Talking 2gether: Collaborative Health Visitor (HV) and Early Years setting implementation of the Early Language Identification Measure and Intervention (ELIM-I)

Cristina McKean,

Newcastle University, University of Oxford, UK

Jenna Charlton,

Christine Jack,

Emily Armstrong

Newcastle University, UK

Vicky Gilroy

Institute of Health Visiting, UK

Building on work led by Professor James Law

August 2024

The following report presents the outcomes of an EEF-funded Early-Stage Programme Development project exploring the feasibility and acceptability of collaborative delivery of the Early Language Identification Measure and Intervention (ELIM-I) with Health Visiting teams and early years settings: Talking 2gether program. The Talking 2gether program aims to improve the language and communication development of children aged between 2 and 3 ½ years through the development of language enriching early years environments at home and in early childhood education settings. The program involves identification of need using the ELIM-I measure and delivery of small-group and individual intervention with parents, delivered collaboratively between early education practitioners and health visiting professionals. The project was delivered by Newcastle University and the Institute of Health Visiting throughout 2022-2023 in the North East of England.

Introduction

Project description	**The Talking 2gether Programme** The Talking 2gether programme aims to improve the language and communication development of children aged between 2 and 3; 06 years through the development of language enriching early years environments at home and in early childhood education settings. The focus is on increasing the frequency with which children experience the specific type of adult-child interactions which we know promote language learning in this age group both at home and in their early years setting: Responsive Contingent Interactions (RCI). For early years practitioners (EYPs) the goal is to increase the frequency and consistency of their use of Responsive Contingent Interactions in the early years setting, to learn skills in how to support parents to increase their use of this style of interaction, and to deliver a programme of sessions with families to support this change. For parents the goal is to increase the frequency and consistency of their use of Responsive Contingent Interactions at home. This may be harder for some families than others and for children with identifiable risks of poor language development the need for change is greater. In these cases, the programme brings together Health Visiting (HV) and Early Years teams to work together to offer tailored support. The identification of these 'at-risk' children is facilitated by the HV 2-2½ year review and the Early Language Identification and Intervention (ELIM-I) approach currently in use in HV teams. **What is involved in implementing the programme?** Over the course of one term, six Talking 2gether group sessions are offered to all parents. The six sessions are delivered by EYPs and take place in the early years setting on a weekly basis, with up to 6 parents attending each group. These group sessions include 20 – 30 mins of information sharing about language, communication and interaction with parents and goal setting. This is followed by 30 – 45 minutes with the parents and children engaged in a themed activity where EYPs model Responsive Contingent Interactions and support parents to also try to do this with their child. Themes of the activities align with daily routines at home to support generalisation to the home setting (e.g., making and sharing snacks; washday; outdoor walks; etc). Where a child has been identified as at particular risk of poor or delayed language development by the HV team using the ELIM-I measure the HV and EYP meet with the parent jointly to talk about how they can work together to support the family through the Talking 2gether programme. For these families, an additional four home visits are provided by either a HV team member (Family Health Practitioner, FHP) or the EYP, according to whoever is best placed in terms of resource, relationship with the parent, and parental preference. These visits offer additional support for parent/caregiver including goal setting, and more tailored coaching and modelling. The final session of the four home visits is also conducted jointly with the FHP and EYP to develop a plan for next steps after Talking 2gether has been completed. **What does the training involve and who participates?**

	Session 1: Providing language enriching environments in the early years – face to face, 1 full day Participants: EYPs, a member of the Senior Leadership Team (SENCO, EYFS lead, or Headteacher) and members of the HV teams who serve the children attending that EY setting. Content: The importance of early language development; Risks for poor language development; Understanding roles, knowledge and skills across HV and EYP teams; What is a language enriching environment; What is responsive contingent interactions; Working in partnership with parents; Peer coaching models and tools. *Session 2 & 3: Facilitated peer coaching – online, 90 mins* Participants: EYPs and HV teams (HV/FHPs). Content: Paired peer coaching review, and feedback. EYPs take part in two sessions with video and feedback; HVs take part in one session with guided reflection at training session 5 (review). *Session 4: Talking 2gether – online twilight session, 90 mins* Participants: EYPs and HV teams (HV/FHPs). Content: The structure and content of the Talking2gether programme; Strategies for working in partnership with parents; Strengths-based and appreciative approaches to working with parents; Shared decision making and goal setting; Modelling, coaching and feedback; Implementation planning. *Session 5: Talking 2gether review, 60 mins* Participants: EYPs and FHPs involved in delivery; Content: Supported review of Talking 2gether group sessions – structured reflection and problem-solving.

Delivery overview	**Study Processes** **Ethical approvals:** The collaborative model across HV teams and Early Years Settings in the Talking 2gether programme required NHS ethical approvals therefore the HV team involved, needed to be identified prior to ethics submission. The assignment of the Wingate Nursery Stronger Practice Hub on 16th December for recruitment of and delivery by EY settings, indicated Durham HV team was a geographical match. Ethical approvals documents to recruit and deliver within Harrogate and District Foundation Trust (HDFT) were submitted and HRB and Trust R&D processes instigated in February. Approval was received in April. **Site identification:** In November 2022 the EEF team identified that the NE Stronger Practice Hubs would cover Sunderland or Durham with settings identified after the roadshow. We therefore explored the potential to work with HV teams (Sunderland and Durham) in November in terms of their readiness to use the ELIM approach which underpins the Talking 2gether programme. At this stage a target of 8 settings was agreed to align with the HV and NU delivery team capacity. In February Wingate withdrew their involvement and so we began working with the local authority to identify EY settings ourselves. **Recruitment:** Recruitment processes were driven forward by the research team. As ethical approval for the project was assigned to HDFT recruitment remained within the same County Durham locality. In March 2023 it was again agreed with the EEF that the targeted number of settings would be 8, due to constraints to recruitment, including limited time-frame to recruit and for settings to be ready to take part (project training began in April 2023), logistical challenges of matching HV teams and EY settings for collaborative delivery, and capacity issues within early education.

	In April 9 early years settings were invited to take part in the project. 6 settings agreed to take part, each providing 2 Early Years Practitioners (EYPs) that would be trained in the intervention and lead on delivery of parent group sessions in their setting. 12 HV team members from HDFT were recruited to support these EY settings (1 HV and 1 FHP per setting)- these practitioners would be trained in the intervention and lead on delivery of home visits to parents. Settings were asked to recruit 6 families with 1 family receiving the additional support from the HV team. **Attrition:** In May (2023) 1 EY setting dropped out of the project after training but before intervention delivery began, due to capacity issues (staff long term sickness). In June a second setting dropped out of the programme after the delivery of intervention session 1, also due to capacity issues (staff bereavement and critically ill relative). This left 4 settings that completed the whole programme, finishing in July 2023. Data was collected from the 2 settings that dropped out; both were interviewed, and both had completed data collection tools up to the point of drop-out (including pre-/post training questionnaires). Both settings said they would like to be involved in the future if that was possible and one plans to roll out the parent sessions in September. **Delivery:** Training began in April 2023 and involved 5 training sessions: 1 day face-to-face, Peer Coaching x 2, Twilight x 2. Intervention delivery began at the end of May and involved 6 weekly parent group sessions, and for 1 parent per setting and additional 4 visits at home. Delivery finished at the start of July. Final data collection was completed in July. Table 1 in Appendix 1 summarises the number of sessions attended (training) and delivered (intervention) by each setting and Table 2, the number of parent participants attending. **Challenges:** The identification and withdrawal of the Wingate Stronger Practice Hub delayed application for ethical approvals, created additional work that was not planned for in our staffing, left minimal time for recruitment, and an extremely short lead in for the settings and HV team to plan and manage their capacity to participate. The team in the Local Authority were superb in helping us to find settings, beginning to identify potential candidate settings on 2/3/23. We received a list of those we could approach on the 20/3/23. Hence settings only had one month between hearing about the opportunity (20th March) and releasing staff for the first training session (24th April). This affected the numbers of settings approached, the development of researcher-practitioner relationships prior to collaborative working, and settings' ability to plan for the release staff and liaise with the HV team.

Research questions, data collection methods and key findings

The following table summarises key findings triangulating across all of the data sources (delivery logs, pre- and post-training feedback questionnaires, post programme surveys, interviews and deliverer reflections). Appendix 3 presents detailed findings for each question with indications of the data sources, quotes and key figures. Appendices 1 and 2 summarise attendance and demographic factors and appendices 4, 5 and 6 present the survey data.

RESEARCH QUESTION 1	ANSWER (INDICATOR)	KEY FINDINGS
Q1 Is the programme being delivered as intended? (see pages 21 – 28 for detailed results)	1.1 Targeted Participants attend the one-day training event and meet the learning outcomes 1.2 EYPs and HVs receive coaching and practice the use of responsive contingent interaction in settings on at least 2 occasions, reflect, receive feedback and act on that feedback. 1.3 Targeted participants attend twilight session and achieve the learning outcomes 1.4 Targeted participants attend a Midpoint review of the Talking 2gether parent groups and	**Training** Training involved 5 sessions, with EYPs expected to attend 5 and HV/FHPs to attend 4: 1 x full day face-to-face training, 1 x coaching session (EYPs and HV/FHP), 1 x coaching session EYP only, 2 x twilight sessions (1 of these a midpoint review). • *EY Settings:* Attendance at the training sessions was high (see Table 1 and Appendix 3). From the 6 settings who completed the training 4 missed 1 session, 1 missed 2 sessions, and 1 attended all sessions. The lowest attendance was for the second coaching session and the midpoint review. Feedback suggests that these were the least essential in terms of achieving the learning objectives. • *HV/FHPs:* Eight HV/FHPs attended the training sessions with 7 or 8 at each session. Three of the 4 FHPs involved in delivering the home visits attended all the relevant training sessions (1 FHP missed 1 twilight session). Learning outcomes were met for all those who attended training. Setting (2) missed both the face-to-face training day and Coaching session 1 (due to staffing capacity issues) and this may have affected their delivery. **Delivery**

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	individual coaching and reflect on successes 1.5 Delivery of intervention as intended in settings 1.6 Delivery of intervention as intended in Home	*EY Settings:* All the 4 settings who completed the programme covered all the planned programme content with parents, used the relevant materials and delivered the key components (information giving with video; modelling; coaching) and this was delivered by the EYPs who had attended training. In 2 settings the number of sessions was reduced to 4 or 5 with the same material covered in a shorter time. One did this due to time constraints in the term after a delayed start and the other due to staff sickness. The evidence regarding responsive contingent interaction interventions suggests that too few contacts may not yield changes in parents and children. The effect of dosage needs to be tested empirically for this intervention in a pilot trial. Parent report suggests that not all key components were covered each week in setting (2), in particular the modelling component. Some small modifications were made by settings in response to practitioner reflection regarding how it was working to accommodate families (e.g., making time at the end of discussion; reading out materials for those with literacy difficulties; not using a PowerPoint in small groups to make it less formal). These adaptations were all sensible and did not appear to significantly affect delivery. *Home:* Three of the four children who were chosen to also receive HV team input received the required 4 home visits from the HV team required. At setting (1), one home visit was completed but the support was discontinued at the parent's request.

RESEARCH QUESTION 2	ANSWER (INDICATOR)	KEY FINDINGS
Q2. Is the programme suitable and acceptable to settings? (see pages 28 – 44 for detailed results)	2.1 Practitioners report the programme is **valuable** to their setting, families and children 2.2 Parents report it is **valuable** to them and their child 2.3 Practitioners report the programme is **suitable for delivery** in their setting 2.4 Practitioners report there is a **need** for the programme in their setting 2.5 Practitioners report the one-day **training is useful** in supporting programme delivery 2.6 Practitioners report the twilight sessions are **useful in** supporting programme delivery 2.7 Practitioners report that the peer coaching is useful in **supporting their use of contingent interaction** 2.8 Practitioners find the **programme materials** (manual and resources)	**Value** The programme was clearly of value to all participants. All settings plan to deliver again if they can. Value to practitioners and parents was measured through changes in: • **their confidence and knowledge** of supporting children and families with SLC development • their **knowledge of responsive contingent interaction** • their **enjoyment of the programme** • **their interactions with children** • **children's language development** • **relationships with and between parents** All practitioners increased their confidence and knowledge. All parents made large gains in knowledge and all but one made gains in confidence. There were clear changes in the knowledge about and use of responsive contingent interaction (the key outcome) in practitioners and parents. These were evidenced not just by self-ratings but also references by parents' and practitioners' of the use of individual 'tips' which constitute responsive contingent interaction and of using these tips in their daily lives/wider activities in nursery. 92% of parents who responded to the survey were using the tips daily and 8% a few times per week. There were high levels of enjoyment reported by both practitioners and parents with important secondary benefits in developing strong relationship between settings and parents and between parents. Importantly parents and practitioners also reported benefits for children, for example EYPs commented: *'It was really lovely to see at the end of the session how much the children had progressed and the understanding the parents had to make them more confident communicators'* (setting 4)

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	are valuable for preparing them for delivery 2.9 Practitioners report they find the **manual easy to follow/resources easy to use**	*'Realised parents did not know some of the tips e.g. get down to child's level dad said he had not been doing that but came back the next week saying he had done this and tantrums had decreased' (setting 1).* *'It's been really nice just spending that quality time with the parents and the children and really nice to see them actually gaining something out of it. That's been really good as well. …….. just really it is really fun to have them in and just build them relationships and knowing that we're helping them and guiding them.' (setting 1)* For example parents said: *'Seen a big improvement in [child's] speech, and a lot of family and friends have also noticed a change and I really do think these sessions have contributed'* *'now he can say a sentence now, whereas before he might have just said like car. So well add a word on and we'll say like red car'* **Suitability for delivery** EYPs reported that overall, the programme was suitable for delivery in their setting and that the training and resources made it practical and relatively easy to deliver. The only barrier reported was availability of staff. One other consideration was recruitment of sufficient parents. This was in part to do with the very short run-in time for the project which would not be typical in normal practice. There is also helpful learning from this project which could be shared across settings and integrated into the training regarding strategies to promote recruitment. Indeed, a number of settings felt that running the groups with smaller numbers was beneficial

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		and would still bring benefit to their setting. FHPs who work as part of the HV team, had slightly more varying views. They felt that FHPs rather than HVs would be more able to offer the linked home visits as part of their role in the HV team. d~~ue to the differences in roles~~. FHPs felt that the intervention fitted with the support children should receive if identified with speech, language and communication needs (SLCN) and that it fitted with what is offered by FHPs, however aligning the timing of this support with the timing when the setting might offer Talking 2gether sessions would be challenging due to waiting list and delivery constraints. **Need** Settings were chosen by the LA as serving socially disadvantaged communities and/or having high levels of SLCN and so all settings felt there was a need for the programme. Many EYPs expressed the high levels of SLCN need to us and the potential of this programme to address that need. In addition to needs of the children and families, settings identified other needs which this programme addressed, in particular, building relationship with parents, supporting parents with their children's development and working collaboratively with HV teams. FHPs and HVs also reported high levels of need in the children and families they serve. FHPs and HVs also reported that they do not have many resources/programmes available to help them to support families and the resources form the Talking 2gether programme filled a need for them as practitioners in providing a clear programme and set of resources to deliver in the home. **Training is useful** EYPs, HV's and FHPs valued the training they received and found it useful and equipped them to deliver the

RESEARCH QUESTION 2	ANSWER (INDICATOR)	KEY FINDINGS
		programme. All practitioners who completed a feedback survey about training responded there was nothing missing in the training that they would have liked to have been included. EYPs valued time with the HV team, guidance on delivery, refreshing of knowledge and acquisition of some new knowledge. When asked which training session they thought was most beneficial, 3 settings said the peer coaching and 1 said the face-to-face training day. Interview and informal feedback reinforced the significant perceived value of the coaching, for example: *'We did the video yeah. And we've like I personally found that really, really useful. And obviously like as a nursery, me and [EYP] reflected on it together …. And as a nursery as well. We're gonna use that approach to do our monitoring of teaching and learning next year'* *'I think as practitioners it it was. It was a bit of a wake up call'* FHPs and HVs reported at interview that they really valued the face-to-face training day but had engaged less with the online elements, perceiving that perhaps it was more focussed on EYPs in settings. Similar to the EYPs they also valued the initial training day in particular the opportunity to spend time with EYP practitioners, refreshing of knowledge and acquisition of some new knowledge. **Materials support delivery** All practitioners reported the materials to be either 'very' or 'fairly' useful with the majority of ratings being 'very useful'. All settings reported they received the right resources to enable them to deliver the programme, and there were no other materials needed. Settings found the design of the sessions supported ease of

RESEARCH QUESTION 2	ANSWER (INDICATOR)	KEY FINDINGS
		delivery, commenting: *'all the resources were there, which was really good. Yeah. And the packs were sort of very comprehensive and the information that we were to deliver to parents was great. It was all there for us'* *'think we do it exactly the same because it was, it was really easy to deliver.'* Very few problems were raised. One setting commented on problems using some of the PowerPoints/videos due to technical issues in their nursery's equipment (setting 3). Another noted the need to support parents with literacy difficulties with some of the resources. FHPs and HVs found the resources very valuable and easy to fit in with their practice and parents were very positive about the resources. There were some comments about making resources more durable and compiled so as to reduce the risk of losing them.

RESEARCH QUESTION 3	ANSWER (INDICATOR)	KEY FINDINGS
Q3 Can the programme be accommodated by settings and families? (see pages 45 - 57 for detailed results)	3.1 Practitioners are able to **engage families** to participate in sessions 3.2 Practitioners / families report that delivering / attending the six sessions a term is achievable and participating in the 4 home visits (where appropriate) 3.3 Practitioners find the frequency, amount and content of training manageable and acceptable 3.4 Practitioners find the amount of preparation needed before delivering a session manageable 3.5 Practitioners / HV teams report that it is possible to arrange meetings 3.6 Practitioners / HV teams report that it is possible to negotiate responsibility for supporting families of children with	**Engaging families** The target number of parents we asked each setting to recruit for participation was 6. Of the 5 settings that recruited, 2 recruited 6 parents, 1 recruited 4 parents, and 2 recruited 3 parents. When settings were asked how easy or difficult it was to recruit parents, responses were mixed, with 3 EYPs reporting this was 'fairly' or 'very' easy, and 3 reporting it was 'fairly' or 'very' difficult. The attendance of recruited parents however was high, with an average attendance in the 4 settings who completed the programme of 82% and a range of 69 – 100%. Only one parent stopped coming altogether due to getting a job. In one of the settings with the lowest recruitment (setting 1) engagement was reported as 'good' compared to parents' usual levels of engagement with the setting. The engagement of parents could have been improved by having a longer run-in time to the project, for example recruiting during the winter term or first half of the spring term, supporting EYPs to try more strategies with parents, and to enable sharing of good practice across settings. Barriers to parent engagement included fear from parents of involvement with health professionals, potential stigmatisation of parents approached (from EYPs), and working parents who were unavailable to attend. Interestingly, the setting with the greatest degree of deprivation (setting 4) (lowest Index of Multiple Deprivation rank) had the highest level of parent engagement, underlining the fact that this issue is more complex than simply the social disadvantage of the families served. Enablers to engagement included parents valuing involvement of health professionals (hence there were many individual differences across parents), strong existing relationships between EYPs and parents, use of individual approaches and conversations from EYPs to

	identifiable risks of poor language development 3.7 Practitioners / families report that it is possible to increase the use of responsive contingent interactions	recruit, coffee mornings, encouraging parents to bring friends/relatives to sessions and running sessions at the end of the AM nursery session close to pick up time. EYPs feel that having run the programme once they could now recruit more successfully as they would be able to explain it better to parents and allay any fears. Some also feel that running the sessions in a different term would enable greater engagement and be more practical from a capacity perspective; in the summer term settings are often busy with other activities and are at their maximum in terms of number of children attending. Home visits and FHP support were fully engaged with by the parents with one exception and in this case the FHP felt this was due to the parent having better relationships with the EYPs. **Achievability of six sessions in the EY setting** The delivery of 6 sessions in each EY setting was achievable overall and reported by EYPs as 'very' or 'fairly' easy. One setting reduced the number of sessions delivered to 5 due to staff illness (setting 4), combining the content of two sessions into 1, and another setting (setting 3) reduced to 4 sessions due to time available in the term (again, combining the content). A longer run-in to the project would have enabled this setting to deliver more sessions. Some EYPs felt attendance at 6 sessions was a large time commitment for parents however data from parents indicated attendance was consistent throughout, and parents reported that they found it 'very' or 'fairly' easy to fit the sessions in, with some parents wanting more sessions. **Achievability of four home visits** FHPs delivering the home visits reported these were easy to prepare for and easy to fit in in terms of delivery frequency. Parents found it 'very' or 'fairly' easy to manage these visits. The HV team reported that the home visit intervention fitted with the support children should receive if identified with SLCN and that it fitted with what is offered by FHPs. One barrier would be aligning the timing of this support with the timing when the setting might offer Talking 2gether due to waiting list and delivery constraints on HV teams. **Training acceptability and feasibility**

		Overall, the training was feasible and acceptable to practitioners**.** Most EYPs reported it was easy fitting in the training sessions (2 reporting this was 'very easy', 3 'fairly'), only 1 reported this was 'very difficult'. As reported for delivery, there was variability in FHP responses, with 1 FHP reporting that fitting in training was 'fairly easy', 1 'neither easy nor difficult' and 1 reporting it was 'very difficult'. Some practitioners reported Twilight being a difficult time of day, whereas others found it very convenient. Some felt that the midpoint review could be dropped, be optional, or trouble shooting could be enabled through other means. Some FHPs felt some of the training sessions were less relevant to them than to the EYPs, in particular the twilight session. **Preparation** All practitioners rated the preparation to be 'very' or 'fairly' easy to prepare for delivery. Interviews suggested preparation was manageable and well supported by the resources: *'It it was great because no it [preparation] was minimal and which I think is one of the reasons why we we were, it really worked well for us and because it didn't take much time at all for us to set up, have everything planned and and get it all ready and then just to deliver it*.' (setting 4) *'All the resources were there, which was really good. Yeah. And the packs were sort of very comprehensive and the information that we were to deliver to parents was great. It was all there for us.' (setting 3)* **Collaboration between EY settings and HV teams** EYPs and HV teams were asked to work collaboratively to identify appropriate parents to attend the group sessions in the early years setting, identify 1 family to receive home visits, and deliver a collaborative intervention. Collaborative working did not always happen to the extent the settings or HV teams would have liked. The very limited preparation time due to the issues with the Hub withdrawal may have affected this aspect of the delivery of the programme. More time developing clear shared expectations would have been beneficial. For 2 of the paired settings/HV teams there were positive reports from the EYPs and HVs that this collaboration

		was helpful. For the other 2 pairs, there was unclear communication between the EYPs and FHP about roles and delivery. Where this collaboration worked well it resulted in children and parents getting the extra support they needed including earlier referral to SLT and more intensive support for a family with a complex family situation. It was also highly valued by parents both in anticipation of the extra help and when this was received. With the EYP and HV teams there were reported missed attempts to contact one another from both sides. The previous broader context of the relationships between HV Teams and Early Years Setting was also relevant. Mutual understanding of each others roles, constraints and skills and trusting relationships may not be as developed as necessary for such collaboration to work where relationship weren't already in place. Further preparatory work may be beneficial to gain the optimal benefits from the collaborative work in this programme and/or may emerge over repetitions of delivery. **Increased use of responsive contingent interaction** As identified in question 2 there is a large amount of evidence from practitioners and parents that they were able to have made changes in their use of responsive contingent interaction with consequent perceived benefits for children. One parent reported the presence of siblings as a barrier. However, there is also reported benefits for the partners of parents attending the sessions, some of these did not attend the sessions but were told about it by their partner so tried the tips at home too, whereas some decided to attend the sessions after being told about it by their partner who had been attending (setting 4).

RESEARCH	ANSWER	KEY FINDINGS

QUESTION 4	(INDICATOR)	
Q4 Do different settings, or participants (including families), have different experiences of delivery? What factors influence this? (see pages 57 – 59 for detailed results)	Potential key characteristics • Size of setting • Demographic of setting • Catchment area/SES of setting • Practitioner experience • Practitioner qualifications • Staff availability • Work the setting is already doing with parents • Existing relationship with parents • Accommodation/space in setting to host sessions • Health Visitor Team skill mix • Number of EAL families • Access to interpreters	**Characteristics of settings and experiences of delivery** It is difficult to draw definitive conclusions regarding differences across settings based on the below characteristics, however the following observations were made. *Demographics and existing relationships with parents:* Settings 1 and 2 found parent recruitment harder than settings 3, 4 and 5. All settings serve socially disadvantaged communities with setting postcodes in either the 1st or 2nd IMD decile. Setting 2 describes their families as very hard to engage generally but that the engagement with this programme was better than they expected. Setting 4, with a postcode with the lowest IMD ranking recruited best and cited strong existing relationships with parents as important to this. They also employed a number of strategies to support attendance including running the session just prior to pick up and encouraging parents to bring partners or friends to support confidence. The setting with the lowest parental engagement did not attend the training day (although they were offered the chance to view a video of the event) where recruitment strategies were discussed and shared between settings and between HV teams and EYPs. Parents with less social support (single parents, partners who did not engage with the programme, high numbers of siblings) found the programme harder. Also, those who work were less able to engage. *Staff availability and size of setting:* Two settings withdrew due to unavoidable issues with staff sickness and staff long term absence in very difficult circumstances. The need to withdraw does not seem to be correlated with the size of the setting in terms of staff or children. *Practitioner experience:* Some settings were more confident than others in delivering the training and this appears to correlate with the degree of previous SLCN training the settings had received; Settings 2 and 3 reported being nervous at first and had less previous training than others. All grew in confidence after trying the first session, however.

		HV team skill mix and practitioner experience: HV teams varied in the degree to which they were able to deliver the planned sessions and liaise with the settings. This was partly due to issues such as illness but possibly also where the HV team member had more SLCN intervention experience there was more success in delivery as intended. FHPs rather than HVs appear to be better placed in this service to be a part of the delivery of Talking2gether due to their greater involvement in intervention delivery and hence flexibility in time allocation. *EAL:* Due to the constraints placed on where we could recruit there were very low numbers of children with EAL in the nurseries (2 potential participants across all 6 recruited nurseries) and none were involved in the study.

Delivery team reflections

Teacher/practitioner experience and views

'We have thoroughly enjoyed the sessions and would definitely carry on with them in the future'

'I would love to do it again, definitely, and having all of the resources that you've given us [has] definitely made it so we could do it.'

'It was really lovely to see at the end of the session how much the children had progressed and the understanding the parents had to make them more confident communicators'

Early Years Practitioners all believed the programme was valuable and addressed an important need for the children at their setting. They all found the training useful, manageable and that it prepared them for the delivery of the programme. They suggested that the midpoint review could be shortened as there was some repetition and that this session could be optional for those wanting additional advice (most who attended had no queries to troubleshoot at that time). EYPs found the peer coaching extremely valuable and many commented that they will be using this across all of the practitioners in their setting for their own training purposes. They enjoyed delivery with the parents and found the materials and training supported them to deliver with confidence and ease with minimal preparation required once the training had been completed. The development of relationships with and between parents was seen as a very valuable and important secondary gain from the programme. Both fathers and mothers attended, with some sessions having both partners attending simultaneously. Some practitioners reported difficulties managing group dynamics and so we will add a session on strategies for group management to the initial training day. However, all felt that they learned to manage these over the course of the delivery of the programme.

The collaborative work with the HV and FHP was variable and mainly due to practical constraints on time/ability to contact one another to discuss their work with the families. However, there were also successful examples. For example, the collaborative work enabled a parent's mental health difficulties to be supported by the FHP and the setting to understand and accommodate these and for an early referral to SLT to occur. All could see benefits for both families and children. All settings indicated they would like to, or they plan to, run the programme again including the settings who had to withdraw. Settings noted that a longer run-in time and perhaps delivery at a different time of the academic year would have supported them to manage staffing (hence reduce dropout) and to recruit more parents, where this was lower than anticipated. Parent recruitment of the most disadvantaged families was more difficult, but most settings managed this through private conversations with parents, and/or introductory meetings/coffee mornings. It was also noted that reviewing materials to make sure they are accessible for those who have literacy difficulties would be worthwhile.

Did they report changes in particular learning behaviours? What were these?

Early Years: Changes were noted in practitioner behaviour, knowledge and attitudes when interacting with the children: increasing the use of responsive contingent interaction, supporting them to provide peer coaching and feedback and supporting continuous reflection and monitoring of the use of responsive contingent interaction. Confidence and skills also increased in working with parents and the delivery of the programme was very successful with close adherence to the programme.

Health Visiting Team members also believed the programme was valuable and addressed an important need for the children in their locality. They all found the training useful, manageable and that it prepared them for the delivery of the components of the programme for which they are responsible. They welcomed the resources and felt they filled a gap in terms of available have programmes to support children with SLCN. They saw positive benefits for children and families. Collaboration was not as successful as hoped and the HV team identified some key barriers and enablers for future consideration (e.g., Enablers: positive alignment with the goals and sufficient available for FHPs to work with the children; Barriers: issues with alignment of timing of support with settings).

What were their views about how the programme was received by pupils and pupils change in behaviour?

All settings and HV team members reported children's enjoyment and benefits for children's language and also their social-emotional development.

'we have seen some really good progress in the children that have joined in the project',

'parents have followed tips and these seem to be working'.

'And that I think we've noticed a difference inside sessions as well. So outside of the training, but inside nursery sessions, you can see the difference in the children anyway.'

How were these findings similar/different to your expectations?

We are very pleased with how well the programme was received by all practitioners and parents. The only disappointment was in the degree of collaboration across settings and HV teams which was achieved. In part we felt some of the barriers could have been supported by a longer run in time to the project (see below). However, we have also taken away some key learning about what would need to be considered for this collaborative delivery to be possible. We anticipated a positive experience with the training resources but were particularly struck by how beneficial the coaching was. We were also very pleased by the ease with which the settings found delivery and their enjoyment of the resources. We were heartened by the degree to which parents described using the specific tips they had been taught. This is not always the case in responsive contingent interaction interventions. These positive results exceeded our expectations. We were disappointed by the number of settings recruited but feel that this is not a reflection on the programme itself but can be explained by the limited time available for recruitment due to the withdrawal of the Stronger Practice Hub.

Pupil experience and views

Due to the age of the children, we did not directly gather their experiences and views. We asked parents and practitioners about the perceived benefits for children. Significant benefits in children's language and communication and social-emotional outcomes were reported by EYPs, HV teams and parents. Many also mentioned the children's enjoyment of the sessions with their parents and with the materials provided. One child became upset when having to leave their parent from the Talking 2gether session and return to nursery class, but this was managed by the setting changing the timing of the session so both parent and child could leave to go home together.

Parent/carer experience and views

The feedback from parents both to the researchers and the practitioners supporting them was overwhelmingly positive. They described benefits for themselves and their children, for example:

'One parent … asked if we were going to carry this on as they have learned so much and love having the opportunity to spend quality time with their child'

'I've made more of a conscious effort since going to them. And obviously, like I've, I've passed it on to my partner as well, and ... He's listening to what I've been telling them anyways.'

'Now he can say a sentence now, whereas before he might have just said like car. So we'll add a word on and we'll say like red car.'

Parents expressed they enjoyed the sessions, both the improved relationships with settings and with other parents were seen as important benefits. Not all parents approached to take part felt comfortable or motivated to engage. Initial recruitment varied with some settings saying parents 'jumped on' the opportunity whilst others required more discussion and encouragement. However, in all settings engagement was higher than expected by the EYPs based on previous attempts to work with parents. Care needs to be taken to consider parent's barriers to engagement. There is significant learning across settings which can be shared to support engagement and generalisations cannot be made regarding which families will or will not engage, rather the strategies employed by the setting and existing relationships seem most important.

It is important to note that all parents who were recruited remained engaged for the full programme with only one exception, where the parent got a job. It was striking that parents could describe how they had changed the nature of their interaction with their child. In previous research parents find it difficult to identify precisely what responsive contingent interaction is and how to do it, whereas here parents were identifying the specific components of responsive contingent interaction in their reflections. This is an extremely promising finding suggesting the programme is creating the targeted behaviour change in families.

Data collection reflections

All data collection tools were useful and would be used again if the project were repeated, however we found that the interviews and Delivery Logs in particular, provided the richest and most valuable data. The interviews enabled us to obtain a rich and deep understanding of participant experiences from a realist perspective, i.e., considering the context of participants' involvement, including barriers and enablers for practitioners delivering, and for parents taking part. The Delivery Logs completed by practitioners enabled us to capture week-by-week information about the intervention sessions, including reflections on how each session went, burden, attendance and fidelity. This level of detail meant we could capture variability week-by-week within settings, and differences between settings.

There was only one practical challenge in collecting data from participants which was that some practitioners were unsure how to upload their delivery logs onto Teams and instead emailed them to the delivery team.

Volume and frequency of data collection was found to be suitable from the perspective of participants and the delivery team. Completion of data tools and taking part in interviews was not

reported to be a burden to participants, including those that dropped out of the programme; these two settings were still happy to be interviewed by the delivery team, and had completed data collection tools up to the point of dropping out. The use of surveys allowed the delivery team to collate and analyse quantitative data easily with no burden, and audio-recording interviews (providing an interview transcript) enabled efficient and robust analysis of qualitative data within our allotted timescale.

All data collected throughout the project was used in final analysis and is included in the final report. In part this was enabled by the way in which data collection was planned by the delivery team; each tool included questions that were structured around a common framework to explore acceptability, barriers and enablers of different aspects of the programme. This allowed all data to be triangulated, synthesised and analysed to provide clear and robust conclusions.

Adaptation/s during delivery

Intended adaptations

- None

Unintended adaptations

- We intended to create an opportunity for HV leadership and EYP leadership to liaise prior to the initial training to enable the identification of barriers and enablers to collaboration and identify solutions to any predicted issues. This was dropped due to the reduced run-in time for the start of the study due to the withdrawal of the stronger practice hub.
- We intended to include children with EAL and examine the experiences of these families and develop modified resources, however, due to the need to work in the area of the specified stronger practice hub there were very few EAL families in any of the settings.
- Where training was missed by some settings, we offered a number of rearranged training opportunities.
- Two settings provided fewer than 6 sessions (1 provided 5 and 1 provided 4) however the same content was delivered (content was combined).
- Some settings changed the order of the components of the session to enable parent discussion at the end.
- To make the session less formal some sessions did not use the PowerPoint presentation.
- Practitioners adapted delivery where families had literacy difficulties talking through resources with families and where there were specific sensitivities (i.e., for adoptive parents not asking about the child's first birthday).
- Settings did not always identify the relevant families in collaboration with the HV team and did not always have collaborative conversations regarding next steps; this happened for half of the targeted children.

Other reflections on feedback

The feedback from all stakeholders was overwhelmingly positive. We were met with enthusiasm for the programme and a real sense that practitioners could see the value for their families and children and that it met a significant need. Also, it was clear that the programme was manageable for all settings as long as significant unexpected staffing issues did not occur. All settings aimed to continue to offer the programme in their setting and HV teams to use the resources. The settings who had to

withdraw due to unavoidable staffing issues expressed their disappointment; 1 stated their intention to offer the programme for their families in the next academic term (September), and 1 said they would like to take part if we were to run the project again Parents and children enjoy and benefit from this programme and both settings and HV teams say that this programme is unique in its focus on supporting parents, and in its provision of resources which enables easy delivery.

There are a number of minor issues we aim to improve informed by the findings of this study. This includes removing the midpoint review session; adding content in the initial training day about managing group dynamics (of parents), and sharing strategies for engaging families; ensuring the HV/FHP role is sufficiently represented in the training; creating guidance on supporting families with literacy difficulties; and on aspects which practitioners can modify to tailor to family needs and those which are essential. The most important aspect requiring development is enabling collaboration between HV teams and EY settings. This was undoubtedly affected by the foreshortened run-in to programme delivery in this study, but also reflects wider systemic barriers to collaboration including capacity within HV and EY settings identified by the two teams despite them both wanting to make this work. There is a clear need for a stronger focus on collaborative working in line with national guidance within local commissioning to support HV and EYPs to work together. We will explore issues of collaboration with HV and Local Authority leads to understand what can be done for future development.

The programme clearly has substantial promise and we believe we have collected sufficient insights to move to a pilot evaluation.

Data appendices

Appendix 1: Summary of training, recruitment and participation across settings

Table 1 Settings attendance at training

Settings	Training Day	Coaching session 1	Coaching session 2	Twilight	Midpoint	No. of sessions attended
1	✓	✓	X	✓	✓	4
2	X	X	✓	✓	✓	3
3	✓	✓	X	✓	✓	4
4	✓	✓	✓	✓	X	4
5	✓	✓	✓	✓	✓	5
6	✓	✓	✓	✓	X	4

3 of the 4 FHPs attached to settings attended all of the relevant training sessions, the other FHP missed the twilight session

Table 2 Parent attendance at each session

Settings	Programme completed	No. of sessions attended /delivered	Max no. of parents attending	No. of parents attending session						No. of home visits delivered	% attendance offered sessions
				1	2	3	4	5	6		
1	✓	6	3	3	2	2	2	2	2	4	72
2	✓	6	3	3	3	3	3	3	3	4	100
3	✓	4 †	4	1	3	4	3	N/A	N/A	4	69
4	✓	5 *	6	6	6	5	N/A *	4	5	1	87
5	X	0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
6	X (1)	1	6	6	N/A	N/A	N/A	N/A	N/A	N/A	100

† reduced number of sessions to 4

* sessions 4 and 5 were combined due to staff sickness the previous week

Appendix 2: Table 3 Characteristics of Settings

Setting Number	Setting Type	No. of children in EYFS	No. of staff in EYFS	No. of EAL children potentially recruited	Age range of children	Total number of child places	Ofsted Grade	Practitioner comments about catchment/parents (at initial visit)	IMD Decile [setting postcode]	IMD Rank
5	Private Nursery	50	9	0	1 to 5	73	Good	Very good relationships with parents	2	3373
2	Nursery	67	7	0	0 to 4	61	Good	Parent interaction is a challenge, lots of need	1	1680
3	Maintained nursery school	130	16	1	2 to 4	Over 150	Good	Lot of need	2	5445
6	Nursery school	105	13	0	2 to 5	128	Outstanding	High % of SLCN, high level of deprivation	2	6474
1	Nursery	48	10	1	0 to 5	49	Good	Speech and language is a huge issue, COVID did not help	2	5895
4	Private Nursery	45	11	0	2 to 4	46	Outstanding	Area of deprivation, lot of children with language delay, good relationships with parents, area of high need of 46 children 9 have 1-1 support	1	615

Appendix 3: Detailed findings with data sources indicated

KEY
Data sources indicated by colour codes: Practitioner Survey/Training Feedback; Parent Survey; Interviews; Delivery Log; Reflection by Trainer.
Settings indicated by number (1-6) for cross-referencing with Tables 1-3 above.
EYP = Early Years Practitioner in Setting; FHP = Family Health Practitioner in Health Visiting Team; HV = Health Visitor Parent = Parent or caregiver involved in programme.
RCI = Responsive Contingent Interaction

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
Q1 Is the programme being delivered as intended?	1.1 Targeted Participants attend the one-day training event and meet the learning outcomes 1.2 EYPs and HVs receive coaching and practice the use of responsive contingent interaction in settings	**Full Day Training** 16 out of 19 invited practitioners attended the full-days face-to-face training. (9 EYPs and 7 HV/FHP). 3 EYPs were unable to attend the full-day due to staff sickness which impacted capacity in nursery. This meant one nursery did not have any attendance at the initial training day (Setting 2) – they were sent a recording of the event to watch in their own time. We do not know if setting 2 watched the video of the session. **Peer Coaching.** EYPS from all 6 settings attended peer coaching sessions. 3 settings missed one coaching session. Of the 6 settings recruited, 5 of them (10 EYPs) were able to practice the use of Responsive Contingent Interactions in their settings on at least 2 occasions (using video recordings of their interactions) and reflect back on these at the

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
	on at least 2 occasions, reflect, receive feedback and act on that feedback. 1.3 Targeted participants attend twilight session and achieve the learning outcomes 1.4 Targeted participants attend a Midpoint review of the parent groups and coaching and reflect on successes	Peer Coaching training sessions and receive feedback. 1 setting was unable to film the video due to long-term staff sickness but did attend the peer coaching sessions (this setting subsequently dropped out of the programme for the same reason). **Twilight sessions** 12 participants from all 6 recruited settings (9 EYPs 3 HV/FHPs) attended twilight session 1 (informing what Talking 2gether delivery would look like), and 11 practitioners (5 EYPS and 6 HV/FHPs) attended twilight session 2 which (a mid-point troubleshooting session). **LEARNING OUTCOMES** Responses about training indicated that learning outcomes were met. EYPs and FHPs valued the training they received and reported the following: • *'reinforced their knowledge of SLC and how the project was going to work',* • *'increased their knowledge of responsive contingent interactions'* and provided • *'lots of ideas on how to support parents on how to interact better with their children'.* Practitioners reported their confidence in delivering support for SLC with children and with families had improved after training (average increase from 3-4 on 5-point 'confidence' likert scale). Practitioners reported after training that they felt confident they were able to deliver the Talking 2gether programme (average rating of confidence of 4/5 on likert scale). All practitioners reported that the content at the training day was about right. Their takeaway key messages related to speech, language and communication and information about the project.

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• *'Reinforced our knowledge of speech, communication, and language. Learnt more about the health visitor's role. Gained a better understanding of the ELIM. Gained a better understanding about the project'* (setting 1) • *'Chance to interact with professionals and good learning tool'*. (setting 4) • *'Using responsive contingent interaction and learning how to encourage families to use this with their children to promote the best outcomes'* (setting 1) • '*A better understanding of how the Talking2Gether interventions will be delivered and how nurseries and Health Visiting Team staff will work together'* (HV lead) • '*We liked that there were professionals from both sides of the service, health visitors and early years practitioners to bounce ideas and strategies off*' (setting 4) Peer coaching was well received by EYPs • *'I liked having that chance 1-1 to evaluate our own practice'* (setting 1) • *'It made me think about my practice and how I deliver activities'* (setting 2) • *'The ability to talk together about positive interactions and strategies observed, whilst looking at ways to further develop interactions'* (setting 6) The Twilight was the only session with negative comments. There was one comment from one of the FHPs who said there was too much content. EYPs found it useful for learning about how to plan the sessions in their settings and for learning about the role of the HVs. • *'It gave me a confidence boost for the delivery of the sessions. Gave me a good understanding of the project'* (setting 2)

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		When asked which training session was the most beneficial 3 EYPs said the coaching sessions • *'I found the peer coaching most beneficial, I felt having the 1-1 time with Emily and looking at our videos really helped to put what we had learnt into practice'* (setting 1) When asked what they liked most about the training sessions three talked about how they would support practice in their settings. Two valued the opportunity to discuss their practice with other professionals. • *'a chance to interact and be around lots of different professionals'* (setting 4) • *'The training session have helped us reflect on what we do in our setting. The training session were very informative and delivered by lovely people'* (setting 1) • *'It enabled me to discuss my practice and how it could be enhanced'* (setting 2) All EYPs thought the resources were appropriate. One HV thought the HV resources should have been shared earlier. • *'I still have not received my resources and think if we had received them at the same time as the nurseries it would have helped especially during the subsequent sessions to enable me to relate better to the content'* (HV) EYPs valued the opportunity to collaborate with HVs • *'I think we achieve so much more when we all work together'* (setting 1) • *'Strengthen professional relationships, discuss children and their progress and share ideas'* (setting 6)

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• *'It is good to get a different perspective e.g. I did not know about ELIM-I but now I do I can see what a valuable tool it is'* (setting 2) A health visitor lead who attended some of the training valued the collaborative element. • *'We all hold different pieces of the jigsaw, we get a much fuller picture when we all work together and we can better support children & families'* (HV Lead) She did highlight the challenges of working this way • *'Time to meet together and discuss– a challenge from both sides'* (HV Lead) and suggested more contact was needed outside of the programme. • *'Reinstate regular nursery liaison meetings and a named health practitioner for each nursery'* (HV Lead)
	1.5 Delivery of intervention as intended in settings	**Delivery in settings** Five settings began intervention delivery with parents and 4 completed. The setting that dropped out did so after having delivered 1 session. Of the 4 settings that completed delivery, 2 settings delivered all 6 weekly intervention sessions (as intended), 1 setting combined the 6 sessions into 4 sessions to fit better with their schedule (same content delivered as the 6 weekly sessions) and one combined 2 sessions due to staff sickness and absence. At each setting the 2 EYPs trained in intervention delivery were involved in delivering the sessions throughout (as intended). One setting (4) reported absolute fidelity to the session plans every week, initially this was due to unfamiliarity with

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		the programme but was then because the felt the plan worked well for them and the parents. Some other settings reported making small changes. These included • Changing the structure of the session so parents asked questions at the end rather than chatting throughout (setting 2), • not bringing children into one of the sessions as the wanted to talk more to parents (setting 3). • One setting did not cover all of the information in one session plan as they felt they had covered it the previous week (setting 3). Parent interview suggests one setting (setting 2) did not follow the structure of the sessions as intended with variability as to when and if the children were in the session and whether tips were modelled. Practitioners made changes to how they had chosen to deliver the programme as they reflected on how the programme was working for their families and children. Some of these changes were to the planned programme delivery but some were about choices settings had made about delivery (e.g. time of day, room, equipment). ***Making changes to accommodate families*** One setting felt it took time for parents to engage as they wanted to talk to each other rather than engage with the programme, they changed the structure of the sessions to include time for discussion at the end.

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• '*This first session was rather difficult as the parents just wanted to talk about their own child. I found it quite difficult to engage the parents to watch the power point and videos, I felt that had to be quite firm to engage the parents but I got there in the end*.' (setting 2) Some children also took time to get used to the programme, coming into the sessions could be overwhelming at first • '*One child found it very confusing to why mam was in nursery and he couldn't go into his normal room which did cause a little meltdown, I do think this will improve the more he gets used to doing this*.' (setting 1) In some settings families were engaged and talking to each other from the start, for others it took a while for them to become comfortable sharing with the group. One setting planned to build in time for parents to get to know each other from the start another had built this in this time • *'an opportunity was given to for the parents to introduce themselves and talk about their children if they felt confident to do so, which all did'* (setting 4) EYPs adapted delivery where families had literacy difficulties: • *'So I was reading the, you know the the writing that comes off the text on the video I was having to read that out as it was playing. So they knew what they were supposed to be looking out for.So, but it might be nice if it had like a little voice over at that point'*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		In one setting EYPs made judgements as to how to manage the amount of information for parents: • *'I would say as a parent for us, not so, but as a parent, that is, it was quite a lot of information to take in. I think by the third session we just kind of kind of. ...Not skipped through it, but we're just condensed it ever so slightly, didn't we?...[EYP} was like, remember, we did this, this and this last week. Can everybody remember? Yes. Yes. So, yeah. And then we talked about the tips that we talked about how it went and then we watched the new video. So we kind of shortened it better and it worked great without having to click on the buttons all the time it was kind of following the same.'* Settings know their families well and could make appropriate changes if necessary. One setting identified how they did this: • *'We did exclude a couple of slides one being 'asking parents to think back to their child's first birthday' as two of our parents have adopted and not had their children from birth.'* (setting 1) ***Making changes to accommodate children*** At one setting the timing of the session was altered to accommodate parents and children: • *'However I felt that doing the session at 900 till 1000 upset the children when they had to go back to their rooms. One child cried so much she became unconsolable to the point where we had to ring her mam to come and pick her up early. Therefore I am now looking at trying to change the sessions to 1030 to 1130 then the children can go straight home with their parent. This might not always be possible but I am going to try'* (setting 2) ***Making changes in response to group size***

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		All settings thought a group of 6 parents was appropriate but those that worked with smaller groups commented on the advantages this brought: • *'Only one child and parent showed up to this session due to work commitments the other parents had to attend to. It was really nice to spend this 1-1 time with this parent as she is quite shy and quiet'* (setting 1) Settings working with smaller groups did make some changes to how the sessions were run: • *'We went through the slides prior to the session so we could talk face to face with our parents and not make it feel so formal. All the same information was given to the parents.'* (setting 1)
	1.6 Delivery of intervention as intended in Home	**Delivery in the home** FHP home visits: 3 of the 4 settings received the intended 4 home visits to the 1 identified parent, delivered by their assigned FHP. At 1 setting, 1 home visit was completed by the FHP, but these were discontinued at the parent's request. The FHP felt the parent felt they were getting what they needed form the setting: • *'I think because the parent that I have worked with has got a really good relationship with the nursery, they've tended to just go to the nursery. So I think I've just been a little bit of a spare part type of thing. So when I did do my home visit, the mam didn't want to do the session that she'd done in the nursery. She just wanted to have a general catch up, ...Well, like I say we do, we we just had a I just asked her how the sessions had gone and did she want to do some of the things that she'd been doing. And she said no.'*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		FHPs delivering the home visits were those who were trained in intervention delivery (i.e. recruited to the project). They reported delivering the programme as planned and using the resources provided and found them valuable: • *'What I decided to do was to stick to the programme cause I thought I'd be so easy for me to say, well, I know you doing this through talking together, but what about this activity and I thought no, I'm gonna stick with the programme and just see how it goes and see how it works.'* • *'it's a good tool that I would probably use or use alongside what I'm already using'*
Q2. Is the programme suitable and acceptable to settings?	2.1 Practitioners report the programme is **valuable** to their setting, families and children 2.2 Parents report it is **valuable** to them and their child	**Value** to practitioners and parents was measured through changes in: • **their confidence and knowledge** of supporting children and families with SLC development • their **knowledge of responsive contingent interactions** • their **enjoyment of the programme** • **their interactions with children** • **children's language development** • **relationships with and between parents** **Confidence and Knowledge** Change in confidence/knowledge over the course of the programme (before vs after) and level of enjoyment were quantitatively measured on 10-point likert scales (a rating of 1 represented the lowest level and 10 the highest) and through practitioner and parent report, using surveys, interviews and delivery logs. Practitioners

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		All EYP's and FHP's reported an increase in confidence in supporting children with their language and communication development (EYPs mean change of 7 to 10, FHPs mean change of 7 to 9), and an increase in confidence supporting families with their child's language development (EYPs and FHPs mean change 7 to 9). • '*They have left the session as more confident communicators*'. (setting 4) • 'It was really easy for the parents to understand. They they got it straight away. And any questions they had were covered really quickly' (setting 4) <u>Parents</u> All parents who answered this question reported an increase in knowledge about supporting children with their language and communication development (mean change of 2). Their knowledge before the programme ranged from 4 to 9, after the programme knowledge ranged from 5 to 10. Three reported an increase of 1, 2 an increase of 2, 2 and increase of 3 and one an increase of 4. All but one of the parents who answered this question reported an increase in confidence supporting child's language development (mean change 2). Their confidence before the programme ranged from 4 to 9, after the programme confidence ranged from 5 to 10. Three reported an increase of 1, 2 an increase of 2, 2 and increase of 3 and one an increase of 4. One reported no change, 3 a change of 3, 2 a change of 2, three a change of 3 and the other on a change of 5. 10 parents said they would be 'very likely' to continue using the tips after the programme ended, the other 2 said 'fairly likely'.

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		Knowledge of responsive contingent interactions Practitioners Both EYPs and FHPs reported an increase in their knowledge of Responsive Contingent Interactions over the course of the programme (EYPs mean change from 6 to 9, FHPs a change from 6 to 8). Parents Parents' knowledge also increased. • *'It was really lovely to see at the end of the session how much the children had progressed and the understanding the parents had to make them more confident communicators'* (setting 4) • *'One parent .. asked if we were going to carry this on as they have learned so much'* (setting 1) Though some found this form of interaction uncomfortable to start with. EYPs could provide support and encouragement, for example: • *'The parent … looked uncomfortable trying to read to her child and her child was reluctant to sit - I advised her to try at home during some quiet time.'*(setting 2) 10 of the parents who responded to the survey said the programme had changed the way they interacted with their child. The other 2 parents were unsure. Examples of change reported by parents include: • '*Learned a lot from these sessions, things like not asking too many questions and instead saying what I see and repeating words [child] says and adding a word to it'* (setting 1a) • '*Just little tips like give [child] 10 seconds to register the information helped and getting down to her level it's not something you automatically think about doing getting down to her level when in timeout yes you would do but*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		speaking to her on a daily basis you wouldn't think to so these tips helped a lot.' (setting 2c) • 'I *feel I am more conscious in taking a step back and instead of thinking I could do things for quickness I am more aware of how much my children get from taking the lead in the simplest of tasks'* (setting 3a) In interviews parents were able to identify a number of new things they had learned. Examples include: • *'so like it's playing with something and I am adding a word on now he can say a sentence now, whereas before he might have just said like car. So well add a word on and we'll say like red car. And he will say that.'* • *'... asking less questions'.* • *'things like getting down to her level, giving her another 10 second to answer, to register the information and then like just giving her that pause and giving her a chance to respond to us was like a little bit of an eye opener. And obviously when you speaking to her like, you're automatically speaking from above but and then like obviously when you're just not it's the only time you get down to her level and talk to her face to face'.* **Programme enjoyment** Practitioners On average, EYPs rated their enjoyment of the training sessions as 10/10 and their enjoyment of delivery of intervention sessions as 9/10. FHPs rated their enjoyment of both training and home sessions as 9/10. We also asked practitioners to report on their perception of how parents enjoyed the sessions; EYPs rated parent's enjoyment of the group sessions (in early years setting) as 9/10 and FHP's rated parent's enjoyment of home sessions as 8/10. • *'It's been really nice just spending that quality time with the parents and the children and really nice to see them actually getting gaining something out of it. That's been really good as well. …….. just really it is really fun to have them in and just build them relationships and knowing that we're helping them and guiding them.' (setting 1)*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		All settings reported that practitioners enjoyed the sessions, one commented: • *'[it's] been lovely to do'* (setting 3) <u>Parents</u> All settings reported that parents enjoyed the sessions: • *'Lovely feedback, [from parents] asked if we would carry it on. Seemed disappointed that it has ended'*. (setting 1) • '*We have thoroughly enjoyed the sessions and would definitely carry on with them in the future'* (setting 2) • *'a small snack area was set up for children and they loved the independence of creating their own snack. Parents really loved the watching the children be independent and relish a new challenge'.* (setting 4) • *'One parent was speaking with the other manager of the setting and asked if we were going to carry this on as they have learned so much and love having the opportunity to spend quality time with their child' (setting 1)* • *'I feel like it's gone really well hasn't.., it we've had lots of positive comments and lots of positive feedback from them…..That meant that some points he had up to nine people in the sessions.' (setting 4)* • *'The feedback that we had from the parents, that they really enjoyed it and said that they always said something that they'd taken away from it erm they really liked the tips. I think that that was really good.'. (setting 1)* EYPs reported that parents could feel differently about different elements of the sessions • *'positive attitude from all parents in session not as positive when children came in to do activity'* (setting 3) On a scale of 1 (not at all) to 5 (a lot) 8 of the parents rated their enjoyment as a 5, the other 4 rated it as a 4.

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		Two parents commented on the sessions being repetitive (setting 2a, setting 2c) though this was seen as being useful for getting the message across (setting 2c) When asked for any other comments only 3 parents made comments, both about the value of the programme. • *'I think it's a very helpful and knowledgeable thing to offer parents. There's lots of useful information that I hadn't even thought about that could and have helped me massively.'* (setting 1a) • *'Fairly interesting for both myself and child'* (setting 2b) • *'I have really enjoyed the Talking 2gether sessions. They have been really insightful and I felt at ease talking about my own experiences' (setting 3a)* **Interactions with Children** <u>Practitioners</u> We asked practitioners whether they programme has changed the way they interacted with children (i.e. increased responsive contingent interaction). EYPs were evenly split in response with 2 reporting 'yes', 2 'no' and 2 were 'unsure'. For those EYPs that reported it had, they further specified how, reporting: • *'I feel that I am more conscious about getting down to child's level etc, even though I think I do it anyway, it has made me think more'* • *'It has made us more aware on how we interact and made us reflect more on our interactions'.* In interviews EYP practitioners reported significant benefits, particularly from the coaching component, in their own awareness about the missed opportunities for Responsive Contingent Interactions and felt it would be beneficial for

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		all practitioners in the settings • *'I think as practitioners it it was. It was a bit of a wake up call at I know it's things that we do all day everyday. You'll get down to their level and and follow their lead, but I think. It just kinda brought that back again to sort of just remind you.....Maybe not so much to think about it any more but more but be more aware of it and and especially the sort of. Giving them the children the time to answer which, when you're a busy room and you know two staff, have got 16 children in our pre school. So when you've got a busy room and they're all running crazy and things like I think sometimes they would forget to just ground some, get yourselves grounded and try and sort of give the children time to answer rather than you know.'* The same pattern of responses was observed for FHPs, 1 reporting 'yes' and that they felt they were now 'supporting parents to do the activity rather than showing them', 1 reported 'no' it hadn't changed their interaction and 1 was 'unsure'. In the interviews FHPs and HVs were focussed more on whether the training had supported them to support parents rather than on their own abilities to engage in Responsive Contingent Interactions with the child. <u>Parents</u> All 12 parents said they had used the tips at home, 11 did this daily, the other parent did them a few times a week On a scale of 1 (not at all) to 5 (a lot) when asked about how easy the tips were to understand *9 said 5, 2 said 4, 1 said 3.* On a scale of 1 (very difficult) to 5 (very easy) *when asked how easy they found using the tips 7 said 5, the other 4 said 4.*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		In interviews EYPs reported seeing significant changes in a number of parent's interactions with their child and consequent benefits for that child. • *'And then [parent] said something about being on the bus and then it got in the conversation of a dog. And then, you know, and then all that and then, like, that sort of [parent] was told that little bit of a story. And I said, Lena, I said that's exactly what we're talking about. And...they don't realise the importance of what they're doing ….That interaction, that constant interaction with the child, is having such an impact in comparison to that mam' (setting 3).* • *'Realised parents did not know some of the tips e.g. get down to child's level dad said he had not been doing that but dad came back the next week saying he had done this and tantrums had decreased' (setting 1).* • *'So she started to open up and ask things now and you can see that it is actually having an impact on on [child]...he had quite a few behavioural problems as well. So we've given like tips on different things there, basically just dealing with tantrums and things like that…..and like I have seen a change in his speech'* • *'So I think doing the project is help them learn how to communicate.....Properly with with child and I do think it has had a huge impact because he is a little sponge and he is so intelligent. So I do think that's had a huge a huge impact.' (setting 1).* Parents reported changes in their behaviour and awareness in some cases also in their partner's, for example: • *'I've made more of a conscious effort since going to them. And obviously, like I've, I've passed it on to my partner as well, and I've not he listens to. He's listening to what I've been telling them anyways.'*

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		• *' I think I'll definitely use them all'* • *'So it's just a little thing like it was just little things like that, like you could take out of the sessions and then obviously implement it like in your house yourself.'* • *'With the washing is like when it's dry outside and stuff like I'm taking her outside with me. And then obviously we're putting it in the basket together and we'll do it like the washing that way.* • *'But I'm saying what he's doing so like it's playing with something and I am adding a word on now he can say a sentence now,* • *'things like getting down to her level, giving her another 10 second to answer, to register the information and then like just giving her that pause and giving her a chance to respond to us was like a little bit of an eye opener. And obviously when you speaking to her like, you're automatically speaking from above but and then like obviously when you're just not it's the only time you get down to her level and talk to her face to face'.* **Impact of the programme on child language development** <u>Practitioners</u> We asked whether practitioners thought the programme had a positive impact on children's language development. 4 EYPs reported 'yes' and 2 were 'unsure'. Of those that reported 'yes' examples of this impact include: • *'we have seen some really good progress in the children that have joined in the project',* • *'parents have followed tips and these seem to be working'.* • *'And that I think we've noticed a difference inside sessions as well. So outside of the training, but inside nursery sessions, you can see the difference in the children anyway.'*

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		• *'Because [parent's] little boy's non-verbal. So you thought you felt it was really useful and now I will say to you when you're out the other day. He's he's touch counting. He's not saying 123, but he's making a different sound for everything. '* • *'he had quite a few behavioural problems as well. So we've given like tips on different things there, basically just dealing with tantrums and things like that…..and like I have seen a change in his speech'* • *'and I do think it has had a huge impact because he is a little sponge and he is so intelligent. So I do think that's had a huge a huge impact'* FHPs reported the programme had had a positive effect on children's language development: • *'the child was much more receptive and wanted to talk, in his own way'* • *'I did know the family as it's a family that I had visited previously and I had done some work with and... He'd come on loads since the time I'd seen him before.'* <u>Parents</u> 9 of the parents who responded to the survey said the programme had made a different to their child's language development. The other 3 were unsure. Example quotes from parents about positive change include: • *'Seen a big improvement in [child's] speech, and a lot of family and friends have also noticed a change and I really do think these sessions have contributed' (setting 1)* • *'3 month ago [child] couldn't put 2 words together and was limited with words but now she can put 2 words together and say some small sentences like mam made juice so her speech has improved, she does go to speech*

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		therapy to so between both it's helped her improve' (setting 2) • *'I am trying to not make decisions for them as much, allowing more time for them to make their own decisions resulting in more opportunities to communicate and develop their language.' (setting 3)* • *'My child has been using some of the techniques and it has helped with others understanding her better' (setting 4)* Data from the parent interviews reinforces the benefits: • *'now he can say a sentence now, whereas before he might have just said like car. So well add a word on and we'll say like red car'* • *'he'll say stuff in context as well, like when before it was more like he would learned a new word, but he's not really using it in context 'it has helped.* • *' like 3 months ago she couldn't put two words together. Now she can put two words together and say more'.* • *'like, you can see a big improvement from three months ago to how she is now'.* • *' She didn't used to ask for help (child), neither she used to just point at what she wanted, and now she'll actually ask for help if she needs help'.* **Relationships with settings** The benefits of the project went beyond the programme itself with settings reporting that they established stronger relationships with some parents, breaking down barriers and making the staff seem more approachable. • *'one [parent]said to me he feels he is getting so much out of the session not just about the communication but*

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		other things from talking with [setting staff]' (setting 1) • *' and having that time with the parents where they could, they could ask questions at the beginning before we started the work with the children*.' • *'In the future, they'll be more approachable. They'll they'll feel like way more, more approachable. They can have a chat about their concerns and things like that.'* Strengthening these relationships with parents was a specific development goal for some settings: • *'It was something that on my school development plan for next year anyway, which was to develop our work and partnerships with parents. So it kind of fed into that.'* (setting 3) And many found the focus on parents both a rewarding and unique aspect of the programme: • *'It's been really nice just spending that quality time with the parents and the children and really nice to see them actually getting gaining something out of it. That's been really good as well. …….. just really it is really fun to have them in and just build them relationships and knowing that we're helping them and guiding them.' (setting 1)* • *'I think for me, obviously we've done things like Elklan and things like that and that's more...Practitioner focused. Whereas this broke it down a lot for the parents and for us to be able to explain it to us at the parents and the way that they were gonna understand' (setting 4)* Being able to see the parents and children interact and build deeper understanding of the parents situation also brought benefits in settings being able to tailor advice and support.

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		Relationships between parents Some settings highlighted that parents became more confident when talking to other parents and were able to provide each other with support. This developed over time. • '*I feel that the parents have got to know one another and felt comfortable to really open up'* (setting 1) • *'The session [session 2] went exceptionally well. Parents were a lot more comfortable in week 2 as they had become familiar with each other and began to share more tips and experiences'* (setting 4) • '*Parents were able to have a longer chat this session [session 6] and continued to bounce ideas and experiences with each other'* (setting 4) • *'We are really sad this is the last one as we feel so many children and parents would benefit from this'* (setting 1) • *'On reflection we have decided to role out the course as the new term begins in September, the staff, children and parents have gained so much from these sessions and we feel that this would work exceptionally well in the new term'* (setting 4) Data from EYP interviews reinforced this: • *'And obviously they've formed relationships and now you can see them when the waiting for the children. Now they're chatting away. Yeah, the talking to each other. The more confident to do that. '* • *'And we were there to support them till they had a little bit of a window where they could talk to each other. So they started to form little bond straight away. And I think that really helped with ours and keeping them coming every week and we like I say some weeks we had dad's there.'*

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		• *'I was just finishing off as well in the kitchen and I kind of I'd heard the parents actually start talking because we weren't there…….And they started having really, like, um, quite deep conversations about different things. So there was one time that it just.'*
	2.3 Practitioners report the programme is **suitable for delivery** in their setting	**Suitable for delivery** EYPs reported that overall, the programme was suitable for delivery in their setting and that the training and resources made it practical and relatively easy to deliver with a number of settings aiming to carry on offering the programme. The only barrier reported was availability of staff. • *'I would love to do it again, definitely, and having all of the resources that you've given us is definitely been made it so we could do it. I think our only stumbling block would be financial side of it because it would be something that we would have to pay for ourselves, for the staff to be out of the room and have that time to be with the parents. And I think that's what would be our stumbling block.'* • *'Yeah, but we've managed it well, haven't we as worked well, yeah….'* • *'And it would be quite nice to get another group. Yeah, I was gonna say we've talked about doing it again in the September time because it's worked really well. We're gonna carry it on. Yeah.'* Two settings felt they would like to condense the programme down to 4 sessions as this felt more manageable to parents and staff. One other consideration was recruitment of sufficient parents. This was in part to do with the very short run-in time for the project which would not be typical in normal practice. There is also helpful learning from this project which

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		could be shared across settings and integrated into the training regarding strategies to promote recruitment. Also, word of mouth between parents and over time could increase engagement if settings offer the programme on a regular basis. However, a number of settings felt that running the groups with smaller numbers was beneficial, and that running them this way in the future would still benefit their setting. FHPs had slightly more varying views. They felt that FHPs rather than HVs would be more able to offer the linked home visits due to the differences in roles. FHPs felt that the intervention fitted with the support children should receive if identified with SLCN and fit with what is offered by FHPs however aligning the timing of this support with the timing when the setting might offer Talking 2gether would be challenging due to waiting list and delivery constraints on HV teams. One FHP commented: • *'Now, I would say 80% of the two year olds I see fail the ELIM...Bearing in mind that not all of those children are in nursery, we would not in anyway shape or form have the capacity to offer this to all of those children.'* The HV lead thought the programme was very valuable and had the potential for roll-out in the HV team. • *'Thank you so much for all the time and effort that has been put into researching and developing this programme and training and supporting our staff. The quality of the intervention is fantastic, the resources are great and we hope to be able to adopt this as a model to roll out more generally – at least with regard to the Health home visits (as we don't have control over whether it is rolled out in nurseries etc..)'* (HV Lead)

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	2.4 Practitioners report there is a **need** for the programme in their setting	**Need** Settings were chosen by the LA as serving socially disadvantaged communities and/or having high levels of SLCN and so all settings felt their was a need for the programme. Many EYPs expressed the high levels of SLCN need to us and the potential of this programme to address that need: • *'We are really sad this is the last one as we feel so many children and parents would benefit from this'* (setting 1) • *'On reflection we have decided to role out the course as the new term begins in September, the staff, children and parents have gained so much from these sessions and we feel that this would work exceptionally well in the new term'* (setting 4) • *'We are all devastated as we know that this programme would be hugely beneficial to us as a setting and both our children and families, it's just unmanageable at the minute.(5) (Withdrawn setting)'* • *'and also the fact that our children come in with so limited language development when the join us it was just to try and do something with the parents to let them know what they can do to help as well'* • *' think it's an ongoing. Yeah, it's an ongoing issue with ours, isn't it? A lot of our children are under speech and language anyway. Yeah. So anything, anything extra that we can get to grips with them on.'* • *'Thinking that it would be particularly useful for our nursery Erm because we have got a lot of sort of communication problems with the children, Erm delayed speech and um.'* In addition to needs of the children and families, settings identified other issues in which this programme addressed, in particular building relationship with parents, supporting parents with their children and working collaboratively with HV teams.

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		• *'Some of our parents don't really engage, so she thought it might be a good way of sort of bringing the two together'* • *'Yeah, yeah, yeah. It was one of the reasons we were really looking forward to taking part was because there were going to be there [HV] and we knew. We knew that we were going to be able to have face to face contact and a bit of time with them just to chat and sort of make those connections.'* FHPs and HVs also reported high levels of need in the children and families they serve: • *'I think because like I said before, there was a a high level of need and deprivation within the area. There is a lot of children that actually are entitled to that free two year nursery place and than sort of you would expect another areas.* • *Now, I would say 80% of the two year olds I see fail the ELIM...Bearing in mind that not all of those children are in nursery, we would not in anyway shape or form have the capacity to offer this to all of those children* FHPs and HVs also reported that they do not have many resources/programmes available to help them to support families and the resources form the Talking 2gether programme filled a gap: • *'I think I've got the knowledge the resources are few and far between.'*
	2.5 Practitioners report the one-day training	**Training is useful** EYPs and FHPs valued the training they received

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	is useful in **supporting programme delivery** 2.6 Practitioners report the twilight sessions are useful in **supporting programme delivery** 2.7 Practitioners report that the peer coaching is useful in **supporting their use of contingent interaction**	They reported it • *'reinforced their knowledge of SLC and how the project was going to work',* i • *'increased their knowledge of* responsive contingent interactions' • and provided *'lots of ideas on how to support parents on how to interact better with their children'.* All practitioners who completed a feedback survey about training responded there was nothing missing in the training that they would have liked to have been included. EYPs valued time with the HV team, guidance on delivery, refreshing of knowledge and some new knowledge: • *'At that time, I think like going back to the health visitors, it was nice to be able. It was nice to be able to sit with nurseries from our area as well and to.'* • *'So the training I've found that really helpful and really informative and that like I say, there was bits of it that kind of that was just going back over our knowledge that we already knew and ,but I don't mind that, I like, I think it's nice sometimes to go back and refresh things erm and as well you guys the help and support we've had from you has been brill'* • *'I thought all the training was useful and beneficial. To be honest'* • *'The training I thought was really useful. I don't think I could have done it without it certainly not, you know.'* When asked which training session they thought was most beneficial, 3 settings said the peer coaching and 1 said the face-to-face training day. Interview and informal feedback reinforced the significant perceived value of the coaching

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		approach, EYPS commented: • *'I thought the peer-to-peer was really good…..But it is something I found really useful and I do think sort of could be implemented into the setting definitely erm.'* • *'Erm the recording that we did with [researcher], that that was really good and we haven't done it yet, but we have talked about it with other staff erm cause like I say me and [EYP] were like oh my goodness. I'm not sure how this is going to feel. It did feel really weird, erm but we kind of I think we over thought it at first and then we were like do you know what? Let's just set the camera up and let's just get on and do it. And I think it was it was really interesting actually watching ourselves back erm.'* • *'We did the video yeah. And we've like I personally found that really, really useful. And obviously like as a nursery, me and [EYP] reflected on it together and things and pulled out some really nice points. And as a nursery as well. We're gonna use that approach to do our monitoring of teaching and learning next year'* FHPs and HVs reported at interview that they very much valued the face-to-face training day but had engaged less with the online elements, perceiving that perhaps it was more focussed on EYPs in settings: • *'It's been a lot more for the nurseries than it has for us'* Similar to the EYPs they also valued the initial training day in particular the time with the settings, and the refreshing of knowledge and acquisition of some new knowledge: • *'So, you know, I did find it quite interesting. And, you know, the information was helpful. What was relayed...I think for me there was some new things that I didn't know in there and I think you know some of the other*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		things as well was just a little bit of a recap' • *'I think it was nice for everybody the be together. I think it's always nice to build those relationships and especially that initial one because it was sort of generalised information that we were all, you know, have would all have to be sort of shared. … I think it's good having that group work as well and like like watching. just building up their relationships with the Partner agencies that we work alongside.'*
	2.8 Practitioners find the programme materials (manual and resources) are valuable for preparing them for delivery 2.9 Practitioners report they find the **manual** easy to follow/**resources** easy to use	**Programme materials** 7/9 practitioners reported they referred to all programme materials (Talking 2gether manual, training day handouts and the parent leaflets) during the delivery of the programme, 1 EYP referred to the training day handouts only and 1 FHP the Talking 2gether manual only. FHPs rated each of the 3 programme materials as 'very useful'. Most EYPs rated the parent leaflet as the most useful resource (4 rating this as 'very useful, 2 'fairly useful'). Both the manual and training day handouts they rated equally (3 rating these as 'very useful', 3 rating as 'fairly useful'). All EYPs/settings reported they received the right resources to enable them to deliver the programme, and there were no other materials we should consider providing in the future (if we were to run it again for example), one setting commented that what they received was *'a very comprehensive package [of materials]'.* • *'all the resources were there, which was really good. Yeah. And the packs were sort of very comprehensive and the information that we were to deliver to parents was great. It was all there for us.'* • *'think we do it exactly the same because it was, it was really easy to deliver.'*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		Settings recognised the design of the sessions supported ease of delivery: • *'We used each week didn't we. Yeah. Yeah, they were all really helpful. We found them really helpful especially the overview of what our session would look like. We used that a lot. Yeah. ...And we had that this to hand with us in case we needed to change anything, but it worked really well. Yeah. And that certainly helped. The first week. I think once you get into a little routine and you know what's what and you're okay. But that that first initial week that was really helpful to have, wasn't it? '* Very few problems were raised. One setting commented on problems using some of the PowerPoints/videos due to technical issues (setting 3). Another noted the need to support parents with literacy difficulties with some of the resources. FHPs and HVs found the resources very valuable and easy to fit in with their practice: • *'Yeah, the resources were really good.'* • *I think for me the resources are really good and I'd probably use them without having contact with the nursery.* • *Ohh very easy yeah cause again if we if we would do and if we picked up a piece of invention work and it was speech and language we would do that over six weeks anyway within the home. That's that's [Trust] guidelines is 6 weeks of intervention work and so I think yeah so that tool would fit in ideally with what we've already got in place.* • *This is like proper basic stuff. And it was really nice to go right back to the basics of everything. And I think that helped mums rather than say we're doing this, we're doing that or how do you feel about doing this? It was like, right, you've got this tiny little piece of work that you need to be doing. You just going to sit on the floor and engage with him. And she, I think she sort of rolled in that she was like.*

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		Parents were very positive about the resources. There were some comments about making resources more durable (laminating) and bound together as one booklet/on a key ring to stop them being lost and/or receiving them all together at the start.
Q3 Can the programme be **accommodated** by settings and families?	3.1 Practitioners are able to engage families to participate in sessions	**Engaging families** The target number of parents we asked each setting to recruit for participation was 6. Of the 5 settings that recruited, 2 recruited 6 parents, 1 recruited 4, and 2 recruited 3. When asked how easy or difficult it was to recruit parents responses were mixed, with 3 EYPs reporting this was 'very' or 'fairly' easy, and 3 reporting it was 'fairly' or 'very' difficult. Once approached attendance was high with an average attendance in the 4 settings who completed the programme

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		of 82% and a range of 69 – 100%. Only one parent stopped coming altogether due to getting a job. Setting 1 approached 4 parents (with a total of 6 children), setting 2 approached 6 and worked with 3, setting 3 approached 4 and worked with all of them, setting 4 approached 6 and worked with all of them, setting 5 dropped out before recruitment of parent stage, setting 6 approached 6 and worked with 6 for the first session before dropping out. Practitioners used a variety of ways to engage parents in taking part. Settings were provided with leaflets. Most approached families verbally and directly using the leaflets to support. Some also used coffee mornings/meetings. • *'Well, I went to our staff members and explained sort of the process and then they kind of made a list of who they thought would benefit from it. And so we kind of targeted. Those families and sort of spoke to them and gave out the the leaflet and things like that. And and then I made it up sort of the pack with, you know, the consent and stuff like that, and spoke to them.'* Practitioner Interviews suggested that in the setting with the lowest recruitment, engagement was perceived as good when compared to parents' usual levels of engagement with the setting. They also feel that having run the programme once they could now recruit more successfully as they would be able to explain it better to parents and allay any fears. • *'But there was just kind of some of them just, well, most of them just. It's so hard to engage parents. It's so so hard. And I was actually over the moon that we got what we did (setting 2)'*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• *'think until I delivered it, I didn't really. Fully understand it, but now I've delivered at once that I've got a better understand and I I could then hold a meeting, then talk to the parents. More knowledgeable than I did....'* Practitioners report that some parents have a fear of involvement with professionals. • *'I don't know whether there was kind of a fear of it. And you know, because there is, there is parents in this nursery that we have had to have social services involved and I don't know whether they thought it might be a reflection on their parenting skills. So there were a little bit afraid of it' (setting 2)* And for at least one parent the involvement of the HV felt threatening. Whilst for another this was an appealing part of the programme. • *'Like I'm 100 like I'm 99.9% sure it was because she didn't want the health visitor involved and yeah, and we did put it across to her you know, you don't have to and stuff like that. But I think as soon as that was mentioned, it was. Oh, I haven't actually got time anymore and she doesn't work. And do you know?'* • *'the child that we picked and the parent that was with the parent was really on board for health visitor sessions, she has speech and language concerns about her little boy in general anyway, so she was quite eager for the health visitor be able to go out.'* Some settings were wary of not stigmatising parents and wondered whether a blanket invitation in future might work better so families self-select and staff choose form those who volunteer. EYPs commented:

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• *'I think recruitment we found really difficult just to get those people involved without - we knew who we want to target. But we didn't want to single them out for them to think that we thought that they were doing a bad job.'* • *'I think if we were to do it again, I think it might be good just to put a blanket invite out there and then we'll make you got more interest because we're kind of limited ourselves to the parents we put out.'* One setting (4) used a variety of strategies which appeared to help with recruitment (N = 6) and parental enthusiasm. These strategies included encouraging parents to bring friends/relatives, choosing families carefully, running at the end of the say close to pick up time and believe that existing strong relationships helped. • *'Whereas if they feel they can bring bring somebody along, even if it's just for maybe the first couple of weeks till they get those bonds going. And I think it just helps to make them feel a little bit more comfortable, didn't it? And...We weren't strict on the numbers and if they wanted to bring somebody else in, whether it be another family member or a friend, we just ran with it and and we just included everybody.'* • *'We've had a few um absentees, but not on a regular basis, so I think they were genuine sometimes they just couldn't make it. But we've also had extra people taking part, so a lot of the mums brought the dads along as well, so we've had some dads involved too, which was really good.....That meant that some points he had up to nine people in the sessions'.* • *'So we had to on an afternoon. So we timed it where most of the children will be going home within the at the end of the session anyway...It was easier for them to come and then to be able to take their children rather than come leave and then come back. And obviously the children would get them confused then and it wasn't. Yeah. And and it wasn't really eating into their time, at home.'*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		This setting (4) has the lowest IMD rank and had the highest engagement underlining the fact that this issue is more complex than simply the social disadvantage of the families served. • *'No, I think they were eager yeah. Yeah. More like willing to do it. Yeah. Everybody seemed to jump on board. Really. Yes. Really. We had no problems. Didn't we ? Yeah.'* A longer run-in to the programme to have time to discuss with parents would have been beneficial Home visits and FHP support were generally fully engaged with by the parents with one exception where the FHP felt this was due to better relationships with the EYPs in the setting.
	3.2 Practitioners / families report that delivering / attending the six sessions a term is achievable and participating in the 4 home visits (where appropriate)	**Six sessions achievable** Most EYPs reported it was easy to fit in the delivery of 6 sessions over the course of the term (1 reporting 'very easy', 3 'fairly'). FHPs also reported they found fitting in home visits easy (1 'very', 1 'fairly') with only 1 FHP reporting this was 'neither easy nor difficult'. As described above 2 settings reduced the number of sessions provided Delivery log – one setting (4) combined session 4 and 5 due to staff illness. Setting 3 ran the programme over 4 weeks due to staff time constraints. One setting indicated that six sessions was a big commitment for parents and another noted that parents were concerned about the time commitment at the outset of the programme: • *'I think we said as well, didn't we? Six weeks is a a long commitment, it might not seem it, but it is a really long commitment for them. And so I think the the main thing is to get them to be comfortable at the beginning and*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		then I think you've got them. If you haven't got that connection at the beginning, I think you are, they are going to dwindle away.' (setting 4) • *'I think straight away that every parent was like, well, how long's it gonna be? When is it gonna be? And it was all about time.(setting 1)'* Some felt different timing may support deliver and perhaps also engagement with parents: • *'we said we thought it would be better in the autumn term and when the children just start, obviously observations and assessments will get the sort of gauge of where the children's at and the language skills. But you don't necessarily always know.'* However, information form parents did not back this up suggesting parents were happy with the number and length of the sessions with one parent keen for additional sessions. Although some did mention some repetition in the content which could have been addressed. 10 of the 12 parents who completed the survey said it was fairly easy to fit in attending the parent sessions, the other 10 said it was very easy. Some commented on the reasons for this. • *There was no awkwardness (setting 1b)* • *'Always done around us parents, we changed times etc to suit us' (setting 2b)* • *'The session times were ideal as they didn't clash with school pick up times' (setting 3a)* • *'Children attend nursery when sessions are held' (setting 3b)* • *'The times the groups are held are very easy to fit things around' (setting 4d)*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		All 12 were happy with the length of the sessions. One parent noted that where there were younger siblings attendance is harder • *'The one thing that I can say was obviously with single parents it may be hard if they haven't got a babysitter for the child.'* **Four Home visits achievable** The HV team reported that the home visit intervention fitted with the support children should receive if identified with SLCN and fit with what is offered by FHPs however aligning the timing of this support with the timing when the setting might offer Talking 2gether would be challenging due to waiting list and delivery constraints on HV teams. Of the parents who responded to the survey 3 had been supported at home by FHPs, all 3 rated their enjoyment of these sessions as a 5 – a lot. Two of the found it fairly easy to fit these home visits in, for the other it was very easy One of the parents who found it fairly easy had another young child who distracted the child involved in the project during the first session. For the remaining sessions the dad looked after the second child. (setting 2c)
	3.3 Practitioners find the frequency, amount and content of training manageable and acceptable	**Training acceptability and feasibility** *Training day* Most EYPs also reported it was easy fitting in the training sessions (2 reporting this was 'very easy', 3 'fairly'), only 1 reported this was 'very difficult'. As reported for delivery, there was variability in FHP responses, with 1 reported fitting in training was 'fairly easy', 1 'neither easy nor difficult' and 1 reporting it was 'very difficult'.

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		EYPs: Out of the 5 settings that completed the Talking 2gether programme and attended the face-to-face training, 4 felt the amount of content that was covered in the full-days training was 'about right' and 1 felt 'too much' was covered. All 5 settings thought the level this training was pitched at was 'about right'. When asked what their key take-away messages were from this session, responses included 'how we can show parents the benefits of positive interactions' , [it] 'reinforced our knowledge, how the project was going to work', 'lots of ideas on how to support parents on how to interact better with their children', 'new concepts for parents to communicate with children' and 'the videos and the health visitor relationship/(meeting up on the day)'. *FHPs:* 3 out of 4 FHPs supporting the settings completed feedback about the training. All 3 FHPs felt the amount of content that was covered in the full-days training was 'about right' and all thought the level this training was pitched at was 'about right'. Key take-away messages from this training reported by FHPs were the 'STAR' peer coaching approach and 'to follow the programme and see if it works' *Peer Coaching* EYPs who had used the peer coaching strategy reported on how helpful this had been (3 reporting 'very', 3 'fairly'). 4 EYPs reported they would continue to use peer coaching with staff in the future whilst 2 were unsure. 2 FHPs provided feedback on the peer coaching, both reporting it was 'fairly helpful' and both were 'unsure' if they would use it with other colleagues in the future. When interviewed at the end of programme delivery all 4 settings reported they would be implementing peer coaching across a wider range of staff in the future.

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		Twilight sessions EYPs: 4 EYPs felt the amount of content that was covered in the twilight session 1 was 'about right' and 1 felt 'too much' was covered. All 5 settings thought the level the twilight session 1 was pitched at was 'about right'. When asked what their key take-away messages were from this twilight, responses included 'it reinforced the content of the course. it embedded the philosophy behind the idea which I found very helpful', 'how the sessions were going to look', 'lots of support with delivery of the session', and 'it repeated quite a bit from the full day session and previous info on emails'. As for the mid-point troubleshooting session, 4 EYPs found this helpful, 1 did not find it helpful and 1 was 'unsure'. FHPs: 2 FHPs provided feedback about the twilight sessions, both reported the amount of content covered in twilight session 1 was 'about right' and the level this pitched at was 'about right'. When asked about key take-away messages from twilight session 1, 1 FHP responded, 'refreshing the information from day 1'. Both FHPs were 'unsure' whether the mid-point troubleshooting session was helpful. Some EYPs reported Twilight being a difficult time of day where as other found it very convenient: • *'it's it's really quite on a night time when you're absolutely shattered now. It's quite a big and that was quite a big thing in our daily routine.' (setting 3)* • *'That worked really well for us because we're we're so tight with time wise it. It was really helpful to be able to do that when when we'd finished work, yeah.' (setting 4)* Some felt that the midpoint review could be dropped or be optional or trouble shooting through other means. On

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		reflection individual (phone calls at practitioners' convenience may be better accommodated. • *'and I think obviously as a nursery. It's so we are so busy constantly. I think maybe if if like you sort of just said look, we're going to be doing this - review this, this week, if you could just have a look through the the slides and if you have any. ..questions or any information you would like to share ..Like Jump, jump on or come to you kind of thing...an hour of our time ' (setting 3)*
	3.4 Practitioners find the amount of preparation needed before delivering a session manageable	**Preparation** We asked practitioner how easy or difficult was it to prepare for the Talking 2gether sessions with parents. Most EYPs reported this was easy (1 'very', 4 'fairly'). All FHPs reported it was easy to prepare for the home visits (2 'very', 1 'fairly'). The time settings reported they needed to prepare varied from 5-10 minutes (with the final session needing no preparation, to an hour (setting 2) *'It took us approx. one hour to prepare, this included reading through slides, setting activity up and going to get refreshments'* (setting 1). This could be due to the setting: how much space they had, what needed to be done to prepare this space, where they needed to get resources and refreshments from. Interviews suggested preparation was manageable and well supported by the resources: • *'It it was great because no it [preparation] was minimal and which I think is one of the reasons why we we were, it really worked well for us and because it didn't take much time at all for us to set up, have everything*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		planned and and get it all ready and then just to deliver it.' (setting 4) • *'All the resources were there, which was really good. Yeah. And the packs were sort of very comprehensive and the information that we were to deliver to parents was great. It was all there for us.' (setting 3)* FHPs did not mention preparation in any interviews suggesting this perhaps was not an issue. Only 2 settings mentioned asking parents to do any preparation before the sessions: • *'bring post card to discuss / think about target'* (setting 3) • *'Parents were asked to practice the previous weeks super communicator tip ready for reflection in session three, also to prepare any questions they may have had'* (setting 4)

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
	3.5 Practitioners / HV teams report that it is possible to arrange meetings 3.6 Practitioners / HV teams report that it is possible to negotiate responsibility for supporting families of children with identifiable risks of poor language development	**Collaboration between EYPs and HV.** EYPs and FHPs were asked to work collaboratively to identify appropriate parents to attend the group sessions in the early years setting, identify 1 family to receive home visits, and deliver a collaborate intervention. For 2 of the paired settings/FHP there were positive reports from the EYPs and HVs that this collaboration was helpful. For the other 2 pairs there was unclear communication between the EYPs and FHP about roles and delivery.... Where this collaboration worked well it could result in children and parents getting the extra support they needed including earlier referral to SLT for a child with significant difficulties and more intensive support for a family with complex family situation. • *'One of our parents said that she was struggling at home as she doesn't get much help from her partner. I recommended that [HV] do the home visits with her and she might be able to help her make some time to spend with her child. She was really happy with that and was looking forward to it'* (setting 2) • *'Had I had not. would a speech and language referral be going in this soon if that makes any sense. Um, I think it might have been longer down the line of getting here in the support and everything he needs so.' (FHP)* • *'the other mam who has been a little bit hard to reach ….she is struggling to, she's struggling. and I spoke to [HV Team] on Monday and she's done 2 visits with her. She was doing one yesterday and but I think [HV Team] also decided that it's going to be continuing over the holidays and things as well. So because of this programme that's been identified and she would never have let anybody in her house no she wouldn't have. ... And she's welcomed that in. So again, that's a big thing for us' (setting 3)* It was also highly valued by parents both in anticipation of the extra help and when received:

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• *'It's been it's been a lot more beneficial with [HV Team] coming into the house and my with [HV Team]. like a It's helped more than you know when like obviously in a setting and and you've got so much to take all of this* • *the parent was really on board for health visitor sessions, she has speech and language concerns about her little boy in general anyway, so she was quite eager for the health visitor be able to go out.'* However collaborative working did not always happen to the extent the settings or HV teams would have liked. The very limited preparation time due to the issues with the Hub withdrawal may have affected this aspect of the delivery of the programme. Settings • *'know one of the points was to work together with the HVs to pick the children. And that would have worked nice. But that really didn't happen either? Didn't it not as well and we were kind of were in the position where they hadn't been to see us yet So we had to pick them. And then when we did come in to nursery we gave them a list of who we thought so we'd already done a lot of the work anyway, but then they didn't even follow that up did they?.'* • *'And I think we were well as a team were would just disappointed with it. Yeah, we were hoping to have a bit more involvement with thought. It would be a good chance to just open communication a little bit more and it just hasn't worked out like that so.'* HV team • *'I haven't really had any feedback from the nursery about how it's gone at the nursery'*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• *'I think one of the difficulties our end was I think there was a little bit of a lack of communication from the nursery to us. So I think [HV team] didn't realise that the sessions had started and...You know, there was, there was no communication to say what children had been identified.'* Insights form our discussions with both teams revealed there were missed attempts to contact one anther from both sides. • *'I've emailed [HV team] couple of times ask how things were going and if we could have a meeting with regards to how things are going to progress and I've got an e-mail back saying that.....She wasn't sure of what we needed to have a meeting about because she didn't. She missed the training or something and and then and I've just seen on my desk this morning. She'd rang yesterday after I'd left.'* The broader context of the relationships between HV Teams and Early Years Setting was also relevant. Mutual understanding of each other's roles, constraints and skills and trusting relationships may not be as developed as necessary for such collaboration to work. Further preparatory work may be beneficial to gain the optimal benefits from the collaborative work in this programme and/or may emerge over repetitions of delivery of this programme. • *'my experience with health visitors is probably is not been the best either because we, I mean, we have had ones in here that have supported us right. But we do have, we have a quite a lot of bad experiences ourselves erm whether they come in and kind of disregard all of our knowledge and they know best all the time that we get a lot of that...when we have gone to them before with the problem for a child about a child, that what they've done instead of going in around about way, they've gone and said [setting] have said der der der der and then it's broke our relationship down with that parent' (Setting)*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• *'just feel like they don't work with us at all……eah, they say they want our input, but then you can tell that they don't want our input and it's . And considering we work with the families everyday that you would think that there would be really open to listening to what we've got to say.' (Setting)* • *'At the minute, I feel that we're all working on completely different pages and we think a health visitor, how a health visitor should be supporting us and how a health visitor, thinks that they should be supporting us, is completely different. ….And so I do think communications probably is a massive thing. I think understanding each other's roles probably is a huge thing as well, because I don't think health visitors completely understand our role either.' (Setting)* • *'there's settings you dread going in, cause you know you're gonna come out with a massive list of things to do...And I think sometimes they expect us to solve their problems. So if they've got a concern or they have got an issue about a child, the expected us to go in and deal with that way, that's not our job. And that's not our role. Like you've got that worry, you need address that. That's not to hand over to us. You know, why should we be the bad people going in?.... I don't think it's the settings thinking anything against us. I think it's just sometimes they don't feel comfortable bringing up their concerns with the parent themselves. So they'll ring us and say ohh, I'm really concerned about this little one. They coming in a nursery and doing this, this and this. Can you go out and see them well no can't' (HV team)*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
	3.7 Practitioners / families report that it is possible to **increase the use of responsive contingent interactions**	**Possible to Increase responsive contingent interactions** As identified in question 2 many families and practitioners report change in parents use of Responsive Contingent Interactions and consequent benefits for the child. In interviews practitioners reported seeing significant changes: • *'And then [parent] said something about being on the bus and then it got in the conversation of a dog. And then, you know, and then all that and then, like, that sort of [parent] was told that little bit of a story. And I said, Lena, I said that's exactly what we're talking about. And...they don't realise the importance of what they're doing ….That interaction, that constant interaction with the child, is having such an impact in comparison to that mam' (setting 3)* • *'Realised parents did not know some of the tips e.g. get down to child's level dad said he had not been doing that but dad came back the next week saying he had done this and tantrums had decreased' (setting 1)* • *'So she started to open up and ask things now and you can see that it is actually having an impact on on [child]...he had quite a few behavioural problems as well. So we've given like tips on different things there, basically just dealing with tantrums and things like that…..and like I have seen a change in his speech' (setting 1)* • *'So I think doing the project is help them learn how to communicate.....Properly with with child and I do think it has had a huge impact because he is a little sponge and he is so intelligent. So I do think that's had a huge a huge impact.'(setting 1)* Parents reported changes in their behaviour and awareness in some cases also in their partner's:

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
		• *'I've made more of a conscious effort since going to them. And obviously, like I've, I've passed it on to my partner as well, and I've not he listens to. He's listening to what I've been telling them anyways.'* • *' I think I'll definitely use them all'* • *'So it's just a little thing like it was just little things like that, like you could take out of the sessions and then obviously implement it like in your house yourself'.* • *'With the washing is like when it's dry outside and stuff like I'm taking her outside with me. And then obviously we're putting it in the basket together and we'll do it like the washing that way.* • *'But I'm saying what he's doing so like it's playing with something and I am adding a word on now he can say a sentence now'* • *'things like getting down to her level, giving her another 10 second to answer, to register the information and then like just giving her that pause and giving her a chance to respond to us was like a little bit of an eye opener. And obviously when you speaking to her like, you're automatically speaking from above but and then like obviously when you're just not it's the only time you get down to her level and talk to her face to face'.* It is therefore possible for parents to increase Responsive Contingent Interactions but one parents reported that it was not always easy with siblings identified as a potential barrier: • '*It's hard to do one one with her because obviously I've got [brother] with her, but I've been sitting down on the afternoon with both of them together and we can play like play-doh colouring on the colouring books. We can do bubbles or we can do anything or like or even take them out for a walk and get her to point out, different things and stuff like that. Or like, obviously on an afternoon I can do like an activity between the two of them.'*

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
Q 4 Do different settings, or participants (including families), have different experiences of delivery? What factors influence this?	Potential key characteristics • Size of setting • Demographic of setting • Catchment area/SES of setting • Practitioner experience • Practitioner qualifications • Staff availability • Work the setting is already doing with parents • Existing relationship with parents • Accommodation/space in setting to host sessions	**Differences across settings** See Appendix 2 for summary data regarding these factors across settings It is difficult to draw definitive conclusions regarding differences across settings based on these characteristics. However, it is clear that settings 1 and 2 found parent recruitment harder than settings 3, 4 and 5. All settings serve socially disadvantaged communities with setting postcodes in either the 1st or 2nd IMD decile. Setting 2 describes their families as very hard to engage generally but that the engagement with this programme was better than they expected. Setting 4, with a postcode with the lowest IMD ranking recruited best and cited strong existing relationships as important. They also employed a number of strategies to support attendance including running the session just prior to pick up and encouraging parents to bring partners or friends to support confidence. The setting with the lowest parental engagement did not attend the Face to Face training day (although they were offered the chance to view a video of the event) where recruitment strategies were discussed and shared between settings. They reported not using some of the strategies which had been suggested and which proved beneficial to a number of other settings. • *'I would take a look at recruiting as this was the hardest part and maybe invite all of our parents in for a quick meeting to talk about the programme rather that targeting families we felt would benefit the most. I would explain to them that we are not here to judge and there is no silly or incorrect question'* (setting 2) Two setting withdrew due to unavoidable issues with staff sickness and staff long term absence in very difficult circumstances. The need to withdraw does not seem to be correlated with the size of the setting in terms of staff or

RESEARCH QUESTION	ANSWER (INDICATOR)	KEY FINDINGS
	• Health Visitor Team skill mix • Number of EAL families • Access to interpreters	children. HV team varied in the degree to which they were able to deliver the planned sessions and liaise with the settings. This was partly due to issues such as illness but possibly also where the HV team member had more SLCN intervention experience there was more success in delivery as intended. FHPs rather then HVs appear to be better placed in this service to be a part of the delivery of Talking2gether due to their greater involvement in intervention delivery and hence flexibility in time allocation. Due to the constraints placed on where we could recruit there were very low numbers of children with EAL in the nurseries (2 potential participants across all 6 recruited nurseries) and none were involved in the study. Some settings were more confident than others in delivering the intervention, and this may correlate with the degree of previous SLCN training the settings had received; one setting reported they had had no previous SLCN training (setting 3), and the amount varied between those who had (Settings 2 and 3 reported being nervous at first). All grew in confidence after trying the first session however. The pre-training questionnaire asked if settings had previously attended specific speech, language and communication training. Settings 2 and 3 had not attended any previous training, settings 1 and 4 had. At the initial meeting with setting 4 they talked about the training they had attended and commented that they had not had any training about working with parents Parents with less social support (single parents, partners who did not engage with the programme, high numbers of siblings) found the programme harder. Also, those who work were less able to engage.

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Appendix 4 EYP Survey; HV/FHP and Parent Surveys.

Jisc Online surveys

Talking 2gether Feedback Survey for Early Years

Showing 7 of 7 responses

Showing **all** responses

Showing **all** questions

1 Your name:

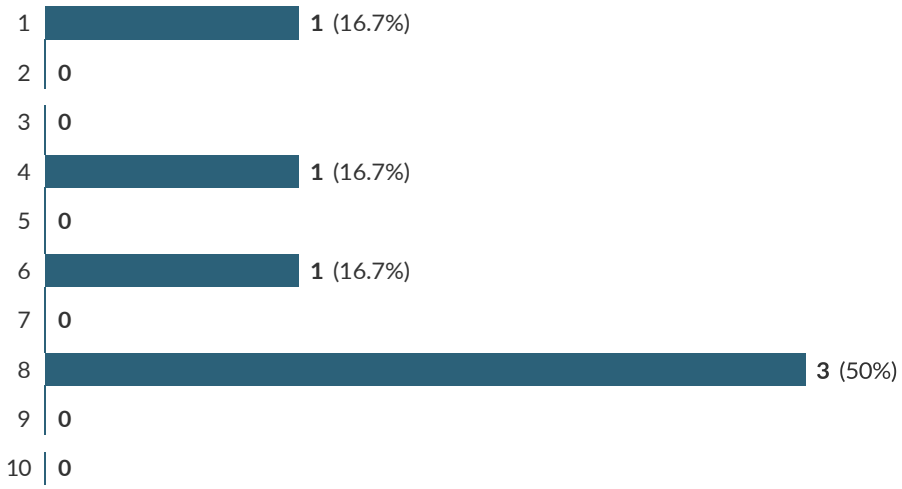
Showing all 6 responses	
Setting 2	1071097-1071079-112672046
Setting 1a	1071097-1071079-112684484
Setting 1b	1071097-1071079-113030486
Setting 4a	1071097-1071079-113242416
Setting 4b	1071097-1071079-113249414
Setting 3	1071097-1071079-113741196

2 Your Early Years setting:

Showing all 6 responses	
Setting 2	1071097-1071079-112672046
Setting 1a	1071097-1071079-112684484
Setting 1b	1071097-1071079-113030486
Setting 4a	1071097-1071079-113242416
Setting 4b	1071097-1071079-113249414
Setting 3	1071097-1071079-113741196

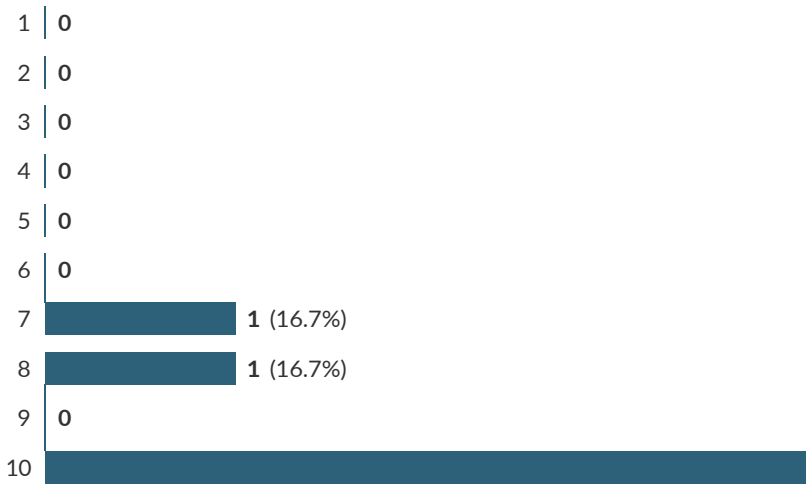
3 How knowledgeable did you feel about responsive contingent interaction? (1 is 'not at all' and 10 is 'extremely')

3.1 Before Talking 2gether



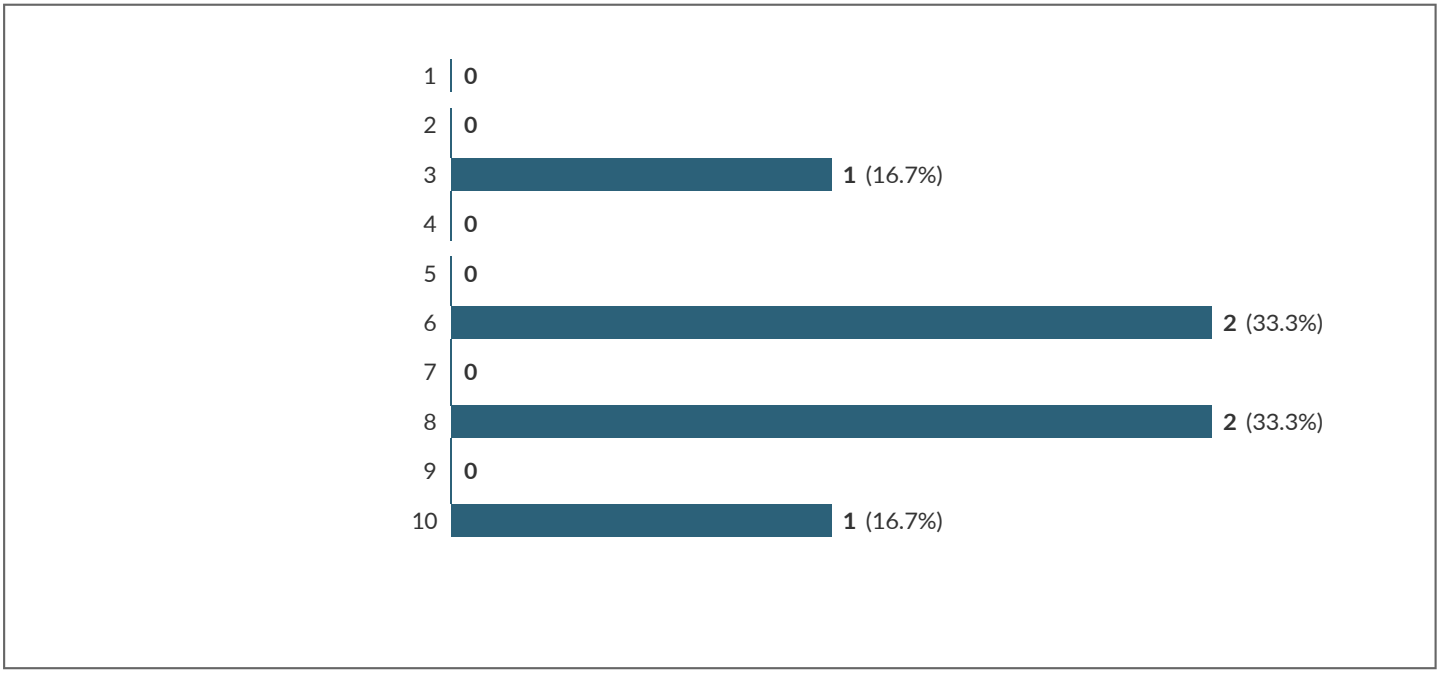
Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

3.2 After Talking 2gether

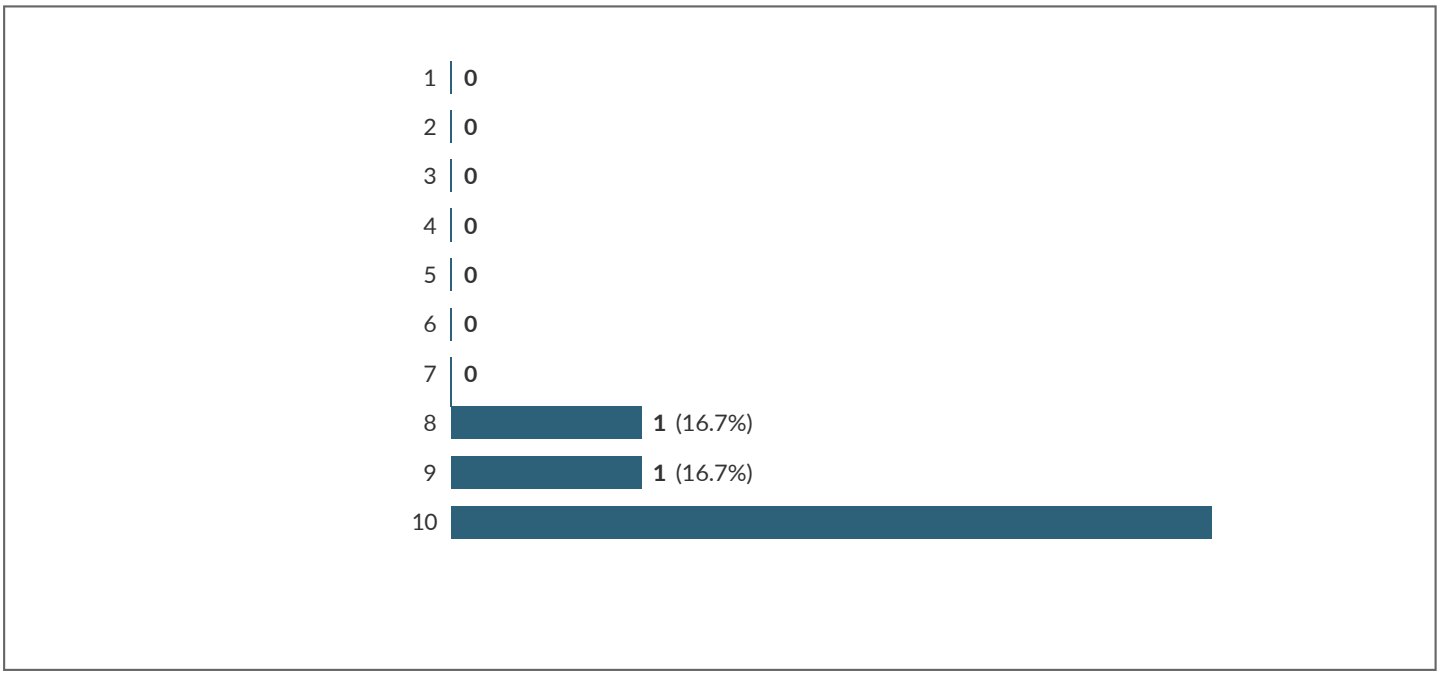


4 How confident did you feel about supporting CHILDREN with their language and communication development? (1 is 'not at all' and 10 is 'extremely')

4.1 Before Talking 2gether

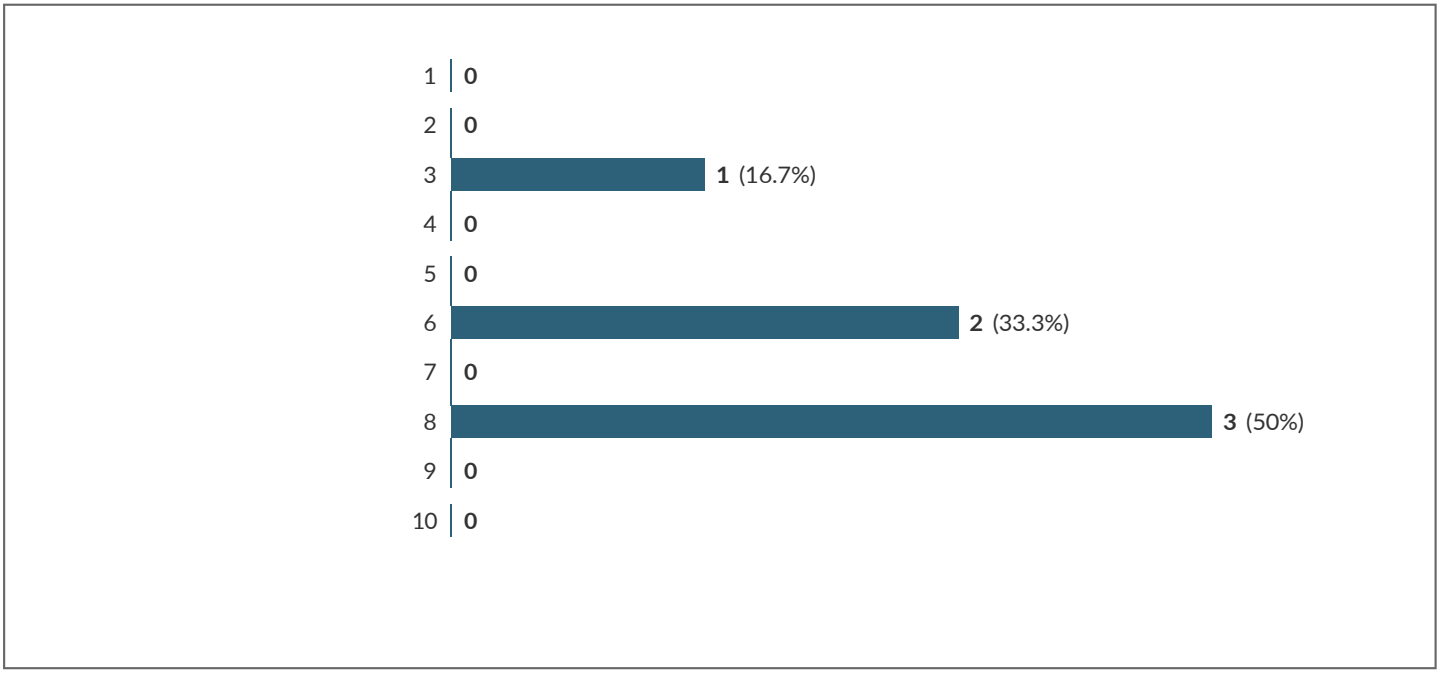


4.2 After Talking 2gether

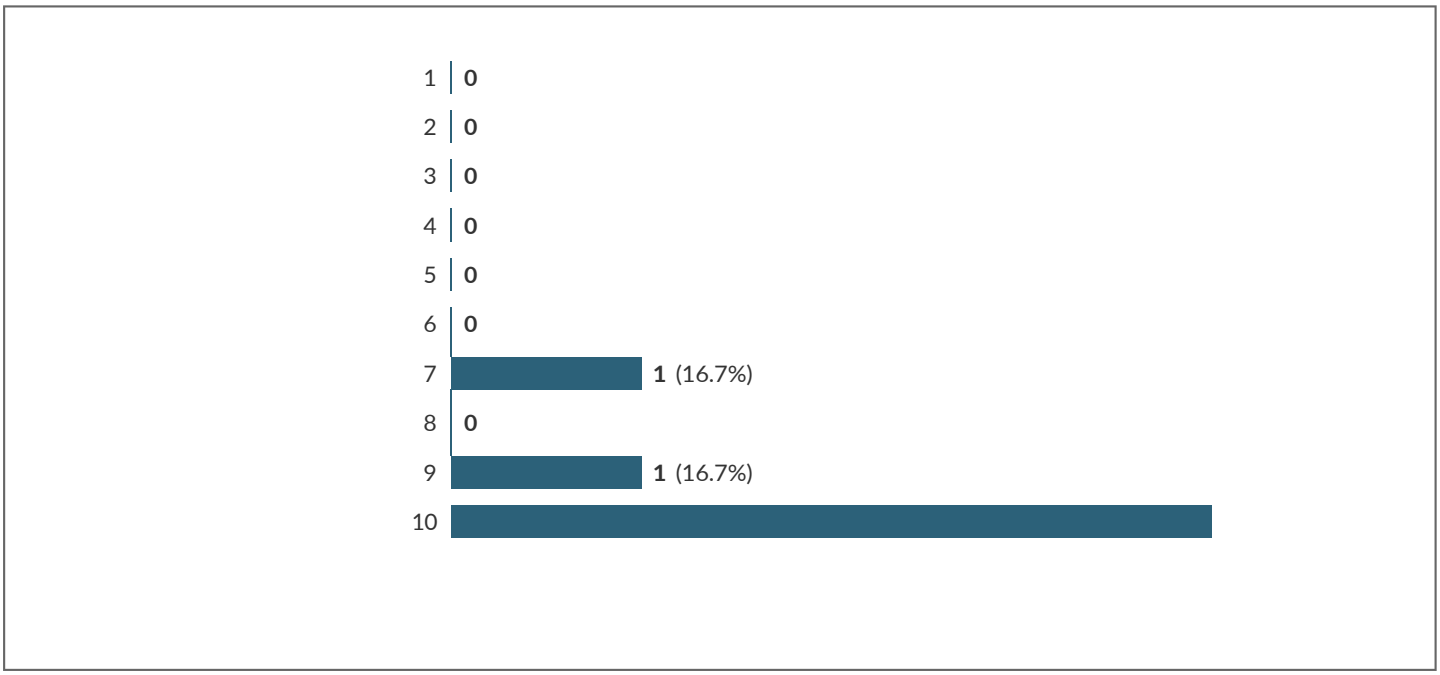


5 How confident did you feel about supporting FAMILIES with their child's language and communication development? (1 is 'not at all' and 10 is 'extremely')

5.1 Before Talking 2gether

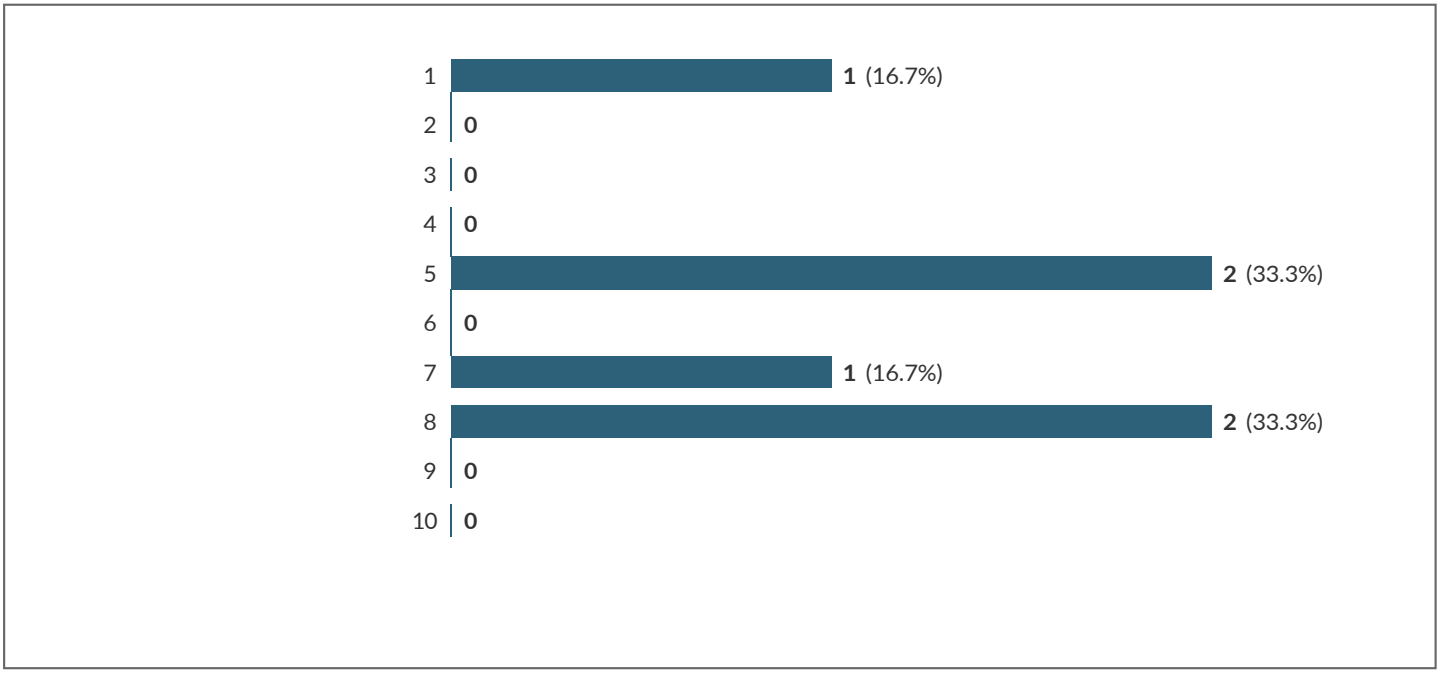


5.2 After Talking 2gether

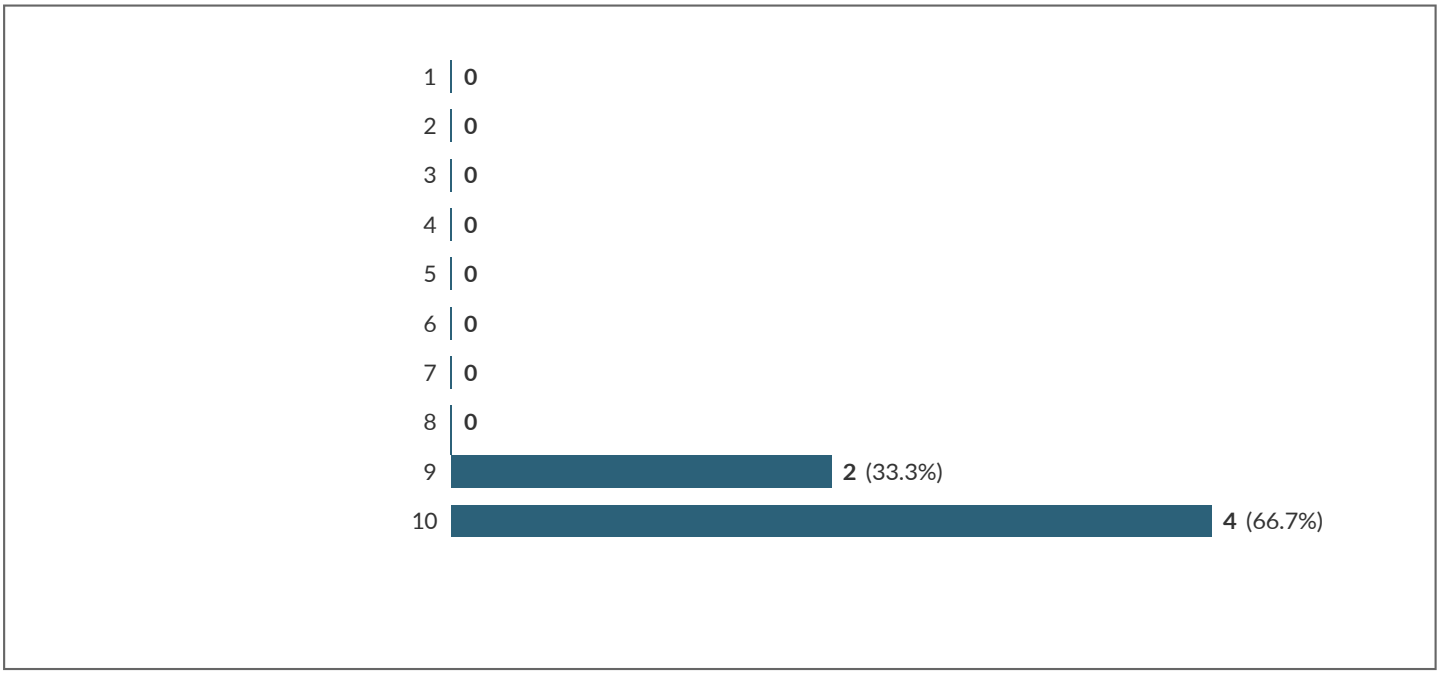


6 How confident did you feel about delivering the Talking 2gether parent sessions? (1 is 'not at all' and 10 is 'extremely')

6.1 Before Talking 2gether



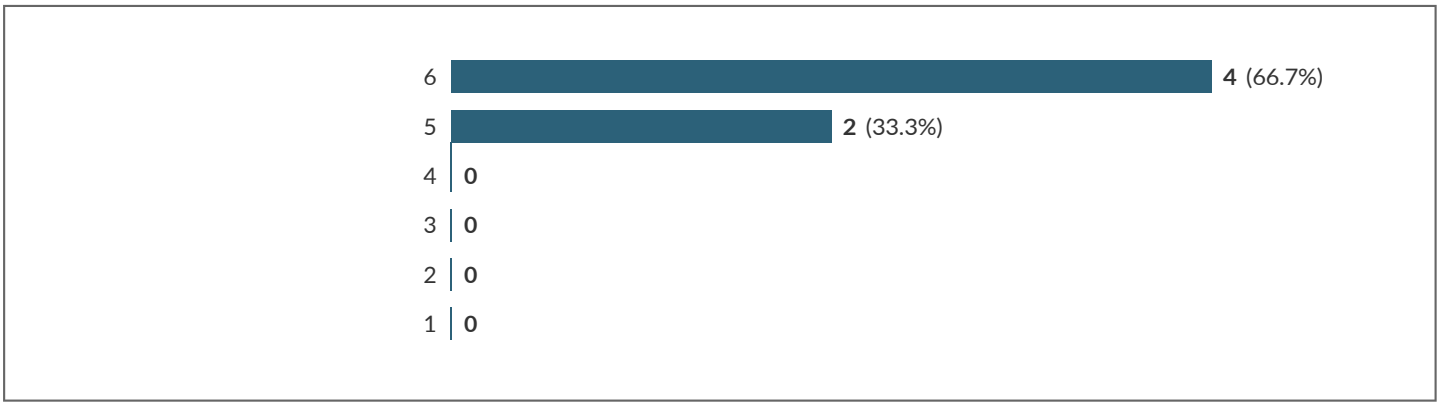
6.2 After Talking 2gether



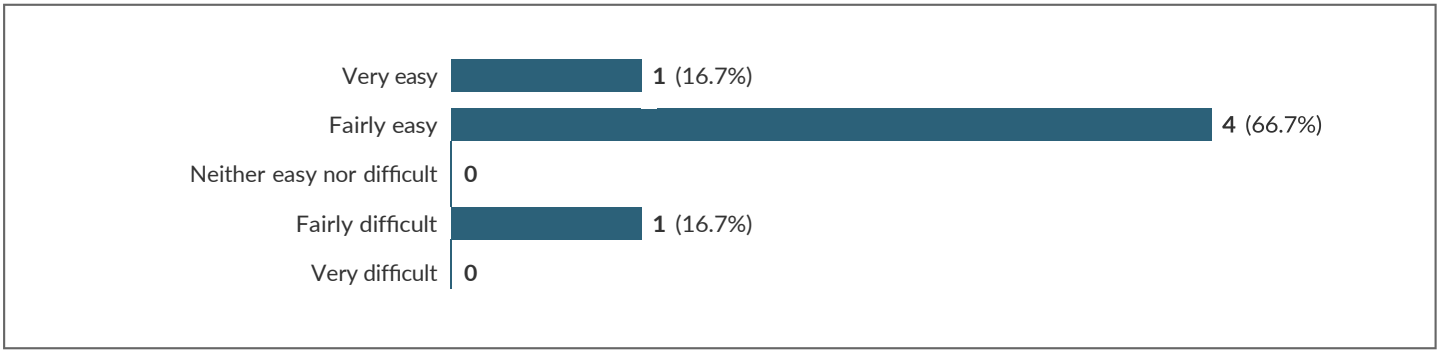
7 Is there anything that Talking 2Gether has not provided that would help you to feel more confident supporting families and/or children with language and communication development?

Showing all 5 responses	
no i feel that everything was well thought through from the slides to the resources	1071097-1071079-112672046
Everything was well put together	1071097-1071079-112684484
No	1071097-1071079-113242416
no	1071097-1071079-113249414
no	1071097-1071079-113741196

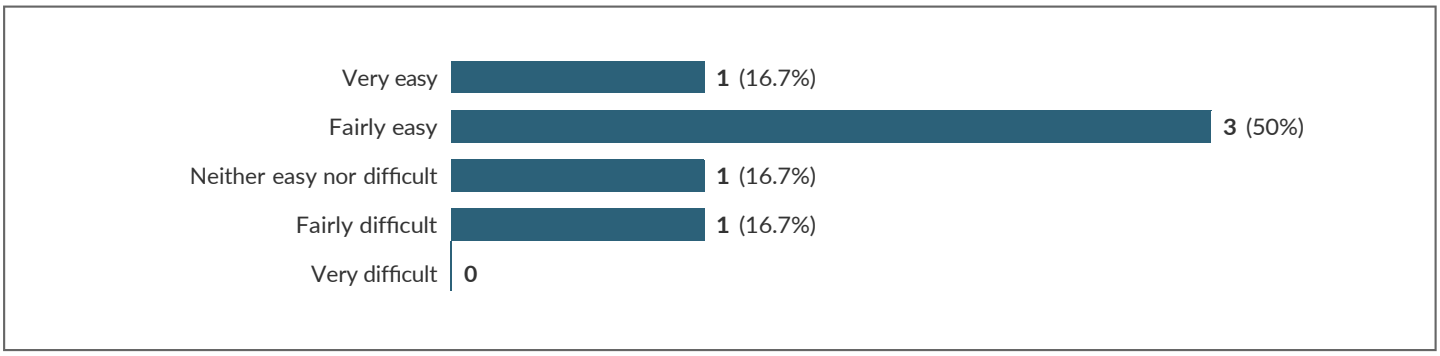
8 At the time of completing this survey, how many parent sessions in your setting have you delivered?



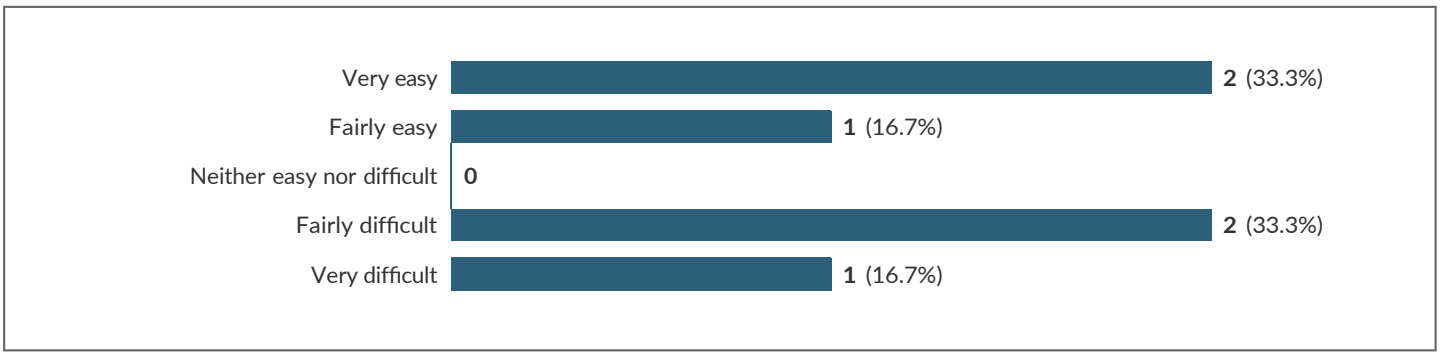
9 How easy or difficult was it to PREPARE for the Talking 2gether sessions with parents?



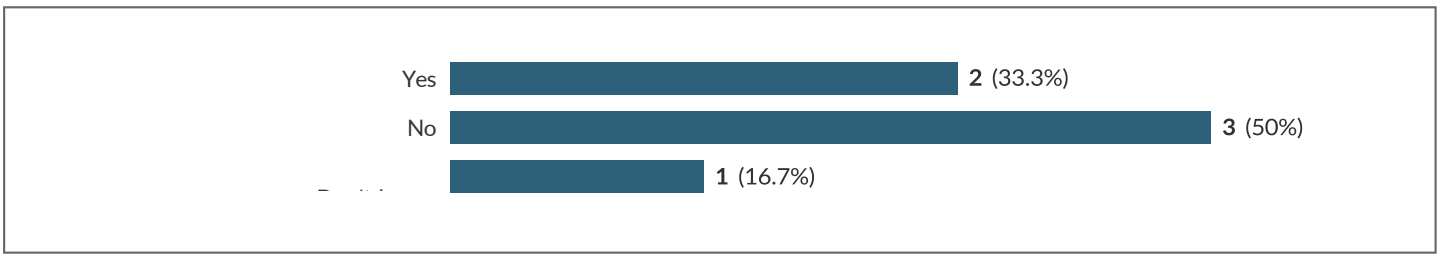
10 How easy or difficult have you found it to FIT IN DELIVERY of the x6 Talking 2gether parent sessions over the term?



11 How easy or difficult was it to RECRUIT parents to the Talking 2gether sessions?



12 Were there any barriers which made it difficult to deliver Talking 2gether in your setting?

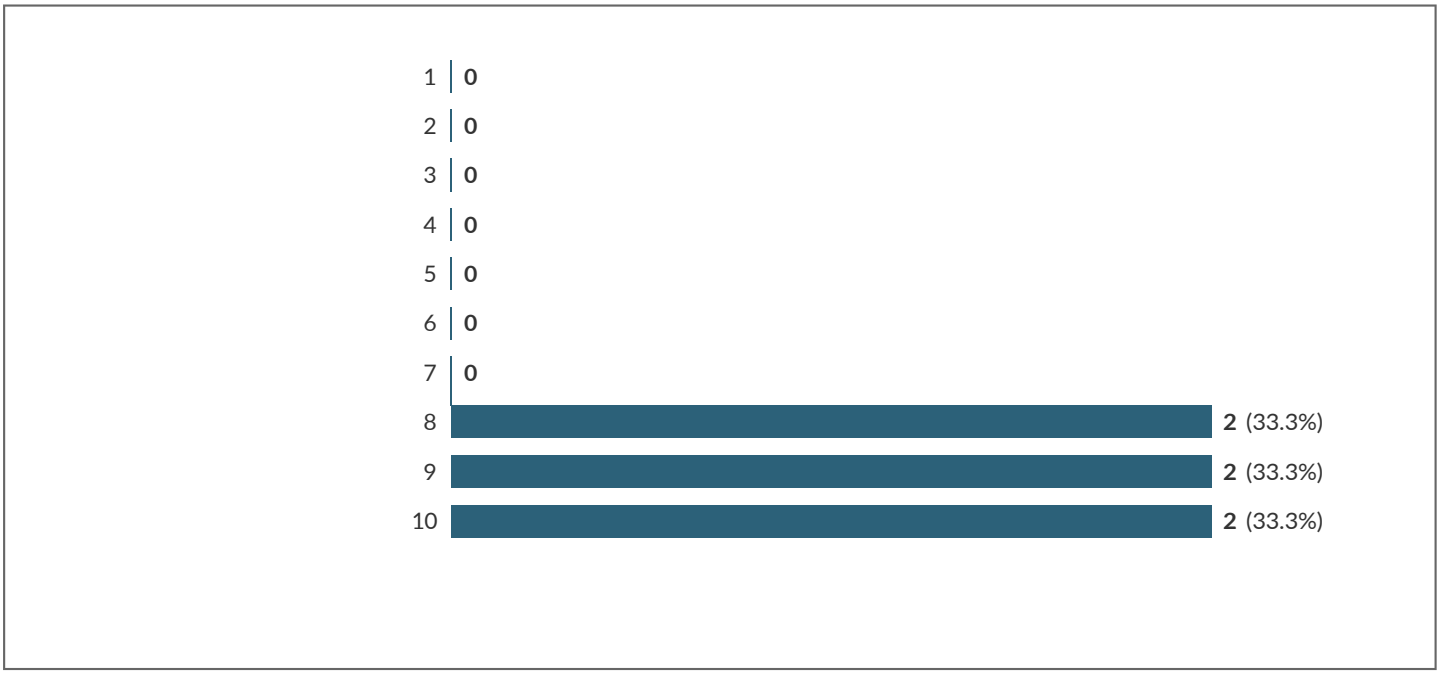


12.a If yes, please specify what these were:

Showing all 3 responses	
Being able to fit the sessions around working parents	1071097-1071079-112684484
Limited/No support from health team, time restraints also made it difficult	1071097-1071079-113242416
Lack of HV involvement	1071097-1071079-113249414

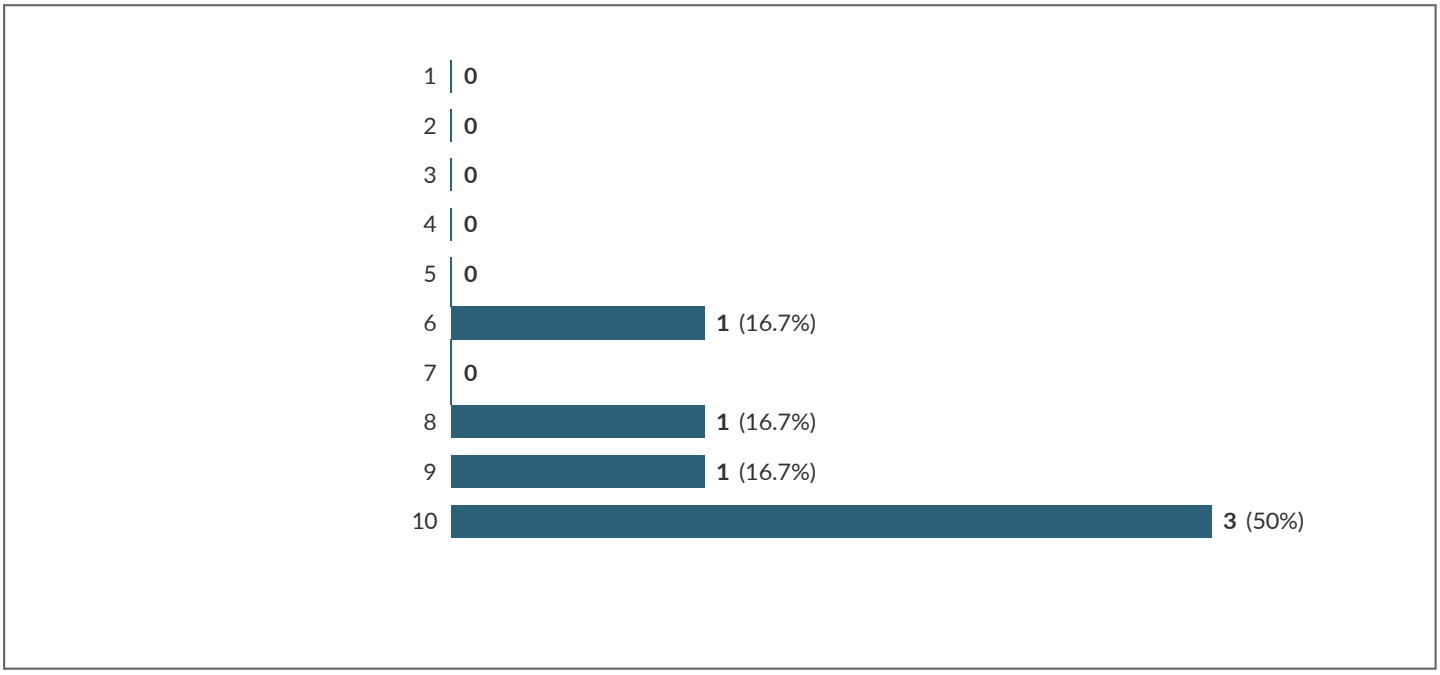
13 On a scale of 1-10 where 1 is 'not very' and 10 is 'very' how much have YOU enjoyed delivering the Talking 2gether sessions?

13.1 YOUR enjoyment



14 On a scale of 1-10 where 1 is 'not very' and 10 is 'very' how much do you think PARENTS enjoyed the Talking 2gether sessions?

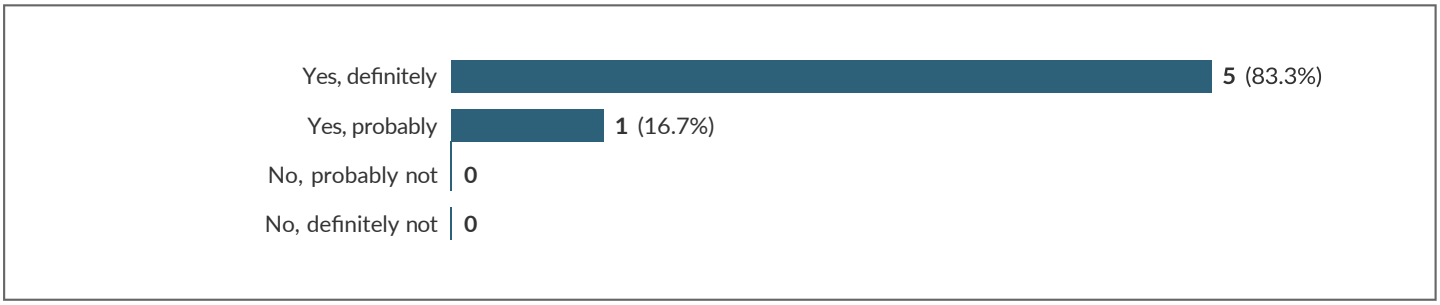
14.1 PARENTS enjoyment



15 Is there anything you think would help parents to enjoy or attend the sessions more?

Showing all 5 responses	
i felt that once i got the parents to engage they enjoyed it more. the initial session i felt that parents just wanted to talk about their own experiences which was fine, but if i do it again i would maybe have a get together to discuss their experiences before i started the sessions just to get that bit out of the way.	1071097-1071079-112672046
Being flexible each week in when we can deliver the program	1071097-1071079-112684484
No, parents all voiced their enjoyment of the sessions.	1071097-1071079-113242416
no	1071097-1071079-113249414
we provided free books at the end	1071097-1071079-113741196

16 Would you recommend this programme to other settings?

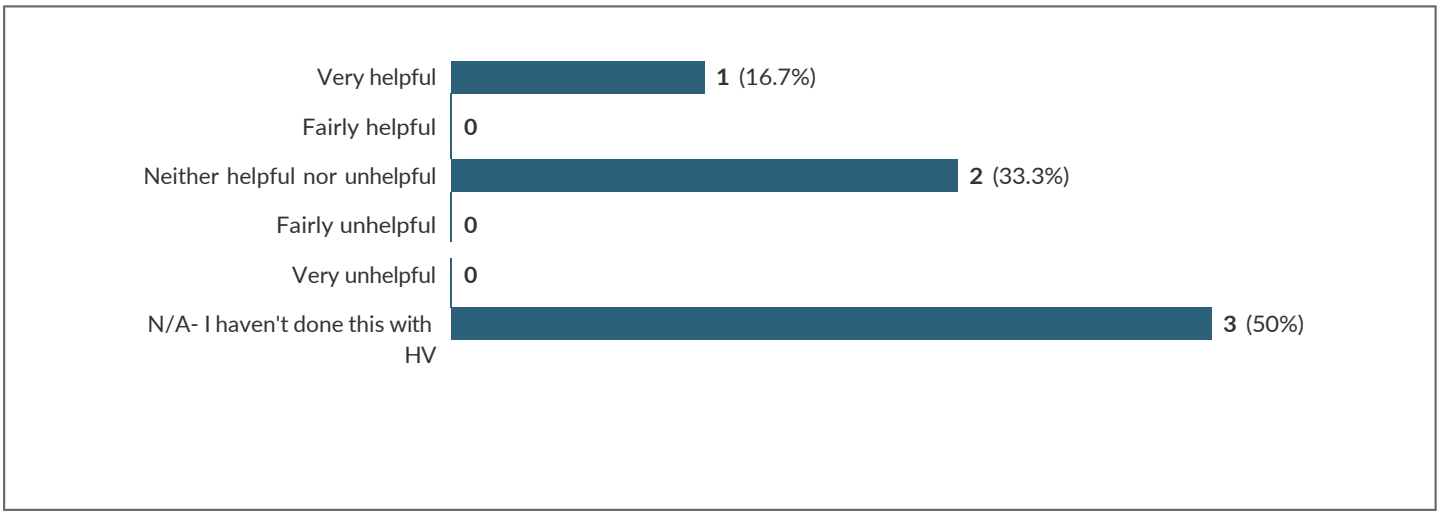


16.a Please tell us why you would or would not recommend Talking 2gether?

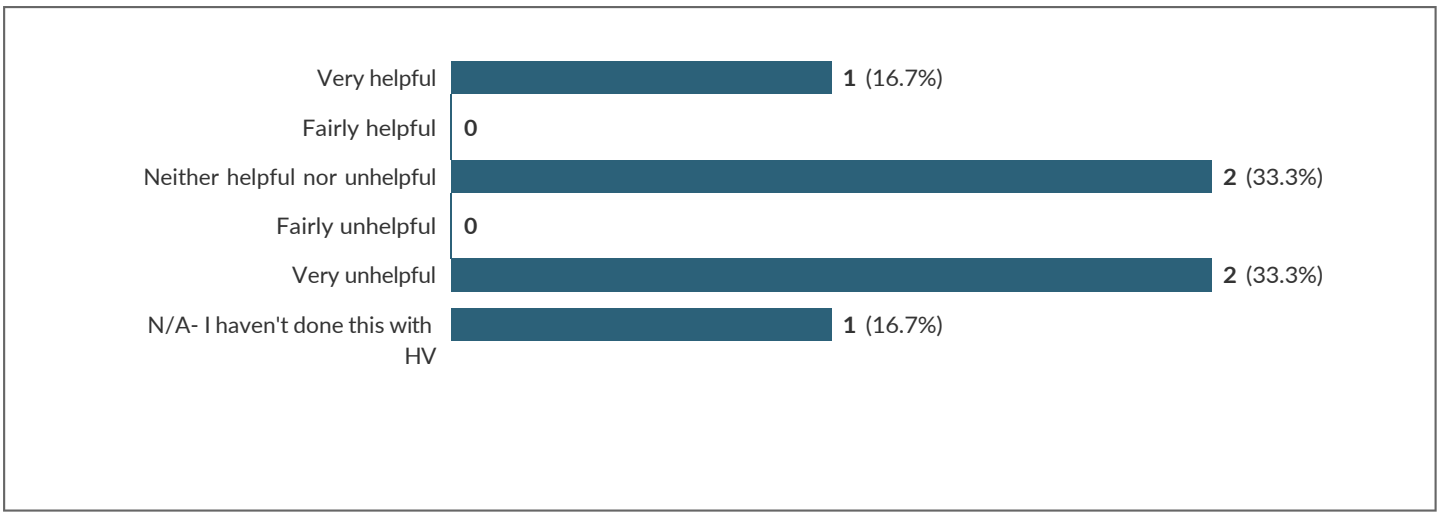
Showing all 5 responses	
i feel that the programme cn help parents to be able to communicate better with their children, maybe getting them away from devices - even for a few minutes a day	1071097-1071079-112672046
It is a very good parent partnership program that you can adapt to deliver to different groups of parents.	1071097-1071079-112684484
It has been lovely welcoming the parents into our setting and having that dedicated time to spend with them.	1071097-1071079-113030486
The programme has been easy to follow. Parents feedback has been excellent and weve also learnt new skills from taking part.	1071097-1071079-113242416
Very easy to follow and parents enjoyed the course with good feedback	1071097-1071079-113249414

17 How helpful did you find working with the Health Visiting team members attached to your setting to:

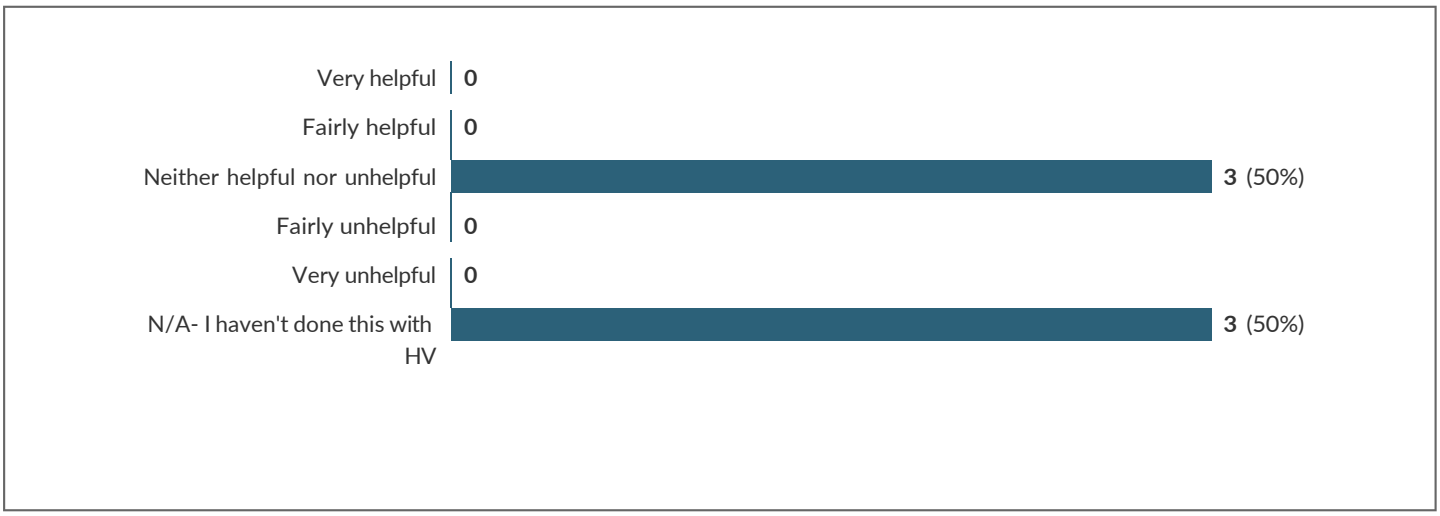
17.1 Identify families to take part in the sessions in the early years setting



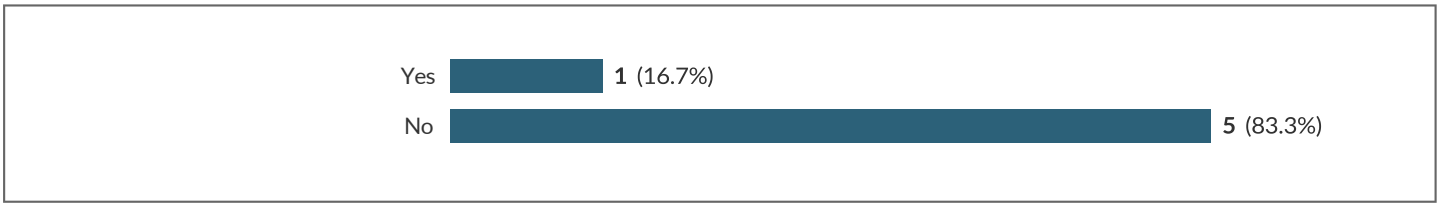
17.2 Identify families to receive the additional home sessions



17.3 Deliver the Talking 2gether programme

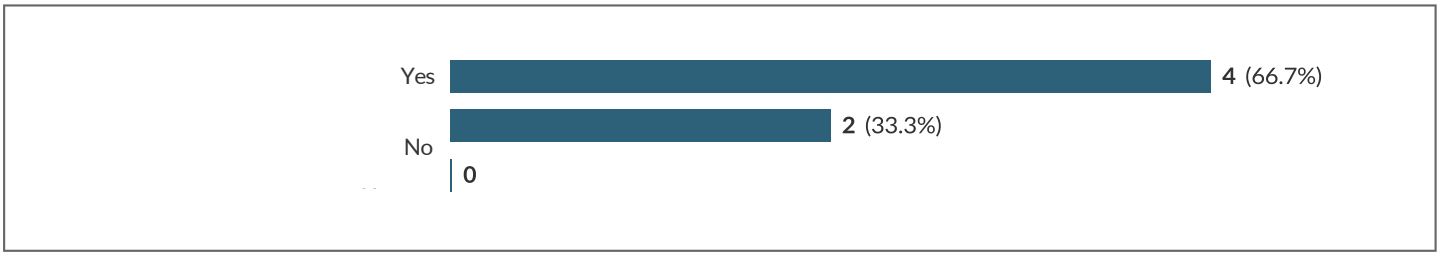


18 Have you had the opportunity yet to make any collaborative decisions with the Health Visiting team member(s) about ongoing support for families? (for example, ongoing support for the family receiving the additional home visits)



18.a If you selected 'yes', how helpful did you find working with the Health Visiting team member(s) to make these collaborative decisions about ongoing support?

19 Were there any barriers to working collaboratively with Health Visiting team members attached to your setting?



19.a If yes, please specify:

Showing all 4 responses	
Finding the time to get together with the health visiting team due to their busy work schedule.	1071097-1071079-112684484
I think time on both parts are a big barrier	1071097-1071079-113030486
It was a struggle to contact HV teams and to get them on board with the sessions. Parents had consented to extra support weeks before the health visitors contacted them	1071097-1071079-113242416
Very little involvement and contact	1071097-1071079-113249414

20 Is there anything you think would further support your collaborative work with Health Visiting team members in the future?

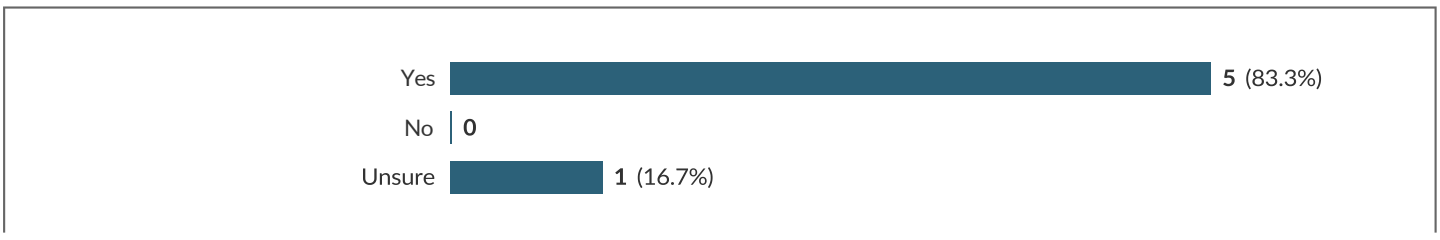
Showing all 6 responses	
maybe a joint meeting with the team after the 1st session should maybe be a an idea i would do	1071097-1071079-112672046
Not sure.	1071097-1071079-112684484
Better communication and maybe dedicated time for check ins on nurseries, allowing them the time to do this	1071097-1071079-113030486
Yes, it is essential that health visitors open communication to ensure barriers can be overcome.	1071097-1071079-113242416
better communication	1071097-1071079-113249414
being able to contact them more readily	1071097-1071079-113741196

21 Do you think Talking 2gether has changed the way YOU interact with children (i.e. increased responsive contingent interaction)?

21.a If yes, how?

Showing all 2 responses	
i feel that i am more conscious about getting down to child's level etc. Even though i think i do it anyway it has made me think more	1071097-1071079-112672046
It has made us more aware on how we interact and made us relfect more on our interactions	1071097-1071079-113030486

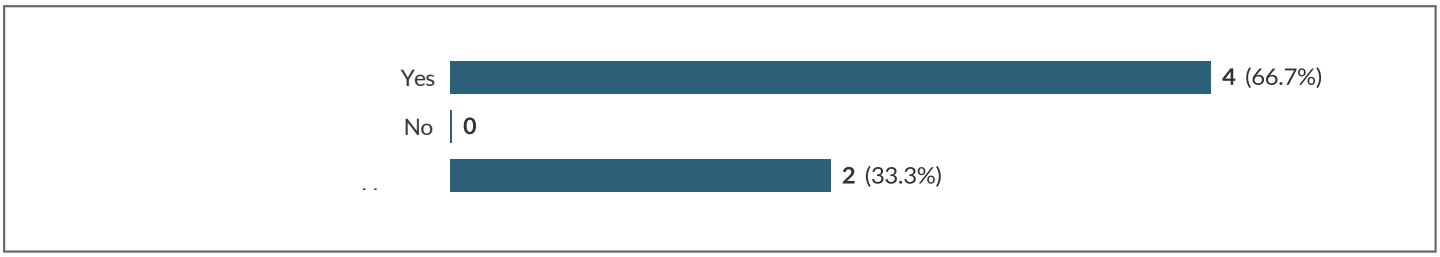
22 Do you think Talking 2gether has changed the way PARENTS' interact with their children (i.e. increased responsive contingent interaction)?



22.a If yes, how?

Showing all 6 responses	
although i answered unsure for this i would honestly like to think so	1071097-1071079-112672046
Parents understand why they need to get down to their level when interacting with them.	1071097-1071079-112684484
One parents told us they didn't realise how important it is to get down to their Childs level.	1071097-1071079-113030486
I feel parents will be more aware of the way they interact with their children and activities they can do to support.	1071097-1071079-113242416
They understand better ways of communicating with their children	1071097-1071079-113249414
they are more aware of their interactions and what impact the positive interaction have had on theior language develpment	1071097-1071079-113741196

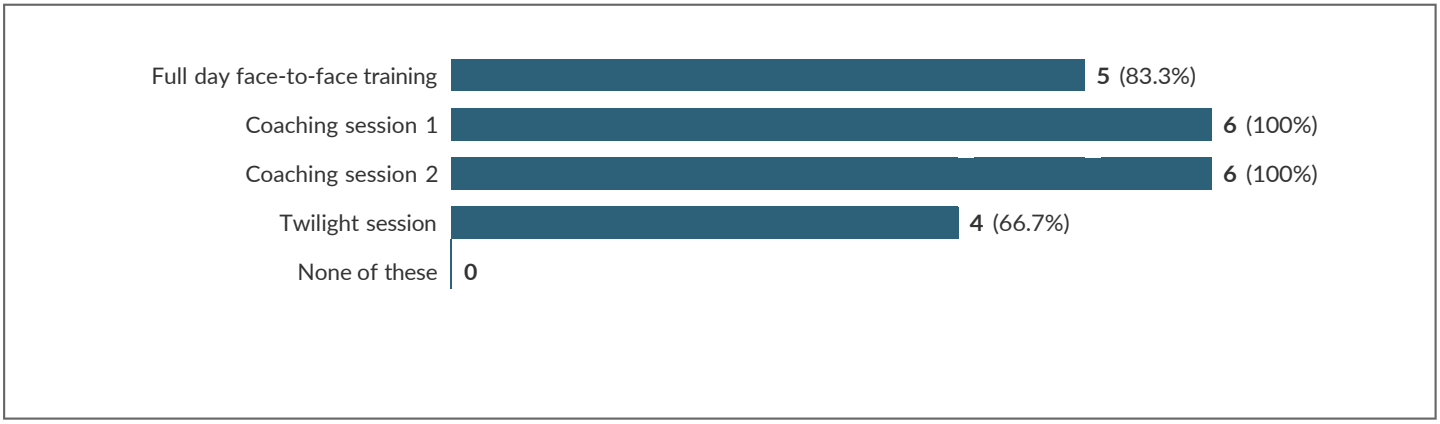
23 Do you think Talking 2gether has had a positive impact on CHILDREN'S language development?



23.a If yes, how?

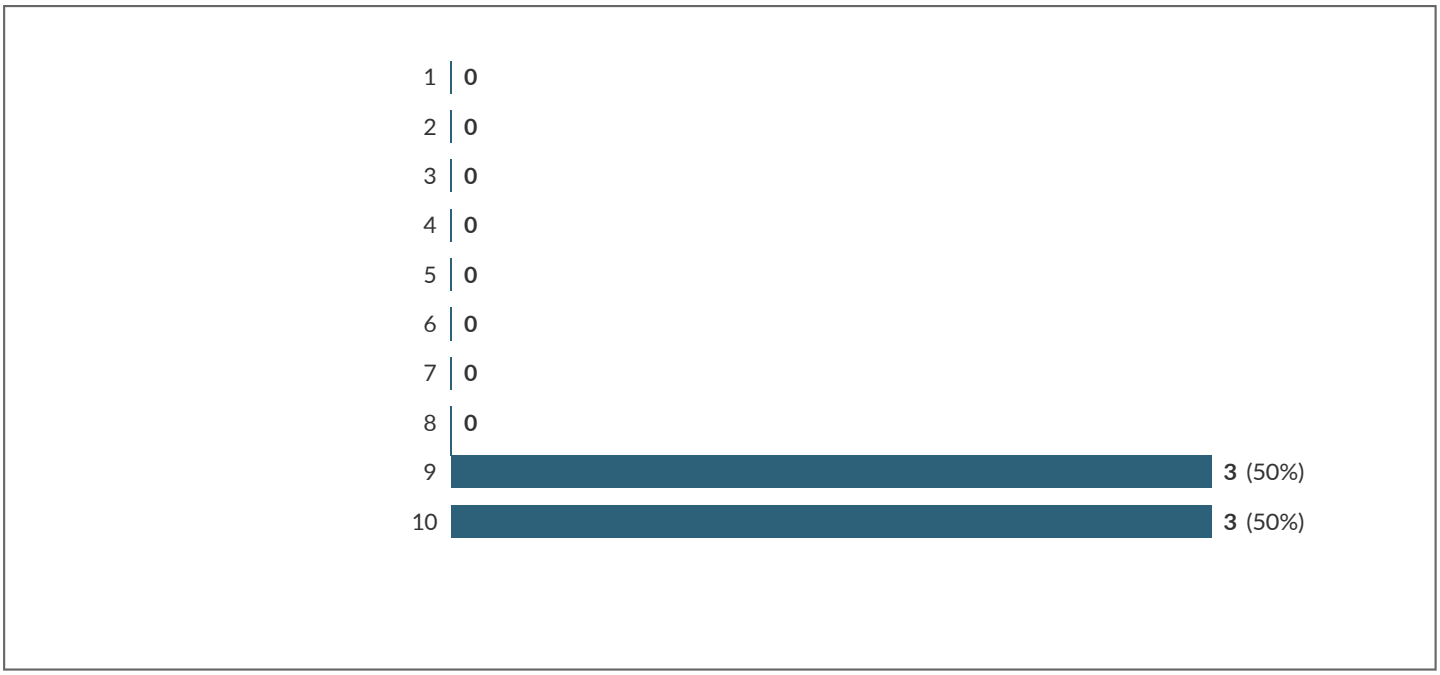
Showing all 4 responses	
We have seen some really good progress in the children that have joined in the project	1071097-1071079-113030486
This can break down the way in which children communicate and learn.	1071097-1071079-113242416
breaks down commination methods into smaller concepts	1071097-1071079-113249414
parents have follwed tips and these seem to be working	1071097-1071079-113741196

24 Please indicate which training sessions you attended (select all that apply):

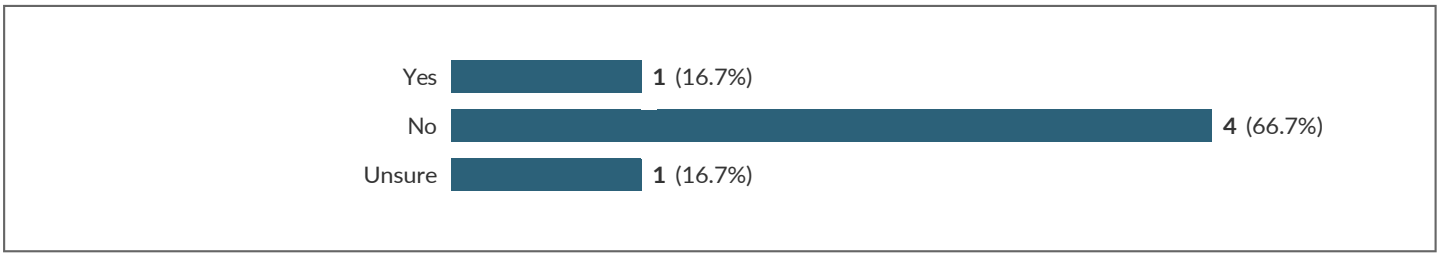


25 On a scale of 1-10 where 1 is 'not very' and 10 is 'very' how much did you enjoy the Talking 2gether training sessions?

25.1 Your enjoyment of the training



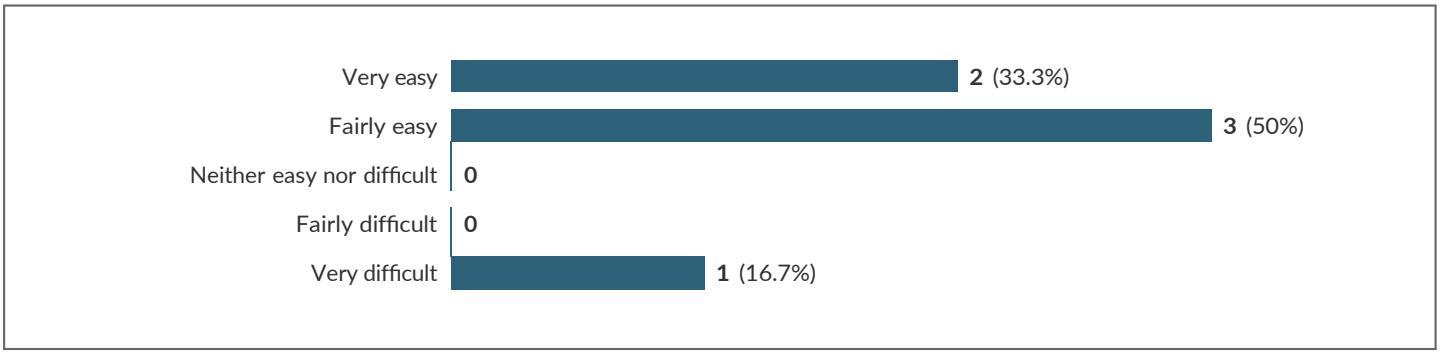
26 Were there any sessions you didn't enjoy, or enjoyed less than others?



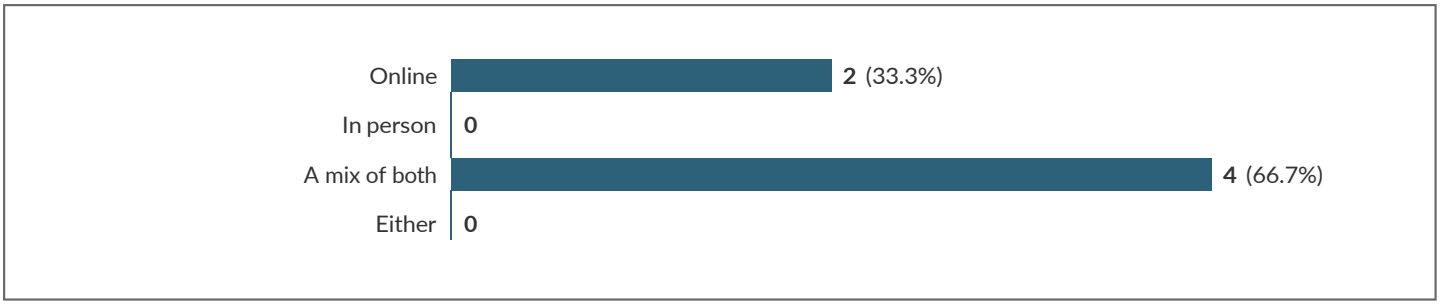
26.a If yes, please specify why:

Showing 1 response	
the peer coaching was very useful	1071097-1071079-113741196

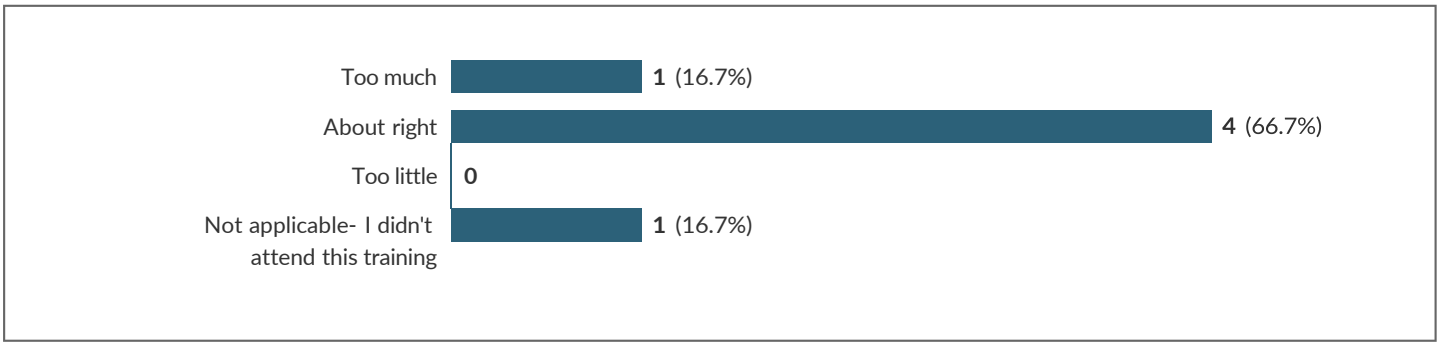
27 How easy or difficult did you find fitting in the Talking 2gether training sessions?



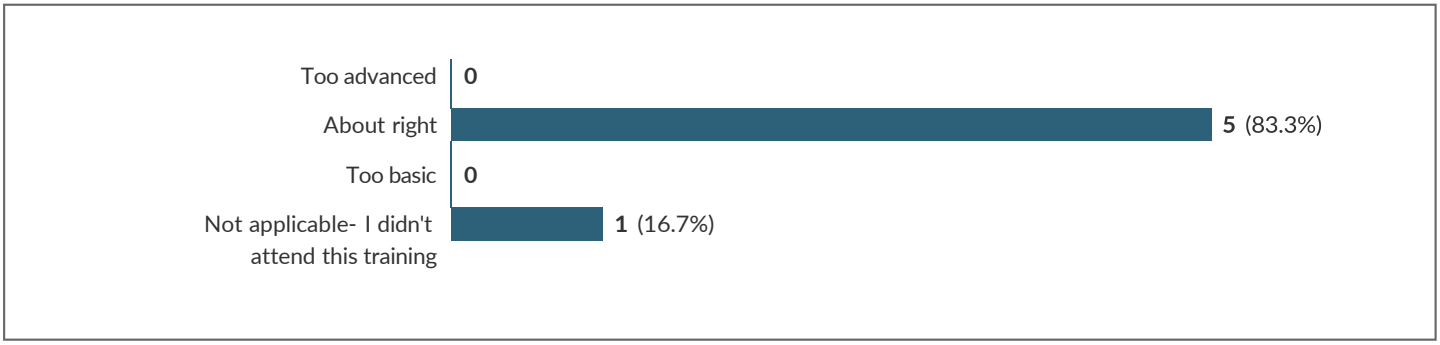
28 Do you prefer to receive training online or in-person or a mix of both?



29 Thinking back to the ONE-DAY TRAINING you received at the start of the programme, how do you feel about the amount of content that was covered?



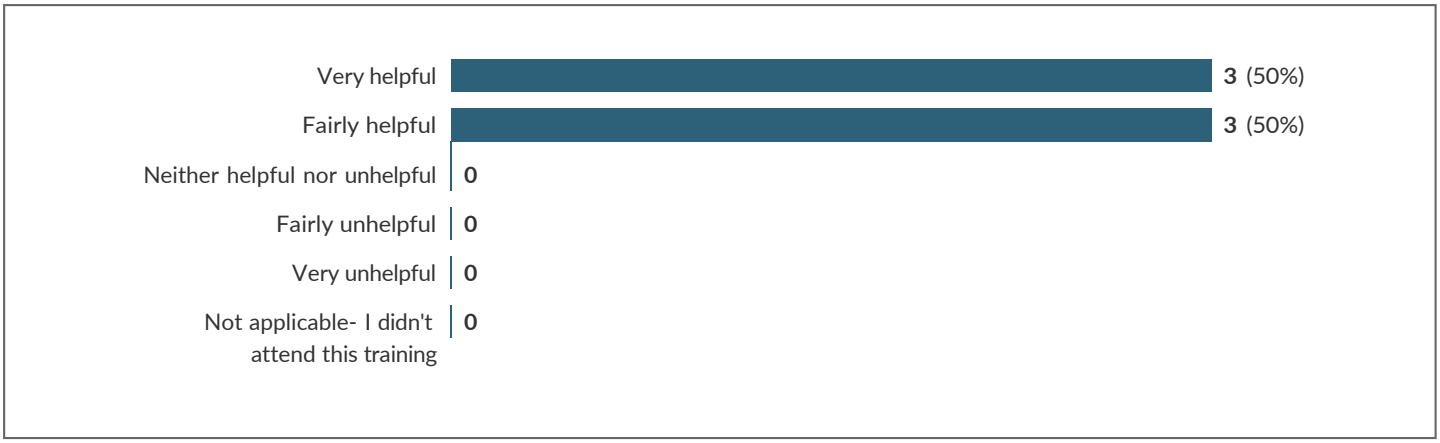
30 How do you feel about the level that the one-day training was pitched at?



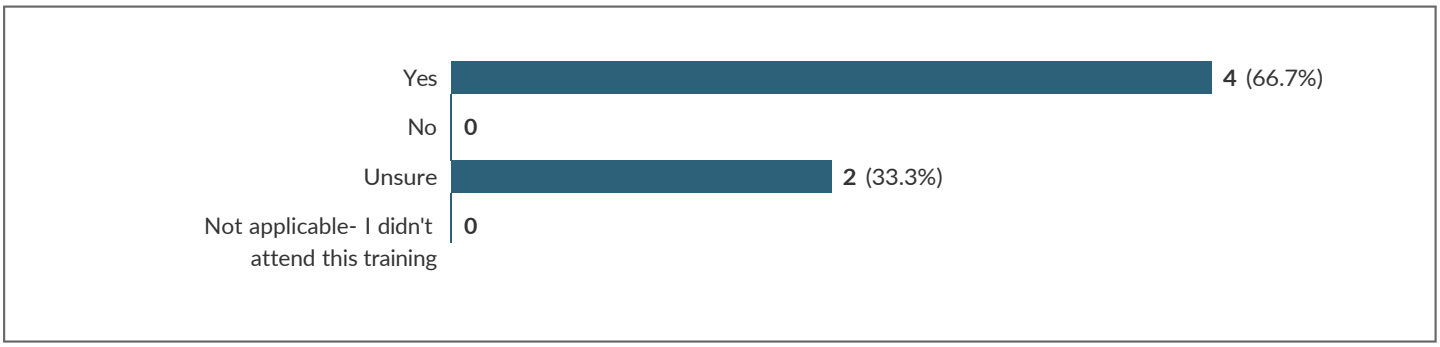
31 What were your key take-away messages from the one-day training?

Showing all 5 responses	
How we can show parents the benefits of positive interactions.	1071097-1071079-112684484
Reinforced our knowledge, how the project was going to work	1071097-1071079-113030486
Lots of ideas on how to support parents on how to interact better with their children	1071097-1071079-113242416
New concepts for parents to communicate with children.	1071097-1071079-113249414
thew videos and the health visitor relationship /(meeting up on the day)	1071097-1071079-113741196

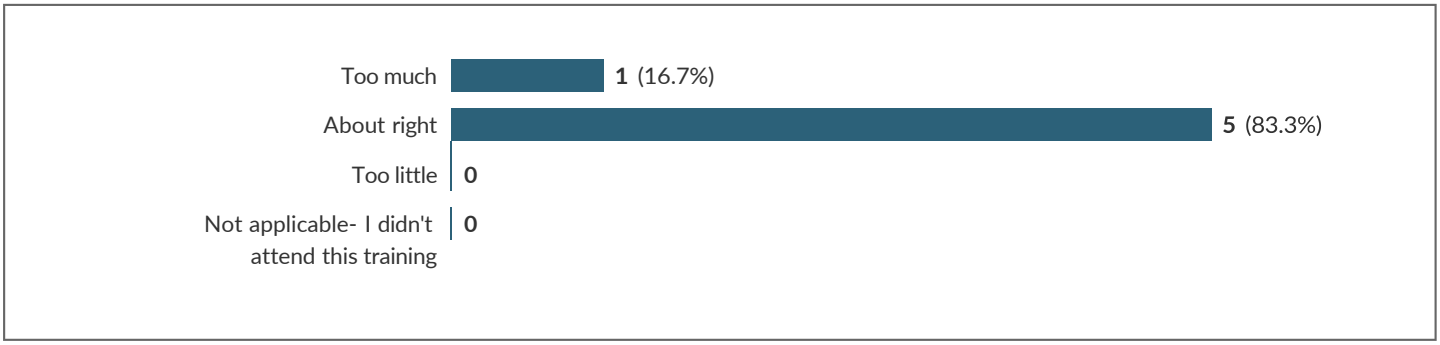
32 How helpful did you find the PEER COACHING sessions and process for supporting responsive contingent interaction in the setting? (Tick one option)



33 Would you use peer coaching in the future with the staff in your setting outside of the programme?



34 Thinking back to the TWILIGHT session, how do you feel about the amount of content that was covered?

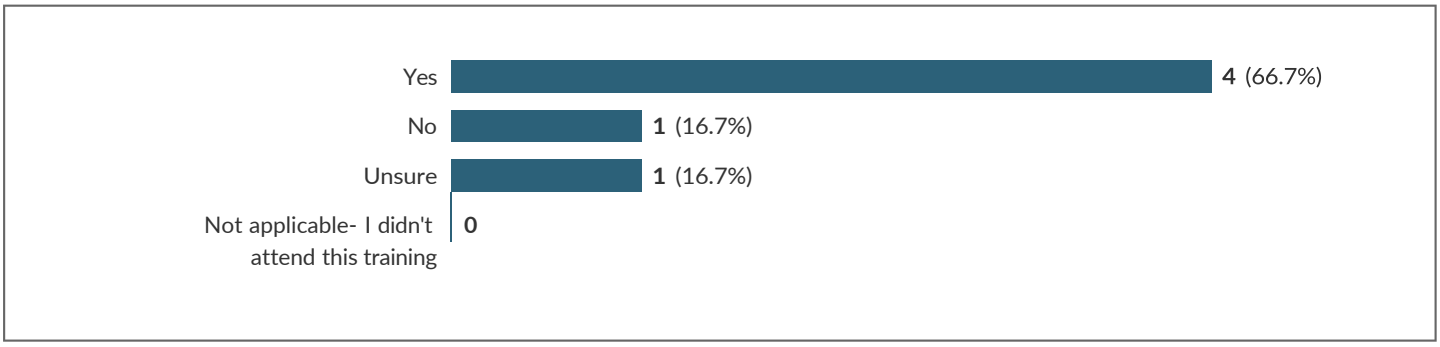


35 How do you feel about the level that the twilight session was pitched at?

36 What were your key take-away messages from the twilight session?

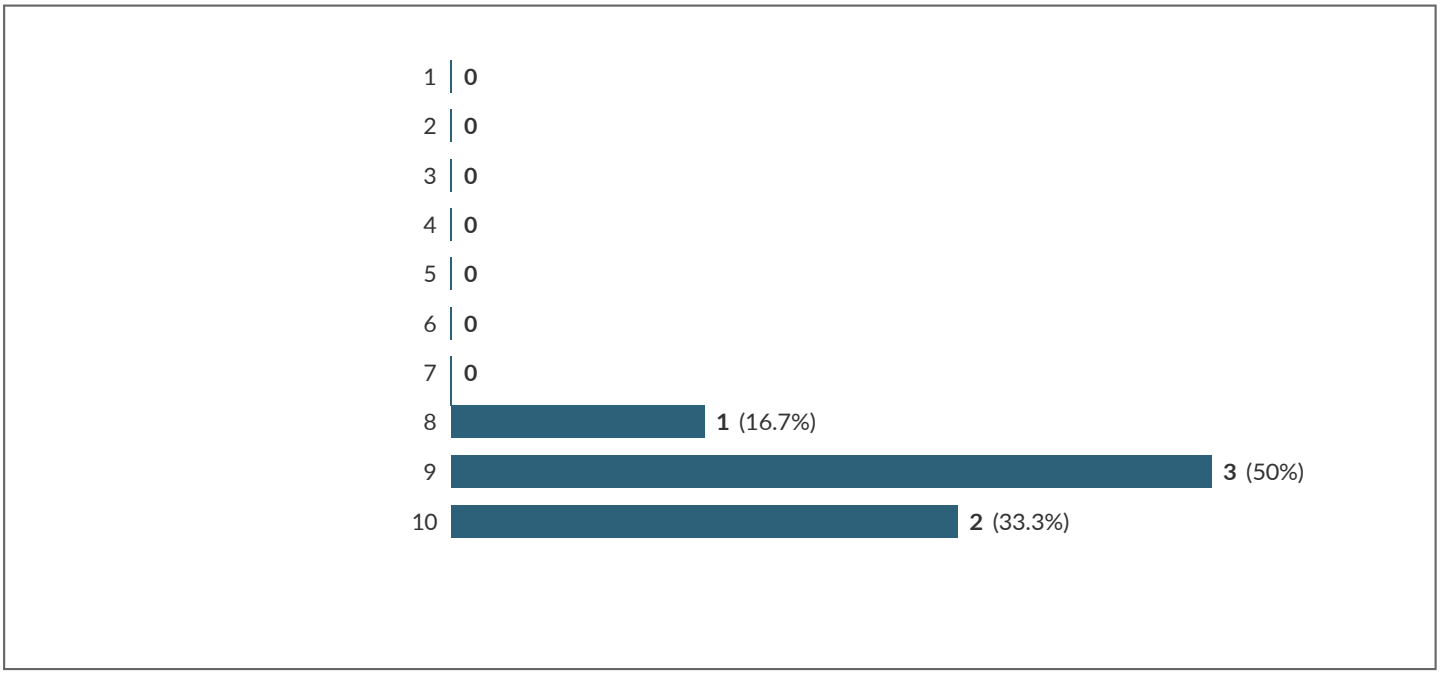
Showing all 4 responses	
it reinforced the content of the course. it embedded the philosophy behind the idea which i found very helpful	1071097-1071079-112672046
How the session were going to look	1071097-1071079-113030486
Lots of support with delivery of the session.	1071097-1071079-113242416
it repeated quite a bit from the full day session and previous info on emails	1071097-1071079-113741196

37 Thinking back to the MID-POINT TROUBLE SHOOTING session, did you find this session helpful in addressing any questions or challenges you had?

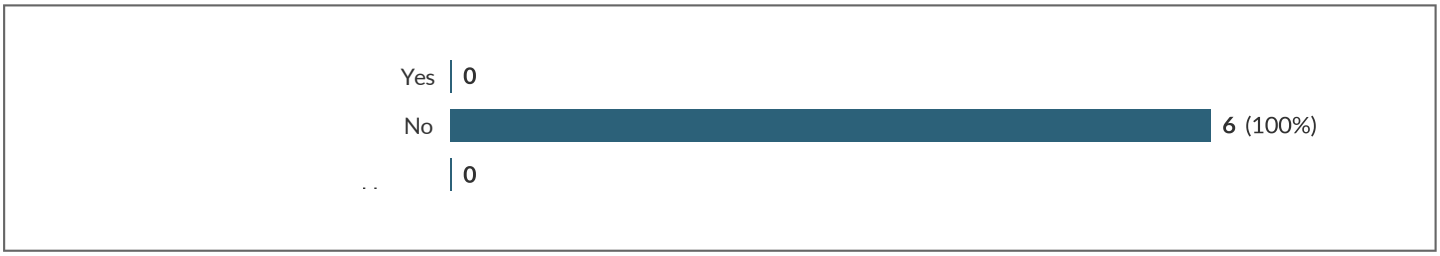


38 On a scale of 1-10 where 1 is 'not very' and 10 is 'very' how comfortable did you feel providing feedback in the mid-point session about your Talking 2gether sessions?

38.1 Providing feedback in the mid-point session



39 Was there anything not covered in the training that you would have liked to be included?



39.a If yes, please specify:

No responses

40 Which of the following programme materials did you refer to during the delivery of the programme?

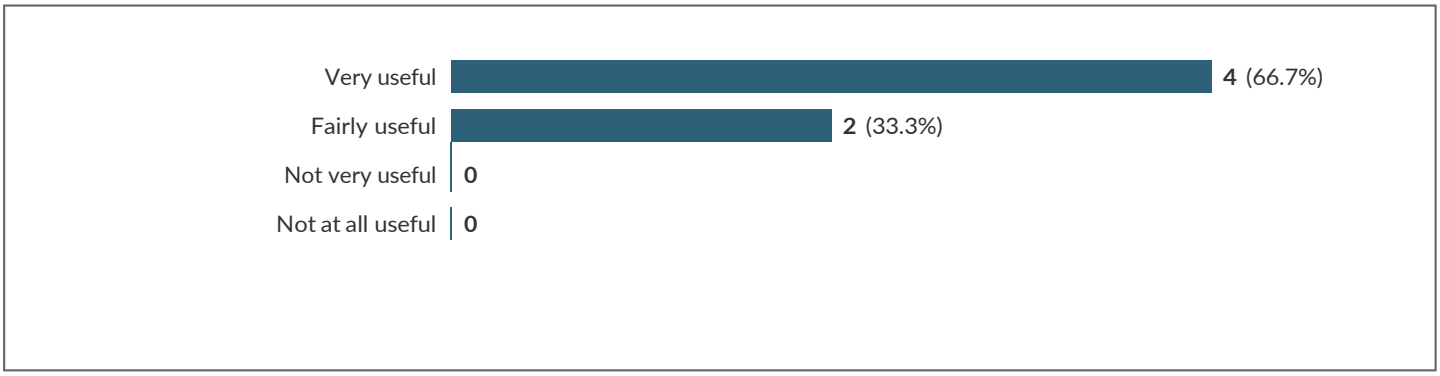
Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

41 How useful would you rate each of the following programme materials?

41.1 Talking 2gether manual

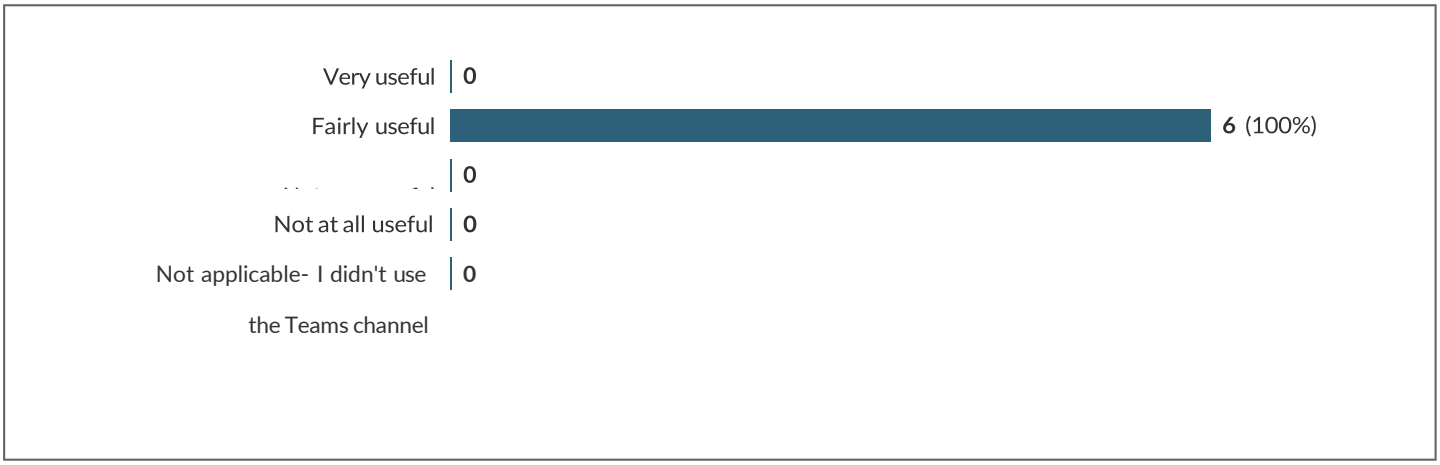
41.2 Training day handouts

41.3 Parent leaflets



42 How useful did you find the Microsoft Teams channel we set up?

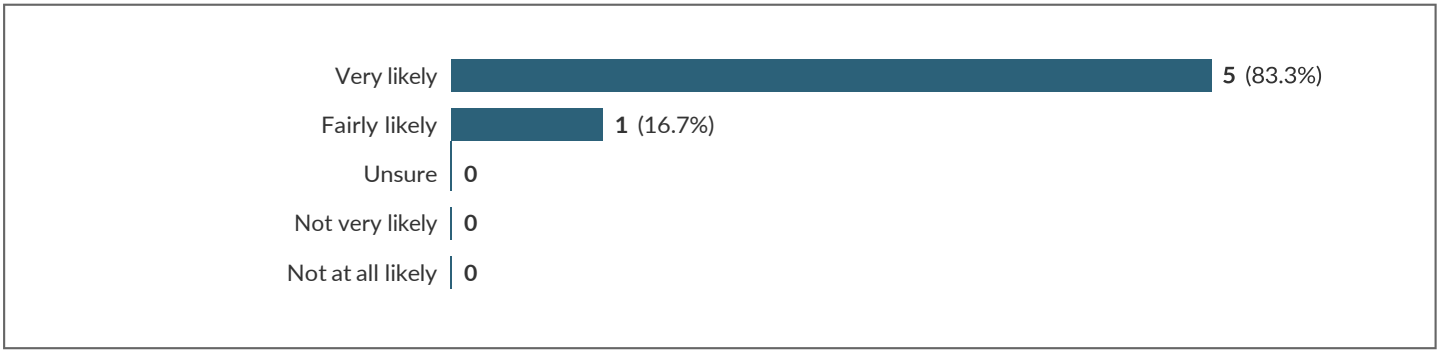
42.1 Talking 2gether Teams channel



43 Are there any other materials we should consider providing in future?

Showing all 4 responses	
no i feel that it was a very comprehensive package	1071097-1071079-112672046
None that I can think of.	1071097-1071079-112684484
no	1071097-1071079-113242416
no	1071097-1071079-113249414

44 How likely are you to continue using the Talking 2gether intervention if the resources were made available to you?



45 What support would you need to feel able to provide the Talking 2gether intervention in the future?

Showing all 6 responses	
i feel the support has been amazing at every step of the way	1071097-1071079-112672046
None	1071097-1071079-112684484
funding to be able to allow the staff the time to do it	1071097-1071079-113030486
Refresher days	1071097-1071079-113242416
refresher training	1071097-1071079-113249414
none	1071097-1071079-113741196

46 What would you change about the Talking 2gether programme?

Showing all 6 responses	
at the moment i cant think of anything i would like to change. it has been very smooth following week to week	1071097-1071079-112672046
Not using the PowerPoints as I felt they were too formal for parents to sit through when you could talk about everything during the session.	1071097-1071079-112684484
lasted longer	1071097-1071079-113030486
Nothing	1071097-1071079-113242416
nothing	1071097-1071079-113249414
the vidoes should have a voice over to support those parents who are unable to read	1071097-1071079-113741196

47 Do you have any other comments about any aspect of Talking 2gether?

Showing all 3 responses	
no	1071097-1071079-112672046
The program can be adapted to suit each setting.	1071097-1071079-112684484
no	1071097-1071079-113741196

48 Finally, we would like to chat further about your experience of Talking 2gether, if you are happy to talk to us about your experiences, please provide your email address below. Your email will be removed from your survey responses before survey data is analysed.

Showing all 4 responses	
	1071097-1071079-112684484
	1071097-1071079-113242416
	1071097-1071079-113249414

Talking 2gether Feedback Survey- Health Visiting Team

Showing 3 of 3 responses

Showing **all** responses

Showing **all** questions

1 Your name:

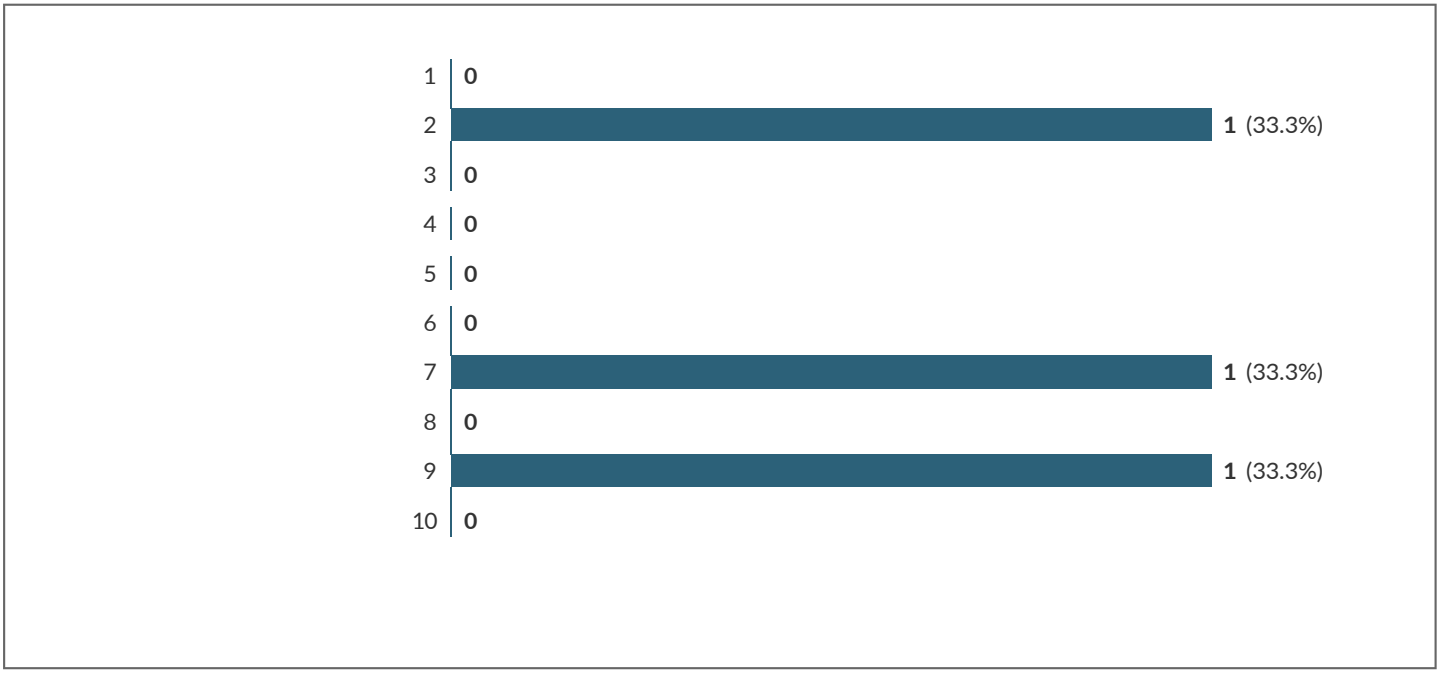
Showing all 3 responses	
Setting 2	1071104-1071086-112723639
Setting 3	1071104-1071086-113459121
Setting 1	1071104-1071086-113559947

2 The Early Years setting you are working with:

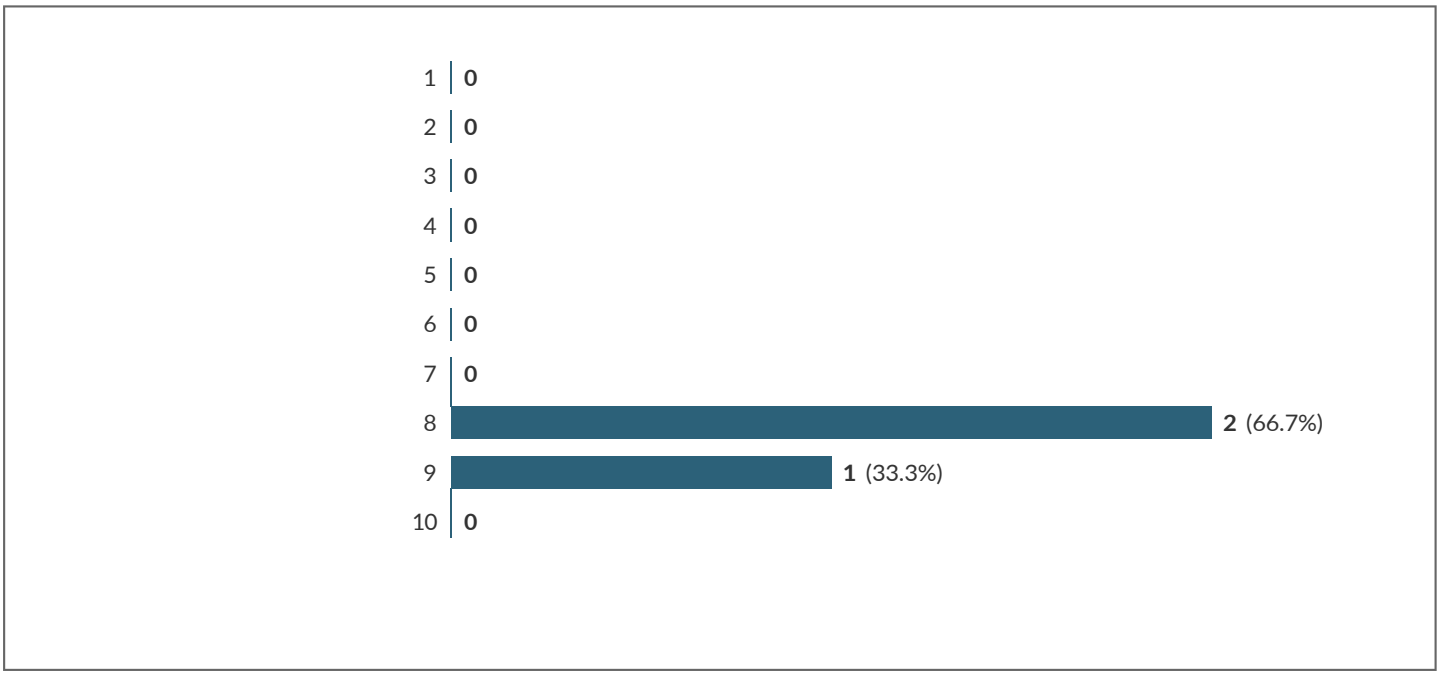
Showing all 3 responses	
Setting 2	1071104-1071086-112723639
Setting 3	071104-1071086-113459121
Setting 1	1071104-1071086-113559947

3 How knowledgeable did you feel about responsive contingent interaction? (1 is 'not at all' and 10 is 'extremely')

3.1 Before Talking 2gether

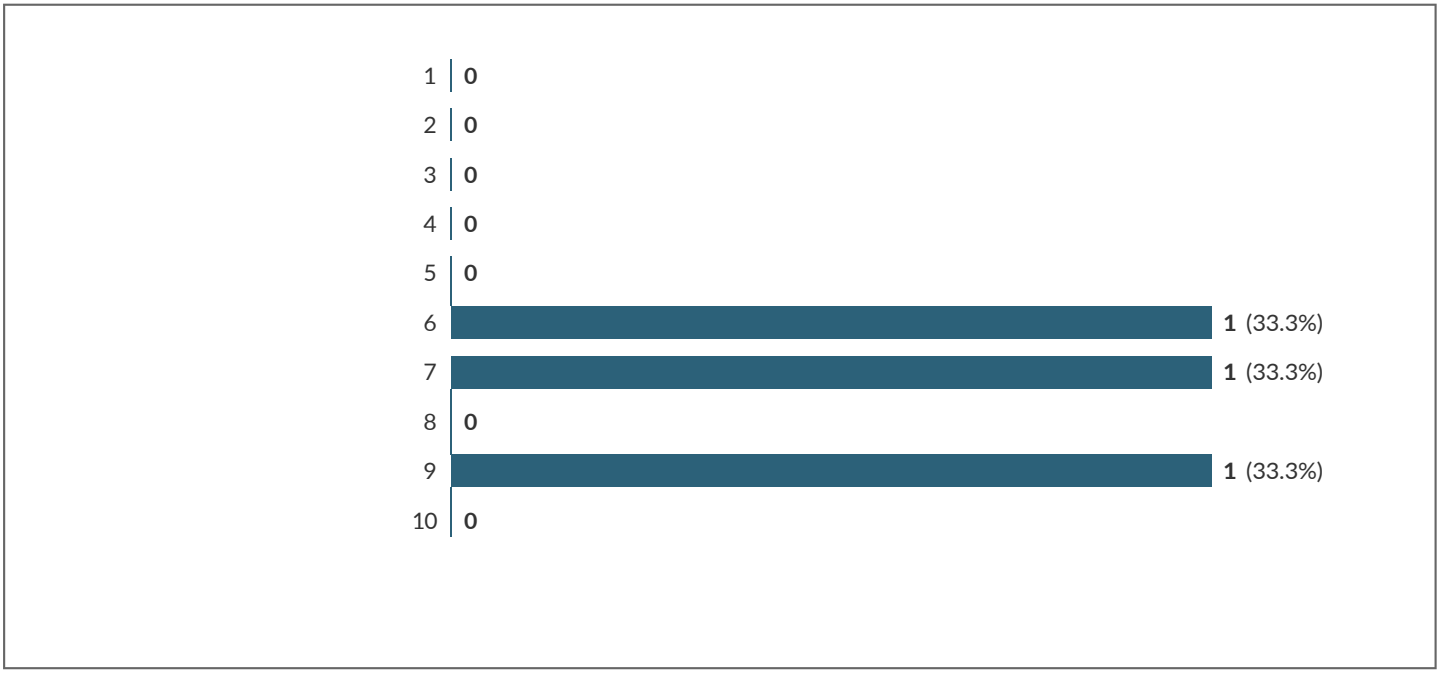


3.2 After Talking 2gether

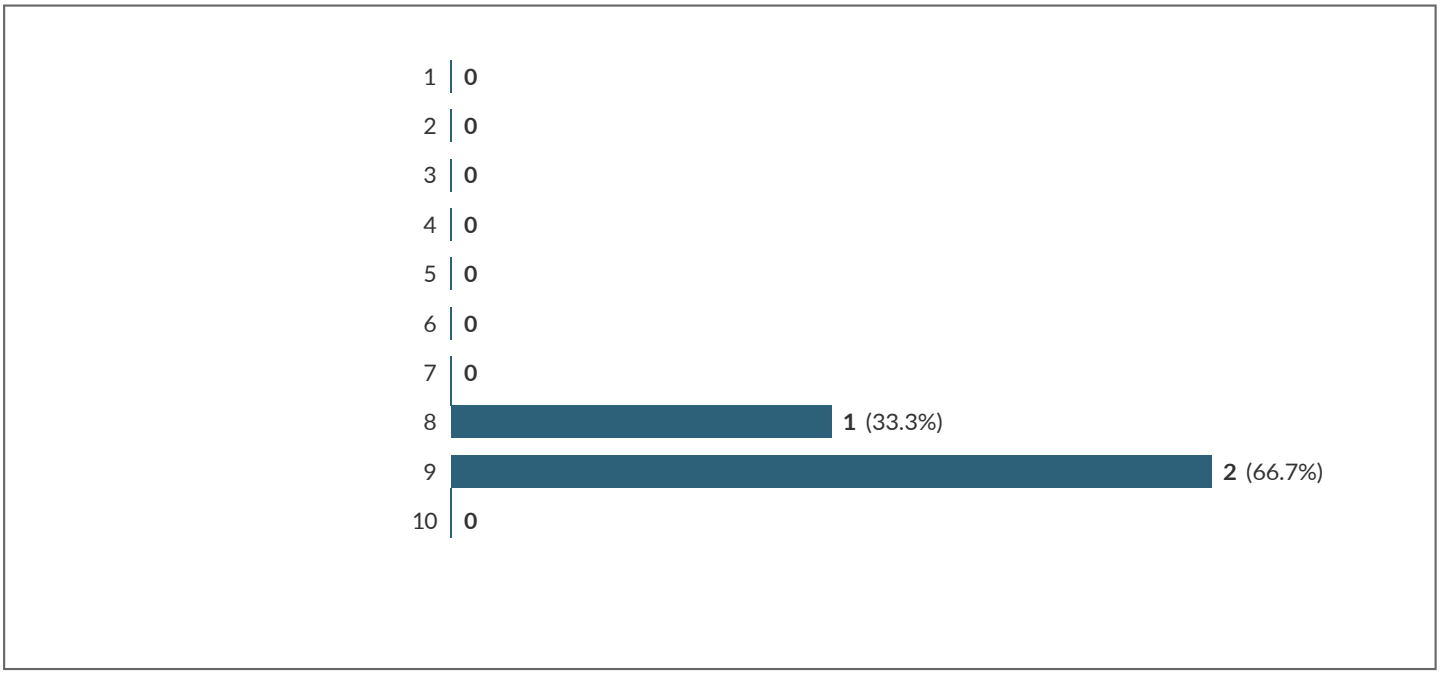


4 How confident did you feel about supporting CHILDREN with their language and communication development? (1 is 'not at all' and 10 is 'extremely')

4.1 Before Talking 2gether

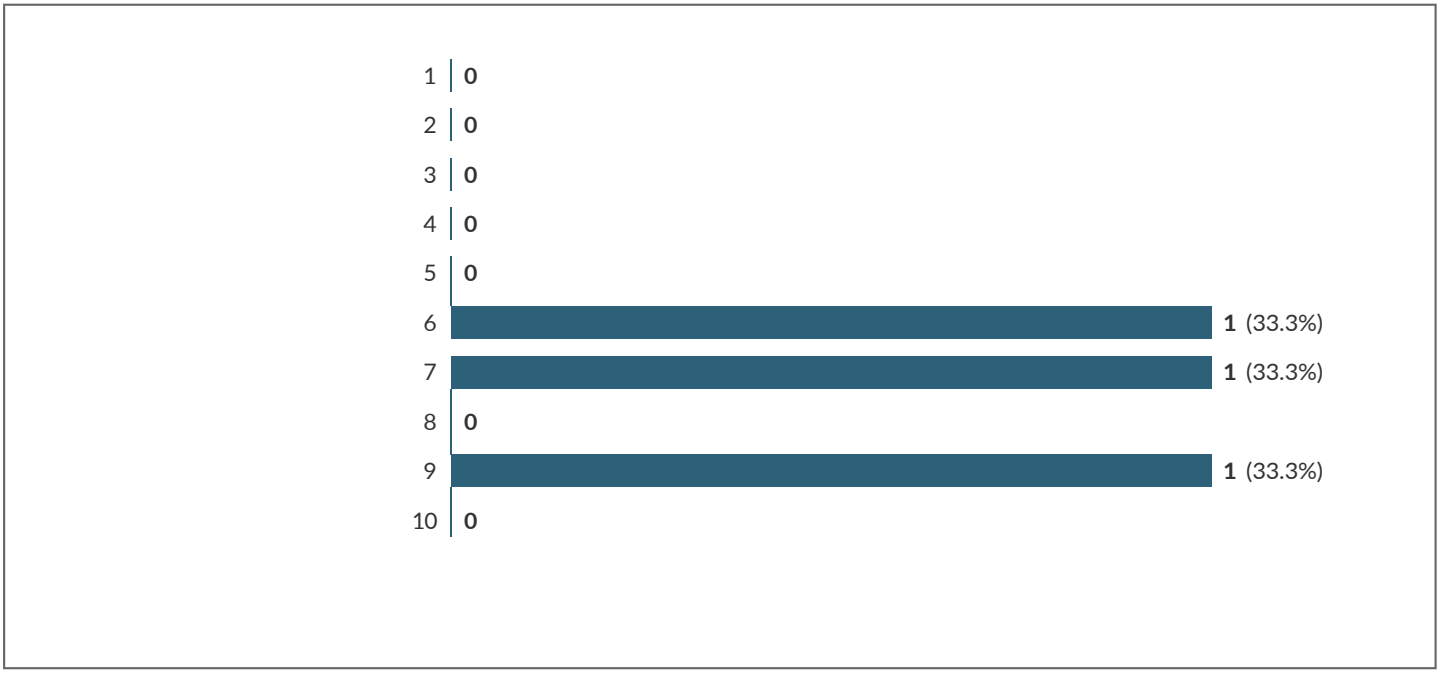


4.2 After Talking 2gether

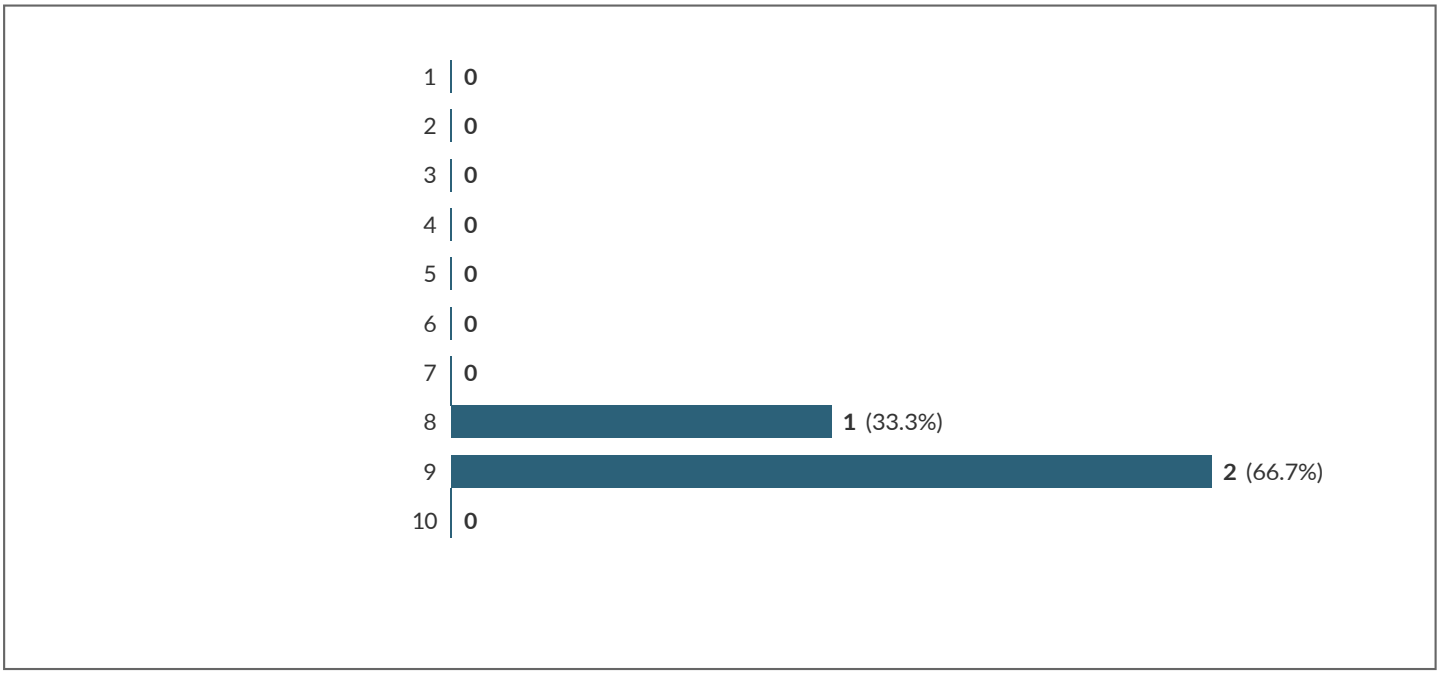


5 How confident did you feel about supporting FAMILIES with their child's language and communication development? (1 is 'not at all' and 10 is 'extremely')

5.1 Before Talking 2gether

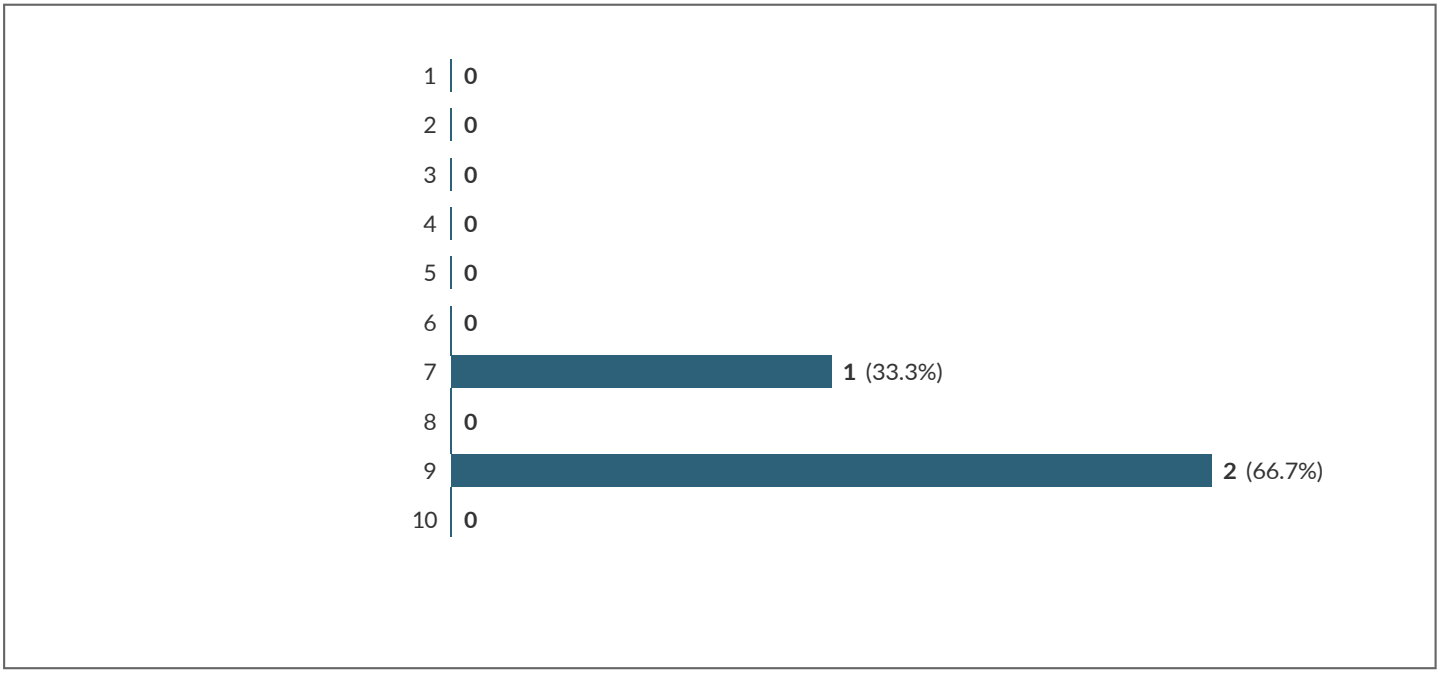


5.2 After Talking 2gether

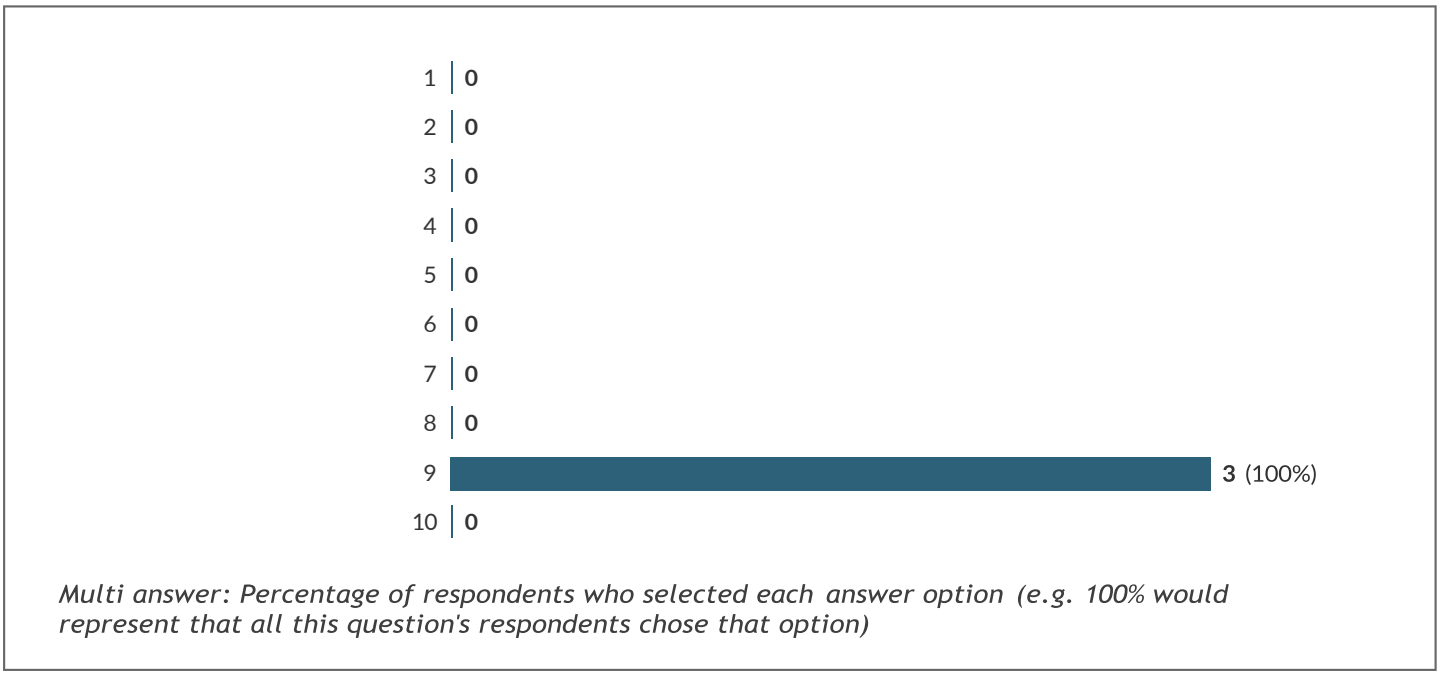


6 How confident did you feel about delivering the Talking 2gether parent sessions? (1 is 'not at all' and 10 is 'extremely')

6.1 Before Talking 2gether



6.2 After Talking 2gether

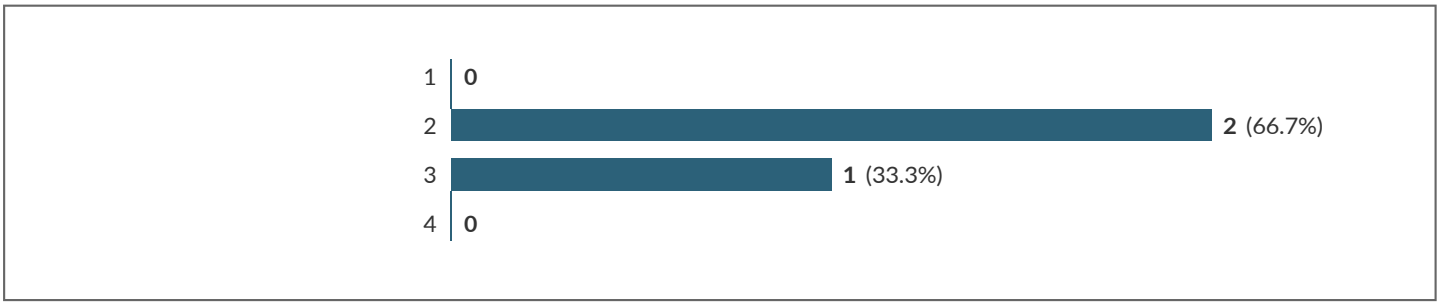


Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

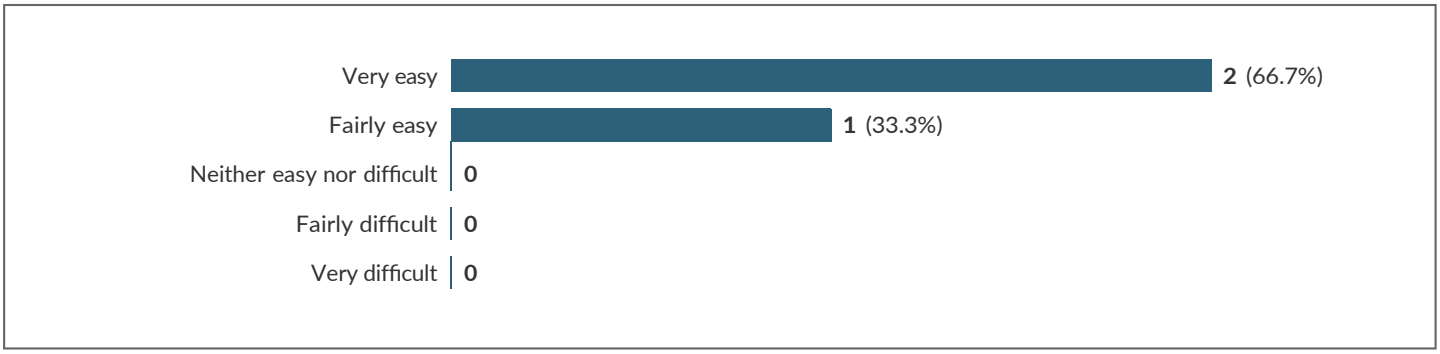
7 Is there anything that Talking 2Gether has not provided that would help you to feel more confident supporting families and/or children with language and communication development?

Showing all 2 responses	
No	1071104-1071086-113459121
Nothing	1071104-1071086-113559947

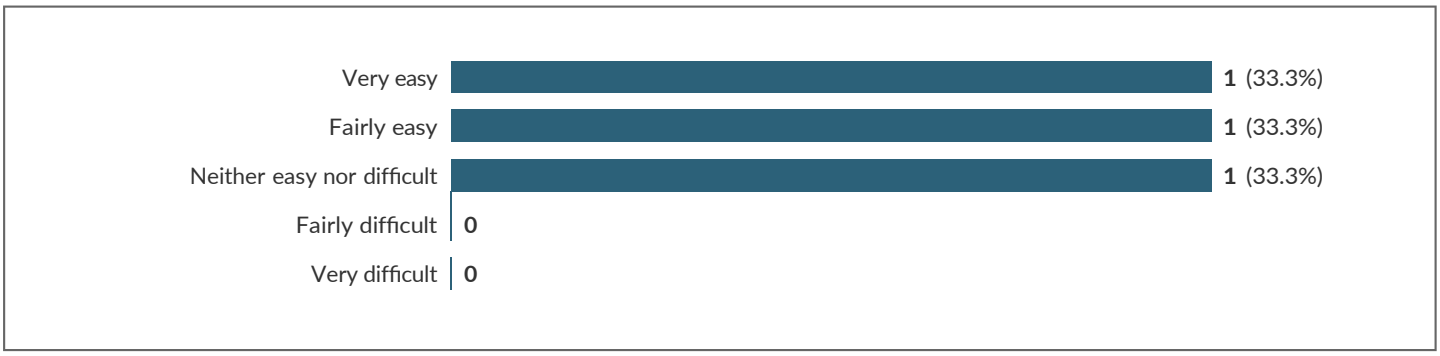
8 At the time of completing this survey, how many of the 4 parent home sessions have you delivered?



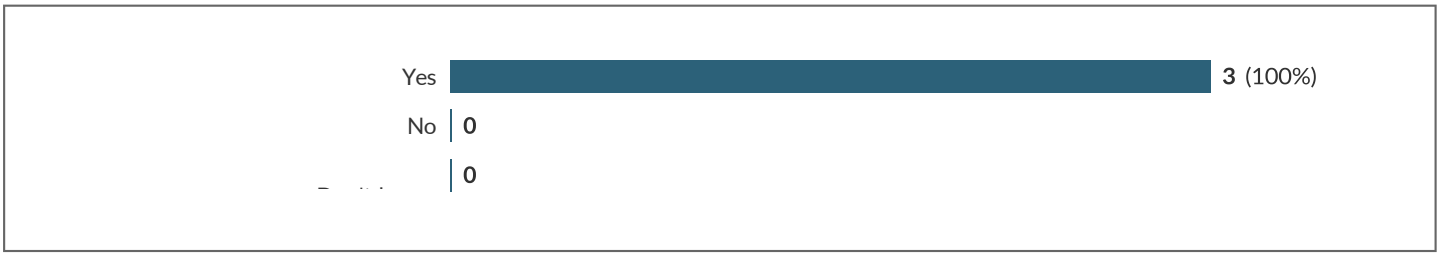
9 How easy or difficult was it to PREPARE for the Talking 2gether home sessions with parents?



10 How easy or difficult have you found it to FIT IN DELIVERY of the x4 Talking 2gether home sessions over the term?



11 Were there any barriers which made it difficult to deliver the Talking 2gether home sessions?

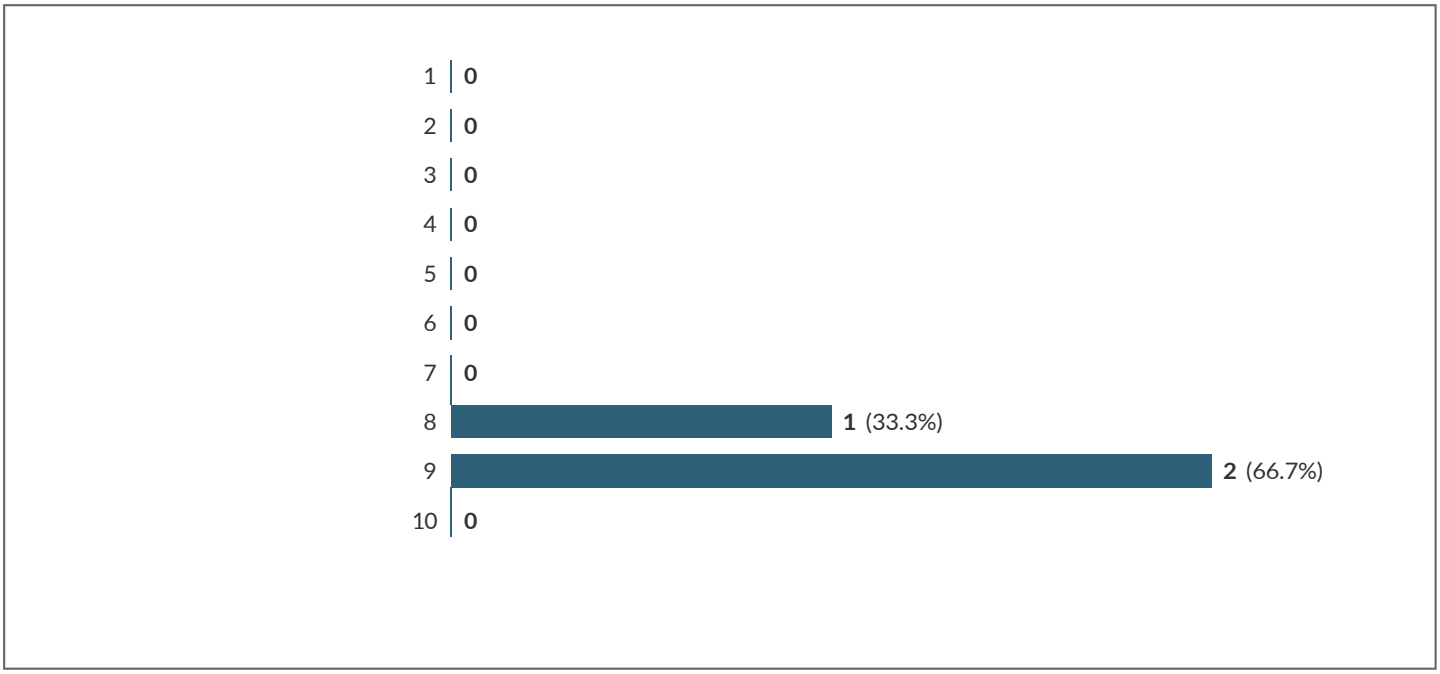


11.a If yes, please specify what these were:

Showing all 3 responses	
Nursery had started sessions late due to staff sickness, so had joined some of their sessions together, which has now left me on catch up with 2 home sessions to deliver once the nursery sessions are finished.	1071104-1071086-112723639
Delay in Nursery identifying child to work with	1071104-1071086-113459121
Parent's working pattern	1071104-1071086-113559947

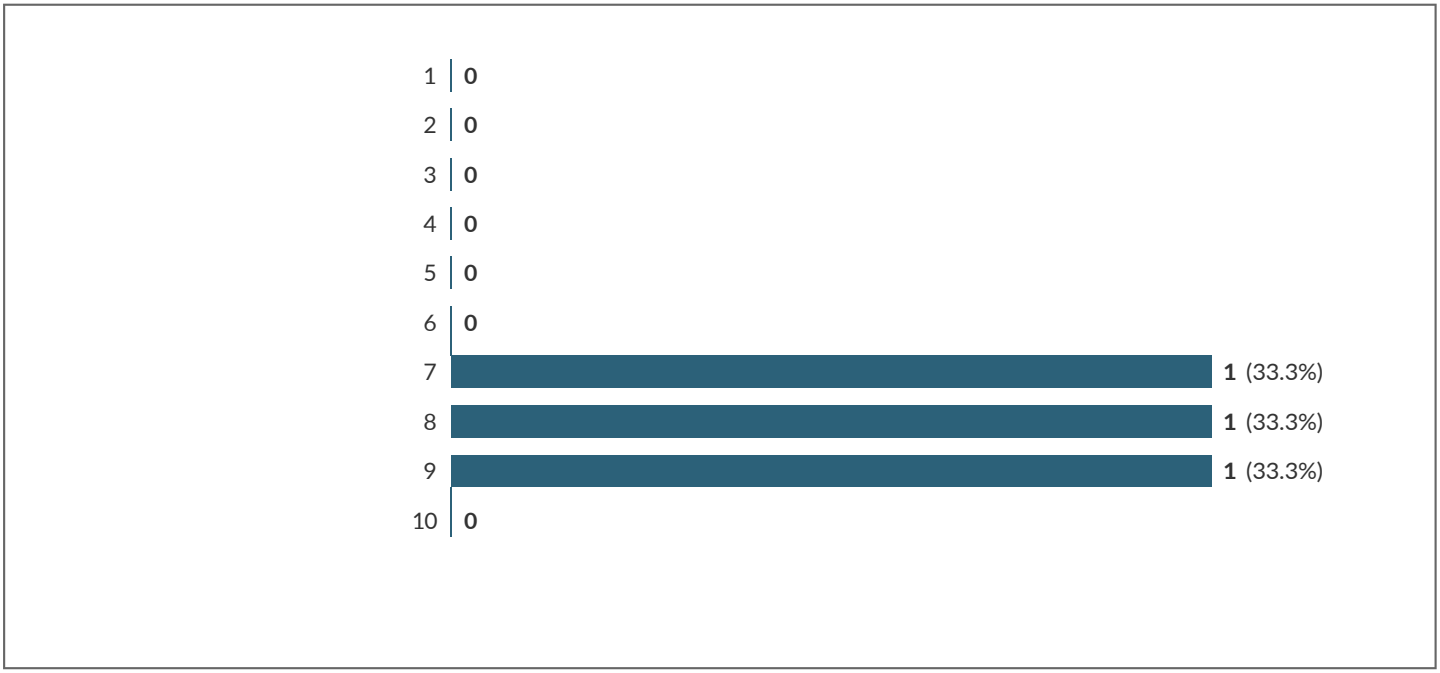
12 On a scale of 1-10 where 1 is 'not very' and 10 is 'very' how much have YOU enjoyed delivering the Talking 2gether home sessions?

12.1 YOUR enjoyment



13 On a scale of 1-10 where 1 is 'not very' and 10 is 'very' how much do you think PARENTS enjoyed the Talking 2gether home sessions?

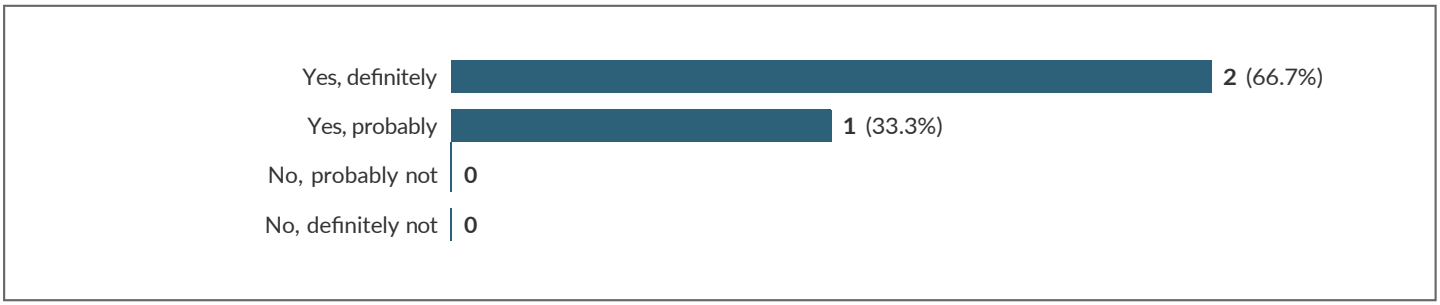
13.1 PARENTS enjoyment



14 Is there anything you think would help parents to enjoy the home sessions more?

Showing all 2 responses	
No	1071104-1071086-113459121
No, mam was very engaged with each of the activities	1071104-1071086-113559947

15 Would you recommend this programme to other Health Visiting teams?



15.a Please tell us why you would or would not recommend Talking 2gether?

Showing all 2 responses	
Its a good structured programme, but doesnt actually take much time up.	1071104-1071086-112723639
Programme goes right back to basics, activity sheets etc are very easy to follow	1071104-1071086-113559947

16 How helpful did you find working with the Early Years Practitioners to:

16.1 Identify families to take part in the sessions in the early years setting

Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

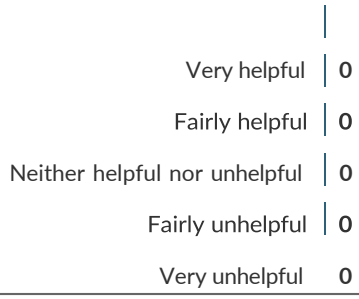
16.2 Identify families to receive the additional home sessions

16.3 Deliver the Talking 2gether programme

Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

17 Have you had the opportunity yet to make any collaborative decisions with the Early Years Practitioners about ongoing support for families? (for example, ongoing support for the family receiving the additional home visits)

17.a If you selected 'yes', how helpful did you find working with the Early Years Practitioners to make these collaborative decisions about ongoing support?



18 Were there any barriers to working collaboratively with Early Years Practitioners?

18.a If yes, please specify:

No responses

19 Is there anything you think would further support your collaborative work with Early Years Practitioners in the future?

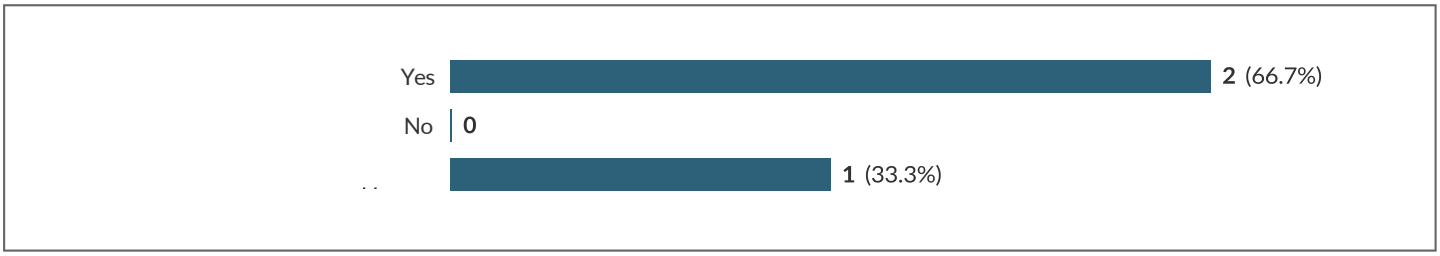
Showing all 2 responses	
Maybe not doing it in the summer term	1071104-1071086-113459121
No, we already have good links with the nurseries in our area	1071104-1071086-113559947

20 Do you think Talking 2gether has changed the way YOU interact with children (i.e. increased responsive contingent interaction)?

20.a If yes, how?

Showing 1 response	
Supporting parents to do the activity rather than showing them	1071104-1071086-113459121

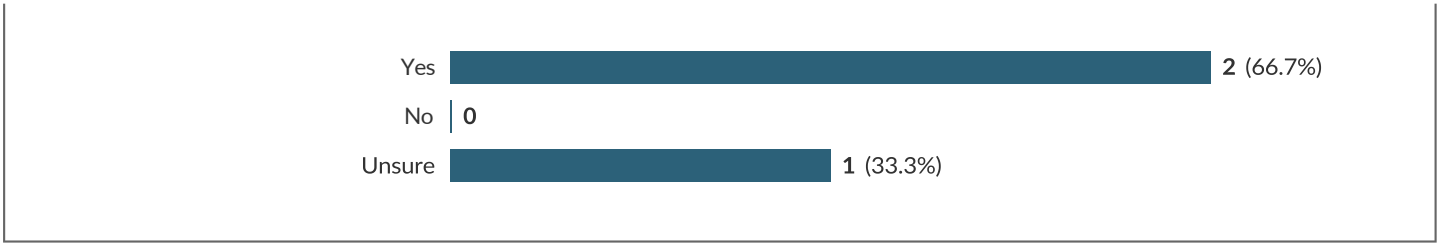
21 Do you think Talking 2gether has changed the way PARENTS' interact with their children (i.e. increased responsive contingent interaction)?



21.a If yes, how?

Showing all 2 responses	
Parent some how this was modelled and began to use it in her own practise.	1071104-1071086-112723639
Observed mam to be more interactive with the child and sitting down on the floor on week 3, when previously she had not	1071104-1071086-113559947

22 Do you think Talking 2gether has had a positive impact on CHILDREN'S language development?



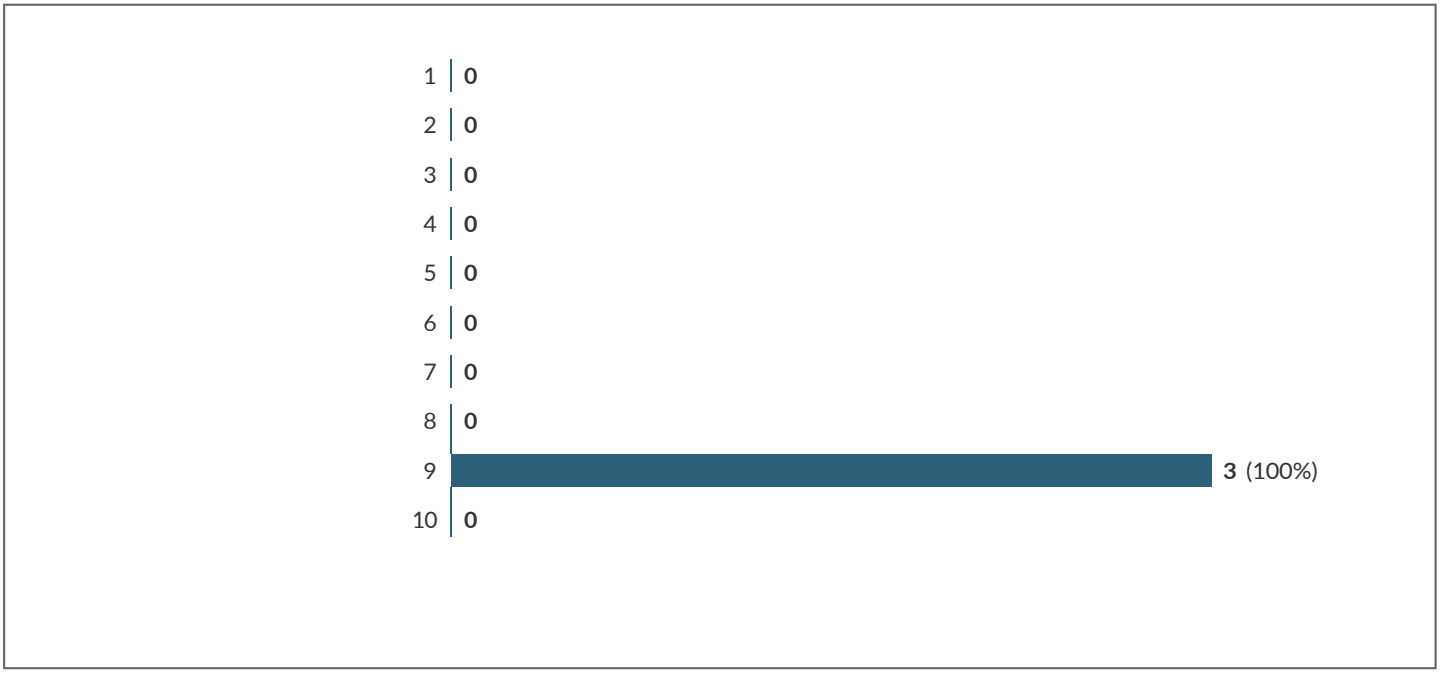
22.a If yes, how?

Showing all 2 responses	
Highlights opportunities and benefits of interactions	1071104-1071086-113459121
The child was much more receptive and wanted to talk, in his own way	1071104-1071086-113559947

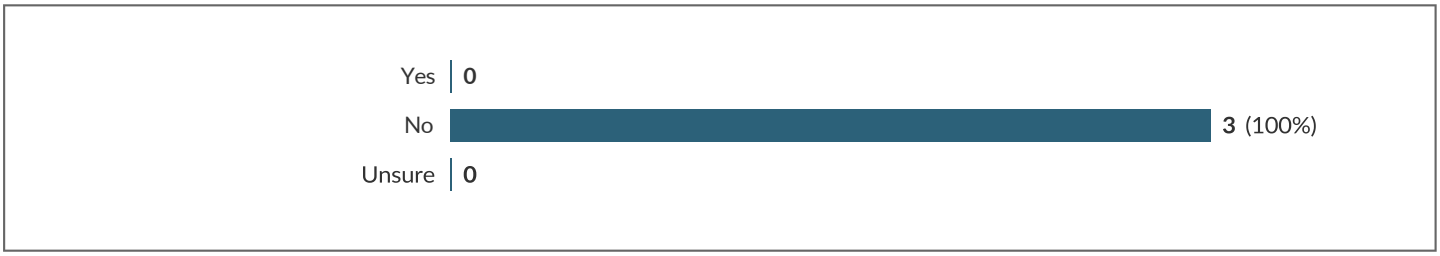
23 Please indicate which training sessions you attended (select all that apply):

24 On a scale of 1-10 where 1 is 'not very' and 10 is 'very' how much did you enjoy the Talking 2gether training sessions?

24.1 Your enjoyment of the training



25 Were there any sessions you didn't enjoy, or enjoyed less than others?

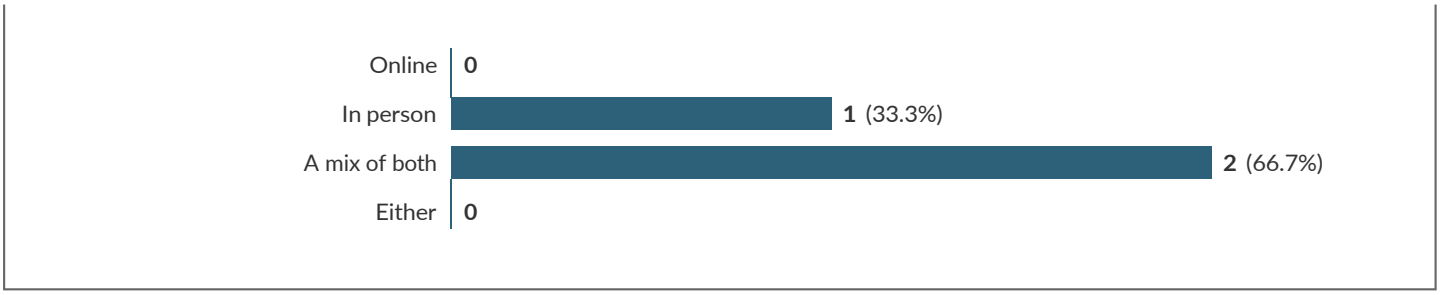


25.a If yes, please specify why:

No responses

26 How easy or difficult did you find fitting in the Talking 2gether training sessions?

27 Do you prefer to receive training online or in-person or a mix of both?



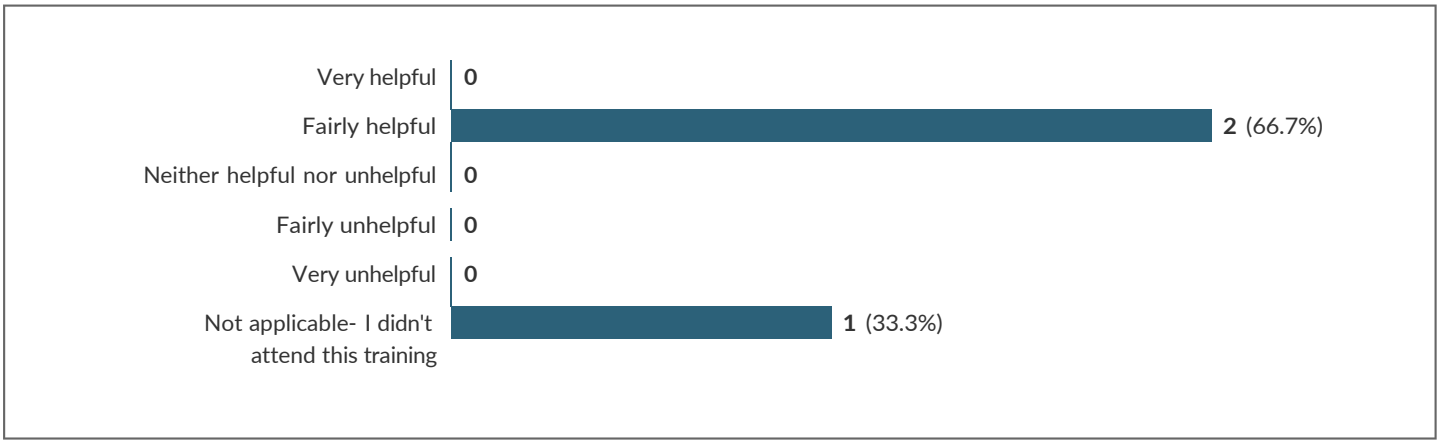
28 Thinking back to the ONE-DAY TRAINING you received at the start of the programme, how do you feel about the amount of content that was covered?

29 How do you feel about the level that the one-day training was pitched at?

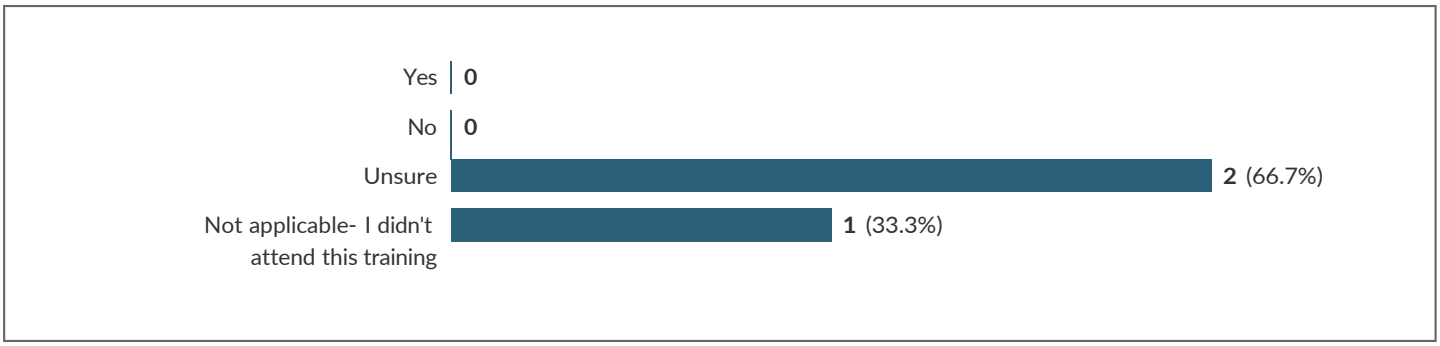
30 What were your key take-away messages from the one-day training?

Showing all 2 responses	
STAR	1071104-1071086-113459121
To follow the programme and see if it works.	1071104-1071086-113559947

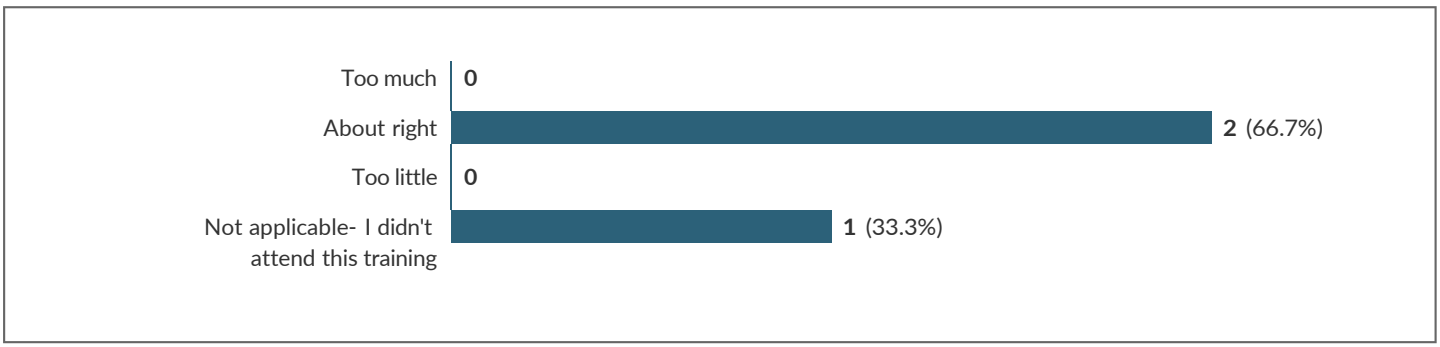
31 How helpful did you find the PEER COACHING session and process for supporting responsive contingent interaction in the setting? (Tick one option)



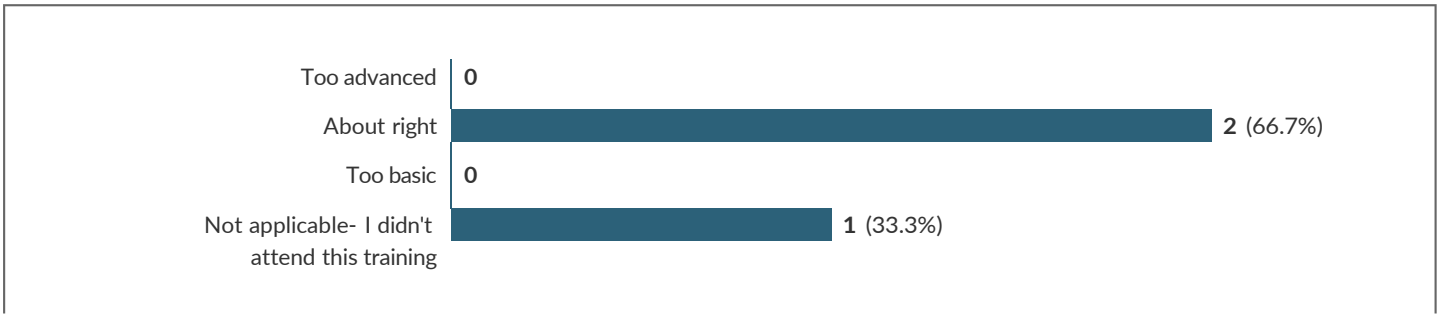
32 Would you use peer coaching in the future with other colleagues of the programme?



33 Thinking back to the TWILIGHT session, how do you feel about the amount of content that was covered?



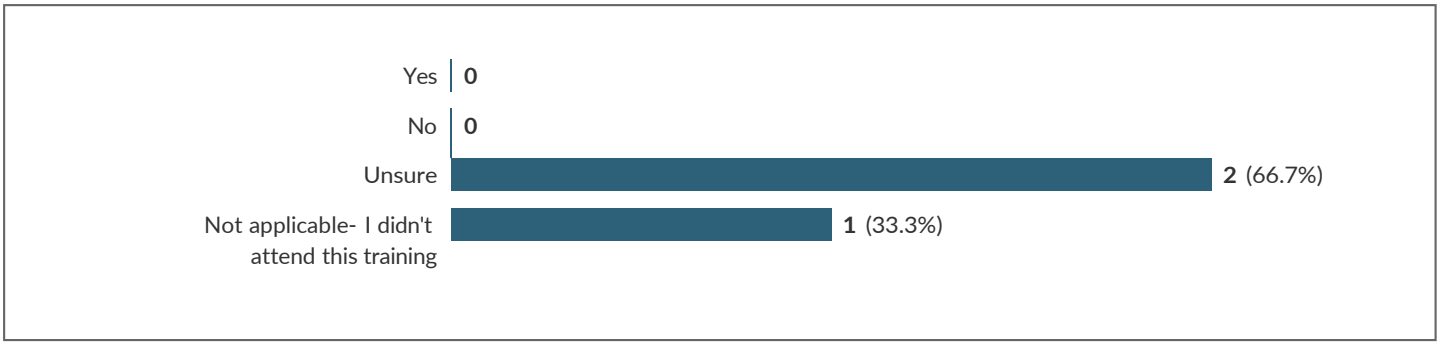
34 How do you feel about the level that the twilight session was pitched at?



35 What were your key take-away messages from the twilight session?

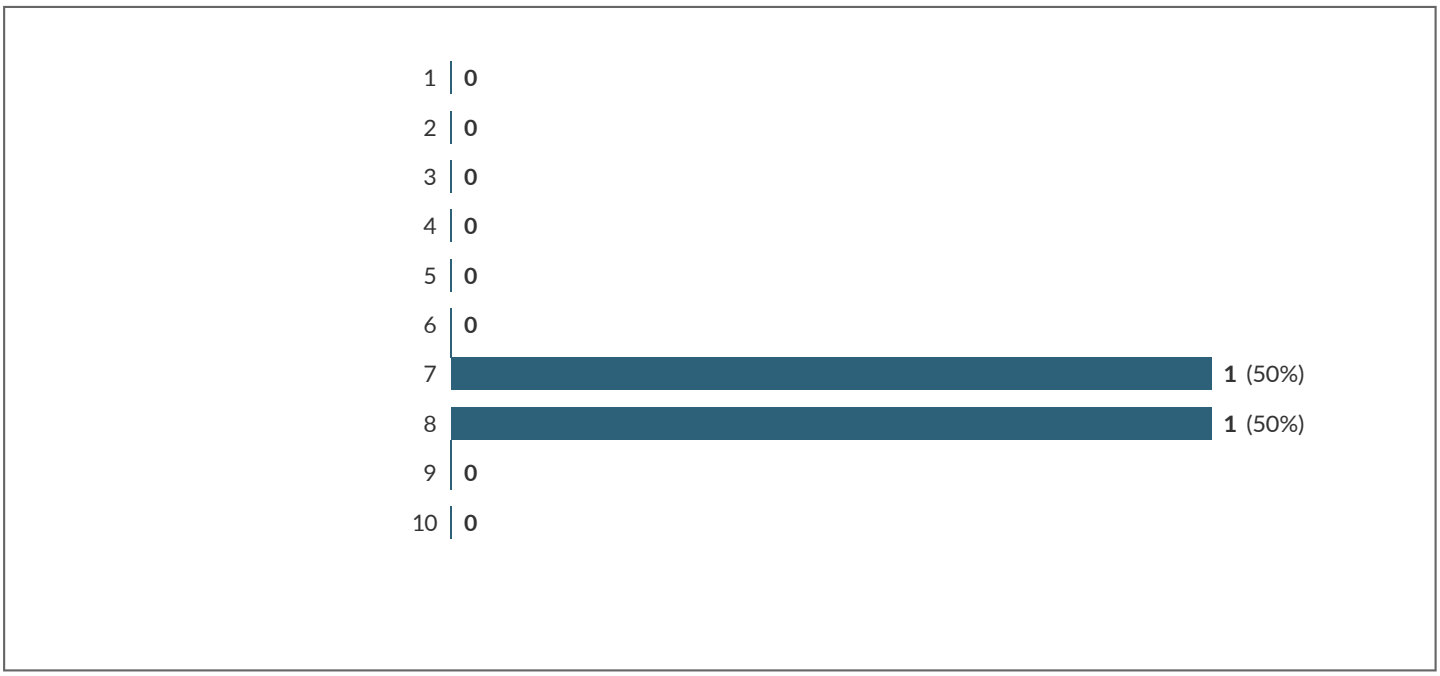
Showing 1 response	
Refreshing the information from day 1	1071104-1071086-113459121

36 Thinking back to the MID-POINT TROUBLE SHOOTING session, did you find this session helpful in addressing any questions or challenges you had?



37 On a scale of 1-10 where 1 is 'not very' and 10 is 'very' how comfortable did you feel providing feedback in the mid-point session about your Talking 2gether sessions?

37.1 Providing feedback in the mid-point session



38 Was there anything not covered in the training that you would have liked to be included?

38.a If yes, please specify:

No responses

39 Which of the following programme materials did you refer to during the delivery of the programme?

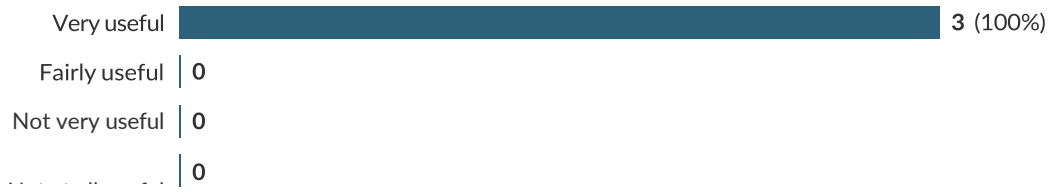
Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

40 How useful would you rate each of the following programme materials?

40.1 Talking 2gether manual

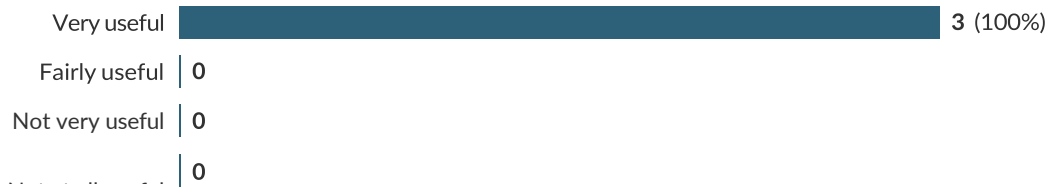
Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

40.2 Training day handouts



Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

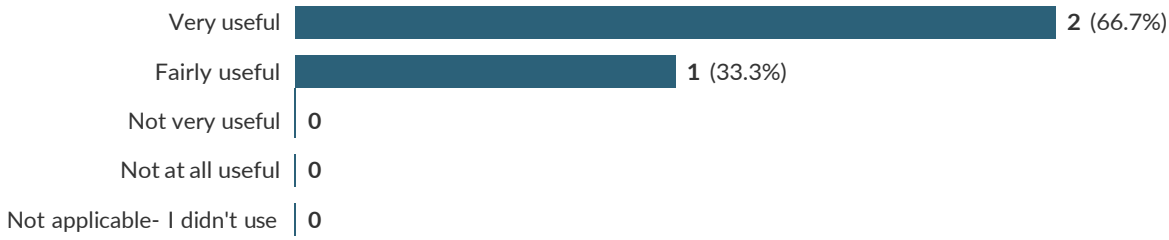
40.3 Parent leaflets



Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

41 How useful did you find the Microsoft Teams channel we set up?

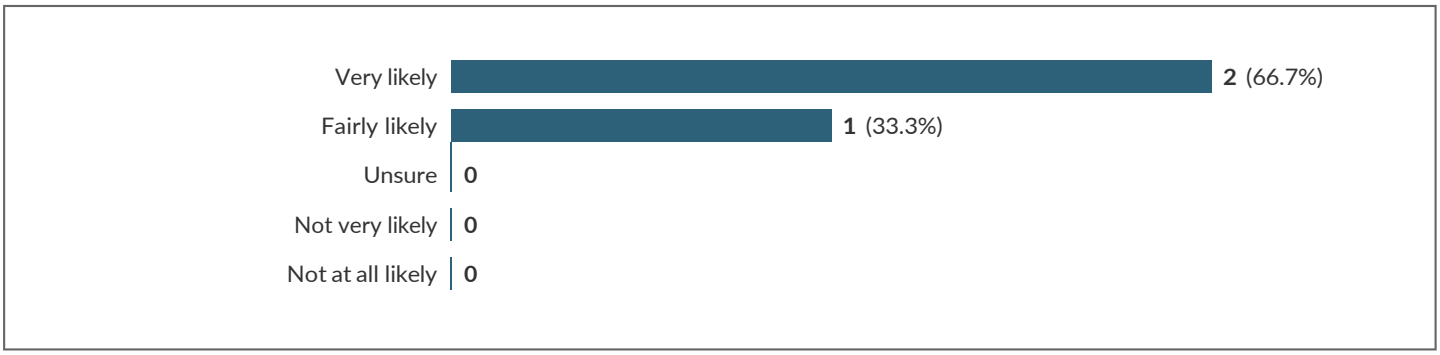
41.1 Talking 2gether Teams channel



42 Are there any other materials we should consider providing in future?

Showing all 2 responses	
No	1071104-1071086-113459121
None that I can think of	1071104-1071086-113559947

43 How likely are you to continue using the Talking 2gether intervention if the resources were made available to you?



44 What support would you need to feel able to provide the Talking 2gether intervention in the future?

Showing all 2 responses	
Resources	1071104-1071086-113459121
None that I can think of at the moment	1071104-1071086-113559947

45 What would you change about the Talking 2gether programme?

Showing all 2 responses	
Nothing	1071104-1071086-113459121
Nothing	1071104-1071086-113559947

46 Do you have any other comments about any aspect of Talking 2gether?

Showing all 2 responses	
I am enjoying it	1071104-1071086-113459121
None	1071104-1071086-113559947

Finally, we would like to chat further about your experience of Talking 2gether, if you are happy to

47 talk to us about your experiences, please provide your email address below. Your email will be removed from your survey responses before survey data is analysed.

Showing 1 response	
	1071104-1071086-113459121

Jisc Online surveys

Talking 2gether Feedback Survey for Parents/Carers

Showing 12 of 12 responses

Showing **all** responses

Showing **all** questions

Response rate: 12%

1 Which languages do YOU speak?

1.1 Main language

1.1.a Main language - Language

Showing all 12 responses	
English	1074837-1074819-113098848
English	1074837-1074819-113103310
English	1074837-1074819-113110995
English	1074837-1074819-113239241
English	1074837-1074819-113250720
English	1074837-1074819-113254318
English	1074837-1074819-113261061
English	1074837-1074819-113317164
English	1074837-1074819-113343877
English	1074837-1074819-113390095
English	1074837-1074819-113622038
English	1074837-1074819-113889026

1.2 Second language

1.2.a Second language - Language

Showing all 2 responses	
English	1074837-1074819-113250720
None	1074837-1074819-113390095

1.3 Third language

1.3.a Third language - Language

Showing all 2 responses	
English	1074837-1074819-113250720
None	1074837-1074819-113390095

1.a If you speak more than one language, please estimate proportion (%) of time they are spoken by you at home

1.a.1 Main language

1.a.1. Main language - % time spoken

Showing all 5 responses	
100	1074837-1074819-113098848
100%	1074837-1074819-113103310
100	1074837-1074819-113239241
English	1074837-1074819-113390095
100%	1074837-1074819-113622038

1.a.2 Second language

1.a.2. Second language - % time spoken

Showing 1 response	
None	1074837-1074819-113390095

1.a.3 Third language

1.a.3. Third language - % time spoken

Showing 1 response	
None	1074837-1074819-113390095

2 Which languages does your CHILD speak?

2.1 Main language

2.1.a Main language - Language

Showing all 12 responses	
English	1074837-1074819-113098848
English	1074837-1074819-113103310
English	1074837-1074819-113110995
English	1074837-1074819-113239241
English	1074837-1074819-113250720
English	1074837-1074819-113254318
English	1074837-1074819-113261061
English	1074837-1074819-113317164
English	1074837-1074819-113343877
English	1074837-1074819-113390095
English	1074837-1074819-113622038
English	1074837-1074819-113889026

2.2 Second language

2.2.a Second language - Language

Showing all 2 responses	
English	1074837-1074819-113250720
None	1074837-1074819-113390095

2.3 Third language

2.3.a Third language - Language

Showing all 2 responses	
English	1074837-1074819-113250720
None	1074837-1074819-113390095

2.a If your child speaks or is learning to speak more than one language, please estimate proportion (%) of time they are spoken by them at home

2.a.1 Main language

2.a.1. Main language - % time spoken

Showing all 5 responses	
100	1074837-1074819-113098848
100%	1074837-1074819-113103310
100	1074837-1074819-113239241
English	1074837-1074819-113390095
100%	1074837-1074819-113622038

2.a.2 Second language

2.a.2. Second language - % time spoken

Showing 1 response	
None	1074837-1074819-113390095

2.a.3 Third language

2.a.3. Third language - % time spoken

Showing 1 response	
None	1074837-1074819-113390095

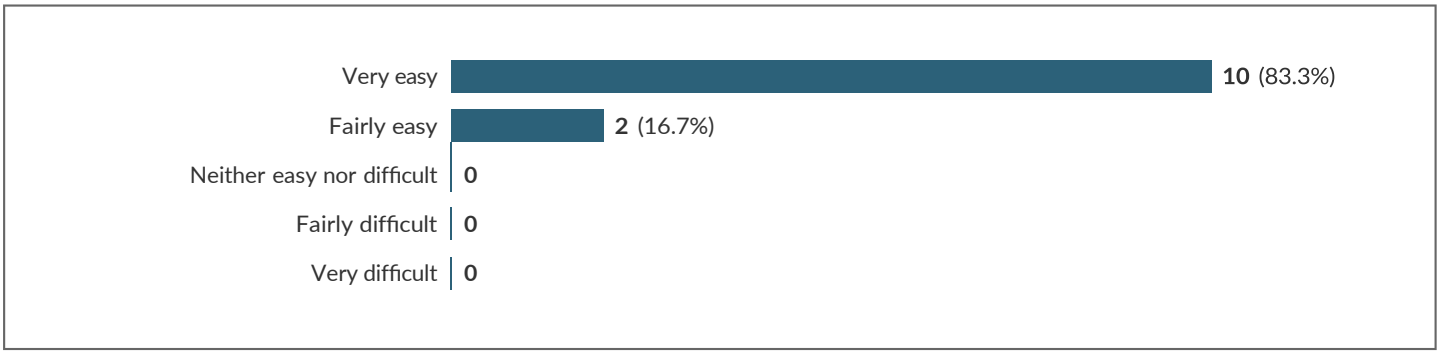
3 Which early years setting did you attend for Talking 2gether?

Showing all 12 responses	
Setting 2a	1074837-1074819-113098848
Setting 2b	1074837-1074819-113103310
Setting 1a	1074837-1074819-113110995
Setting 4a	1074837-1074819-113239241
Setting 4b	1074837-1074819-113250720
Setting 4c	1074837-1074819-113254318
Setting 4d	1074837-1074819-113261061
Setting 3a	1074837-1074819-113317164
Setting 4e	1074837-1074819-113343877
Setting 2c	1074837-1074819-113390095
Setting 1b	1074837-1074819-113622038
Setting 3b	1074837-1074819-113889026

4 How many Talking 2gether sessions in the early years setting have you attended?

Showing all 12 responses	
5/6	1074837-1074819-113098848
6	1074837-1074819-113103310
4	1074837-1074819-113110995
6	1074837-1074819-113239241
6	1074837-1074819-113250720
6	1074837-1074819-113254318
6	1074837-1074819-113261061
3	1074837-1074819-113317164
6	1074837-1074819-113343877
6	1074837-1074819-113390095
4	1074837-1074819-113622038
5	1074837-1074819-113889026

5 How easy or difficult have you found it to fit in attending the parent group sessions held at the early years setting?



5.a Why do you say this?

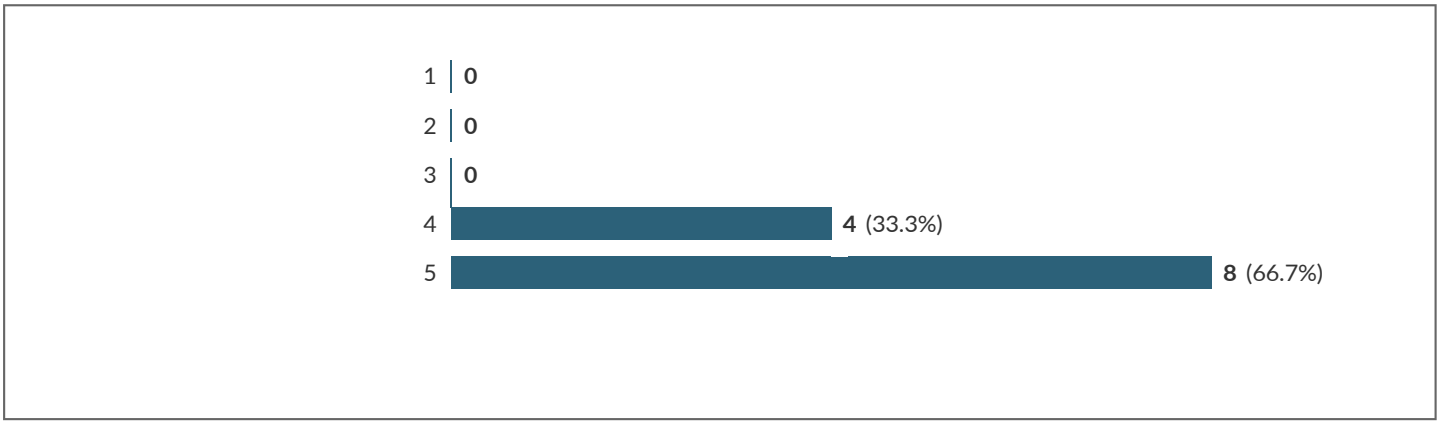
Showing all 9 responses	
Was 3 of us but felt my son spoke better than other 2 children	1074837-1074819-113098848
Always done around us parents, we changed times etc to suit us.	1074837-1074819-113103310
Everyone was very friendly	1074837-1074819-113250720
Same time every week and same day	1074837-1074819-113254318
The session times were ideal as they didn't clash with school pick up times.	1074837-1074819-113317164
The times the groups are held are very easy to fit things around	1074837-1074819-113343877
Everyone was friendly and professional and if u had any questions it was easy enough to just ask them.	1074837-1074819-113390095
There was no awkwardness	1074837-1074819-113622038
Children attend nursery when sessions are held	1074837-1074819-113889026

6 Were you happy with the length of time the group sessions were in the early years setting?

7 On a scale of 1- 5, where 1 is 'not at all' and 5 is 'a lot', how much have you enjoyed the Talking

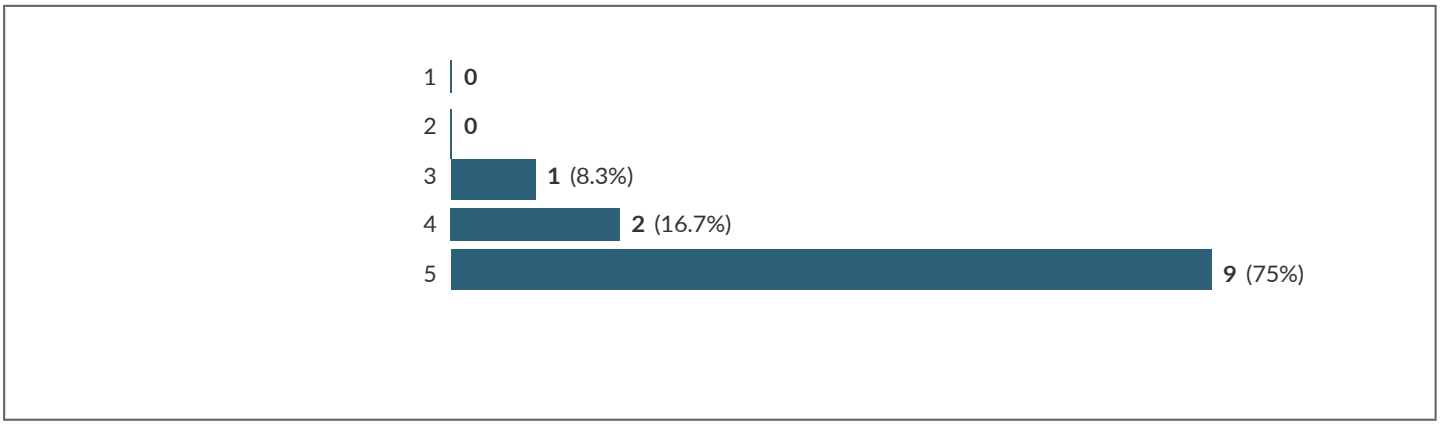
2gether sessions in the early years setting?

7.1 Your enjoyment of the sessions



8 On a scale of 1- 5, where 1 is 'very difficult' and 5 is 'very easy', how easy did you find the Super Communicator tips to understand? (e.g., following your child's lead, pause and wait for your child…)

8.1 How easy were the tips

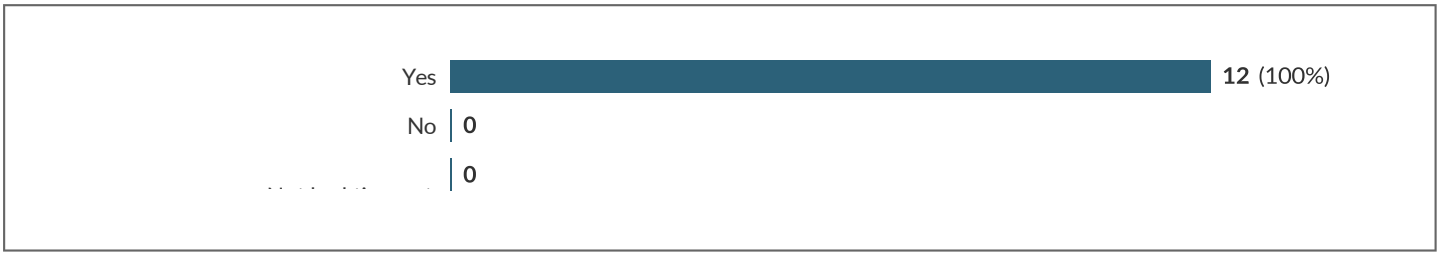


9 On a scale of 1- 5, where 1 is 'very difficult' and 5 is 'very easy', how easy did you find using the Super Communicator tips with your child? (e.g., following your child's lead, pause and wait for your child…)

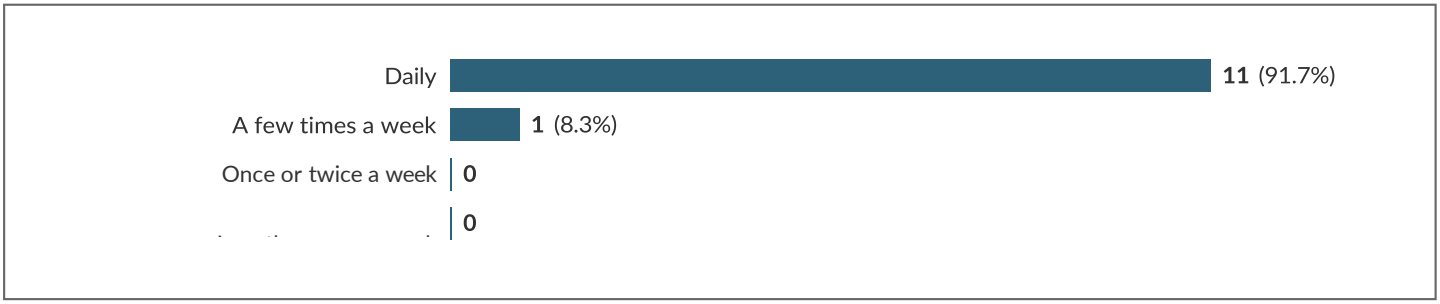
9.1 How easy was using the tips with your child

Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

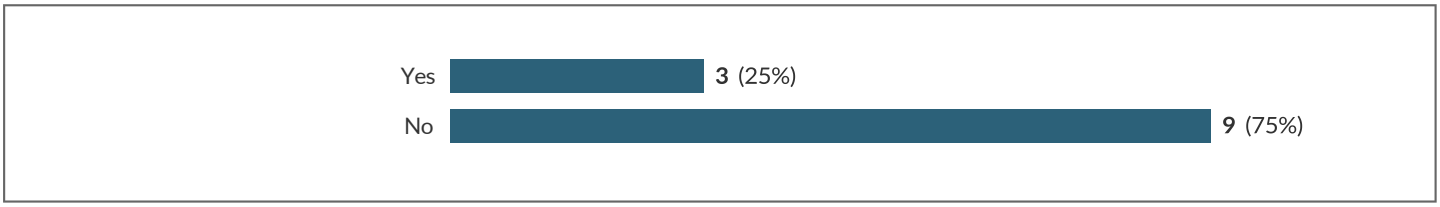
10 Have you been able to use the tips shared in the sessions at home with you child?



10.a If 'yes' how often have you been using them?



11 Have you received any Talking 2gether sessions at home with a member of the Health Visiting Team?



12 How many sessions at home have you had?

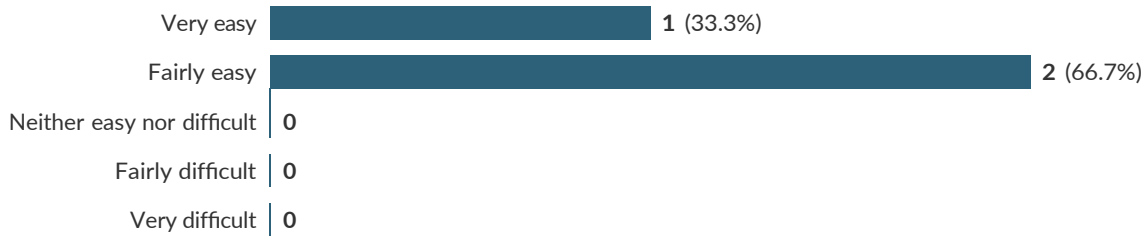
Showing all 3 responses	
4	1074837-1074819-113110995
1	1074837-1074819-113250720
3 so far a think	1074837-1074819-113390095

13 On a scale of 1- 5, where 1 is 'not at all' and 5 is 'a lot', how much have you enjoyed the Talking 2gether home sessions?

13.1 Your enjoyment of home sessions

Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

14 How easy or difficult have you found it to fit in the home sessions?



14.a Why do you say this?

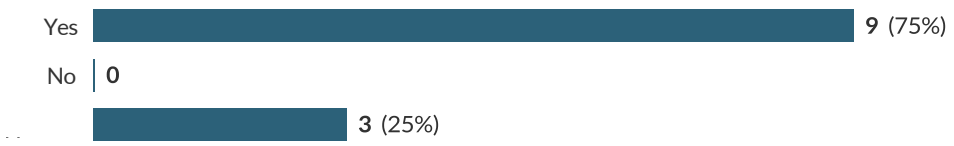
Showing all 2 responses	
We have a very nice health visitor	1074837-1074819-113250720
The 1st session was harder as a have a 2 year old boy aswel so when we were trying to work with [child] she was easily distracted with [sibling] been there or [sibling] would try join in to but when u have a 2 year old and 3 year old they want what the other has so it is harder so other sessions [sibling]'s dad had josh or took him out in able to spend 1 and 1 time with [child] and the nurse practitioner.	1074837-1074819-113390095

15 Do you think Talking 2gether has changed the way you interact with your child?

15.a If 'yes', how?

Showing all 9 responses	
Pausing more often to allow my child to respond.	1074837-1074819-113103310
Learned a lot from these sessions, things like not asking too many questions and instead saying what I see and repeating words Louie says and adding a word to it	1074837-1074819-113110995
Easier understanding of how to address certain things and ways to help understand each other a bit better	1074837-1074819-113239241
My son understands things alot better	1074837-1074819-113250720
Adding words onto sentences	1074837-1074819-113254318
I feel I am more conscious in taking a step back and instead of thinking I could do things for quickness I am more aware of how much my children get from taking the lead in the simplest of tasks.	1074837-1074819-113317164
I'm trying different things with my child and hes interacting more with me in different ways	1074837-1074819-113343877
Just little tips like give [child] 10 seconds to register the information helped and getting down to her level it's not something you automatically think about doing getting down to her level when in timeout yes you would do but speaking to her on a daily basis you wouldn't think to so these tips helped alot.	1074837-1074819-113390095
I'm more aware of what I say and how to say it	1074837-1074819-113622038

16 Do you think Talking 2gether has had a positive impact on your child's language development?

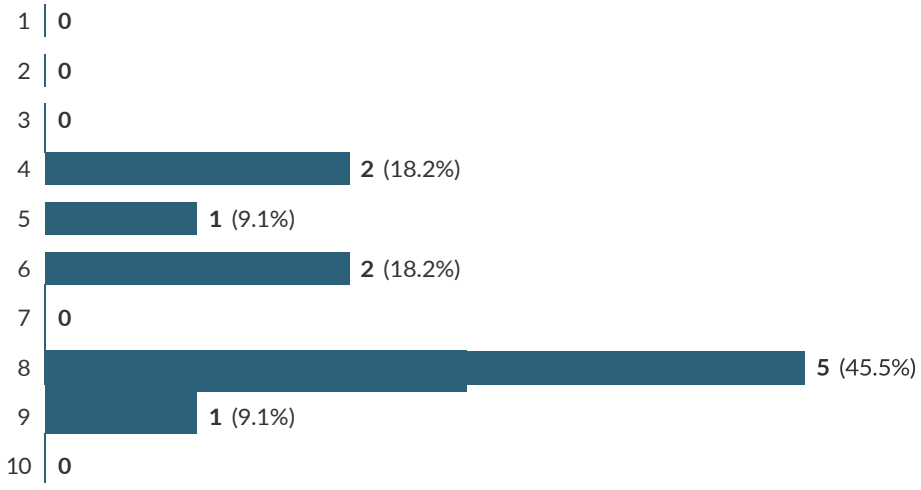


16.a If 'yes', how?

Showing all 9 responses	
Seen a big improvement in [child]'s speech, and a lot of family and friends have also noticed a change and I really do think these sessions have contributed.	1074837-1074819-113110995
My child has been using some of the techniques and it has helped with others understanding her better	1074837-1074819-113239241
He is speaking alot easier now	1074837-1074819-113250720
More social	1074837-1074819-113254318
Saying words more clear	1074837-1074819-113261061
I am trying to not make decisions for them as much, allowing more time for them to make their own decisions resulting in more opportunities to communicate and develop their language.	1074837-1074819-113317164
Saying more words and trying to talk about different things	1074837-1074819-113343877
3 month ago [child] couldn't put 2 words together and was limited with words but now she can put 2 words together and say some small sentences like mam made juice so her speech has improved, she does go to speech therapy to so between both it's helped her improve.	1074837-1074819-113390095
New words used from activity packs	1074837-1074819-113889026

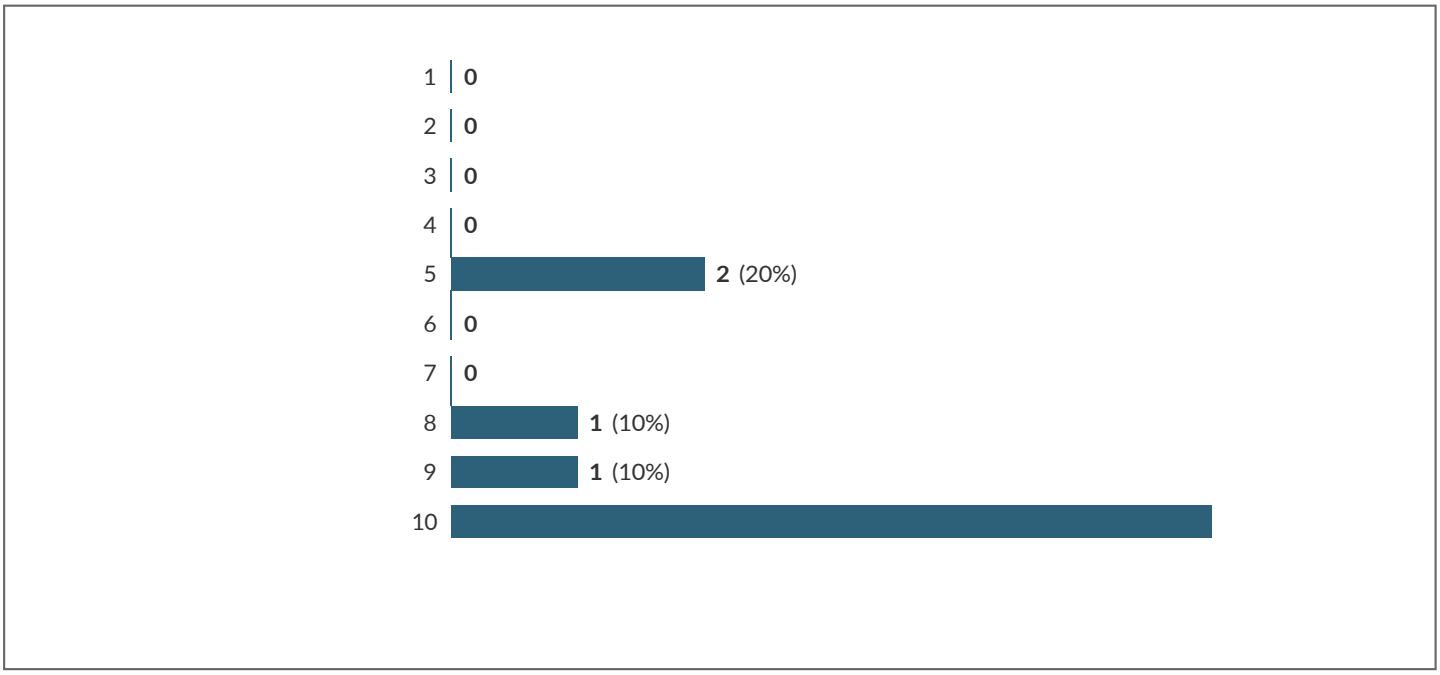
17 How knowledgeable did you feel about how to support your child's language and communication development? (1 is 'not at all' and 10 is 'extremely')

17.1 BEFORE Talking 2gether



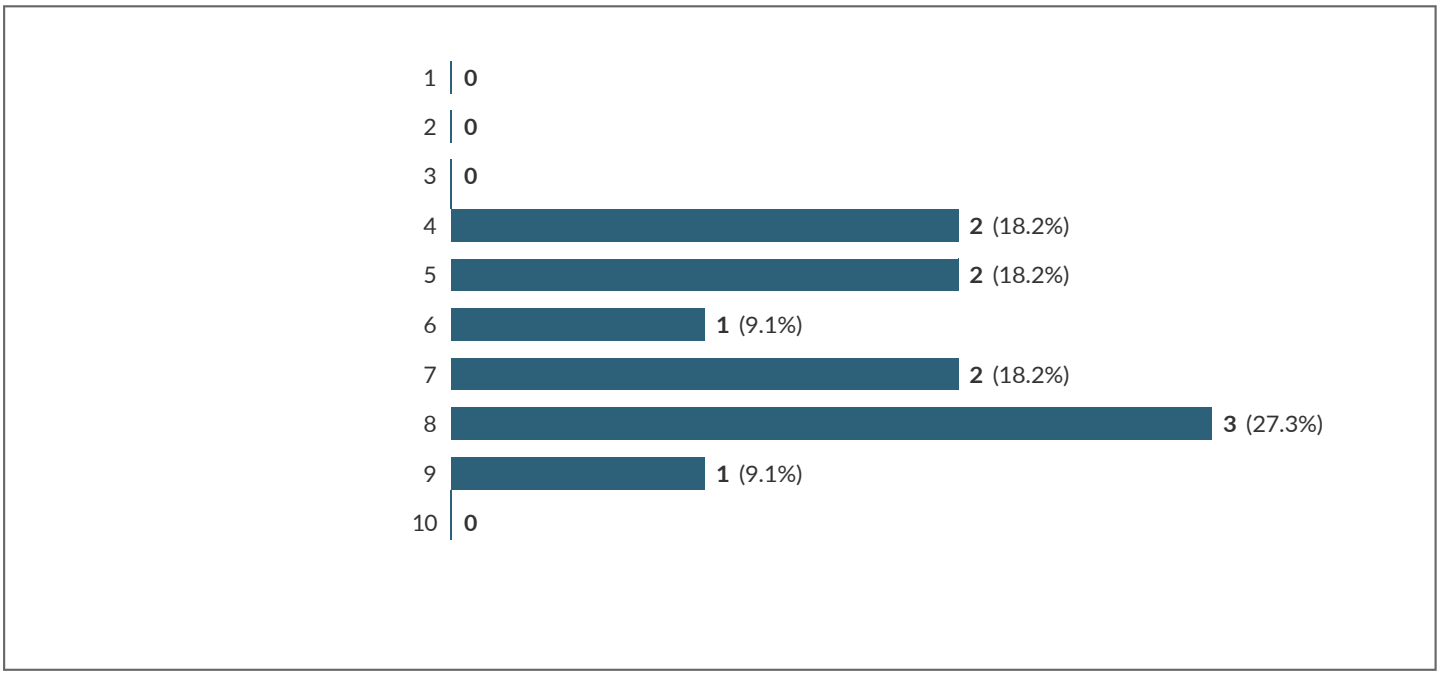
Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

17.2 AFTER Talking 2gether

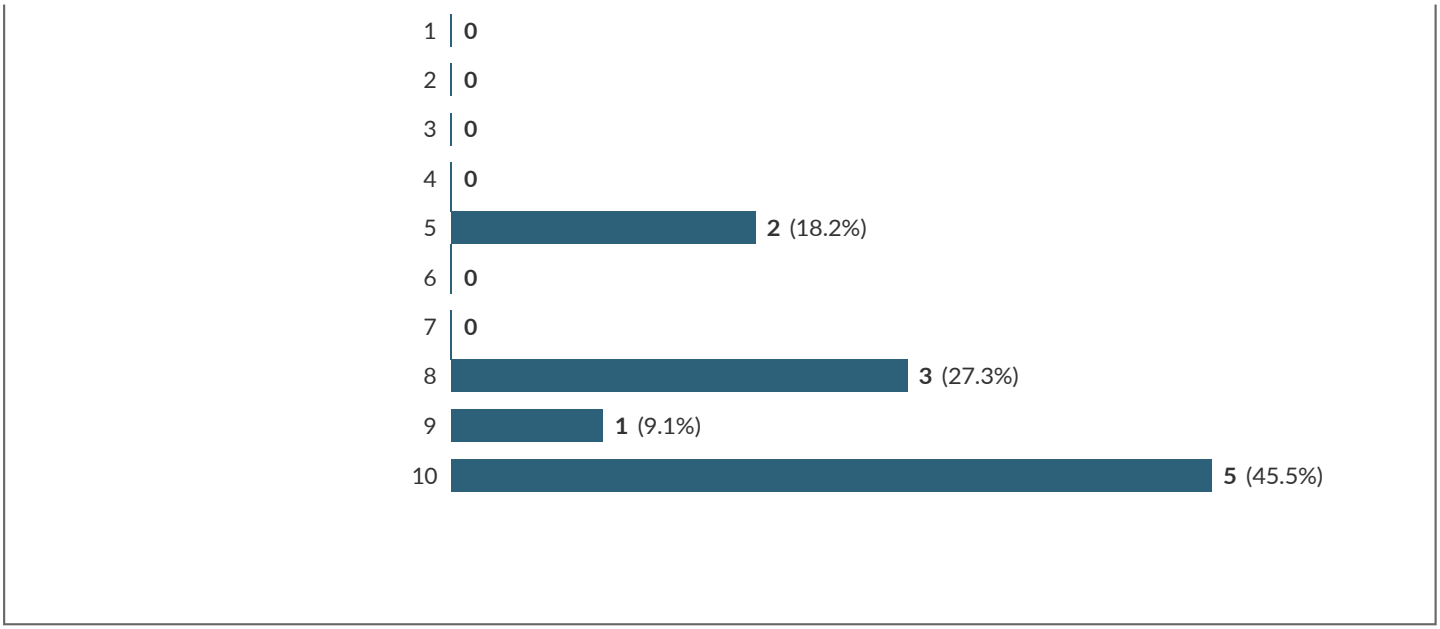


18 How confident did you feel about supporting your child's language and communication development? (1 is 'not at all' and 10 is 'extremely')

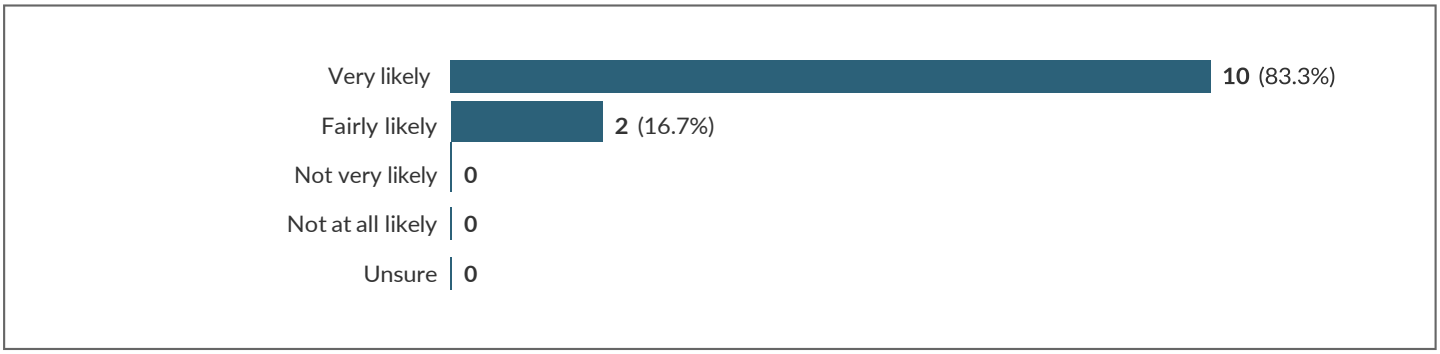
18.1 BEFORE Talking 2gether



18.2 AFTER Talking 2gether



19 How likely are you to continue using the Super Communicator tips in the future?

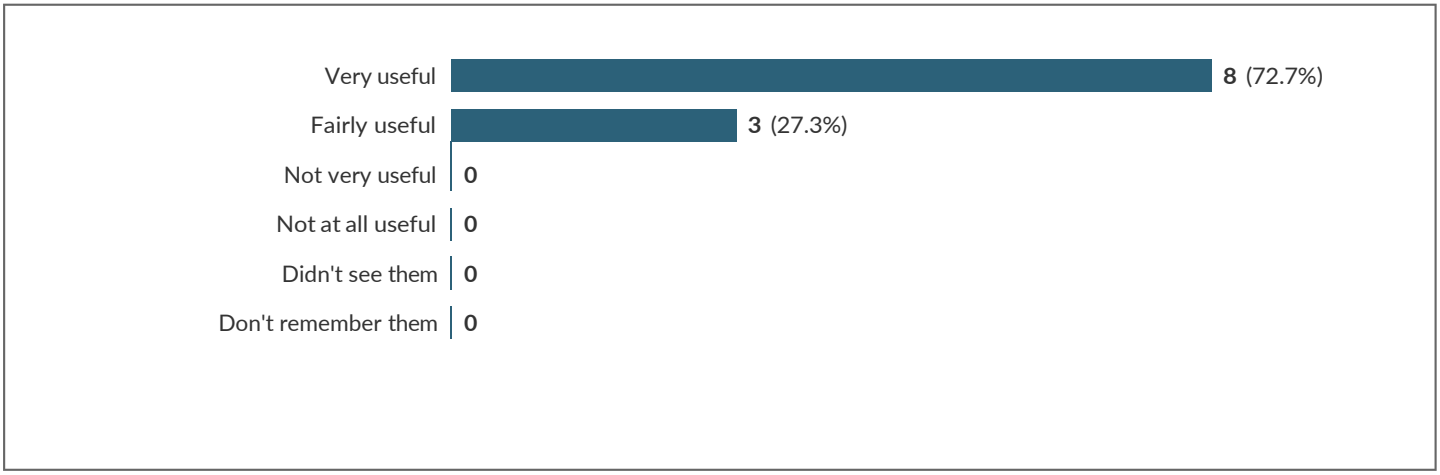


20 Is there anything that Talking 2Gether has not provided that would help you to feel more confident supporting your child's language and communication development?

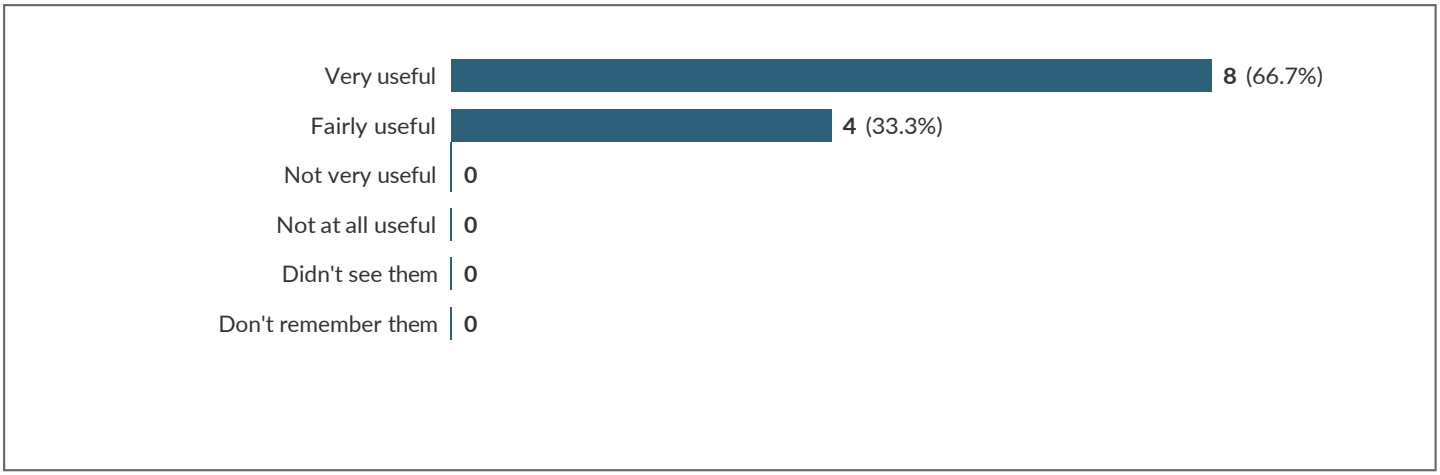
Showing all 2 responses	
No	1074837-1074819-113254318
No a think the tips was very clear as it was repetitive alot so it definitely got the message across .	1074837-1074819-113390095

21 How useful would you rate each of the following programme materials?

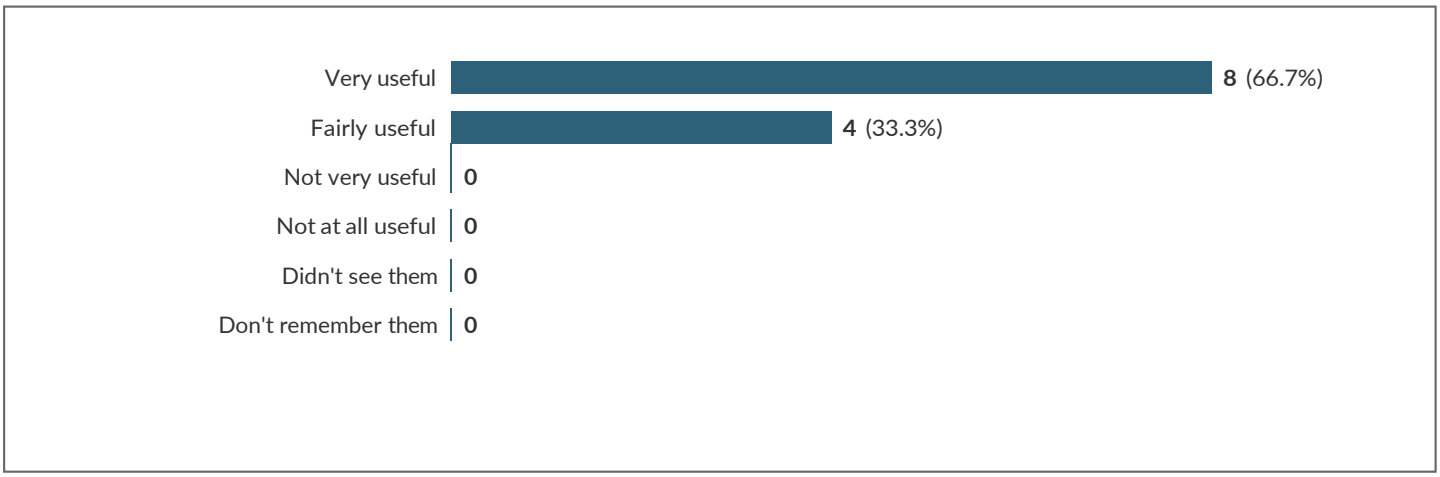
21.1 Talking 2gether presentation slides



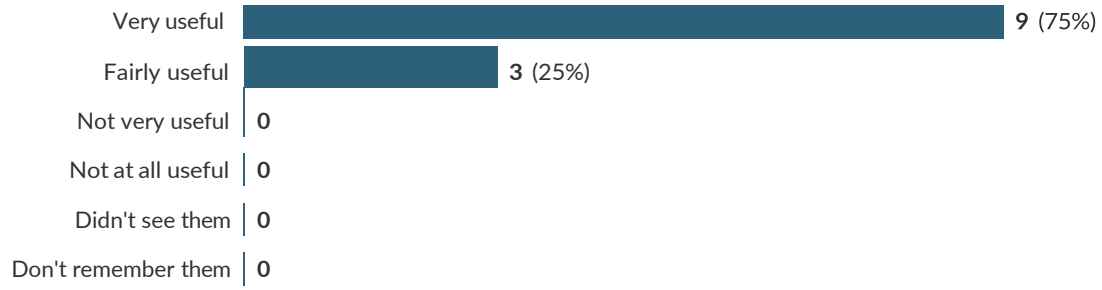
21.2 Session materials: 'Together time' pictures



21.3 Session materials: Goal setting cards



21.4 Take home leaflets



Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

21.5 Take home toys/objects

Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

22 Are there any other materials we should consider providing for parents/carers in the future?

Showing all 5 responses	
No	1074837-1074819-113239241
N/a	1074837-1074819-113250720
No	1074837-1074819-113254318
No not that a can think of.	1074837-1074819-113390095
Re Talking 2gether presentation slides- 'Struggling laptop- larger to see'	1074837-1074819-113889026

23 If you were to participate in an intervention similar to Talking 2gether again, what would be most helpful to you as a parent/carer? (i.e., is there anything you would change?)

Showing all 5 responses	
Was very repetitive, which made I'll session very similar	1074837-1074819-113098848
N/a	1074837-1074819-113250720
Nothing	1074837-1074819-113254318
The only thing ad change is the repetitive of it and make it more interesting so people do want to attend them.	1074837-1074819-113390095
Examples of fair actions for behaviour	1074837-1074819-113622038

24 Do you have any other comments about any aspect of Talking 2gether?

Showing all 5 responses	
Fairly interesting for both myself and child	1074837-1074819-113103310
N/A	1074837-1074819-113250720
No	1074837-1074819-113254318
I have really enjoyed the Talking 2gether sessions. They have been really insightful and I felt at ease talking about my own experiences.	1074837-1074819-113317164
No a think av covered everything	1074837-1074819-113390095

25 Are you a parent/carer who speaks English as an Additional Language? (English is not your first language)

26 Was an interpreter present at your Talking 2gether sessions?

27 If you received the Talking 2gether home sessions, was an interpreter present at these?

Yes	0
No	0
Not needed	0
N/A	0

28 On a scale of 1-5, 1 being 'not easy at all' and 5 being 'very easy' how easy was it for you to understand the Talking 2gether Super Communicator tips?

28.1 How easy was it to understand the tips

1	0
2	0
3	0
4	0
5	0

29 Is there anything that could be improved to make Talking 2gether better for you and your child?

No responses

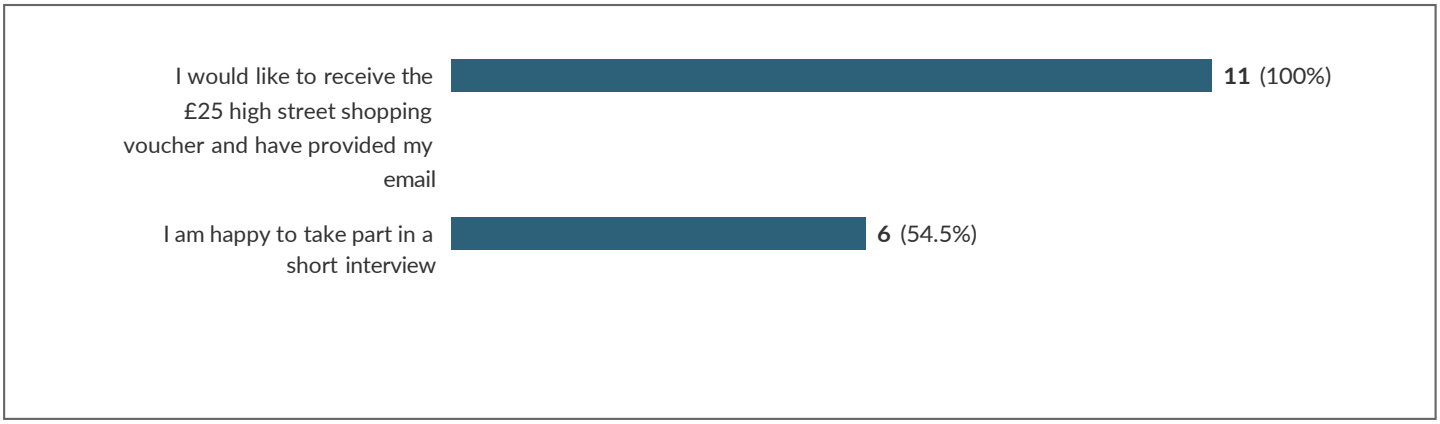
30 Is there any other feedback about Talking 2gether that you wish to provide or we haven't discussed?

Showing all 4 responses	
I think it's a very helpful and knowledgeable thing to offer parents. There's lots of useful information that I hadn't even thought about that could and have helped me massively.	1074837-1074819-113110995
N/a	1074837-1074819-113250720
No	1074837-1074819-113254318
No nothing.	1074837-1074819-113390095

31 Your email address:

Showing all 12 responses	
	1074837-1074819-113098848
	1074837-1074819-113103310
	1074837-1074819-113110995
	1074837-1074819-113239241
	1074837-1074819-113250720
	1074837-1074819-113254318
	1074837-1074819-113261061
	1074837-1074819-113317164
	1074837-1074819-113343877
	1074837-1074819-113390095
	1074837-1074819-113622038
	1074837-1074819-113889026

31.a Please tick the boxes below to indicate your agreement



Jisc Online surveys

Talking 2gether Feedback Survey for Parents/Carers

Showing 12 of 12 responses

Showing **all** responses

Showing **all** questions

Response rate: 12%

1 Which languages do YOU speak?

1.1 Main language

1.1.a Main language - Language

Showing all 12 responses	
English	1074837-1074819-113098848
English	1074837-1074819-113103310
English	1074837-1074819-113110995
English	1074837-1074819-113239241
English	1074837-1074819-113250720
English	1074837-1074819-113254318
English	1074837-1074819-113261061
English	1074837-1074819-113317164
English	1074837-1074819-113343877
English	1074837-1074819-113390095
English	1074837-1074819-113622038
English	1074837-1074819-113889026

1.2 Second language

1.2.a Second language - Language

Showing all 2 responses	
English	1074837-1074819-113250720
None	1074837-1074819-113390095

1.3 Third language

1.3.a Third language - Language

Showing all 2 responses	
English	1074837-1074819-113250720
None	1074837-1074819-113390095

1.a If you speak more than one language, please estimate proportion (%) of time they are spoken by you at home

1.a.1 Main language

1.a.1. Main language - % time spoken

Showing all 5 responses	
100	1074837-1074819-113098848
100%	1074837-1074819-113103310
100	1074837-1074819-113239241
English	1074837-1074819-113390095
100%	1074837-1074819-113622038

1.a.2 Second language

1.a.2. Second language - % time spoken

Showing 1 response	
None	1074837-1074819-113390095

1.a.3 Third language

1.a.3. Third language - % time spoken

Showing 1 response	
None	1074837-1074819-113390095

2 Which languages does your CHILD speak?

2.1 Main language

2.1.a Main language - Language

Showing all 12 responses	
English	1074837-1074819-113098848
English	1074837-1074819-113103310
English	1074837-1074819-113110995
English	1074837-1074819-113239241
English	1074837-1074819-113250720
English	1074837-1074819-113254318
English	1074837-1074819-113261061
English	1074837-1074819-113317164
English	1074837-1074819-113343877
English	1074837-1074819-113390095
English	1074837-1074819-113622038
English	1074837-1074819-113889026

2.2 Second language

2.2.a Second language - Language

Showing all 2 responses	
English	1074837-1074819-113250720
None	1074837-1074819-113390095

2.3 Third language

2.3.a Third language - Language

Showing all 2 responses	
English	1074837-1074819-113250720
None	1074837-1074819-113390095

2.a If your child speaks or is learning to speak more than one language, please estimate proportion (%) of time they are spoken by them at home

2.a.1 Main language

2.a.1. Main language - % time spoken

Showing all 5 responses	
100	1074837-1074819-113098848
100%	1074837-1074819-113103310
100	1074837-1074819-113239241
English	1074837-1074819-113390095
100%	1074837-1074819-113622038

2.a.2 Second language

2.a.2. Second language - % time spoken

Showing 1 response	
None	1074837-1074819-113390095

2.a.3 Third language

2.a.3. Third language - % time spoken

Showing 1 response	
None	1074837-1074819-113390095

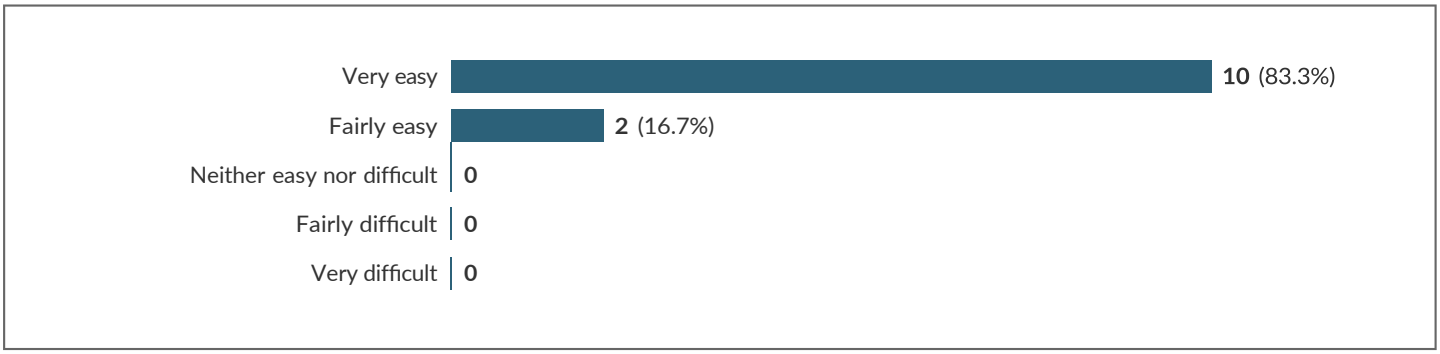
3 Which early years setting did you attend for Talking 2gether?

Showing all 12 responses	
Setting 2a	1074837-1074819-113098848
Setting 2b	1074837-1074819-113103310
Setting 1a	1074837-1074819-113110995
Setting 4a	1074837-1074819-113239241
Setting 4b	1074837-1074819-113250720
Setting 4c	1074837-1074819-113254318
Setting 4d	1074837-1074819-113261061
Setting 3a	1074837-1074819-113317164
Setting 4e	1074837-1074819-113343877
Setting 2c	1074837-1074819-113390095
Setting 1b	1074837-1074819-113622038
Setting 3b	1074837-1074819-113889026

4 How many Talking 2gether sessions in the early years setting have you attended?

Showing all 12 responses	
5/6	1074837-1074819-113098848
6	1074837-1074819-113103310
4	1074837-1074819-113110995
6	1074837-1074819-113239241
6	1074837-1074819-113250720
6	1074837-1074819-113254318
6	1074837-1074819-113261061
3	1074837-1074819-113317164
6	1074837-1074819-113343877
6	1074837-1074819-113390095
4	1074837-1074819-113622038
5	1074837-1074819-113889026

5 How easy or difficult have you found it to fit in attending the parent group sessions held at the early years setting?



5.a Why do you say this?

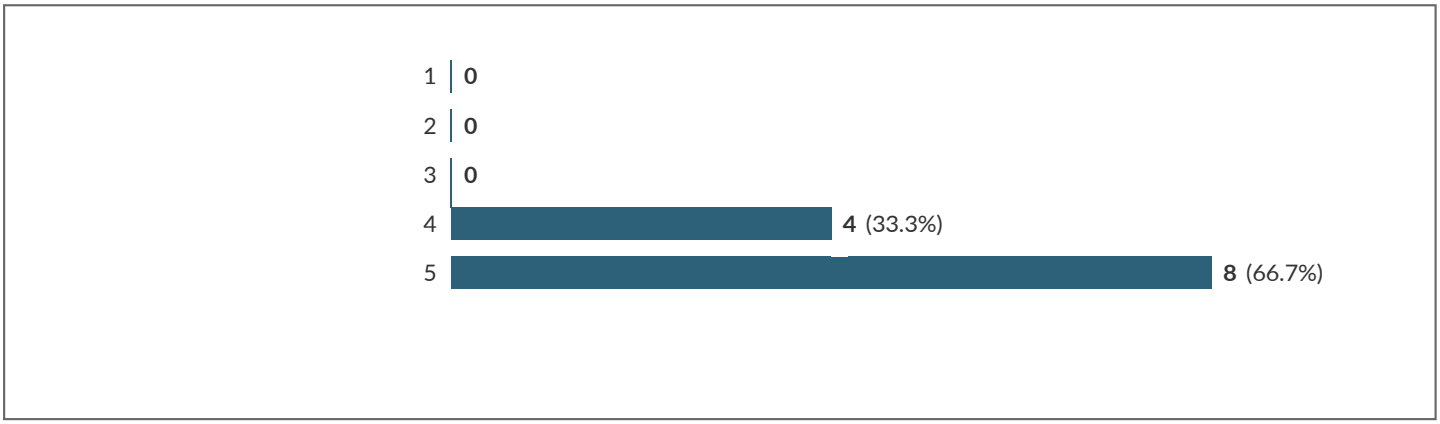
Showing all 9 responses	
Was 3 of us but felt my son spoke better than other 2 children	1074837-1074819-113098848
Always done around us parents, we changed times etc to suit us.	1074837-1074819-113103310
Everyone was very friendly	1074837-1074819-113250720
Same time every week and same day	1074837-1074819-113254318
The session times were ideal as they didn't clash with school pick up times.	1074837-1074819-113317164
The times the groups are held are very easy to fit things around	1074837-1074819-113343877
Everyone was friendly and professional and if u had any questions it was easy enough to just ask them.	1074837-1074819-113390095
There was no awkwardness	1074837-1074819-113622038
Children attend nursery when sessions are held	1074837-1074819-113889026

6 Were you happy with the length of time the group sessions were in the early years setting?

7 On a scale of 1- 5, where 1 is 'not at all' and 5 is 'a lot', how much have you enjoyed the Talking

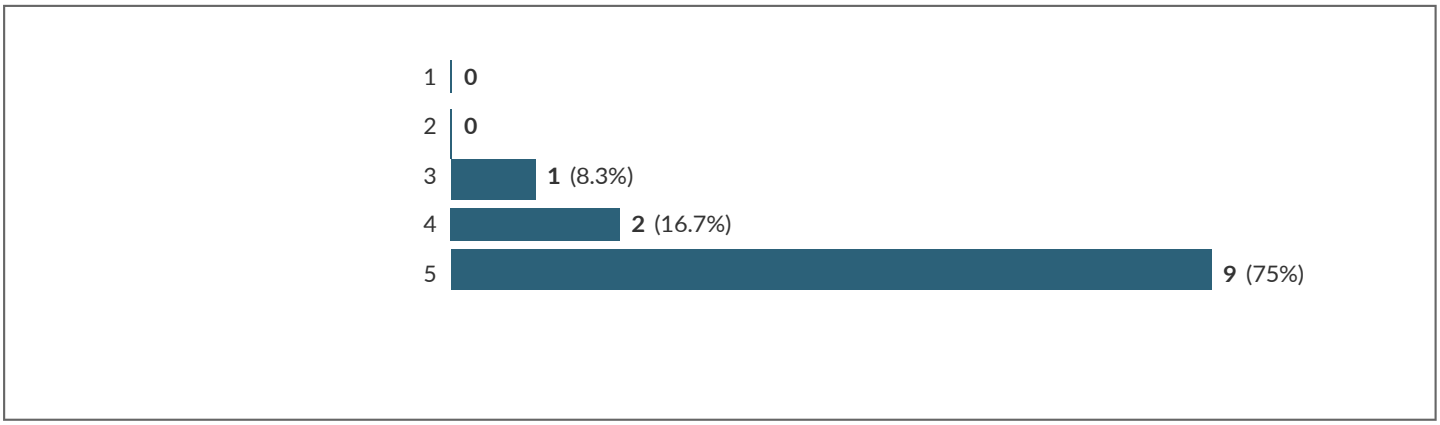
2gether sessions in the early years setting?

7.1 Your enjoyment of the sessions



8 On a scale of 1- 5, where 1 is 'very difficult' and 5 is 'very easy', how easy did you find the Super Communicator tips to understand? (e.g., following your child's lead, pause and wait for your child…)

8.1 How easy were the tips

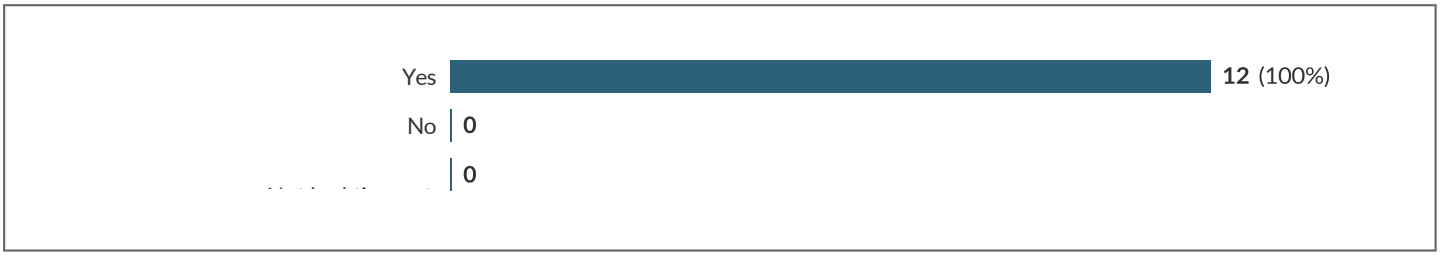


9 On a scale of 1- 5, where 1 is 'very difficult' and 5 is 'very easy', how easy did you find using the Super Communicator tips with your child? (e.g., following your child's lead, pause and wait for your child…)

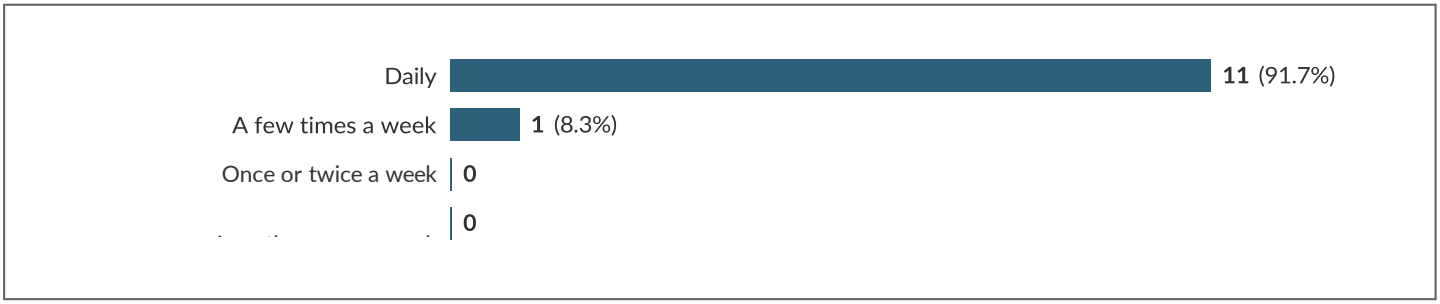
9.1 How easy was using the tips with your child

Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

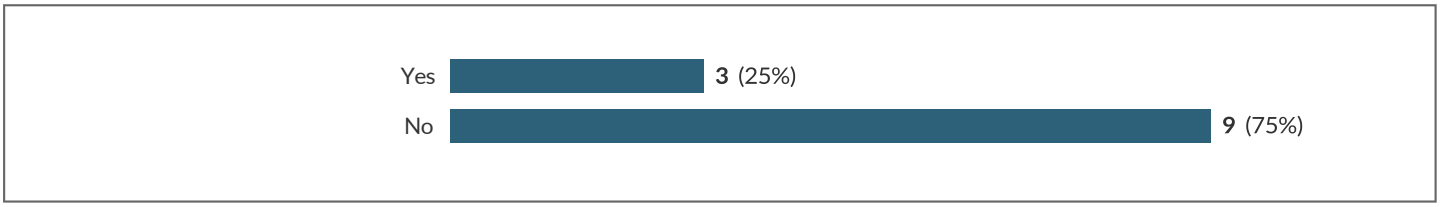
10 Have you been able to use the tips shared in the sessions at home with you child?



10.a If 'yes' how often have you been using them?



11 Have you received any Talking 2gether sessions at home with a member of the Health Visiting Team?



12 How many sessions at home have you had?

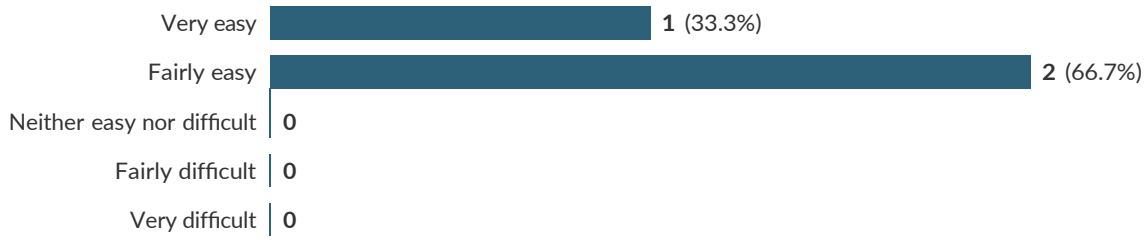
Showing all 3 responses	
4	1074837-1074819-113110995
1	1074837-1074819-113250720
3 so far a think	1074837-1074819-113390095

13 On a scale of 1- 5, where 1 is 'not at all' and 5 is 'a lot', how much have you enjoyed the Talking 2gether home sessions?

13.1 Your enjoyment of home sessions

Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

14 How easy or difficult have you found it to fit in the home sessions?



14.a Why do you say this?

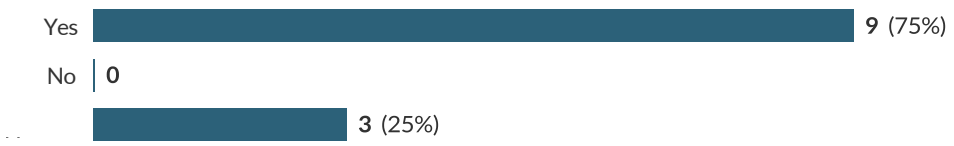
Showing all 2 responses	
We have a very nice health visitor	1074837-1074819-113250720
The 1st session was harder as a have a 2 year old boy aswel so when we were trying to work with [child] she was easily distracted with [sibling] been there or [sibling] would try join in to but when u have a 2 year old and 3 year old they want what the other has so it is harder so other sessions [sibling]'s dad had josh or took him out in able to spend 1 and 1 time with [child] and the nurse practitioner.	1074837-1074819-113390095

15 Do you think Talking 2gether has changed the way you interact with your child?

15.a If 'yes', how?

Showing all 9 responses	
Pausing more often to allow my child to respond.	1074837-1074819-113103310
Learned a lot from these sessions, things like not asking too many questions and instead saying what I see and repeating words Louie says and adding a word to it	1074837-1074819-113110995
Easier understanding of how to address certain things and ways to help understand each other a bit better	1074837-1074819-113239241
My son understands things alot better	1074837-1074819-113250720
Adding words onto sentences	1074837-1074819-113254318
I feel I am more conscious in taking a step back and instead of thinking I could do things for quickness I am more aware of how much my children get from taking the lead in the simplest of tasks.	1074837-1074819-113317164
I'm trying different things with my child and hes interacting more with me in different ways	1074837-1074819-113343877
Just little tips like give [child] 10 seconds to register the information helped and getting down to her level it's not something you automatically think about doing getting down to her level when in timeout yes you would do but speaking to her on a daily basis you wouldn't think to so these tips helped alot.	1074837-1074819-113390095
I'm more aware of what I say and how to say it	1074837-1074819-113622038

16 Do you think Talking 2gether has had a positive impact on your child's language development?

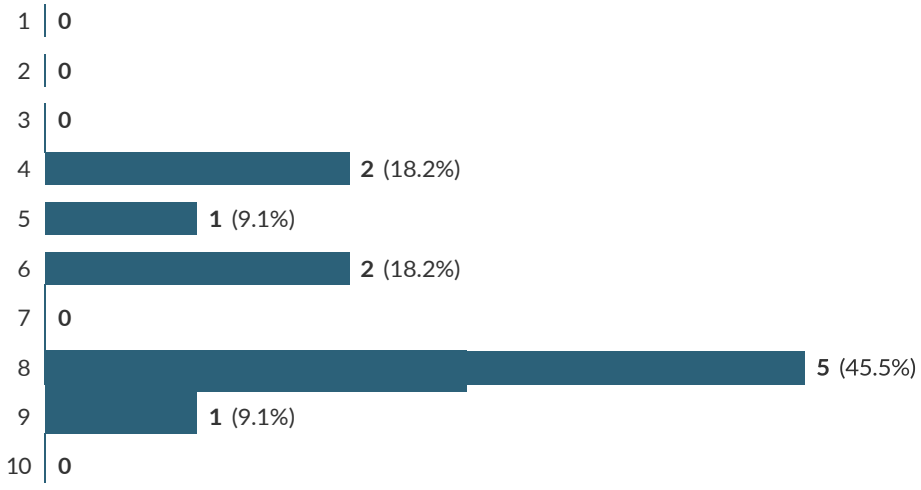


16.a If 'yes', how?

Showing all 9 responses	
Seen a big improvement in [child]'s speech, and a lot of family and friends have also noticed a change and I really do think these sessions have contributed.	1074837-1074819-113110995
My child has been using some of the techniques and it has helped with others understanding her better	1074837-1074819-113239241
He is speaking alot easier now	1074837-1074819-113250720
More social	1074837-1074819-113254318
Saying words more clear	1074837-1074819-113261061
I am trying to not make decisions for them as much, allowing more time for them to make their own decisions resulting in more opportunities to communicate and develop their language.	1074837-1074819-113317164
Saying more words and trying to talk about different things	1074837-1074819-113343877
3 month ago [child] couldn't put 2 words together and was limited with words but now she can put 2 words together and say some small sentences like mam made juice so her speech has improved, she does go to speech therapy to so between both it's helped her improve.	1074837-1074819-113390095
New words used from activity packs	1074837-1074819-113889026

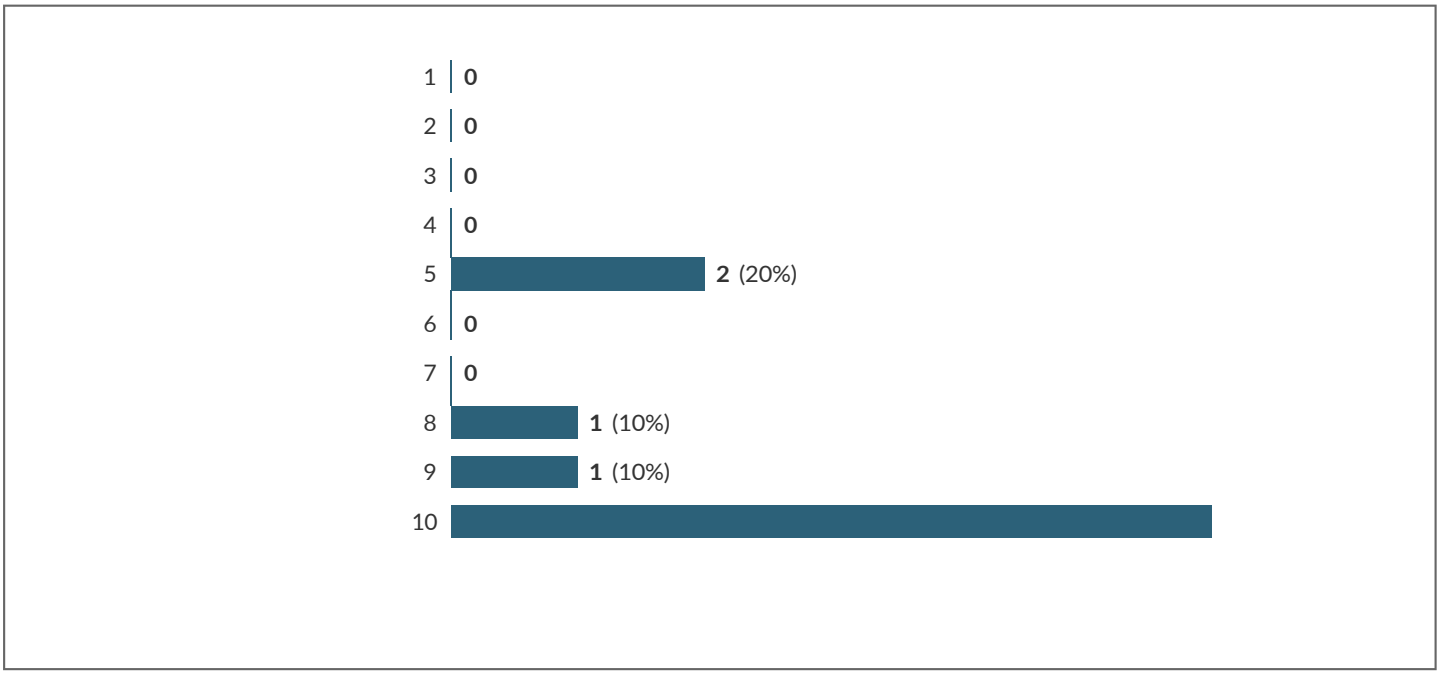
17 How knowledgeable did you feel about how to support your child's language and communication development? (1 is 'not at all' and 10 is 'extremely')

17.1 BEFORE Talking 2gether



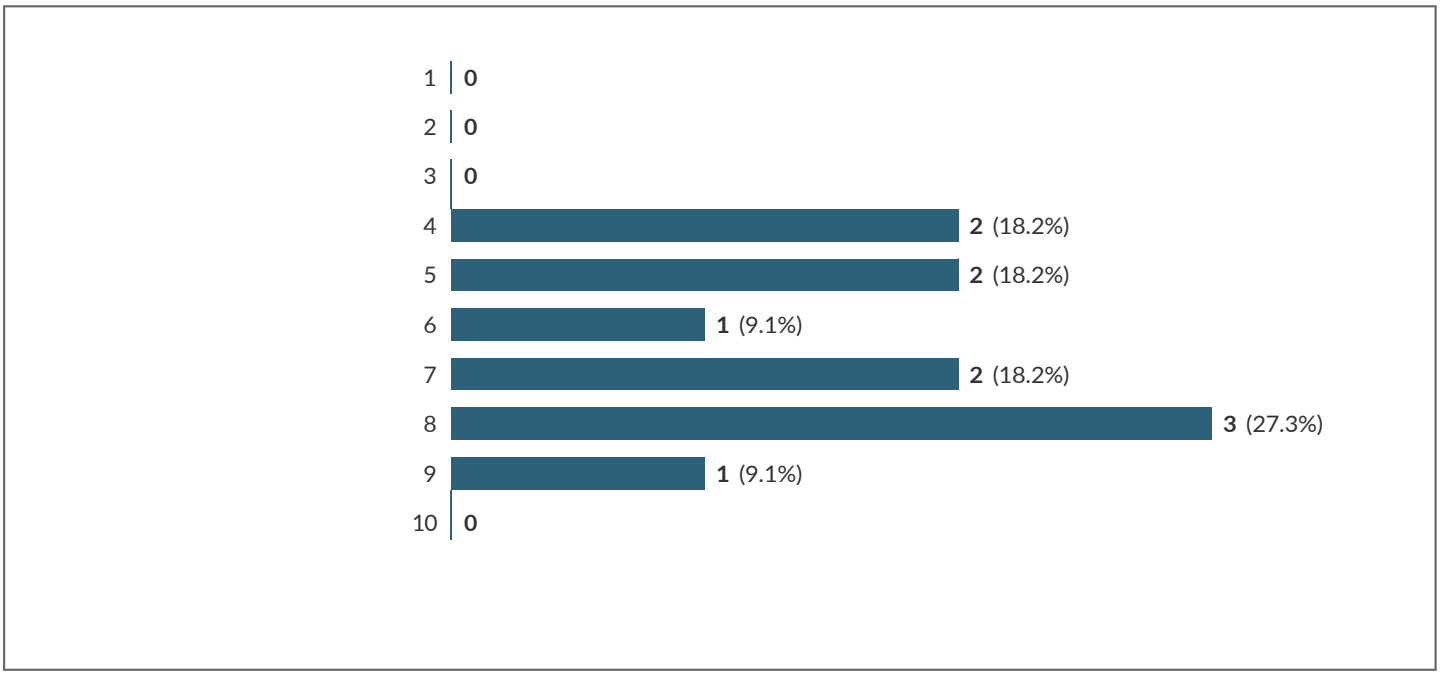
Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

17.2 AFTER Talking 2gether

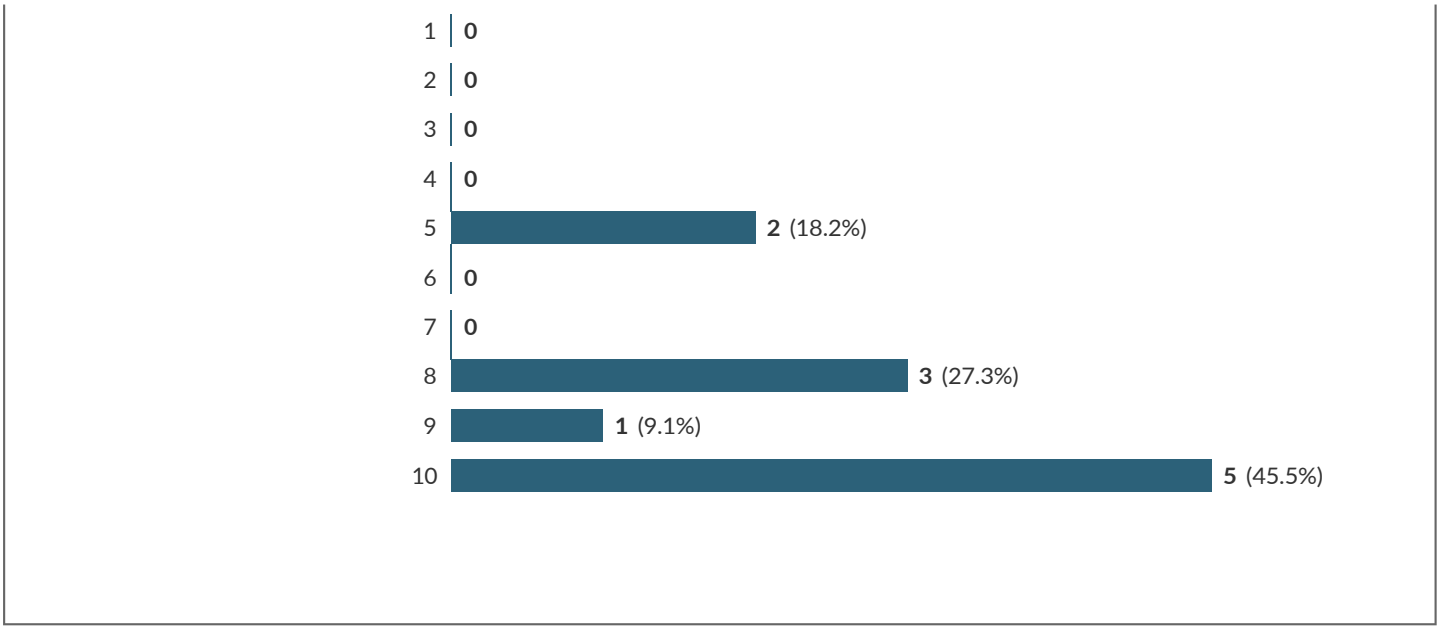


18 How confident did you feel about supporting your child's language and communication development? (1 is 'not at all' and 10 is 'extremely')

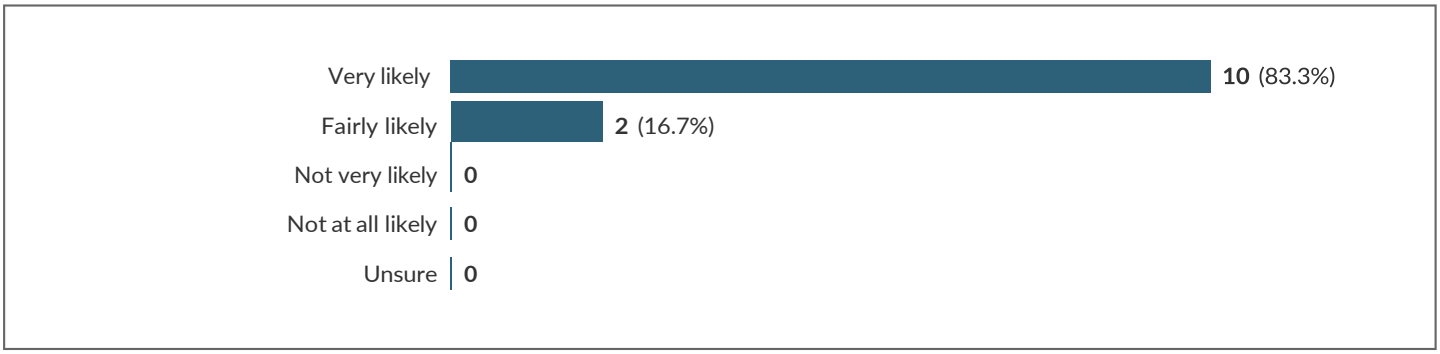
18.1 BEFORE Talking 2gether



18.2 AFTER Talking 2gether



19 How likely are you to continue using the Super Communicator tips in the future?

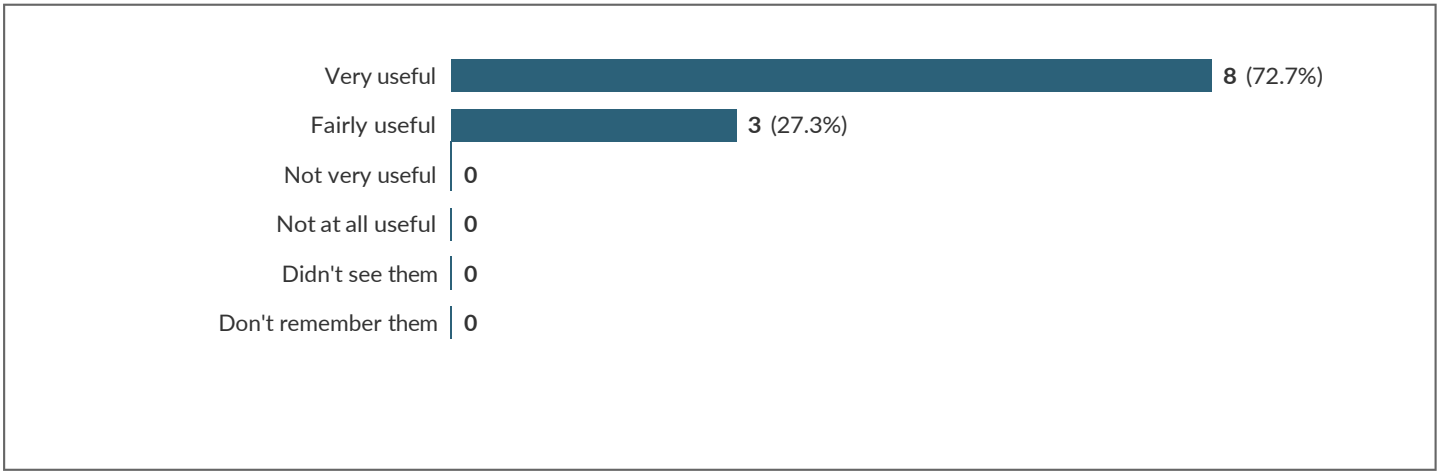


20 Is there anything that Talking 2Gether has not provided that would help you to feel more confident supporting your child's language and communication development?

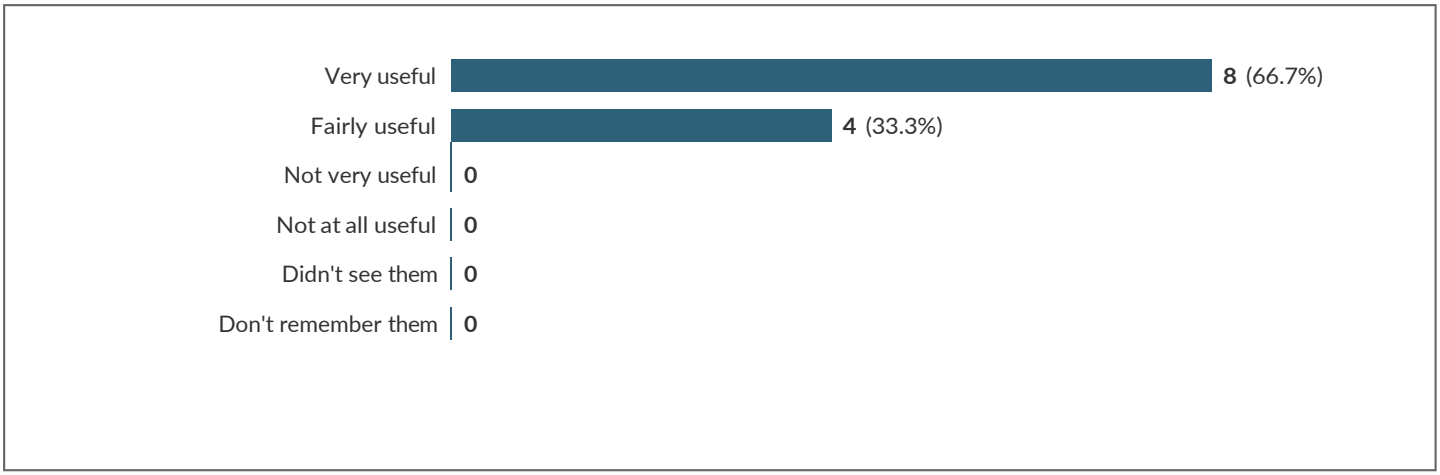
Showing all 2 responses	
No	1074837-1074819-113254318
No a think the tips was very clear as it was repetitive alot so it definitely got the message across .	1074837-1074819-113390095

21 How useful would you rate each of the following programme materials?

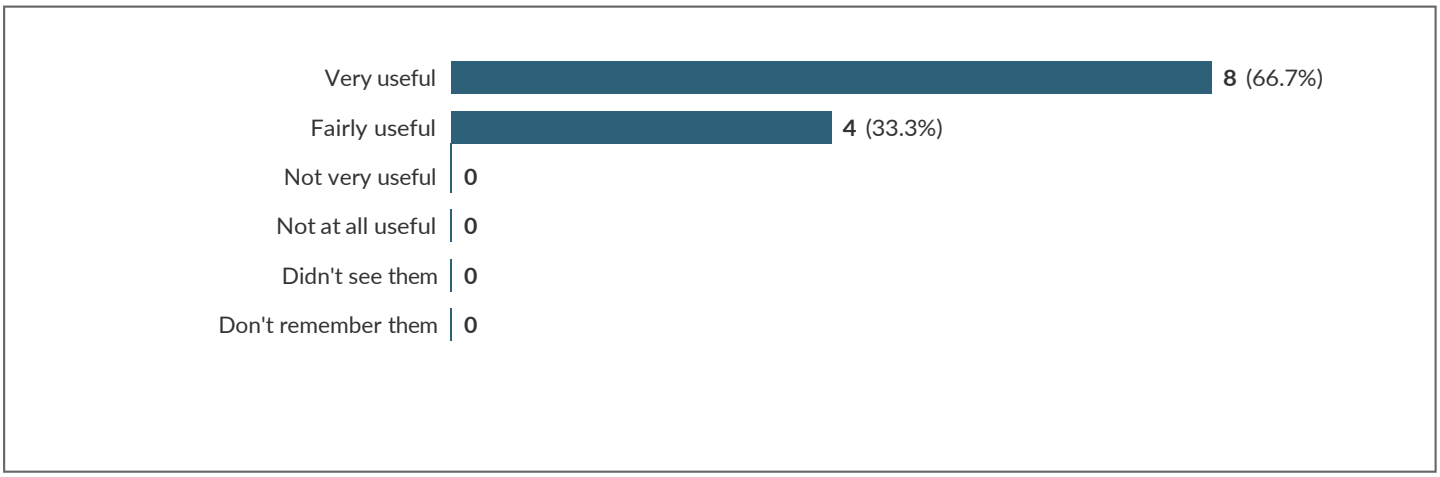
21.1 Talking 2gether presentation slides



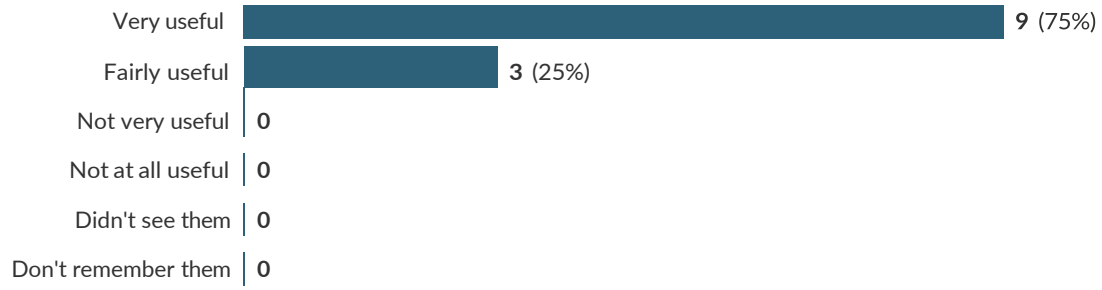
21.2 Session materials: 'Together time' pictures



21.3 Session materials: Goal setting cards



21.4 Take home leaflets



Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

21.5 Take home toys/objects

Multi answer: Percentage of respondents who selected each answer option (e.g. 100% would represent that all this question's respondents chose that option)

22 Are there any other materials we should consider providing for parents/carers in the future?

Showing all 5 responses	
No	1074837-1074819-113239241
N/a	1074837-1074819-113250720
No	1074837-1074819-113254318
No not that a can think of.	1074837-1074819-113390095
Re Talking 2gether presentation slides- 'Struggling laptop- larger to see'	1074837-1074819-113889026

23 If you were to participate in an intervention similar to Talking 2gether again, what would be most helpful to you as a parent/carer? (i.e., is there anything you would change?)

Showing all 5 responses	
Was very repetitive, which made I'll session very similar	1074837-1074819-113098848
N/a	1074837-1074819-113250720
Nothing	1074837-1074819-113254318
The only thing ad change is the repetitive of it and make it more interesting so people do want to attend them.	1074837-1074819-113390095
Examples of fair actions for behaviour	1074837-1074819-113622038

24 Do you have any other comments about any aspect of Talking 2gether?

Showing all 5 responses	
Fairly interesting for both myself and child	1074837-1074819-113103310
N/A	1074837-1074819-113250720
No	1074837-1074819-113254318
I have really enjoyed the Talking 2gether sessions. They have been really insightful and I felt at ease talking about my own experiences.	1074837-1074819-113317164
No a think av covered everything	1074837-1074819-113390095

25 Are you a parent/carer who speaks English as an Additional Language? (English is not your first language)

26 Was an interpreter present at your Talking 2gether sessions?

27 If you received the Talking 2gether home sessions, was an interpreter present at these?

Yes	0
No	0
Not needed	0
N/A	0

28 On a scale of 1-5, 1 being 'not easy at all' and 5 being 'very easy' how easy was it for you to understand the Talking 2gether Super Communicator tips?

28.1 How easy was it to understand the tips

1	0
2	0
3	0
4	0
5	0

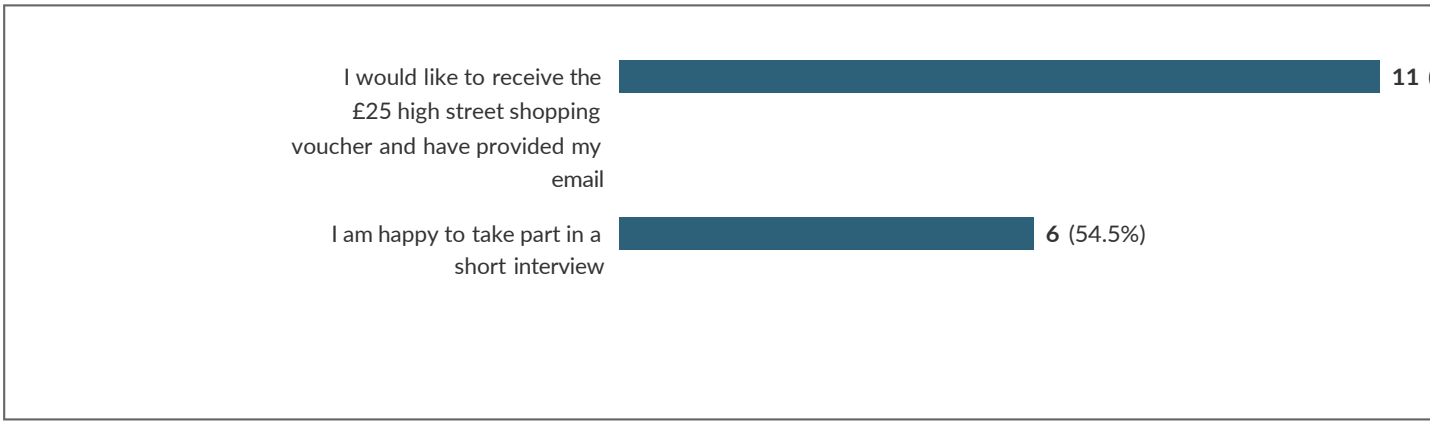
29 Is there anything that could be improved to make Talking 2gether better for you and your child?

No responses

30 Is there any other feedback about Talking 2gether that you wish to provide or we haven't discussed?

Showing all 4 responses	
I think it's a very helpful and knowledgeable thing to offer parents. There's lots of useful information that I hadn't even thought about that could and have helped me massively.	1074837-1074819-113110995
N/a	1074837-1074819-113250720
No	1074837-1074819-113254318
No nothing.	1074837-1074819-113390095

31 Your email address:

Showing all 12 responses	
	1074837-1074819-113098848
	1074837-1074819-113103310
	1074837-1074819-113110995
	1074837-1074819-113239241
	1074837-1074819-113250720
	1074837-1074819-113254318
	1074837-1074819-113261061
	1074837-1074819-113317164
	1074837-1074819-113343877
	1074837-1074819-113390095
	1074837-1074819-113622038
	1074837-1074819-113889026

31.a Please tick the boxes below to indicate your agreement