

## Integrated review at age two

From September 2015, the integrated review at age two will retain all key aspects of the existing two year progress check and Healthy Child Programme (HCP) health and development review, as set out in key governmental guidance. Through developing communication links between health visitors, early years practitioners and parents/carers, a more complete, holistic picture of a child's progress can be gathered, identifying developmental needs and offering timely support or interventions. The integrated review should:

- improve multiagency working and sharing of information to support families
- reduce duplication
- provide clearer and more consistent information for parents/carers
- provide a more holistic understanding of a child's needs
- provide earlier identification of needs and earlier access to support
- contribute to improved outcomes for children, including improved school readiness

### Statutory requirements

**Early years – progress check age 2:** '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.' Statutory framework for the early years foundation stage, 2014, p.13, 2.3.

**Health – health and development review at 2 - 2½ - Healthy Child Programme (universal offer):** Ages and Stages Questionnaire (ASQ) developmental review. This is a parent/carer completed questionnaire, designed to screen the developmental performance of children in the areas of communication, gross motor skills, fine motor skills, problem solving and personal-social skills. During assessment; dental health, accident prevention, sleep management, toilet training and providing sources of parenting advice and family information are discussed.

### Integrated 'information sharing' review at age two – top tips

- **Communication** is imperative for the success of the integrated two year review. An equal partnership needs to be developed to ensure early intervention. Key to this is picking up the phone or sending an email when you have concerns about a child. (Permission must be sought from parents/carers before contacting other professionals).
- Practitioners should only **complete the check** when they are confident they know their key child well enough to write a short summary of the child's development in the prime areas. Where possible, complete this prior to the health and development review by the health visitors.
- **Parents** should have a voice prior to finalising the progress check at age two. Practitioners should share and discuss the child's development with parents.
- Encourage parents to share the child's **Personal Child Health Record (PCHR)** red book on entry to the setting. This should be used on an ongoing basis for communicating between professionals about health and development. Encourage parents/carers to always have the red book available. The PCHR contains useful information, such as the child's expected date of delivery, immunisations, and health and development that you can use to inform your on entry information. This can be viewed on: <http://www.healthforallchildren.com/wp-downloads/79534v3.02-PCHR.pdf>
- Practitioners should be familiar with the PCHR (see link above), the health and development review ([https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/377800/dh\\_108329.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/377800/dh_108329.pdf)) and ASQ questionnaire ([www.agesandstages.com](http://www.agesandstages.com)).