

East Sussex Integrated Progress Review at 27 months

Early evaluation summary Oct 2016

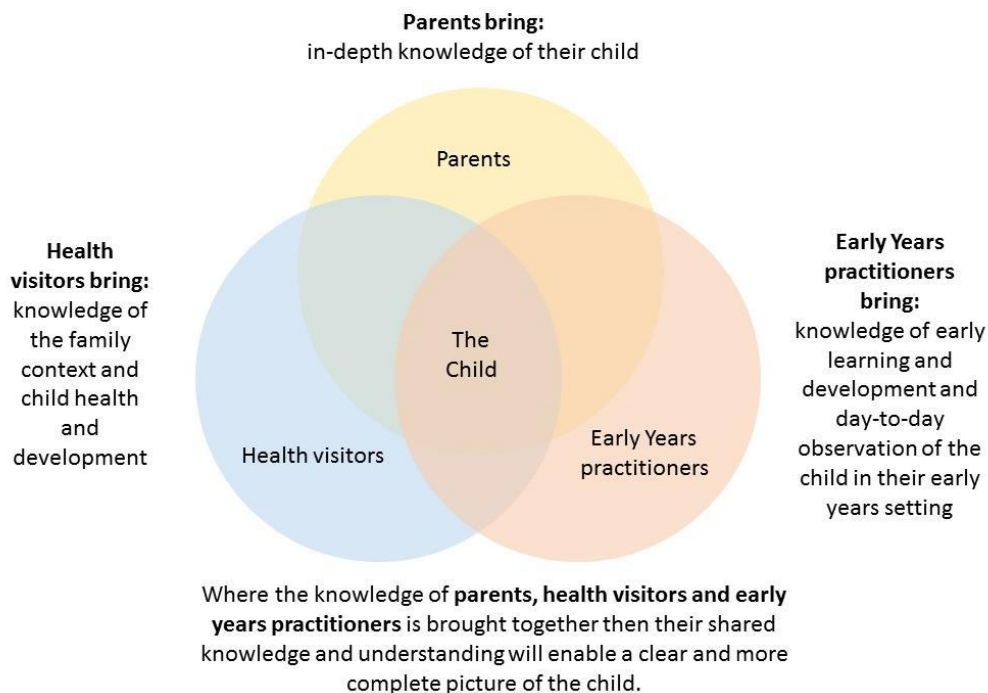
1. Background

1.1 In *Supporting Families in the Foundation Years (2011)*, the Government made a commitment to explore bringing together the statutory Early Years Foundation Stage (EYFS) Progress Check at age 2-3 years and the mandatory Healthy Child Programme (HCP) Health and Development Review at age 2-2½ years.

1.2 The national view was that separate reviews could lead to duplication both of time and paperwork and that this could be confusing for parents and that potentially conflicting advice could be given to parents. Separate reviews could lead to missed opportunities for early identification of a child's needs in the 'prime' areas and thus a delay in seeking support especially around speech and language development and social, emotional and cognitive development.

1.3 The benefits for children of undertaking an integrated review at this time are:

- Drawing together parents' views and concerns about their child's progress
- Providing an opportunity to listen to the child
- Health Visitor's bring expertise in the health and development of young children
- Early Years practitioners bring detailed knowledge of how the child is learning and developing based on day-to-day observation in their early years setting.
(See diagram below)



1.4 Funding for this development has been through the Health Visitors Transformation Fund (NHS), then the Department of Education and from 2016 to March 2018 through Public Health.

2. Aims of the Integrated Progress Review (IPR)

1. To identify the child's progress, strengths and needs at this age in order to promote positive outcomes in health and well-being and in learning and behaviour.
2. To facilitate appropriate intervention and support for children and their families especially those for whom progress is less than expected
3. To promote school readiness
4. To generate information which can be used to plan services and contribute to the reduction of inequalities in children's outcomes.

3. The Integrated Progress Review in East Sussex

3.1 Following the evaluation of the four pilots in September 2015 the decision made by the then 0-5 Commissioning Group for East Sussex County Council was to roll out the agreed model across the county from May 2016.

3.2 The implementation of this meant that a number of elements would need to be put in place prior to that roll out. These included:

- Information for parents.
- Training for staff on the Integrated Progress Review.
- Documentation.
- Secure email (via a secure NHS route) was in place between Health Visitors and Early Years providers.

3.3 Information for Parents

From February 2016 all parents of children on Health Visitors caseloads were notified by letter that the previous Health and Development review that had been undertaken by the Health Visitor with the child and their family at 24 months or age would now be undertaken when the child was 27 months.

At this time parents were also sent a copy of a leaflet (co-produced by parents) explaining what the IPR was and how their important their role in this was. Where parents were concerned about this delay they were encouraged to contact their Health Visitor particularly if they had concerns about their child's development.

Posters highlighting the changes were available for all of the Early Years providers and were prominently displayed at a range of settings including Children's Centres, GP surgeries, Health Centres, libraries etc.

3.4. Training for staff on the Integrated Progress Review

Training was provided for Health Visitors and Early Years providers during February and March 2016. Initial training was with the individual Health Visiting Teams (19 in total). This was crucial since they would lead on the process with the child and parent/ carer. Joint workshops were then held attached to individual Health Visiting areas and nurseries, playgroups and childminders within that defined geographical area were invited to come together. At these joint meetings Early Years settings were able to meet their 'link' Health Visitor and understand together how the process would work.

The IPR required both Health Visitors and Early Years Practitioners to develop new ways of working. Both professionals were committed to do this realising that this way of working was ultimately for the benefit of the child and their family. As well as a statutory requirement under the EYFS and the Healthy Child Programme

Further mop-up training was delivered in May 2016 for childminders and others who had been unable to attend previously.

3.5 Documentation

All staff (Health and Early Years) were provided with a pack that included all the necessary paperwork including the IPR process flowcharts. This information was also available electronically for Health Visitors and Early Years staff as appropriate

In addition to the IPR paperwork each of the Health Visiting Teams were given the names and contact details of all the settings within their catchment areas. This list included the name of the settings' 'Two Year Lead' (the person within the nursery appointed to oversee the process) and the name of the 'Link'

Health Visitor for each setting. It is anticipated that having a 'Two Year Lead' for each setting and a 'Link' Health Visitor for each setting will encourage good communication between the two professions.

3.6 Secure email (via a secure NHS route)

In order for confidential information about the child, recorded on a single form, to be sent between Health Visitors and the Early Years Provider all settings need to register to receive secure email. This can only be instigated by an NHS member of staff. It was planned that this link to secure NHS email should be set up with the relevant settings by each Health Visiting Team during the 3 months prior to the introduction of the IPR in May. However this did not always happen with each team.

4. Progress to Date

All 4 key elements to prepare for the countywide roll out were successfully completed.

East Sussex is now six months into the IPR process. Individuals react to change in a different ways and the Health Visiting service in particular has had to take on this change whilst adapting to the far wider integration of their service with Children's Centre services. In spite of this added pressure they have responded positively in the majority of cases. A recent review with representatives from each Health Visiting Team identified that delivering the IPR:-

- 'Received a positive response from parents who like the review being undertaken at 27 months and liked the Early Years providers being involved'.
- 'Was helping to build stronger links with Early Years education'.
- 'Was capturing more children at an appropriate developmental stage (27months rather than 24 months) with them having to undertake fewer recalls for speech delay'.

Whilst the whole process should cause less duplication health have found that it feels to be more time consuming. This is because the electronic record system that they use currently has not as yet been adapted to give them a smoother process. We have now been able to address this by putting a 'half-way' measure on the system in order to support the staff.

When the final evaluation in 2017 is completed (with its recommendations and amendments) we will then be able to make the requirements of the IPR fit with the Health Visiting and Children's Centre Service electronic system.

Using the secure NHS email system has been the most time consuming, although once secure email is established it does work well. The NHS does have a problem accepting some nursery email addresses and new ones have had to be created in order for them to receive the confidential information from Health Visitors. This does not affect many settings and where this has been an issue they have responded very positively being committed to engage in this new way of working. The Project Lead is now working with settings and Health Visitors to overcome the difficulties.

Most Early Years providers have found the link with Health Visiting has improved and that they (and indirectly the children they care for) are benefitting. A recent on-line survey of all early years providers identified that delivering the IPR:-

- 'It's great that we can see the Health Visitors comments and how they have assessed them at home. This can be very different as to how the child is in a Nursery setting, but parents understand this.'
- 'Will become easier as more are completed and the experience becomes more familiar.'
- 'It's been very straight forward to complete the 27 month review and the procedure to follow has been very simple.'

- 'I can't say enough how much better the new system is and how well it is working for us and I know the parents have said the same.'
- 'I like the idea behind the new way of the 2 year progress review, I think we are finding it harder because we are trying to work with 2 counties and the process has been quite complicated. The East Sussex HV have been wonderful '

5. Next Steps.

The future plan is to work towards the IPR being sustainable across Health Visiting and Early Years. A more evaluative interim review is being undertaken during November and December which should detail elements of the process that need to be 'fine-tuned'.

This interim review will also revisit 'in project' elements that supported the design of the existing IPR model.

These include:

- Revisiting the Parent Focus Groups – with particular regard to the review of the parent leaflet as well as information gathering from parents on their views of the IPR
- Review of the additional pages that were added to the Parent Child Health Record (Red Book) and developed as part of the IPR process
- The Integrated Progress Review Form
- Sustainability of the IPR

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