

DEVELOPING CLOSE, THOUGHTFUL ATTENTION TO CHILDREN AND FAMILIES IN THE EARLY YEARS PEDAGOGY

**Evaluating the impact of Work Discussion Groups as a
model of Professional Support and Reflection**

(Grant Number RCH-07-2016).

FINAL REPORT TO FROEBEL TRUST

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The significance of 'Close Thoughtful Attention' to young children, in Froebel's writing and in contemporary research

To the child the sight of the grown-ups around him - and this is very true of his parents who at first command his whole field of vision - is the sun which draws him out; and when he establishes other relationships within and beyond himself, these are the climatic conditions, the broad sky, under which he grows up. (Froebel, 1830 cited in Lilley 1967:78).

Trevarthen can be understood as referring to the 'sun which draws him out' when he says:

Observation of a contented and wakeful infant receiving the attention of an affectionate parent finds displays of emotion that can only function in engaging the other's interest and in stimulating future interpersonal communications. (Trevarthen, 2005)

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SUMMARY REPORT

1. What is Work Discussion and how is it Froebelian?

The aim of WD is to enable practitioners to be more attuned to the child holistically, in the context of that child's family culture and wider culture, in order to support their practice and strengthen outcomes for children. Here, WD is directly relevant to the implementation of Froebelian principles, not least that every child is part of nature, family, community, culture and society and the right of children to protection from harm or abuse and to the promotion of their overall well-being.

Work Discussion as a model of professional reflection, has its historical roots in the work of the Tavistock and Portman NHS Mental Health Trust (the Tavistock), the main national training centre for professionals working in mental health contexts including psychotherapists, psychiatrists and psychologists.

The theoretical underpinning of WD is psychoanalytic theory and the way ordinary human defences may lead professionals to avoid aspects of their work that they experience as upsetting or anxiety provoking. The aim of WD is to provide a carefully structured and facilitated forum where work experience can be sensitively thought about and practices questioned in a way that is attentive to underlying emotion and individual experience. WD facilitators pay careful attention to not only what is openly said but also to what may appear to lie just beneath the surface of discussion, both in order to assist professionals to manage the inherent stress of their work better, and to facilitate professional reflection.

The essence of the atmosphere of the WD group is the feeling of participants to be able to:

"Tell it like it is" ...it is often a very new experience for people to be encouraged to...include subjective thoughts and, sometimes, some acutely painful troubling feelings. The atmosphere of acceptance and genuine interest gradually rubs off (Klauber, 2008, p.xxi)

The WD model of professional reflection used in this research has been adapted specifically to provide a reflective space for early years practitioners to bring examples from their work with a child and/or family to share and explore their experience with each other (we say more about this in the full report). The research has been very fortunate to have two Consultant Child Psychotherapists from the Tavistock (Katy Dearnley and Ruth Seglow), both experts in young children's development and in facilitating Work Discussion groups, facilitating the two Work Discussion groups at the heart of the research.

Work Discussion, as a practice, has strong Froebelian connections. Froebel believed that knowledge depended upon reflection, in particular on reflections of 'man's' own actions (1838, cited in Liebschner 1992). Froebel says:

There will surely be no progress in our cause, nor, in fact, in any line, unless this condition is fulfilled. For every progress depends on that of education; and no education, least of all that of infancy, can get along without the active co-operation of mothers who ought to have a full comprehension of their natural calling, the care of childhood (1992:64)

Whilst Froebel here speaks of 'mothers', he is always clear that this also includes 'teachers' (Liebschner 1992). In a contemporary context, Whinnett (2016) emphasises the importance

of the Froebelian heritage of practitioners gathering together to discuss the children and their work. The importance of systematic opportunities for early years practitioners to engage in professional reflection has been recognised as essential to a 'competent' system of early childhood provision (Urban et al., 2012) and the English Government has made the provision of professional reflection (supervision) a requirement for all practitioners working within the Early Years Foundation Stage (DfE, 2017).

2. Background, aims of the research and research questions

Babies and young children are dependent on close emotional engagements with adults (Panksepp, 2013). In early years practice, such close engagement can bring much pleasure and satisfaction but it can also be stressful and demanding. There is evidence of how practitioners may seek to protect themselves from this stress, when it becomes too much, by distancing themselves from children (see for example Datler et al., 2010). This research project was about increasing the confidence of nursery practitioners to be more responsive to children, parents and colleagues by offering WD as a particular kind of professional discussion forum, in which they would feel safe to talk about their day to day work including attention to the emotional dimensions of that work. The aim of the research was to evaluate the impact of Work Discussion (WD) from the point of view of children, parents and the practitioners participating. Three research questions focussed the work:

1. What do practitioners participating in the WD groups say about their experience of the groups?
2. What do observations of the children reveal about the children's progress;
3. What do parents of the two year olds say about their experience of working in partnership with practitioners?

3. The work carried out

The fieldwork took place between January and December 2017 in a single Local Authority with a high level of multiple disadvantage. The Authority has seven maintained Nursery Schools in Newham and six of these are also Children's Centres. The work was focussed on the only Nursery School and Children Centre (NSCC) in the Authority which has National Teaching School status. This means that it has been recognised as a centre of excellence itself and has a record of raising standards in neighbouring settings.

The original intention was to start the WD sessions and evaluation data collection in September 2017, focussing on the new cohort of two year-olds starting that academic year. In reality, the approval of the contract between the Froebel Trust and the University took longer than expected. This meant that the WD sessions and data collection had to be re-scheduled to start in January 2018. This had the knock on impact of meaning that the majority of the September 2016 intake of children left the two year old provision in the NSCC in July 2017, ready to start a new academic year there in September 2017. Observations of the children thus occurred in January 2017 (providing a pre-intervention baseline), March 2017 and July 2017.

Two WD groups took place. Group 1 (WDG1) was for the team of nine practitioners working with two year-olds in the NSCC. Group 2 (WDG2) was for managers of private and voluntary

sector nurseries in the catchment area of the NSCC. Group 1 participated in 30 WD sessions, ten each term, at weekly intervals and lasting 75 minutes. The impact evaluation was focussed on Group 1 only. Group 2 (WDG2) participated in 15 sessions, five each term at fortnightly intervals, each lasting 90 minutes. The reason that the evaluation focussed on Group 1 only was that the purpose of Group 2 was primarily to give the managers an experience of WD. The intention was that if the evaluation proved positive with Group 1 and the managers had had a positive experience of WD, they might be encouraged to take it up on a longer term basis.

Each WD session was led by two facilitators, one with early years expertise (Peter Elfer) and one with WD facilitating expertise (Katy Dearnley or Ruth Seglow).

4. Summary of findings

What did practitioners participating in the WD sessions say about their experience of the group in terms of their work with children and families;

- i. Practitioners mostly expressed negative dispositions before the start of the group, concerning the time commitment involved, the length of the sessions and having to stay at work late although they were compensated for this additional time by being able to finish work earlier on another day in the week.
- ii. Practitioners were expected to take turns to bring a written case study to the group but nearly all said this was not possible because of time constraints. On the four occasions when a practitioner brought notes, they felt it was beneficial.
- iii. Two practitioners reported that they wanted to discontinue attending the groups but were asked to stay on. They did not tell the group facilitators of their wish to leave.
- iv. Participants mainly saw the Head's participation positively, feeling that he learnt about the children with whom they were working, listened to the practitioners' struggles and valued his contributions and encouragement to the group.
- v. The practitioners found the content of the WD groups important, often saying that they enjoyed the meetings, thought the facilitators asked interesting, thought-provoking questions and valued the facilitators' expression of admiration for their work.
- vi. About a third of the participants expected more from the facilitators in the form of advice and with less focus on exploring presented issues, which they sometimes found uncomfortable. Most, however, said they experienced the groups as generally comfortable and three spoke of how these groups allowed them to open up emotionally, see more clearly things that they already knew, and deal better with their feelings so that they could focus on their work more effectively.
- vii. All the participants thought the WD groups had had benefits in their work with children and families. Perceptions of kinds of benefits varied but included practitioners being less judgemental, more understanding, better able to empathise, better sharing of information within the team, and thinking more deeply and more objectively about the children.
- viii. Eight practitioners also talked about the WD groups becoming an incentive for changes in their practice, trying a different approach with a child or acting on issues more quickly knowing that there would be an opportunity to reflect on it with support.
- ix. Six practitioners also thought the WD groups had had a direct and positive impact on the children including children not discussed within the WD sessions, including improved

social and emotional development. This is consistent with the findings from the child observation data.

- x. The major drawback of the WD groups identified was the time the groups took (see point (i) above).
- xi. Around half the participants explicitly said that the groups had improved their longer term professional development including an increase in confidence and in curiosity about theory. The other half of the participants were uncertain about the impact of the sessions on their professional development.

What did observations of the children reveal about their progress?

- xii. The majority of children made significant progress over the course of the study. Whilst approximately one third (7) of children made age-appropriate gains of 7-8 months, twice that number (14) showed gains ranging between 15 and 26 months. The strength of the qualitative and quantitative data lend confidence to a conclusion that WD may have had a beneficial effect on children's behaviour, as evidenced using statements from *Development Matters* (Early Education, 2012). *Development Matters*, whilst non-statutory (and also not standardised on any particular group of children) was produced by Early Education in England with support from the Department for Education, and is in use in practice.
- xiii. Children from each of the three subgroups made meaningful progress, and there were no significant differences in comparisons of the progress of each group, or of other ways of grouping the children, for example older vs younger children, lower vs higher attaining children etc. This suggests that any effect of participation in WD was similar for the cohort of children as a whole.
- xiv. Whilst there were no significant differences in the progress of different groups of children, it is valuable to highlight the exceptional gains made by two of the initially lowest attaining children. Further research could usefully explore the possible differential effect of practitioner participation in WD for children who may be in such groups.

What did parents of the two year olds say about their experience of working in partnership with practitioners?

- xv. The primary finding in relation to whether partnership with parents had improved is that we cannot be sure. Given the challenging circumstances parents here were often facing, partnership between parents and practitioners may be particularly demanding, requiring considerable investment from all parties (we say more about this in the full report).
- xvi. There was evidence of a lack of shared information between home and setting and between setting and home. Parents were unsure about what happened at nursery and did not share much information about their home environments with practitioners. Of course it could be that parents did not want to discuss their home situations with practitioners but this was not evident in their discussions with the researcher interviewing them.
- xvii. Though there is no direct evidence that the Work Discussion Groups improved relationships between practitioners and parents, parents were much more willing to be interviewed in the last rounds of interviews towards the end of the period of fieldwork. This could be because the parent/practitioner relationship had changed slightly so the practitioner approach changed and parents were more pleased to take

part. Equally, it may have been that growing familiarity with the researcher and her presence in the nursery encouraged parents to be more open.

The key messages from the work with WD Group 2 managers

- xviii. The WDG2 managers were working in a much more challenging context than we had expected. The challenges were in their accommodation (three of the four settings having to share with other users), finance (precarious cash flow issues related to parents' ability to pay fees and delays in reimbursement of the costs of providing free hours), and coping with a highly competitive local nursery market (parents removing their children with little or no notice to cheaper provision or state provision). There were also significant differences in the professional training and experience of the participants which meant that participants had different professional reflection needs.

5. Recommendations

On the basis of the findings above, WD, as one model of professional reflection, has a clear contribution to make to the well-being and progress of children in nursery and to the support and professional development of nursery practitioners. In order for this research to be as helpful as possible in developing in early years policy and practice, the following recommendations are offered:

Dissemination

- i. A summary of the research, approved by the Trust, should be disseminated directly to nursery heads and managers via the Trust website and to the English Government's Department of Education overseeing early years provision. Further dissemination activities should be undertaken as listed in S17 (Full Report).

The organisation of WD groups

- ii. Further discussions should take place with nursery leaders about whether WD sessions could be timed differently so that practitioners were not staying at work later in the day although the difficulties of arranging session times when children are on site is recognised.
- iii. The issue of whether participation in WD sessions should be voluntary or required, as part of professional practice, needs further considerable thought and discussion with heads and practitioners.
- iv. Preparing written presentations for WD sessions is time consuming and needs an explicit allocation of time. However, although this was not mentioned by practitioners, there may also be an issue of anxiety about committing difficulties or struggles to paper, especially if these are to be seen and read by senior managers. A mixed working group of practitioners, heads/managers and WD facilitators, should consider how this anxiety might be best ameliorated in nursery contexts;
- v. Given the differences in training and experience of the participants of WDG 2, consideration should be given to whether the WD model should be adjusted, possibly away from open discussion to a much more structured format, to enable the managers to derive maximum benefit.

Training of WD group facilitators

- vi. The involvement of an experienced child and adolescent psychotherapist in facilitating the WD groups maybe too expensive for this to be realistic if being funded from early years professional development budgets, almost non-existent, rather than from a research project. However, many early years trainers have experience in working with groups and may be interested in a bespoke training, if this could be commissioned from the Tavistock. We recommend therefore that a small working group explore with colleagues at the Tavistock and the content and approach of such a training.

Further research

- vii. Whilst there were no significant differences in the progress of different groups of children, exceptional gains were made by two of the initially lowest attaining children. Further research could usefully explore the possible differential effect of practitioner participation in WD for children who may be in such groups.

FULL REPORT

6. Work Discussion and its distinctive character as a model of professional reflection

The WD approach used in the research was based on an understanding that emotion is at the centre of professional practice with young children and their families. It is a model of professional reflection that is distinctive in its explicit attention to practitioners' individual emotional experiences as part of their day to day work with young children and their families. The WD groups (WDG1), for the nursery practitioners working with the two year olds, aimed to provide a regular forum for practitioners to explore their relationships at work and to acknowledge and discuss the complex situations and associated feelings that emerge from working in close contact with two year olds and their parents. The expectation at the start of the project was that each presenter would provide a written account of a child with whom they were working in order to share details of the child's development or the relationships with the family that would benefit from shared group thinking.

Setting up the group to run in this way with two facilitators who had no direct involvement in the nursery, provides a structure for the staff team to be supported to discuss their work with specific children. From this starting point, the group facilitators are aiming to establish a way of talking about practice issues together and encouraging curiosity about their work. The model depends on the professional expertise of the external facilitators who have experience of working with groups and an understanding of the context of the practice in the Nursery. This role requires sensitivity to the relationships within the staff team and to be attentive to the different group dynamics as they emerge.

It is not a given that individuals involved in WD will remain on the task of thinking about and exploring the agreed task (as for any group of people meeting together!), which for the practitioners in this research was their professional relationships (the group is not a place for discussion of personal difficulties). This can often be due to the feelings that individuals bring with them on the day such as not really wanting to be there after a long day at work or personal preoccupations that get in the way. An atmosphere can easily get going when the mood shifts, and the focus begins to slip from the main task. This can include a number of different processes that involve individuals and sub groups working against the flow of the discussion. Other dynamics involve the belief that the facilitators are the experts and the group members become inhibited about their own contributions. Sometimes the discussion content may become too difficult to process and there is a reaction against the facilitators with the majority of the group shifting the direction of the thinking back to a place where they feel more secure. Wilfried Bion, the founding psychoanalytic theorist on group processes, describes the ways groups may avoid the discussions that are too painful or challenging by resorting to positions of avoidance including for example blame (if only our managers, Government, Ofsted...were different) or to dependence (we are entitled to expect the group facilitators to produce solutions) (Bion xxx).

Getting a group to work together therefore takes time and skilful facilitation to enable the discussion to develop in a way that the content is neither too 'hot' to cause anxiety or too 'cold' and lack challenge. As well as these dynamics that shift backwards and forwards, the group itself also evolves over time as the members become more familiar with the expectations and gain the confidence to explore ideas and take on roles within the discussion that might be different from their familiar positions.

Part of the role of the facilitators is to try to make sense of what is happening during the course of the discussion in order to keep hold of the primary task which is about exploring relationships at work. But, they need to do this in a responsive way so that they can use timely clarification or prompts to introduce different ways of making sense of the discussion. This was evident throughout the sessions as a whole and can be more effectively attended to with two facilitators. Being familiar with the way groups function, combined with making use of their own feelings about the group mood becomes a means of enabling more attuned responses to emerge. Often, during the process of the discussion, the use of these skills can help to identify some of the underlying emotional processes that evolve. This happens through the content of the discussion and from the way that clarifications or suggestions are either taken up in the development of the discussion or disappear into silence.

By reframing discussions whilst at the same time holding clearly to agreed procedures, for example to do with referrals or safeguarding, acknowledging that the team needed to follow the procedures in place to refer the child can help a group consider other factors which could lead to a greater confidence in their own contribution to working with the children and their parents. From the facilitators' point of view, such judgements about when and how to reframe a discussion in a way that is acutely sensitive to the atmosphere in the group and the group's capacity, in that moment, to think about a difficult issue, are delicate and subtle. The capacity of an individual to think about a difficult issue varies for most people according to their energy levels, mood and other preoccupations they may have. The same is true, in a magnified way, for groups and it can be rather knife edge, when facilitators' respond, whether the response is received as helpful or undermining of thinking.

7. The research design

The research was essentially organised to provide WD sessions to two groups, one in a Nursery School and Children's Centre (NSCC) with National Teaching Status (NTS)² and one for managers of private and voluntary sector nurseries in the catchment area of the NSCC. WD Group One (WDG1) in the NSCC was for practitioners working with the two year olds there and it is this group that has been the main focus of the research. The purpose of WD in the second group was to give those managers an experience of WD but impact has not been formally evaluated. Evaluation of the WDG1 sessions has run alongside, but entirely separate from, the sessions themselves to maximise the objectivity of the evaluation.

Three sources of data to evaluate the impact of the WD sessions were collected. Observations of children were made at three points during the course of the WD sessions. Interviews were held with participants of the WD groups, and with parents of the two year-olds attending the NSCC, at the beginning of the study and then at the end of the second and third terms. The data collected in relation to each WD group is summarised in Appendix One. A description of the ethical procedures used in the project is given in Section 16. A full discussion of the methodology of the project has now been published³.

² NTS means that a setting has been recognised nationally as outstanding and has a record of raising the standards of linked nursery settings.

³ A full discussion of the research design and its methodology is now published as Peter Elfer, Sue Greenfield, Sue Robson, Dilys Wilson & Antonia Zachariou Love, satisfaction and exhaustion in the nursery: methodological issues in evaluating the impact of Work Discussion groups in the nursery.

8. The professional context of the two WD groups

The two Work Discussion groups occurred in a single Local Authority. The three main ethnic groups in the Authority are Asian / British Asian (46%); White (27%); Black / Black British (18%). According to rankings of multiple disadvantage, the Authority is second highest (most deprivation) of 33 London authorities and second highest of 326 English local authorities (Social Mobility Commission 2017).

WD Group 1 is a team of nine practitioners working with two year-olds in a nursery with National Teaching School (NTS) status. In English education policy, NTS status means that a school has been recognised as a centre of excellence with a record of raising standards in neighbouring settings (NCTL 2017). WD Group 2 is for managers of nurseries in the catchment area of the NTS. Seven nurseries were invited to participate in WD2. Of these seven, four nurseries took up the invitation with one manager leaving half way through because of work demands and her pregnancy. Six managers (two job share managers from each of the remaining three nurseries) completed the sessions in WD2.

‘Vulnerable children’, that is where the family are in receipt of forms of income support, where the child has a special educational need (SEN) or an education, health and care (EHC) plan or where they are looked after by the Council), are entitled to a free nursery place at aged two. The nursery has one of the highest mobility rates in the borough at 40% (out of 180 children on role, 19 left without completing the nursery phase and 54 arrived mid-year. Of that 54, 13 both arrived and left mid-year). One possible explanation for this is that most local accommodation is privately rented so that when the housing benefit cap was implemented in 2016, the Local Council were not able to pay the additional cost of rent increases and families were sometimes forced to move out.

In WDG1, the practitioners were working entirely with vulnerable two year-olds, with one group of approximately 16 children in the morning and two groups of approximately 16 children each in the afternoon.

In WDG2, the managers also included vulnerable two year-olds in their nurseries but took other children too on a mainly commercial basis ie ability to pay.

This Report mainly focusses on WD Group One as it was in relation to that Group that impact was evaluated. A brief discussion of WD Group Two is given in Section 15 below.

9. The organisation of WD Group One, the participants and professional and personal factors influencing the discussions

Practitioners were invited by their Head to participate in WDG1. Those interested attended the first meeting where the facilitators described the aims and approach of the group so that practitioners had a chance to consider participation before signing consent forms. The Head arranged shift times so that the WD time was fully accommodated within the paid working week. It was uncertain how easy or difficult it may have been for practitioners to decline participation, as although participation was presented as voluntary, some may have felt an expectation to participate. We report on this under Section 12 below. Participants were told that they were free to bring any issue to do with their work in the nursery for discussion,

taking turns week by week. The issue may be a problem or a piece of work that was going well. They were asked to present it as a detailed written account, from their point of view, including as much detail as possible. Finally, it was emphasised that the aim was to think together about any difficulties with the intention of managing them better, not to attribute blame or criticism. A number of factors are important to report as affecting the dynamics of WDG1.

WDG1 included the Head of the nursery. This was not a straightforward decision. Many practitioners may feel reluctant to talk openly in front of their Head about aspects of their work that they found difficult or they felt they had not managed well. On the other hand, we considered it important that the Head, as ultimately accountable for the functioning of the nursery and the issues faced by staff, should be present to hear first-hand about the issues practitioners chose to bring for discussion. The head agreed to be a full member of the group

Seven of the nine WDG1 participants were women and participants were from different ethnic backgrounds. The two facilitators were both white, one woman and one man. The Head was also male and white. There are therefore cultural and gender factors which are difficult to assess here in how the discussions were constructed. However, a clear gender factor was that a combination of maternity leave and family caring expectations influenced the stability of attendance and membership of the group. Nursery heads and managers have to balance competing staffing priorities. They must ensure roles across the nursery are appropriately covered whilst enabling staff to change roles in order to ensure best deployment of experience and skills and to ensure that practitioners have chances to develop their experience. Although the WD sessions were carefully scheduled to take place in work time, the overall demands on practitioners meant that there was some sense of the WD group being 'squeezed in' to a tight time schedule and that additional time for preparing written presentations was extremely limited.

10. The issues participants presented for discussion

Practitioners in WDG 1 were asked to take turns to bring a written presentation of any issue to do with their work with children, family members or colleagues. We emphasised that the issue did not have to be a 'problem' but might be a piece of work that had gone exceptionally well. Analysis of the weekly discussions showed that the great majority of issues brought (86%) expressed concerns about developmental issues for the children. These issues fell into two broad groups, one to do with children separating from the family member who had brought them to nursery and settling into the nursery or the degree of a child's attachment to a particular practitioner; the other was to do with managing behavioural boundaries and working with children on the autistic spectrum.

Although practitioners had been asked to bring a written description of the issue as they understood it from their point of view, this happened in only four of the 29 presentations overall. Presentations mainly did not include detail of interactions in the setting or contextual information (family / history) from outside. In addition, practitioners mainly did not say why they had brought a particular issue for discussion. Sometimes this became obvious as the discussion unfolded but this did not always happen. In those cases, when the practitioner presenting was asked why she or he had brought the issue, they sometimes said they

thought the issue might be of interest to the group; practitioners rarely directly said how the particular issue they had brought impacted on them as an individual worker.

11. How the WD participants talked about these issues

When the group started in January 2017, there was a sense of competitiveness amongst the practitioners with everyone wanting to speak but not much sense of listening to one another. One of the earliest issues discussed concerned a child who cried a lot when parents departed or when he was not allowed to do something. The suggestion was made by the facilitators that it may be important not to comfort him immediately when this happened but to see if he could gradually begin to cope with separations and boundaries. This suggestion was rejected on the grounds that the head, who was not present at that session, did not want children left crying. We understood this as suggesting that the group was not very used to discussing general practices and expectations in the nursery so that they could be applied a little more flexibly to individual situations.

As the sessions progressed through the first term, practitioners became more confident about taking turns to talk but also frequently said that they did not always understand the point of discussing an issue. The view seemed to be that children arrived in the morning and it was their professional role to deal with that child and her or his family situation as it was 'given to them'. As far as time allowed, they would talk with one another during the course of the day about how they were working with the child. The value of a more exploratory discussion as a whole group about a particular child often seemed a mystery to them especially when they had many other tasks that they felt they could be dealing with in the WD time. This reluctance might represent an anxiety about revealing an individual struggle to manage a particularly child or situation in front of their head and in front of peers for fear of criticism or being seen as 'not coping'. Reassurance from the facilitators that the purpose of the group was to discuss and explore difficulties so that the work could be managed better, not to criticise or pass judgement, was often to little avail.

By the end of the first term (the first ten sessions of the 30⁴), there were signs that the group was thinking and talking together in a different way from the beginning. This showed itself in four ways. There were more spontaneous contributions to the discussion with practitioners adding detail and giving illustrative examples of interactions in a lively way. There was evidence of increased curiosity, for example one of the practitioners thought a child may be being 'babyfied' (not allowed to manage) which led to the facilitators suggesting the possibility of the child also being 'adultfied' (allowed too much responsibility). The possible presence of these two patterns provoked considerable discussion. Third, there was some expression of negative feeling about investing much work to help children form attachments only to find that when the child was due to move onto the next age group class and some distress at separation was expected, the child appeared to be quite at ease with their own progression! Finally, there was a general increase in confidence in participants' readiness to speak in the group. Nevertheless, the group still seemed to struggle with any direct exploration from the facilitators in the form of questions about a particular presentation. They spoke of their dread at presenting when it was followed by what one practitioner in the group

⁴ The reference to 29 presentations earlier in the Report is because the 30th session was a review of the sessions and did not entail a presentation)

described as 'dig, dig, dig' from the facilitators. We understood this as a real resentment about the questioning which on our part was intended only to understand the issue more clearly.

In the second term, mindful of the sensitivity of the group to the processes of discussion, we adjusted our procedure slightly to allow some time at the beginning of the group for participants to work in pairs talking together about how their work had been since the last session. This increased attention to their own wellbeing and our explicit recognition of how difficult it might be to finish work and immediately come to a meeting to discuss it, seemed to be valued by the group and to help to make the group discussions more relaxed. By the third term, now in a new academic year, there were considerable changes of staffing and a new team leader. Two of the new members of the group had had prior experience of professional reflection groups and immediately welcomed the WD sessions as an opportunity for support. With this change of membership and with the group learning that had occurred in the previous two terms, there seemed to be a significant shift forward in the depth of discussions and how these were valued. It was evident to the facilitators however, how often when a piece of work that a practitioner had done with a child or family was positively acknowledged by the facilitators, that this recognition was dismissed as just 'part of what we do'. Their individual professionalism, as a unique contribution to a child or family, through close working relationships established over time and often with great work and struggle, when pointed out, was often dismissed as routine and something 'anyone could have done'. They gave themselves very little individual value.

The research evaluators report fully in the next section (Section 12) on participants' feedback. The facilitators' conclusion was of how much had been achieved in the first 30 sessions but that these sessions also represented only the beginning of establishing a fully working, professionally reflective group. Real thinking about work is itself hard work and not easy to engage with in an open and constructively critical way, especially at the end of the working day.

In the next three sections we report data from the research with three different groups, the WD participants themselves, the two year-old children and the parents of these children. The research design was intended to give us evaluation data from these three perspectives that had significance in its own right but that also could be triangulated. In each section, we report on the data collected and then on its analysis and findings.

12. What the participants of Work Discussion Group 1 said about their experience of the groups

This section is based on what the participants told the independent evaluation team in their interviews. 14 practitioners (13 female, 1 male) were interviewed and voice recorded throughout the project. Managing this element of the evaluation meant conducting the one-to-one interviews at three times throughout the intervention: once at the start of the intervention, once mid-way through and once at the end of the intervention. Summary data are presented in Table 1.

Table 1: Total interviews and practitioners interviewed

	Interviews	Practitioners interviewed
February-May 2017	9 (sum=5h 7m, $M=34m$, $SD=6m\ 37s$, Interview length range 22m – 40m)	Gabriel, Marina, Zena, Tanisha, Aziza, Stella, Daria, Hayley, Beena
July 2017	7 (sum= 4hr 52m, $M=42m$, $SD=11m\ 53s$, Interview length range 28m – 59m)	Gabriel, Marina, Zena, Tanisha, Aziza, Stella, Daria
December 2017	9 (sum=7h 10m, $M=48m$, $SD=10m\ 20s$, Interview length range 37m – 68m)	Gabriel, Marina, Zena, Tanisha, Paloma, Christine, Alexandra, Alice, Salma
TOTAL	25 (sum=17h 9m, Interview length range 22m - 68m)	14 different practitioners

Please keep in mind that from the beginning to the end of the project, 14 practitioners in total were interviewed and findings are reported and compared in relation to that total of 14 participants). Within the overall question above, we were interested in five questions:

1. What were practitioners' dispositions and expectations about the WD sessions before they started?
2. How did the practitioners evaluate their experience of the WD group discussions?
3. What did the practitioners say about the benefits of the WD groups?
4. What did the practitioners say about the drawbacks of the WD groups?
5. What did practitioners say about the benefits of WD for their professional development?

Procedure

The interviews took place at three different time points throughout the project: at the beginning of the project, half-way through the project and at the end of the project. A semi-structured interview schedule was employed for the purposes of evaluating the intervention.

Participants

In total, from the beginning to the end of the project, fourteen different practitioners participated in the interviews. Nine practitioners participated in the first round of interviews. The practitioners' availability for interviews was very limited, hence why the interviews took place at different times. Six of the practitioners had their first interview in February 2017, one had their interview in March and the last two practitioners had their interview towards the end of May. In July, the seven members of staff attending the work discussion groups were interviewed again. Between the first and this second round of interviews, two practitioners had stopped attending the WD groups and were therefore not included in the interviews. In December 2017, nine practitioners were interviewed. Four of the practitioners had remained the same from the beginning of the project and five new members of staff were added to the WD group. Among the practitioners, some had attended all the sessions, and some joined the sessions after the official start of the project and as soon as they had started working with the two year-olds.

Tools

We had to develop an interview schedule, because of the lack of a validated interview schedule for evaluating a similar intervention. We developed the interview schedule on the basis of previous research that had similar aims with the present project. Previous research on the evaluation of interventions (e.g. Baernstein and Fryer-Edwards, 2003), on the impact evaluation of professional development programmes (e.g. King, 2014) and research on reflection in education (e.g. Mann, Gordon, & MacLeod, 2009) informed this interview schedule. Each interview was voice-recorded using a researcher-operated digital voice-recorder.

Coding

All the interviews were analysed using theoretical thematic analysis. Theoretical thematic analysis is a process used with qualitative information which allows the encoding of qualitative information through searching across a data set to find repeated patterns of meaning (Boyatzis, 1998; Braun & Clarke, 2006). This procedure involved generating a list of initial codes. Once the codes were identified, a search for themes began, with 'theme' being defined as a grouping of related codes (Boyatzis, 1998). Then these themes were reviewed, defined and named. Theoretical thematic analysis was chosen as a method of analysis because it was 'fit for purpose' for the present study, given that it can be driven by the researcher's theoretical or analytic interest, and can thus be more explicitly analyst-driven and also tends to provide a more detailed analysis of only some aspects of the data (Braun & Clarke, 2006). The NVivo Pro 11 software was used for the purposes of this analysis. All the interviews were input on the software before the process of theoretical thematic analysis began. The three different rounds of interviews were analysed separately, before drawing them together to report the final results from all participants.

What were practitioners' dispositions and expectations about the WD sessions before they started?

Practitioners mostly expressed having negative dispositions before the start of the groups, the prevalent disposition (6) concerning their time, the length of the sessions and having to stay at work late. A few practitioners (3) were nervous about having to speak in front of other people. As practitioners explained, they were not confident about speaking in large groups or in front of people they did not know:

I was a bit nervous because I did not know what it was. I was shy as well, because it was a bigger group... It was my team members but it was also two people from outside. (Beena-1)

Some practitioners explicitly mentioned that they thought this project would not be helpful and would be a waste of their time, or were intimidated by other elements of the project such as the video observations (2) which they thought they would have to watch and discuss in front of the whole group:

I was so scared, because - you know - Sue was recording us and I thought oh Gosh we are going to watch our videos, with everybody there, they are going to watch us. So I was scared, what if I have done something wrong?. (Zena)

Very few positive dispositions were mentioned. Three of the practitioners expressed their interest in and positive attitude towards these Work Discussion groups (Gabriel, Alice, Salma). With regard to their expectations of the sessions, nine practitioners said they had no concrete expectations although further discussion revealed seven practitioners' expectation that it would entail peer reflection on practice. Four thought this reflection would be based on watching the videos of their practice. This misunderstanding of the aims of the project initially arose despite an explanation at the outset of the purpose and use of the observations, making it clear that video clips would not be shown in the WD sessions for discussion.

How did the practitioners evaluate their experience of the WD group sessions?

Process and structure

Practitioners were expected to take turns to bring a written case study to the group but nearly all (13) said this was not possible because of time constraints. However, most (8) also clearly saw that on the small number of occasions when this had been possible (4 out of 30 WD sessions), it appeared to help in the presentation of the case study. One practitioner, who had made some notes rather than preparing a full case study, explained:

...thinking that you only need to write notes rather than a case study makes it more relaxed, less stressful and more likely to do. (Gabriel).

Practitioners also found colleagues' hesitation to talk difficult (10). This hesitation meant that there were silences, which they experienced as 'awkward' (5):

There are times when no one knows what to say. There is a question and we think Oh Gosh what do they mean by this? What should we say? But then we find that Gabriel is usually the one who jumps in and fills the gaps or those awkward silences. (Salma-3)

Most of the practitioners (9) identified as a problem that either they themselves or other members of the team would hesitate to contribute to the discussion, which led to some people doing more talking than others. To combat this, two members of the group suggested starting with an ice-breaker activity or also making the session more active and more interactive.

Finally, two of the practitioners reported that they wanted to discontinue attending the WD groups, but they were asked to stay on. The practitioners did not talk to the facilitators about their wish. This presents something of a dilemma. Clearly, as research participants, the practitioners have a right to withdraw at any time. On the other hand, the head might express an expectation, or encourage the practitioners, that as professional practitioners discussing work during work time, they should try and remain committed to the group. Whether participation in WD groups, within work time, should be completely voluntary or an expectation is an issue that needs further consideration.

In relation to elements of process and structure that worked well, eight of the practitioners commented that they felt the WD groups worked well, five particularly valuing a change in procedure:

Previously when you started (the WD group) you would go straight into talking about your children, and it was very awkward [...]. The facilitators picked up on that and we discussed what we can do. We suggested maybe talking about other things first, to break the ice. So now we start by discussing how our week has been and it is a bit more relaxed. That's quite nice. (Aziza-2)

The approach of the WD group facilitators was also mostly discussed in a positive light. For the practitioners (3), it was important that the facilitators appreciated and respected their time, encouraged them to speak and discuss (3), would listen to and acknowledge all contributions and would never put pressure on specific people to speak (3). Practitioners also appreciated that those participating in the WD groups and staying later on Mondays could go home early on another day of the week (5) or could get a day off during the term (3).

Eight practitioners found the content of the WD groups important, often saying that they enjoyed the meetings, thought the facilitators asked interesting, thought-provoking questions and valuing the facilitators' expression of admiration for their work. A question in the design of the research was whether it is helpful or inhibiting to have senior managers present in the group. However, these WD participants mainly saw their head's participation positively, believing that he would learn about the children and about the practitioners' struggles (8) and they appreciated that he would join in and give suggestions and information about children (4) and would often encourage discussion in the WD groups (3). However, five practitioners also reflected on whether the participants would be more open if the head was not there, but often they also recognised the importance and added value of his presence. A negative element reported from the practitioners was linked to the sessions or some of their parts feeling too long. This was mainly linked to the their perception of discussions being repetitive or not particularly interesting if the child that was spoken about was one that they already knew a lot about (4).

Content of the sessions

The practitioners seemed to have expected more input from the facilitators. Some practitioners expressed this as wanting more advice from the facilitators -as experts in their fields - or solutions for their problems (4). For example, Hayley was expecting that 'facilitators could talk about: if you do this, you help this aspect of (the child's) development, but if you do it in this other way, you help this other development'. Some of the practitioners (2) also explained their need for setting next steps or action points for the case studies with the facilitators, and the need to return to the children in future sessions to see if the next steps had been followed.

Finally, some practitioners felt the different perspectives or questions from the facilitators seemed irrelevant or not to the point, or even as if they were 'digging too deep' when they felt the reality was not so complicated (4):

When the facilitators try to see whether there is anything else behind it (the child's behaviour) [...], sometimes there is not always a need to find what is behind. [...] Sometimes they say other things and I feel that those are not particularly relevant to the situation. (Stella-1)

This feeling of 'digging too deep' was also present in some practitioners' dissatisfaction with the WD groups feeling like group therapy sessions where a lot of talk on feelings was prompted and they were not happy with this (3):

I remember these like therapy. It's always about how do we feel about..., don't we get annoyed... in our practice if a child does something. Sometimes all these questions have that feeling of therapy. [...] Actually, I don't feel like this (annoyed), because it is my job and I try to understand my children. (Marina-2)

Levels of satisfaction with the WD

Levels of satisfaction varied between Phase 1 and Phase 3. In Phase 1, 7 out of the 8 practitioners were at least quite satisfied with the work discussion groups. Overall, in Phase 2, three practitioners' level of satisfaction decreased, but 5 out of 7 were still at least quite satisfied with the WD groups.

At the end of the project, after Phase 3, there was an important change, since six out of the 9 practitioners said they were very satisfied with the WD groups. Five of these practitioners had only joined the group in Phase 3 and one was the practitioner who was stable in expressing high satisfaction since the start of the project. Despite these result, it is not possible to argue that the practitioners' level of satisfaction increased, since firstly, five of the participants who were very satisfied had only just joined the project, and secondly, none of the practitioners who had attended WD groups from the beginning moved to being very satisfied in the duration of the project.

What did the practitioners say about the benefits of the WD groups?

Change in the relationship with children and parents

The practitioners said they thought the groups had had an effect on their relationship with parents and children. They reported that they felt they had grown closer with the child discussed in the groups:

His relationship with me is much closer. [...] Apparently he always talks about me at home [...]. Our relationship is much better. (Stella-2)

We say more about this in the next subsection.

Eight of the practitioners thought that their relationship with parents changed. They explained this by saying that now they were less judgemental, more understanding towards the parents and able to empathise more. Some of them put this down to knowing more about what the parents are going through, because of all the discussions held during the WD groups. Salma-3 gave an example of how she was in the process of changing her relationship with a parent:

From my point of view, mum [...] was not fully engaging and fully wishing to help us (settle in her child). [...] But the way we spoke about this case in the group discussion, it helped me to see her from a different point of view and say 'maybe I was too critical. [...] Maybe I should try a different way of approaching her' [...]. So I am not being as critical towards her as I was before that discussion.

She went on to explain:

My thinking about how I want to next approach this mum has changed. (Parents had been unwell and the child was not attending, so maybe we could) Get them a get-well card and tell them that we are still thinking about them and we are waiting for them to come back. To encourage them. Just to know that we have not forgotten them.

Changes in the relationship with other practitioners

Most of the practitioners (10) talked about how they felt these WD groups had brought some changes in their relationship with other practitioners:

I think it has brought everybody closer, because it is the one time when we can actually talk to each other. [...] Very rarely are we all *together* because our schedules are so busy every day of the week....It's brought everybody closer, I know it has. I can just see the difference. As soon as this started, it just made everybody come together, with everything that was happening with the team losing staff... (Aziza-2)

Two of these practitioners indicated that they thought that they now shared more information and more freely with other practitioners in the team, because they now appreciated the usefulness of doing so. Three other practitioners explained that through the WD groups they got the opportunity to get to know each other better, especially as new practitioners joined.

Impact on practitioners' feelings

Notwithstanding the reference above to three practitioners indicating they were not happy to talk about their feeling too much, eight of the practitioners experienced the groups as comfortable and open where it was 'ok to say how you feel'. Five of these practitioners and one more practitioner went a step further and explained that for them these groups were cathartic. As Gabriel-2 said:

I really enjoy doing the groups. Even at the bottom level, it is quite cathartic being able to talk about your children after the session and talking about things that went well, things that didn't. (Gabriel-2)

Some of the practitioners drew parallels between WD groups and group therapy and explained how these groups made them feel stronger. At an even deeper level of reflection, three of the practitioners spoke of how these groups allowed them to open up emotionally, see more clearly things that they already knew, and deal better with their feelings so that they could focus on their work more effectively:

it (the WD group) just helped me clear my mind. I knew that stuff (already), but it was like my vision was blurred [...]. I knew the history of that child, but talking through it, it opened me up a bit emotionally [...], and then to talk through it and have all these questions, it did make a huge difference. (Aziza-2)

For me it's almost like a kettle. So you boil the kettle, stuff comes up, which is your stuff, and then it cools down and then you are able to deal with your work effectively [...] with the families that you are working with.

As an organisation, when your staff are dealing with challenging families, you have to find a way of allowing them to express their feelings so that they are able to be effective for your organisation. And this, I thought, was amazing (Alexandra-3)

Perceived impact on their practice

Five practitioners' initial reactions (at their first interview) were that they could not see any impact on their work. Despite this, all five practitioners in the rest of their interviews indicated at least one or two ways in which the intervention had had an impact on their practice, but without naming it as such. According to almost all the practitioners (13), the WD groups brought to light background and deeper information about children. For the practitioners it was important that all the team was now aware of this information and they explained how this information helped them in understanding the parent and the child's behaviours:

I had no idea about this child's background. [...] We thought that the parent was really over protective of that child. But then with some of the information that came up during the discussion it was completely obvious why and I didn't know any of that background. But then, again, I think it made me understand some of the parent's behaviours but also some of the child's behaviours. (Gabriel-1)

Most of the practitioners (11) also linked these WD groups with thinking more deeply and looking at the children more closely and deeply. More specifically, the practitioners explained that they would now become more aware, and be keen to explore alternative reasons why something was happening. They often explained how they would now try to look for the underlying causes of children's behaviours:

You think about why other children are doing particular things or sometimes we just think a bit more deep on why the child is reacting like that. It could be because at home there could be something going on. (Daria-1)

As a result of knowing more about the children and of thinking more deeply about the underlying causes of children's behaviours, eight practitioners (8) reported that they would now approach the children differently, explaining that they would address behaviours differently, often in a less firm way than they would have done in the past:

there are challenging children and at first you would say 'oh God he is doing this again'. But then you find out [...] what is behind the behaviour, you [...] see it differently. You (try to) keep calm and try to explain again and again if you have to or try different things. (Marina).

Not even consciously, but I just felt myself interacting with this child differently after that (WD group). In the past (I would deal with this in) a firmer and really immediate (way). But after talking about it [...] it would be (me) taking the child away to another activity and spending more one-to-one time with them and seeing a kind of

improvement [...], because it stopped tantrums after the problem behaviour and it gave the child more one-to-one attention, which was what he needed. (Gabriel-1)

The practitioners think more and more objectively before they act

Four practitioners spoke of thinking more before they acted, taking a step back and think more objectively about the child's behaviour, because of the unbiased or different perspectives on the children and their situations discussed in the groups:

So something similar or something completely different happens and then you try to think of another way of looking at the situation, so it broadens your mind a little bit, rather than having a preconceived idea about why things are happening. (Paloma-2)

In total most of the practitioners (12) talked about the WD groups becoming an incentive for changes in their practice, trying a different approach with a child, acting on issues more quickly or improving their practice after learning from how the team would engage with the child.

Practitioners (6) also thought the WD groups had an impact on the children's outcomes. Even though they widely acknowledged that it was very difficult to separate the effects of WD groups from the children's maturation or other effects, they were able to give examples of children where they thought that WD groups had had a clear impact, pinpointing for each child where the child was facing most challenges and where the child's outcomes improved. For some children this had to do with accelerated social and emotional development, for another child this had to do with being happier at the nursery and for another case this had to do with physical development. An example of accelerated social and emotional development came Gabriel:

One child, if I ask him to stop doing something, he will look very upset, because he doesn't like to make the adult angry. But my approach now is a little bit different with him, because I try to approach him in a way that he will not experience that feeling that he has made someone that he cares about upset. So, I try to do it in a more playful way [...] rather than saying 'stop' [...]. So (in this way) he can deal with the problem of having to stop playing and do what he wants to do [...] without those feelings of guilt and sadness. (I am doing this) To help him understand that things can be delayed and it is fine to stop one thing and do something else.

The route via which the children's outcomes changed was always linked to the practitioners' approach which was informed by the WD groups. Different practitioners cited different changes in their approach, such as being calmer or more positive. Also, two of the practitioners maintained that for some children, their outcomes improved mainly because the whole team was now aware of their challenges and everybody now approached the child in the same way. This consistency in practitioners' approach had a beneficial effect on the children's outcomes.

Seven of the practitioners also talked about how the intervention had an effect on other children, and not just the children discussed in the WD groups, because of the change in the practitioners' approach. According to Salma, if the practitioners are positive with the children

(because of the WD groups), the children will also be more receptive and have a more positive attitude:

They will learn different things because the way we ask questions, the way we praise them, the way we deal with them, [...] have a positive or negative impact on children. For me, analysing (in the WD groups) will definitely have a positive impact on the children's learning and attitude. Children can really feel what you feel and respond in different ways (attuned) to the way you respond to them. So if you are very positive towards them, they will give the same attitude to you.

What did the practitioners say about the drawbacks / costs of the WD groups

The major drawback expressed by practitioners had to do with time (10). This concern was more prominent in the first phase than in the second or third phases. Timing concerns manifested in different ways. Six practitioners said that they were not happy with staying longer at the setting:

You just want to go home at 4.30, isn't it? Because you have had a really long day on Monday, you just want to go home. (Hayley-1)

Hayley also mentioned child care issues for her own children, if she had to stay longer at work. Five practitioners thought the length of the WD sessions (75 minutes) could be shorter:

It is taking up too much time, whereas we could do this quicker. [...] Sometimes it can drag on, whereas you could use that time to do something else. (Beena-1)

Three practitioners suggested that the overall duration of the project could have been shorter (3) and two more suggested that the sessions should be less frequent, for example biweekly. Almost all of the practitioners felt that either the frequency, the length of sessions or the length of the project were costing them time in relation to their current work:

On the one hand the project was helpful (...), but on the other side I had less time to do my actual books and paperwork. So that affected us, because we do not have time... Many times, I just try to finish my work at home. (Marina-3)

Another related aspect had to do with the fact that the practitioners could not prepare written case studies for the WD groups, which all attributed to lack of time.. Even the practitioners who did bring a case study to the work discussion group, often discussed that they either quickly jotted some notes down or they had to prepare this in their own time, at the expense of their time at home.

Another significant drawback that emerged, which could have impacted the practitioners' work, was that sometimes they felt that their points were misinterpreted or not understood during the groups. Some practitioners even mentioned that they felt the head judged them and seemed to have linked that to a misunderstanding:

sometimes when something happens, if the head-teacher doesn't like something he hears, then sometimes he does get me to feel that everything we are doing is wrong.

It is important to note that these concerns appeared in three different practitioners' interviews after the end of Phase 2 and nearly disappeared by the end of Phase 3 (only two practitioners mentioned this and specifically referred to this happening in Phase 2. This was linked to an incident that was discussed in Phase 2 which triggered this and appeared to have been resolved by Phase 3). Despite this, these feelings could have potentially had negative effects on their practice, in terms of levels of stress and satisfaction in practitioners' work, since the practitioners were not feeling valued and felt targeted. One of these practitioners went further to explain that she found the WD groups nerve-racking and felt stressed during WD groups. These higher levels of stress could potentially be linked to the incident above that made practitioners feel judged and could have resulted to higher levels of stress in practice and maybe even had an effect on the quality of practitioners' practice.

What did practitioners say about the benefits of WD for their professional development?

Two practitioners stated that they did not think this was useful for their professional development. Four other practitioners' first reactions were to state that they were not sure the groups would be relevant or useful for their professional development. However, all of the aforementioned practitioners, at other points in their interviews, mentioned skills or knowledge they had acquired that was closely linked to their professional development. This suggests that the practitioners' understanding of the WD groups' impact on their professional development was still implicit.

In terms of the benefits of WD for professional development, practitioners reported benefits in two broad areas, an increase in their self-confidence, and accumulating knowledge that will inform their future work, together with nurturing their ability to reflect, think deep and look for the reasons behind children's and parents' behaviours. Six of the practitioners discussed how they had become less nervous and more confident to speak in front of other people. A striking example comes from Zena, who had initially reported finding the WD groups very stressful and nerve-racking. In her last interview, she referred to having been so nervous but and that it had made her develop and she was now more confident. At least five practitioners spoke of similar feelings of increased confidence in their work and whilst most practitioners did not say this explicitly, they discussed how these groups gave them confirmation that their practice was good:

I think in some ways it (my attitude) was improved, in the sense that I have the confidence in what I am doing and being confident enough to share that with other people. [...] I guess the other thing is that it (WD group) has almost reinforced the importance of what you do. The work discussion groups reinforced that what you are doing is very important [...] and sometimes working on a job like this on a day to day basis, you can lose sight of this, because it is not considered as important as mainstream or compulsory education, but it is the foundation for this and doing the WD groups helped to reinforce that a bit. (Gabriel-3).

Eleven practitioners also talked about accumulating knowledge and a shift in their attitudes, which will inform their future work in various ways:

When you are discussing something in some much depth, it stays with you. So, I think that even two-three years down the line you will probably remember ‘oh, let me try this out or let me try that out.

These eleven practitioners described the accumulation of knowledge and shift in their attitudes in different ways. Some practitioners (8) talked about learning from how the team would engage with the children which led to improving their own practice as professionals. Six of the practitioners also reported that they learnt from the child psychology or as they often called this, *the new perspectives*, that were presented in the WD groups. A last area that could be linked to practitioners’ professional development was that these WD groups enabled them to reflect, think deep and look for the reasons behind children’s and parents’ behaviours (6). This is an attitude that is likely to inform the practitioners’ practice both in the future, hence why it is included as an area of professional development. The quote below from Gabriel summarizes beautifully the ways in which practitioners’ knowledge and attitude have developed through WD and the way they can inform their future work.

[My knowledge changes because of] some of the Child psychology that is presented to us. Usually (one of the facilitators) might talk about things in a way that a psychologist might think about. That makes you think a little bit about ‘ah ok maybe there is another reason for some things. That’s made me a bit more aware of things. Then, using that knowledge or that perspective and continuing that in other cases as well. Not just everything is being case-specific. (For example, it is not) that [one perspective] is mentioned and that only applies to child A, but (we can be) using that mindset to look at child B, C and D ...

13. What did observations of the children reveal about their progress?

23 children (8 boys, 15 girls, reflecting gender composition in setting) aged 2.5-3.1 at start of project ($M=2.9$, $SD=3.07$), and 2.11-3.7 at the end, were observed and video recorded in rounds 1-3 (January –July). After this time they moved to a new room in the centre, with different practitioners. Summary data are presented in Table 2.

Table 2: Total video excerpts and child observations

	Video excerpts	Child observations
January	63 (sum=8h 24m, $M=8m$, $SD=5m$ 22s, range 49s - 23m 12s)	108
March	43 (sum=5hr, $M=7m$, $SD=3m$ 38s, range 23s - 27m 2s)	91
July	103 (sum=6h 56m 44s, $M=4m$ 3s, $SD=3m$ 16s, range 13s - 18m)	200
TOTAL	209 (sum=20h 20m 44s, range 13s - 27m 2s)	399 (Mean number per child 17, $SD= 4.8$, range 9-27)

Research Questions

1. Has this group of children made significantly more progress than could be expected? (i.e. progress significantly beyond that predicted by the age-related development bands of the EYFS?)
2. Have children who have been the subject of a WD session made better progress than those children who were not discussed in a WD session?
3. Have children whose Key Person participated in WD made better progress than those whose KP did not?

A major question is how it is possible to have confidence that any changes in the children can be attributed to the project, and not the result of other influences, or the children's general development. Cohen, Manion and Morrison assert that it is 'highly unlikely that indisputable causality is ever completely discoverable in the social sciences' (2011: 54), and this is true here. However, it is possible to make reasonable causal inferences, albeit cautious. Morrison (2009) suggests that the likelihood of making strong causal inferences increases with the number of data collection points, in this case three.

Procedure

The design of the study is quasi-experimental, beginning with round 1, a pre-intervention week of observations before WD began (January), followed by further rounds in March and July.

Participants

One overall cohort of 23 children participated, with three subgroups within this. These were:

- 8 children whose Key Person participated in Work Discussion (denoted in text and tables as KP group);
- 8 children whose Key Person did not participate in Work Discussion (denoted in text and tables as ~~KP~~ group);
- 7 children who had all been the subject of a Work Discussion session during the project (denoted in text and tables as WD group).

Tools

In each round, observations were recorded over a period of a week, using a researcher-operated hand-held camcorder to generate rich, event-driven data on the children. The event-driven nature means that they vary considerably in length, and many feature multiple participant children. Throughout each round, as broad a range of social (child alone, child-child, adult-child) and physical contexts as possible were recorded (see Table 3).

There are issues of validity and reliability inherent in observation as a research tool (Cohen et al., 2011), compounded here by the need to observe categories of behaviour which are social constructs, and thus which are inferential (Whitebread et al., 2009). Whitebread et al. (2009) suggest that issues of validity can be addressed in a number of ways, including collection of data in naturalistic settings, and the use of video recording which can afford

extensive analysis of data in its social context. They also suggest that the opportunity to view and repeatedly analyse video data supports reliability in identifying and coding behaviour. These conditions all apply in the context of the current project.

Table 3: Context frequency by round

(NB totals are different to total number of child episodes as some episodes included 1+ contexts)

Context	Round 1	Round 2	Round 3	TOTAL
Outdoor general	30	29	67	126
Markmaking	24	5	27	56
Sand	8	6	41	55
Dough	15	12	16	43
Role play	13	8	15	36
Snack	8	12	8	28
Water	8	11	5	24
Music, Dance	7	5	2	14
Books	4	0	8	12
Foam and bubbles	3	3	4	10
Blocks	2	6	1	9
Small world	7	1	0	8
Small toys, Duplo etc	4	1	3	8
Dressing etc	3	2	0	5
Friendship display	0	0	4	4
Floor toys, cars, train	1	2	0	3
Hide and seek	0	2	0	2
Group time	0	0	1	1
TOTAL	137	105	202	444

Coding

An observation-led Framework was used to code all episodes of video data. This was developed for the Project, and derived from *Development Matters in the Early Years Foundation Stage* (Early Education, 2012), using statements in the Personal, Social and Emotional domain, from four of the age bands (8-20 months, 16-26 months, 22-36 months, 30-50 months). This spread was in order to ensure that it reflected the full range of likely development of the children, who ranged from 29 months at the beginning to 43 months at the end of the project. The focus on personal, social and emotional development reflects its position as one of the three prime areas of the Foundation Stage in England, 'crucial for igniting children's curiosity and enthusiasm for learning, and for building their capacity to learn, form relationships and survive' (DfE, 2017:4). The relational and affective dimensions of early childhood pedagogy have also been emphasised in international reviews of the literature on effective provision (Dalli et al 2011; Mathers et al 2014). A copy of the Framework is included as Appendix B.

Efforts to support inter- and intra-coder reliability were made in the following ways. First, the main researcher and a second researcher with no links to the child observation strand watched video episodes and jointly coded transcripts of two children's activities, discussing and resolving differences. A further four transcripts were then coded by the same two researchers independently. At the level of the three main areas of the coding framework, inter-coder agreement was 74.3 per cent. At the more detailed level of the subcodes within the three main areas this was calculated at the unitising level (agreeing which behaviour

should be coded), and at the level of absolute agreement (agreeing which codes should be assigned to the agreed units of behaviour). This resulted in levels of agreement of 72.25 per cent and 90 per cent respectively. These levels of agreement lend confidence to the use of the framework as a reliable instrument. As a further check, the main observer coded a sample before the shared observations with the second researcher, then recoded the same observations later, which produced an 84% rate of intra-coder agreement.

Results

As described earlier, the observational framework developed for this study derives from the statements in *Development Matters in the EYFS* (Early Education, 2012). This document orders statements about children's behaviour in overlapping age-related bands. Thus, on the basis of evidence gathered, it is possible to a) locate children in a band corresponding to an age range, dependent upon their behaviour and exhibited competences, and b) compare their behaviour to that identified as appropriate to their chronological age.

Instances of children's behaviour which corresponded to items in the Framework were noted. These were then used to derive overall scores for each child's competence in each age band, which were recorded both numerically and as percentages of the total number of items in each age band. (See Appendix A for content and number of items in each age band.)

Two principal aspects of the data were considered in each round:

1. The highest age band in which a child evidenced 50 percent or more of the items (seen as secure evidence of behaviour corresponding to that stage, regardless of chronological age) (see Table 4);
2. The age band closest to the child's chronological age (*Development Matters* age bands overlap, so children were assigned to the closest fit taking account of the overlap, i.e. Saadiqa, 31 months at the start, was included in the 20-36 months band, and Samira, 36 months at the start, was included in the 30-50 months band. As children aged, their results were recorded in the closest fit age band) (see Table 5).

Table 4: Highest age band in which children achieved 50 percent or more of Framework items, rounds 1-3 (percentages in brackets show actual highest percentage when it is less than 50)

	KP, KP or WD	Round 1 (age band in months)	Round 2 (age band in months)	Round 3 (age band in months)	Mean gain in months (using mid-point of each age band)*
Ifran	KP	30-50	30-50	30-50	0
Alexia	KP	16-26	16-26	30-50	19
Saadiqa	KP	16-26	16-26	30-50	19
Evie	KP	16-26	30-50	30-50	19
Afia	KP	16-26	16-26	22-36	8
Sabira	KP	16-26	30-50	30-50	19
Shazia	KP	16-26	30-50	30-50	19
Joseph	KP	16-26	16-26	22-36	8
KP group Mean					<i>M=15.9, SD=5.37</i>
Lailah	KP	16-26	16-26	30-50	19
Kalpa	KP	8-20	16-26	22-36	15
Zahira	KP	16-26	16-26	30-50	19
Samira	KP	8-20	16-26	22-36	15
Milo	KP	16-26	16-26	30-50	19
Chloe	KP	16-26	16-26	30-50	19
Zoha	KP	8-20	Absent	16-26	7
Kamal	KP	8-20 (46%)	8-20	16-26	7
KP group Mean					<i>M=15, SD=5.24</i>
Taahira	WD	16-26	16-26	30-50	19
Waheed	WD	8-20 (46%)	16-26	30-50	26
Grace	WD	16-26	16-26	22-36	8
Liam	WD	8-20 (8%)	8-20 (23%)	16-26	7
Ode	WD	16-26	16-26	16-26	0
Noah	WD	8-20 (38%)	16-26	30-50	26
Rizwana	WD	8-20 (8%)	16-26 (30%)	16-26	7
WD group Mean					<i>M=13.29, SD=10.32</i>
Whole cohort Mean					<i>M=14.1, SD=7.5</i>

*This was calculated taking the mid-point in each age band, e.g. the difference between the mid-point of 8-20 months (14 months) and the mid-point of 16-26 months (21 months) is 7 months: a child achieving 50 percent or more in the 8-20 month band in one round, followed by the 16-26 month band in a later round was assessed as having made 7 months progress.

Key:

KP: child whose Key Person participated in Work Discussion

~~KP~~: child whose Key Person did not participate in Work Discussion

WD: child who was subject of discussion in WD session

Table 5: Percentage of items evidenced by a child at or above their chronological age, rounds 1-3

	KP, KP or WD	Round 1	Round 2	Round 3	Percentage gain rounds 1-3
Ifraan	KP	57	57	79	24
Alexia	KP	36	36	64	28
Saadiqa	KP	29	43	71	42
Evie	KP	29	40	57	28
Afia	KP	24	29	50	26
Sabira	KP	21	50	64	43
Shazia	KP	11	50	71	60
Joseph	KP	7	11	43	36
KP group Mean		M=26.75, SD=15.54	M=39.5, SD=14.51	M=62.38, SD=11.88	M=35.88, SD=12.15
Lailah	KP	36	36	50	14
Kalpa	KP	29	36	43	14
Zahira	KP	21	29	71	50
Samira	KP	21	21	36	15
Milo	KP	14	18	50	36
Chloe	KP	7	29	57	50
Zoha	KP	7	Absent	29	22
Kamal	KP	4	14	14	10
KP group Mean		M=17.38, SD=11.43	M=23.75, SD=10.5	M=43.75, SD=17.56	M=26.38, SD=16.61
Taahira	WD	36	36	71	35
Waheed	WD	29	29	50	21
Grace	WD	21	21	36	15
Liam	WD	0	0	14	14
Ode	WD	0	7	7	7
Noah	WD	0	14	71	71
Rizwana	WD	0	0	7	7
WD group Mean		M=12.29, SD=15.92	M=15.29, SD=14.07	M=36.57, SD=28.31	M=24.29, SD=22.72
Whole cohort Mean		M=19.09, SD=14.99	M=26.65, SD=16.13	M=48.04, SD=22.02	M=29.04, SD=17.39

Key:

KP: child whose Key Person participated in Work Discussion

KP: child whose Key Person did not participate in Work Discussion

WD: child who was subject of discussion in WD session

Tests for Kurtosis (0.097) and Skewness (0.5) showed that the data were reasonably normally distributed. Independent-samples and paired-samples t-tests, as appropriate, were conducted to address the 3 research questions.

Research Question 1: Has this group of children made significantly more progress than could be expected? (i.e. progress significantly beyond that predicted by the age-related development bands of the EYFS?)

This RQ uses data from all 23 children for all three rounds of data collection.

Table 4 shows that, in round 1 before the intervention began, only 1 child (Ifraan) evidenced 50 percent or more competence in the age band corresponding to his chronological age. 14

children evidenced 50 percent or more of items in the age band 16-26 months, and 8 children evidenced 50 percent or more in the age band 8-20 months. Thus, at the start of the study all of the children except one were performing at a level lower than their chronological age, and, in the case of some children, considerably so.

By the end of round 3, 21 of the 23 participant children had made progress to the extent that 6 had moved up one age band, 12 had moved up two age bands, and 2 children had moved up three age bands. Of the remaining two, one boy was already in the highest band at the beginning of the study, and one boy stayed at the same level. Using the mid-point of each age band as an indicator, it is possible to calculate the gains made, and doing so shows that the mean gain for the whole cohort was 14.1 months. Looked at by child, 7 children (approximately 1/3) made what can be seen as appropriate progress, of 7-8 months, over the six month period of data collection. The remaining 14 children (approximately 2/3) made considerable progress, of between 15 and 26 months. Whilst no one subgroup made statistically significantly more progress than another, it is interesting to note that two children who began the study at the lowest age level made most progress, including attaining 50%+ at their age-appropriate band by the end of the study. It may be that the effects of WD are different for different children, and further study would be of value in order to explore this.

Looking particularly at the age-appropriate band of 30-50 months (the age reached by all children by the end of the study), it is valuable to consider the children's growing competence, as demonstrated by their attainment of items in this band. Table 5 shows the percentage increase in evidence of items in this age band for each child in all three rounds, and the overall gain over the six months of data collection. Paired-samples t-tests were conducted to compare the percentage of items evidenced in the age band at or above children's chronological age before the WD sessions, and at the end of the study period, six months later. These showed that:

- For the whole cohort, there was a significant difference between round 1 ($M=19.09$, $SD=14.99$) and round 3 ($M=48.04$ $SD=22.02$): $t(22)=-7.97$, $p<.0001$, $d=1.8$.
- For the group of children whose Key Person participated in WD, there was a significant difference between round 1 ($M=26.75$, $SD=15.54$) and round 3 ($M=62.38$, $SD=11.88$): $t(7)=-8.09$, $p<.0001$, $d=2.6$.
- For the children who were the subjects of a Work Discussion session, there was a significant difference between round 1 ($M=12.29$, $SD=15.92$) and round 3 ($M=36.58$ $SD=28.31$): $t(6)=-2.83$, $p=.03$, $d=2.8$.
- For the children whose Key Person did not participate, there was a significant difference between round 1 ($M=17.38$, $SD=11.43$) and round 3 ($M=43.75$ $SD=17.56$): $t(7)=-4.49$, $p=.002$, $d=1.8$.

The probability statistics ($p<.0001$, $p<.0001$, $p=.03$ and $p=.002$ respectively) all clearly indicate that the progress made by these children is both significant, and not a matter of chance. Looked at alongside the very large, meaningful effect sizes ($d=1.8$, 2.6 , 2.8 and 1.8 respectively), it is plausible to suggest that significant progress was made by the group over the six month period of the study, and that the majority of children made progress beyond what might be reasonably expected.

What did this look like in practice? The examples of Afia below show progress in the category 'Making relationships':

- March: Afia is in the water tray, filling a cylinder. Sabira puts a ball in the top of the cylinder and Afia gestures to her to remove it (*age 8-20 months: 'Interacts with others'*). Practitioner E crouches down next to Afia, who holds out her bottle to show her. Practitioner E: (to Afia) What have you got there? Afia shows her the bottle is filled with water, then pours it into the cylinder (*age 16-26 months: 'Plays cooperatively with familiar adult'*).
- July: Outside, Joseph is 'grabbing' at Milo with a large plastic sand toy with hinged scoops for scooping up sand. Afia, several metres away, watches, finger in mouth. She walks over, walks in between the boys, smiles, and holds out her hands to Joseph. Milo takes the toy, and the boys start to walk away, Afia follows and joins them (*age 22-36 months: 'Interested in others' play and starting to join in'*).

It is, of course, not possible to attribute these gains solely to the positive effect of Work Discussion. Taken together, however, the data do indicate that the majority of children made progress beyond what might be reasonably expected, suggesting that the practice of Work Discussion may have had a beneficial impact on the children's Personal, Social and Emotional development, and, as a consequence, their general progress. The size of effect of the differences was greatest for the two subgroups of children whose KP participated in WD. However, children from all three subgroups made significant progress, suggesting that the impact of practitioners' participation in WD may influence outcomes for all children, and not just those for whom a practitioner is the Key Person. During the session children are interacting with a range of practitioners, not just their KP, and it is reasonable to infer that the positive impact of participation in WD may influence practitioners' interactions with all children. Indeed, the converse could be seen as unreasonable, to infer that a practitioner differentiated their interactions between children dependent upon whether or not they were a child's Key person.

Research Question 2: Have children who have been the subject of a WD session made better progress than those children who were not discussed in a WD session?

This RQ uses data on all children whose Key Person participated in WD, and compares children who were discussed in a WD session between January and July with children who were not discussed. The data here are drawn from the pre-intervention round in January and the final round in July. In order to preserve separation between WD sessions and evaluation, the names of children who had been the subject of WD were only given to evaluators at the end of round 3 (July), with no details of the discussions which took place.

Looking first at data from round 1 before the intervention began (Table 5), it is clear that the children who were the subject of WD evidenced less competence in items at or above their chronological ages ($M=12.29$, $SD=15.92$) than children who were not the subject of WD ($M=26.75$, $SD=15.54$): $t(13)=1.78$, $p=.09$.

Whilst this is useful to know, what is most meaningful in order to address the RQ is to consider the amount of progress made by both groups. In this there was no significant difference. The mean gain in months was 13.29 months for the WD group, and 15.9 months for the KP group (see Table 4). Looking at the gains in performance in items at the children's

chronological age (Table 5) there was also no significant difference. An independent-samples t-test showed that children who had been the subject of WD made a mean gain of 24.29 percent ($SD=22.72$) and children who had not been the subject of WD made a mean gain of 35.88 percent ($SD=12.15$): $t(9)=1.21$, $p=0.26$. There was, though, a medium sized effect, $d=0.6$.

It is worth noting that two of the children who were the subject of a Work Discussion session made the greatest gains in months, moving across three age bands (although it is also important to note that both boys were amongst the lowest attaining at the start of the project). The following excerpts feature one of these two, Noah, and show his developing competence and confidence, in the category 'Self-confidence and self-awareness':

- January: Noah is on the carpet looking at a book, Practitioner R and Kara are nearby, looking at a book together. Noah shouts out, pointing at his book and looking towards R (*age band 8-20 months: 'Uses pointing with eye gaze to make requests and share an interest'*).
- March: Noah is at the snack table with Practitioner V and other children. They see some children dancing in another part of the room.
 Noah: Dancing!
 V: You can go and join them once you've finished, join in the dancing if you want to.
 Noah: No (*age band 16-26 months: 'Demonstrates sense of self as an individual, e.g. wants to do things independently, says 'No' to adult'*).
- July: Practitioner V is outdoors with several children, Noah is nearby, holding a tennis bat.
 V: (to Noah and 2 other boys) Can you help me? It's heavy (picking up large block).
 Noah: (runs over, picks up the other end of the block and walks excitedly with V)
 Choo choo! (singing, carries it with her, putting it down in place next to a balancing circuit) (*age band 30-50 months: 'Enjoys responsibility of carrying out small tasks'*).

Noah's developing confidence and awareness, both with regard to himself and to those around him, is evident.

Research Question 3: Have children whose Key Person participated in WD made better progress than those whose KP did not?

This RQ uses data from all three rounds of data collection, and compares children whose KP participated in WD with children whose KP did not participate. In order to preserve separation between WD sessions and evaluation, the names of Key Persons who did not participate in WD were only given to evaluators at the end of round 3 (July).

Looking first at the data from round 1 before the intervention began (Table 5), there is no significant difference in the percentage scores at or above chronological age for children whose KP chose to participate in WD ($M=26.75$, $SD=15.54$), and those children whose KP chose not to participate ($M=17.38$, $SD=11.43$): $t(13)=1.394$, $p=.09$.

However, as with the WD group comparison, a more useful measure in order to address the RQ is to consider the amount of progress made by both groups. In this there was no significant difference. The mean gain in months was 15 months ($SD=1.86$) for the KP group, and 15.9 months ($SD=2.03$) for the KP group (see Table 4). Looking at the gains in

performance in items at the children's chronological age (Table 5) there was also no significant difference. An independent-samples t-test showed that children whose Key Person did not participate made a mean gain of 26.38 percent ($SD=16.61$) and children whose KP had participated made a mean gain of 35.88 percent ($SD=12.15$): $t(13)=1.31$, $p=0.21$. There was, though, a medium sized effect, $d=0.6$.

It is useful to conclude here with brief examples from the final category, 'Managing feelings and behaviour'. Here, examples are drawn from three children:

Band 8-20 months:

Zainab is at the snack table, sitting opposite Practitioner M. She has a chunk of banana and a knife, and manages to cut through the banana.

Zainab: (to M) I did it! Look! I did it! (smiling) (*'Uses familiar adult to share feelings such as excitement or pleasure and for "emotional refuelling" when tired, stressed or frustrated'*).

Band 22-36 months:

Sabira sees Saadiqa fall over outside and start to cry, she runs over to a box of tissues on the windowsill and takes one to her (*'Tries to help or comfort when others are distressed'*).

Band 30-50 months:

Ifran and Milo are standing looking at a wall display of photographs of a group trip to the park. Milo has a pair of binoculars around his neck, but is not looking through them. Ifran reaches across to look through them but Milo holds onto them, and puts them up to his eyes, looking across the nursery. Ifran stands next to him, waiting. They go over to a balancing plank, Milo goes to walk along it, still using the binoculars, but he dislodges the plank. Ifran moves the plank back into position. Ifran: There you go (stands back and smiles at Milo).

Milo walks to the end and then gives Ifran the binoculars, Ifran smiles (*'Begins to accept the needs of others, can take turns and share'* and *'Tolerates delay when needs not immediately met'*).

Summary of Findings from the Child Observation Data

The most important finding from the Child Observation Evaluation data is that the majority of children made significant progress over the course of the study. Whilst approximately one third (7) of children made age-appropriate gains of 7-8 months, twice that number (14) showed gains ranging between 15 and 26 months. The strength of the qualitative and quantitative data lend confidence to a conclusion that WD may have had a beneficial effect on children's behaviour, as evidenced using statements from *Development Matters* (Early Education, 2012). *Development Matters*, whilst non-statutory (and also not standardised on any particular group of children) was produced by Early Education in England with support from the Department for Education, and is in use in practice.

It is also important to highlight that children from each of the three subgroups made meaningful progress, and there were no significant differences in comparisons of the progress of each group, or of other ways of grouping the children, for example older vs younger children, lower vs higher attaining children etc. This suggests that any effect of participation in WD was similar for the cohort of children as a whole.

Finally, whilst there were no significant differences in the progress of different groups of children, it is valuable to highlight the exceptional gains made by two of the initially lowest attaining children. Further research could usefully explore the possible differential effect of practitioner participation in WD for children who may be in such groups.

14. What did parents of the two year-olds say about their experience of working in partnership with practitioners

Procedure

As with the WD participants, interviews took place at three different time points throughout the project: at the beginning, half-way through and at the end of the project.

Participants

In total 24 different parents participated, eight in the first round and a further 11 by the second. We were able to build this number to 24 through a number of strategies. We were very mindful, from previous experience, of the obstacles facing parents to participate in research of this kind. First and foremost, we were aware of the pressures on their time which we talk about more below. Second, we were sensitive to the anxieties that an invitation to participate in research may evoke, partly to do with any encounter with an authority figures and partly fear of being seen as critical in any way of a service for which they were unsure of their entitlement. The researcher undertaking the interviews was of course not part of the nursery or a representative of the Government or Local Authority in any way but parents may well not have understood that. We therefore offered parents different ways to meet with the researcher, for example individually or in groups and within the nursery setting itself or within their own home. As familiarity with the researcher grew, more parents participated but it was a struggle to reach the numbers we had hoped for (at least 50% or around 25-30 parents) and particularly to be sure that we included parents of children discussed within the WD sessions.

Tools

A semi structured questionnaire was used in the interviews, informed by prior research work and particularly the literature challenging the idea of 'hard to reach' parents reversing this and seeing the issue of communication between home and nursery from the perspective of 'hard to reach' settings (Crozier and Davies 2007). The interview schedule used therefore provided an important starting point, but rather than simple adherence to a validated schedule, our priority was to find a way to engage with as many parents as possible, being flexible to adapt our research questions to be in line with the issues they most wished to talk about in relation to their own lives and how they engaged with the nursery.

Location for the interviews was problematic. All the rooms in the setting were much in demand. Staff did their very best to accommodate us but an office with two hard chairs and a desk may not be the ideal place for an interview. The setting is one of being 'locked in' or 'locked out' for safety reasons, which means that no one is able to 'wander in'. There is a large reception area and the receptionists are very welcoming. Parents are anxious about any researchers going to their homes. This may be because many are in challenging living conditions. It could also be related to the lack of trust, as mentioned above, that some parents have in those they see as 'figures of authority'.

The parents had issues which were worrying them such as housing, missing families who live many miles away so not able to give support, low incomes, and partners working very long hours. It is hardly surprising that they are pleased to have somewhere safe and warm, with welcoming staff, where they can leave their children for a while so they can try to solve some of the problems they face. This could have an impact on the research outcomes.

At the beginning of the project we envisaged that the way that practitioners and parents relate to each other would gradually change over the life of the project as practitioners had the opportunity to reflect on their involvement with parents. The parent interviews addressed the following themes: trust, communication, mutual understanding, reliability, power balance/imbalance in an attempt to find out about this relationship.

Family background

The parents had mainly come from Sri Lanka, Bangladesh, Eastern European countries and were first generation in this country. A few of them had English as a first language but the majority were learning it from scratch and the children were hearing little English at home. Several children were hearing three languages between home and nursery as their parents each spoke different first languages. The majority had come with the intention to improve their lives and living standards but some had come as refugees from conflict for example one family was from the Congo ('If I had stayed, I would have been in the middle of a war'). There was evidence of the challenging circumstances that many parents were having to cope with on a daily basis, in an area that they found threatening at times, with very little money. Many were living in one bedroom accommodation with their partners and children.

This mother painted a dismal picture of the local area:

but this area is so bad. You have prostitutes walking on the streets and drug gangs and still you can't find one bedroom flat under one thousand a month. It's horrible but I guess it's London. I'm on income support and I need three months guarantor for my flat it's such a lot of money. It's so bad for my kids' health. I have humidifier and I clean the flat constantly but all the flats are damp. . I'm going to decorate again.... I have to decorate cos after the winter the mould has completely damaged it.

Another mother was really struggling. The whole family (2 parents and 2 children) lived in a very small one bedroomed flat. The lady who lived downstairs frequently complained to the council about the noise that her son made. He has additional needs. This mother explained how she felt she had to be out of the flat all day so there would not be any more complaints. In the summer the family could go to the park but in the winter they just had to walk the streets, having no money to do anything else. The nursery had provided warmth and shelter for this little boy who is making progress.

My son he didn't understand and my downstairs lady used to complain loads to the council and I keep telling her he don't understand. Now [he is attending here] it is much better and she is quiet. Hopefully they will find us a new flat because we have a one bedroom flat with two children. It is very small. I can't take both of them outside because of my downstairs lady. I am telling everyone even you and hoping that someone can give me a letter so I can move.

Shared accommodation is another difficulty for several families which again means that when children are not at the nursery, there is nowhere except the local park for them to go:

We have to share with another family because when I was pregnant nobody wants children and we can't afford...He's very active, needs space. I have to do something with him. I can't keep him in the house and if the weather is bad we can't go to the park.

Despite their relief in getting their child into a nursery with such a strong reputation and the chances this gave them to concentrate on their home circumstances, they did give some feedback about their experiences.

Choice of nursery

Many of these parents had chosen the nursery because of its good reputation in the area and the parents pointed this out as the basis for their choice:

I see online and things it's outstanding and this area all they are talking about is this [nursery]yeah. It's far from my house. Yeah it's far like three stops or four stops, more. But outstanding, they control well the kids, you know. They say the teachers are more competent. Now that I'm here I see.

I do triple P (a parenting support programme) and it really helped and [at]this children's nursery they are doing their best with all the families. Here in this area they are doing a hard job and doing their best.

Their relief at finding a warm, safe, environment was very evident as they commented on the contrast between their very stressful lives in very crowded and unsuitable accommodation and the supportiveness of the nursery. They welcomed the friendliness of the nursery and the way the practitioner greeted them and their children by name. Many had first visited the 'stay and play' sessions run by the Children's Centre team as well as other groups sessions such as parenting classes and craft workshops and some commented on how the nursery had reduced their isolation. The following quotes demonstrate the mothers' relief when they started attending the nursery, as they were no longer isolated. They could ask for advice and were made to feel at ease by the practitioner. One parent admitted that before she came to the nursery she knew little about how to look after a baby so she had to look for answers on Google:

That's the thing when I was so isolated, before I came here. There was just the three of us. That's why he had so many issues and as soon as he came here he could socialise and build up his confidence. For me it is much nicer.

Even when you first walk in Receptionist is friendly straight away and everyone is happy to help you. They always ask for your opinion as well. They ask what could we do to improve this and that. They make you feel really involved.

This mother had just left an abusive relationship and praised the way the nursery supported her:

Alex is his key worker she noticed she always tried to talk to me and she understands cos she grew up with problems in her family and she could look from the perspective of the child and she could understand. She grew up in a family was not involved and she had to make a decision to cut off the father. She really supports me in every way.

The stresses that these parents are under were so great and it became obvious that they were grateful for all the help given to them by the nursery. This had an impact on the exploration of their relationship with the practitioner and their connection with the nursery.

Most of the parents stated they had nothing that they would like to change about the way the nursery is run. They were nearly all very happy with their Key Person:

When you come in it's got a warm feeling, the colours. There's always people wandering around. The teachers will come in and say hello, ask 'what do you want to do? They make you feel welcome.

Communicating with the nursery

The parents were asked about their interaction with the practitioner at the nursery. It was obvious that this was not always easy as this mother points out:

I came here eleven years ago and I couldn't speak English at all. If people can't speak English how can they tell their children [what to do] or speak to other people

As many of the parents had a language other than English as their first language, communication was not always easy and though practitioners could give parents some ideas of how their children were progressing, this was not always successful. Some parents made it clear that their understanding was not very good while others who appeared to understand did not.

This mother spoke little English yet she was very happy with her experience of the setting and her key person:

Yes they look after her very well and J is very good she know s everything. My daughter had a rash and she ask for cream. They look after her very well. We trust her and our child is very precious. We trust them.

Only one parent of the thirty interviewed, gave an indication that he did not have trust in the practitioner:

but we've been misinformed. Like have they decided not to tell me what's happening there like someone pushes her – I'm not saying they do – and she gets a graze on her knee they might say 'oh she just fell over'. I'd rather know that somebody pushed her rather than she just fell over because.... I just would, you know what I mean.

This was in one of the initial interviews and certainly demonstrates a lack of trust and communication but the views expressed are in stark contrast to other parents who stated that they were very happy with the friendly and caring practitioner as seen above.

Parents' awareness of the key person role

All the parents were aware of their key person (a named practitioner responsible for a small group of children and families) and many spoke very highly of them:

He was very sensitive then and now he's very confident he plays with other children, he's just very happy. I've been very lucky with my key worker as well cos she has proper connections with the children and S just really loves her. I'm just worried about next year cos he will have another key worker now and I'm worried about the separation.

Yes she lets me know what is going on. What A did. If there's anything going on I let her know. A loves her. She is really kind.

However, the links between home and setting and vice-versa seemed to be very limited. When parents were asked if they knew what their children did at nursery each day, they knew what the children had eaten or whether they had slept but did not appear to know about friends or activities. There are two possible reasons for this; firstly they may not have been told but secondly they may not have considered this to be important. When asked about their children's activities at home, many mentioned television or iPad and that they were pleased their children were away from these when at nursery. They certainly valued the space provided by the nursery, especially the outdoor area. Interestingly all parents said that they rarely discussed their home activities with practitioner.

Summary of findings from the parents' interviews

The researcher in our team interviewing the parents has worked directly with parents as both a practitioner and researcher over nearly forty years. She described a sense of not being able to get over the isolation and hardship experienced by parents whose families were many thousands of miles away. They had moved to the UK in search of 'a better life' and coped with their daily struggles without complaint.

The research interviews were intended to explore whether the relationship between the parents and the practitioners to see if a partnership was developing between them. The primary finding in relation to this question is that we cannot be sure. We now wonder if partnership, particularly given the challenging circumstances these parents were often facing, could ever exist given how much both parents and practitioners would need to invest in such a relationship to be make it a reality. The relationship between parents and practitioners is crucial but the most important aspect seems to be trust. In spite of the fact that the parents interviewed had so many stresses in their lives they knew the importance of having practitioners who cared about their children and who could be trusted to look after them with kindness and understanding without necessarily having detailed frequent exchanges of information between home and nursery. The parents seemed happy about the setting from the beginning and they were pleased to have a warm and caring environment that was a contrast to their often uncomfortable and stressful home surroundings. The Nursery was warm and inviting and safe.

There was evidence of a lack of shared information between home and setting and between setting and home. Parents were unsure about what happened at nursery and did not share much information about their home environments with practitioners. The Work Discussion Group could be an ideal opportunity to enable practitioner to reflect on this. Of course it could be that parents did not want to discuss their home situations with practitioners but they had no hesitation in doing so with the researcher interviewing them.

Though there is no direct evidence that the Work Discussion Groups improved relationships between practitioner and parents, it was much easier to persuade parents to be interviewed in the last rounds of interviews towards the end of the year long period of fieldwork. This could be because the parent/practitioner relationship had changed slightly so the practitioner approach changed and parents were more pleased to take part. Equally, it may have been that growing familiarity with the researcher and her presence in the nursery encouraged parents to be more open. It would be good to find out why some parents did not choose to be interviewed.

15. Work Discussion Group 2

As a reminder to the reader, the role of WDG 2 in this research Project was to offer the managers of nurseries in the catchment area of the main study site (the NSCC) where WDG1 took place, an experience of Work Discussion. They were offered half the sessions (15) offered to the WDG1 participants and these took place at fortnightly intervals. The sessions were facilitated in the same way as WDG1, that is by two facilitators, one with group relations expertise and one with early years expertise. The reason for the inclusion of the managers was that if the evaluation in the NSCC proved positive and if the managers had experienced the group and valued that experience, they would be more likely to adopt WD as a model of professional reflection for them and their staff on a continuing basis.

The managers of all seven private nurseries in the catchment area of the main study Nursery School and Children's Centre (NSCC) were invited to take part in WDG2. Four nurseries took up this invitation. Two job share managers from each of three of these four attended the group and the one full time manager of the fourth making a group of seven managers. The full time manager left half way through the groups because of work load and the stage of her pregnancy. Six managers therefore completed the sessions. Information on the nurseries is given below.

Table 6: Main managers' qualifications, nursery size and opening hours

Nursery	Manager qualifications	No. of children on roll and age range	Opening hours
N1	NVQ 3	60 aged 2-5	9am to 3.30pm, term time only.
N2	BA ECS	32 aged 2-5	9am to 3.30pm term time only.
N3	NVQL5	28 aged 6m to five	7.30am to 6.30pm, year round.
N4	BA ECS	80 aged 6m to five	7.30am to 6.30pm, year round.

The original intention was to offer 15 sessions, five each term. The research bid had included provision to pay the managers a fee to enable them to pay for staff cover whilst they were absent from the nursery. As a smaller number of managers attended than was originally expected, the budget saving was used to pay for two additional WD sessions in the summer and autumn terms so that the interval between ending in one term and starting in the next was reduced. As in WDG 1, managers were asked to bring any issue they thought it would be helpful to discuss in relation to their work with children and families. They were asked to take turns doing this, writing up the issue as a detailed confidential account that would be available to the WD participants and facilitators only.

The structural context of the nurseries

It is important to describe first the structural context of the managers' nurseries that is their buildings, finance and the impact of the local 'nursery market'.

Whilst N4 was part of a larger chain of private nurseries, N1-N3 were all single businesses. These managers reported that rental costs in their Local Authority were very high (£50,000-60,000 per year for single business use). These three nurseries were therefore limited to renting accommodation that was shared, operating in community or faith buildings in which many other groups had shared use and security of tenure was not guaranteed. This shared space meant that all the nurseries' resources (play equipment and children's activities) had to be completely cleared from the space either at the end of each day or at the end of each week, depending on their individual contracts. The managers referred to their nurseries as 'pack-away' and described how exhausting this was when added to the demands of the working week. Not only did equipment need to be carefully stored but reserved space for other important nursery functions, for example private office space where confidential discussions with parents could take place or space for staff to take a break, was limited or not available. We observed in one nursery that the managers relied on an office effectively located in a cupboard where the double doors could be opened onto the children's space and a desk pulled out.

Allied to this space issue were the managers' struggles to maintain cash flow so that staff could be paid on time. Much of their income depends on the reimbursement from the Local Authority of children who have funded places (that is 15 hours per week funded by Central Government, via Local Authorities). Parents do not therefore pay directly and the nursery must claim these hours back. Claiming entails considerable paperwork and a delay in reimbursement whilst this paperwork is checked and processed. Ensuring adequate finance was a continual anxiety and pressure for the managers which took time away from their direct work with children and families and supporting staff.

A third structural factor was the way in which the nursery market operated. Competition between private nurseries is intense and whilst the primary professional concern is the child, commercial considerations demand that the parent has prime position as the customer able to move the child to a competing nursery with relative ease. In turn, pressure on finances means that these managers were only able to pay their staff on low salaries, even against the average for a generally low paid workforce, and staff recruitment was correspondingly difficult. Managers described staff recruitment as often meaning having to choose the 'least bad' applicant, and then having to provide intensive support and guidance to that person. They reported that it often happened that, having given valuable experience and training to a

new member of staff, that practitioner could then more easily secure a position in the maintained sector where conditions of employment were better. Similarly, parents' first preference was to gain a place for their child in a nursery attached to a primary school as parents considered this gave them more likelihood of their child progressing into the primary school. One manager spoke of a child that she had spent much time settling in to the nursery simply not arriving one day. Managers therefore devoted much of their energy to this continual pressure of staff recruitment, retention, parent satisfaction and managing precarious cash flow.

Content of WD sessions

The agreement with the managers was that the content of the sessions should focus on child and family situations that the managers felt it would be useful to discuss. However, managers often wanted to talk about the difficult structural issues referred to above as they had impacted in particular ways for that manager since the last session. Although the group was clearly not able to take any practical action in relation to these issues, it did seem important that managers had an opportunity to express their frustrations and anger at a policy context that they felt communicated the low status in which they were held by society.

Yet in addition to this difficult context, many of the family situations that they brought for discussion demonstrated the acutely difficult circumstances faced by individual parents. The following vignette from the records for that WD session is an illustration:

The presentation concerned an Eritrean family with seven children. The issue concerned a girl who started at the nursery 18 months earlier when she was 2 but had been an elective mute since starting and had also started to wet herself. The mother has a baby born with an immune issue which had required her to spend much time at the hospital. The girl requires special care in the nursery as she has a narrow oesophagus and a nasal – gastric feeding tube with special formula nutritionally-intensive feeds.

Most of the situations managers brought were not as complex as this. The managers nevertheless were often confronted with family situations where there were clear developmental concerns for a child as well as wider family support issues to do for example with finance, housing, domestic abuse or safeguarding issues.

Process of discussions

The managers were asked to bring a detailed written description of the situation they wished to discuss so that there was a clear account for the group to consider. This only happened in around half the sessions with the written accounts that were brought often being hand written and highly partial in their inclusion of information. The reasons for these partial accounts appeared to be partly lack of training in the systematic presentation of a family history and circumstances supported by detailed observations of the child's interactions. Another factors was lack of time on the managers' part to prepare a detailed and comprehensive account. .Much time was therefore spent in sessions gathering systematic information before a meaningful discussion could occur. , Managers were also sometimes overwhelmed by the weight of demand and expectation placed upon them to address complex situations, exacerbated by the reduction in local family support services arising from financial cut backs. The desire of the managers to help arose partly from the need to recruit

'customers' and partly from their humanitarian wish to be of assistance when families had faced closed doors elsewhere. However, the weight of parents' desperation could communicate itself powerfully to nursery practitioners meeting the family on a daily basis. It appeared easy for some managers and practitioners in these situations to feel all the families' problems had been left in their laps and they must somehow cope alone.

Against this background of intense feeling and partial information, the process of discussions was largely directed at containing emotion and gathering further information. Within the group, managers were understandably anxious to support one another but this could mean the giving of much advice and a difficulty in establishing space to think clearly about practical strategies for helping manage children's often disturbed behaviour in the nursery and for considering in what ways the nursery may not be the only agency able to assist but where other sources of specialist help might be found.

Managers' evaluations

Despite these challenges, the managers were broadly positive in their evaluation of the group. They valued the facilitators' recognition of their work, its challenging context and its individual complexity. They valued too the advice and expertise they had access to from other managers within the group facing similar situations. They were deeply grateful to the Nursery School and Children's Centre (NSCC) for connecting them into the project and for being a wider source of support and access to continuing professional development.

However, even with this group of seven managers, there were considerable differences of training and experience and there is a question of whether the WD model should be adjusted, possibly away from open discussion, to a much more structured format, to enable the managers to derive maximum benefit.

16. Ethical issues

University of Roehampton Ethical clearance was obtained prior to any contact with the Nursery and Children's Centre practitioners, parents and children. The approach to ethics is in accordance also with British Education Research Association (BERA) Ethical Guidelines (2011) and those of the European Early Childhood Education Research Association (EECERA) (2014). Consent was sought from the headteacher, practitioners, parents/carers (both to be interviewed and for their children to be observed) and the children.

We briefly describe here a number of ethical issues that are pertinent to the study. The majority of these were anticipated, and formed part of the team's approach to ethics and methods, but other aspects also arose during the project. The purpose of including them here is to ensure the Trust is aware of their presence in Trust funded research. They are discussed more fully in our published methodology paper (see footnote 3 and references).

The use of video in the research posed two particular issues in relation to the children. Looking first at consent, the team ensured the consent of all participants for videoing. Both the European Early Childhood Education Research Association Ethical Code (EECERA, 2014) and the British Educational Research Association's Ethical Guidelines (BERA, 2011) emphasise the importance of ensuring young children's informed consent to

participate, including their access to 'full and honest information about the content, purpose and process of the research' and 'the opportunity to agree or disagree to participate in the light of this information' (EECERA, 2014:6). The researcher began by spending time with the children, without the camcorder, followed by ensuring children saw the camcorder and could pick it up, but were not yet being videoed. The majority of the children have limited mark-making skills, and it was considered inappropriate to use a form of written consent. Thus, children's verbal consent was initially sought, with episodes played back to children using the camcorder screen so that they could see themselves. Most important, however, was an approach to seeing consent as 'provisional' (Flewitt, 2005), continually negotiated and reaffirmed, with children's opportunities to dissent clearly respected (Dockett, Einarsdóttir and Perry 2012). This includes attention to body language, gesture and facial expression, as well as verbal dissent. Many of the children interacted with the camcorder and researcher, suggesting their familiarity with camcorders. Such interactions included looking at the researcher and camcorder whilst playing, smiling into the camcorder, as well as more direct interactions, such as asking to see what was being filmed, holding up toys to the camera, and even a hand puppet being used to 'eat' the camcorder. Whilst the attention of the researcher could potentially lead to participant reactivity (the so-called Hawthorne effect), spending as much time collecting data in the setting as possible hopefully helped children (and adults) habituate to the observer's presence (Cohen et al., 2011).

The second ethical issue is rooted in the focus of the project on the role of emotion. Not all children's emotional experiences are positive ones, and children may exhibit distress, and also be in conflict with one another or with adults. Even if children do not signal that they wish recording to stop (at such times it is questionable if any of us have sufficient control to do so), the dilemma for the researcher is the extent to which consent may be implicitly withdrawn. Would one, as an adult, want such an episode recorded or viewed? The decision was taken to continue recording in most instances, with a very few episodes being recorded in written note form.

A third issue was the practitioners' practice of not referring to children's names in the interviews. From the researchers' point of view, this raised difficulties in making links between the practitioners' interviews, the parents' interviews, the children's observations, and the WD sessions, in order to assess the intervention's impact on specific children. From the practitioners' point of view, revealing the children's names in the interviews often appeared as an ethical issue, potentially because children's anonymity and confidentiality is very important in their workplace. Even when we explained to the practitioners that the children's anonymity would be protected in any publications, there was still some hesitation.

Fourth, the researcher interviewing WD participants inevitably heard from them their ideas/questions regarding how the groups could be improved. Our consent agreement with the practitioners was, however, that no information from the WD participants would be shared with the WD facilitators until the completion of the project. We had to constantly grapple with the question of how ethical it was to know that practitioners would like some changes but not be able to transmit this knowledge to the facilitators of the WD groups.

Fifth, in relation to the parents interviewed, It is well documented that those who become involved in settings are the parents who 'fit' (Knopf and Swick, 2007). These parents were comfortable in the setting and related well to the staff. Other parents who agreed to take part

did not arrive at the time agreed even though they were telephoned by the receptionist to remind them. Whilst this clearly demonstrates the power of the parents to make the final decision about taking part in the research, it also highlights the difficulty of ensuring that all voices are heard.

Finally, location for the interviews with parents was often problematic. Parents were given the option of either coming into the Nursery, or seeing the researcher in their home or another setting of their choice. In practice, interviews were conducted in the Nursery, and it became apparent that parents were anxious about researchers going to their homes. This may be because many are in challenging living conditions. It could also be related to the lack of trust that some parents have in those they see as 'figures of authority'. Within the Nursery, all of the rooms were much in demand, and in most instances interviews were conducted in an office with two hard chairs and a desk, which may not be the ideal place. There is a large reception area and the receptionists are very welcoming, but for reasons of safety and security, the setting is one of being 'locked in' or 'locked out', which means that no one is able to 'wander in'. All of these factors may militate against parents feeling at ease in interviews.

17. Conclusion

The key findings and recommendations are given in the summary report. Here, we make some final concluding comments.

WD is a model of professional reflection that is Froebelian in its attentiveness to the 'whole' in three senses. It is Froebelian in honouring the individual practitioner's humanity and unique subjectivity, the 'sun which draws the child out'. It is Froebelian in being attentive to the practitioner as a whole, her thoughts and emotions as they are evoked through her work. It is Froebelian in seeing the individual practitioner in the whole context in which the practitioner works, her team, her setting and her local community.

Did WD have an impact in the nursery at the heart of this study? As we discussed in Section 13, it is difficult to separate out and 'prove' the impact of a particular intervention in a complex social system like a nursery, itself embedded in a highly particular social context. Yet we conclude that there are convincing grounds for saying that WD did make a difference to these two groups of early years workers (practitioners and managers). It helped them to feel that the difficult work they were doing, often in low paid, low status and insecure jobs, was recognised, acknowledged and respected. For the practitioners in the evaluation WD group, it strengthened their confidence to speak and think about work interactions, reflect on their work, and respond to the children with more thought and objectivity.

That is a very successful outcome of this research. Even without firm evidence, it would be possible to argue that all those working in the early years roles are entitled to a respectful and reliable space in which they can debrief about the daily demands of their work. Developing such a space is important for strengthening the accountability of their practice. It is also important as a way of responding to and acknowledging the personal involvement

that engaged professional work with young children demands if it is to be done in a way that is respectful and responsive to children and families.

There is very little research on the processes and effectiveness of different models of professional reflection. This research has started to address that significant gap. It has shown how difficult it is to think, really to think rather than to repeat old assumptions or pre-conceptions, about work interactions. There are important external reasons for this that as a research team, we are very concerned should not be underestimated – the intense emotional demands of some of the children, the levels of physical energy that young children demands, tight levels of staffing that leave little time for thoughtful reflection and structural factors in the workforce that result in high staff turnover. Alongside these external factors, the research has shown up some of the ‘internal reasons’ that make ‘real thinking’ so challenging, including the depth of anxiety about criticism or blame should an individual practitioner speak about an aspect of their work that they find difficult.

18. Dissemination

- A methodological paper on the study was presented at the EECERA Conference in Bologna in September 2017;
- We hope that, once the Trust has approved our final report, a summary of the research findings and recommendations will be included on the Trust Website; we would also like to pass the approved report to the Tavistock Professional Reflection research network;
- We will be asking the Head of the NSCC at the heart of this study their views on its dissemination through NSCC and National Teaching School networks;
- A methodological paper has now been published in the journal, Early Child Development and Care;
- Further peer reviewed papers are planned to be written by the facilitators and evaluation teams according to individual areas of expertise;
- An abstract has been submitted for the International Froebel Society in Japan in September 2018;
- Subject to discussions with the Trust and the NSCC head, we would like to prepare a report for the Department of Education.

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Appendix One: Planned Impact Evaluation Data Collection

	WD Group 1 (practitioners working with 2 year-olds) (n=9)		WD Group 2 (managers of nurseries in catchment area of main study nursery) (n=6)	
	WD Process (see Note 1 for analysis of data)	Evaluation (see Note 2 for analysis of data)	WD Process (see Note 1)	Evaluation
Round 1 January	Audio tapes of 30 weekly WD group sessions. Immediate post session review and record by the two group facilitators of key themes in content and process of discussion.	R1 Video observations of practitioner-child & child-child interactions. 25-30 children (half girls / boys) aged 24m to 36m at start; R1 interviews with 9 WD group participants. R1 interviews with parents. 10-20 parents / carers, cross section of ethnic backgrounds.	Detailed notes taken by facilitators during 15 fortnightly WD group sessions. Immediate post session review and record by the two group facilitators of key themes in content and process of discussion.	
Round 2 March	Independent reviewer listens to audio and facilitators' review of alternate sessions and adds commentary.	R2 Video observations of practitioner-child & child-child interactions with same cohort of children. R2 interviews with 9 WD group participants. R2 interviews with parents interviewed in R1.		R2 interviews with 6 WD group participants (45-60min).
Round 3 July		R3 Video observations of practitioner-child & child-child interactions with same cohort of children. R3 interviews with 9 WD group participants. R3 interviews with parents interviewed in R1.		R3 interviews with 6 WD group participants.
Round 4 November		R4 Video observations of practitioner-child & child-child interactions with same cohort of children. R4 interviews with 9 WD group participants. R4 interviews with parents interviewed in R1.		R4 interviews with 6 WD group participants.

Appendix B: Child Observation Framework, drawing on *Development Matters in the Early Years Foundation Stage* (Early Education, 2012)

1 Making relationships	Ages 8-20 months	1 Seeks to gain attention, drawing others into interaction. 2 Builds relationships with special people. 3 Wary of unfamiliar people. 4 Interacts with others, explores new situations supported by familiar person. 5 Shows interest in others' activities, responds to children & adults.
	Ages 16-26 months	6 Plays alongside others. 7 Uses familiar adult as secure base to explore independently in new environments. 8 Plays cooperatively with familiar adult.
	Ages 20-36 months	9 Interested in others' play & starting to join in. 10 Seeks out others to share experiences. 11 Shows affection & concern for people special to them. 12 May form special friendship with another child.
	Ages 30-50 months	13 Can play in a group, extending & elaborating play ideas. 14 Initiates play, offering cues to peers to join. 15 Keeps play going by responding to what others are saying or doing. 16 Demonstrates friendly behaviour, initiating conversation & forming good relationships with peers & familiar adults.
2 Self-confidence & self-awareness	Ages 8-20 months	1 Enjoys finding own nose, eyes or tummy as part of naming games. 2 Learns that own voice & actions have effects on others. 3 Uses pointing with eye gaze to make requests, & to share an interest. 4 Engages other person to help achieve a goal.
	Ages 16-26 months	5 Explores new toys & environments, 'checks in' with familiar adult as needed. 6 Engages in pretend play with toys. 7 Demonstrates sense of self as an individual, e.g. wants to do things independently, says "No" to adult.
	Ages 20-36 months	8 Separates from main carer with support & encouragement from familiar adult. 9 Expresses own preferences & interests.
	Ages 30-50 months	10 Can select & use activities & resources with help. 11 Welcomes & values praise for what has done. 12 Enjoys responsibility of carrying out small tasks. 13 Outgoing to unfamiliar people, confident in new social situations. 14 Confident to talk to other children when playing. 15 Shows confidence in asking adults for help.
3 Managing feelings and behaviour	Ages 8-20 months	1 Uses familiar adult to share feelings such as excitement or pleasure, and for 'emotional refuelling' when feeling tired, stressed or frustrated. 2 Growing ability to soothe themselves, may use a comfort object. 3 Cooperates with caregiving experiences, e.g. dressing. 4 Beginning to understand 'yes', 'no' and some boundaries.
	Ages 16-26 months	5 Aware of others' feelings, eg, looks concerned if hears crying or looks excited if hears a familiar happy voice. 6 Growing sense of will and determination may result in feelings of anger & frustration, e.g. tantrums. 7 Responds to a few appropriate boundaries, with encouragement & support. 8 Shows they have learned that some things are theirs, some are shared, & some belong to other people.
	Ages 20-36 months	9 Seeks comfort from familiar adults when needed. 10 Can express own feelings. 11 Responds to feelings & wishes of others. 12 Aware that some actions can hurt or harm others. 13 Tries to help or comfort when others are distressed. 14 Shows understanding & cooperates with some boundaries & routines. 15 Can inhibit own actions/ behaviours. 16 Distracts self when upset, e.g. by engaging in new activity.
	Ages 30-50 months	17 Aware of own feelings, knows actions & words can hurt others' feelings. 18 Begins to accept needs of others, can take turns & share, sometimes with support. 19 Tolerates delay when needs not immediately met, & understands wishes may not always be met. 20 Adapts behaviour to different events, social situations & changes in routine.