

Early Intervention Practice Guidance

Early Help

What is Early Help

Early Help is all about identifying needs within families early and providing coordinated support before problems become complex. Our understanding of Early Help is built upon seminal publications which all make a compelling case for early help and prevention.

The Early Help & Children and Families service is the Local Authority's name for their Early Help service, but the vision of Early Help reaches beyond this. Families are supported by a range of services (through the Children and Family Centres), including health, education and community organisation, all of which are considered Early Help. Practitioners should hold in mind that Early Help is not limited to a service provided by the Local Authority but think widely about what Early Help encompasses, and providing support to children, young people and their families as soon as problems emerge or re-emerge. It is a way of working that supports families to overcome these challenges and avoids things becoming worse and harder to resolve.

Please click on this link for more information on the [Tower Hamlets Early Help Service](#)

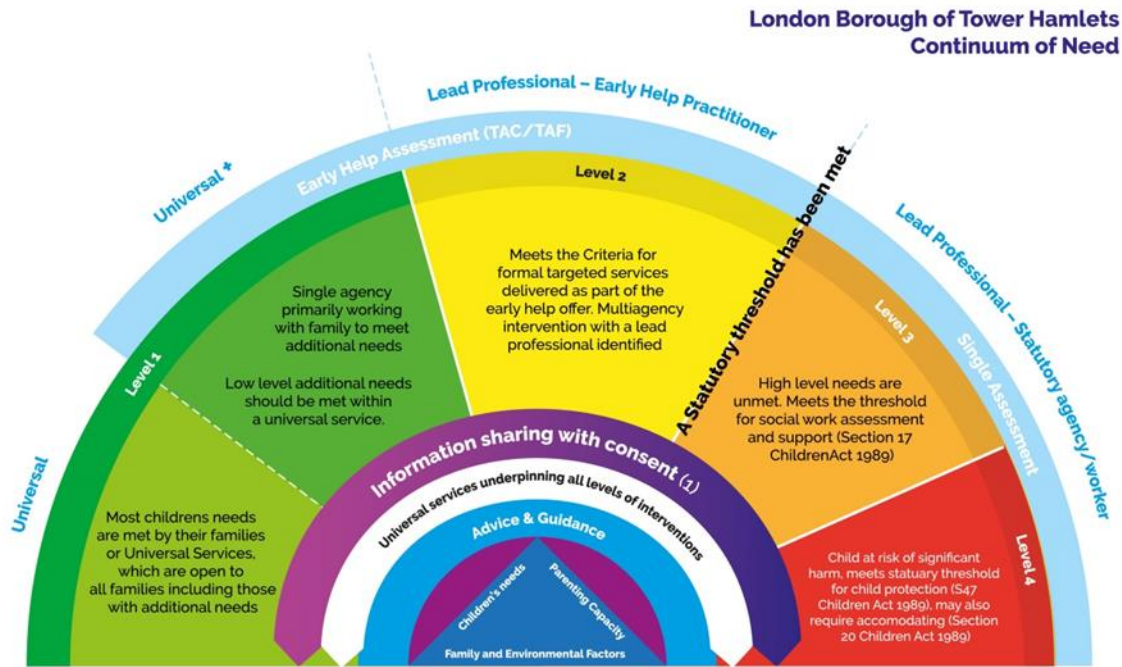
Early Help Pathway

Referrals for Early Intervention Targeted support can be done:

- external partner or a parent can make a self-referral via the Early Help Hub they can do this by using the calling 0207 364 5006 and press option 2 or using the Early Help Enquire Form <https://forms.towerhamlets.gov.uk/service/ehenquiries>.
- A family can self-refer by coming into a Children and Family Centre
- If an internal member of staff wants to make a referral can send an email detailing the family's exact information (and if known EISI ID's) and what they need and why.

Identifying Levels of Need

Early Help in Tower Hamlets consists of all the support available to children and families at levels 1 and 2 of the Tower Hamlets Thresholds guidance. It also enables children and young people moving away from statutory support (level 3 & 4), to sustain the progress they have achieved and promote their increasing independence.



(1) Unless detrimental to the child

Where appropriate, a joint approach will be taken, with partners, to the assessment of need and the application of agreed thresholds which will ensure that the right levels of services are offered to children, young people and their families. In addition to this, new threshold guidelines have been issued by the Tower Hamlets Safeguarding Children's Partnership (THSCP) and these will be used in Early Help as the basis for our joint understanding of thresholds. Early Intervention Services predominantly offer universal and targeted that are Level 1 services however the work around the targeted services may mean offering support that feeds into a wider plan for the family and that they are also being supported by other professionals for other areas of need. There are four thresholds in the THSCP guidance as described below:

Level 1 Universal Services: Should be met with services provided in universal settings to address low level addition needs.

Level 2 Targeted Early Help Services: Which meet the criteria for more formal targeted services delivered as part of the early help offer; multi-agency intervention, a lead professional and a team around the family approach in addition to support in universal services

Level 3 Child in Need: Which meet the threshold for social work assessment and support under S.17 Children Act 1989 (child in need), in addition to services in universal settings and by targeted services

Level 4 Child Protection: Which meet the threshold for statutory child protection by social work teams delivered under S.47 Children Act 1989, in addition to provision in universal settings and by targeted services.
This may also include children subject to a Care Order or children looked after under S.20 (duty to accommodate) of the Children Act 1989.

What is Early Identification

Early identification begins with the universal offer from Children and Family Centres, these universal services are usually the first point of contact for families with a range of services available from the council and its partners, including the voluntary sector. Through this contact, we can identify needs early and provide effective early support to ensure that parents and children who are at risk of poor outcomes can actively engage in play and specific areas of need to improve children's social and emotional skills.

What is Early Intervention

Effective early intervention works to prevent problems occurring, or to tackle them head-on before they reach statutory thresholds. It also helps to foster a whole set of personal strengths and skills that prepare a child for adult life. CFC provide early intervention through universal and targeted sessions within the context of the local safeguarding children board (LSCB) intervention thresholds level one offer. This early identification and intervention is one feature of the Early Help Service.

Evidence suggests that Early Intervention is best offered holistically to the whole family through a range of partners working together and may have its strongest impact when offered pre-conception, through the first critical 1,001 days and beyond, with the aim of helping families resolve potential problems before they escalate to the LSCB intervention thresholds.

The guidance explains how early identification and intervention delivered by the Early Intervention Team is the prevention arm in the Early Help Service.

The Early Intervention Team key role is to improve a child's outcomes at 0-19, by increasing the take-up of early education opportunities and maximise opportunities to identify children not meeting developmental milestones and with SEND through the partnership working with Health colleagues. Thus enabling parents to access training and enter employment. Both these very different functions are important parts of early identification and early intervention.

By increasing the focus on effective early identification, and by focusing universal, targeted and specific support (prevention) within the context of early intervention, the Early Intervention Team aims to not only support children and their families, but also to create a stronger positive impact on wider society locally and benefit the local economy as a whole. Early identification is a shared responsibility across the council, in Tower Hamlets, facilitated by the sharing of live birth data with partners who provide support for all families.

The Early Intervention Team will work directly, in a systemic way, with children and families to provide a mixture of individual and group interventions with parents, carers, and children. This will include both universal and intensive targeted support work with the aim of identifying and assessing family need, and provide the sustained engagement required to demonstrably improve outcomes for children and parents.

We develop targeted (level 1) and proportional intervention plans with families with children from birth to 5 years, to improve their learning and development outcomes (social, emotional, health and educational outcomes), prioritising children and families with additional needs. Utilise validated metrics and datasets, as agreed with the Children & Family Centre Early Intervention Manager, to ensure that the practice across the locality is well grounded using common assessment tools to track development and outcomes.

The Processes:

All of our services and sessions are advertised for families via a timetable that is published every term (3 times a year). It is accessible to the public online and via [the Children and Family Centres](#).

Universal Services

These are usually by appointment only if they are health appointments and are prepopulated appointments scheduled by the administration team of the health services (externally to the Children and Family Centres).

For other sessions such as baby massage or sensory these sessions are call to book and a list is held centrally on EISI so that any CSBSO can access it and book a family onto the session. The majority of universal sessions are drop-ins and open to all families living in the locality and then in the borough (subject to availability. however, there are limitations on the numbers of families being able to access at any one time due to Health and Safety and Ofsted compliance. In the School holidays our sessions are open to children aged up to 11 years old this enables younger children to continue to access provisions.

Targeted Services

Many families need more support than is available through universal services, such as schools and GPs. Targeted interventions are offered to families who are vulnerable or who may need extra support a specific or diagnosed problem requiring more intensive support. Early intervention cannot prevent problems from occurring but has the potential to help in minimising long-term impacts on a child's development. These sessions have a specific aim behind why we are running them. For example: **Little Talkers** was set up to improve and increase children's speech and language development **Play and Connect** to support parents of children with social communication delays **Invitation to Play** was set up to support children with SEND. For parents to be able to manage and understand their child's specific needs and the importance of play

For a family to be able to attend one of these sessions there is a specific referral pathway that needs to be followed as the family will then be allocated a session in their nearest Children and Family Centre.

To make a referral for a Targeted session the Early Help Enquire Form <https://forms.towerhamlets.gov.uk/service/ehenquiries>.

The screenshot shows a web browser window displaying the 'Enquiry for Early Help' form on the Tower Hamlets council website. The browser's address bar shows the URL 'https://forms.towerhamlets.gov.uk/service/ehenquiries'. The page has a header with the Tower Hamlets logo and navigation links for 'Home' and 'Services'. The main content area is titled 'Enquiry for Early Help' and features a horizontal navigation menu with tabs: 'Your role', 'About you', 'Child's details', 'Parent or carer', 'Registration request only?', and 'Declaration'. The 'Your role' tab is selected, and the form asks the user to 'Please describe who you are *'. A dropdown menu is open, showing four options: 'Self-referred', 'Completing on behalf of someone else', 'Practitioner/Professional enquiry', and 'Anonymous'. Below the dropdown are two buttons: a yellow 'Save' button and a blue 'Next >' button. The footer of the page contains copyright information for Tower Hamlets council and links to 'Legal notices', 'Cookies policy', 'Accessibility', and 'Help'.

If an internal member of staff wants to make a referral to Early Intervention, they can send an email detailing the family's exact information (and if known EISI ID's) and what they need and why. A contact record can be generated on EISI outlining what support they need in the notes section and the method

of contact can be made as CFC- Practitioner/Professional enquiry: email.

Home - Synergy Case Management - version 22.20.4574.25441

Desktop - Event - Admin - Actions - Sign Out

ADD - Practitioner or professional enquiry: Email
ADD - Practitioner or professional enquiry: Online
ADD - Self Referred - completed over the phone by a professional
ADD - Self referred - Email
ADD - Self referred - Online
B19 - Multi agency safeguarding Hub (MASH)
B19 - Practitioner or professional enquiry: completed over the phone
B19 - Practitioner or professional enquiry: Email
B19 - Practitioner or professional enquiry: Online
B19 - Self Referred - completed over the phone by a professional
B19 - Self referred - Email
B19 - Self referred - Online
CFC - Health Referral
CFC - Practitioner or professional enquiry: completed over the phone
CFC - Practitioner or professional enquiry: Online
CFC - Self referral - Drop in
CFC - Self Referred - completed over the phone by a professional
CFC - Self referred - Email
CFC - Targeted
CFC - Practitioner or professional enquiry: Email

Agency

LA Responsible

Category of Contact

Does the Contactee wish to remain anonymous

Awareness of contact

Is the Child/Young Person aware of the contact Yes No

Are the parents aware of the contact Yes No

Outcome *

CFC - Refer to EI Play & Learn Worker

Manager's Decision *

Refer to EI LT

Notes

28/11/2022 - JT - Family have been attending CFC universal stay and plays for a period of time and have had their 2_yaa health check child scored low on ASQ for speech and language - Needs Little Talkers

The Pathways for Targeted Sessions are demonstrated in the picture below



What do we offer?

Staff are trained to deliver a range of universal and targeted sessions across the 12 Children and Families Centres.

These are the sessions that the Early Intervention Staff deliver:

Name of sessions	Universal /Targeted /Universal Plus	Aims of session	Who is the session aimed at	What are the expected outcomes for the child	What are the expected outcomes for parent/families	How do you know we are making a difference (parent/child)
Baby Sensory and Starting Solids	Universal	<p>To support children's physical and social development, early language, and reaching sensory integration milestones through various sensory experiences, and using sensory resources; improve bonding and attachment with parent, and build parental confidence in promoting their child's development at home and being able to promote early healthy eating habits.</p> <p><i>Sensory rich environment to support children's sensory development, promote bonding and attachment and early healthy eating habits.</i></p>	0-15 months	<p>Opportunity for sensory awareness, development of core strength and muscle growth, development of early social communication skills, bonding and attachment with parent/carers.</p> <p>Starting solids at the right time and developing good early healthy eating habits.</p>	<p>Opportunity to improve relationship with child, to have understanding of Play and how to promote their child's sensory development; understanding of starting solids and healthy feeding; parents networking and getting support from other parents, especially for new parents/ in the area</p>	<p>Parents feedback that they are engaging with babies and promoting language development at home i.e., reading stories, singing, talking.</p> <p>Parents aware of key development stages how to support their child at home and report that they are implementing 5-thrive strategies</p>

Baby Massage and Starting Solids	Universal	To provide opportunity for parent and baby to have one to one quality time (through massage/touch relaxation) where bonding and attachment can take place and parents can have the opportunity to learn to recognise their baby's cues and respond to their needs. To provide information and guidance around starting solids	non crawlers, 2-12 months	Promotes secure attachment between care giver and baby (feeling loved, valued and respected (emotional wellbeing). This can reduce crying and emotional distress, expected increased level of relaxation and sleep, support with digestion (relief from wind, constipation and colic). Support with relaxation and release of accumulated stress; Improved sleep patterns.	Parents able to administer baby massage strokes and processes confidently and continue at home; Parents have opportunity for increased awareness and attunement with their baby; parents can gain confidence in parenting and managing crying babies and minor health issues; parents have a better understanding of starting solids and in creating early healthy eating habits; parents are supported by peers	Parents complete evaluation showing that they have gained confidence in administering baby massage and provide feedback about the benefits for themselves and their baby; parents complete evaluation relating to starting solids and healthy diet.
Baby Club	Universal	To enhance bonding and attachment and communication between parent/caregiver and baby. To give parents opportunity to meet other parents and provide an arena for support. To enhance and enable parenting at the beginning of the baby's life. To provide information	0-15 months	Opportunities for Learning and developing early play skills, social communication skills and building early friendships; developing healthy feeding habits which will contribute to good health; provide opportunities for improved bonding with parenting/caregiver, improved sleep and diet, improved emotional and social wellbeing.	Can support emotional wellbeing through social contact with other parents, feeling less isolated; Parents enabled to seek advice and support from a variety of professionals on weaning, sleep routines, home play, promoting language development and dealing with minor ailments.	Parents report feeling confident in their parenting ability. Parents report being linked in with the community and having strong social network/support (prevent isolation/promoting mental health); parents report understanding of starting solids and able to provide healthy diet

		and guidance around starting solids Parents have access to advice and guidance from other professionals				
Communication Stay and Play	Universal	Parents understand how to support their children's speech and language development and to help children to develop vocabulary through language rich environment; early identification of any communication concerns and referral for appropriate intervention	0-5 yrs.	Children have opportunity to develop communication skills i.e., using more words, joining sentences, expressing self-better through verbal and nonverbal communication.; children with language development delay are identified and referred for appropriate support	Parents have a better understanding of how to improve their child's speech and language development at home; parents understand importance of play;	Parents report an increase in awareness about the importance of play and how it supports their child's language skills.
Active Stay and Play	Universal	To promote children's physical development through play; to support parents' understanding of how to promote their child's physical development at home; early identification of any developmental concerns and appropriate intervention; parents understand how to provide a healthy lifestyle for their family	0-5 yrs.	Opportunity for children to gain confidence in balance, control and co-ordination of large and small movements and confidence in walking, running; children can become more aware of space around them and interaction with their environment, and develop confidence through risk taking and exploring in a safe space; children with physical development	Opportunity for parents to understand the importance of physical activity for their child's development; parents able to implement opportunities for their child's physical development at home; parents can have a wider understanding of oral health, healthy lifestyles, and safety in the home	Parents reporting children are more active; parents report they are making changes in their diet to improve health (i.e., sugar/snack swaps); parents report benefits of increased activity in their child

				delays or problems are identified and referred on for appropriate intervention; children are potentially healthier and safer if parents follow health messages		
Play Together with School Readiness	Universal and Targeted	Parental awareness of the EL2 offer support given with completing applications. Promoting social skills, learning through play, early identification of development issues and supporting parents to enable children to be school ready.	18 mths-5yrs	Eligible children who get a placement can benefit from attending EL2 offer; Children have opportunity to be more able to be ready to start school with improved independence skills, routines and sleep patterns and be toilet trained; children able to have opportunity to play in resource-rich environment promoting language and social skills and healthy development; early identification of developmental issues and appropriate intervention.	Opportunities for parents to have the information, knowledge and ability to be more prepared to support their child to be school ready. Parents aware of the EL2 offer and understand application process and then to be able to find and access a setting if eligible.	Children showing positive signs of school readiness i.e., toilet trained, dressing themselves, feeding themselves, better sleep routines, good communication etc.. Parents reporting easier settling in process at settings.

School Readiness	Universal	Supporting parents to enable their child to be ready to start school or Nursery setting: confident in toilet training their child; promoting independence skills, understanding the importance of routines, play and healthy lifestyles; both parent and child confident and emotionally prepared to start school.	18 months -5 yrs.	Children will have the opportunity to be ready to start school/nursery setting with improved independence skills, routines and sleep patterns and be toilet trained. Children able to have opportunity to play in resource-rich environment promoting language and social skills and healthy development. Children will have the opportunity to play with other children which will benefit their social development and speech and help them when starting a setting.	Parents confident to toilet train their child, support them to learn independence skills, understand importance of play and healthy lifestyles. Parents able to implement helpful routines, making sure their child gets enough sleep, and both parents prepared for the transition to school.	Parents reporting that the advice given has increased their knowledge and awareness around supporting their child to be school ready.
Forest School	Universal	Engagement with the natural world in a safe space, building self confidence in children (and parents), encouraging parents to access nature and the outdoors for the benefit and wellbeing of whole family. Promoting learning through play and exploration.	Parent and child/ren 0-5yrs	Children experience the benefits of playing and engaging with the natural world and increase their ability in exploring, risk taking and problem solving; they build their ability in play and imagination using natural resources.	Parents become more aware of benefits of play in the natural world; are supported with ideas and resources that they can use at home/in outside spaces/gardens to enhance their child's play	Parents reporting their child is gaining confidence and pleasure in playing in the outdoor environment; parents report that they are accessing outside areas to take their children to play in

Creative Play with Half-Moon Theatre	Universal	To support imaginative thinking, creativity, self-awareness and confidence in children and parents; to provide opportunities for children to develop social skills, problem solve, risk-take and raise self-esteem	Parent and child/ren 0-3 yrs.	Children have opportunity to experience different resources music, drama and creative play alongside other children. This will support their social skills, imaginative thinking and creativity.	Parents encouraged to think creatively, are better able to use play and ideas for creative play in the home, building parents' confidence and their own imaginative thinking	Evaluation forms and feedback; parents' feedback that they are doing more creative activities with their child; that their child is independently engaging in more creative activities
My Time 1-2-1 support	Targeted	To support parents to meet and understand their child's identified needs; Information and guidance for parents around parenting, play and learning.	Targeted families requiring more intensive support	Children have the opportunity to benefit from parents increased understanding in managing and meeting their needs.	Parents have access to specific advice and guidance for their child and how they can best support them; parents are more confident in managing their child's behaviour and supporting their development	Parents report that they are more confident and knowledgeable and their child is benefitting by improvement in the issues that they were referred for.
Little Talkers	Targeted	To have a measurable impact on the children's language development and demonstrated improvement of parents' skills in supporting their child's language development.	Parent and child/ren 18 mths-5 years	Children make progress in communication skills - listening, understanding, speech, and increased vocabulary.	Parents understand the importance of their role in supporting their child's language development and play skills; parents able to practice and use ETHCaT strategies during play sessions and at home	Parents feedback that their child's communication and language is improving; that they are better able to express their needs; monitoring and tracking shows improvement, and that this is sustained after 3 months

<p>Invitation to Play</p>	<p>Targeted</p>	<p>For parents to be able to manage and understand their child's specific needs and the importance of play; for their child to start making progress in small steps; to support and signpost parents to get the help and information they need; for families to progress to being able to attend universal Stay and Play sessions/starting school; for the child to be referred where necessary into appropriate pathways for ongoing assessment</p>	<p>children 0-5</p>	<p>Children's needs being identified and supported in the session</p> <p>Children accessing specialist support earlier on via referrals to SALT/Children's therapy service</p> <p>Children being able to manage being in universal play sessions without feeling overwhelmed and be able to utilise the session for continuous development</p> <p>Support with route to EHCP</p>	<p>Parent more confident in understanding their child's specific needs and behaviour and better able to support their child's communication and language and personal, social and emotional development.</p> <p>Parent able to access further support and advice; Parents feel supported in coming to terms with their child's diagnosis; Parents meet other parents and are able to support each other.</p>	<p>Children able to navigate back into universal play sessions and cope well and continue to develop their skills.</p> <p>Children with additional needs picked up early and referred to appropriate services that may lead to an EHCP (needs being met at nursery setting much earlier on).</p>
<p>Play and connect</p>	<p>Targeted</p>	<p>To give parents of children with social communication delay the skills to manage and understand their child's needs, learn how to better support their child at home during daily routines. Provide playtime and strategies to engage with their child in play at home.</p>	<p>Children 0-5 yrs. with social communication delay</p>	<p>Children in an environment where they can make progress in social communication, enabling them to improve their relationships with parent and peers; children get used to being in a Stay and Play environment, to the point where they can access universal Stay and Play sessions; children benefiting from structured sessions and routines that</p>	<p>Parents gain confidence in managing their child, are supported to come to terms with their child's individual needs; are signposted to services that can help; have more of an understanding how they can support their child in particular around structure and routines</p>	<p>Parent feedback about small improvements that their child makes; observations capturing progress; 12-week Ethcat review</p>

				enable them to better process their environment and responses.		
Play Plus	Targeted	To provide support to manage and understand child's needs; to put in place support to promote language development; to screen families waiting for Little Talkers; to provide Little Talkers strategies for those families who cannot attend Little Talkers.	children aged 18 months-5 years who are either waiting to access Little Talkers or Invitation to Play, or who are attending settings that are not providing language support, or for children where needs are yet to be identified. There must be some developmental concerns.	<p>Child screened and seen by a EIW (assessed on needs and some strategies provided while they wait to access LT/ITP).</p> <p>Child having access to play and some level of intervention while waiting to access more support; children have opportunity to progress in communication skills - listening, understanding, speech, and increased vocabulary</p>	<p>Parents feeling less anxious about waiting long periods to access support needed.</p> <p>Parents making connections with each other (preventing social isolation)</p> <p>Parents able to promote learning and development and apply strategies in the home.</p>	<p>Screening; pre and post assessment with parent; Ethcat and review; 3-month post course review following LT; Parents report feeling more confident to support their child, and improvements in their child's speech and language</p>

Parents Forum	Universal	Parents/carers to gain confidence in governance and decision making; Parent forum to contribute to decisions about the development of CFCs; provide opportunities for parents and children to meet and make friends/social network	Parents and Carers and their children	Children benefit from attending well-resourced play activities; start to build confidence in separating from parent in the creche	Parents build confidence and experience of governance and decision making, chairing and minute taking; parents feel empowered and valued in their role; parents can make friends, increase their social network and benefit from the insights of other parents' shared experiences	Decisions made in Parent Forums feed into CFC policies, planning and strategies; Parents able to represent Parent Forums at wider meetings, Family Hub Locality Partnerships; Parents report feeling more confident with governance, and contributing to discussion and decisions
Starting Solids	Universal	Parents confident in knowing when to start solids with their child, how much and what type of food to give them, what to avoid giving them.	Parents wanting to wean their baby 4-12 months	child is introduced to weaning at the appropriate time; children have opportunity to eat healthily	parents confident in knowing when to start weaning their baby, are able to start their baby on solids safely and appropriately	
Bookstart Stay and Play	Universal	To raise awareness of the benefits of books on their child's language development and their learning.	Under 5s	Child develops interest in books	Parents confident in reading to their child and promoting their child's literacy development	Feedback from parents

There are also sessions that Early Intervention run alongside partners that are both universal and target sessions:

Name of sessions	Aims of session	Who is the session aimed at	What are the expected outcomes for child	What are the expected outcomes for parent/families
Childminders Group	Support and training of registered childminders;	Childminders Group	Universal	
Doves	Stay and Play for visually impaired children	children 0-5 yrs.		not running at the moment
Ready Steady Go	Ready, Steady, Go is a stay and play session for deaf/partially hearing babies, pre-school children aged 0-4 and their families. The session provides opportunities to develop listening and communication skills through play, music and singing.		Opportunities for children to learn through play, and have access to a sensory room	The chance for parents and carers to meet other families with deaf/partially hearing children and to share experiences; be able to take away play ideas that can be used at home to develop child's attention, listening and communication ideas; parents can have time to discuss child's hearing loss, hearing aids/cochlear implants and communication development with professionals. Parents have opportunity to attend a British Sign Language class and opportunity to see the outreach Audiologist once a month for advice and ear mould impressions.
3–4-month health review	3–4-month check of weight, immunisations, development, any concerns	babies 3-4 months	Early identification any issues, and signposted/referred for intervention	
8–12-month health review	8–12-month check of weight, immunisations, development, language, weaning; any concerns	Children 8-12 months	Early identification any issues, and signposted/referred for intervention	

Healthy Child Clinic	Health check of weight, immunisations, development, language, weaning; any concerns;	children 0-5 yrs.	Early identification any issues, and signposted/referred for intervention	
2-year developmental reviews	Health check at 2 years, weight, immunisations, development, language, social communication...	24 months	Early identification any issues, and signposted/referred for intervention	
Newborn Hearing Screening	Routine newborn hearing screening	babies 0-3 months		
Baby Feeding Drop-in		Parents of newborns	Better bonding with parents and nutritional needs met	Better bonding with baby, improved mental health, better relationships with partner
Gateway Midwifery Clinic	Targeted	Health and Wellbeing check pregnant vulnerable mums		
Community Midwifery Clinic	Universal	Postnatal checks mums and newborns		
Adult Learning	Universal			

<p>Ready Steady Go</p>		<p>Ready, Steady, Go is a stay and play session for deaf/partially hearing babies, pre-school children aged 0-4 and their families. The session provides opportunities to develop listening and communication skills through play, music and singing. Children with</p>		<p>Improved listening and communication skills</p>
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What is a curriculum?

A curriculum is what you want the children to learn in the time they are with you. It must be based on the statutory Early Years Foundation Stage (EYFS), which gives you a framework that you can build on, through the 7 areas of learning.

You can decide how best to deliver those areas by creating a curriculum unique to your session, providing activities and experiences that deliver those areas of learning.

Planning your curriculum

You should always start with the Early Years Foundation Stage (EYFS) framework. It contains educational programmes that sit under 7 areas of learning. These are high-level curriculum summaries that you must follow and work into a rich curriculum that meets the needs of the children. Breakdown those high-level curriculum summaries into smaller steps. Decide what you want children to learn, the activities you want to do with them and how we can support their learning.

We should decide how to implement these activities and experiences, so the children can progress in all the areas of learning. You should evaluate how well the curriculum works, checking what children know and can do as they move through the EYFS. We do this by using a range of tracking methods – Progress Grids, ETHCATS,

We use 'Development Matters' the non-statutory curriculum guidance for the Early Years Foundation Stage to support you in planning your curriculum. This enables us to measure the smaller steps of progress and evidence our work and child focused outcomes.

Our curriculum is unique to our Children and Family Centres, we:

- observe children on how they lead their own play
- talk to parents and carers to find out their interests and engage them in their children's learning,
- listen to what children say that provides clues about their curiosities and interests.

We use this knowledge to decide how best to engage children in the curriculum and choose the right activity or environment. It should not be overly complicated and should meet the needs of the majority of children, however some children, such as those with SEND, may need additional support.

It's important not to use the early learning goals (ELGs) from the EYFS as the basis for the curriculum. They should only be used as an assessment.

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We use 'Birth to five matters' the non-statutory curriculum guidance for the Early Years Foundation Stage to support you in planning your curriculum. This enables us to measure the smaller steps of progress and evidence our work and child focused outcomes. [Birthto5Matters-download.pdf](#)

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Children's development and learning is best supported by starting from the child, and then matching interactions and experiences to meet the child's needs. The observation, assessment and planning (OAP) cycle describes what is frequently called assessment for learning, or formative assessment. On-going formative assessment is at the heart of effective early years practice. It involves observation of children as a part of all activity, which is most often held in the mind of the practitioner but may sometimes be documented, using this rich information to understand how a child is developing, learning and growing, and then planning the next steps for the adults in supporting and extending the learning.

EYFS and Birth to five matters – what National Frameworks are we evidencing our work against?

Children's development and learning is best supported by starting from the child, and then matching interactions and experiences to meet the child's needs. The observation, assessment and planning (OAP) cycle describes what is frequently called assessment for learning, or formative assessment. On-going formative assessment is at the heart of effective early years practice. It involves observation of children as a part of all activity, which is most often held in the mind of the practitioner but may sometimes be documented, using this rich information to understand how a child is developing, learning and growing, and then planning the next steps for the adults in supporting and extending the learning.

Planning

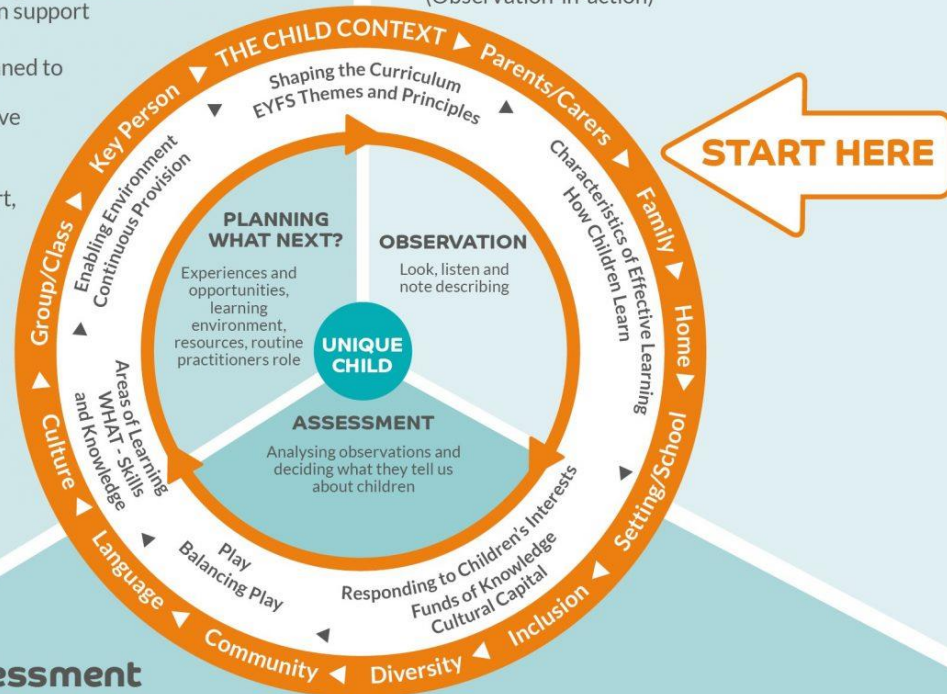
Decide how best to support, extend and teach children. Based on your observations and assessments, consider the following questions:

- Have you considered my/our interests in the planning? (child-led)
- Have you planned a specific experience or activity to teach a skill or knowledge? (adult-led)?
- How does the enabling environment and continuous provision support my/our next steps?
- What have you planned to support meaningful interactions and serve -and-return conversations?
- How will you support, extend and deepen play, interactions and learning in partnership with me/us? (Planning-in-action)

Observation

Observe children as they act and interact in their play, everyday activities and planned activities, and learn from parents about what the child does at home.

- How do you see me? On my own and with others?
- Am I involved in continuous provision?
- Have you observed while engaging with me/us? (Observation-in-action)



Assessment

Reflect on what you have noticed to help you understand the child/children.

Consider the following questions:

- How do you understand me?
- Do you understand how I feel? What I am interested in? What question may be in my mind?
- How am I approaching my learning? (Characteristics of Effective Learning)
- What have I learned and understood? (Areas of learning and development)
- What do you think is happening as you listen and engage with me/us? (Assessment-in-action)

EISI and Information Governance – How do you do it and why is it important?


Our case management system is called EISI, it pulls the data from the other work streams (B19 and CSBSO's) together. This system is fundamental a case management system where you log information that you have collated about the family and it will show in the Family's running record, this could be anything from a telephone call to a case note about a conversation you had with the parent or an observation that you made in a session. Information Governance is imperative when looking at the information we are holding on families and it is important that all families agree to share their data with

you. This is usually collected when a family registers with a Children and Family Centre and they sign to acknowledge this information. This ensures that we are GDPR compliant.

OBA's and Data collection and Outcomes – How do we evidence what we are doing, when and why?

As part of our monitoring of Early Intervention we have a process called Outcome Based Accountability which is really similar to KPI's (key performance indicators) to demonstrate the impact of our service. We have set measures to achieve as localities every month and this broken down further to staff to ensure that we meet the OBA's. Each locality is responsible for their set OBA data which is collated monthly and for staff this relates to performance and is picked up in one to ones.

This is the OBA data that we need to report on monthly.

 Early Identification & Intervention	
	Month
How well	OBA
How much did we do?	Number of EID level 1 cases stepped up to Early Help Services (specialist service)
	Number of eligible EL2 children not accessing EL2 provision observed in any CFC sessions
	Number of observations of children in CFC sessions
	Number of referrals for 'Invitation to Play' from EID universal sessions
	Number of referrals for Little Talkers from EID universal sessions
How well did we do it?	Number of action plans completed for children attending Invitation to Play
	Number of attendees from universal sessions that go on to make an EL2 application
	Number of cases jointly worked with B19
	Number of referrals for Little Talkers from CFC universal sessions that don't go on to require further intervention (after completing Little Talkers) from SaLT
Is anyone better off?	% of EL2 S&P attendees that go on to secure an EL2 placement
	4 Observation to be quality assured by each manager (mark 1-4 (1 = adequate, 2 requires improvement, 3 = good, 4 = outstanding))
	Number of improved ETHCAT scores (12 weeks following completion of Little Talkers)
	Number of re-referrals for the same targetted intervention

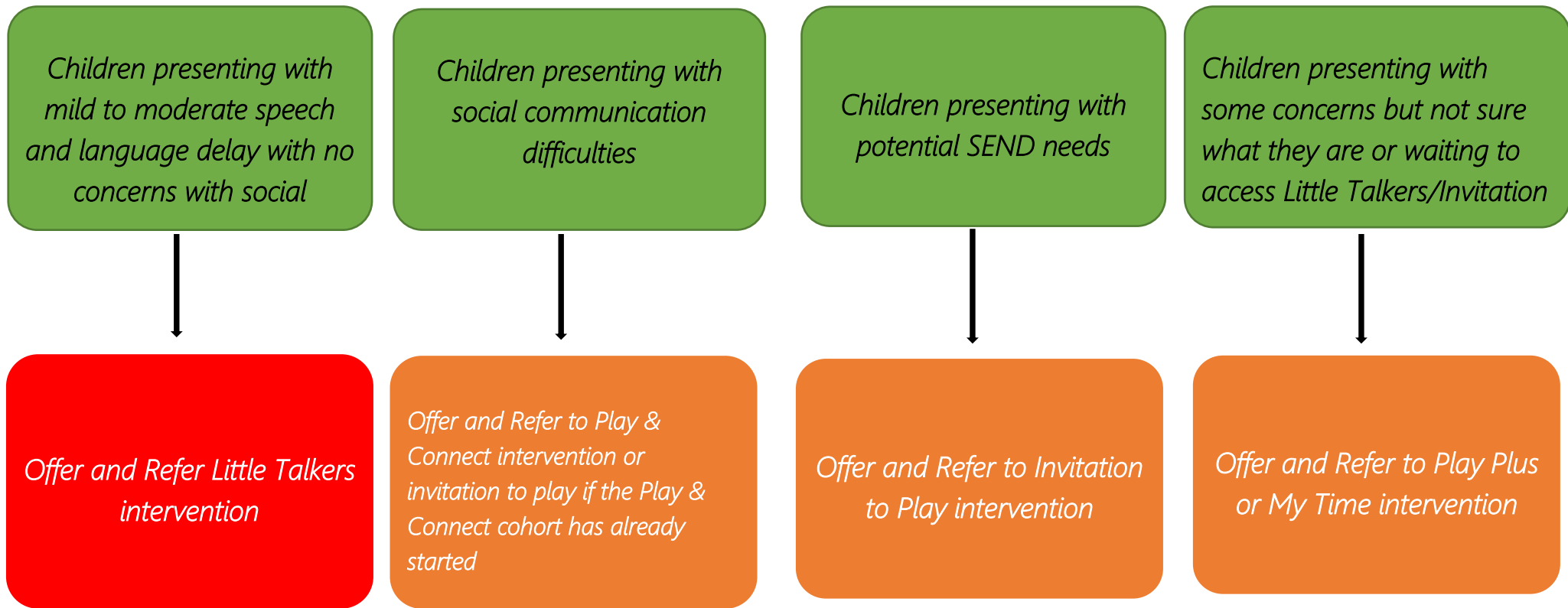
Policy and Practice – Knowledge Base

Each locality has a range of local policies that all staff are inducted to know. There are a range of National policies that we follow that feed into our local policies. For our service there is also a range of knowledge that is published locally and through National paper such as 1001 Days and 5 to Thrive. We use these to enhance our understanding and our practice.

[The best start for life a vision for the 1 001 critical days.pdf \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/421211/1001_critical_days.pdf)

[Five to Thrive - An attachment-based approach to positive parenting](#)

Referral Pathways in Children and Family Centres



If you are still not sure which intervention a family needs or for more complicated cases, please contact the Early Intervention Manager for your locality to discuss which support is appropriate.

For internal Children and Family Centre staff needing to make above referrals, please email the locality Early Intervention Manager with details of child and concerns.

For External staff needing to make above referrals please complete Early Help Enquiry form via the Early Help Hub

External Referrals

If children are presenting with more higher level needs that goes beyond mild-moderate concerns, the Single Point of Access (SPA) form can be used to refer children to the following services for specialist support:

- *Autism Spectrum Disorder Assessment Service - ASDAS*
- *Children's Continence Team*
- *Children's Continuing Care Assessment*
- *Community Children's Nursing Team (CCNT)*
- *Children's Eczema Nurse*
- *Children's Asthma Nurse*
- *Community Paediatricians (Medical team)*
- *Children's Occupational Therapy*
- *Children's Physiotherapy*
- *Children's Speech and Language Therapy*
- *Toileting Workshop*

The Specialist Children's Services SPA referral form and guidance can be found:

<https://www.bartshealth.nhs.uk/referral-forms>

For any queries, please contact: • Tower Hamlets GP Care group - SPA: 0300 033 5000 • Community

Referral Guidance for Children with Communication Needs

- 1) Refer to **Play and Connect*** if the child presents has language difficulties and clear ***social communication difficulties***

The child has persistent difficulties with social communication and social interaction. They often have restricted and repetitive patterns of behaviours, activities, or interests which include sensory behaviour. These behaviours are present since early childhood and may limit and impair everyday functioning.

A child with social communication difficulties may:

- **Have had a regression in their language development (stopped or lost)**
- **Not understand how to play with simple toys**
- **Prefer to play with things that are not toys (e.g., door handles)**
- **Engage in repetitive play (e.g., putting things into containers and emptying; lining objects up)**
- **Exhibit repetitive behaviour, i.e., stuck on a loop; stimming behaviour (flapping hands, spinning on the spot; wiggling fingers in front of their eyes; clenching the jaw)**
- **Not be interested in other children**
- **Generally avoid face-watching or show exaggerated face-watching**

- 2) Refer to **Little Talkers** (but not to speech and language therapy) if the child has ***expressive language delay***:

The child is not saying as many words as expected for their age but all other areas of communication are age-appropriate. Information about the communication skills of most children at different ages can be found here: <https://speechandlanguage.org.uk/talking-point/parents/ages-and-stages/>

A two-year-old with an expressive language delay usually:

- **Uses fewer than 50 single words and does not put them together**
- **Understands many more words than they can say (between 200 and 500)**
- **Understands simple instructions and questions without the adult pointing or gesturing (e.g., “Get a book”, “Where’s the dog?”)**
- **Engages in simple pretending with dolls (e.g., pretends to feed a doll / animal)**

Children referred to Little Talkers should not be referred to speech and language therapy at the same time. These children are likely to make good progress with the support provided in Little Talkers and will not require speech and language therapy. If there are still concerns about a child’s communication skills at the end of Little Talkers, the children and family centre will refer them to speech and language therapy.

- 3) Refer to [speech and language therapy](#) (but not to Little Talkers) if the child has **communication difficulties** that may include social communication difficulties (refer to Play and Connect first, if available, for children with social communication difficulties)

The child has difficulty getting their meaning across to others. This may be because they don't use many words, are not able to use their words to get their meaning across, and / or they do not use nonverbal communication to help others understand their meaning. The child also does not understand language at the expected level for their age. Information about the communication skills of most children at different ages can be found here:

<https://speechandlanguage.org.uk/talking-point/parents/ages-and-stages/>.

The child may also have difficulties in other areas of their communication, such as attention and listening or play. For information about social communication difficulties, please see 1).

A two-year-old with communication difficulties may have any of the following:

- Understands a limited number of single words (fewer than 200)
- Often does not understand simple instructions and questions, although they may understand if the adult points or gestures
- Uses fewer than 50 single words
- Rarely puts words together
- Struggles to get their meaning across, even when using words
- Rarely engages in pretending
- Social communication difficulties (please see 1)

Children referred to speech and language therapy should not be referred to Little Talkers at the same time. These children will likely require more support than provided by Little Talkers. If a speech and language therapist feels a child would be more suitable for Little Talkers, they will reject the referral to speech and language therapy and ask you to refer to Little Talkers.

- 4) Refer to [speech and language therapy](#) if the child has unclear **speech** (pronunciation) such that people frequently do not understand what the child is saying
- 5) Refer to [speech and language therapy](#) if the child has a **stammer**. There is information about stammering here: <https://stamma.org/about-stammering/what-stammering>

Guide for Children and Family Centre staff on LITTLE TALKERS

Little Talkers (LT) will be delivered by EI PL workers and run termly in each Children and Family Centre. All EI PL workers will be trained in the delivery of Little Talkers which will be run as a rolling programme (Pilot), with each PL worker holding and taking responsibility for allocated families.

The rolling Programme of LT will be run term time only, one 6 week course per half-term (2 a term, with one week break between them). All required paperwork will be held in a File in each CFC. EI PL workers will take responsibility to invite/remind families of the sessions, and when going on AL to inform other PL worker re their families and what strategies they are due.

Little Talkers will be supported by Play Plus:

- Play Plus will run one or two in each locality, and all year round
- Families on waiting list can be invited to this
- Families can be screened for LT
- Families to be given LT strategies while waiting to access LT, or if they have missed any LT session
- Observations of children

SaLT will retain an overview of Little Talkers delivery in Children and Family Centres.

Aims

Little Talkers are targeted sessions offered by the Early Intervention team for children with delayed speech and language skills and their parents. The aims of the sessions are to have a measurable impact on the children's language development and demonstrated improvement of parents' skills in supporting their child's language development.

The aims of the group are achieved through the following:

- providing a language enriched play environment for children to participate in
- helping parents to understand the importance of their role in supporting their child's language development and play skills
- practitioners modelling ETHCaT strategies to parents
- providing an opportunity for parents to practice and use ETHCaT strategies during play sessions
- establishing parents' active engagement in their child's learning process by giving encouragement and feedback
- Evaluation of sessions and referral on to other services as required
- 3 month follow up to check on sustained improvement; review ETHCaT

Eligibility criteria

- 18 months – 2yrs and 9 months (with exception, up to age 5, if schools not supporting; child not in any setting; case by case basis)
- Have delayed language skills. i.e. not meeting the 'flags' (or some) on the ETHCaT monitoring tool for 'Listening and attention', 'understanding' and 'speaking'
- Not currently receiving Speech and Language intervention

- Have no confirmed diagnosis of social language difficulties or developmental issues that might mean it would be difficult to access LT (If child has 'no words' may not automatically be social communication delay – need screening to see if LT strategies will be appropriate)
- The parents/carers have had the purpose of the group explained to them and are able to commit to the 6 sessions.

Referral Guidance for Children with Communication Needs

Components of Little Talkers

1. Screening

- On allocation, initial screening by phone to assess suitability for LT, assess priority, invite to Play Plus, encourage to attend universal Stay and Play, assess parent's ability to commit to course.
- Pre-course Screening by phone, or in Play Plus or other session, to assess child's current communication skills (from parent's perspective), and interests.

2. Baseline and ongoing Assessment:

- child's language development ETHCAT tool
- Observations
- Weekly feedback from parents on strategies applied

3. Strategies introduced to parents

- Week 1: Getting down to child's level; Join in activities, Making play available in the home (relatable play); Communication Tree
- Week 2: Special Time and Following child's lead (children's interests); (Use Here and Now)
- Week 3: Offer Choices; Specific Praise
- Week 4: Expand and Add words; (Use simple words and sentences)
- Week 5: Taking turns in talking; Commenting, Modelling and Imitating
- Week 6: Evaluation and reviewing all strategies

4. End of sessions assessment

- Parent's evaluation and feedback.
- 12 weeks after course, review ETHCaT and evaluation (Allocated EI worker to plan this date in with parents)

5. Referrals on to specialist services as required, (SaLT, B-19, ASDAS, etc)

Ideas for Environment and Resources

- Language-rich: LT display with top tips/Communication tree/other information
- Visual aids for prompts/choices/Singing and Circle time
- Activities to promote imagination – Home corner, small world play, dressing up etc
- Book corner
- Activities to promote discussion – cause and effect toys, construction, books, puppets, sensory toys
- Mark making, messy play, magnetic boards etc
- Visual aids/laminated cards
- Links to videos, Tiny Happy People website, etc
- All activities should be relatable to home life and be able to be replicated in some form at home

LT forms

- Pre-Screening form
- ETHCAT monitoring tool
- Weekly session strategies for parents incorporating Planning and Feedback from previous week's strategies
- Observations
- Little Talkers Session Planner
- Evaluation

Key skills:

All members of the team will have the following knowledge and skills:

- Knowledge of child development, specifically in the areas of communication and language development (EYFS)
- knowledge and skills in ETHCaT principles, and able to implement and use strategies in interactions with children
- able to tune into children's individual needs and interests, and select appropriate strategies and resources to support children's play and language development
- able to support parents in using strategies with their children; this may involve facilitative or direct approaches depending on the understanding and needs of the parents
- ability to provide feedback in a constructive and supportive way on their use of ETHCaT principles and strategies
- aware of professional boundaries, and practices within own professional area when communicating with parents
- knowledge of when, where and how to refer if further investigation/intervention is required

Responsibilities of EI PL practitioner:

- on allocation of families (5 cases per practitioner), call families within 2 weeks to carry out initial screening by phone to:
 - assess suitability for LT
 - assess priority
 - invite to Play Plus
 - encourage to attend universal Stay and Play sessions
 - assess parents' ability to commit to course
 - give general advice such as avoid too much screen time and TALK TALK TALK to your child
 - impress on parents the importance of coming to every session.
- Send letter to confirm invite to the LT cohort
- arrive 30 minutes before the session to set up
- stay for 30 minutes at the end of the session to complete planning, discuss observations of key children and tidy up.
- ensure EISi case notes are completed
- maintain LT File and keep updated
- negotiate local procedure for arranging phone/text reminders each week for families attending LT
- carry out the LT Parent Questionnaire, and obtain end of group feedback from parents
- ensuring that all families have some 1:1 time with a member of staff at each session.
- discuss with parent the week's strategies and write the plan on the sheet for parents to take away (this replaces the old homework sheets)
- on the same strategy sheet, write the feedback from parents about how they got on with the previous week's strategies
- encourage parents to join in with, or to play alongside their child.
- inform families attending LT sessions about other appropriate Children and Family Centre activities and services
- use interpreting services when required
- follow up families who don't attend consistently
- support each other's families when covering AL/absence
- be able to model ETHCaT strategies appropriate to the child's needs, and support parents in using the strategies with their child
- Carry out regular observations of the children and identify the children's next steps in partnership with parents
- Complete closing reviews
- Refer families on as required
- Inform referrer re closing case and outcomes achieved, or if family has not engaged. If referrer is from Health Visiting team, send email to generic duty HV team:
thgpcg.healthvisitingduty@nhs.net
- 12 weeks after course, review ETHCaT and questionnaire (Allocated EI practitioner to plan this date with parents)

Little Talkers: Actions on Allocation

As referrals come in they will be allocated by the manager. All families to be contacted within 2 weeks of allocation by the EI worker and assessed for priority. 5 families per practitioner to be invited to each cohort. The other families remaining on the waiting list, to be invited to Play Plus, and/or signposted to Universal sessions, and basic advice/strategies given.

Allocation Screening call: this is a general conversation to establish suitability for LT:

1. To rule out social communication delay, you can ask the following questions:
 - Does your child stop and turn to look when s/he hears their own name?
 - Does your child point with their finger and use their eyes to show you what they want?
 - Does your child point with their finger to get you to look at things they are interested in?
 - Does your child show they are enjoying a game with you by smiling and looking at you?

(If parent response to any of the 4 questions above is **'No'**, check further for possible social communication difficulties, (bearing in mind that even though the answer may be No, this does not necessarily mean the child has social communication delay). You will have to use your own judgement. If you think social communication delay is a factor, consider possible referral to Play and Connect/ITP)

2. Assess priority. Generally, the older the child is the more priority they have; also bear in mind the family's circumstances and how quickly they need intervention
3. Invite to Play Plus if staying on waiting list
4. Encourage to attend universal Stay and Play sessions
5. Assess parents' ability to commit to course and impress on parents the importance of coming to every session
6. Give general advice such as avoid too much screen time, and TALK TALK TALK to your child (in home language)
7. Record call on EISi
8. Send letter to families invited to the cohort to confirm invitation.

Guide for Children and Family Centre staff on PLAY AND CONNECT

Play and Connect- Stay and Play sessions for children aged 2-5 years with social communication difficulties

This group arose out of Invitation to Play and was developed in collaboration with Children's Community Therapy Services and CAMHS in Tower Hamlets, in response to increased referrals of children with Social Communication difficulties.

The sessions are run by Early Intervention practitioners who are trained and supported by:

- Speech and Language Therapy (SALT), supporting with nonverbal and verbal communication skills development and early interaction.
- Occupational Therapy (OT), supporting with engagement in everyday routine activities to begin developing skills.
- Child Mental Health Services (CAMHS), supporting with building positive and attentive relationships and managing emotions.

About Play and Connect:

Play and connect is a smaller, structured group session run for 6 weeks and including an orientation session for parents. It is for children aged 2-5 years old with social communication difficulties and autism, and their families. Children are assessed using the Canadian Occupational Performance Measure (COPM). Parents are given weekly strategies to support their child at home and have the opportunity to meet other families with children with social communication difficulties. Play and Connect aims to help parents understand how to support their child's early communication, and their child's social and daily living skills.

The group sessions also provide:

- A place to learn more about how parents can better support their child at home during daily routines.
- Tailored strategies each week that can be applied within everyday routines.
- Signposting and referrals to the right services
- Playtime and strategies for parents to engage with their child during play

Referral Criteria:

- For children aged 2-5 yrs with Social Communication difficulties only
- Referrals received internally by email
- Referrals received from professionals on an Early Help Enquiry Form <https://forms.towerhamlets.gov.uk/service/ehenquiries>

Referral Guidance for Children with Communication Needs

Refer to Play and Connect if the child presenting has language difficulties and clear **social communication difficulties**

The child has persistent difficulties with social communication and social interaction. They often have restricted and repetitive patterns of behaviours, activities, or interests which include sensory behaviour. These behaviours are present since early childhood and may limit and impair everyday functioning.

A child with social communication difficulties may:

- Have had a regression in their language development (stopped or lost)
- Not understand how to play with simple toys
- Prefer to play with things that are not toys (e.g., door handles)
- Engage in repetitive play (e.g., putting things into containers and emptying; lining objects up)
- Exhibit repetitive behaviour, i.e., stuck on a loop; stimming behaviour (flapping hands, spinning on the spot; wiggling fingers in front of their eyes; clenching the jaw)
- Not be interested in other children
- Generally avoid face-watching or show exaggerated face-watching

For this programme to succeed it is key that parents attend with their child every session if possible. We emphasize this at the start of the course, but it would be helpful if the referring professional gives the same message.

Structure and Aims of Play and Connect:

Play and Connect will be delivered by EI PL workers and run termly in each Children and Family Centre, one 6 week course per half-term (2 a term, with one week break between them), with each PL worker holding and taking responsibility for allocated families.

All EI PL workers will be trained in the delivery of Play and Connect.

All required paperwork will be held in a File in each CFC. EI PL workers will take responsibility to invite/remind families of the sessions, and when going on AL to inform other PL worker re their families and what strategies they are due.

Aims for parents:

1. To build connection and be in tune with your child.
2. To develop your child's communication and interactions within everyday routines.
3. To develop your child's functional and independence skills within everyday routines.
4. For parents to feel confident supporting their child.

Structure of Play and Connect sessions:

- 10:00am: Hang up coats together
- 10:05am: Hello song and circle time 1
- 10:10am: Free play and practise
- During playtime, Video sharing of previous strategy, and discussion about a weekly 'topic' about how to support young children and play and interaction support
- 11:00am: Tidy up time together with children
- 11:05am: Snack time with supported choice making
- 11:15am: Circle time 2 with supported choice making
- 11:25am: Reminder of the strategy for next week and good-bye song
- 11:30am: Coats on. Home time

Structure of Play and Connect Course

Week 1 is about getting to know the parents, giving them the Orientation Session, Welcome Packs, COPM assessment; weekly tips and strategies; parents identify a routine they want to work on.

The following weeks each have their own theme, with strategies and tips. Parents need to feedback each week how their practicing of strategies went at home. Parents have the opportunity to practice their chosen routines in the sessions.

The final session will include a review of the course, a celebration of changes made, an evaluation, completion of the COPM. Parents will be given the End of Play and Connect Group Summary report, a certificate, and a set of laminated home routine visual cards.

Please see the following link for details of the weekly session plans:

https://towerhamlets2.sharepoint.com/:w:/s/Team_EHCFS/EVMIOsctkG9MkbYqg3zDnOwBYkjHNxGBz2juyywYbvqXQ?e=xjle2d

After completion of the course:

- Give COPM and parent evaluation to Childrens Therapies Team
- complete the Attendance register and COPM summary scoring: see Link for Register and COPM summary:

https://towerhamlets2.sharepoint.com/:x:/s/Team_EHCFS/EZ6XCFBEIfhCuRxuzeSUIlkB8VQfALsVA-MsX1zsf_yhqQ?e=aHQfEZ

More Information for Practitioners:

- See Powerpoint of staff training from Children's Therapies Team
- Link for Staff Training

https://towerhamlets2.sharepoint.com/:p:/s/Team_EHCFS/EQZ_3sE2UahFsQpR2Xs-iBEbqTWbrXBaAZFR1MSHNEcvzg?e=m3SvVU

Coaching Approach

Research shows that adults learn best through practically doing and reflecting on what they have done rather than being told information.

The aim of the coaching conversations are to help parents to feel confident and competent in the strategies.

We do this by asking open questions to support the parent to reflect on:

- 1. What went well
- 2. What they would do differently next time to increase success.

Examples of Coaching questions:

- Remind me, what have you been working on this week?
- What did you notice when...?
- What would you like to happen
- What can you do to see it happen?
- What else?
- What have you already tried?
- What has worked before?
- How did that feel for you?

Positive Feedback

Give positive feedback in the moment as the parent is playing with their child:

- I noticed when you (Child name) did...
- I really liked the way you...
- I have noticed you are getting really good at...

This helps the parent experience success and so is more likely to do it when they get home!

Link for parents re Helpful Information:

[Early Language Development Articles – Helpful Information and Tips for Parents \(hanen.org\)](http://www.hanen.org/Early-Language-Development-Articles--Helpful-Information-and-Tips-for-Parents)

Guide for Children and Family Centre staff on INVITATION TO PLAY

Invitation to Play (ITP) will be delivered by Early intervention (EI) practitioners and run termly in each locality. All EI practitioners will be trained in the refreshed delivery of ITP and will be responsible for allocated families.

There will be one 6 week course per half-term (2 a term, with one week break between them). EI practitioners will be allocated families and take responsibility to invite/remind families of the sessions, and when going on AL to inform covering EI worker re their families and what strategies they are working with.

Eligibility Criteria - Who is ITP for:

ITP are targeted sessions offered by the Early Intervention team for children with SEND and who struggle to access universal sessions:

- For families with children with SEND/Possible SEND families where universal sessions are not suitable
- For children on waiting list for PC or who have completed PC and not ready to start universal sessions
- Age criteria: 0-5yrs
- Invitation Only

Who ITP is **not** for:

- Families struggling to access universal sessions (signpost to Play Plus/My Time for these families)
- Basic screening (this will happen in Play Plus and My Time)

AIMS:

- for parents to be able to manage and understand their child's specific needs and the importance of play
- for their child to start making progress in small steps
- to support and signpost parents to get the help and information they need
- to empower and develop families' confidence to access the universal play sessions
- to empower and develop families' confidence to help their child start School/Nursery
- for the child to be referred where necessary into appropriate pathways for ongoing assessment and support
- to support children with social communication delay who need a play session while waiting for Play and Connect to start
- to support children who have attended Play and Connect but are not quite ready to access universal sessions

The aims are achieved through the following:

- parents to be invited onto course and to understand that they need to commit to every session in order to make progress
- helping parents to understand the importance of play for their child's development, and their role in supporting their child's play skills
- EI practitioners modelling play
- Clear assessment of where the child is at on Ethcat in relation to red flags, and clear action plan with parents of appropriate small steps following observation
- appropriate planning to meet needs and interests of attending children
- establishing parents' active engagement in their child's learning process by giving encouragement and feedback
- evaluation of sessions and referral on to other services as required
- 3 month follow up to check on sustained improvement; review Ethcat

Referrals in and out:

Referrals in: self referrals, and professionals via the Early Help Enquiry form; internal referrals by email to EI manager

Referrals out: Health visitors, SALT, ASDAS, Children Therapies, GP/HV, B-19, parenting courses, Children's Social Care/disabilities team, other as required

Components of ITP

1. EI practitioners will take responsibility to invite/remind families of the sessions, and when going on AL to inform covering EI worker re their families and what strategies they are working with. (Capacity: 8-10 children/ 3 EI workers)
2. Families to attend a 6 week block with an Action plan and review
3. Screening: On allocation, send letter.....contact families within 2 weeks of allocation to screen and invite to session 2. Families to attend a 6 week block with an Action plan and review
4. Baseline and ongoing Assessment:
 - Ethcat
 - Observation and Action Plan with parents based on the needs of the child and the challenges for the family
 - Ongoing Observations and feedback from parents to capture progress
 - 12 week review of Ethcat
5. Action Plan Review at 6 weeks- options:
 - Close, invite to Universal sessions
 - Close, and refer on to Specialist services as required (SaLT, B-19, ASDAS etc)
 - Continue in ITP for further 4 weeks, then close
 - Invite new families in as space becomes available

6. Closing summary to state outcomes for the family and how the plan has been met, and evaluation (not yet developed) at completion

7. Follow up review of Ethcat and evaluation at 12 weeks after closure to capture sustained progress (this does not apply to those children waiting for PC or who have attended PC – they will be getting their 12 week review from PC practitioners)

Ideas for Environment and Resources

- Visual cards
- Resources from P and C
- Where parents can get help and support
- Local and National advice and support services
- Current EI resources as applicable (Top Tips, Strategies to support speech and language development, Getting Ready for School, behaviour, parenting etc)

ITP forms:

- EISi Observation short/long and action plan
- ETHCaT
- EISi Case notes
- EISi Closing Reviews
- Small Steps planning (in development)

Key skills:

All members of the team will have the following knowledge and skills:

- knowledge of child development, specifically in the areas of communication and language development, and PSED and Physical development (EYFS)
- knowledge and skills in ETHCaT principles, and able to implement and use ETHCaT strategies in interactions with children
- able to tune into children's individual needs and interests, and select appropriate strategies and resources to support children's play and language development
- appropriate planning to meet needs and interests of attending children
- able to support parents in using strategies with their children; this may involve facilitative/coaching or direct approaches depending on the understanding and needs of the parents
- ability to provide feedback to parents in a constructive and supportive way on their use of ETHCaT principles and strategies
- aware of professional boundaries, and practices within own professional area when communicating with parents
- knowledge of when, where and how to refer if further investigation/intervention is required

Guide for other Professionals to Children and Family Centres LITTLE TALKERS

Little Talkers (LT) has been revised in collaboration with the Speech and Language service.

It will be delivered by Early Intervention (EI) practitioners and run term time only in each Children and Family Centre as a rolling programme, with each EI worker holding and taking responsibility for allocated families.

The courses will be delivered as one course of 6 sessions per half-term (2 a term, with one week break between them).

Aims

Little Talkers are targeted sessions for children with delayed speech and language skills and their parents. The aims of the sessions are to have a measurable impact on the children's language development and demonstrated improvement of parents' skills in supporting their child's language development.

The aims of the group are achieved through the following:

- providing a language enriched play environment for children to participate in
 - helping parents to understand the importance of their role in supporting their child's language development and play skills
 - practitioners modelling ETHCaT strategies to parents
 - providing an opportunity for parents to practice and use ETHCaT strategies during play sessions and at home
- establishing parents' active engagement in their child's learning process by giving encouragement and feedback
- evaluation of sessions and referral on to other services as required
 - 3 month follow up to check on sustained improvement; review Ethcat and end of course evaluation

Eligibility criteria for referral

- For children aged 18 months – 2yrs and 9 months (with exception, up to age 5, if schools not supporting; child not in any setting; case by case basis)
- Not currently receiving Speech and Language intervention
- Have no confirmed diagnosis of social language difficulties or developmental issues that might mean it would be difficult to access LT
- The parents/carers have had the purpose of the group explained to them. Referring professionals need to make sure that parents understand the importance of the intervention, and committing to all the sessions.

Referral Guidance for Children with Communication Needs

Refer to **Little Talkers** if the child has *expressive language delay*:

The child is not saying as many words as expected for their age but all other areas of communication are age-appropriate. Information about the communication skills of most children at different ages can be found here: <https://speechandlanguage.org.uk/talking-point/parents/ages-and-stages/>

A two-year-old with an expressive language delay usually:

- **Uses fewer than 50 single words and does not put them together**
- **Understands many more words than they can say (between 200 and 500)**
- **Understands simple instructions and questions without the adult pointing or gesturing (e.g., “Get a book”, “Where’s the dog?”)**
- **Engages in simple pretending with dolls (e.g., pretends to feed a doll / animal)**

Referrals received on an Early Help Enquiry Form

<https://forms.towerhamlets.gov.uk/service/ehenquiries>

Components of Little Talkers

1. Letter and Screening

2. Baseline and ongoing Assessment:

- child’s language development ETHCAT tool
- Observations
- Weekly feedback from parents on strategies applied

3. Strategies introduced to parents

- Week 1: Getting down to child’s level; Joining in Activities, Making play available in the home (relatable play); Communication Tree
- Week 2: Special Time and Following child’s lead (children’s interests); (Use Here and Now)
- Week 3: Offer Choices; Specific Praise
- Week 4: Expand and Adding words (Use simple words and sentences)
- Week 5: Taking turns in talking; Commenting, Modelling and Imitating
- Week 6: Evaluation and reviewing all strategies

4. End of course assessment

- Parents’ evaluation and feedback.
- 12 weeks after course, review Ethcat and evaluation (Allocated EI worker to plan this date in with parents)

5. Referrals on to specialist services as required, (SaLT, B-19, ASDAS etc)

SaLT will retain an overview of Little Talkers delivery in Children and Family Centres.

Guide for other Professionals to Children and Family Centres *PLAY AND CONNECT – Stay and Play (for children aged 2-5years with social communication difficulties)*

This group arose out of Invitation to Play and was developed in collaboration with Children's Community Therapy Services and CAMHS in Tower Hamlets, in response to increased referrals of children with Social Communication difficulties.

Currently, after a successful pilot in the South-West locality, Play and Connect is being rolled out to the other localities. By June 2023 there will be one Play and Connect per locality.

The sessions are run by Early Intervention practitioners who are trained and supported by:

- Speech and Language Therapy (SALT), supporting with nonverbal and verbal communication skills development and early interaction.
- Occupational Therapy (OT), supporting with engagement in everyday routine activities to begin developing skills.
- Child Mental Health Services (CAMHS), supporting with building positive and attentive relationships and managing emotions.

About the group

Play and connect is a smaller, structured group session run for 6 weeks and including an orientation session for parents. It is for children aged 2-5 years old with social communication difficulties and autism, and their families. Children are assessed using the Canadian Occupational Performance Measure (COPM). Parents are given weekly strategies to support their child at home and have the opportunity to meet other families with children with social communication difficulties. Play and Connect aims to help parents understand how to support their child's early communication, and their child's social and daily living skills.

The group sessions also provide:

- A place to learn more about how parents can better support their child at home during daily routines.
- Tailored strategies each week that can be applied within everyday routines.
- Signposting and referrals to the right services
- Playtime and strategies for parents to engage with their child during play

Referral Criteria:

- For children aged 2-5 yrs with Social Communication difficulties only
- Referrals received on an Early Help Enquiry Form
<https://forms.towerhamlets.gov.uk/service/ehenquiries>

Referral Guidance for Children with Communication Needs

Refer to **Play and Connect*** if the child presenting has language difficulties and clear ***social communication difficulties***

The child has persistent difficulties with social communication and social interaction. They often have restricted and repetitive patterns of behaviours, activities, or interests which include sensory behaviour. These behaviours are present since early childhood and may limit and impair everyday functioning.

A child with social communication difficulties may:

- Have had a regression in their language development (stopped or lost)
- Not understand how to play with simple toys
- Prefer to play with things that are not toys (e.g., door handles)
- Engage in repetitive play (e.g., putting things into containers and emptying; lining objects up)
- Exhibit repetitive behaviour, i.e., stuck on a loop; stimming behaviour (flapping hands, spinning on the spot; wiggling fingers in front of their eyes; clenching the jaw)
- Not be interested in other children
- Generally avoid face-watching or show exaggerated face-watching

For this programme to succeed it is key that parents attend with their child every session if possible. We emphasise this at the start of the course, but it would be helpful if the referring professional gives the same message.

Guide for other Professionals to Children and Family Centres INVITATION TO PLAY

Invitation to Play has been revised. It now runs as a targeted 6 week course for families with children with SEND, but not specifically for children with Social Communication delay (they can be referred to Play and Connect)

Invitation to Play (ITP) will be delivered by Early intervention (EI) practitioners and run termly in each locality.

There will be one **6 week course** per half-term. Parents can self-refer, or be referred by professionals on an Early Help enquiry form. Families will be allocated to an Early Intervention worker for the duration of the course.

EI practitioners will focus on **two/three aims** depending on what the parent is most concerned about, what the referring professional is concerned about, and what the EI practitioner thinks is best to meet the needs of the child.

Eligibility Criteria - Who is ITP for?

ITP are targeted sessions offered by the Early Intervention team for children with SEND:

- For families with children with SEND/Possible SEND families where universal sessions are not suitable
- For children on waiting list for Play and Connect or who have completed Play and Connect and not ready to start universal sessions
- Age criteria: 0-5yrs
- Invitation Only

Who ITP is **not** for:

- Non SEND Families struggling to access universal sessions (signpost to Play Plus/My Time for these families)
- Basic screening (this will happen in Play Plus and My Time/Universal session)

AIMS:

- Provide emotional support/signpost and guidance for parents/carers
- for parents to be able to manage and understand their child's specific needs and embedding routines/strategies at home
- for parents to understand the importance of play and how to play at home
- for parents to understand the importance of verbal/non-verbal communication
- for their child to start making progress in small steps (non-statutory framework of development matters)
- to empower and develop families' confidence to access the universal play sessions
- to empower and develop families' confidence to help their child start School/Nursery

- for the child to be referred where necessary into appropriate pathways for ongoing assessment and support
- to support children with social communication delay who need a play session while waiting for Play and Connect to start
- to support children who have attended Play and Connect but are not quite ready to access universal sessions

Components of ITP

4. All families will be allocated to EI practitioners who will take responsibility to invite/remind families of the sessions, and when going on A/L to inform covering EI practitioner re their families and what strategies they are working with. Capacity: 8 children/ 2 EI practitioners)
5. Families to attend a 6 week block with an assessment, (Ethcat), **Action Plan** and review. Families can be invited in at any time.
6. Action plan reviewed at end of course and again at 12 week check

Referring professionals please refer on the Early Help Enquiry Form:

<https://forms.towerhamlets.gov.uk/service/ehenquiries>

For this programme to succeed it is key that parents attend with their child every session if possible. We emphasise this at the start of the course, but it would be helpful if the referring professional gives the same message.