (3 – 4 years old), and the parents of children within this group with SEND, to take part in the study, by sharing the participant information sheets and consent forms.

### What will taking part involve?

If consent is obtained, the data collection for the study will have three phases: *Document analysis* - an analysis of documents relevant to inclusive practice and policies within the setting, local authority and English government will be carried out. For example, the setting manager will be asked to provide a copy of the settings' policies relating to SEND and inclusion.

*Observation* - there will be a 2.5-3 hour structured observation of the setting followed by a 20 minute interview and document review with a key adult from the setting. The



observation will focus on children within the setting with SEND and observe them across a range of learning contexts including interactions with staff and peers. Parental consent will be obtained to observe the target children in the setting. No data will be collected on children without parental consent. You will be asked to inform the wider parent population of my attendance in the setting in a research capacity, explaining that consent will be sought from parents of children who are taking part in the research and that no data will be collected on children who are not taking part. This could be shared through your usual parent communication channels e.g. in a newsletter.

*Interviews* – a series of semi-structured interviews will be conducted with the EYFS practitioners working within the setting. These will be conducted via video call or face-to-face. I will aim to interview four to six practitioners, taking around 45-60 minutes each. The interview will include questions to explore the practitioners' views on inclusion and SEND and their experiences working with children with SEND. Interviews will be audio/video recorded and subsequently transcribed.

The greatest care will be taken to safeguard participant confidentiality and data security at all stages of the study, in line with the rigorous requirements of the University of Birmingham Humanities and Social Sciences Ethical Review Committee, by whom this proposed study has been approved.

If the participant agrees to take part, can they change their mind?

Yes, if a participant decides they no longer wish to take part in the research, they can withdraw their (or their child's) data up to 30 days after the date of their interview or observation, either by speaking to me in person or by using my contact details below. They will not be expected to 'justify' or provide a reason for any such decision to withdraw; such requests would simply be respected.

If you decide as the setting manager, that you no longer wish for the setting to take part you can withdraw your consent at any time up until data collection begins.

What are the possible disadvantages and risks of taking part?

Taking part in the study will involve a time commitment of up to 60 minutes for the practitioners who are interviewed, plus time for liaison via email and / or telephone to discuss the nature of the research and to make arrangements for the interviews and observations.

Inclusion and SEND can be sensitive topics, especially when exploring person views, experiences and observations of practice. As a researcher I will be mindful of these sensitivities and hope to conduct the interviews and observations in a sensitive, respectful and empathic manner.

Due to the COVID-19 pandemic, there could be health risks to participants in conducting face-to-face interviews. Therefore, government guidance regarding social distancing and working from home will be followed and virtual interviews using Zoom or Microsoft Teams will be held if a work from home order is in place. Participants will be offered a virtual or face-to-face interview in event that no national or local restrictions on working on site are in place. Related to this, the observation will only take place if no national or local restrictions on working on site are in place.

#### What are the possible benefits of taking part?

The setting staff who take part in the study may find that the experience provides an opportunity for reflection on their beliefs and practices related to inclusion and SEND. Therefore, participation may encourage them to enhance how inclusion is enacted, discussed or conceptualised for themselves and their setting.

By participating, all participants are also supporting the wider development of knowledge and understanding of the experience of providing inclusive education for young children with SEND. This understanding can be utilised to better support EYFS practitioners in providing effective inclusion which may be through policy and structures, professional development, case work, or initial training.

#### What will happen to the data collected?

All data will be treated as confidential. Data will be anonymised through using pseudonyms so the names of participants will not be reported, nor will any identifying information (e.g. names of other individuals, the school, organisations or geographical locations etc.). As is always the case in schools, confidentiality may need to be breached if a disclosure is made which suggests that a participant or others are at risk of harm and/or which indicates illegal activity.

A Data Management Plan (DMP) will be put in place for this research within the University of Birmingham. Immediately after each participant interview, the electronically audio/video-recorded data will be transferred from the audio-recording device to a password-protected folder on 'BEAR DataShare', (a secure data storage system used by The University of Birmingham).

The audio/video files will then be erased from the audio-recorder/computer. Electronic transcripts and notes will be held in a password protected folder on BEAR DataShare. Paper observation records, printed transcripts, and written notes will be stored in a locked cabinet to which only I have access; they will then be scanned to pdf. and transferred to BEAR DataShare. In accordance with university research policy, data will be stored on BEAR DataShare for 10 years after completion of the

project. A 10-year expiry date will be set for the electronic data stored on BEAR DataShare.

How will the findings be reported?

Following data analysis for all data sources (the documents, interviews and observation), a summative research report will be sent to participants, outlining the main findings of the research and agreed actions. Participants will be offered the opportunity to meet me to further discuss the research findings.

A write-up of the research will form part of my doctoral thesis. Reports or presentations on the research may be submitted for publication in academic and professional publications or conferences.

What if I have questions or require more information?

If you have any questions regarding the project, please contact me at [email]

My supervisor is Dr xxx, who can be contacted at [email]

Finally, can I thank you for taking the time to read this email. I hope to hear from you soon.

Yours faithfully,

xxxx

## Appendix D: Information Sheet for Early Years Practitioners

**Research study title: Exploring the inclusion of children with special education needs and disabilities (SEND) to mainstream preschool settings: a good practice case study.**



UNIVERSITY OF  
BIRMINGHAM

INSERT  
PHOTO

This information leaflet has been given to you because I am seeking your agreement to take part in a research project which I am undertaking as part of my training to become an Educational Psychologist. My name is xxx; I'm a postgraduate research student at the University of Birmingham.

Before you decide whether you would like to take part, please read this leaflet so that you understand why the research is being conducted and what being part of the project will entail. If you would like further information, or would like to ask any questions about the information below, please do not hesitate to ask (contact details are provided at the end of this leaflet).

### What is the purpose of the study?

The purpose of the study is to add to the research into inclusion in the Early Years Foundation Stage (EYFS) by exploring what a good practice example of an inclusive preschool setting looks like in relation to:

- EYFS practitioner perceptions of inclusion,
- how inclusion looks in practice for children with SEND,
- and how these perceptions and actions sit within the wider context of inclusion for this setting.

### Who can take part?

You have been contacted because your setting has been identified as a good example of inclusive practice within the local authority and your setting manager has consented to take part in the study. To take part in the study you must:

- be a practicing Early Years practitioner working with children at ages 3-4 years,
- be employed by the identified good practice case study setting,

- hold an Early Years qualification to a minimum of level 2 as outlined by the DfE (see <https://www.gov.uk/government/publications/eyfs-staffchild-ratios-dfe-approved-qualifications>),
- be aged 18 years and over.

#### What will taking part involve?

If consent is obtained, the data collection for the study will have three phases:

*Document analysis* - an analysis of documents relevant to inclusive practice and policies within the setting, local authority and English government will be carried out. For example, the setting manager will be asked to provide a copy of the settings' policies relating to SEND and inclusion.

*Observation* - there will be a 2.5-3 hour structured observation of the setting followed by a 20 minute interview and document review with a key adult from the setting. The observation will focus on children within the setting with SEND and observe them across a range of learning contexts including interactions with staff and peers. Parental consent will be obtained to observe the target children in the setting. No data will be collected on children without parental consent. The wider parent population will be informed of my attendance in the setting in a research capacity, explaining that consent will be sort from parents of children who are taking part in the research and that no data will be collected on children who are not taking part.

*Interviews* – a series of semi-structured interviews will be conducted with the EYFS practitioners working within the setting. These will be conducted via video call or face-to-face. I will aim to interview four to six practitioners, taking around 45-60 minutes each. The interview will include questions to explore the practitioners' views on inclusion and SEND and their experiences working with children with SEND. Interviews will be audio/video recorded and subsequently transcribed.

The greatest care will be taken to safeguard participant confidentiality and data security at all stages of the study, in line with the rigorous requirements of the University of Birmingham Humanities and Social Sciences Ethical Review Committee, by whom this proposed study has been approved.

#### If I agree to take part, can I change my mind?

Yes, if a participant decides they no longer wish to take part in the research, they can withdraw their data up to 30 days after the date of their interview or observation, either by speaking to me in person or by using my contact details below. They will not be expected to 'justify' or provide a reason for any such decision to withdraw; such requests would simply be respected.

#### What are the possible disadvantages and risks of taking part?

Taking part in the study will involve a time commitment of up to 60 minutes for the practitioners who are interviewed, plus time for liaison via email and / or telephone to discuss the nature of the research and to make arrangements for the interviews.

Inclusion and SEND can be sensitive topics, especially when exploring personal views, experiences and observations of practice. As a researcher I will be mindful of these sensitivities and hope to conduct the interviews and observations in a sensitive, respectful and empathic manner.

Due to the COVID-19 pandemic, there could be health risks to participants in conducting face-to-face interviews. Therefore, government guidance regarding social distancing and working from home will be followed and virtual interviews using Zoom or Microsoft Teams will be held if a work from home order is in place. Participants will be offered a virtual or face-to-face interview in event that no national or local restrictions on working on site are in place. Related to this, the observation will only take place if no national or local restrictions on working on site are in place.

#### What are the possible benefits of taking part?

The setting staff who take part in the study may find that the experience provides an opportunity for reflection on their beliefs and practices related to inclusion and SEND. Therefore, participation may encourage them to enhance how inclusion is enacted, discussed or conceptualised for themselves and their setting.

By participating, all participants are also supporting the wider development of knowledge and understanding of the experience of providing inclusive education for young children with SEND. This understanding can be utilised to better support EYFS practitioners in providing effective inclusion which may be through policy and structures, professional development, case work, or initial training.

#### What will happen to the data collected?

All data will be treated as confidential. Data will be anonymised through using pseudonyms so the names of participants will not be reported, nor will any identifying information (e.g. names of other individuals, the school, organisations or geographical locations etc.). As is always the case in schools, confidentiality may need to be breached if a disclosure is made which suggests that a participant or others are at risk of harm and/or which indicates illegal activity.

A Data Management Plan (DMP) will be put in place for this research within the University of Birmingham. Immediately after each participant interview, the electronically audio/video-recorded data will be transferred from the audio-recording device to a password-protected folder on 'BEAR DataShare', (a secure data storage system used by The University of Birmingham).

The audio/video files will then be erased from the audio-recorder/computer. Electronic transcripts and notes will be held in a password protected folder on BEAR DataShare. Paper observation records, printed transcripts, and written notes will be stored in a locked cabinet to which only I have access; they will then be scanned to pdf. and transferred to BEAR DataShare. In accordance with university research policy, data will be stored on BEAR DataShare for 10 years after completion of the project. A 10-year expiry date will be set for the electronic data stored on BEAR DataShare.

#### How will the findings be reported?

Following data analysis for all data sources (the documents, interviews and observation), a summative research report will be sent to participants, outlining the main findings of the research and agreed actions. Participants will be offered the opportunity to meet me to further discuss the research findings.

A write-up of the research will form part of my doctoral thesis. Reports or presentations on the research may be submitted for publication in academic and professional publications or conferences.

#### What if I have questions or require more information?

If you have any questions regarding the project, please contact me at [email]

My supervisor is Dr xxxx, who can be contacted at [email]

If you have read the information sheet are happy to take part in the study, please complete the consent form and return this to [name of manager] by [date].

## Appendix E: Information Sheet for Parents

### **Research study title: Exploring the inclusion of children with special education needs and disabilities (SEND) to mainstream preschool settings: a good practice case study.**

INSERT  
PHOTO

This information leaflet has been given to you because I am seeking your agreement for your child to take part in a research project which I am undertaking as part of my training to become an Educational Psychologist. My name is xxx; I'm a postgraduate research student at the University of Birmingham.

Before you decide whether you would be happy for your child to take part, please read this leaflet so that you understand why the research is being conducted and what being part of the project will entail. If you would like further information, or would like to ask any questions about the information below, please do not hesitate to ask (contact details are provided at the end of this leaflet).

#### What is the purpose of the study?

The purpose of the study is to add to the research into inclusion in the Early Years Foundation Stage (EYFS) by exploring what a good practice example of an inclusive preschool setting looks like in relation to:

- EYFS practitioner perceptions of inclusion,
- how inclusion looks in practice for children with SEND,
- and how these perceptions and actions sit within the wider context of inclusion for this setting.

#### Who can take part?

You have been contacted because your child's setting has been identified as a good example of inclusive practice within the local authority and the manager has consented to take part in the study. Your child has been identified to take part in the study because they are:

- attending the preschool setting where the study is taking place,
- are aged 3 to 4 years old,
- are identified as having SEND (i.e. on the SEND register at SEN support or



have an EHCP).

#### What will taking part involve?

If you agree for your child to take part, they be observed by myself within the setting on a typical day. The observation will last around 2.5-3 hours and include other children in the setting with SEND. I will observe your child across a range of learning contexts such as outdoor play, group time and free play as well as including interactions with both staff and peers. Documents such as your child's work or assessments may also be reviewed with a key adult from the setting following the observation. No data will be collected on children without parental consent. The wider parent population will be informed of my attendance in the setting in a research capacity, explaining that consent will be sort from parents of children who are taking part in the research and that no data will be collected on children who are not taking part.

#### If I agree to take part, can I change my mind?

Yes, if you decide you no longer wish to take part in the research, you can withdraw your child's data up to 30 days after the date of the observation, either by speaking to me in person or by using my contact details below. You will not be expected to 'justify' or provide a reason for any such decision to withdraw; such requests would simply be respected.

#### What are the possible disadvantages and risks of taking part?

Inclusion and SEND can be sensitive topics, as a researcher I will be mindful of these sensitivities and hope to conduct the project in a sensitive, respectful and empathic manner.

Due to the COVID-19 pandemic, there could be health risks to participants in conducting face-to-face visits. Therefore, government guidance regarding social distancing and working from home will be followed and the observation will only take place if no national or local restrictions on working on site are in place. The settings' risk assessment protocols for visitors COVID-19 compliance will be followed.

#### What are the possible benefits of taking part?

By participating, all participants are also supporting the wider development of knowledge and understanding of the experience of providing inclusive education for young children with SEND. This understanding can be utilised to better support EYFS practitioners in providing effective inclusion which may be through policy and structures, professional development, case work, or initial training.

### What will happen to the data collected?

All data will be treated as confidential. Data will be anonymised through using pseudonyms so the names of participants will not be reported, nor will any identifying information (e.g. names of other individuals, the school, organisations or geographical locations etc.). As is always the case in schools, confidentiality may need to be breached if a disclosure is made which suggests that a participant or others are at risk of harm and/or which indicates illegal activity.

A Data Management Plan (DMP) will be put in place for this research within the University of Birmingham. Paper observation records and written notes will be stored in a locked cabinet to which only I have access; they will then be scanned to pdf. and transferred to BEAR DataShare (a secure data storage system used by The University of Birmingham). In accordance with university research policy, data will be stored on BEAR DataShare for 10 years after completion of the project. A 10-year expiry date will be set for the electronic data stored on BEAR DataShare.

### How will the findings be reported?

Following data analysis a summative research report will be sent to participants, outlining the main findings of the research and agreed actions. Participants will be offered the opportunity to meet me to further discuss the research findings.

A write-up of the research will form part of my doctoral thesis. Reports or presentations on the research may be submitted for publication in academic and professional publications or conferences.

### What if I have questions or require more information?

If you have any questions regarding the project, please contact me at [email]

My supervisor is Dr xxx, who can be contacted at [email]

If you have read the information sheet are happy for your child to take part in the study, please complete the consent form and return this to [name of manager] by [date].

## Appendix F: Participant Consent Form - Managers

Title of Research Project: Exploring the inclusion of children with special education needs and disabilities (SEND) to mainstream preschool settings: a good practice case study.



UNIVERSITY OF  
BIRMINGHAM

Name of Researcher: xxx

	Tick to indicate agreement
I have read and understand the information provided in the participant information sheet and I have had the opportunity to ask questions about what will happen if I choose to take part in the study.	
I am aware that my participation is voluntary and that I can change my mind about taking part in the research and I am able to withdraw from the project (without giving any reason) at any time before data collection begins.	
I am aware that the final write up of the research project will form the basis of the researcher's thesis for a Doctorate in Applied Education and Child Psychology which will be available online (and which may also be published at a later date). I am aware that my name will not be presented in the final write up of the research project.	
I know who to contact if I have any questions about/issues with the research project or wish to withdraw data.	

<b>I, _____ (please insert name), agree to participate in the research study.</b>	
---	--

Name of Participant: \_\_\_\_\_

Contact details: email \_\_\_\_\_

Signature: \_\_\_\_\_

Date (dd/mm/yyyy): \_\_\_\_\_

**Appendix G: Participant Consent Form - Practitioners**

Title of Research Project: Exploring the inclusion of children with special education needs and disabilities (SEND) to mainstream preschool settings: a good practice case study.



**UNIVERSITY OF BIRMINGHAM**

Name of Researcher: xxx

	Tick to indicate agreement
<p>I have read and understand the information provided in the participant information sheet and I have had the opportunity to ask questions about what will happen if I choose to take part in the study.</p>	
<p>I am aware that my participation is voluntary and that I can change my mind about taking part in the research and I am able to withdraw from the project (without giving any reason) at any time before, during and up to 30 days after participation.</p>	
<p>I am aware that the final write up of the research project will form the basis of the researcher’s thesis for a Doctorate in Applied Education and Child Psychology which will be available online (and which may also be published at a later date). I am aware that my name will not be presented in the final write up of the research project.</p>	
<p>I know who to contact if I have any questions about/issues with the research project or wish to withdraw data.</p>	

I understand that the researcher may need to break confidentiality if a disclosure were made which suggested that I, and/or others, were at direct risk of harm or which indicated any illegal activity.	
I understand that the researcher will contact me via email or in person to organise my interview and that the interview will be recorded and transcribed by the researcher.	
I understand that the researcher will observe me within the setting and that the observation records may include anonymised notes of my interactions with children.	
<b>I, _____ (please insert name), agree to participate in the research study.</b>	

Name of Participant: \_\_\_\_\_

Contact details: email \_\_\_\_\_

Signature: \_\_\_\_\_

Date (dd/mm/yyyy): \_\_\_\_\_

## Appendix H: Participant Consent Form – Parents

Title of Research Project: Exploring the inclusion of children with special education needs and disabilities (SEND) to mainstream preschool settings: a good practice case study.



UNIVERSITY OF  
BIRMINGHAM

Name of Researcher: xxx

	Tick to indicate agreement
I have read and understand the information provided in the participant information sheet and I have had the opportunity to ask questions about what will happen if I choose to take part in the study.	
I am aware that my child's participation is voluntary, that I can change my mind about taking part in the research and I am able to withdraw from the project (without giving any reason) at any time before, during and up to 30 days after the observation.	
I am aware that the final write up of the research project will form the basis of the researcher's thesis for a Doctorate in Applied Education and Child Psychology which will be available online (and which may also be published at a later date). I am aware that my child's name will not be presented in the final write up of the research project.	
I know who to contact if I have any questions about/issues with the research project or wish to withdraw data.	

I understand that the researcher may need to break confidentiality if a disclosure were made which suggested that my child, and/or others, were at direct risk of harm or which indicated any illegal activity.	
I understand that my child will be observed by the researcher in a range of learning scenarios during a typical session at their early years setting, and the observation records will include anonymised notes regarding my child.	
<b>I, _____ (please insert name), agree for my child to participate in the research study.</b>	

Name of child: \_\_\_\_\_

Signature: \_\_\_\_\_

Date (dd/mm/yyyy): \_\_\_\_\_

If you would like to receive a copy of the summary report at the end of the research please share you preferred contact details (e.g. email or address):

\_\_\_\_\_



## Appendix I: Pilot Interview Schedule

### Housekeeping:

- Welcome the participant and thank them for agreeing to meet.
- Explain the research aims and the interview process (time and topics).
- Check understanding of the participant information sheet and answer any queries.
- Review signed consent form, including agreement for audio-recording (if face-to-face) and video recording (if via Zoom or MS Teams) of the interview and right to withdraw.

**Commencement of Interview:** Start recording.

Topic	Possible questions	Possible prompts and follow up questions	Probes
<b>1. Subject</b>	What is your role/ responsibility in the setting?	<i>How long have you had this role? What does the role entail?</i>	<i>Tell me more.</i>
	What Early Years qualification do you hold?	<i>When did you complete this? Do you have any other qualifications relevant to your role?</i>	<i>Go on. Any others?</i>
	What experience do you have of working in early years education?	<i>How long have you worked in early years education? What type of experience do you have?</i>	<i>Tell me more.</i>
<b>2. Definitions</b>  <i>Show the participant around 3 definitions each for SEND and inclusion.</i>	Which definition do you feel best encapsulates your view of special educational needs and disability?	<i>Why have you chosen that one? Why not this one?</i>	<i>Go on. Tell me more.</i>
	Which definition do you feel best	<i>Why have you chosen that one?</i>	<i>Go on.</i>

	encapsulates your view of inclusion?	<i>Why not this one?</i>	<i>Tell me more.</i>
<b>3. Beliefs</b>	Tell me about how you feel Early Years education policies in the UK conceptualise special educational needs and disability?	<i>Why do you think that is?</i>	<i>Go on. Tell me more.</i>
	How do you feel about segregated special education, that is where the child or young person with SEND is educated separately from their peers without SEND?	<i>Why do you think that is?</i>	<i>Go on. Tell me more.</i>
	How do you view typically developing children in inclusive settings?	<i>Why do you think that is?</i>	<i>Go on. Tell me more.</i>
	How do you view the role of parents in inclusive education practices?	<i>Why do you think that is?</i>	<i>Go on. Tell me more.</i>
<b>4. Experience</b>	Tell me about a child in your setting who has special education needs/disabilities (please maintain confidentiality).	<i>What are the child's strengths and needs?</i>	<i>Go on. Tell me more.</i>
	Tell me about your role in supporting this child's education.	<i>What do you do on a typical day? Any other ways you support the child?</i>	<i>Go on. Tell me more.</i>
	Tell me about facilitators you experience in providing inclusive education.	<i>How does that impact on your inclusive practice?</i>	<i>Go on. Tell me more.</i>

	Tell me about challenges you experience in providing inclusive education.	<i>How does that impact on your inclusive practice?</i>	<i>Go on. Tell me more.</i>
	What is your experience of professional development and training around SEND?	<i>What did that entail? Have you had any other training or continuing professional development in this area?</i>	<i>Go on. Tell me more.</i>
	Tell me about your feelings of competency in teaching children with special educational needs and disabilities.	<i>Why do you think that is? What does that look like in practice? What is stopping you from feeling more competent? What could help you to feel more competent?</i>	<i>Go on. Tell me more.</i>

**Conclusion of Interview:** Turn off recording.

- Thank the participant for taking part.
- Remind the participant of their right to withdraw within the next 30 calendar days, and of the steps to take should they wish to do so including signposting to my contact details on the participant information sheet.
- Signpost the participant to the offer of a summary report which will be shared with them following write up of the study.

## Appendix J: Interview Schedule

### Housekeeping:

- Welcome the participant and thank them for agreeing to meet.
- Explain the research aims and the interview process (time and topics).
- Check understanding of the participant information sheet and answer any queries.
- Review signed consent form, including agreement for audio-recording (if face-to-face) and video recording (if via Zoom or MS Teams) of the interview and right to withdraw.

**Commencement of Interview:** Start recording.

Topic	Possible questions	Possible prompts and follow up questions	Probes
<b>4. Subject</b>	What is your role/ responsibility in the setting?	<i>How long have you had this role? What does the role entail?</i>	<i>Tell me more.</i>
	What Early Years qualification do you hold?	<i>When did you complete this? Do you have any other qualifications relevant to your role?</i>	<i>Go on. Any others?</i>
	What experience do you have of working in early years education?	<i>How long have you worked in early years education? What type of experience do you have?</i>	<i>Tell me more.</i>
<b>5. Definitions</b>  <i>Show the participant definitions for SEND and inclusion.</i>	Which definition do you feel best encapsulates your view of special educational needs and disability?	<i>Why have you chosen that one? Why not this one?</i>	<i>Go on. Tell me more.</i>
	Which definition do you feel best	<i>Why have you chosen that one?</i>	<i>Go on.</i>

	encapsulates your view of inclusion?	<i>Why not this one?</i>	<i>Tell me more.</i>
<b>6. Beliefs</b>	How do you feel about segregated special education, that is where the child or young person with SEND is educated separately from their peers without SEND?	<i>Why do you think that is?</i>	<i>Go on. Tell me more.</i>
	How do you view typically developing children in inclusive settings?	<i>Why do you think that is?</i>	<i>Go on. Tell me more.</i>
	How do you view the role of parents in inclusive education practices?	<i>Why do you think that is?</i>	<i>Go on. Tell me more.</i>
	Tell me about a child in your setting who has special education needs/disabilities (please maintain confidentiality).	<i>What are the child's strengths and needs?</i>	<i>Go on. Tell me more.</i>
<b>5. Experience</b>	Tell me about your role in supporting this child's education.	<i>What do you do on a typical day?  Any other ways you support the child?</i>	<i>Go on. Tell me more.</i>
	Tell me about facilitators you experience in providing inclusive education.	<i>How does that impact on your inclusive practice?</i>	<i>Go on. Tell me more.</i>
	Tell me about challenges you experience in providing inclusive education.	<i>How does that impact on your inclusive practice?</i>	<i>Go on. Tell me more.</i>
	What is your experience of	<i>What did that entail?</i>	<i>Go on.</i>

	professional development and training around SEND?	<i>Have you had any other training or continuing professional development in this area?</i>	<i>Tell me more.</i>
	Tell me about your feelings of competency in teaching children with special educational needs and disabilities.	<i>Why do you think that is?</i> <i>What does that look like in practice?</i> <i>What is stopping you from feeling more competent?</i> <i>What could help you to feel more competent?</i>	<i>Go on.</i> <i>Tell me more.</i>

**Definitions:**

Which definition do you feel best encapsulates your view of special educational needs and disability?

A	<p>Special educational needs and disability are a result of an interaction between characteristics of the environment, such as barriers to active participation, and the person's impairments.</p> <p><i>Adapted from Hollenweger (2014)</i></p>
B	<p>Special educational needs and disability are a result of barriers faced by people with impairments as a direct consequence of their impairments.</p> <p><i>Adapted from Booth and Ainscow (2011)</i></p>
C	<p>Special educational needs and disability are a result of barriers to participation for people with impairments.</p> <p><i>Adapted from Booth and Ainscow (2011)</i></p>

Which definition do you feel best encapsulates your view of inclusion?

A	<p>Inclusion as the placement of students with disabilities or in need of special support in general education classrooms. This may include:</p> <ul style="list-style-type: none"> <li>• Integration or inclusion of students with SEN;</li> <li>• Students with and without SEN go to the same school or classroom.</li> </ul>
B	<p>Inclusion as meeting the social and academic needs of students with disabilities or in need of special support. This may include:</p> <ul style="list-style-type: none"> <li>• Students with SEN can actively take part in the lessons;</li> <li>• Students with SEN get (individualised) support in mainstream classrooms (to achieve their learning goals);</li> <li>• Students with SEN benefit from instruction in mainstream classrooms;</li> <li>• Students with SEN are respected/valued.</li> </ul>
C	<p>Inclusion as meeting the social and academic needs of all students. This may include:</p> <ul style="list-style-type: none"> <li>• All students actively take part in the lessons;</li> <li>• All students receive (individualised) support (to achieve their learning goals);</li> <li>• All students benefit from instruction in regular classrooms.</li> </ul>
D	<p>Inclusion as creation of communities in classrooms or schools. This may include:</p> <ul style="list-style-type: none"> <li>• All students have equity;</li> <li>• All students receive care;</li> <li>• All students receive justice;</li> <li>• All students are valued;</li> <li>• Less popular or widely accepted forms of knowledge is valued.</li> </ul>

**Conclusion of Interview:** Turn off recording.

- Thank the participant for taking part.

- Remind the participant of their right to withdraw within the next 30 calendar days, and of the steps to take should they wish to do so including signposting to my contact details on the participant information sheet.
- Signpost the participant to the offer of a summary report which will be shared with them following write up of the study.



Appendix K: Example Extract of Completed Item from the ICP (Soukakou, 2016)

5. Membership (0, 1)

1 Inadequate	2	3 Minimal	4	5 Good	6	7 Excellent
<p><b>1.1</b> No opportunities for children to assume social roles and responsibilities are observed in the classroom, whereas other peers are expected and encouraged to assume such roles (e.g., become helpers, set up a group activity). (0)</p> <p>NA permitted</p> <p><input type="radio"/> YES <input checked="" type="radio"/> NO <input type="radio"/> NA</p>	<p><b>3.1</b> When adults provide opportunities for children to assume social roles and responsibilities (e.g., helping at snack time, cleaning up toys after playtime, setting up table for activity), all children are encouraged to assume such roles and responsibilities. (0, 1)</p> <p>NA permitted</p> <p><input checked="" type="radio"/> YES <input type="radio"/> NO <input type="radio"/> NA <i>interview info.</i></p>	<p><b>5.1</b> Peers' behaviors, attitudes, and responses show understanding and respect for children's individual differences (e.g., children may ask questions about why some children do some things differently, but their questions, responses, and attitudes show understanding, respect, and acceptance of individual differences). (0)</p> <p><input checked="" type="radio"/> YES <input type="radio"/> NO</p>	<p><b>7.1</b> Adults consistently and intentionally promote a sense of belonging and membership by encouraging children's participation in the group, focusing on their strengths, and modeling for all children positive responses and inclusive behaviors toward individual differences. (0)</p> <p><input checked="" type="radio"/> YES <input type="radio"/> NO</p>			
<p><b>1.2</b> Frequent bullying and persistent teasing toward children are observed in the class. (0)</p> <p><input type="radio"/> YES <input checked="" type="radio"/> NO</p>	<p><b>3.2</b> Adults intervene most of the time to stop bullying or persistent teasing between children in the classroom. (0)</p> <p>NA permitted</p> <p><input type="radio"/> YES <input type="radio"/> NO <input checked="" type="radio"/> NA</p>	<p><b>5.2</b> When presented with an opportunity, adults respond to children's comments/questions about individual differences in supportive and constructive ways. (0)</p> <p>NA Permitted</p> <p><input checked="" type="radio"/> YES <input type="radio"/> NO <input type="radio"/> NA</p>	<p><b>7.2</b> In addition to a variety of accessible books, visuals, and materials, adults embed activities to promote understanding of individual differences (e.g., adult reads story about individual differences, adult introduces characters with diverse strengths and needs during role play). (0, 1)</p> <p><input type="radio"/> YES <input checked="" type="radio"/> NO</p>			
<p><b>1.3</b> Adults do not intervene to stop the bullying or persistent teasing toward children. (0)</p> <p><input type="radio"/> YES <input checked="" type="radio"/> NO</p>	<p><b>3.3</b> Some books, materials, and visuals displayed in the classroom describe and reflect individual differences in positive ways. (0)</p> <p><input checked="" type="radio"/> YES <input type="radio"/> NO</p>	<p><b>5.3</b> Adults acknowledge children's strengths and individuality through their social interactions, provision of feedback, and instructional support. (0)</p> <p><input checked="" type="radio"/> YES <input type="radio"/> NO</p>				
	<p><b>3.4</b> When children's photographs or work is displayed in the classroom (e.g., children's work pictures displayed on walls, children's or family photograph albums), examples completed by children with and without disabilities are present. (0, 1)</p> <p>NA permitted</p> <p><input checked="" type="radio"/> YES <input type="radio"/> NO <input type="radio"/> NA</p>					

## Appendix L: Raw Data from the ICP

The ICP (Soukakou, 2016) assesses quality of inclusive practice within EYs settings. It has 12 individual items which are:

- Adaptations of space, materials and equipment – environmental adjustments and adult approaches for supporting children’s use of the setting and its resources.
- Adult involvement in peer interactions – adult approaches to support social interactions between children and develop positive relationships.
- Adults’ guidance of children’s free-choice activities and play – adult approaches to support children’s engagement in independent and social play of their choosing.
- Conflict resolution – adult approaches to prevent and solve peer conflicts.
- Membership – strategies to promote belonging, acceptance of difference and equal opportunities.
- Relationships between adults and children – adult engagement in responsive, sustained, reciprocal interactions and relationships with children.
- Support for communication – approaches to develop children’s language and communication skills.
- Adaptations of group activities – adjustments to group activities led by adults which support children’s participation.

- Transitions between activities – approaches to supporting children's transition between activities.
- Feedback – type and regularity of feedback given to children by adults for a range of purposes.
- Family-professional partnerships – processes which support partnership between the children's families and setting.
- Monitoring children's learning – processes which support the monitoring of children's learning towards personalised goals.

Each item contains between nine and fourteen sub-items. Each sub-item is assessed via observation, document review and/or questioning of staff. A rating of quality for each individual item is then given using the scoring guidance to give a rating between 1 and 7 (where 1 = inadequate and 7 = excellent). The overall quality is calculated as the total score which is the mean score of the individual items completed in the schedule.

The raw data from completion of the schedule in the research is presented below.

*Scores on sub-items organised by individual items one to twelve:*

	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
1.1	No	No	No	NA	No	No	No	NA	No	No	No	No
1.2	No	No	No	NA	No	No	No	NA	No	No	No	No
1.3	NA	No	No	NA	No	No	NA	NA	No	NA	NA	NA
3.1	Yes	Yes	Yes	NA	Yes	Yes	Yes	NA	Yes	Yes	Yes	Yes
3.2	Yes	Yes	Yes	NA	NA	Yes	Yes	NA	Yes	Yes	Yes	Yes
3.3	Yes	Yes	Yes	NA	Yes	No	Yes	NA	No	NA	Yes	Yes
3.4	NA	Yes	NA	NA	Yes	NA	NA	NA	NA	NA	Yes	Yes

3.5	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	Yes	Yes
5.1	Yes	Yes	Yes	NA	Yes	Yes	Yes	NA	Yes	No	Yes	Yes
5.2	Yes	Yes	Yes	NA	Yes	Yes	No	NA	Yes	Yes	Yes	Yes
5.3	Yes	NA	Yes	NA	Yes	Yes	Yes	NA	Yes	Yes	Yes	Yes
5.4	Yes	NA	NA	NA	NA	NA	NA	NA	NA	Yes	No	NA
7.1	Yes	No	Yes	NA	Yes	Yes	Yes	NA	Yes	No	Yes	Yes
7.2	Yes	Yes	No	NA	No	Yes	No	NA	Yes	No	Yes	Yes
7.3	NA	NA	No	NA	NA	Yes	NA	NA	NA	No	Yes	NA

Extract from field notes recorded at the time of the ICP data collection:

12:15

Giving hugs to calm & gentle rocking & use of dummy to calm  
after cv upset @ arrival - for ~~20~~ minutes. Put dummy away when  
calm.  
Resources @ child height

Removing obj from mouth - "not in your mouth"  
Supporting body while snuggling.

Asking as "How's your baby sister?"

Use name first & involvement to gain att. with name &  
movement.

Showing book with all chn who wanted to join. - asking  
Q - What is...?

Narrating "let's get a tissue"

Carrying to take to deal with hygiene needs.

Tickling to make giggle & add. adult support to  
help out of coat - asked to take it off but not able to.

Jumping - supporting body to lift & bounce - sensory  
seeking (vestibular) need met. Diff to others

Changing tone of voice - happy, excited, calm.

Showing book 1:1

Reminding of rules - "not face" when hitting

*Summary of Scores:*

Individual Item	Score	Rating
Adaptations of Space, Materials and Equipment	7	Excellent
Adult Involvement in Peer Interactions	6	Good/Excellent
Adults' Guidance of Children's Free-Choice Activities and Play	5	Good
Conflict Resolution	NA	NA
Membership	6	Good/Excellent
Relationship Between Adults and Children	2	Inadequate/Minimal
Support for Communication	4	Minimal/Good
Adaptations of Group Activities	NA	NA
Transitions Between Activities	2	Inadequate/Minimal
Feedback	4	Minimal/Good
Family-Professional Partnerships	4	Minimal/Good
Monitoring Children's Learning	7	Excellent
Total Score	47	
Mean Score (rounded to nearest whole number)	5	Good

## Appendix M: Example Extract of Coded Interview Transcript

Coded Extract from the Transcript of Participant B:

Speaker	Verbatim transcript	Code labels
Researcher	That's great. Um, and I wonder if you can tell me about some of the ways that, some of the things that support you in providing that kind of inclusive experience for those children that have special needs you talked about? Like what things support you in doing that?	
Participant B	Um, making sure that they've got everything they need in their rooms, so they might have their own little like sensory box that you can get for them.  Um, and the training that we get here as well also helps.  So, [manager] will, you know, get us to do training online or we'll have training here.	Adults' role in supporting physical and sensory needs.  Learning from training.  Access to CPD
Researcher	So what does that training entail, typically, kind of?	
Participant B	Uh, so it could be like, um, safeguarding around like the children, making sure you know that nothing from here leaks out from the outside world.  Um, it could be, I haven't done it yet, but we do like epilepsy training. Um, I've done my first aid training already. And then there are some children that get peg fed. So, you do like training around that if you were required to be there. So, a lot of it is just do more aspect of that.	Adults' role in safeguarding.  Adults' role in supporting physical and sensory needs.  Learning from training.  Completion of specific professional development related to SEND.

Researcher	So you've got that training, kind of some of the resources that you're using to support them as well.	
Participant B	Yes, so everything that you need for them are here, which is good. It's provided by like their parents who bring it here and it can stay here then that's great.	Parents as partners
Researcher	Yeah	
Participant B	If not, then we kind of have to rely on the parents to remember to bring it in each time. So yeah.	Parents as partners
Researcher	Any other supports that you find a helpful in providing that inclusive education?	
Participant B	<p>Uh, just the staff that work in the room. If you have any questions, you can always go to ask them. They've been here a lot longer than me, so I do tend to go 'what am I doing?' [laughter].</p> <p>Or like, 'where's there's clipboard?' if they have to have one to one. On a Friday, I do one to one with a little girl, so it's just making sure that you just know, if you are doing one to one, what is it exactly you've got to do?</p> <p>Other than follow him around. Because that is more or less what it feels like you are doing, but you do sit down and you do play with them, and you do take them off to like the sensory room if they need it or play outside.</p>	<p>Support for staff from peers</p> <p>Information sharing between staff.</p> <p>Individual support plans.</p> <p>Not just one-to-one presence.</p> <p>Adults' role in supporting communication and interaction needs.</p> <p>Adults' role in supporting physical and sensory needs.</p>
Researcher	So their clipboard, has that kind of that plan we mentioned on it, so it's got that information for you?	
Participant B	Yeah, it has everything you need to do. Yeah, it might be that you got to show a	Individual support plans.



	<p>little cards might have like songs on there, or it could be like if they want to read a book then you can show them and then they pick. So, a lot of them do like eye gaze, yeah, they won't say 'I wanna do twinkle twinkle, Little star'. Some of them might start humming the first few like, like, the rhyme twinkle twinkle little star or baa baa black sheep. So you just go with that regardless. They, they may have pointed or eye gazed twinkle but they might be humming Baa Baa, black sheep. So you can go with Baa Baa over what they've eye gazed.</p>	<p>Adults' role in supporting communication and interaction needs.</p> <p>Range of SEND.</p>
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## Appendix N: Example Extract of Coded Document Analysis

Coded Extract from the 'Supporting Children with Special Educational Needs' Policy:

Policy Transcript	Code labels
We recognise that we will need to consider the individual needs of children when planning our curriculum.	Individualised support plans. Uniqueness of needs.
We aim to provide a curriculum, which is accessible to the individual needs of all our children.	Barriers to inclusion should be removed. Participation. Uniqueness of needs.
We recognise that some children will need additional support to access the whole curriculum.	Access to support and adjusted provision.
We will ensure that the developmental needs of children are identified early and where needed the appropriate support is sought. We aim to provide appropriate support and strategies to achieve this.	Identifying SEND. Early identification. Access to support and adjusted provision.
We recognise the importance of early identification and assessment of children with special educational needs. This is particularly important in the area of early years care and education.	Identifying SEND. Early Identification.
We have a statutory duty to complete a progress check for two year olds.	Identifying SEND. Legislations. SEND process implementation.
This is always shared with parents and a written summary is completed.	Information sharing with parents.
The progress check will be carried out by a key person that knows your child well.	Identifying SEND. Legislations. SEND process implementation.

	Staff relationships with children.
If there are any areas where progress is less than expected in partnership with parents, we would agree further action.	Working with parents. APDR cycles. Individualised support plans. SEND process implementation.
We would also share information with the local health visiting team.	Working with other professionals.
We believe in the involvement of the child and the importance of taking their views into account. We will make every effort to involve the child in a manner appropriate to their stage of development, understanding and communication style e.g. Signalong /symbols/pictures/ Objects of reference when making choices, participating and interests.	Child voice. Adult's role in supporting communication and interaction. Uniqueness of needs. Participation.
We are committed to effective collaboration using a multi-disciplinary approach to meet the needs of children with SEND.	Working with other professionals.
We will actively support the children and families and maintain close links with all agencies working with the child.	Working with parents. Adults' role in supporting parents' needs. Working with other professionals.
We will make reasonable adjustments to our provision and practice to meet the needs of individual children with SEND in line with the SEND code of practice and the Equality Act (2010). For example; providing a standing frame for a child with cerebral palsy, or a raised board for a child with a vision impairment.	Access to support and adjusted provision. Uniqueness of needs. Legislation. Specialist equipment.
We will make sure our planning and our environment is differentiated to meet the individual needs of children which enables them	Participation. Access to support and adjusted provision.

<p>to participate fully within the early year's foundation stage.</p>	<p>Barriers to inclusion should be removed.</p> <p>Uniqueness of needs.</p>
<p>We also take part in additional training to support children.</p>	<p>Learning through training.</p>
<p>We regularly update our risk assessment which we share with the team, management and the parents.</p>	<p>SEND process implementation.</p> <p>Managing safety.</p> <p>Information sharing between staff.</p> <p>Information sharing with parents.</p>

**Appendix O: Example Thematic Overview with Example Data from Interview Analysis**

Theme	Sub-theme	Code labels	Example extracts from raw data
Communication is key	Information sharing	Information sharing between staff	<p>“bringing that into the setting and just making sure everyone's aware.”</p> <p>“we just make sure that we all just know what everyone is trying to talk about. And if you are a little bit lost and then you can go find someone that hopefully knows.”</p>
		Information sharing with parents	<p>“So it's nice to just know about the home life background, as, to make sure that parents and children are OK, that they had a good weekend. There's going to be no, little, short fuses being blown today, kind of thing”</p> <p>“you can help the child and send like stuff home too for the parents to work with as well.”</p>
	Listening	Listened to by managers	<p>“going back and sharing actually ‘these is my staff's concerns’ and yeah I did have to make a few complaints, but it felt that the staff felt that they were listened to, and I was listening to what their worries were.”</p> <p>“None of it was working and I had to call for [deputy manager] to come through in the end and sit in the room.”</p>
	Listening	Managers act on feedback	<p>“going back and sharing actually ‘these is my staff's concerns’ and yeah I did have to make a few complaints, but it felt that the staff felt that they were listened to, and I was listening to what their worries were.”</p> <p>“Chasing up things that, so when we had the training,”</p>

Conceptualising SEND	SEND exists within children	Difficulties related to SEND are driven by individual impairment	<p>“believe there are barriers that face people, um, obviously with impairments, but, sometimes, it can be a direct, a direct consequence of their impairment ... it can be something that’s been direct t them what they’ve been born with.”</p> <p>“Because, um, it's their impairments that they're faced with barriers”</p>
		Identification of SEND	<p>“We identify in their stay and plays that there is a need”</p> <p>“we’ve also got the flip side of some children may be from disadvantaged backgrounds, or they do have um, a lot of complex, um, special education needs or disabilities within the home. Um. So, if all the siblings, or there is quite a few people in the home, or even parents have a disability or a need, then, that child is only ever been bought up with that, so when they come to us is trying to unpick that.”</p>
	SEND requires something different from the environment	Access to support and adjusted provision	<p>“we just adapt things and make, um, adjustments within the provision”</p> <p>“So some of them have a like a plan put in place. I think it's called a PPI plan. So it just says if they need say like more time and sensory room. So coming away from all the noises and having a bit of downtime. Um, it might be that they need a little bit more work on sitting around a table with everyone just eating. Might have to sit there for five minutes, so a little timer will be used.”</p>
		Difficulties related to SEND are environmentally driven	<p>“whereas other children, it can be something that , um, the environment has an impact on.”</p> <p>“Because, quite often a child or a person with special educational needs, they um can participate, and quite often I think sometimes children with special educational needs, it's not necessarily the child that has the barrier it's other people.”</p>

		Inclusion is for all children with SEND	<p>“absolutely yes, children with SEND should be in mainstream school.”</p> <p>“Even though it does say all children, just the children with SEN would be my definition of inclusion. So the children with SEN are included in everything, um, even if all children do have the opportunity to take part, I think, it’s that we make sure that all the children with SEN, regardless of what their need is, um, we make sure they’re included, um, and we share that value then with parents.”</p>
		Need for provision provided outside the mainstream classroom	<p>“I don't agree with it, but there may be times, where you have to do stuff for them on their own. So there are times when we do have to do some work with our children on our own, it could be that they have to have a distraction free environment to do them intensive interactions, um, and if you've got a group of children there and you've got toys they're not going to be able to even do them simple things, making eye contact with you or playing a game of peekaboo. They wouldn't be able to have them opportunities. So there's sometimes, there might be times where they have to be away from the group, but not for it to be consistent.”</p> <p>“So there could be times when they may need to have some work done so, like a physio time, we might, we wouldn't probably do that in the room, if we've got to do movements, the children do like massage and stuff like that, because a child can just like come in and run over them.”</p>
	Valued	Developing tolerance and understanding of difference	<p>“So it's letting them children have opportunities to support the children with additional needs and disabilities so they're all included, everyone's included and they all can work together, because they never know who they might come across in in their future, and they may make friends or they may have relationships with children, and</p>

			<p>they might say, 'Oh yeah I remember, I used to play with so, and so at preschool and they used to have hearing aids.' or anything like that."</p> <p>"I mean, if you have like a child in a wheelchair, you'll make sure that you have room, and all the children are aware. So, it could be scary at first, but they do get used to it after a while."</p>
		Personal motives for working with children with SEND	"My main goal in role was to always work with children with special needs really because, um, I wanted to be educated and prepared for myself, just in case my children ends up falling down one of those spectrums at all, because it does run in my family. So, I wanted to be fully prepared."
		Rewards of working with children with SEND	<p>"But I do like the reward that comes after as soon as you may, manage to get them to reach that milestone. It is fantastic."</p> <p>"Absolutely, absolutely yeah. I mean I am, I am, very happy here and yeah, it is an amazing preschool. Not only for the fact that we do, like I said, we do take in these children,"</p>
		Striving to meet needs	"and if something's not working, um, what can we do to make things better"
Falling short	Honey pot effect	Challenges of high numbers of children with SEND	"However, when you have a setting with maybe 10, let's go with 10, children in, and let's go with four of those children are neurodiverse, and they can't sit down and participate in snack, and they can't sit down and participate in um circle time. Then the neurotypical children who, let's say a little spirited and a little whizzy, they see those children running up and down because that's what those children, that's their coping mechanism. Then they're not learning from us as well. Do you see what I'm trying to say?"



			“children with SEND should be in mainstream school. I do think it needs to be balanced. Otherwise, it turns into a specialist educational practice.”
	Inclusion isn't for all	Limited access to mainstream education	<p>“I think the other settings in the area were wrong by not taking them on and not giving these children the opportunities that they deserve.”</p> <p>“from current children that are being told that schools aren't accepting their children, whilst we go through EHCP statements, it's quite upsetting whilst you have that family in front of you that say no one wants their child.”</p>
		Yes...but factor	<p>“I think it's just all depends on what kind of support they need.”</p> <p>“In the mainstream school, if they can't settle into mainstream school, then they might need to go to a school that is specifically for their abilities.”</p>
	Lack of resources	Lack of funding	<p>“we've had it in the past, where you try to apply for money but there's not money there because other people have applied for it, and not use it effectively, so the pots gone.”</p> <p>“There could be a lot more but I understand there's obviously costs behind that, and government cuts, there might not be, um, as much.”</p>
		Limited access to professional development	“when I was at college when I was doing my level one and my Level 2, I did keep asking them to send me somewhere, but that had a special additional needs child, but I suppose I did go to one setting and that did have a SENCo child, but I wasn't really around that child as such because they had their own one to one, so they were always out the room anyway,”

			<p>“You have to do that research because it isn't the, the training out there.”</p>
		Long wait for services	<p>“if they don't already have, most of them do have professionals working with them, but if they don't that's even harder to access, um, provision.”</p> <p>“You could be on a list for ages to get speech therapy for a child or to have our early years team come in to observe, you could be waiting quite a long period of time before they can come in to offer advice.”</p>
		Staff numbers	<p>“so challenges could be staff. Not, not having staff, even though recruitment is always a challenge”</p> <p>“a lot of SENCOs, a lot of other people are in numbers, so they don't have that opportunity to do extra training. So, yeah that can be difficult.”</p>
	More harm than good	Specialist schools can negatively impact children with SEND	<p>“in previous experience of children that have, just when they've been to them provisions and then they come back to us, some of their skills they've learned, even though they've been with us longer, have dwindled away. Um, they struggle to deal with situations, um, until they get into that routine. And obviously it takes them a lot longer to get back into that routine as I go to my specialist provision one day a week and then I'm at mainstream. They did struggle with, for over a term, to get back into that routine of 'right I'm going to be mixed them children today and today I'm going to be in this provision', because they're not going to hear the, if they're all in the specialist provision, some of them children may not be talking so they were only ever going to hear adults speaking, whereas if they're in a mainstream, they will hear children talking, um, talking to them, as well, as staff talking in a group.”</p>

Importance of professional development	Confidence in skills is needed	Staff feel worried about working with children with SEND	<p>"I think they were a bit scared when we had to training, um, because with the link to the epilepsy as well, I think the trainer said 'it's life or death' and that scared the staff."</p> <p>"Scary, I was scared to come back and work in the room."</p>
	Formal learning	Access to professional development	<p>"making sure that staff have had all the training that they need, to make sure that we're meeting all of his needs."</p> <p>"Um, it could be, I haven't done it yet, but we do like epilepsy training. Um, I've done my first aid training already. And then there are some children that get peg fed. So, you do like training around that if you were required to be there."</p>
		Completion of specific professional development related to SEND.	<p>"I was lucky enough that our committee agreed that I could attend the SENCo qualification, um, alongside my, alongside my SENCO because obviously it was reduced costs. But it meant that we could then share advice, and we can then feed it on to other staff members, that what might be useful."</p> <p>"if I have to learn like a new skill, like sign language, I will and then I'll make sure that it comes into practice here."</p>
		Learning from training	<p>"it goes across everything, so it looks at legislation, it looks at different tools that you can use, you look at transition and how you support children was SEN. Um, and then you do like a case study at the end of what, what you may use and because me and my SENCo done it, when they come to a task like making a leaflet around EHCPs for staff and parents we done both of them, so it means we could use them for a parent and we can also use them for new staff, to explain what that process was like. Um, and then using one-page profiles, we use two</p>

		<p>different ones, so we use them reflected by which one would be best for us.”</p> <p>“So a lot of it's just knowing where you can look and I suppose that's what I mainly got out of college really, is where to go to look.”</p>
	Online training gives access to professional development	<p>“So, it was all just done online. It's still been done over the last few years. Obviously, we've been sat at home. Not doing a lot, so.”</p> <p>“Just like doing my CPD training online”</p> <p>“just making sure that I've got the knowledge and the skills to back me up. So like, if I did need to learn sign language, I would hopefully I would know where to go to look for that other than, you can go online.”</p>
	Qualification level	<p>“So, I hold the DNNEB diploma. So, like way back. It's a Level 3, equivalent to Level 3. And then I also have a Level 2 in understanding challenging behaviour, understanding autism, and children with special educational needs.”</p> <p>“Um, obviously I can't be left in a room on my own because I'm a Level 2”</p>
Independent study	Learning from independent study	<p>“Just like my own course work that I've done, I can go back to my book and look at stuff as well, and I've researched stuff on all time on, on the Internet as well.”</p> <p>“And it could be reading up on stuff.”</p>
Practical learning	Drawing on life experience	<p>“Yeah, well um, at home, it's like there's no different than being here, really. I mean, I have an 8 year old and you know she's quite shy and quiet, so I know how to go and talk to her. And there's a lot of children here that were quite shy and quiet. It kind of helps.”</p>

			<p>“a lot of it is because obviously I've got my own children. They do, I always say it's, it's no different from me walking out my house and coming here. The noise level is the same even though I think my house is louder. Um. You know, like my boys, they're, they're delayed in speech so that kind of helps me in that background for when I come here, so I know already how to kind of guess or know how to interact with them. Or if they are starting to speak, I can kind of get what they're trying to say.”</p>
		Learning on the job	<p>“I think it's as I said, you have you have to learn on the job. Um, there isn't a ‘You go on this training course and you're going to have a child with this need and they're going to come to your setting tomorrow’, because all the children are completely different. Um. But it's spend, as I said, spending time with them, parents, if there were other professionals already working with them if you can go to a meeting beforehand, before the children start it really is helpful.”</p> <p>“sometimes you have to be on the job and do it, learn things at the same time.”</p>
		Length of time in role	<p>“Umm, maybe 8, 9 years.”</p> <p>“Not that long. I mean I started on the 4th of January, and we're in February now so.”</p>
	Sharing experience	Managers advise	<p>“she'll say to us to look through a certain policy from one or two and it might be equality, and then she will quiz us on it as well.”</p> <p>“the training that we get here as well also helps. So, [manager] will, you know, get us to do training online or we'll have training here.”</p>

		Managers support staff by 'doing with'	<p>"Put the right IPP we work, as a key person and the SENCo, we work really closely together to work out what, what we feel would be good for their targets to encourage the child to grow with it."</p> <p>"So, it's all about praising or supporting them. Being there when we're doing the lifting 'Oh, well done. That was really good.'"</p>
		Support for staff from peers	<p>"But we obviously, we, we all chat. You know she's also our room lead. We chat on a daily basis and discuss how things are going"</p> <p>"just the staff that work in the room. If you have any questions, you can always go to ask them. They've been here a lot longer than me, so I do tend to go 'what am I doing?' [laughter]. Or like, 'where's there's clipboard?' if they have to have one to one."</p>
		Working with external professionals	<p>"we spoke to different professionals as well, so we spoke to education psychologist and we had, um, obviously the early years specialist provision there so you got to ask questions, um, about things that we may not have cropped up before."</p> <p>"I think obviously working with the other professionals, so he obviously attends specialist, um, so he goes to [Early Years specialist support service]. So hopefully having that communication and spending time with them is really important."</p>
It's not one size fits all	EY practitioner roles are varied	Adults' role in supporting behaviour	<p>"we looked at, like the iceberg profile as well. So looking at them underlying things and what could be happening for that family and unless you have that conversation with the family, you wouldn't know. It could be that dad's not working or something else has happened, and then you, all we're seeing is the spikes in the behaviour and stuff like that"</p>

			<p>“we have children here who are whizzy as I call them, so they find it difficult to sit down. And obviously we would, we would say to them, ‘here’s a cushion. You sit down on this cushion, well done. We’re gonna sit down for 2 minutes here. I have, let’s have a sticker.’”</p>
		Adults’ role in supporting communication and interaction	<p>“one of her targets is to recognize objects of reference. Um, so every day we will show her a cup and a bowl for snack time. We will sign, wash hands. Um we will show her a coat and wellies and sign outside when she needs to go outside, and we will show a nappy at nappy changing time just to reinforce her understanding of those objects and the routine.”</p> <p>“it might be that you got to show a little cards might have like songs on there, or it could be like if they want to read a book then you can show them and then they pick. So, a lot of them do like eye gaze, yeah, they won’t say ‘I wanna do ‘twinkle, twinkle, little star’’. Some of them might start humming the first few like, like, the rhyme ‘twinkle, twinkle little star’ or ‘baa, baa black sheep’. So you just go with that regardless.”</p>
		Adults’ role in supporting learning	<p>“everybody is working together to get them to where they need to be academically wise”</p>
		Adults’ role in supporting parents needs	<p>“Knowing that they’re not alone. So they’re not alone, and they possibly have parents in their same situation.”</p> <p>“actually the children coming here is a good respite for the parents as well.”</p>
		Adults’ role in supporting	<p>“I also help with the lifting. So he does have a sling and we use a hoist with him, so I do help with liftings”</p>

		physical and sensory needs	“And then her other one, just trying to think, is to engage in sensory play. Yeah so I’ve just used playdough”
		Adults’ role in supporting social, emotional and mental health needs	<p>“Working with like the after-school club, I do have a child with ADHD and he, he knows what he's going through, and he'll explain. And I have said everybody is different so like we sit down calmly, and we talk.”</p> <p>“o it's just staying calm. They'll stay calm. The little meltdown will pass, you know it will. Even if it feels like it don't it will.”</p>
		Not just 1:1 presence	<p>“Yeah, yeah, yeah. So this little girl comes in, um I have been one to one with her but not so much now. But it's like following her around and getting her to do sensory play, using a timer so she's there and then doing some other sensory play as well.”</p> <p>“where's there's clipboard?’ if they have to have one to one. On a Friday, I do one to one with a little girl, so it's just making sure that you just know, if you are doing one to one, what is it exactly you've got to do? Other than follow him around. Because that is more or less what it feels like you are doing, but you do sit down and you do play with them, and you do take them off to like the sensory room if they need it, or play outside.”</p>
		SEND process implementation	<p>“So they're, they're reviewed every, the IPPs are reviewed every six weeks.”</p> <p>“we spend a lot of time with mom making sure that his EHCP, so I helped with the process and making sure the EHCP was in place”</p>
		Supporting transition	“if there were other professionals already working with them if you can go to a meeting beforehand, before the children start it really is helpful.”



			<p>“And obviously now we've been given his school and, um, he is going to specialist school we've got that opportunity then to speak with the school and make sure his transition to school runs smoothly, as it can be.”</p>
		Professional role and responsibilities	<p>“So, I am a deputy room lead for the [room] room um so support [SENCo] who is the room lead in, in the role of running the room. Making sure the room runs smoothly, liaising with the parents. [SENCo] is our SENCo, so she's quite often out of the room quite a lot. So point, kind of, I guess I'm the point of call for the staff and for parents essentially.”</p> <p>“I'm an early years practitioner”</p>
	Individualised plans meet needs	Individual support plans	<p>“we also do a lot of support plans and record all of our stuff down for our children with additional needs so every child has a support plan so, whatever their targets are, they're on there”</p> <p>“Well, it's got the IPP sheets so I can look to see what the goals are, what is her target? What's smart measures and what's expected of the adults. So it's like on there to show me what I'm to do as well so.”</p>
	Variation in SEND needs	Impact of COVID-19 on development	<p>“That could be a part of COVID, and I know we've had lots of discussions in setting about COVID children, um, that've missed out on them opportunities.”</p> <p>“because they don't know whether she's what they're now calling COVID babies.”</p>
		Needs changing over time	<p>“t could be that there is a small change with how much water he's having in his feed, it could be about if he's got a new hand splint. Just making sure that we're aware, then we can feed that back to all the staff that are looking after him.”</p>

			<p>“if anything changes with his needs and with any of his outcomes, if he's not here for a long period of time that's also been a challenge. If you start working on something and he's been off for a period of time, you always worry about, um, ‘Where are we going to go next?’ because we might have to go back to what we were working with before”</p>
		Range of SEND in setting	<p>“there's like another child that's like in a wheelchair ... there are some that just likes to run not and can't be in a term of destruction, but that's just because they're still trying to understand that there are people around them.”</p> <p>“she has no language. She has pica. Um, but she also makes very good eye contact. Um and can follow direction with a lot of adult support.”</p>
		Young children don't understand	<p>“But like the younger children, it's a lot harder 'cause they don't quite understand. “</p>
Recognising a job well done	‘Good enough’	Doing a ‘good enough job’	<p>“nothing's ever gone wrong, he's always had his feed, he's never been hurt, um, he's out the play opportunities that he needs. We're doing the best we can for him.’ Um, I think that helps, having that reassurance so we're not expecting them to be singing and dancing by the time he needs that's not what we're here for, it's about giving him them early opportunities, ready for when he goes to specialist school, and he will continue.”</p> <p>“Well, if you can't, it's nothing you can control. While he's here you're doing everything that you can.”</p>
	Morale	Confidence	<p>“I would say most of the time it's, I'm quite happy and confident”</p>

			<p>"I know what I'm doing but it's just sometimes just, reinforcing that to yourself, but 'Yeah I do, I do know what I'm doing.'"</p>
		Praise form managers	<p>"Yeah I think praising them when things went well or if you saw really good practice, making sure that you feed that back."</p> <p>"I've been praised up ... so yeah knowing that I'm doing it right"</p>
The power of community	Inclusivity	Equality and fairness	<p>"everyone should be valued and like respected, and they should be equal, cared for, justice and all that lot."</p> <p>"They should have the same opportunities as other children."</p>
		Family preference for mainstream	<p>"if the children and families, want their children to go to mainstream, then they should be encouraged and supported in doing so."</p> <p>"if the children and families, want their children to go to mainstream, then they should be encouraged and supported in doing so."</p>
		Inclusion is for all	<p>"Because all children get the chance to take part in all lessons and they receive the support."</p> <p>"like I said, all children are unique and they need to be included and interact"</p>
		Participation	<p>"We do sign-along with everybody, we use objects reference generally throughout the day for all children so they're not being, um, not victimized that's not the right word, but they're not being, oh well you're SEN so this is what's going to happen for you. They're all included within, within the session and everything we do."</p> <p>"Yeah, they, they all they actively take part in lessons"</p>

	Reciprocal learning for children	Children with SEND learn from their peers	<p>“The children with SEN are here to learn from from us, but also hopefully from the neuro-typical children who can sit down for snack. Who can sit down and participate in circle time.”</p> <p>“even if they're not, fully there with their understanding of the world that's around them, they can start, I know it's classed as mimicking, but they can start to follow what everybody else is doing, and then they start to get to that point.”</p>
		Peers benefit from learning with children with SEND	<p>“[peers] self-esteem could boom. And they take pride in what they're doing.”</p> <p>“trying to put stuff in place where [other settings] can, um, accept them children that, and they do have needs, but what difference they will make to your setting and to the other children attend is, is important.”</p>
	Relationships	Inclusion builds relationships between children	<p>“They need to still have them relationships with children and that's, I think, that that's why some parents want their children to come to a mainstream setting, because if they do go to a joint, if they do go to a specialist provision, then all the children they're ever going to mix with have a need.”</p> <p>“if they if they've been brought up with them and from early, from two year old and they've seen them daily they wouldn't bat an eyelid. They'll just think ‘ Oh, they're in today. Great, I'm really, I'm so glad they're in I get to play with them!’ “</p>
		Parents as partners	<p>“Working alongside parents is brilliant because they can help, understand what's happening and then you're working with them so that they're included as well, and they feel valued as a parent.”</p> <p>“I think it's very important. I think the parents need to, need to be involved in the child's education and I think their also their wishes and beliefs need to be taken into consideration and they need to, also, we</p>

			all need to be singing from the same hymn sheet so that we are all doing the best for those children.”
		Relationships with parents	<p>“Well, I think you should, you know, get to know their parents, because if anything that's happening in that home, it's going to affect the child when they come in.”</p> <p>“they know them children best and it's building that positive relationship with them families and having that, I wouldn't say unprofessional, but you need to have a friendly relationship with them families, because one day, they can come in and have a complete breakdown on you, because everything's been going wrong or their children are constantly poorly so they're not in. You need to be able to have that relationship and that rapport with a family to share your concerns, but also for them to speak to you, and it could be something that may seem really little, so it could be about them not eating something, but to the family, it could be, they're at the end of their tether because their child's not eating nothing. So, um, having that relationship and sharing with families how, how inclusive we can be, and having them early visits and early conversations I think it's really important.”</p>
		Staff relationships with children	<p>“It is just making sure that they feel safe with you, you know that you're safe them, and that's it, yeah.”</p> <p>“And still let them families come in with their children while you're going through that process so they get to know you and the team, and they also get to meet, and the children then start to make relationships with, with the staff whilst their parent is still there”</p>
	Safety	Safety concerns	“We have a child that throws toys. You know, constantly fearing for your life, when a train's coming flying at your head, you know that kind

The safety problem			<p>of thing that's, that's about it really. And, keeping, keeping the other children safe, you know. They like, we have children that like to go in, we have a little, yeah, we have a child that comes in for a cuddle, but it's not a cuddle. He's pull, he ends up pulling hair. You know I've been bitten on several occasions. That kind of thing.”</p> <p>“And they were like ‘we've basically got this child's life in our hands’. Um, so it's just making sure they feel confident and that was a challenge at first, and they would worry over the smallest of things. Um, it could just be an eye twitch and they're like ‘Oh my God! They're having a seizure!’ and I’m like ‘They're fine, don't panic.’”</p>
	Behaviour is challenging	Supporting behaviour is challenging	<p>“Children with special educational needs are harder work. They do obviously have challenging behaviour. We have a child that throws toys. You know, constantly fearing for your life, when a train's coming flying at your head, you know that kind of thing that's, that's about it really.”</p> <p>“Challenges, um, we do have another child with behaviour, so it's like throwing stuff. So, it's trying to keep them, safe as well so.”</p>
		Peers copy behaviour of children with SEND	<p>“Sometimes we see that, with our children that may have had, um, other siblings in their family that have got diagnosis and they see them, so some of the behaviours that they show, can represent, special educational needs but they may not necessarily have them.”</p> <p>“The children with SEN are here to learn from, from us, but also hopefully from the neuro-typical children who can sit down for snack, who can sit down and participate in circle time. However, when you have a setting with maybe 10, let's go with 10, children in, and let's go with four of those children are neurodiverse, and they can't sit down and participate in snack, and they can't sit down and participate in um</p>

			circle time. Then the neurotypical children who, let's say a little spirited and a little whizzy, they see those children running up and down because that's what those children, that's their coping mechanism. Then they're not learning from us as well.”
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**Appendix P: Example Extracts from my Reflective Research Journal**

Date	Journal entry
28/06/2022	<p>I was able to complete much of the coding on my last session of data analysis. This was helpful and even a short break has meant that my memory for codes meaning etc. was a little less clarified. A codebook would have been helpful to develop as I went along which I will now aim to do prior to completing coding. ACTION – develop codebook.</p> <p>I had also intended to analyse all of the interviews and documents together. However, I have realised that given RQ3 this will not be possible – I will need the interview data to be separate from the documents to help answer RQ3. ACTION Therefore a separate RTA process will need to be completed for the documents.</p>
01/07/06/2022	<p>Analysis continues to feel like a challenge due to a sense of pressure that this is where the key unique contribution of my research will come from, and that I want to do the efforts and views of the practitioners' justice. This has led to some avoidance and blocking on my part in finishing coding and beginning to identify themes.</p>
02/7/2022	<p>In the methodology chapter draft, I wrote that all text would be coded however, on re-reading the RTA book by Braun and Clarke (2022) and beginning to code I realise that not all text is coded, only that which is relevant. ACTION - this statement in the RTA process part of the methodology will need to be changed.</p>
03/07/2022	<p>Upon rereading the section in Braun and Clarke's (2022) book, I decided to try the second coding round in a different format to see if this was preferable method, and also if engaging with the transcripts in different ways would elicit different understanding. Some additional/changes in codes occurred. I found that I looked the feature in NVivo where you could see all data by code as this helped to get a sense of the code meaning. However, there were positives to coding in Microsoft Word as I could see the codes linked directly to the data text which gave an overall picture of the codes which were coming up frequently and were linked across similar raw text data. This was difficult to get a sense of in NVivo.</p>



06/07/2022

It has been hard to develop theme names which have an analytical rather than descriptive nature. This struggle has made me realise that my past use of thematic analysis has often included descriptive theme names.

Some candidate themes contain contradictions. This is ok if the theme itself is about contradictions e.g. 'SEND is conceptualised in a range of ways' points to the variety in the codes so inherently has contradictions. However other themes have contradictions in them which are not inherent to the theme and so these themes will need reconsidering e.g. 'benefits'. The candidate theme map is below:



07/07/2022	I have realised that I am attempting to make my theme names 'speak for themselves' which is putting undue pressure on the themes. As Braun and Clarke (2022) encourage the write up to speak for the themes and tell the story of the data set.
20/07/2022	On reflection the sub-theme name 'lack of willing' has a strong value judgement to the interpretation of the data. This is likely to be caused by my own views around inclusion and frustration I experience as a TEP when working with settings who do not feel they are able to make further adjustments to support the inclusion of a child with SEND. In recognition of this bias, I have returned to the data set and renamed the sub-theme with a less value-laden term.