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| **Talking Time© Evaluation Study**  **INFORMATION FOR PARENTS & CARERS** |
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**We would like to ask for your permission to   
include your child in the *Talking Time*© evaluation study.**

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| **What is the Talking Time evaluation study?** |

Your child’s school or nursery is taking part in a project using the *Talking Time*© programme. *Talking Time*© includes activities and games designed to develop children’s speaking and listening skills. These skills are important to help children to learn to read and write, and to become confident and successful learners.

Research has shown that *Talking Time©* works to support children’s speaking and listening. We know young children enjoy the activities and are keen to join in. Our new evaluation study aims to find out more about the impact of *Talking Time©* on children’s language skills. It is funded by the Education Endowment Foundation (EEF), the Nuffield Foundation and four Early Years Stronger Practice Hubs (SPHs) (Liverpool City Region & Beyond, REACH Out, Thrive Together and A Brighter Start).

Around 130 schools and nurseries will take part. Half will receive training to help them use *Talking Time*©*,* beginning inNovember 2024. They will use the programme in the nursery until June 2025. The other half will receive a thank you payment which they can use to buy *Talking Time*© materials and training later. The schools/nurseries chosen to use *Talking Time*© for this study will be decided at random.

If your child’s school/nursery is chosen to use the *Talking Time*© programme, your child would take part in the activities to develop speaking and listening skills. These would take place in small groups twice a week for the spring and summer terms 2025. The activities will be led by your child’s usual staff, last around 15 minutes and take place during regular nursery/class time.

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| **What will be involved for your child?** |

Whether or not your child’s school/nursery is chosen to use the *Talking Time*© programme, we would like to ask your consent to include your child in three parts of the evaluation study:

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| Speech Bubble icon PNG and SVG Vector Free Download**Language assessments (audio-recorded):**  We would like to capture the language skills  of children in your child’s class or room using  short assessments based on games and pictures.  For example, we might show your child a picture of a ‘snake’ and ask them to name the object. We will then record if the child can identify the ‘snake’. To capture children’s language accurately we will audio-record the assessments. We will collect this information in all schools/ nurseries before *Talking Time*© starts (Autumn 2024) and again at the end (Summer 2025). We want to see how much children’s language skills improve in schools/ nurseries that used *Talking Time*© compared with those that did not, to see what difference it made. |  |
| 1. Radio microphone with solid fill**Audio-recording of story groups:**   We would also like to find out if using *Talking  Time*© changes the way staff talk with children.  To do this, we may ask nursery staff to record themselves reading two stories with a small group of children before they start the programme and again at the end. We will compare the recordings to see what difference *Talking Time*© made (if any). |  |
| 1. **Video camera with solid fillVideo recordings of Talking Time groups:**   Staff using *Talking Time©* will have support  from an expert mentor. As part of this, they will create video recordings of themselves leading  three of their routine *Talking Time©* sessions with small groups of children in their usual class/room. Staff will discuss these videos with their mentor to help improve how they support children’s speaking and listening skills. Videos will also be used to support the evaluation by finding out how staff deliver the programme. |  |

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| **We would like to include your child in the evaluation and hope you will allow them to take part in the language assessments and recordings. You can give consent for some parts and not others.** **You can ask questions before deciding whether to give your consent.** |
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**If you are happy for your child to take part**: please fill in the consent form attached to this leaflet and return it to your child’s school/nursery**.** You can give consent for some parts and not others. For example, you could give consent for your child to take part in the assessments but not the audio recordings of story groups. If you agree but change your mind later, you can withdraw your consent to your child’s participation at any point of the study, without giving a reason. To do this, contact your child’s school/nursery or the evaluation team (their contact details are on the FAQ sheet included with this letter). On the consent form, there is also a question about which languages you and your family speak at home. Please let us know by ticking one of the boxes.

**If you are not happy for your child to take part:** you do not need to do anything. Choosing not to give consent has no impact on the usual care your child receives, or on whether the school/nursery uses the *Talking Time*© programme or not. If you do not give consent your child will still benefit from the *Talking Time*© activities (if their school/nursery is chosen to run the programme) but they will not take part in the assessments and recordings.



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| **PARENT/CARER CONSENT FORM** |

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| **Please take the time to read the statements below.  Signing this form confirms your agreement.** | |
| I have read and understand the information sheet, FAQ sheet and privacy notice.   I have been able to ask questions and am happy with the answers. | Questions |
| I understand that my child taking part in the language assessments (audio-recorded) and video and/or audio recordings of group work is voluntary and that I can withdraw my consent for this at any time. I know I do not need to give a reason and that there will be no negative consequences for me or my child. | Thumbs up sign with solid fill |
| I understand how the video/s featuring my child will be used in staff training and how the audio and video recordings will be used in the evaluation of *Talking Time*©. | **Video camera with solid fill** |
| I understand who will have access to the personal data about me or my child, how the data will be securely stored and what will happen to the data. | Lock with solid fill |
| I understand how to raise a concern or make a complaint. | Information |
| I understand that I can ask for video and/or audio recordings of my child to be deleted at any time (or for my child’s face to be blurred in videos). | No sign with solid fill |

**Tick the box below to confirm consent for your child to be included in the study:**

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| 1. **I confirm consent to my child taking part in the evaluation study, including the language assessments** | Speech Bubble icon PNG and SVG Vector Free Download**Language assessments**  **(audio-recorded)** |

**If you have consented above to your child taking part in the study, you can also give consent for the other recordings if you would like to:**

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| 1. **I confirm consent to my child taking part in the  audio-recordings of story groups** | Radio microphone with solid fill**Audio recording of  story groups** |
| 1. **I confirm consent to my child taking part in the  video-recordings of Talking Time groups** | **Video camera with solid fillVideo recordings of  Talking Time groups** |

**Which language(s) do you and your family speak mainly at home? Please tick one box.**

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| **Only or mostly English** |  | **Only or mostly other language(s).**  **We only speak English sometimes or not at all.** |  |
| **A mix of English and other**  **language(s) e.g. half-half** |  | **I prefer not to say** |  |

**Parent/carer confirmation of consent:**

School/nursery name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Carer Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parent/Carer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for taking the time to complete this form.   
Please return it to a member of staff in your child’s setting.**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_