Improving Child Health Through Early Years Settings in the UK: Qualitative study of Parents', Practitioners' and Policymakers' Perspectives

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Additional file 1: COREQ statement

Domain	Section	Question	Detail/Location
1: Research team and reflexivity	Personal Characteristics	1. Interviewer/facilitator. Which author/s conducted the interview or focus group?	*JCW & KH*
		2. Credentials. What were the researcher's credentials? E.g. PhD, MD.	*Author credentials are listed with each author on title page.*
		3. Occupation. What was their occupation at the time of the study?	• *JCW – Senior Research Associate in Applied Health Research* • *KH – Research Fellow in Applied Health Research* • *MP – Professor of Child and Adolescent Public Health* • *LA – Professor of Early Childhood Education* • *RJ – Professor of Physical Activity and Public Health* • *RA – Early Years Setting Manager*

			• *KK – Parent* • *RK – Professor of Public Health* • *RL – Senior Lecturer in Applied Health Research*
		4. Gender. Was the researcher male or female?	*Eight female and one male.*
		5. Experience and training. What experience or training did the researcher have?	*JCW, KH, MP, LA, RJ, RK and RL are all experienced academic researchers specifically trained in conducting high quality research with appropriate methodologies. They have mixed levels of experience from early postdoctoral career level to senior with over 20 years experience.*
	Relationship with participants	6. Relationship established. Was a relationship established prior to study commencement?	*No direct relationship was established with the research participants prior to recruitment.*
		7. Participant knowledge of the interviewer. What did the participants	*Participants were provided with a Participant Information Sheet (PIS) which established study*

		know about the researcher? e.g. personal goals, reasons for doing the research?	*purpose, reason for participant involvement and what the interview would entail. This information was repeated verbally prior to the start of the interview. The interviewers (JCW, KH) introduced themselves to participants as researcher working at the University of Bristol at the start of the interview.*
		8. Interviewer characteristics. What characteristics were reported about the interviewer/facilitator? e.g. Bias, assumptions, reasons and interests in the research topic.	*JCW is a qualitative researcher with experience conducting qualitative research on a range of health topics including early years.* *KH is a mixed methods researcher with experience conducting RCTs and mixed methods research in early years.*
2: study design	Theoretical framework	9. Methodological orientation and Theory. What methodological orientation was stated to underpin the study? e.g. grounded theory, discourse	*Use of NVIVO and applied thematic analysis was explained in the methods section.*

		analysis, ethnography, phenomenology, content analysis	
	Participant selection	10. Sampling. How were participants selected? e.g. purposive, convenience, consecutive, snowball.	*Explained under methods section 'study design, sample and recruitment'.*
		11. Method of approach. How were participants approached? e.g. face-to-face, telephone, mail, email.	*Explained under methods section 'study design, sample and recruitment'.*
		12. Sample size. How many participants were in the study?	*Explained under methods section 'study design, sample and recruitment'.*
		13. Non-participation. How many people refused to participate or dropped out? Reasons	*Drop-out/non-participation defined as people who said they would take part and then didn't. Numbers as below:* *i. Local/national policymakers: None* *ii. EY staff: Five dropped out as they could no longer attend on that date (n=4) or were ill (n=1)*

			iii. Parents: 17 parents dropped out and did not provide any reason
		14. Setting of data collection. Where was the data collected? e.g. home, clinic, workplace	*All focus groups and interviews were conducted online except for 2 focus groups which were conducted in a community location (one in England, one in Scotland).*
		15. Presence of non-participants. Was anyone else present besides the participants and researchers?	*Only interviewer(s) and participant(s) present.*
		16. Description of sample. What are the important characteristics of the sample? e.g. demographic data, date.	*Participants characteristics were reported in Table 1. Country and gender of participants were reported, along with ethnicity and deprivation score for parents and EY practitioners.*
	Data collection	17. Interview guide. Were questions, prompts, guides provided by the authors? Was it pilot tested?	*Interviewers were semi-structured with a topic guide to guide discussion. These guides were developed by the research team which included parents and an early-years practitioner.*
		18. Repeat interviews.	*There were no repeat interviews.*

		19. Audio/visual recording. Did the research use audio or visual recording to collect the data?	*All interviews were audio recorded, with the informed consent of participants.*
		20. Field notes. Were field notes made during and/or after the interview or focus group?	*Yes, these were used to inform future interviews and determine when diverse views and experiences had been captured.*
		21. Duration. What was the duration of the interviews or focus group?	*Interviews and focus groups lasted approximately 1 hour each.*
		22. Data saturation. Was data saturation discussed?	*We interviewed all available participants. Data saturation was discussed, although we preferred to use the concept of information power, whereby having a narrow research question and purposively recruiting diverse participants who hold data relating to the research question will result in a sample that holds the 'information*

			power' to answer the research question (Malterud et al., 2016).
		23. Transcripts returned. Were transcripts returned to participants for comment and/or correction?	*Interview transcripts were returned to policymakers for comment and redaction at their discretion. Focus group transcripts were not returned to participants.*
3: analysis and findings	Data analysis	24. Number of data coders. How many data coders coded the data?	*Data were coded by JCW with regular discussion with RL, RK and KH, and presentation and further discussion with full author team at less regular intervals.*
		25. Description of the coding tree. Did authors provide a description of the coding tree?	*No.*
		26. Derivation of themes. Were themes identified in advance or derived from the data?	*Described in the methods section.*

		27. Software. What software, if applicable, was used to manage the data?	*NVIVO 15 qualitative software.*
		28. Participant checking. Did participants provide feedback on the findings?	*No.*
		29. Quotations presented. Were participant quotations presented to illustrate the themes / findings? Was each quotation identified? e.g. participant number	*Quotations are used to illustrate themes and can be found in Table 2.*
		30. Data and findings consistent. Was there consistency between the data presented and the findings?	*Yes.*
		31. Clarity of major themes. Were major themes clearly presented in the findings?	*Yes, see results section.*

		32. Clarity of minor themes. Is there a description of diverse cases or discussion of minor themes?	*Yes, see results section.*

Additional file 2: Interview and focus group topic guides

Policymakers interview guide - questions and prompts

Topic	Sub-topic	Questions/Prompts
About EYS settings		1. *What are your organisations' current priorities for Early Years Settings?* *2. Can you tell me about any existing health policies or programmes you have in Early Years Settings? [for local stakeholders] in your areas?* *3. What are your views on EYS as settings for health improvement?* *4. Can you tell me how health policy in early years settings is developed?*
About specific topics	Food provision	*5. Can I ask you a bit about food provision in early years settings in your country?* *[If don't know - ask who we could talk to?)* *[If any free provision]* *a. Is there any government funding of food (probe – breakfast, snacks, lunch) in any/all EYS?* *b. Is it universal or targeted or only in some settings? (Ask for link to policy document)* *c. How has that policy been developed and implemented?* *d. Is there any evaluation of it? (Ask to document)* *[If no or limited free provision]* *e. What are your thoughts about policies to provide universal or targeted free food (breakfast, snacks, lunch) in EYS?* *f. Why do you think those policies have not been implemented in your country/area (e.g. education attendance not mandated, cost, complexity of providers, priority has been schools)?*

		g. What evidence would be needed to inform policy making around the provision of free food in EYS?
	Flu delivery	*We are also interested in the potential for other primary care based programmes such as the nasal flu vaccine to be delivered in early years settings for children aged 2 and over, similar to the approach in primary schools.* *6. Is there any flu vaccine delivery in EYS in your country?* *[If don't know - ask who we could talk to?)* *[If any provision]* *a. How has that policy been developed and implemented?* *b. Is there any evaluation of it? (Ask to document)* *[If no provision]* *c. What are your thoughts about the barriers or opportunities to deliver the nasal flu vaccine to children in EYS?* *d. What are your thoughts about why those policies have not been developed (e.g. education attendance not mandated, cost, complexity of providers, priority has been schools)?* *e. What evidence would be needed to inform policy making around the provision of flu vaccine in EYS?*
	Mental health and speech and language	*7. Are you aware of any programmes which are taking place in early years settings to improve mental wellbeing or speech and language development?* *a. What do they involve?* *b. Who delivers them?*

		c. Are they universally available in all settings?
	Outdoor space	*8. What are your thoughts on potential barriers and benefits to changes in the outdoor/indoor space requirements?* *d. interest in research to inform standards for EYS indoor and outdoor space (specifically size) and requirement for frequency of going outside to play (you can give the example in England where they have to take the children outside once a day even if they don't have their own outdoor space).*
	About research opportunities	*9. Do you see any opportunity for natural experiments to compare different health policies in EYS, such as using routine data to compare different policies within or between countries?* *10. Do you have mechanisms for linkage of routine health and education data for children attending EYS?*
	Closing questions	*11. Is there anything else you would like to add?* *12. Is there anyone else you think we should be speaking to?*

Practitioners interview guide - questions and prompts

Questions	**Sub-questions/Prompts**
1. Can you tell me about your role in the setting?	
2. What are your views on EYS as places for health improvement?	*a. Any motivations for the role of EYS in health improvement?* *b. Any barriers to EYS being settings for health improvement?*
3. Do you think the type of Early Years provider affects health priorities?	
4. What is most important for you when it comes to children's health in preschools/nurseries?	*a. Free lunch or snacks* *b. Food standards (the variety of meals/snacks served)* *c. Physical activity standards and size of outdoor space* *d. Flu vaccine delivery in Early Years Settings* *e. Mental wellbeing* *f. Speech and language development*
[Follow up]	*· Are there any other priorities you have that we haven't included?* *· What is your main priority?*

	· Is there anything in particular that you are motivated to address when it comes to EY child health?
5. What do you think a preschool/nursery can do to help children be healthy?	
Reminder of 'policy' rather than 'intervention' 6. What are your views on potential EYS policies including: (go through each potential policy/what exists in primary schools and explore ideas and thoughts)	*a. Free lunch or snacks* *i. What would be the challenges of free food in your setting?* *ii. Do you think it would benefit children as a whole in your setting?* *b. Food standards (the variety of meals/snacks served)* *c. Physical activity standards and size of outdoor space* *d. Flu vaccine delivery in Early Years Settings* *i. Barriers to implementing* *ii. What would they need or want to make it feasible? (e.g nurse present, sufficient training, could parents come in)* *e. Mental wellbeing (staff/children)* *i. Are you aware of any programmes which are taking place in early years settings to improve mental wellbeing of staff or students?* *ii. What do they involve?*

If time, ask about this area:	*f. Speech and language*
7. Is there anything else you would like to add?	*a. Thinking back to the health topics you felt were most important, what should preschools/nurseries be doing about them?*

Parents interview guide - questions and prompts

Questions	**Sub-questions/prompts**
1. What sorts of things did you think about when choosing an early years setting (or pre-school/nursery/childminder) for your child (/children)?	
2. What is most important for you when it comes to children's health in preschools/nurseries?	*a. Free lunch or snacks* *i. Probe: lunchboxes (having to provide lunchboxes or paying for lunches from setting are too expensive so choose lunchboxes instead)* *b. Food standards (the variety of meals/snacks served in EYS)* *c. Physical activity standards and size of outdoor space* *d. Flu vaccine delivery* *e. Child mental wellbeing* *f. Speech and language development* *i. If you had to focus on one, what would it be?* *g. How do you think nurseries/pre-schools could influence children's health?* *h. What sorts of things would you like them to be doing to improve health in young children?*

3. What do you think a preschool or nursery can do to help children be healthy?	*a. Thinking back to the health topics you felt were most important, what should they be doing about [insert topics they chose]?*
Explain concept of 'policy' 4. We're interested in exploring what health policies could be brought into nurseries/pre-schools to help keep children healthy. We're going to explain some possible ideas that have been suggested or are used in other countries already. Policies are usually set by the Government to be provided to all or some children. Can you tell us what you think of the following ideas?	*a. Free lunch or snacks* *ai. Probe: lunchboxes (having to provide lunchboxes or paying for lunches from setting are too expensive so choose lunchboxes instead)* *b. Food standards (the variety of meals/snacks served in EYS)* *c. Physical activity standards and size of outdoor space* *d. Flu vaccine delivery* *e. Child mental wellbeing* *f. Speech and language development*
5. Is there anything else you would like to add?	