Nurture corners in nurseries: exploring perspectives on nurture approaches in preschool provision in Glasgow

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1. Background to the research

1.1 Policy context

The policy context in which this study was commissioned is one which explicitly acknowledges the importance of interventions in the early years to address inequalities and disadvantage. At national and local government level there is a drive to ensure that children's development is supported through provision that meets needs and is appropriate for family circumstances. The Scottish Government has set targets for children's developmental progress, most notably for this study, that 90% of children reach the milestones expected for their age and developmental stage at the point at which they begin primary school. In order to move towards this goal and support the wellbeing of families, Glasgow City Council Education Services have extended the nurture and family learning approach from primary schools to the city's preschool provision, and in some cases, to secondary schools. This initiative aims to support children who find it "difficult to play and learn with others" and to ensure that they can remain in and benefit from mainstream early years education (Glasgow City Council). The local authority aims to ensure that all children attending their educational settings "feel welcomed, nurtured and secure" and nurture corners in preschool settings (a space for targeted, responsive and inclusive provision) are one part of the local strategy focused on helping children overcome aspects of their social circumstances or developmental delay which can inhibit their educational progress and constrain their wellbeing during the developmentally-important early years (Glasgow City Council). Nurture corner is the term used in Glasgow City Council preschool provision to differentiate it from nurture groups in primary schools. There are currently nurture corners in 20 preschool settings in the city. Beyond this provision of specific nurture corners the local authority has made a commitment to offer training in the principles of nurture to staff in every school and to encourage widespread self-evaluation of the extent to which each educational establishment is nurturing.

Nurture corner provision in Glasgow City Council Education Services nurseries has been influenced by two further policy concerns. Firstly, the local authority expects the impact of nurture provision to extend beyond the children who find playing and learning in nursery difficult, to the families in which they are growing up, and in particular to families who are 'just coping'. The second policy imperative influencing nurture practices arises from the nationally agreed need to ensure that children and their families receive integrated services readily accessible and designed around their needs (Scottish Government, 2012a; 2012b and 2014). To this end nurture approaches and family learning schemes can be linked with a range of early years and parenting initiatives and have implications for the work of care and

education professionals in the third sector and in health services, particularly health visitors.

Practice in all nurseries in Scotland, including those in Glasgow with nurture corners, is guided by the Early Level of the Curriculum for Excellence (Scottish Executive, 2007) and by national and local expectations about appropriate educational experiences for preschool children. These pedagogical practices are concerned with supporting learning through play. ensuring a balance between child- and adult-initiated activities and encouraging children to participate in learning across all the curriculum areas. Preschool pedagogy construes learning as a process of construction rather than transmission and processes such as exploration, creativity and problemsolving are highly valued. The children spend most of their time in activities which they have chosen from a range of playroom possibilities planned by the practitioners to reflect the young learners' interests and motivations. There are brief adult-led small group activities to provoke children's engagement in particular curriculum areas such as language and literacy, mathematics and science, but typically children spend the bulk of their time in the nursery exploring activities and resources provided by practitioners to stimulate their curiosity, imagination and creativity.

1.2 Theoretical framework

Nurture group provision has its origins in the 1970s with roots in attachment theory and sociocultural understandings about learning (Cooper, 2007). The research reported here was informed by three theoretical strands of relevance to nurture provision:

- Attachment theory because it underpins the nurture concept.
- The sociocultural theory of learning because it helps illuminate the method of adult-child interaction drawn on in nurture groups.
- Resilience theory because it captures the outcomes to which nurture provision aspires.

Attachment theory

Enshrining the concept of a 'secure base' as one of the principles signals the centrality of attachment theory to nurture approaches. Attachment theory, as developed by Bowlby and elaborated later by Ainsworth and others, describes the centrality to a child's healthy development in all domains of a secure attachment to at least one caregiver (Ainsworth *et al.* 1978; Bowlby, 1969; Howe *et al.*1999). Secure attachments have been shown to be nurtured by

warm, sensitive and responsive care giving, coupled with the establishment of clear boundaries. A secure attachment provides the secure base that supports the child to feel safe to explore the wider world and to play and learn. Conversely, insecure attachments, which develop in the context of inconsistent, insensitive or indifferent care giving provide a much less secure base and can inhibit the child's capacity to feel safe enough to flourish in the wider world.

In the context of this study, attachment theory is relevant to a range of issues. It helps to make sense of the experience of attachment that the child brings with them to the nursery and how they relate to staff and other children. It also offers a model for the kind of adult-child interaction that the nurture provision provides and the potential for the child's development to be supported within the context of the relationships established in the nurture setting.

There is a danger that a narrow attachment approach can lead to an overfocus on the role of mothers and to a lack of appreciation of the impact of structural inequalities. However, the research reported here was informed by an 'ecological' approach which takes account of the range of people in children's lives as well as the influence of nurseries and schools upon children's attachment relations and development.

Sociocultural theory of learning and nurture groups

According to Vygotsky (1978), learning takes place through social interaction and, after a process of guided and supported learning, is internalised. As the child becomes more autonomous, the supports are gradually withdrawn. Central to Vygotsky's theory is the concept of the zone of proximal development, or the distance between what a child can do with and without help. Vygotsky's sociocultural theory of learning explains the social and participatory nature of learning and teaching. It emphasises the active role that children take in their own learning as adults or more knowledgeable peers support and prompt their learning. Observation of the child's achievements with and without help, and guided support towards autonomy are key elements of classic nurture group provision, and are thus closely aligned with the sociocultural theory of learning and current pedagogic practices.

Vygotsky also stressed the importance of understanding the child's cultural context, which is a fundamental principle of nurture group practice (Bennathan and Boxall, 2000). The development of learning and social skills in the nursery or school and the home environment is a main aim of nurture provision, which depends upon parents' active engagement and involvement in the child's development.

Resilience

In the context of this study, resilience is defined as '[a] phenomenon or process reflecting relatively positive adaptation despite experiences of adversity or trauma' (Luthar, 2005). While it may not always be possible to ameliorate the range of adverse factors that affect children, there is now evidence about the kind of intrinsic characteristics of children and external supports most likely to promote children's resilience in the face of adversity. The three fundamental building blocks of resilience are having a secure attachment, good self-esteem and an appropriate sense of self-efficacy (Daniel and Wassell, 2002). Self-esteem and self-efficacy are closely interlinked, and it can be argued that children need both to feel good about themselves but also that they have competence on appropriate development tasks (Miller and Daniel, 2007). In the context of supportive relationships children can learn problem-solving skills, cause and effect and appropriate attributions about issues, experiences and challenges where they can have some impact and be successful.

1.3 Principles of nurture provision

Explicitly acknowledging the social and emotional aspects of teaching relationships, staff in nurture groups aim to offer provision that meets children's unmet developmental needs and to build on their knowledge and understanding of the context in which they are growing up. In the context of primary school, a nurture group aims 'to create the world of early childhood in school and so provide the broadly based learning experience normally gained in the first three years' (Boxall, 2002). Glasgow City Council's Nurture Group Network characterises the nurture group experience as offering an effective short-term intervention to reduce the barriers to learning which social, emotional and behavioural difficulties create. Nurture groups are designed to offer the opportunity to establish a relationship of trust with specific adults, and target identified immaturities in development or difficulties with the regulation of social and emotional behaviour, while remaining included in mainstream educational provision.

The Nurture Group Network has set out six guiding principles of nurture groups^a:

- 1. "Children's learning is understood developmentally": opportunities are offered in response to children's assessed developmental progress rather than normalised expectations associating milestones or attainment levels with chronological age.
- 2. "The [nurture group] provides a safe base": care is taken to ensure consistent routines and expectations, arrangements that minimise anxiety and experiences that relate to both domestic and educational settings.
- 3. "Nurture is important for the development of self-esteem": there is a focus on shared activities and the valuing of individuals, responding to and praising all achievements.
- 4. "Language is understood as a vital means of communication": children are supported to identify and describe their feelings in words rather than actions and to learn to communicate with others.
- 5. "All behaviour is communication": the adults respond to children's behaviour as an expression of their social and emotional condition.
- 6. "Transitions are significant in the lives of children": moving between home and the educational setting and different contexts in that setting are carefully managed for children in the nurture group.

Key features of nurture groups include:

- a separate room or corner for the nurture group
- small group size
- one or two trained adults
- integration of time spent in the nurture group and the main playroom or classroom
- children's needs and targets are identified by the Boxall Profile.

The Boxall Profile (Bennathan and Boxall, 1998) guides structured observations of children in the nursery or school setting, enables targeted intervention and is a means of measuring progress. There are two sections in

^a Nurture Groups Network. The Six Principles of Nurture Groups: http://www.nurturegroups.org/data/files/Who_we_areFurther_Info/The_six_principles_of_nurture_groups.pdf

the profile. Section 1 involves assessment on a range of developmental strands arranged in two clusters – the organisation of learning experiences (paying attention, connecting ideas) and internalisation of controls (emotional security, responsiveness to others). Section 2 involves ratings on behaviours that can impede engagement with school and learning gathered into three clusters: self-limiting features (levels of engagement), undeveloped behaviour (patterns of attachment) and unsupported development (sense of self and regard for others).

Glasgow City Council Education Services has developed these expectations and principles to create targeted guidance for the operation of nurture corners in the city's preschool settings and to support the use of the Boxall Profile for admission to nurture provision in nursery.

1.4 Evidence from previous investigations

The academic literature that discusses the nature of nurture provision and its outcomes is typically limited to provision in primary schools, and to what are described as classic forms of nurture groups. These are defined by the aim of maintaining the children in the mainstream system, the time spent in the nurture setting and its material conditions, as well as the activities in which children are involved. Characteristics of the classic nurture group model include a focus on educational attachment, positive and trusting relationships with adults, settled routines, eating together as a group and some time spent in a mainstream class each day. There are some references to alternative models but in the education literature this does not extend to preschool provision.

Evidence of the positive impact of the nurture approach in Glasgow was published in 2006 following the evaluation of the pilot study of nurture group provision in the city's primary schools (Gerrard, 2006). Using evidence from quantitative measures of behaviour and development, the evaluation was able to conclude that for almost all of the children included in a nurture group for whom data was available, there were significant improvements in behaviour. No significant changes were found at the control schools. The questionnaire responses from teachers confirmed this view of nurture groups as being beneficial to children and suggested that the approach also had the support of parents.

Differences in the evaluation methods employed, the age of children studied and the forms of assessment used make it difficult to draw firm conclusions across authorities about the benefits of a nurture approach. Seth-Smith *et al.* (2010) found improvements on some dimensions of development in nurture and control group children but pointed out this was more consistent for those

in the nurture group. Some studies offer evidence of improvements in academic attainment too. For instance Sanders (2007) found academic gains and progress in metacognitive skills as did Reynolds *et al.* (2009). There is some suggestion that children in nurture groups in primary schools make more progress in the first two terms than in the third and fourth spent there (Cooper and Whitebread, 2003). However, there is little or no evidence from longitudinal follow up work of continued progress once children have returned to mainstream provision for all of their time in school. Sanders (2007) suggested that it was quiet and withdrawn children who made the most progress but went on to point out that these gains were less visible in the playground. Cooper and Whitebread (2003) found that those children who had global emotional, social and behavioural difficulties showed some continued improvement in their mainstream setting but children considered hyperactive showed fewer signs of change in their mainstream classrooms.

Hughes and Schlösser (2014) describe their difficulties in conducting a systematic review of the effectiveness of nurture groups due to the variability of the studies. However, they were able to conclude that most studies they included provided some evidence of significant improvement in children's social, emotional and behavioural development (at least in the short term) after spending time in a nurture group. Among the benefits they list: becoming more engaged; better able to concentrate; more likely to resolve conflicts with peers and having better control of impulsive behaviours. Unusually, Hughes and Schlösser (2014) included an examination of the ways in which teachers interact with children in nurture groups, arguing that this may throw some light on the processes which drive the improvements noted. Drawing on studies by Bani (2001) and Colwell and O'Connor (2003), they felt able to conclude that nurture group teachers adopt communication styles that are similar to parenting styles "known to facilitate secure attachments between parents and infants". Compared with mainstream teachers, those working in a nurture group more often communicated with children in positive verbal and nonverbal ways, used 'informative' rather than 'bland' praise, and made comments that built self-esteem.

There is evidence in the literature of positive changes in the ways in which parents of children in nurture groups engage with teachers and of parents reporting children as becoming more confident and behaving more appropriately at home (e.g. Sanders, 2007). Very little research has been undertaken, however, exploring the involvement and support of parents in the nurture group context (ibid.). Kirkbride's (2014) study of parental involvement in nurture groups in primary schools found that parents were largely positive about their experiences, although some experienced barriers in the form of communication, feeling welcomed into the group and in relation to their understanding of the function of nurture groups. Parents and practitioners

interviewed for the study identified communication, developing positive relationships and working together collaboratively as key elements of nurture group success. The importance of encouraging parental involvement with children in nurture groups to ensure a consistent approach at home and school was emphasised by Bennathan and Boxall (1996).

Importantly a number of studies report that schools with nurture groups benefit from improvements in whole school conditions. Hughes and Schlösser (2014) report what they describe as a "whole school" effect, while Sanders (2007) reports that the atmosphere in schools become calmer and staff absenteeism fell when a nurture group was introduced. A study of nurture groups in secondary schools concluded that, when viewed by secondary staff as "an integral support structure for the whole school", such schools become nurturing (Colley, 2009). There have been other calls (see, for example, Binnie and Allen, 2008) to conceptualise nurture *schools* rather than *groups* which, it is argued, places nurture provision in the mainstream and makes it possible to implement more widely.

The studies discussed above are predominately quantitative and the findings typically refer to improvements measured by the Boxall Profile (Bennathan and Boxall, 1998) and the Strengths and Difficulties Questionnaire (Goodman, 1998). Although they informed the questions which we posed and the characteristics of provision which we examined, the study reported here has taken an alternative approach. It is a qualitative study designed to contribute to the evidence about the ways in which the principles of nurture are operationalised in the demanding contexts of preschool settings and ways in which outcomes for children are described and valued. The study reported here set out to explore the perspectives held by those most closely involved in nurture provision in preschool settings on the key features of the nurture experience and the changes in children's behaviour which resulted from these experiences.

2. Study methods

2.1 Aim and objectives

The aim of this study was to explore the ways in which parents/carers and practitioners experienced the nurture approach, developed in preschool settings in Glasgow, and their perspectives on the impact that this provision has had on the development and wellbeing of young children and family engagement in learning. The research team addressed this aim through four clusters of objectives:

Staff perspectives

- 1. Explore staff understandings of the reasons for adopting a nurture and family engagement approach and the ways in which they put this into practice in their setting.
- 2. Investigate staff views about the strengths and weaknesses of the nurture and family engagement approach and of the features that facilitated or challenged implantation of this innovation.
- 3. Gather examples of innovative practice positively valued by staff.
- 4. Explore staff perspectives on the implications of the nurture and family engagement in learning approach for their relationships with third sector and health sector professionals such as health visitors.

Parent/carer perspectives

- 5. Examine the ways in which parents/carers engaged with services and the reasons for their choice of nursery.
- 6. Investigate the perspectives of parents/carers on the benefits and drawbacks of current approaches to nursery provision.
- 7. Gather examples of innovative practice positively valued by parents/carers.

Collaborations with other sectors

- 8. Explore collaborations with third sector services and the ways in which third sector staff evaluated current programmes and initiatives and their relationships with early years staff implementing nurture and family learning approaches.
- 9. Explore collaborations with health services and the perspectives of health visitors on the implementation and outcomes of nurture and family learning approaches.

Innovative practices

- 10. Identify examples of particularly innovative provision, the outstanding characteristics of this provision, its impact and key features of the context in which it occurred.
- 11. Compare traditional nursery school approaches with the practices and circumstances of 'early adopter' nurseries.

2.2 Research design

This was a qualitative study, focusing on gathering perspectives, evaluations and accounts of experiences. In order to effectively manage the collection and analysis of data in this investigation, which had a number of strands of enquiry and 11 related research objectives, we divided the work into four discrete data collection work packages and a fifth work package covering analysis, reporting and dissemination. Each data collection work package addressed specific objectives, employed particular methods and was the responsibility of named members of the research team. The work packages are set out in Table 1 and the methods which were employed in each package are described below.

Table 1. Work packages: data, objectives and team responsibilities.

	Data collection	Target objectives
Work package 1		1, 3, 7, 10, 11
What happens in practice?	Systematic observation of	
Characteristic practices of early adopters/traditional settings? Identification of innovative practices	(i) nurture corner/playroom (ii) interviews with staff, focus groups with parents	
Work package 2		1, 2, 3, 4
Nursery staff perspectives, understandings, evaluations	Interviews with head of centre and practitioners at each research setting	
Work package 3		5, 6, 7
Parents' perspectives and evaluations	Focus groups at each research setting	
Work package 4		8, 9
Health visitor engagement, perspectives, evaluations	Interviews/focus groups with health visitors Individual interviews with third sector	
Third sector activities, perspectives, evaluations	representatives	
Work package 5	N/A	N/A
Analysis and comparisons		
Production of draft and final report		
Inception and final meeting with commissioners		
Dissemination		

2.3 Research participants

This study was carried out in six Glasgow City nursery settings. Given the limited scale of the study and the range of influencing criteria we do not make any claims of representativeness for the sample selected. Rather this was a purposive sample, selected to allow exploration of the innovations which were the focus of enquiry and the contexts in which they occurred and to yield the kind of rich situated data which is the strength of the qualitative approach. The specific sites included were chosen in consultation with Glasgow City Council Education Services and covered the range of forms of preschool provision offered within the city^b.

The nursery settings were distributed across the three geographical areas of the city (north east, north west and south). At each of the six nursery settings selected we interviewed the head of the setting and two practitioners, one who was responsible for the nurture corner and one whose work focused on the mainstream playroom. We worked with each setting to recruit as many parents as possible for a focus group discussion. The numbers recruited varied across the settings and are shown in Table 2 below. We asked each setting to give us details of any health visitors and third sector agencies with whom they worked. Some settings were not able to name a health visitor and not all had contact with a third sector agency. The details of the responses of these professionals are given below in work package 4.

The remit for this study did not require the gathering of the perspectives of the children directly involved in nurture and family learning. While we acknowledge the agency, preferences and competencies of the preschool child and have developed expertise to help young children articulate their perspectives, we concluded that this was beyond the scope of this investigation.

2.4 Research methods

Work package 1

Two methods were used to address the objectives targeted in work package 1. In order to understand the ways in which the nurture approach was put into practice in each setting and how this was differentiated for particular children and families, we carried out *systematic observations* of the nurture corner

^b The research team asked Glasgow City Council Education Services for contact details of the settings with nurture corners and family learning initiatives. When the selection of research settings was agreed, the researchers asked Glasgow City Council Education Services to introduce the study and the research team to each chosen location.

over a half day in each setting. The features of practice observed included routines and mealtimes, child-led learning activities and adult-initiated activities. These periods of observation offered two particular advantages. Firstly, they allowed us to give an account of developing practices and helped us to understand the context the study participants experienced. This facilitated the kind of rapid rapport building which is necessary in a short-life study such as this and ensured that questions could be appropriately targeted. Secondly, the observations allowed us to identify some innovative practices and provided rich examples to illustrate our analysis.

Semi-structured interviews with staff and focus groups with parents/carers further informed our understanding of the ways in which practitioners interpret the aims of nurture provision in their setting and how families were engaged.

Work package 2

Data collection with staff was by *semi-structured interviews* covering domains relevant to the target objectives for that work package. For nursery heads and practitioners we included questions about their understanding of the aims and methods of nurture and family learning approaches, the practical application of this knowledge in their setting, factors that facilitated or inhibited the development of innovative methods, and the impact of the changes they have implemented.

Work package 3

Small *focus groups* were held with parents/carers, and individual *interviews* were conducted face-to-face and by telephone, depending on the preference of the parent/carer. Nursery staff initially explained the purpose of the research study to parents/carers to recruit participants and distributed the information leaflet prepared by the research team. The focus groups were each led by two researchers who tried to create an enabling atmosphere within the familiar nursery setting, at a time convenient to the parents/carers. Topics for the focus groups and interviews with parents were non-threatening and parents were not required to talk about their family circumstances. General questions were asked about their interactions with the nursery and their child or children's experiences of nursery attendance and progress with learning in addition to any social and emotional support provided, either within the formal nurturing context or within the more 'traditional' setting.

Table 2 shows how many parents participated in a focus group or interview at each early years centre.

Table 2. Parent participants in focus groups or interviews at each setting.

Early years setting	Number of parents	Type of discussion
Killy Nursery	1	Telephone interview
Donald Nursery	3	Focus group
Puppets Nursery	3	Focus group
Clouds Nursery	1	Face-to-face interview
Jumping Jacks Nursery	1	Face-to-face interview
Esther Nursery	1	Face-to-face interview
	1	Telephone interview
	Total – 11	

Work package 4

Semi-structured interviews were held with research participants from four voluntary sector organisations. Nursery staff were asked to recommend a voluntary sector agency and named member of staff with whom they shared good partnership working, for the research team to contact. Contact details were provided for five third sector staff, although only three telephone interviews were carried out. In one case, the member of staff was not available during the data collection phase, and in another case the third sector staff member recommended a service manager speak to the research team, although that discussion did not, in the end, take place.

Questions for discussion with voluntary sector staff included investigations of the relationship between the services they represented, families, children and nursery staff and provision, evaluations of the services available to families and the impact of the nurture and family learning practices in particular. One of the three third sector staff members had good experience and knowledge of the nurture corners in two early years centres; one had no experience of nurture corners but expressed an interest in becoming involved; and the third had knowledge of nurture corners but was not currently working with any children or families receiving the provision. It was, therefore, difficult to gather much information which could be compared across all three accounts. As a result, the focus of the findings presented later in the report will be on the participant with current experience and knowledge of nurture corners.

Five settings gave contact details for a health visitor although they were not directly allocated to any preschool provider. We were able to make contact with four health visitors. One setting could not name a health visitor and the fifth health visitor nominated was unavailable. We were able to complete four telephone interviews, although one of the four health visitors we contacted had no knowledge of the nurture corner at the setting from which she was nominated. The interviews with the health visitors were concerned with their perspectives on the outcomes for families and children of the implementation of nurture corners and family learning initiatives, for instance the kinds of improvements that they notice, the difference that alternative forms of these initiatives make, suggestions for future developments or more supportive practices, differences between settings and context, implications for their own networks and practices.

2.5 Analysis and reporting: work package 5

The interview responses and focus group conversations were subject to thematic content analysis. We identified the perspectives shared across participants, within settings and among particular participant groups. The observation data were used to produce an understanding of nurture practices in each research setting and gather illustrative examples of practice. Examples of innovative practices were identified from the responses of all participants and from the observations carried out.

Dissemination activities will follow agreement on the final report.

2.6 Timing of the study

The timescale for this study was very tight – approximately two months from the inception meeting to the submission of the final report. In terms of data collection, it is possible that there were missed opportunities to interview health visitors and third sector staff mainly due to workload and timetabling issues. It is noteworthy that all of the early years settings facilitated visits from the research team to speak to staff and parents, and to carry out structured observations, at very short notice. The time of year in which the study was carried out is also a point of interest, as the majority of children had experienced nurture provision for several months at the time the research commenced. The main advantage to carrying out the fieldwork in May and June was the opportunity for parents and staff to reflect on children's progression over time.

2.7 Ethical considerations

The research was guided by the ESRC (2010) Framework for Research Ethics (FRE) and the British Educational Research Association Ethical Guidelines for Educational Research (2011). The research proposal was submitted for scrutiny to the University of Stirling's School of Education (SoE) Research Ethics Committee. We sought the opinion of the Caldicott Guardian about the need to seek NHS ethical approval to involve health visitors in this study in the way described in work package 4. The opinion of the Caldicott Guardian, in consultation with the Director of Public Health, was that NHS approval was not necessary as we intended to focus on general perspectives and would not discuss individual cases. Ethical research practices for educational research necessitate establishing ground rules before a focus group begins and these rules include strict confidentiality controls such as an agreement not to discuss individual cases and not to name people in an illustration used in discussion.

Process for obtaining informed consent of participants

All participants received an information sheet about the study and the nature of the offer of confidentiality and anonymity being made by the research team was explained in person and in writing. All participants gave their explicit consent to participate and to their views being included in the research data. Information and consent leaflets relating to parents'/carers' participation in interviews or focus groups were written in accessible language. Confidentiality and the limits of confidentiality were explained carefully, both in written information distributed in advance and at the beginning of each parent interview or focus group. It was also made clear that potential participants were under no obligation to take part in the research and that receipt of a service was not affected if consent to participate was withheld.

Parent/carer participants were assured that researchers would not discuss what they said with other people unless a situation arose which concerned their safety or that of a child or vulnerable person. The interviews and focus groups with parents/carers were conducted in a sensitive and respectful way.

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^c A Caldicott Guardian is a senior person responsible for protecting the confidentiality of a patient and service-user information and enabling appropriate information sharing. See the Health and Social Care Information Centre website for further information http://systems.hscic.gov.uk/data/ods/searchtools/caldicott/index html.

Data protection considerations

Qualitative data obtained in interviews and focus groups was anonymised and stored securely in a locked filing cabinet. A password-secured computer was used throughout. Code numbers were assigned to participants in the study. Pseudonyms are used in this report and every care has been taken to ensure that individuals cannot be identified.

2.8 The early years settings

Each setting taking part in this study has been given a pseudonym to preserve anonymity.

Clouds Nursery

Clouds Nursery provides care and education for children from birth to age five. It is a purpose-built setting, co-located with a primary school in a large development of predominantly social housing on the edge of the city.

Donald Nursery

Donald Nursery provides care and education for children from six weeks old to school age in purpose-built premises. It is situated in an area of redeveloped social housing on the edge of the city and shares a site with a primary school.

Esther Nursery

Esther Nursery occupies a large building previously shared with other educational functions. It is located in the inner city and has three substantial outdoor play areas around the nursery building and a sensory room. Esther Nursery offers sessional educational provision for children in two age ranges, three-to-five year olds and two-to-three year olds.

Jumping Jacks Nursery

The nursery is purpose-built and shares its site with a primary school in an area of social housing, some of which has been redeveloped. It offers care and education for children from birth to the beginning of primary school.

Killy Nursery

Killy Nursery educates and supports children aged three-to-five years. Situated in an inner city re-development area, it is part of a purpose-built campus which includes two primary schools. The nursery offers sessional provision although some full time places are available.

Puppets Nursery

Puppets Nursery provides care and education for children from six weeks to age five. It is a purpose-built setting in an inner city location.

3. Research findings

The findings from each work package are presented in turn, drawing attention to issues emerging from the data and to evidence relating to the research objectives which the researchers were asked to address. Following the presentation of these findings, we return to the specific research objectives and summarise the answers suggested by the evidence.

3.1 Nurture corner practices

The evidence from the systematic observation at five settings is presented here. No observation was permitted at Esther Nursery in line with their strict adherence to the practice of maintaining a consistent experience for the children.

Children and practitioners

The nurture corners usually consisted of four children in the three-to-five year old age range, occasionally rising to five or six in the group and sometimes restricted to only those in their preschool year. Some of the children had deferred entry to school and, in one case, a child was old enough to move to the room for the oldest children in the nursery but was remaining in the room for two-to-three year olds as a more appropriate place for his stage of development. When some of the children selected for nurture were absent, when there were only two children in the group, or when the children were all quiet or withdrawn it was common for practitioners to invite other three-to-five year olds to join in specific sessions.

The arrangements for staffing the nurture sessions dictated how many sessions were offered each week and whether they were offered during the morning or afternoon. However, children selected for nurture provision in the six settings included in this study could expect to spend approximately two hours in the nurture corner with the same group of children and the same practitioner on three or four days per week.

At Puppets Nursery two practitioners (both trained in nurture practices) were responsible for the nurture corner and at Esther Nursery a trained practitioner was regularly assisted by a Pupil Support Assistant (PSA) who had not yet completed the nurture corner training, although this was scheduled for later in 2014. One other setting was sometimes able to make a PSA available to assist in the nurture corner. Staff changes at Donald Nursery meant that the assistant head had recently become responsible for the nurture corner and was completing the training made available by the local authority. At every

other setting taking part in this study the head of the nursery had completed nurture corner training. She acted as the nurture co-ordinator and supported the practitioner but did not take part directly in nurture corner activities with children or parents.

Nurture corners: layout and resources

Across the six settings participating in this study the space allocated for the nurture corner ranged from a small room (a former cupboard) with only a high window, to classroom-sized spaces with large windows which children could readily see through. The space used was a separate room at all the settings except for Puppets Nursery where the nurture corner used a partitioned area adjacent to the tables where children from the main playroom came to eat at snack time. The main playroom activities took place in a separate, enclosed space so noise or interruptions to the nurture corner was minimal. None of the nurture spaces had their own toilet but the children were able to continue to access the nursery facilities everywhere apart from in Killy Nursery. Here the nurture corner was on the first floor of the adjacent school building so when one child wanted to go to the toilet the nurture practitioner and all of the children had to accompany him/her. At Clouds Nursery the nurture corner opened directly on to the main playroom. Activities were disrupted at times by children knocking on the door in attempts to gain access and entering the room when a child attending the nurture corner opened the door to go to the toilet.

Each nurture corner contained many of the components of a typical preschool playroom, for example, a book area, snack table, toy kitchen equipment, dolls, construction sets and other small toys such as cars and farm animals. None of the rooms had direct access to an outdoor space but there were outdoor areas at each setting which could be used with varying degrees of ease by the nurture corners. The inclusion of sofas, rugs and soft furnishing such as cushions and drapes was noted in each nurture space. Two settings had chosen to use domestic sofas and a third had bought child-sized sofas. At two settings a large wood and fabric 'cave-like' structure had been purchased for the nurture corner. Filled with cushions, puppets and soft toys this structure was used at Donald Nursery as a place for children to relax and for story reading. At Esther Nursery it contained a range of sensory materials and treasure-basket items e.g. scented candles, coloured glass frames, drawers filled with natural materials and shakers. Posters about appropriate behaviour and good manners were displayed on the walls at most settings, along with mirrors, pictures portraying various emotions and achievement charts.

During the observations included in this study there was no scope for a full inventory of the resources available to each nurture corner. However, there was considerable variation in the richness of the provision which could be observed, something which was only partially explicable by the limitations imposed by the size of the space available. Only one setting had a sand/water table in the nurture corner. Play-dough was displayed as a free choice activity at two settings. Drawing equipment was laid out in only one room and another contained an easel although it was not in use on the day of observation. Pens and paper for drawing were available for use during group activities elsewhere. In each nurture corner toy cookers, sinks, crockery and food were included to provide for domestic play, although the lack of space meant that in three settings there was no room for a clearly delineated 'home corner'. Killy Nursery had space for a play kitchen and separate bedroom area. Only Puppets Nursery had any alternative imaginative play space (a hospital) arranged at the time of the observations.

Routines, activities and interactions

The routine phases of activity typical of preschool provision were mirrored in each of the nurture corners: *free play, snack time, adult-directed group activity, story reading and tidying up time.* After about 30 minutes in the main playroom children attending the nurture corner were collected by the nurture practitioner and taken to the space set aside for them. The children returned to the main playroom about 30 minutes before the end of each half-day session. At four of the settings the nurture corner activities began with a shared snack time, one nurture corner began with daily outdoor play and the sixth started with the adult reading to the group. In each the routine was consistent and children were gently reminded about when things would happen, helped in some cases by reference to a visual timetable.

10.02 A asks if he can get a sticker when he goes back to the playroom and the practitioner reminds him of the routine pointing out that it is 10 more minutes until activity time. A returns to the discussion between the children and the practitioner about a nursery outing then asks again if it was time to get ready for the activity. He is reminded that it will be time when the tidy-up music begins to play. At 10.10 the music begins and A starts to place the animals he had been looking at back into a basket. (Observation notes, Jumping Jacks Nursery)

At the time when the observations were carried out (late in the summer term) daily *adult-directed group activities* lasted between 10 and 20 minutes and included playing picture dominoes, sound lotto, drawing and playing with play-

dough. In each case the expectations for the activity or rules of the game were carefully explained, children were reminded to sit 'nicely', to take turns, to pay attention and success was noted.

10.48 am All children at table with NP^d who introduces the picture dominoes game. NP rehearses the instructions stressing 'you have to wait for your turn'. J starts the game. C fiddles with his cards – is reminded to put them so can see them all. J needs lots of prompting from NP to find a match. NP says which pictures are needed for each child's turn. S and M find their matching cards quickly. J needs help. C sometimes finds his card. At end M asks to play it again – NP says will play again tomorrow. (Observation notes, Donald Nursery)

The time spent in *free play* varied from 10 to 30 minutes, depending on the nurture corner routine and the circumstances of the day. In most cases children spent very little time on any one activity during free play as the examples below from observation notes made at Jumping Jacks Nursery and Donald Nursery demonstrate.

9.38am E takes locks puzzle to table. He opens all locks then sits passively as other children and nurture practitioner chat.

9.44am Nurture practitioner asks E about locks on his door at home.
9.45am E goes to toy cooker and moves utensils around. Nurture practitioner suggests he makes soup.
9.50am E goes to sofa and sits down. Nurture practitioner invites him to play with zoo animals on the rug.

2.37pm J is constructing the cars and caravan from parts lying in a basket in the 'living room' area. Nurture practitioner offers to help.

J puts people in garage – says there is going to be a flood. Nurture practitioner and J talk about weather, shoes, socks and football (practitioner using opportunity to extend J's language use).

2.45pm J and nurture practitioner discuss what they can see out of the window then look at expressions on faces of puppets.

As move to group work table J indicates interest in the hospital play and begins to gather equipment.

One example of sustained play between two children was noted (adapting a version of the hospital play) but there were more instances of play in the same area being sustained when the practitioner engaged with several children. For example, at Donald Nursery the practitioner was pretending to eat a meal

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^d NP: nurture practitioner

prepared by a child while at the same time responding to the 'trick' being played by another and helping a third child to change and dress a doll.

At *snack time* children were chosen to distribute crockery, serve food to their peers and to clear up. Practitioners used this as an opportunity to encourage independence, discuss healthy food and encourage good manners too. For instance, at Killy Nursery M's ability to peel a banana for himself was praised, apples were talked about as healthy and children were reminded to say thank you as the fruit bowl was passed around.

Snack time was an opportunity for conversation too and many children were able to join in discussion of past, present and future events in the nursery and in their own lives. The practitioners drew on their knowledge of the children's family members to stimulate conversation, for instance, asking about new babies or older siblings now at school. At Puppets Nursery the conversation over snack time included the reasons for the absence of one of the boys, the holiday experiences of one of the practitioners and a practitioner's recollections of meeting children at the local shops. During the observations at Jumping Jacks the practitioner talked, among other things, about going to a wedding and the children joined in talking about clothes to wear at weddings. Some children, such as C who did not speak when she began to attend the nurture corner at Clouds, became able to contribute to these informal and personally meaningful conversations over time.

Talk in the nurture corner

As well as language to explain, narrate and manage the events of the nurture session the practitioners talked to praise children, reinforce their teaching about making feelings explicit, gently discipline and urge good manners and healthy or safe choices.

"That was good work together... you have done well today." (NP, Donald Nursery)

Children were praised for the way they waited to choose their reward stamp. (Observation notes, Jumping Jacks Nursery)

The nursery practitioner praised the way in which L completed a pattern-matching puzzle. (Observation notes, Jumping Jacks Nursery)

J was praised when she said thank you without prompting and again when she followed the suggestion that she should say 'can you help me please'. (Observation notes, Killy Nursery)

Children talked about their lives in and out of their preschool setting. They asked questions, occasionally initiated activities with their peers, described their actions, labelled their feelings and sometimes defended their choices or access to resources.

M recalled the title of the story read at the beginning of the nurture session and some of the fruit which featured in the tale.

(Observation notes, Killy Nursery)

C initiated a game with Z by saying 'you be the sister and go to bed'. (Observation notes, Puppets Nursery)

"M asked C 'can I have a shot?" (Nurture child, Donald Nursery)

"S said 'I wasn't in a bad mood today'." (Nurture child, Donald Nursery)

There were no instances of voices being raised or children becoming angry or aggressive during the observations, although the nurture practitioners did report previous instances of aggression and challenging behaviour. The practitioners responded to the few examples of children not doing as they were expected or requested to do by calmly repeating instructions and pausing the activity until children complied.

The children were reminded to go in pairs and keep to the left as they began to walk upstairs but J did not follow this instruction. The nurture practitioner quietly insisted that J move to the left and hold the handrail, stopping all the children until J complied after several repetitions. (Observation notes, Killy Nursery)

Each time CA played with the light switches and switched the lights in the nurture room off he was calmly asked not to do that and switch them on again. He complied readily. (Observation notes, Clouds Nursery)

Innovative practices

As the conversations with nurture practitioners and nursery heads reported below confirm, the focus in nurture corners is on fidelity to the nurture principles they were introduced to in their initial training, rather than on innovation in practice. However, there were some examples of the creative use of resources and experimentation with practices while adhering to the nurture principles. At most settings practitioners and managers had been creative in their use of space to establish a nurture corner. In one case an office was adapted for a nurture corner while in other locations a storeroom

was converted, a cupboard was re-fitted as a nurture corner, a door was added to make a contained space and partitions, storage and furniture arranged to make a distinct nurture area in a larger space.

Although there were many similarities in the ways in which nurture corners were furnished and resourced, there was some variation. Only one setting had established a sensory area in the nurture corner and this setting was the only one to have sand or water available in free play. However, other settings had made use of coloured lights and soft furnishings to create relaxing spaces. Healthy eating was an important goal at Killy Nursery and was promoted at snack time and through the weekly preparation of a snack menu with the children in the nurture corner, writing a shopping list and going to the local shop to buy the food planned.

It was common practice across all the participating settings to support homenursery relationships by passing diaries between home and the nurture corner, children taking the nurture corner 'teddy' or other character toy home over the weekend and bringing back an account of their activities and lending books, DVDs or other resources. At some settings the nurture practitioners arranged occasional special events in the nurture corner for parents, a practice commonly adopted in the city's nurseries. At Esther Nursery this practice had been developed into regular 'Let's get busy' events arranged for parents and children in a novel attempt to model appropriate activities and ways of interacting with preschool children. Held every two weeks, the events involved parents taking part in a nursery activity or going on a trip with the nurture corner children and practitioners. At the end of the event parents were given a pack of resources to encourage them to continue the activity or topic at home.

There was one considerable innovation in the nurture corner at Killy Nursery which shared a site with a primary school. Two children from Primary 1 (age four to six) and a boy from Primary 7 (age ten to 12) were given brief placements in the nursery nurture corner. A second boy from Primary 7 spent more time with the nurture corner and was assisted in class by the nurture practitioner. When the nurture practitioner became aware of this child's failure to cope in the classroom and of his frequent removal from the class because his behaviour caused distress to his peers and teacher, arrangements were made for the boy to spend time in the nursery nurture corner. The nursery head was aware of some evidence that children who bully can be very engaged with younger children so she supported the practitioner's attempts to modify the boy's behaviour through inviting him to help the younger children and meet the same expectations about appropriate behaviour. The practitioner was able to offer support in the school classroom too and over time was able to report substantial improvements in the boy's behaviour in

and out of school and that these changes had been maintained when he transferred to secondary school.

3.2 Nurture practitioner and nursery head/centre manager perspectives

In this section the perspectives of nurture practitioners and those responsible for managing the setting are reviewed across all six settings in relation to the questions posed in work packages 1 and 2.

Finding space for nurture

The managers and practitioners were pleased with the space they had created for the nurture corner. Although this had often meant rearranging the accommodation in the setting they suggested that anxieties about finding appropriate space should not inhibit others from establishing a nurture corner. In each case the managers had used the local authority staffing allowance for the nurture corner in creative ways that, along with their existing staff deployment programme, made the most of the additional hours offered for face-to-face work with children and planning and recording time. They were satisfied that, as a result of the start-up grant received, the existing resources of the setting and the resourcefulness of the nurture practitioners, they had in each case equipped the room well and created a nurture space of which they could be proud.

Putting nurture principles into practice

Managers and nurture practitioners were clear that the focus of their practice and targets for children in the nurture corner lay predominately with the health and wellbeing area of the national curriculum and policy agenda. They differentiated between the health and wellbeing goals and the expectations and responsibilities for literacy and numeracy and the distinct curriculum areas set out in the Curriculum for Excellence. Nurture practitioners and managers were explicit that what they described as the 'education' focus of the Curriculum for Excellence was not part of the nurture corner aims.

"Staff in the [play] rooms are more focused on Curriculum for Excellence (but they can work on some nurture targets like listening). Health and wellbeing take precedence for nurture children." (Nurture practitioner, Esther Nursery)

"Nurture corner activities are not about curriculum things like counting and painting. It is about wellbeing only – working on emotions, starting to trust, starting to talk." (Nurture practitioner, Killy Nursery)

"[I]t's not the other curriculum areas – we don't pay attention to them in what we do in the nurture room. The focus is on attending to gaps in aspects of the children's development in the health and wellbeing area." (Head, Killy Nursery)

However, they did see a relationship between nurture corner experiences and later cognitive development or progress towards educational goals, arguing that social and emotional difficulties could be barriers to children's learning and that nurture practices can reduce or remove these obstacles, leaving children ready to learn in mainstream nursery and school.

"Children need to be emotionally ready to learn." (Nurture practitioner, Donald Nursery)

"The understanding of nurture here is that children are experiencing barriers to learning – we want to reduce these and enable them to access curriculum learning later. [Nurture is] concerned with emotional literacy and empathy." (Head, Donald Nursery)

In describing the purpose of their nurture provision the practitioners and managers moved between general difficulties with behaviour, communication and what they saw as the impact of the home environment and the specific challenges and developmental problems they had identified in individual children. For example, there were general references to the absence of attachment and bonding, inability to manage emotions and the need to establish a trusting relationship between child and practitioner. The needs of individual children, as described by the respondents in this study, typically fell into one of two categories (i) un-regulated, overly boisterous and sometimes angry behaviour and (ii) withdrawn and uncommunicative behaviour. In a number of cases across the settings children were described as 'selective mutes', unable to talk in the main playroom. It was unclear whether or not this was a formally assessed condition but the rate of apparent occurrence of selective muteness seems to challenge expectations.

"A was abandoned by mother and has been in several foster homes. Starting school has already been deferred for one year and he will stay in nurture until he moves to school in August. He is needy – wants to be centre of attention, can't settle, finds it difficult to join in group and take turns." (Head, Jumping Jacks Nursery) "We were asked to take R by a nursery school where he had been since he was two. He is now in his preschool year. He can't cope with the extended day (mother works) and the big playroom though he can be very charming and engaging on his own terms and in 1:1. There may be some autistic tendencies and R now attending morning sessions at an assessment centre ahead of moving to school. He may need [therapeutic] involvement for his complex difficulties." (Head, Jumping Jacks Nursery)

"Z has been in nurture since beginning of the school year. She leapt out as needing nurture when I did the Boxall. She had no capacity for attention, flitted, would hit and grab, had poor social interactions. Her mother was struggling with her behaviour and was very negative about Z and at the end of her tether. Z responded quickly to the nurture experience. She will go to school after the summer." (NP, Puppets Nursery)

In response to questions about the ways in which they put nurture into practice respondents mentioned 'the nurture principles' and, particularly the principle that 'all behaviour is communication', but much of the discussion about practice with the nurture practitioners centred on identifying appropriate targets for children's progress by using the Boxall Profile.

"The Boxall is the greatest tool – it leads you to set targets." (Nurture practitioner, Jumping Jacks Nursery)

"I love the depth of understanding we could get from the Boxall and have been 'blown away' by the outcomes of being in the nurture corner. Did not realise initially the depth we would go to with nurture." (Head, Jumping Jacks Nursery)

In the interviews for this study, practitioners rarely talked about specific activities or interaction patterns they employed to support the child's development towards the identified targets, nor did they articulate a particular set of practices or a pedagogic or theoretical position that underpinned their work. Their pedagogic practices appear to be largely implicit and thought of as enhanced or selected features of the normal practitioner repertoire. Instead practitioners typically listed a range of characteristics of the space and of their interactions with the children:

- Make the room a safe place.
- Create a nice room with some homely things.
- Make the nurture corner like a mini-playroom.
- Keep the group size small and adult:child ratios generous.
- Get them to identify their emotions.
- Offer protected space away from the busy playroom.

- · Do lots of talking.
- Work on attention first then sharing and co-operating.
- Help children to understand that actions have consequences.
- Have routines and keep to them so that children know what will happen.
- Make children feel welcome and know that you care.

For the managers the critical ingredient in the establishment of a sustainable and effective nurture corner was finding the right practitioner. They looked for a practitioner with passion, compassion, an understanding of the nurture process and the right balance of patience and firmness. All of the current nurture practitioners had been appointed from within the existing staff team at their setting and the initial nurture practitioner was still in post at all but one location. In two cases the head's response to our question about the elements of their nurture provision that they were most proud of was to say that it was their nurture practitioner.

Recording progress and evidence of change

Although they talked confidently about their practices with children and parents, every nurture practitioner expressed concerns about the ways in which she recorded children's progress towards the goals identified through using the Boxall Profile. Practitioners and heads were appreciative of the support and encouragement they received from colleagues in their local nurture cluster group but it was perhaps in this area of recording progress that they felt these regular contacts with others had had most to offer. With no recommendations about a model of recording or any specification of appropriate evidence being offered during the initial training, each practitioner had developed her own approach, sometimes going through several iterations to find a manageable system that worked in their setting.

"We set targets then have to work out how we are going to monitor progress. I manage occasional observations when children are in free play but it is hard to say when a child is ready to move on to next the target. I do another Boxall Profile if I can. We write up notes and compile photo records. The keyworker keeps a [Curriculum for Excellence] profile for the child in the main room – particularly for preschool year children." (Nurture practitioner, Donald Nursery)

Typically a number of short-term targets were recorded for each child and some longer-term targets too. In some settings there were explicit processes for sharing the Boxall Profile targets with key workers while elsewhere this was done more informally. Practitioners had devised booklets and charts in

which the targets were set out and evidence recorded. Observations, photographs and *post hoc* accounts were entered as evidence but the staff lacked confidence in the adequacy of the information they recorded and worried that their system might not be optimum. Where practitioners had time set aside for recording and planning the workload associated with recording progress was more manageable. However, finding opportunities to formally observe children in the nurture corner was difficult for sole practitioners. Furthermore, nurture practitioners also had to find time to observe other children in the main playroom identified as being potentially in need of admission to the nurture corner and to work with the children's key workers to complete and interpret the Boxall Profile.

Parents and family engagement with learning

Engaging with parents was part of the expectation of the nurture practitioner's role in every setting and, in some cases, the heads talked of their existing ethos of positive and respectful relationships with parents as being part of the rationale for their engagement in nurture. At some settings work with parents was shared with other agencies. For instance, at Killy Nursery a practitioner was employed on a half time basis to work with parents, offering workshops and Triple P^e courses and the nursery worked in collaboration with Stepping Stones, a community-based third sector organisation that works with children and families. At Jumping Jacks Nursery another community-based third sector practitioner (from Children First) was able to offer family visits and discuss things such as establishing bedtime routines and managing tantrums.

At each setting permission was sought from parents or carers before a child began to attend the nurture corner and, in some cases, prior parental permission was sought to complete a Boxall Profile. Every practitioner and manager could recall one or two parents who had been wary or resistant to their child moving to the nurture corner. However, they explained that such reactions were the exception and were quickly overcome when the adults were shown around the room and reassured that it was a way of offering 'a bit extra' rather than a judgement on their parenting or their child.

"One child's grandmother worried that he was going to be labelled but she could see the possibilities. He still needs nurture but you can see the difference." (Nurture practitioner, Clouds Nursery)

Despite their acknowledgment of the importance of engaging with parents or carers, the opportunity for nurture practitioners to meet them in any extended

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^e Triple P is an evidence-based, positive parenting programme which aims to equip parents with strategies to develop secure relationships with their children, manage their behaviour and prevent problems arising.

or frequent way was limited. They could meet with parents briefly when the children arrived or left the main playroom at the beginning and end of the sessions if their role and shift patterns permitted this but some of the communication had to be mediated by the child's key worker. Some nurture practitioners occasionally arranged for specific parents or carers to come to the nurture corner to see how practitioners spoke to children and to engage them in activities. However, the demands of their role, often as the only practitioner caring for a group of challenging children, and the desire for consistency in the nurture corner meant that these were not frequent occurrences.

Some nurture practitioners had devised diary systems to support communication between home and the nurture corner or sent home targeted resources to encourage parents and children to interact around such as a puzzle, drawing or storybook. At some settings these were informal practices used when the opportunity arose or when a child was particularly interested in something. Elsewhere, a more regular and formalised system had been created and practitioners had assembled bags of resources and simple ways by which parents could evaluate their experience of using the resource at home. At Puppets Nursery the nurture corner staff had arranged a number of specific events, such as a 'pamper day' and open day for parents of children in the nurture corner, as a complement to the programme of courses and social occasions organised with all parents whose children attended the nursery. The nurture practitioner at Esther Nursery also arranged events for parents of the children in the nurture corner but these were more explicitly focused on activities to share with preschool children. At fortnightly intervals parents were invited to come to the nurture corner to join activities such as baking, using particular resources or to go on trips to the park or further afield. The emphasis was on having fun together and each family received a pack containing all that was necessary for children and their parents to repeat or extend the activity at home.

When asked how family engagement in learning was interpreted in their setting nursery managers and nurture practitioners talked about the need to address low levels of parenting skills, what was perceived to be a widespread lack of communication with and engagement in the children's lives, and feelings and anxieties about a lack of attachment and understanding about the role and responsibilities of parents. Some of the managers talked about trying to offer parent education programmes and groups, though few expressed any confidence in the efficacy of this provision. Nurture practitioners were able to identify what they saw as deficits in parenting in general and in particular instances but beyond encouraging warm personal relationships with parents and trying to stimulate interest in each child's

development there was little scope for them to extend their existing focus on the children.

Outcomes from the nurture experience

Both nurture practitioners and nursery managers talked unreservedly about the benefits to children of spending time in the nurture corner and would strongly recommend establishing a nurture corner to other practitioners.

"You can see the difference – the evidence is there... [You should] have no doubt that it will make a difference, once you have tried [a nurture corner] you will never go back." (Head, Jumping Jacks Nursery)

"Nurture makes an amazing difference." (Nurture practitioner, Donald Nursery)

"The nurture corner is an asset in every way – I love that it is making a difference for the children – seeing that wee person growing." (Nurture practitioner, Killy Nursery)

Perhaps because of the very personalised nature of the nurture experience the practitioners and managers talked about the outcomes of nurture largely in terms of changes in specific individuals rather than typical changes or summaries over the total number of children who had spent time in the nurture corner in each setting. In general, those who were withdrawn and reluctant to speak to other adults or children became more able to talk about their wishes and choices and articulate their perspectives in the nurture corner and, sometimes to a more limited extent, in the main playroom. Respondents were pleased that some children who seemed unready for school were able to make a successful transition, particularly if there was no need for them to spend time in the nurture group in primary school. Children who found it difficult to pay attention and to regulate their own behaviour and emotions were helped by time in the nurture corner to sustain engagement in tasks, follow instructions and replace physical expressions of their feelings with verbal interactions. For some children it was the gradual development of empathy which was the important change, making a difference to their interactions with their peers and adults.

The examples below represent the range of outcomes described.

"C has had a total turn around. She was a selective mute, did not talk in the playroom and would only whisper to her friend. Now she is very talkative and can even be bossy and a bit loud." (Nurture practitioner, Puppets Nursery) "One boy was always flitting around – we had concerns about his family life and wanted to get him focused and able to talk about his life. We took him into nurture – observations there revealed inappropriate play and he made disclosures and was taken into care. If he had not been in nurture would he have had the opportunity/relationship with staff that would have allowed him to disclose?" (Head, Donald Nursery)

"Another child had no empathy – he was bullying and intimidating. We've been using big puppets with him and role play and the penny is dropping. He is beginning to engage with emotion in stories." (Nurture practitioner, Esther Nursery)

There were occasionally children for whom the nurture corner experience was said "not to work". These children usually had more complex difficulties such as Asperger's Syndrome which required additional specialist therapeutic input or challenging and fluctuating family circumstances which could mean changes in their care arrangements. There were also comments to suggest that transferring their newly acquired skills and developmental gains to their experience in the main playroom was not a smooth process for every child.

"The big question is whether they can transfer the gains to the big room – it can be erratic. S and J just about cope but it is less good for C and M." (Nurture practitioner, Donald Nursery)

In two settings the timing of the daily return to the large group had been adjusted in an attempt to smooth the re-entry process, although there was no consensus on how this might be managed. In one setting it was thought to be best for children to return to a free play session. In another, moving into adultled group time seemed preferable.

The heads of the settings taking part pointed to benefits beyond the children in the nurture corner. They talked about the impact that some youngsters being withdrawn to the nurture corner had on the adults and children who remained in the main playroom and of the longer term smooth functioning of the learning environment. For instance, at one setting the head commented that the three-to-five year old room was a better managed room since the establishment of the nurture corner and that staff there were more able to engage meaningfully with all the children.

There was a further bonus to the establishment of nurture corners which was frequently mentioned: the managers argued that it had raised the understanding of all staff about the concept of nurture and prompted reflection on everyday practice in the playrooms in each setting. Heads or nurture practitioners had made presentations to their colleagues on the nurture principles and ideas about attachment and brain development (seen by them

as the theoretical underpinnings for the nurture approach). At one setting 'nurture' had become a standing item on the agenda at team meetings. At another, staff in the main playroom had made changes to provide spaces for children to relax and be quiet in and had tried to make the book corners more homely. The nurture corner space itself offered benefits to others in some settings too where it was made available for groups of practitioners and children from the main playroom to use for quiet activities when not in use as a nurture corner.

Further developments

There was no sense of managers feeling pressured by a substantial waiting list of children identified as in need of the nurture corner experience although most were aware of those who might be the next to benefit from this experience. Nevertheless, heads and practitioners were careful to ensure that children only moved to the nurture corner if this was indicated as appropriate for them by their Boxall Profile scores. Being able to run a nurture corner in both the morning and afternoon would be welcome in most settings as it would enable more children to have this experience and would make the allocation of places easier, avoiding the need to move children from morning to afternoon sessions or vice versa to allow them to take up the offer of a place in the nurture corner. Most nursery heads and some nurture practitioners would welcome the opportunity to have additional staff fully trained in the nurture principles and practices. Even if they could not deploy two members of staff to the nurture corner every day (seen by many as the ideal model) there was a desire to ensure that the provision could continue for children if the allocated nurture practitioner was absent.

There was no agreement across the respondents about whether or not nurture provision could or should be extended to children younger than three years old. Some argued that it would be difficult to make judgements about whether there were behavioural or emotional difficulties at a time when they expected children to be going through a period of social and emotional development. On the other hand, others suggested that intervening earlier would be beneficial and could ensure that children entered the playroom for three-to-five year olds ready to take advantage of the learning opportunities there and cope with the different nature of the relationships that they would experience. However, there was agreement that more preschool settings should offer a nurture corner experience to those children who would benefit from this individualised provision.

3.3 Playroom practitioners' perspectives

Practitioners based in the main playroom who were responsible for the care and education of children aged three to five were asked to identify the key strengths of nurture provision, the key outcomes for children and to discuss the impact on children's learning and development. Emerging themes about outcomes for children in the nurture corner and transitions between nursery spaces are discussed in this section, followed by a summary of playroom practitioners' suggested improvements to nurture provision.

Outcomes for children in the nurture corner

All participants identified increased *confidence* as a main outcome for children in the nurture corner, adding that the *small group* setting was essential for this. Many of the playroom practitioners described children who were quiet, shy, uncommunicative, anxious and even distressed in the main playroom, whose social and emotional development was enhanced considerably by nurture provision. Some described children who were hyperactive and not able to focus in the main playroom; in some cases children were identified as being physically aggressive. The calm, quiet environment in the nurture corner was mentioned as a key benefit to all children, and many playroom practitioners also praised the compassionate, nurturing natures of their colleagues in the nurture corner. The dominant view that being part of the nurture corner transforms children is neatly summed up in the words of one participant:

"They go into nurture and come out different children." (Practitioner, Donald Nursery)

In fact, *transformation* was a feature across practitioners' accounts, as they described how individual children had been changed as a result of being in the nurture corner.

"There was one child who wouldn't speak at all, was just frightened by everything, and just last week I watched him getting an award up on the stage, and I just couldn't believe it was the same child." (Practitioner, Jumping Jacks Nursery)

Several participants also reported that children who were in the nurture corner in nursery were less likely to be in the Primary 1 (usually four to six years old) nurture group, or would require a shorter input at primary school. In fact, two playroom practitioners suggested that offering nurture corners for the two-to-three year old groups might be an effective preventative approach. Other participants explained that nurture provision in the nursery was particularly

beneficial for children with additional support needs, including those with English as an additional language.

Transition from the nurture corner to the main playroom

Some playroom practitioners described children who, after being in the nurture corner, were calmer, more settled and less anxious in the main playroom. A few practitioners identified children who had been reluctant to communicate in the main playroom prior to their nurture experience but were, on their return to the main playroom, more willing to speak and participate in group activities. Even where this meant speaking only to a key worker or using a puppet to join in a group activity, this was recognised as a significant achievement for children.

On the other hand, some practitioners described difficulties with the transition back into the main playroom and the structures they put in place to make the adjustment easier for children. For example, one participant arranged the playroom routine to ensure that activities were more structured in the main room, so the child returning from the nurture corner would be involved in a group activity and not 'wander or get lost'. Another playroom practitioner described that some children could be 'boisterous' when returning to the main playroom, but felt that issues related to socialisation and self-regulation were the main reason the children were in the nurture corner, so supporting calmer transitions between nursery spaces was a long-term target. She reported that one boy had internalised the three special steps he had learned in the nurture corner to control his behaviour, and was so proud of himself that "he was buzzing about it".

On the other hand, some practitioners explained that being in the nurture corner had settled and calmed children sufficiently that their transition back to the main playroom was smooth. Several participants described that children's increased confidence, ability to focus and being "ready and willing to learn" were directly related to their experiences in the nurture corner.

It is significant that almost all main playroom practitioners spoke of the benefit of nurture provision for *all* children in the nursery. When children with aggressive behaviour, for example, joined the nurture corner, practitioners explained that the playroom environment became calmer and quieter. One participant expressed the view that the nurture corner provision enabled the main playroom to be more nurturing, as the children there also received increased support and attention. In this way, she felt, they were able to be the "nurturing nursery that we want to be".

Playroom practitioners' suggestions for improvements to nurture provision

Although not all main playroom practitioners were explicitly asked about ways to improve nurture approaches, some issues emerged which merit discussion here. Two playroom practitioners said that they would like more training in nurture principles and approaches. Two other practitioners reported that they had received training on nurture principles during in-service days, which they valued, although one explained that she "needs to learn by doing it" and so would welcome some practical experience of nurture provision.

Two participants spoke about the importance of having *two* practitioners in the nurture corner, particularly when a child might become distressed and require to be removed from the nurture corner. Additionally, one participant felt that when the nurture corner was located at a considerable distance from the main playroom, it was difficult to offer support to nurture colleagues should challenging situations arise.

3.4 Parents' perspectives

A total of 11 parents with a child either currently or previously in a nurture corner at one of the six participating settings took part in a focus group or telephone interview. Parents largely expressed very positive views about nurture approaches, and some offered recommendations and suggestions for improvement of the provision.

Selection for the nurture corner

Although some parents described feeling positive about their child's involvement in the nurture corner when nursery staff suggested it to them, others explained that they were initially unsure or reluctant to agree.

"He was in the three-to-fives and the [practitioner] said he was not progressing as much, concentration was a problem. They said he could get more support, two adults to four children. They said they thought he would benefit. I wasn't sure because I didn't want him singled out." (Parent A)

Another parent explained:

"I was a bit iffy as he's my first, but he has come on leaps and bounds since starting. The staff have noticed a big difference in him which is great." (Parent E) In line with these views, several other parents stated that although they were initially uncertain about agreeing to nurture provision, seeing the improvement over time in their child's social, emotional and educational development convinced them that it was the right decision. Some parents described how their children had been very reluctant to attend nursery, some to the point of refusing to stay there. Spending time in the nurture corner had successfully encouraged these children to attend willingly and with a great deal of enthusiasm.

Outcomes from the nurture corner experience

Building children's confidence

There was a strong view across the parents' accounts that the structure, consistency and empathy shown by the nurture practitioners improved children's confidence. As one parent explained about the nurture corner:

"It's a wee safety net and it's structured as well, so they know when it is snack time, when it's time to go outside and play. They are still learning their letters and numbers – they've got the pictures and the words. It helps them with their confidence, and that is the most important thing. It has to be consistent, has to be the same time, every day of the week. It's been very well thought out, the nurture room." (Parent F)

Developing communication and social skills

Improvement in their child's communication and social skills was a common theme identified by parents discussing the strengths of nurture provision. Several parents explained that their child was reluctant to speak, or would not speak at all in the main playroom, but gradually became willing to communicate in the nurture corner, and subsequently in the main playroom.

"She has spoke to somebody and for her that is a big thing. She'll tell you she was speaking to her friend. That's a big change for her."

(Parent C)

Some parents explained that due to social communication difficulties associated with autistic spectrum disorder, their child had difficulty looking at and making eye contact with other children and adults as well as with verbal communication. Nurture provision was instrumental in encouraging all of the children to communicate with others. As one parent explained:

"He wouldn't say 'Bye' to anybody and would turn his head. Then he would say 'Bye' with his head turned, but he's now making better eye contact." (Parent E)

Most parents also identified improved social skills as a key outcome of nurture provision. Sharing and turn-taking, asking rather than 'grabbing', and improved listening were mentioned by a number of parents as skills which they noticed an improvement in both at home as well as in the nursery setting. Linked to improved confidence and social skills, some parents explained that their children had a better *understanding* of their emotions and an improved capacity to express and control their emotions. Several parents described dolls, puppets and other soft toys which their children talked to and, in some cases, talked 'through', using the toy to express and vocalise their feelings.

"They said she should have nurture for her behaviour – I wasn't sure but nurture has helped her dramatically. She was frustrated because she couldn't tell us what was wrong. Now she can tell us her emotions... If they don't understand their emotions you are going to have problems with them. It takes a lot of work to understand them and control them." (Parent J)

Changes in behaviour at home

Many parents felt that their children were calmer after being in the nurture corner, which they saw as a significant improvement.

"I've noticed a big change in his behaviour. He was easily led by other children and that but in the [nurture] room they tell him not to follow others. He is sharing a lot more with his sister and cousins. He's a lot calmer." (Parent A)

Another parent explained:

"I see a big, big difference in him – how he is starting to talk more. His temper has calmed down as well. Sometimes he's calmer at home. He brought home a mouse he had made with [the nurture corner practitioner] and talked to it like it was his best friend." (Parent E)

Positive improvements in interactions with siblings and cousins in the home were noted by a number of parents. Some parents explained that they had asked for advice and received support from nursery staff about behavioural issues at home. The ways in which nursery staff connected children's

experiences and behaviour at home and in the nursery setting were discussed and clearly appreciated by many parents, and are the focus of the next section.

Family learning – connecting the nursery and home

Parents described a range of ways in which nurseries supported children's learning and development at home; promoted positive, fun activities involving parents and children at home; and endeavoured to improve social skills and behavioural issues at home. One of the strengths of the nurture approach identified by parents was an improvement in children's ability to share, turntake, listen appropriately, and interact positively with other children at home. Many parents also clearly valued resources which were sent home by nurture practitioners to develop children's knowledge and skills. One parent explained that feelings cards were 'really good' for developing her child's ability to name and discuss emotions. Others described games that were sent home to improve literacy and numeracy skills. Parents were very positive and enthusiastic about experiences they shared with their children in the nurture corner, such as baking, and about the opportunity to repeat those activities at home with ingredients sent home from the nursery. Resources and materials sent home to encourage learning through play can have the additional benefit of being used with siblings.

"It's quite enjoyable actually, what they do [in the nurture room]. They have wee goody bags to take home – he shows his sister and teaches her using the bag." (Parent B)

A few parents explained that they had approached the nursery staff specifically for advice and support about how to deal with and manage their child's behaviour at home.

"I've been given good advice about behaviour – she can be hyper and fidget – and how to handle it. They always try to help. They're really supportive here." (Parent J)

As well as encouraging shared activities between parents and children in the nurture corner, nurture practitioners and staff in the wider nursery were praised for groups, classes and courses which they offered for parents. In at least one establishment, the nurture corner was used as the setting for a 'girls' night'. As one parent enthused:

"It's really good – they have had a girls' night in the nurture room doing massage and nails and dressing up like princesses and it was really good." (Parent H)

A number of parents credited the nursery with making them feel welcome at all times, and with encouraging them to use the parents' or family rooms to get to know other parents. It was clear, from parents' accounts, that these connections with other parents, as well as with nursery staff, were valued and particularly helpful for those new to the community.

"It can help if people have just moved here. It helps you meet people and get settled." (Parent H)

Some parents credited the nursery with supporting their return to work or into training, with a flexible approach to their children's attendance which enabled them to work or study. One parent praised the nursery, saying:

"They are really good about trying to fit nursery attendance around your working arrangements, for example." (Parent I)

Another parent agreed, adding:

"I asked if my child could stay on later to fit around work and they arranged it. That was great." (Parent H)

Readiness for and transition to primary school

A number of parents were of the view that receiving nurture provision at nursery prepared their child for Primary 1 (usually four to six years old). A few said that their children would not – or would be unlikely to – need nurture provision in primary school as a result of receiving it in nursery.

"I think it's made her more ready for school. I think if she hadn't been in the nurture room in nursery she would have been in the nurture room at school. Don't ask me how that works – being in that small room works wonders. I don't know how or why but for some reason it works. And I've seen it with other kids as well." (Parent F)

Another parent, whose child is now at primary school, said of the nurture provision at nursery and transition:

"I didn't think he was ready but he is in P1 and he's doing well. If it wasn't for the [nurture corner] he wouldn't have been ready. It made all the difference." (Parent D)

Of particular note was one parent's account of their child's distress at nursery caused by an older sibling moving on to primary school, and the importance of nurture provision in supporting the child through that difficult time and in enabling her transition back into the main playroom:

"Her sister was her wee security blanket and she was screaming and crying and not wanting to go out the door – it was quite traumatic when her sister wasn't there any more. At that point they said about putting her in the nurture room, and it has worked. It has made her more confident – in the nursery. She's still not as confident out of the nursery but I think that's just her personally." (Parent F)

Many parents discussed carefully-managed transitions from the nurture corner to the main playroom, and from nursery to primary school, which they believed were very effective in supporting their children.

Parents' recommendations and suggestions for improvements to nurture provision

It is clear from the evidence presented in the preceding sections that parents were very positive about nurture provision and could identify many benefits for their children. Parents made some recommendations and suggestions for ways to improve nurture provision, which are the subject of this section.

Consistency of nurture provision should be sustained even when the nurture practitioner is absent

Some parents expressed the view that the absence of the nurture practitioner for a day or longer effectively meant that no nurture provision was possible, thus impeding consistency of the nurture experience for their children. They suggested that if more nursery staff were trained as nurture practitioners, nurture corners would be more consistent experiences for their children.

"I think training is important. If there comes a time where – see our weans don't like change, see if [the nurture practitioner] is not here, they have to be part of the main room and it is hard. If [the nurture practitioner] isn't here they don't go to the nurture corner. Someone could step in and do what [the nurture practitioner] does." (Parent C)

Another parent, looking ahead to their child leaving the nurture corner, explained:

"Mine will miss being in the nurture [corner] – he's disappointed if staff are not there that day." (Parent G)

A few parents said that they felt that more training for nursery staff about how to identify and support children with additional support needs would be beneficial.

All early years centres should have nurture provision

Some parents were firmly of the opinion that all nurseries in Glasgow should have nurture corners.

"I think all the nurseries should have some form of nurture. All the teachers are really good but I think it would be beneficial if every teacher was trained the way [the nurture practitioner] has been trained. There are too many kids who don't have confidence and could use this. If teachers are trained in how to build confidence and self-esteem then it would be better for all weans. If they play up then it is better to say that it might be because something is bothering them or whatever." (Parent F)

The same parent later said:

"There is a lot of pressure on kids with targets and that – you have to make sure they are happy and confident. If they have nurture in nursery it gives them confidence from the start." (Parent F)

Finally, one parent agreed that nurture provision should be offered in all early years settings, explaining that there will always be the need for nurture corners:

"There's always going to be a wee group of people that are going to need some extra help." (Parent C)

3.5 Health visitors' perspectives

Involvement in nurture corners

Each of the four health visitors interviewed reported having good links and positive working relationships with the early years centres. However, they did not have any direct involvement with the nurture corner activities. Some of the health visitors mentioned having contact with the nurture practitioner about identified concerns for individual children and sharing that information.

"The nurture [practitioner] might contact me about a family I visit a lot and they want to share information with me about them, I might contact the nurture group about a child I know is having difficulties and might suggest the nurture group would be good for them." (Health visitor)

The nurturing approach in practice

One of the health visitors described the nurture approach as beneficial to support children who may be having difficulties in one or more areas of their social and emotional development. The nurture approach was portrayed as being a chance to provide individualised care for children and to recognise parents' views about their child's needs for additional support. Some of the health visitors did not know what the nurture approach entailed, as one of them volunteered:

"I really don't know anything about them." (Health visitor)

Another health visitor suggested that if they did know the aims and function of the nurture approach it would be really helpful to consider interventions for children:

"I would really like to know the difference between nurture groups and play therapy." (Health visitor)

When asked about how the nurturing approach supported the health visitor's role, some health visitors said that in their experience it helped with making assessments.

"It helps with joined assessments for example if I am making a referral to the child development centre or any referral really... for example speech and language therapy. I can ask the nurture group staff to observe a child in the setting if I want to know about their language or play/behaviour. It gives more evidence to say whether the nurture group is helping the child or not, and form part of my report or child's plan." (Health visitor)

One health visitor described how the approach can help parents to engage with their children:

"It helps parents to understand the importance of talking to their children and really engage in child-led play, which a lot of parents don't understand as 'parenting'." (Health visitor)

One of the health visitors was concerned about what she interpreted as an expectation that only the Triple P approach to parenting should be used in Glasgow. She argued that other approaches to parenting were more beneficial:

"By using this approach [Triple P] we are closing doors for some families... one shoe doesn't fit all... so nurture groups might be another option for families." (Health visitor)

The nurture corner was described as improving communities and carrying less of a stigma than the Triple P approach.

Children and their families

Some of the health visitors reported that parents talked about attending a nurture corner as a very positive experience that helps children but only one knew of children from her caseload who were attending a nurture corner. Other health visitors said that they heard very little about the involvement of families in nurture corners and had no direct communication with the nurture practitioners themselves.

"Parents don't talk about nurture groups and the nurture groups don't ask us to be involved." (Health visitor)

Some health visitors suggested that the nurture approach should also be available in school settings, especially for the transition period between nursery and school. In one of the areas there had been arrangements for the nurture teacher to go to school with a young child for the first week of Primary 1 (usually four to six years old) to support their needs.

Another example of joint interventions was provided:

"I have contacted the nursery in the past when there has been social work in their lives... where I had never heard the child speaking and I spoke to the nursery to find out more, so they did periods of observation, so it gives a true assessment as every tactic I have tried to hear the child speak hasn't worked but the nursery can confirm the child speaks really well." (Health visitor)

3.6 Third sector perspectives

Only five third sector contacts were nominated as one of these people worked with two of the early years settings taking part in this study. Four individuals were interviewed by telephone (covering five of the early years settings) as the fifth was not able to participate due to workload pressures. One of the third sector participants described strong links with the early years setting and good partnership working, as well as good knowledge and experience of the nurture provision; a second had good partnership working with the nursery but no current or recent experience of children (or their families) in the nurture corner. Two of the participants expressed the view that they would like to work more closely with the nursery staff generally, and specifically would like to be involved in partnership working with nurture provision.

All participants described the main aspects of their work as helping parents to develop their parenting skills and confidence; to help build positive relationships between parents and their children; to help parents reflect on their own progress; and to improve the health and wellbeing of children and parents. Given the differences in participants' experiences and knowledge of how nurture corners operate in the early years settings, not all were able to discuss aspects of nurture provision in detail. The discussion that follows reflects the range of views expressed regarding partnership working and participants' understandings of nurture corners in early years settings.

Strengths of nurture provision

Participants identified a number of strengths of nurture corners including:

- consistency and predictability
- small group size
- fun activities which develop positive relationships between the parent and child
- improvement of communication skills, particularly for children who might be hesitant to speak in a larger group or who have other developmental needs
- encouragement to talk about emotions
- child-led provision.

One participant explained that the assessment processes associated with nurture provision were a strength:

"There's such a push on for educational attainment, but with nurture you need to stop and look at where the child is developmentally and decide what they really need." (Third sector respondent)

Some participants identified children who seemed overwhelmed or "lost" in the larger playroom, but who responded well to a smaller group setting in "a predictable space".

The participant with good experience of partnership working with children and families in nurture settings identified a number of benefits to *parents* who spent time in the nurture corner. She explained that parents were – and felt – valued by the nurture staff, who did not draw attention to what parents could not do but rather helped them develop and improve the skills that they had.

"[W]ith nurture because it is modeling it is all about warmth, it's unconditional. If something has gone wrong at home staff ask, 'Okay, that's happened, now how are we going to deal with this?" (Third sector respondent)

The same participant, along with others, explained that supporting positive relationships between parents and children was central to the work of their agency and that nurture provision shared this aim.

"Family learning I see as giving parents the tools to go away and replicate what the child did at nurture. One of the main strengths is that it is **fun** activities. Routines and consistency are very important, so it is about building those with parents. It's also about breaking cycles with parents who take punitive approaches to behaviour, maybe where discipline has been unsuccessful. It's about having positive experiences, having fun, and sharing good things." (Third sector respondent)

It was clear from participants' accounts that parents often asked for support related to issues in the home, such as bedtime routines. Even when participants had no direct experience of nurture corners, they could identify how the principles of nurture could be developed and supported at home, as one person explained:

"The worker could help continue the nurture group at home – with confidence-building, developing skills, showing parents how to continue it at home." (Third sector respondent)

The role of nurture corners in creating opportunities for positive play between the child and parent was discussed as a key strength. One participant explained that some parents lacked the confidence to engage in play with their children, and saw regular involvement in the nurture corner as an important way to encourage and develop parents' confidence in this area.

Areas of nurture provision which could be improved

Third sector participants were asked whether they could identify any weaknesses with nurture provision or areas for improvement and several points emerged. As previously stated, two participants expressed a clear wish to have more involvement with nurture provision; one held the view that their agency could be working with and supporting parents at the same time as the children were in the nurture corner.

Participants who felt that parents were not being included in nurture corner activities as much as they could be, explained that involving parents more

would help develop parenting capacity and confidence. They also felt that this would benefit their children, who would receive a more consistent nurturing approach at home as well as in the nursery setting. One participant expressed the view that parents were not given enough information about the nurture corner, specifically why their child was chosen to be in it and *what* the provision entailed, adding that parents often accept decisions made without asking for clarification and further explanation.

Another participant felt that there was a role for parents to be involved more in *training each other* in the principles of nurture, in offering peer support and social emotional coaching. She explained that her agency has found that this has worked well, and believed it could be an effective part of the nurture model. The same participant felt that peer training and education could be better used within nursery staff teams, to give all staff a better understanding of the principles of nurture. She expressed the view that this might counteract an attitude of 'the child gets that in nurture', and instead be part of a nursery-wide culture of nurturing.

3.7 Addressing the research objectives

Staff perspectives:

- On nurture approach.
- Putting nurture into practice.
- Strengths and weaknesses of the approach and features that facilitate and inhibit.
- Innovative practices.
- Relationships with other agencies.

Nurture practitioners, playroom practitioners and managers saw the establishment of a nurture corner as consistent with the ethos of their setting and as a spur to making the whole nursery more focused on nurturing children. Small group size, a secure, calm space, consistent routines, a focus on individualised targets and warm interactions with one practitioner were the key features of nurture practice in nursery which emerged from the interviews and observations. The nurture corner experience was thought to be transformational for children who were uncommunicative and withdrawn and for those whose behaviour was overly boisterous and lacking in regulation. Benefits were not restricted to the nurture corner – a quieter main playroom was appreciated by all children and staff. These respondents saw value in having more than one practitioner working in the nurture corner and there was a clear recognition that having the right person leading the nurture corner was essential. There was a focus on fidelity to the nurture principles rather than innovation, although practitioners and managers at all settings had had to be

creative to establish the nurture corner. In some places novel forms of practice had developed from the existing nursery approaches. While there was recognition of the work of some individual health visitors and third sector agency staff there was no regular or sustained co-working.

Parent/carer perspectives on:

- ways of engaging with the nursery and nurture corner
- benefits and drawbacks of the nurture approach
- innovative practices.

Parents talked about feeling welcomed by the nurture practitioners and given good advice. They valued the special events arranged for them and the resource bags that allowed them to try out nurture activities and play games at home. However, for parents, the biggest benefit of nurture provision was the positive impact that it had on their child. Even those who were initially anxious about the referral to nurture were rapidly impressed by the changes they noticed. Parents thought that the structure, consistency and empathy that children experienced in the nurture corner increased their confidence, developed their communication and social skills, made them calmer at home and prepared them for the transition to primary school. There was a clear feeling among parents that all nurseries should offer nurture corners and that there should be more than one practitioner trained at each setting so that the benefits they recognised could be assured.

Perspectives on nurture approaches and collaborations of:

- health visitors
- third sector agencies.

Health visitors had limited contact with nurture activities and nurture practitioners and suggested that although they could see the potential benefit for children and parents, those in their caseload did not talk about their children attending a nurture corner. They understood that children who had difficulties with aspects of their social and emotional development would benefit from time in a nurture corner. Parents might also be helped to engage with their child and that observations there might contribute usefully to joint assessments. Health visitors did acknowledge however, that they knew little about the principles or practices of nurture.

Third sector respondents too had limited experience of the principles and practices of nurture corners. Their focus tended to be on developing the skills of parents and the strength of relationships between parents and children.

Nevertheless, they valued the small group size and consistency of nurture corners and the impact that they could have on children's communication skills, understanding of emotions and ways of engaging with their parents. They acknowledged the potential for experiencing appropriate models of interaction that spending time in the nurture corner offered parents and would value more opportunities for this. Indeed, third sector respondents were interested in extending their involvement in nurture provision.

Innovative practices

Establishing a nurture corner had called for the creative use of premises, resources and staff time. While adhering to the principles established by the Nurture Network was clearly important for practitioners, they had developed some ways of engaging with parents that went beyond the typical preschool activities and some had incorporated additional resources and activities into their regular nurture routines. One setting had been innovative in extending the benefits of nurture provision to older children in primary school.

4. Discussion and recommendations

Across the evidence gathered in this study there is a strong sense of enthusiasm for the nurture approach and satisfaction in the outcomes it achieves for children. These outcomes lie not in literacy, numeracy or other more cognitive attainment areas but in overcoming aspects of behaviour and ways of engaging with families and educational settings which limit children's opportunities to learn and risk damage to themselves and others. It seems clear that, in the experience of parents and educators, time spent in a nurture corner can support children to overcome language and communication difficulties, develop appropriate social skills and begin to regulate their own behaviour and expressions of emotion.

Whether or not the associated aim of supporting family engagement in learning is achieved is less clear. Some parents have been helped by nurture practitioners and experiences in the nurture corner to enjoy engaging in activities with their children, to see their child in a more positive way and to be aware of alternative ways of interacting. Furthermore, as children who spend time in nurture corners begin to overcome their difficulties and frustrations they are likely to be more rewarding to be with at home too. However, opportunities to engage with parents are limited and the influences of other circumstances may constrain the impact of this one intervention in family life as the referral of more than one sibling to the nurture corner suggests.

There is little obvious development of distinct 'nurture in nursery practices' other than the adoption, within the context of a preschool environment, of the established nurture principles, particularly the provision of a distinct nurture space with educational and domestic features and activities. The practices which can be observed are largely the development of typical preschool pedagogy but the small number of children engaging with the nurture practitioner does afford opportunities for more sustained and intense relationships with the practitioner and the paring away of influences that might disturb or inhibit individuals. Nurture provision can be more responsive to individuals and fine-tuned to developmental needs. Nurture practitioners are skilled at establishing relationships with children who may initially reject or resist engagement. It is clear too that talking is an important part of the practitioner's repertoire. They use conversation to support language development, explore children's emotional states, structure social interactions and build self-esteem and confidence.

The advantages of nurture corners in preschool settings seem evident but there are some potential tensions too. The managers and main playroom practitioners talked about the establishment of a nurture corner as raising awareness of the need for nurturing practice throughout the setting. However, this brings too an awareness that current arrangements in playrooms for three-to-five year olds may inhibit extending the affordances of the nurture corner to the general playroom. In such circumstances the main playroom could be viewed as being in deficit. A further potential tension is a result of the expectation that nurture practice should make a difference to family engagement in learning and to parenting practices. The need for nurture practitioners to focus on the difficulties associated with nurturing challenging children in their care, especially when they work alone, must reduce their capacity to engage with parents, as does the desire to maintain a consistent experience in the nurture corner. These constraints must also apply to coworking with health visitors and third sector agencies during the staff time allowed for nurture corner work.

Two further risks are worthy of consideration. The focus on health and wellbeing in particular is understandable in the context of the work of nurture practitioners and the training they receive. Nevertheless, there seems to be a danger of polarising areas of development that are not necessarily in opposition and to encourage thinking about child development that runs counter to the typical holistic approach adopted in preschool settings which reconciles active learning with children's health and wellbeing.

The second risk is that the emphasis on identifying gaps or delay in development and deficits in children's behaviour can result in the over-use of some diagnostic labels such as 'on the spectrum' and 'selective mute'. On the other hand, an area of potential development which nurture corners seem well placed to promote is currently under-developed in the accounts of outcomes for children. The focus on the regulation of behaviour, turn-taking and cooperating with peers can be extended to examine the impact that nurture corner experiences can have on developing positive dispositions to learn and beginning to acquire metacognitive skills that mean that children are well equipped for the ways of learning that will be expected of them in primary school. Nurture corner experiences may well be an effective way of developing dispositions to learn and to bridge the gap between the learning culture of home and school.

Recommendations

Our experience of conducting this study and of reviewing the evidence suggests a number of recommendations for the further development of nurture provision in preschool settings.

- Support nurture practitioners to articulate their pedagogic practices, enabling them to be shared and developed.
- Review methods for recording targets and progress and the evidence required so that best use can be made of the nurture practitioner's available time.
- Consider whether the resources and range of activities in nurture corners can be enhanced.
- Review expectations about engagement with parents and carers and develop models of practice and partnership with other agencies.
- Consider the lessons from nurture corner practices which can be applied in playrooms for all three-to-five year olds.
- Extend the number of practitioners with accredited nurture training to ensure that groups are not suspended due to staff absence or disrupted by staff turnover and increase the number of staff who can support interventions with parents.
- Ensure that health visitors and third sector staff working with nursery settings are given access to training in the principles and practice of nurture.
- Find ways to facilitate more collaborative working practices between staff in nurseries and health visitors.

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