

Supporting the 27-Month Health Review through an Integrated Approach in Hackney



Happy, healthy
and ready to learn

Agenda

- Aims and Objectives
- Hackney's Approach to 'School Readiness'
- Role of the Enhanced Health Visiting Service
- The Professional Role of the Childminder:
Partnership with Parents and External Services
(Hackney)
- Further Support and Feedback

Aim

Purpose:

- Celebrate and share effective practices for the 2 year old progress check.
- Identify child strengths, delays, and necessary support.
- Promote an integrated approach by combining parents' views, early years knowledge, and health professionals' care.

Goals:

- Support children toward a Best Start in Life, optimal development, and school readiness.
- Identify progress, strengths, and needs for positive health, well-being, learning, and behaviour outcomes.
- Facilitate intervention and support, especially for children showing less than expected progress and offer early intervention.

(Note: This process combines the EYFS Progress Check at Two and the Healthy Child Programme 2–2.5 year review.)

Objectives

- Understand the importance of the 27-month health review and how to effectively communicate it to parents/carers.
- Grasp the crucial role of childminders in supporting the 27 month health review through an integrated approach.
- Familiarise yourself with the assessment tools used by the health visiting team for child development and the value of early intervention.
- Develop an understanding of effective partnership working with external services.

What does 'school readiness' mean to you?

A child prepared to learn and thrive



Background

Hackney integrated approach

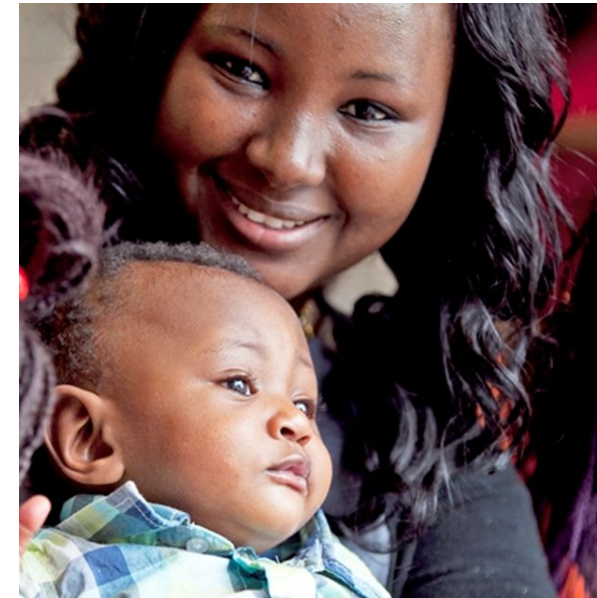
Overall Aim: Achieve Hackney's school readiness target of 78.2% Good Level of Development (GLD) by July 2028. The GLD is completed for each child at the end of their reception year in school.

The 27-month progress check carried out by health (we want to include the statutory EYFS check at 2 years and the 27-month Health Review) and having this will be crucial for reaching this goal, as it provides a comprehensive view of the child and facilitates early identification for support.

Objectives:

- Enhance the quality and access of the 27-month health review.
- Strengthen multi-professional collaboration between health visiting and early years providers.

Working for every child



Mind the gaps!

Outcomes at age 5yrs - not all equal,
achievement gaps exist among:

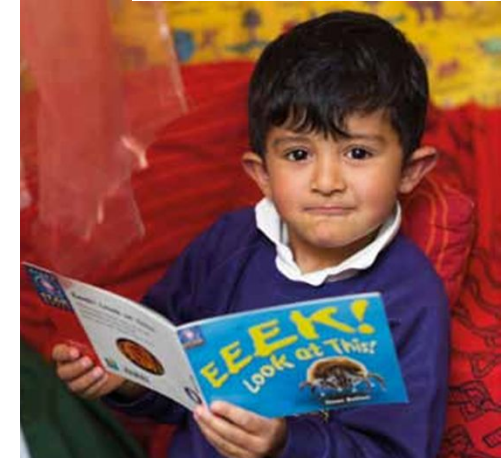
- ★ Turkish and Kurdish boys and girls
- ★ Bangladeshi boys
- ★ African boys
- ★ Caribbean boys

Local public health priorities include:

- Speech and language development
- Increasing timely immunisation uptake (MMRV in particular)
- Reducing obesity (among boys in particular)
- Reducing hospital admissions related to tooth decay
- Increasing access to Healthy Start vitamins for all families and an access card for families who meet the criteria
- Ensuring we are engaging fathers and using specific inclusive language to ensure they feel welcome and included.

Early help = Early identification and intervention

Working for every child





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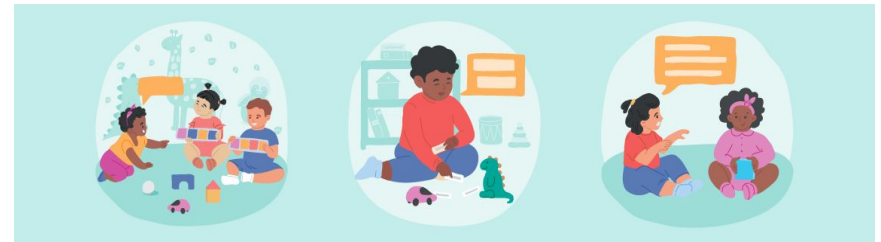
27 month health reviews

The Role of the
Health Visiting Team
(HV)

- Early childhood is an important period of rapid brain growth, including during pregnancy and the first 2 years (first 1,001 days). Getting a good start in life is an important marker for good health and wellbeing throughout life.
- **Age two to two-and-a-half is a crucial time** for a child and their parents. It is a period of rapid growth, learning and development in a young child's life, and is also a crucial time when a child's need for additional support from health services, or the education system can become clear.
- Valid screening instruments are helpful to detect children at risk for developmental problems (ASQ-3 , ELIM-I))

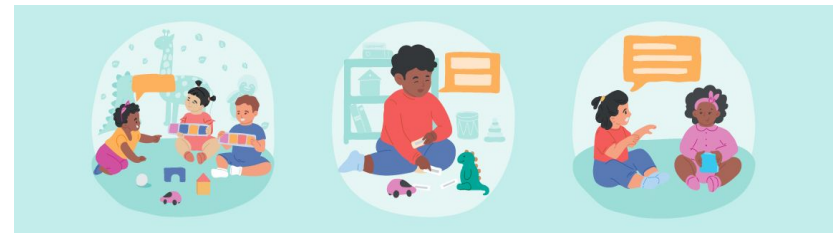
- Runs safely and jumps with two feet together
- Throws and kicks a ball
- Walks up and down stairs holding onto rail
- Draws a circle in imitation
- Picks up small objects accurately
- Is able to match shapes in simple Jigsaw
- Builds a tower of 6 or 7 cubes
- Uses pronouns such as I and You
- Understands action words
- Provides a verbal commentary during play
- Follows 2 words instructions
- Typically uses two- word combinations

2 year key developmental milestones



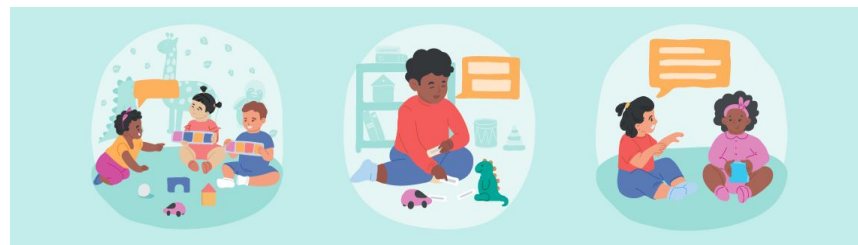
- Able to act intentionally.
- Self-centred and unable to take on board the views of others.
- Becoming aware of the consequences of their actions.
- Emotionally dependent on adult and requires reassurance in unfamiliar situations.
- Emotional outbursts and tantrums.
- Demanding parent/carers attention.
- Plays alongside others.

Understanding 2 year olds and their main characteristics



- The child's developmental needs- age and stage.
- The capacity of the parents to provide security, safety, love, stimulation and boundaries-How does the child communicate needs and can parent respond?
- The family and environmental factors that might also enhance or undermine the warmth, safety and security of the home environment: Have there been any recent changes big or small?

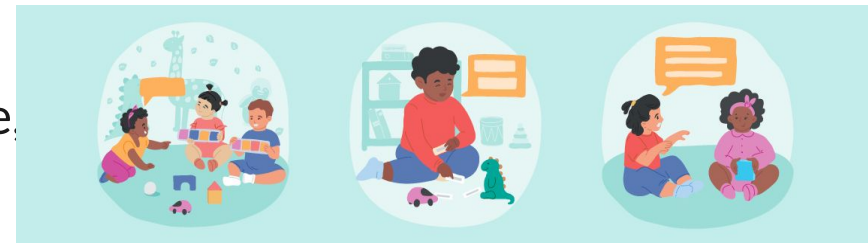
Understanding the child's context



Parental capacity to provide a sensitive, responsive environment. Caregiving can be influenced by a range of aspects:

- Environment (e.g. poor housing, financial worries)
- History (e.g. their own experience of being parented, a history of being in care, traumatic life experiences such as fleeing a war-torn country)
- Culture (e.g. different cultures may have different approaches to parenting)
- Relationships (e.g. availability of social support, impact of abuse).

Understanding the parents/carers context



Speech and Language

Early identification
and support are
key

1 in 10 children in
the UK have
speech and
language
difficulties.

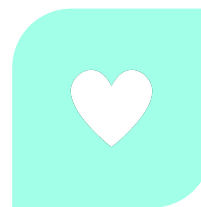
Communication skills are a foundation



FRIENDSHIPS



LEARNING



EMOTIONAL
WELLBEING



BEING PART OF
A COMMUNITY

Health Review Invite Letter



Homerton University Hospital 
NHS Foundation Trust

ADD YOUR SETTING LOGO
HERE

Date:

Dear Parent/Carer

Re: 27 Month Integrated Review

Now that _____ is _____ old, it is time for his/her 27 Month Review. This review is offered to all children in Hackney. It gives you the opportunity to ask anything you want to know about your child's health and development including their learning and behaviour.

The review will take place at your child's early years setting with a health professional from the local health visiting team. The **My Portrait at Two (Progress Check at Two)** will also be completed by your child's key person and following yours' and the health professional's contributions it will be placed in your Red Book.

Preparing for the Integrated 27 Month Review

You will receive an **Ages and Stages Questionnaire - 3 (ASQ-3)** from your child's Early Years Setting. You must complete this questionnaire **before** the review meeting. As a parent or caregiver, we know you are the best source of information about your child. The ASQ-3 questionnaire will take only 10-15 minutes to complete, it is that quick and easy!

1. Answer each question "yes," "sometimes," or "not yet," based on what you know your child is able to do now. We need your answers to be as accurate as possible so that it shows your child's strengths and any areas where he/she may need practice.
2. Have fun with your child trying the various activities. You can make a note of what you have seen and any questions you may have. **If you do not understand a question you can leave it and ask your child's key worker to explain it/ help you to answer it.**
3. The completed questionnaire will be discussed at the 27 month Integrated review meeting and the health professional will talk about the outcomes with you.

If your child needs help with some skills or development areas, the health professional and early years setting professional will work with you to agree on the best way to support you and your child. Addressing any issues as early as possible supports young children's healthy development and helps to prepare them for life at school later on.

By attending this review, you are helping to ensure that your child is off to the best possible start.

Your child's 27 Month Integrated Review will be on:

Date: _____ Time: _____ Venue: _____

Therefore, it is very important that you attend this meeting.

You must provide:

Your child's **Red Book** and The completed **Ages and Stages Questionnaire** (returned to your _____ your child's nursery at least 1 day before the your meeting)



We look forward to seeing you,

Yours sincerely

[Link Health Professional](#)

[Healthy Child Lead Practitioner](#)

The slip must be returned to: _____ by: _____ (date)

Name of parent/carer who will be attending the Integrated 27 Month Review Meeting

Parent/carer name:

N.B. By signing this form you are agreeing to information being shared with a Health Visitor. It will also be used for statistical purposes and may be shared with other professionals. By signing this form, it is deemed that you understand the purpose that the information will be used for.

Signature of parent/carer:

Assessment Tools used by HV team

- ASQ 3 Questionnaire and tool kit (string and beads, crayon and paper, blocks etc.)
- ELIM Word List and Observations
- Red book (Personal Child Health Record)

What is ELIM?

- The Early Language Identification Measure and Intervention (ELIM-I) is a tool designed to support the identification of children's speech, language and communication needs, and to provide tailored support to families.
- ELIM is designed for use with all children attending their 2-2 ½ year Healthy Child Review.

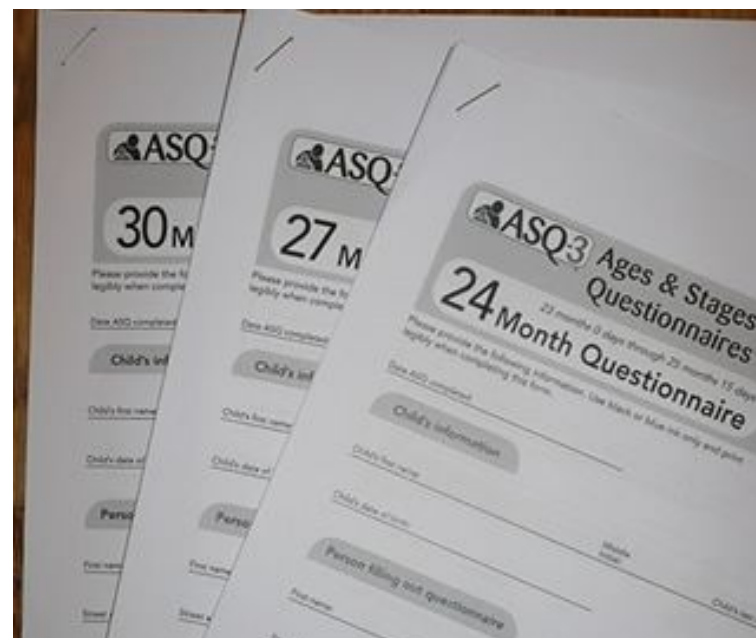
The measure includes 2 sections:

- 50-item word list: to be completed with families during the review
- Practitioner observation: to be carried out throughout the review

What is the ASQ ?

- It is a developmental and social-emotional screening for children from birth to six years of age.
- The ASQ 3 has been applied as a standard part of the Healthy Child Programme 2-2.5 year review since 2015
- The purpose of the screening is to highlight or detect developmental delays
- It focuses on 5 key areas **Communication, Gross Motor, Fine Motor, Problem Solving and Personal & Social Development**
- The Department of Health use the ASQ-3 as the population measure of development for 2 to 2.5 year olds across England

ASQ-3™: 24, 27 and 30 months



Key Health Topics

Child

- Oral Health
- Healthy Start Vitamins
- Diet/nutrition/fussy eating/obesity
- Weight / height
- Sleep routines
- Bottles and dummies
- Understanding behaviour
- Immunisations
- Speech and ELIM
- Play and stimulation
- Toilet training
- Access to nursery
- Accident Prevention
- Immunisation

Parent/carers & Environmental factors

- Parent/carers wellbeing
- Building parental confidence/knowledge
- Think Family
- Accident Prevention
- Wider environmental factors i.e. housing and employment, social capital

Concerns at 27 Months

- Engages in compulsive activities (e.g. head banging)
- Frequent, despairing tantrums
- Withdrawn; shows little interest in social interaction
- Displays repeated aggressive or impulsive behaviour
- Little or no communication; lack of language, concerns with attention and listening
- Loss of earlier developmental achievements (regression in development)
- Delayed motor skills
- Obesity
- Fussy eating
- Tooth decay

Onward referrals

- Where the need for more support is identified at the Health Review, the health visiting team will consider the level of a child and family's need. This is to determine whether there should be an **immediate referral to specialist services**, or a period of **additional support** from parents, the childminder, children and family hub or Health Visiting Team with a further **check/review at an appropriate interval to monitor progress**.
- Specialist services may involve referral to a GP, paediatrician, a Speech and Language Therapist, initiation of an Early Help Referral, referral to mental health or social care services

- First Steps
- HENRY/dietician
- GP
- Speech and Language Team
- Physio
- MARS
- Dentist
- Hackney Play Bus
- Hackney Libraries
- Children and Family HUB

Further support



For questions or further clarification, please contact Claudia Dessi
Email: c.dessi@nhs.net.



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Supporting 27 month health review

The Role of the
Childminder
(education)

Early Years Responsibilities

All early years providers in England (nurseries, childminders, pre-schools) must complete the statutory 2-year progress check from age two.

Many Hackney early years settings conduct the Integrated Review at 27 months. This combines the Early Years Foundation Stage (EYFS) progress check with the 27th month health development review.

This holistic, collaborative process (involving parents, early years practitioners, and health visitors) identifies needs early, ensuring support before school.

Hackney requires all childminders to share the completed EYFS progress check (at 2 years) with parents for inclusion in the child's health developmental book (Red Book). Parents then share this at the 27 month health review.

Childminders ~ EYFS Progress Check at 2 years old: My Portrait Two

N.B. TO BE COMPLETED FOR ALL CHILDREN IDEALLY AT 27 MONTHS AND NO LATER THAN 35 MONTHS
Part 1-To be completed by child's key person with contributions from parent/carer

All about me and my family!
Position in family, who they live with
Amount of time child has been at setting
Was attendance affected by COVID-19?
Attends fulltime/part time (no. days)?
Any recent significant events/changes in child's life?
Previous and current input from other services/professionals including long term health conditions, premature?
Has child already had their 27th month health review out of the setting? Any concerns?
Include parent voice

My Portrait at Two


My Personal Social and Emotional Development
Building Relationships
Relationship with significant people
Interest in other children's play
Awareness of feelings of others
Self-Regulation
Understanding and cooperation (regulation) with set boundaries
Understanding of self: e.g. likes/ dislikes/ capabilities
Managing Self
Ability to express/ communicate needs and seek comfort from trusted adults
Ability to separate from main carer with support
Ability to select and complete play activities
Include parent voice

How I like to play and learn (including my likes and dislikes)
Interests, choices, favourite activities
Sense of curiosity/
people/ places/ objects
Preference for large/ small social groups?
Preference for indoor/ outdoor activities?
Willingness to try new things and persist at tasks
Include parent voice

Insert recent Photo

How I Communicate
Provide typical examples of speech to demonstrate vocabulary and how many words are used in a sentence.
If not yet saying words give examples of gesture e.g. pointing, dragging adult

My Physical Development
Preference for active or sedentary activities. Engages in 3 hours of physical activity throughout each day?
Gross motor skills- running, jumping, climbing, balance and coordination
Fine motor skills- mark making/ painting/ use of tools, dressing/ undressing skills
Developing independence in regular washing hands (including after toileting/ before feed)
Awareness of bladder/ bowel urges
Ability to settle to sleep at night/ self sooths
Willingness to try new foods, diet (variety), Healthy start vitamins?

Child's Name: _____
DOB: _____
Current age in months: _____
Name of EY setting: _____
Name of Key person: _____
Name of parent/carer contributor: _____
Part 1 completion date: _____
Date provided to parent: _____

My Communication and Language
Main language spoken by key carers
Preferred language spoken by child (home)
Interest and attention to sounds in the environment, songs, rhymes and stories
Does the child sing along to simple songs/ rhymes?
Understanding of instructions
Understanding of what/ where questions
Asking simple questions?
Is the child's speech understood by key carers?
Ability to turn take when talking e.g. listen and respond to another?
Approx. number of words spoken are they putting 2 words together?
Include parent voice

Agreed actions to be taken by the setting and parent/carer (this section needs to be fully completed)
Based on assessment information, your discussion with the parent/carer (and link health professional where applicable), agree on one key action for home (parent/carer) and one or more action your setting will take, to assist the child to meet the desired learning and healthy development outcomes. Clearly state these actions, ensuring that they are: Specific, measurable, achievable, realistic, Time bound. (SMART)

The information you have provided in this document will be attached to your child's Personal Child Health Record (Red Book). This information will also be shared with the Health Visitor and may be shared with other professionals if considered necessary for the purpose of providing health, care and education services for your child. This information will also be used for statistical purposes and will be anonymised if it is used outside of your child's education or healthcare setting. By signing this form it is deemed that you understand and consent to the ways in which this information will be used.

Part 2-Summary Information

Was the My Portrait at Two integrated with the 27 Month Health Review? Yes No

2a-Complete only for 27 Month Integrated Reviews (virtual and face to face)

Date of 27 Month Integrated Review meeting	Name of Link Health Professional involved in the 27 Month Integrated Review	Name of Early Years Practitioner attending the Integrated review meeting
Did the relevant professional attend the meeting face to face or virtually? (circle which applies)	Face to face Virtual	Face to face Virtual

2b-Assessment Outcome-Indicate which outcome applies, based on your discussion with parent/other professionals, the My Portrait at Two assessment (and "ASQ-3 outcomes)

Reaching key milestones	Beginning to meet key milestones	Not yet meeting key milestones
No referral/signposting required	Provide tailored support, monitor and signpost	Support plan and referral

2c-Record of immunisations due at/around 12 months-35 Months

Name of Vaccine	Due by	Date given (request to view Red Book)	Note if further information was provided and any further support/signposting needed?
Hib/MenC (dose1)	12 mths		
MMR (dose1)	12 mths		
PCV (dose2)	12 mths		
Flu (seasonal)	2-3 Years		

2d-Referral information-tick appropriate service where applicable

Area SENCO (Hackney Education)	Speech and Language Therapy	First Steps / Psychology
Special Advisory Clinic (via Health Visitor)	Multi agency team (MAT)	Dietetics service
HENRY (Healthy Eating and nutrition for the really young)	GP	Other (specify)

N.B. Referrals should be made to MAT on a CAF if there are two or more agencies involved or a child needs support from two professionals e.g. a speech and language therapist and Health Visitor

2e-Agreed actions to be taken by professionals

Action to be taken N.B. State clearly what action will be taken.	Who will take the action? E.g. who will make the referral?	When will it be carried out by? (Date)	Who will monitor progress of the action?	When will progress be reviewed? (Date)

2f-My Portrait at Two (part 1 and part 2) has been moderated by

Name	Date	Signature

My portrait at 2 years

To access the Integrated Review Toolkit, go to the Hackney Council website for education services by typing **Healthy, Happy Ready to Learn** into your browser, or use this direct link:

<https://www.hackneyservicesforschools.co.uk/extranet/happy-healthy-and-ready-learn>

Once there:

1. Click on the first tab: **Healthy Early years programmes.**



2. Click on **Integrated 27 month reviews.**



You will then find the **Integrated Review Toolkit**, which contains all the up-to-date resources for early years providers with relevant information on the integrated reviews. A downloadable copy of 'My Portrait' is available in documents 9a and 9b.

The Importance of the Childminder's Role

The professional childminding role are a vital resource.

- Their close, daily relationships offer unique insights into a child's development, bridging the gap between home and health visitors for a holistic view. This enables the earlier identification of needs, better parent partnership, improved outcomes, and increased school readiness.
- Their ongoing, observational knowledge of a child's learning is essential and complements the health visitor's health perspective. Combining these insights allows early years professionals to identify early concerns, like speech delays, connect families with support, and ensure a complete understanding of the child's needs.

This integrated approach ultimately leads to better outcomes, particularly for vulnerable children.



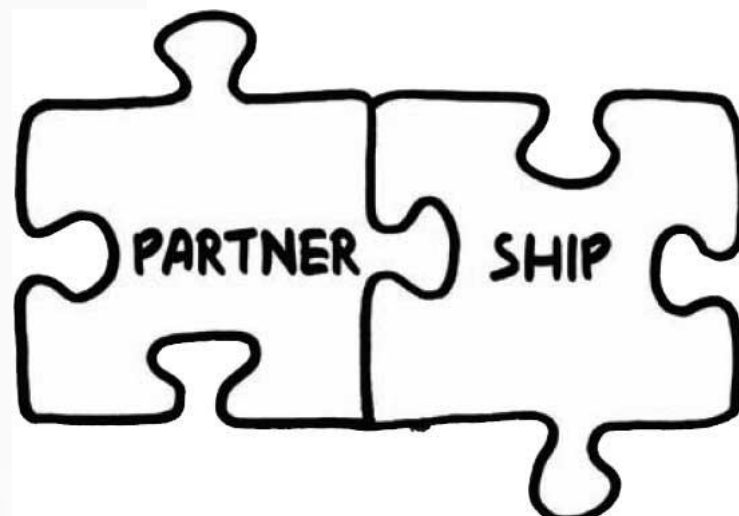
Working for every child

The Childminders Professional Role

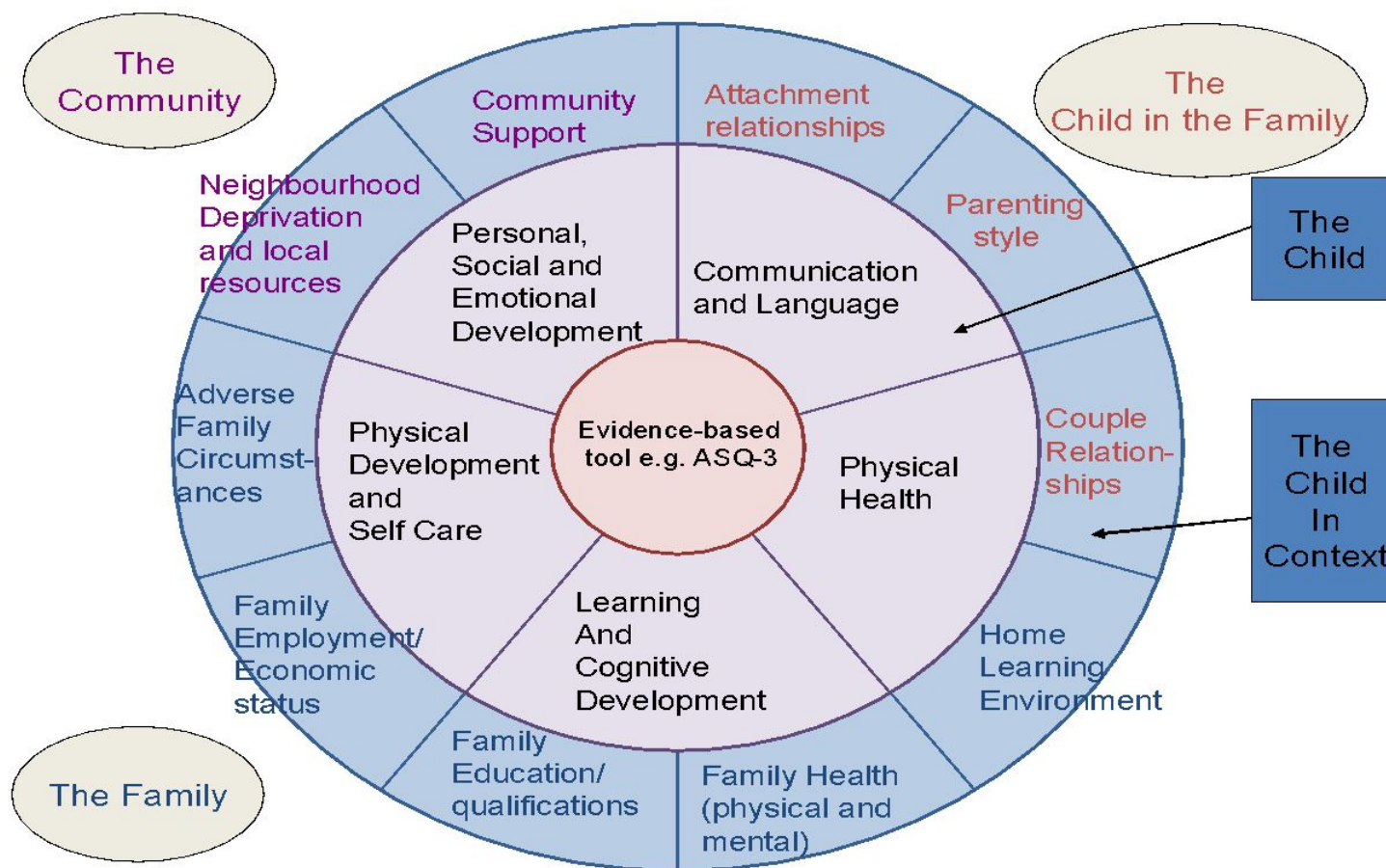
- Be knowledgeable about the 27 month health review and share this with parents/carers in due course.
- Support to parents/carers how to plan for the health review, i.e. how to complete ASQ-3 form.
- Complete the EYFS statutory progress check promptly so it can be shared at the 27 month health review.
- Parent(s) and practitioners work together to discuss the child's learning, behaviour and development at home and at the childminder provision.
- Supportive role by seeking feedback from the parents following the health review and following up with and targeted support for the child.
- Make links with health visiting team (HV) to provide additional support.

Link to - [Our Journey Birth to Five - 27 month review](#)

Achieving together!



An Integrated Approach



Source: Implementing Integrated Reviews in health and early years, at age 2 (Slide Pack), slide 15, Department for Education and Department of Health, 2014)

The Professional Approach

- Quality reviews rely on effective partnerships with parents and the health visiting team. By focusing on gaining relevant, expert information from early years professionals, reviews ensure children receive the right support to reach their full potential, enabling parents and professionals to collaborate effectively.
- Parents play a fundamental role in their child's health and development. Working closely with parents supports positive parenting practices, including consistent affection, appropriate boundaries, encouraging exploratory play, and early reading—all crucial aspects of the review.
- Partnership working with local childminders is essential for the successful implementation of the 27-month health review. This collaboration allows for early identification, intervention, and the prompt provision of additional support where required for young children.

Top tips for effective parent partnership working

- ★ Trust
- ★ Positive communicative approach
- ★ Professional
- ★ Friendly
- ★ Support and Guidance

Features of High Quality Approach

- ★ Good communication and transparency between childminder, health practitioner and family.
- ★ Appropriate record keeping and timely data reporting.
- ★ Having a non-judgemental attitude.
- ★ Recognising that every child is unique.
- ★ Being culturally sensitive and appropriate.
- ★ Offering evidence based health promotions and NOT personal opinions

Support each other!



Online help and support



<https://www.birthto5matters.org.uk/wp-content/uploads/2021/04/Birthto5Matters-download.pdf>

Working for every child Contact - sherine.addai@hackney.gov.uk

Resources to support you

- [Guidance for early years settings in 2yr progress check](#)
- [Personal, social and emotional development in the early years: a handbook for practitioners](#)
- [Anna Freud - Attachment Booklet - Final](#)
(download -what is attachment for full guidance)
- [Helping your toddler grow!](#)
(download poster about helping your toddler grow)v

Feedback

We really value your feedback

Please scan the QR code



Thank you for your time
Have a wonderful day

The complete presentation slides are available on the Healthy, Happy Ready to Learn website. To access go to 'healthy early years programmes,' then 'integrated review,' and finally 'integrated review toolkit - doc 2.'