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D4.3: Overview of quality monitoring systems and results of moderator analysis

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Executive Summary

This report includes a comparative review of Early Childhood Education and Care (ECEC) quality monitoring and assurance systems in 11 European countries. As differences in quality monitoring and assurance across Europe exist, the study examines the links between European countries’ systems of ECEC provision and quality monitoring and assurance, and possible consequences for the effects of ECEC on child development.

The report is part of the project Curriculum Quality Analysis and Impact Review of European Early Childhood Education and Care (CARE), funded by the European Union’s 7th Framework program (THEME [SSH.2013.3.2-2] Early childhood education and care: promoting quality for individual, social and economic benefits). The task reported on here is part of work package four (WP4), entitled Impact of ECEC in short, medium and long-term. Within WP4, this deliverable (D4.3) entails a comparative review of quality monitoring and assurance systems across Europe.

The comparative review resulted in a typology focusing on four different main aspects: ECEC system characteristics (such as governance structure, funding system and legal framework), curriculum, staff and monitoring. The typology is grounded on theoretically founded assumptions and empirical evidence regarding effects on process quality. In line with other reports emerging from the CARE project, and with the common research practice, we adopted a structural-processual understanding of quality in ECEC. The report synthesizes findings regarding ECEC quality monitoring and assurance systems by pointing out the specific links between ECEC system characteristics, curriculum, staff and monitoring, and indicating connections between these four main aspects of ECEC and ECEC process quality.

Besides the typology, the report also contains detailed case studies for four countries: Germany, England, Greece and Norway. With the help of the case studies, the different aspects of the typology will be described in an interrelated way.

ECEC can only reach its goal to promote development and well-being in children, and contribute towards more equal chances and opportunities in society, if participation in ECEC and good quality of ECEC are assured. This report aims to contribute towards a better understanding of how ECEC systems in Europe currently work towards ensuring accessible good quality early childhood education and care and what could be improved to ensure that ECEC can reach its potential.

ECEC System Characteristics

From a policy perspective, an important question is how to set-up an ECEC system that ensures access and good quality for all children. In the European countries taking part in this study, we see high variation between types of ECEC services that exist alongside each other, with separate organisation and management systems, differences in terms of their emphasis on care or education, the levels of staff qualification, the age groups served, as well as opening times, and costs to parents. While it can be argued that variation across the type of services provided is better suited to meet the different needs and preferences of families, high variation also has disadvantages which relate to issues of quality and access.

High variation between services makes it more difficult to support and ensure good quality of ECEC experience for all children. Complex systems, with services that work in many different ways, risk more division in their understandings of the values and practices in ECEC. Research evidence has shown that quality varies between different types of providers (e.g. Mathers, Sylva, & Joshi, 2007; Slot et al., 2015a). Most of the research on the benefits of ECEC for children’s development stems from centre based provision. However, in some countries in Europe, home-based care arrangements, and informal care arrangements are very common, particularly for the under-threes. Research evidence on the quality or effects of these types of providers is mixed, but it is certainly true that they are less-well regulated and supported. In addition, many children access multiple care and education arrangements over the period of their preschool years, often consecutively, but they can also have more than one childcare arrangement in place simultaneously.
(for example, a mix of informal and formal arrangements to reduce costs or cover long working hours). This affects the continuity of children’s experiences. So far, little research exists about the effects of multiple education and care arrangements for young children, but some studies indicate that there are risks for children’s development and wellbeing (e.g. Bowes & Wales, 2009; Tran & Weintraub, 2006; Cryer, et al., 2005; De Schipper, Tavecchio, Van IJzendoorn, & Linting, 2003). While more needs to be known about children’s participation patterns in ECEC services, we can recommend here, that it is essential to put mechanisms in place to ensure continuity and good quality across all types of providers (e.g. minimum quality standards, common curriculum frameworks, educator training, and monitoring systems).

Parental leave policies are another way to support the continuity of good quality care for children, if there is no gap between parental leave and access to formal ECEC for babies and toddlers (see Naumann, McLean, & Lloyd, 2013). In many of the European countries we studied, this gap exists because legal entitlements to ECEC under the age of three are relatively rare, and do not link up with parental leave policies. Where parental leave policies are more generous and flexible, this means little demand for ECEC for children under a certain age – for example, for under-ones. Considering higher costs of ECEC for infants and more challenges in providing good quality group care for this age range, it seems essential to ensure good parental leave policies so that the use of childcare for families with infants is not mainly motivated by the need to cover (long) parent working hours.

Legal entitlements do not necessarily mean that access to ECEC is free. Unconditional free access is not usually given to children under the age of three, and usually relates to a part-time place (between 10 and 28 hours). Thus, parents are expected to contribute towards the costs. In the countries taking part in this study we found marked differences in terms of public expenditure on ECEC, and relatedly, differences in terms of parental costs. Public expenditure and parental costs also vary within countries between different types of providers, with private provision and ECEC for the younger age groups relating to higher costs for parents.

Differences in costs to parents mean that access to ECEC, or to certain types of ECEC providers, is restricted to certain populations. This is a matter of concern because it risks participation, and more segregation. Participation and enrolment are crucial issues to ECEC policy. The success of ECEC provision depends on its availability, and on the participation of children, in particular those from more disadvantaged backgrounds. Participation rates for under threes vary greatly in CARE project countries, with some countries having very low rates. Even though government investment in social inclusion and priority education programmes is increasing, relatively little information on variation in participation rates between children with diverse socio-economic, lingual, and ethnic backgrounds can currently be found in international reports. Based on available information however, children with more disadvantaged backgrounds have lower participation rates (European Commission/EACEA/Eurydice/Eurostat, 2014). Recognising the need for good quality ECEC, particularly for the more vulnerable families, Europe increasingly puts policies in place to reduce costs for those families in need.

Targeted entitlement is one important mechanism that supports ECEC participation for more disadvantaged populations. Where targeted offers are made however, systems need to ensure that funded children are not separated from children whose parents are paying, for example, by having access to different types of provisions. Risks are high that there might be a division between private and public providers, and those offering full-time programmes (for working parents) and part-time programmes (for funded children). Segregation across ECEC services reduces the likelihood of providing the degree of social mix that is beneficial to children and their development (e.g. Sammons, Sylva, Melhuish, Siraj-Blatchford, Elliot, 2003b; Schechter & Bye, 2007; de Haan, Elbers, Hoofs, & Leseman, 2013). In addition, it challenges the provision of good process quality in those groups with a high percentage of disadvantaged children (e.g. Early et al., 2010; Kuger & Klucznoik, 2008; Toyan & Howes, 2003; Slot et al., 2015a). To address issues of segregation across ECEC services, it needs to be documented more explicitly which children participate in which type of ECEC. Participation rates have to be assessed in relation to the sufficiency of ECEC provision. Demand seems higher than supply in many countries for the younger age-group (under-threes), and shortages can be higher in some regions (e.g., rural areas). Thus, while access to ECEC has been improved in many ways over the last decades, there are still gaps that need to be addressed. However, strategies that increase access and availability need to go
hand-in-hand with measures that ensure quality. To ensure a more even level of quality across providers, minimum standards and regulations concerning the provision of ECEC, are put into place.

Ratios, but also group sizes and space, are commonly addressed by regulations. While there is variation on those regulations between countries, there is a general trend to increase ratios and group sizes with the ages of the children in a group. Group sizes and ratios have an impact on pedagogical practice and need to be considered as one mechanism to support good quality. However, a closer look at recent studies shows no clear effects of group size and teacher-child ratio on child outcomes, particularly across European countries (see review by Slot, Leseman, Verhagen, & Mulder, 2015). It has been argued that inconsistency in results may occur from differing structural quality characteristics across countries and contexts (e.g. Slot et al., 2015a). We found that different types of ECEC providers and systems operate widely differing combinations of qualifications, ratios, and operational structures in many countries, and those different features of early childhood provision interact with each other, influencing process quality and child development in combination, rather than as individual characteristics. Policy-makers need to consider the system as a whole when developing policy solutions.

Regulations on support measures for disadvantaged children exist in most countries. Strategies to support access to ECEC services commonly involve lowering costs for parents. Removing financial barriers for more disadvantaged families is an important measure to ensure universal ECEC systems that facilitate equality in access to services. However, language barriers, knowledge of procedures, waiting lists, or differences in values and beliefs are other issues which are related to lower participation rates that need to be addressed (Eurofound, 2012).

Above all, access to good quality care and education matters, and it matters to all. In universal ECEC provision, good quality for all means that those in need can receive more support. If ECEC is to help to close the education gap between more disadvantaged and affluent families, a curriculum may need to put extra support mechanisms into place which assure pre-academic skill development for those at risk of falling behind, and language development for migrant and ethnic minority children (Leseman & Slot, 2014). Regulations for support measures for disadvantaged children exist in most of the countries in our study; they often address language learning, and other learning/development support measures. These support measures are important. However, little is yet known of how to best design such support measures, and how to integrate targeted measures of support in everyday practice of universal ECEC services.

Curriculum and Process Quality

Another key factor influencing process quality is curriculum. Curriculum frameworks aim to support curriculum implementation to facilitate coherent pedagogical approaches and assure more even quality of ECEC for all children, thereby maximizing gains from ECEC attendance (European Commission/EACEA/Eurydice/Eurostat, 2014). The picture of curriculum frameworks in the European CARE project countries is complex (Sylva, Erekys-Stevens, Aricescu, 2015). While there is a trend towards a more integrated system, with a common standard curriculum for all types of provision, this is not yet realised in many countries, and splits exist between frameworks for different age-groups and different types of providers. Where there are gaps in curriculum frameworks, these usually concern the younger groups (Sylva et al., 2015). One of the challenges of curriculum development is finding a balance between a curriculum for the younger children that harmonises with the framework with older children in bringing together diverse perspectives and methods of both, while remaining sensitive to the characteristics of babies and toddlers.

The lack of a shared conceptual framework for the younger age-group goes hand in hand with a lack of clarity (and more divergent views) on the way learning is conceptualised, especially in relation to intellectual goals (e.g. Broekhuizen, Leseman, Moser, & van Trijp, 2015; Slot et al., 2015a). Despite the broad agreement on the value of a balanced approach where sensitive, responsive interactions are combined with a focus on learning and intentional pedagogical strategies, CARE observed a lack of clarity in how to best implement this balanced approach (e.g. Slot et al., 2016; Sylva et al., 2015). In addition, and relatedly, there are differences in the focus
that is given to the learning of skills in pre-academic/academic subject areas. This tension becomes particularly apparent when we think about a good curriculum for children with more disadvantaged backgrounds. Early informal learning is related to pre-academic skills, and therefore an important factor in preparing children for their later learning in school (e.g. Brooks-Gun, & Markman, 2005; Scheele, Leseman, Mayo, & Elbers, 2012). Families differ strongly in how much they support young children in their development of pre-academic skills. Thus, early childhood provision has an important role to play in reducing the achievement gap between disadvantaged children and their peers. More needs to be done to address this task in a balanced way.

Finally, curricular frameworks are constructed to be open and flexible enough to adapt to each context, and the individual child. In their daily practice, educators are required to apply the general guidelines provided, using their knowledge and analysis of the local context and the specific situation. Partnerships with parents and the wider community, observations and documentation of children’s experiences and learning, and continuous evaluation of practice are commonly stressed as important elements supporting practice that is in tune with children’s interests and needs, the specific situation, and the context. Thus, curriculum implementation is a complex task, that requires a knowledgeable and skilled workforce, that is well supported. An ECEC system that wants to assure good quality implementation (and thus good process quality) needs to put in place systems that support educators and local providers in their curriculum implementation.

**ECEC Staff**

As stated above, staff working in ECEC constitute a crucial aspect of high quality ECEC. Hence, this report provides information on important indicators describing the ECEC workforce in the different countries.

The first indicator concerns the main categories of staff in the 11 countries. Three main staff groups are distinguished (according to European Commission/EACEA/Eurydice/Eurostat, 2014) to facilitate comparison between countries: educational, care, and auxiliary staff. Educational staff usually have the highest qualification requirements (most often at tertiary level), while care staff are usually trained at upper secondary level, and auxiliary staff are mostly not formally qualified at all. In general, there is a trend for ECEC becoming more academic in Europe. Although in most of the countries, younger and older children are cared for by educational staff, in a few countries, there is a strict division between the age groups, with the younger children being attended by care staff only. Since the importance of the first years in life for later learning and development is widely acknowledged, providing high quality ECEC to this age group should be a major goal. Furthermore, there is evidence for the positive impact of higher qualified staff on ECEC process quality (e.g. Mathers et al., 2007; Melhuish et al., 2010). Hence, strong efforts should be made to align the required staff qualification for both age groups at a tertiary level.

While there are clear qualification requirements for staff working in centre-based care throughout all the countries, initial qualification requirements for childminders working in home-based care are lower and, in the case of Norway, not stipulated at all. This is contradictory to the fact that home-based care plays a very important role in most European countries especially for children under three year-olds. If home-based care is treated as an equivalent alternative for centre-based care in Europe, there is an urgent need for higher standards regarding staff qualification or training.

Heads of centres often need to fulfil at least the minimum required qualification for educational staff working with older children, which usually means a bachelor degree in half of the countries. For younger children, in some countries, an upper secondary level education is sufficient. In contrast, Portugal and Italy (with regional differences for the younger children) require centre heads to hold a Master degree. In the majority of the countries, headship training as an additional requirement is not stipulated, pointing to a lack of understanding for the specific tasks of centre heads and the specific competencies they require. Research from England and Germany has drawn the attention to the importance of a high qualification and headship training for centre heads (e.g. Ballaschk & Anders, 2015; Mathers et al., 2007; Melhuish et al., 2010).
ECEC teachers’ statutory salaries generally depend on the amount of training, as well as the length of work experience. They vary greatly between the 11 countries included in this report and generally increase with work experience, although the rate of the increase varies widely between countries, as well. In most of the countries in which a university degree is required for preschool teachers, they also earn the same amount as primary school teachers.

Salaries of staff working in ECEC are often associated to the discussion about gender balance in ECEC. One idea is that increasing the average salary levels in the field and making it more lucrative for potential workers will help draw more male professionals into ECEC. However until now, there is no empirical evidence supporting this hypothesis. A German study has shown that the share of male students in newly introduced university bachelor courses is the same as in traditional vocational schools for ECEC staff (Keil et al., 2013; Rohrmann, 2012). The information collected for this report shows that the goal of increasing the percentage of male workforce to 20% for European countries set by the European Commission Network on Childcare in 1996 (Peeters, 2007) is far from reached. Despite minor differences between countries, ECEC remains a field with predominantly female workforce.

In terms of continuous professional development, detailed and insightful work has already emerged from the CARE project report “Comparative review of professional development approaches” (Jensen et al., 2015). The authors describe two opposing approaches to continuing professional development. Within the first approach, the responsibility for continuing professional development lies with the individual in rather decentralised systems with little or no regulation. The second approach, on the contrary, gives responsibility to national or local authorities in the countries where systems of continuing professional development were identified. In the report at hand, the degree to which professional development is compulsory for staff in ECEC was considered to characterize continuing professional development in different countries. In most of the countries in our sample, continuing professional development is compulsory to some degree (i.e. required by the law or defined as professional duty in steering documents such as curricula, frameworks or working contracts) for lots of ECEC workers. However, Finland is the only country where it is compulsory (by law) for both educational and care staff, as well as for childminders working in home-based provision.

Highly unregulated and decentralized ECEC systems are among the numerous challenges for monitoring within this field.

**ECEC Monitoring Systems**

As monitoring constitutes a fundamental dimension for promoting quality in ECEC services, one purpose of this report was to present and reveal critical parameters of the 11 countries' monitoring systems that participate in the CARE project. Particular reference is made to the processes that refer to selected quality indicators described and analysed in the next sections.

To elaborate on the monitoring system of each country, several questions guide data collection on the basic aspects of the monitoring system, namely: (a) regulation and organization, (b) objectives, (c) frequency, (d) methods and practices, (e) use of results and consequences of monitoring processes in each country.

For the countries selected as case studies, some additional questions concern: (a) arrangements for disadvantaged groups (cultural and linguistic background), (b) challenges and priorities/future goals, (c) basic developments in the last 3-5 years and (d) evidence linking monitoring results with process quality or/and children outcomes. Information on these aspects is included in the presentation of the case studies.

With regard to the selected indicators, the dimensions specified were: (A) System: basic regulations about teacher-children ratio, group size and space considerations, (B) Curriculum and Pedagogy: curriculum implementation, pedagogical interactions, children’s outcomes and parental involvement and (C) Staff Development: staff qualifications, in-service training and composition of the working group.
A number of inconsistencies among the different sources, the fragmentary information provided in some texts, the absence of data for some countries etc., were corrected based on the up-to-date information provided by the CARE project partners through relevant templates. Still, with regard to the French and the German Communities of Belgium there were very few data that could be confirmed and only the information for the Flemish Community was included in the chapter concerning monitoring systems. Moreover, it should be noted that at the time of data collection, ECEC in some countries such as Italy, the Flemish Community of Belgium, Poland, underwent new developments due to changes in legislation, so information provided about monitoring reflects this transition phase.

Information is organized in two chapters, the first is concentrated on the basic characteristics of the monitoring systems and the second on the monitoring processes that concern the selected quality indicators in each of the CARE countries. A careful examination of the ECEC monitoring systems revealed that countries seemed to employ different systems of monitoring, indicative of different levels of centralization/decentralization of governance and supervision even within the same country, which was particularly evident in countries with a "split system" of ECEC provisions (European Commission/EACEA/Eurydice/Eurostat, 2014).

ECEC services in Belgium, Greece, Italy, Poland and Portugal are representative cases of a "split system", with regard to provisions being delivered in separate settings for younger and older children (usually 0 to 3 or 4 and 3 or 4 to 6) while the responsibility for governance, regulation and funding is divided between different authorities (European Commission/EACEA/Eurydice/Eurostat, 2014). Greece, Italy and Poland are the most representative countries of this model, since different processes are employed for the childcare sector (for younger children) which is highly decentralized with local authorities having a critical role and the preschool education provision, which is governed and supervised centrally by national authorities under the auspices of the Ministry of Education. In Portugal, although there are different supervising bodies for childcare and preschool education provision, monitoring is regulated, organized and funded nationally for both sectors by the corresponding authorities, the Ministry of Social Welfare and the Ministry of Education respectively.

Finland and Norway employ a “unitary system” where ECEC provision for all 0-6 years old children is delivered in settings that provide care and education services which are regulated, funded and supervised by the Ministry of Education. Whereas, in Finland, quality is monitored at a regional/municipal only, rather than a national level; in Norway monitoring is regulated at national, regional and local level. In both countries there are national guidelines and regulations, as well as national monitoring agencies that organize and supervise monitoring processes at all levels.

The development of networks among providers is typical in Finland, Norway and Denmark, a type of system that supports the establishment of common quality standards among settings and facilitates comparison and dissemination of the results of self-monitoring to various stakeholders. Still, networks are organized centrally and are partly financed by national authorities in Norway, whereas in Finland and Denmark they are organized and supported by each local authority.

Denmark, England, Germany and the Netherlands have a mixed model of “both unitary and separate provisions” (although the authority that is responsible for ECEC settings management is the same, the regulations concerning the provision for younger and older children may differ in terms of staff qualifications, curricula and funding arrangements). Among the four mentioned countries, England seems to have the most centralized monitoring system as it is nationally regulated by the Office for Standards in Education, Children’s Services and Skills (OFSTED). In Germany, monitoring is regulated at national and federal level. The Netherlands seem to follow the patterns employed by countries representative of a “split model” since monitoring is delivered by local authorities (municipalities) for the childcare provisions and by the Educational Inspectorate for the providers with educational programmes.

Regarding the objectives of monitoring, the majority of the CARE countries seem to focus on: accountability, quality assurance, improvement of ECEC services and ensuring compliance with regulations. Promotion of compatibility between national standards and local recommendations and implementations, seemed important for
Italy. Informing policy makers and guiding decision-making seemed critical for the Flemish Community of Belgium, Norway and Finland. A shared understanding of ECEC among different stakeholders was reported for Finland. England also seemed to give emphasis to parents’ participation in evaluation of quality and ensuring the safety of children, among other objectives. Italy, Portugal and the Netherlands give emphasis on improvement of pedagogical and/or educational quality, while the Flemish Community of Belgium and the Netherlands on the promotion of professional development. Finally, Germany focused on the importance of monitoring for maintaining subsidies.

With reference to the monitoring methods and practices, there is a mixture of internal and external processes, mainly depending on the quality dimension/indicator specified.

Monitoring of the basic regulations concerning structural features (e.g. teacher-children ratio, group size, space etc.) is conducted mostly by external agencies/organisations. Typical examples are Denmark, England, Germany and Norway. In most countries there are also internal evaluative procedures conducted by educational/pedagogical/care staff or heads. Evaluations are usually applied during the registration period and within the general framework of monitoring in each country.

Monitoring of quality of pedagogical/educational activities and work (curriculum implementation, pedagogical interactions and children’s outcomes) is mostly carried out internally, especially for the childcare provisions in all countries. Greece could be considered an exception since supervising of the pedagogical work in child care centres is only regulated for the private sector. In Italy, monitoring of pedagogical quality in childcare provisions is not mandated but there are continuous internal participatory processes on evaluation that engage different stakeholders. For the preschool services, monitoring is mandated but still internal using self-evaluations.

For the preschool settings and those providers with educational programmes external evaluations are usually applied, except Italy and Germany where in some cases it is not mandated but recommended. In Greece, there are no official assessments on pedagogical quality in kindergartens but School Advisors have the responsibility to supervise pedagogical work. In the Flemish Community of Belgium, Denmark, Finland, Norway and Poland there are both internal and external checks.

In the Netherlands, mandated monitoring processes exist only with reference to targeted educational programmes and are carried out by external organisations. Monitoring of children’s outcomes and pedagogical interactions is not specified in Poland. In Finland, apart from monitoring of curriculum implementation, which is officially regulated for the preschool services, the evaluation of other indicators of pedagogical quality is suggested rather than mandated. With regard to parental involvement in Poland, it is neither regulated nor monitored for the childcare sector. In Finland, although evaluation of parents’ engagement is not obligatory it is encouraged.

In most countries staff development is monitored externally. There is no systematic monitoring and evaluation of professional development in Italy, though. Qualifications are checked usually during recruitment. In Greece, kindergarten teachers should pass national examinations carried out by the Supreme Council for Civil Personnel Selection (A.S.E.P.) to enter the profession. A similar procedure is also applied in Denmark. In Germany, monitoring staff qualifications and composition of the working team is mandatory. In the Netherlands, staff training is not mandatory but monitoring staff qualifications and composition of the working team is. In Poland, monitoring of preschool teachers’ professional development is mandatory. In Portugal, training courses and workshops are accredited by a national organization after checks. In Finland, although monitoring of in-service training is not mandated, the government established centres of excellence on social welfare in 2002, to convey expertise to municipalities on this topic and ensure that training content is consistent and relevant. In Greece there are some centrally organised in-service programmes for the kindergarten teachers but there are no evaluation processes mandated.

With reference to the use of valid and reliable tools in the monitoring processes, some countries have developed their own instruments for either external or internal processes, such as the Flemish community of Belgium, England, Italy and Poland. In England, some providers use ready-made tools such as ECERS and ECERS-R, while other countries, such as Italy and the Netherlands, have developed variations of these well-known
instruments. In Italy, these adaptations were produced in collaboration with universities and researchers. In the Flemish Community of Belgium, a short version of the CLASS scales (Toddlers/Infant) is included in the new “pedagogical framework” of evaluations.

**Frequency of monitoring** is dependent on the indicators of quality under examination and local decisions in the decentralised systems. In most cases, there are annual external evaluations and continuous processes for the internal evaluations. In the Flemish Community of Belgium, there are a number of not formerly announced evaluations, while inspections are conducted once every 3 years; whenever there is a need, or according to previous results. In the Netherlands, evaluations are conducted annually, based on self-reports by providers. Observation-based inspections are also applied in cases where there are indications of insufficient performance, or after demand for provisions with educational programmes.

The results of monitoring are used in different ways. Most countries use data to inform different stakeholders, encourage discussions, guide policymaking and promote quality and improvement in the specified areas. In the Flemish Community of Belgium and in some areas in Germany, monitoring is linked to distribution of subsidies. In Portugal, there is emphasis on suggestions to address shortcomings. The closing down of the ECEC setting is an option in cases of extreme violations in the Flemish Community of Belgium, Norway, England and the Netherlands. In Denmark, the main consequence of poor evaluation outcomes seems to be parental decision to move to another provision.

It could be argued that the examination of the monitoring systems of the 11 CARE countries identified different trends and positions concerning quality and quality assurance. Describing monitoring processes at the organizational level, and with regard to specific indicators of quality, revealed that in most countries, even if the organization of ECEC was similar, there were different approaches to monitoring and especially regarding indicators. This may be explained by policy-making giving priority to different aspects of quality, and having different orientations toward provisions, care or/and education.
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