



achieving for children

Champions for children and families

Best practice in Early Years



*"It is easier to build strong children
than to*

repair broken men."

(Frederick Douglass)



**achieving
for children**

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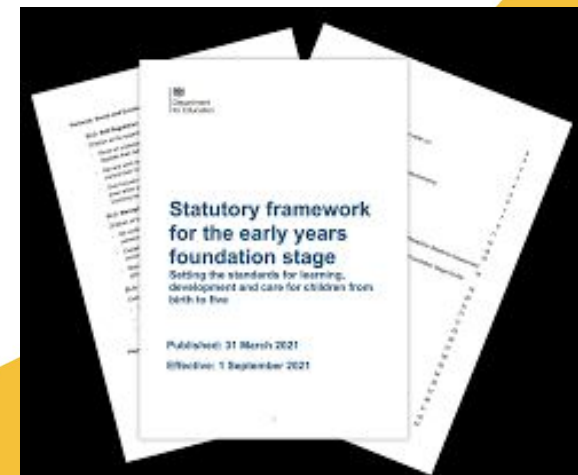
Aims

- Understand what is the Progress check at age 2
- Assessing in partnership
- Integrated review
- Supporting early Intervention and Identification
- Health Visiting and developmental reviews

What is the Two-Year Progress Check?

The Statutory Framework for the Early Years Foundation Stage 2021 states that:

“When a child is aged between two and three, practitioners must review their progress, and provide parents and/or carers with a short written summary of their child's development in the prime areas”. (EYFS 2021:point 2.4)



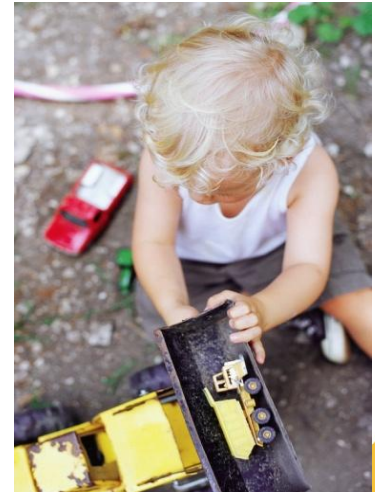
Purposes of progress check are to:

- **Review** a child's development progress in the three prime areas
- **Ensure** that parents have a clear picture of their child's development
- **Enable** practitioners and parents to understand the child's needs and plan activities to meet them



Purposes of progress check are to:

- **Enable** parents to understand the child's needs and, with support from practitioners, enhance development at home;
- **Note** areas where a child is progressing well and identify any areas where progress is less than expected
- **Describe** actions the setting intends to take to address any developmental concerns (including working with other professionals where appropriate).



The process

When is the progress check complete?

- 2nd and 3rd birthday
- Child needs to settle
- Let parents/carers know
- ASQ3



Who should be involved?

- Normally done by child's key person or worker
- Collaborative effort- parent/carers, key person, SENCO and other professionals

Non-statutory guidance

Guidance will help early years practitioners to make an **accurate assessment** of children's development, health and wellbeing.



Progress check at age two

Non-statutory guidance for the early years foundation stage



Integrated Review- moving forward

The Integrated Review at 2 years is designed to bring together the Healthy Child Programme health and development review used by Health Visiting teams, and the statutory EYFS Progress Check used by early years practitioners to assess children's development at 24 to 36 months.

Background: Why an integrated review?

- Early intervention is a key focus for the Government
- Age 2 – 2 ½ is a crucial stage – problems with speech, behaviour etc. become visible, yet there is time to make a real difference
- Currently the two reviews can be very different – but parents need a whole picture of the child
- There can be confusion and duplication between the health and education systems for 2 year olds

What is the purpose of the Integrated Review?

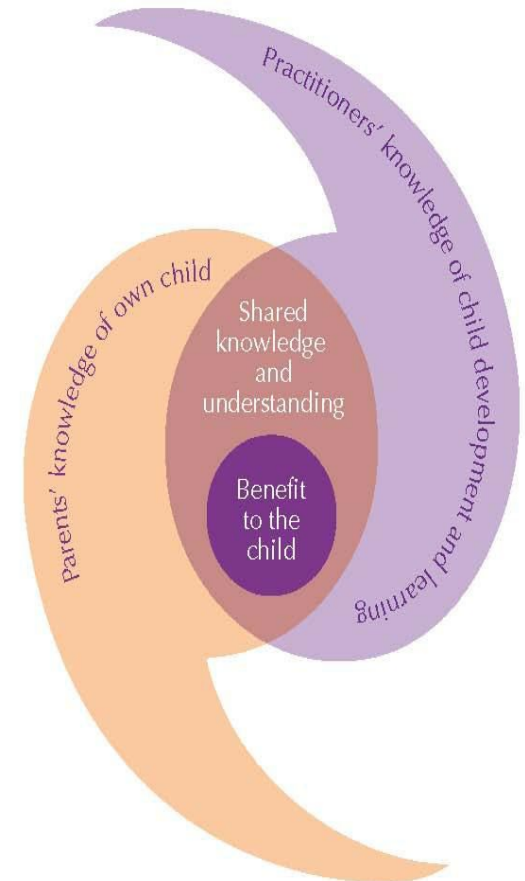
To identify the child's progress, strengths and needs,
to promote positive outcomes in health and wellbeing, learning and behaviour:

- Engage parents, particularly those who are disadvantaged.
- Engage the child.

A process of shared decision making:

To facilitate appropriate intervention and support for children and their families, especially those for whom progress is less than expected.

To generate information which can be used to plan services and contribute to the reduction of inequalities in children's outcomes.



A shared aim across Health Visiting and Early Years

- To improve school readiness (early identification and intervention) through the more effective delivery of the 2 year development reviews.



Our Journey so far in Richmond and Kingston



- Develop relationships with Health partners
- Ensure there is a **common purpose**- Shared vision; governance and accountability agreed (info sharing, safeguarding)
- In integrated approach (under review)
- Process of integrated check and step by step flowchart
- Scripts for promoting ASQ3 with parents in settings

Early identification and effective intervention

Early intervention can help children and young people to develop the skills they need to live happy, healthy and successful lives. It can improve the quality of children's home lives and family relationships, increase educational attainment and support good mental health.



Questions?



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Health Visiting and developmental reviews

**Your Healthcare
Anne-Marie Walsh**

12th October 2022

***your* healthcare**

Healthy Child Programme

- 0-19 years old
- Universal offer
- Provides professionals with a framework of screening, immunisations, health and developmental reviews supplemented by advice around health, wellbeing and parenting

Aim of HCP

- Early recognition of developmental delays, growth issues, ill-health and safety concerns

Healthy Child Programme

- Universal offer
- Developmental reviews within the first 2 years-at birth, 6-8 weeks, under one year and 2 year
- Plus opportunistic.





- Designed to identify children with developmental, behavioural and social emotional concerns.
- 2 tools-ASQ 3 and ASQ:SE
- Self reporting tool
- Time limited. ASQ 3 available for each month from 6 months to 5 and a half years.
- ASQ 3 Focuses on 6 areas of development-communication, gross motor, fine motor, problem solving and personal-social.
- ASQ:SE Social emotional questionnaire

Scoring

- Each area consists of 6 activities
- For each activity parents answer yes their child can do this, sometimes or no
- Each activity is scored out of 60.
- Depending on the score they will fall into one of 3 categories, no further action, monitor and give activities to support this area of development and review or consider referral.
- ASQ:SE
- Does not replace clinical assessment.

Additional questions

- Hearing and family history
- Vision
- Talking like other toddlers
- Understands
- Walking/running/climbing like other toddlers
- Behavioural concerns
- Medical issues
- Anything else parents are worried about

Early Language Identification

Measure-ELIM

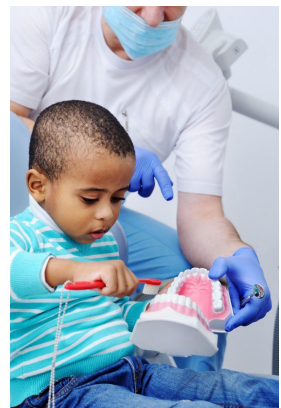
1. Mummy/mum	11 (Aero)plane	21.Towel	31.Fit(can have different meanings)	41.Wet	
2.Bye/bye bye	12. Car	22.Bed	32.Like	42.After	
3. No	13.Book	23.Settee/sofa	33.Rip/tear	43.Day	
4. Ball	14.Milk	24.School	34.Shake	44.This	
5. Juice	15.Hat	25.Friend	35.Think	45.Our	
6.Ouch/ow	16.Shoe	26.Person	36.Gentle	46.Where	
7.Cat	17.Leg	27.Hello/Hi	37.Fast	47.All	
8. Thank you	18.Pillow	28.Shopping	38.Happy	48.Much	
9. Cold	19.Rubbish	29.Carry	39.Last	49.Need to	
10 Hug/cuddle	20.Plate	30.Finish	40. Tiny	50.If	
Column Total	Column Total	Column Total	Column Total	Column Total	



		Yes	No
1	Observed communicative intent (child means to communicate something verbally to parent/carer)		
2	Speech mostly intelligible to parent/carers		
3	Observed putting words together (mummy up, more dinner)		
4	Do the parent/carer and child take turns when communicating?		
5	Does the child understand what is being said to him/her when their parent/carer asks them something which is NOT obvious from the context?		
6	Attention (please circle which one you observe the child doing: note only one out of three should be selected)		
	Fleeting (flits from one thing to another) (if selected , score 0 for question 6)	Single channelled (attention can't be easily shifted) (if selected , score 1 for question 6)	Accepts adult direction when playing (If selected, score 1 for question 6)
	ELIM Observation score		_/6

Health Promotion

- Immunisations
- Diet
- Physical activity
- Dental
- Foot care
- Accident prevention
- Sleep
- Vitamins
- Healthy Start Eligibility
- 2year nursery placement eligibility
- Toilet Training





‘HENRY provides a wide range of support for families from pregnancy to age 12 including workshops, programmes, resources and online help. The support for families is underpinned by the HENRY approach to supporting behaviour change which helps parents gain the confidence, knowledge and skills they need to help the whole family adopt a healthier, happier lifestyle and to give their children a great start in life.’

Outcomes

- No further actions
- Activities to support development provided to parents
- ELIM follow up conversation
- Repeat review 3 or 6 months
- Referral to Henry
- Referral to Speech and Language
- Referral to Child Development Team
- Other eg GP, Dietician, audiology
- Early Years letter sent.

Thank You

Any Questions?

your healthcare

