The Barnsley Practitioners Guide to the Integrated Review



Guidance for health professionals and early years practitioners working with children aged 2 years and their families.



September 2021

Introduction

The aim of the Integrated Review is to bring together the 2 year progress check with the Healthy Child Programme (HCP) 2 – 2 and a half development review into an integrated process. The Integrated Review will create and share a broad picture of the child's development.

The Integrated Review is an opportunity for professionals to meet following the completion of the 2 year progress check and the Healthy Child Programme (HCP) 2 – 2 and a half development review in order to look closely at how the child is developing and what support might be needed to help them reach their full potential. This is most effective when all professionals and parents work together.

Age two to two-and-a-half is an important 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. While the care given during the first months and years of a baby's life is critical for equipping them for the future, age two is another important stage where planned contact with all children and their parents can help to make a real difference to a child's future outcomes.

Integrating the completed health and education reviews at age two will help to identify problems and offer effective early intervention for those children who need more support. Best practice is where information from assessments held jointly by health and education are used to identify children's needs at an early age and to trigger the provision of individual support for children.

The **Integrated Review** is not only about integrating the content of the reviews, but it is also about drawing together the different skills and experiences of the health and education practitioners working with the child. This will support information sharing and integrated working across health and education to support a child's healthy development.

Contents of this document:

Pages 3 – 4	The purpose of an integrated review and how to arrange a meeting
Pages 5 – 6	Preparation for an integrated review meeting
Page 7	The integrated review Process
Page 8	Recording the integrated review – the integrated review action plan
Pages 9	Following an Integrated review meeting – reviewing and monitoring
Pages 10 – 14	Additional tools and sources of information for both practitioners and parents
Pages 15-19	Appendix (blank copies of BMBC Integrated Review action plan and 2 year progress check)

This guidance document is for both health professionals and early years practitioners It is intended to:

- outline Barnsley's approach to the Integrated Review
- detail the process for completion
- provide guidance for practitioners carrying out Integrated Reviews with young children from age two to two and a half

Barnsley acknowledges the influence of the outcomes of the National Children's Bureau (NCB) Implementation Pilot. Case study examples drawn from those involved in piloting different approaches to the **Integrated Review** (**IR**) are referred to throughout this documentation. Materials taken from the NCB publication 'The Integrated Review: Bringing together health and early education reviews at age two to two-and-a-half' are also used extensively throughout this document.

The documents in this guidance are recommended for use when undertaking the **2 year progress check** within an Early Years setting and when contributing to an **Integrated Review** meeting. In order to ensure consistency and understanding of the reports by parents and professionals, all Barnsley Family Centres have adopted the documents contained in this guidance. All other Early Years settings are advised to consider the contents of this guidance and adopt the same or very similar in terms of content and reporting of the child's level of development, please see appendix A and B.

<u>All</u> completed **2 year progress check** should be emailed securely to <u>2yearcheck@barnsley.gov.uk</u> as soon as they are completed. Alternatively, if you are unable to do this electronically then copies can be taken to the main Family Centre in your area, again as soon as they are completed. These will be shared with the 0-19 Public Health Nursing Service Team for inclusion as an attachment onto the child's electronic health record (see flowchart).

It is really important to compete the 'requesting contact from a health colleague' section on the BMBC template in order that health colleagues can follow up any actions required Therefore, please make sure that this part of the form is completed for each child assessed.



Request by setting for contact from health professional (setting to highlight either yes or no)
Yes/No

(This is not necessarily a request for an Integrated Review)

Here is an example if contact from the 0-19 Public Health Nursing Service Team is requested, this is for if you wish to discuss the child and possibly arrange an integrated review.



Request by setting for contact from health professional (setting to highlight either yes or no)

Yes/No

(This is not necessarily a request for an Integrated Review)

If you are already in contact with a 0-19 Public Health Nursing Service colleague regarding a particular child then mark 'No' <u>but please do type on that health are already involved and include the name and role of any other professionals working with the child in the relevant section at the top of the form</u>

A practitioner from the 0-19 Public Health Nursing Service will endeavour to respond to your request within 10 working days of receipt of the 2 year progress check. Please contact the Single Point of Access (SPA) contact number on 01226 774411 if you need to follow up.

The Health Visitor (HV) or Child Development Practitioner (CDP) will read and consider the information contained in the **2 year progress check** received from the early years setting. Any discrepancies between the two year progress check and the health review will be acted upon, which may involve the HV or CDP making contact with the setting. Where concerns are identified by either the 0-19 Public Health Nursing Service Team or the early years setting an **Integrated Review** meeting might be appropriate. This means that a health professional and practitioner from the early years setting will meet together with the parent to discuss identified concerns and how the child might best be supported. **Integrated Review** meetings are also appropriate for children where there are other agencies beginning to become involved with the child, in this case other agencies might also be present at the **Integrated Review**.

What is the purpose of introducing an Integrated Review?

The purpose of the review is to:

- Identify the child's progress, strengths and needs at this age in order to promote positive outcomes in health and wellbeing, learning and behaviour
- Facilitate appropriate intervention and support for a child and their family, especially those for whom progress is less than expected
- Generate information which can be used to plan services and contribute to the reduction of inequalities in children's outcomes.

What are the key principles of the Integrated Review?

- The Integrated Review should engage parents, particularly those who are disadvantaged
- The Integrated Review should engage the child, where they are participating
- The Integrated Review should be a process of shared decision making.

How can practitioners support the key principles of the Integrated Review?

1. The Integrated Review should engage parents, particularly those who are disadvantaged

Health and early years practitioners can support this key principle by:

- connecting with parents' motivations to do the best for their children
- being sensitive to the fact that some parents might feel nervous or anxious about a review of their child
- presenting the review in a way that makes parents feel confident and valued
- skilfully exploring issues with a caring, non-intrusive attitude
- presenting the review as a positive opportunity for parents to discuss how their child is developing and what is going well, as well as any worries that they might have.
- 2. The Integrated Review should engage the child, where they are participating

Health and early years practitioners can support this key principle by:

- considering carefully whether it is appropriate and helpful for the child to be present
- creating a safe, open and emotionally warm environment with stimulating and appropriate toys if the child is to be present
- allowing enough time for the child to feel comfortable in the space
- taking an interested but non-intrusive approach to the child, tuning-in to and empathising with the child, and constantly reflecting, 'How does it feel for this child?'
- 3. The Integrated Review should be a process of shared decision making

Health and early years practitioners can support this key principle by:

- taking a skilful approach in their dialogue with parents, when listening, checking, summarising and negotiating
- ensuring that they respect each other's differing professional skills, experiences and perspectives
- being open and transparent about expectations and responsibilities

Preparation and overview of the Integrated Review Meeting

The content and detail of each review will vary according to how well the family is known to the health visiting team, early years setting and other services.

• The early years setting can support parents to prepare for a joint meeting by: observing and thinking about their child's development, making note of any questions or areas of concern. It is likely that they will already have completed the Ages & Stages Questionnaire ASQ-3™ and may also have seen a draft of the 2 year progress check completed by the setting.

- When thinking about their child's development parents may find it helpful to refer to materials such as 'What to Expect, When?' Parents should be asked to bring their Personal Child Health Record (PCHR) or 'Red Book' and any other relevant records to the review.
- Health visiting/child development practitioners can prepare for a joint meeting by: reviewing their knowledge from any prior relationship with the family and where a family is not well known to them, reviewing the case records and other information sources available.
- Early years practitioners can prepare for a joint meeting by: Reviewing or completing the 2 year progress check and considering any contextual information they have about the child and the family.

Success factors for parental engagement

- Multiple approaches: written/phone/text reminders.
- Ensuring all services who know the parent take the opportunity to inform/engage in ad hoc ways.
- Pitching as an 'entitlement' to support, rather than a check, to ensure vulnerable families do not feel singled out.

Considerations for special groups

- Vulnerable parents: face-to-face engagement from people that parents know and trust is important. Engagement by familiar early years staff works well for those with little prior engagement with health visitors.
- Parents with English as an Additional Language (EAL): extra time and resources may be needed for parents with EAL to engage and ensure full understanding.
- **Working parents**: sufficient advanced notice and choice of date, time and location may support engagement.
- **Fathers**: it is important to make clear that both parents can attend. If fathers do not attend in person, ensure written feedback is available for facilitating their potential involvement at home.

Location considerations

- Early years setting: Convenient for parents dropping off/collecting children; familiar to child; play facilities for observing child at play.
- **Health setting:** May be more clinical/less comfortable; easy to access to follow-up on health issues (e.g. immunisations) and may support reviews for children with disabilities.
- **In home:** familiar/comfortable for child and family; able to understand wider home context. However, the family may dislike intrusion.

Recommended essentials

- Sufficient space/privacy/quiet.
- Comfortable/welcoming/ ideally familiar to child and parent.
- Convenient and accessible to parents, especially working parents and those without transport or in rural areas.

The Integrated Review Process

Assessment will include the following elements:

- Discussion with parents
- Responses to the ASQ- 3™
- Review of the **2 year progress check** drawn from ongoing day-to-day observation of the child within their early years setting

	Health Visitors / Child Development Practitioners might bring:	Parents might bring and be willing to share:	Early Years Practitioners might bring:
Personal, Social and Emotional Development	Knowledge from any prior contact with the family.	In-depth knowledge of what their child can do at home.	Review of the child's learning and development against Development Matters. Observation of the child within the early years setting, including the
Communication and Language	Information about any health problems affecting speech, language and communication.	In-depth knowledge of what their child can do at home.	'Characteristics of Effective Learning' Review of the child's learning and development against Development Matters. Observation of the child within the early years setting, including the 'Characteristics of Effective Learning'
Learning and Cognitive Development	Information about any health problems affecting learning and cognitive development.	In-depth knowledge of what their child can do at home.	Review of the child's learning and development against Development Matters. Observation of the child within the early years setting, including the 'Characteristics of Effective Learning'
Physical Development and Self Care	Information about previous reviews of physical health. Review of growth against standardised growth charts and any issues around hearing, vision and dental care. Provision of public health information.	In-depth knowledge of their child. Information about practices within their home.	Review of the child's learning and development against Development Matters. Observation of the child within the early years setting, including the 'Characteristics of Effective Learning' Insight into family practices around health and wellbeing.

Recording the Integrated Review

An action plan format will be used to record the outcome and actions as a result of an Integrated Review (see Appendix A)

The most useful and valuable records of the **Integrated Review** will:

- Start with the child's strengths and the assets available in the child's home and community context
- Recognise parents' in-depth knowledge of their child by incorporating their observations and comments
- Be clear and easy to read
- Be easy to understand, avoiding unfamiliar jargon, acronyms or terminology (with interpretation and translation available where appropriate)
- Present a truthful yet sensitive reflection of what the child can do and their achievements to date
- Identify areas where the child is progressing at a slower pace than expected
- Provide clarity about what will be done to support the child's development in these areas,
 and by whom, and say when the impact of any additional support will be reviewed
- Reflect the child's individual personality and characteristics
- It is important that that parents, health and the early years setting all take a copy of the completed action plan. Parents can add this to the child's the PCHR ('Red Book').
- An agreed review date should be set and the actions that have been identified and recorded on the action plan should be carefully monitored leading up to this review.

Information sharing

At the **Integrated Review** meeting there should be a discussion with parents about who else might need to receive information about any aspect of the review or receive a copy of the review (for example, other relevant education, health or social care professionals.) Parents must be asked for consent to share the information. Where consent is given, the agreed lead for the review should make sure the information is passed on securely.

Where child protection and safeguarding issues arise from the review, practitioners and providers must take action in line with the policies and procedures of the Barnsley Safeguarding Children Board (BSCB). The statutory guidance 'Working Together to Safeguard Children' expects anyone who has concerns about a child's welfare to make a referral to local authority children's social care.

Following an Integrated Review Meeting

Follow up within the early years setting and at home

Early years practitioners should refer to non-statutory guidance such as Development Matters or Birth to 5 to consider targeted ways to strengthen and extend the child's current learning and development in the early years setting and at home. This should be done in partnership with parents and health visitors/child development practitioners, taking into account what might be most helpful and appropriate for the child and family and build upon what they already do. Parents can be provided with or signposted to the section 'How can you help me with my learning?' within 'What to expect, When?' which was developed as a parent friendly version of the 2012 Development Matters (see link in the additional tools and sources of support section). Although Development Matters has since been revised (September 2020) the 'What to expect, When?' guidance remains a useful source of parental support with practical ideas to engage in their child's learning and development.

If there are developing concerns about communication and language, then the early years setting should consider using WellComm or other SLC tools used for screening and intervention strategies.

An agreed review date should be set and the actions identified should be carefully monitored leading up to this review. At the point of the agreed review of these actions it may be appropriate to identify additional support and refer to other services. This might be a referral to a GP, paediatrician, a Speech and Language Therapist, initiation of an Early Help Assessment, referral to mental health or social care services.

The early years setting should consider whether it is appropriate to complete an early years needs analysis to further identify if there is a need. The EY SEN support Inclusion toolkit should be referred to in order to help clarify and identify need. <u>Link to SEN Support Toolkit and Graduated Response document</u>

Following a process of further monitoring and review and where there are still concerns regarding progress then the prompts to actions below may be helpful for the early years setting to consider with parents/carers

- Initiation of an EHA (if not already in place)
- Development of a SEN support plan with identified outcomes and provision that is regularly reviewed.
- Access to SEN advice in relation to Social Communication Interaction (SCI) needs at a SCI surgery.
- Access to SEN advice at an Early Years Area SENCO surgery.

Onward Referral

Where the need for more support is identified at the **Integrated Review** meeting, the reviewers should 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 early years setting, Family Centre 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 Assessment, referral to mental health or social care services

Early Help in Barnsley

Early Help is our approach to providing support to potentially vulnerable children, young people and families as soon as problems start to emerge, or when there is a strong likelihood that problems will emerge in the future.

Early Help may occur at any point in a child or young person's life, from childhood to adolescence, and includes both interventions early in life as well as interventions early in the development of a problem.

It is about the way we can all work together, share information, and put the child and their family at the centre providing effective support to help them solve problems and find solutions at an early stage, so we avoid needs becoming so great that specialist statutory interventions are required. Families are best supported by those who already work with those who already work with them organising additional support with local partners as needed.

Where a practitioner feels that a child or young person may need additional support (beyond that available from a single agency), a co-ordinated multi-disciplinary approach is usually best, based on an EHA (Early Help Assessment) with a Lead Practitioner to work closely with the child and the family to ensure they receive all the support they require. A range of targeted services are available through Family Centres to support these interventions.

Additional tools and sources of information for both practitioners and parents

Health

- The Healthy Child Programme: Pregnancy and the first five years of life: https://www.gov.uk/government/publications/healthy-child-programme-pregnancy-and-the-first-5-years-of-life
- The Healthy Child Programme Review at age two to two-and-a-half: https://www.gov.uk/government/publications/healthy-child-programme-review-of-children-aged-2
- Ages & Stages Questionnaires ™
 Further information on ASQ-3™ and the outcome measure of child development at age two to two-and-a-half:
 https://www.gov.uk/government/publications/measuring-child-development-at-age-2-to-25-

Early Education

years

- The Statutory Framework for the Early years Foundation Stage: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/974907/EYFS framework March 2021.pdf
- EYFS Progress Check at age two guidance: https://www.foundationyears.org.uk/wp-content/uploads/2012/03/A-Know-How-Guide.pdf

 Development Matters - Non-statutory curriculum guidance for the early years foundation stage

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/988004/Development_Matters.pdf

- Birth to 5 Matters Non-statutory curriculum guidance for the early years foundation stage https://www.birthto5matters.org.uk/
- 'What to expect, When?' is a document developed to support parents to find out more about how their child is learning and developing during their first five years, https://www.foundationyears.org.uk/wp-content/uploads/2019/01/What-to-Expect-When-2018.pdf

Safeguarding

• Statutory guidance on safeguarding 'Working Together to Safeguard Children': https://www.gov.uk/government/publications/working-together-to-safeguard-children--2

Barnsley Early Help toolkit

Early help toolkit for practitioners

https://www.barnsley.gov.uk/services/children-families-and-education/early-help-for-families/early-help-toolkit-for-practitioners/

SEND

- Special educational needs and disability code of practice: 0 to 25 years: https://www.gov.uk/government/publications/send-code-of-practice-0-to-25
- The Early Years Developmental Journal used by practitioners to record a child's progress and to identify targets for next steps.

https://councilfordisabledchildren.org.uk/help-resources/resources/early-years-developmental-journal

Early Support materials are available to support parents of children with SEND including a
parent-held Developmental Journal, enabling parents to observe, record and celebrate
progress and identify areas where extra help and support may be needed. This is also
available as an early support app.

https://councilfordisabledchildren.org.uk/sites/default/files/field/attachemnt/earlysupportgene ralinformationfinal.pdf

Early Intervention Programmes

• The Early Intervention Foundation Guidebook is an interactive tool to find evidence and guidance on how to deliver effective early intervention:

http://guidebook.eif.org.uk/

Guidance and support for various aspects of the review:

Working with parents and supporting the early home learning environment

 Hungry Little Minds is the Department for Education campaign that encourages parents and carers to adopt positive activities and behaviours to boost children's communication, language and literacy development.

https://hungrylittleminds.campaign.gov.uk/

• Look Say Sing Play by the NSPCC is a set of resources which encourage interaction between parents and their babies.

Look, Say, Sing, Play NSPCC resources for parents

• Tiny Happy People is produced by the BBC to help close the under-fives language and communication gap

https://www.bbc.co.uk/tiny-happy-people

 Booktrust BookStart Corner supports family centres across England in helping families to develop a love of stories, books and rhymes:

http://www.bookstart.org.uk/professionals/bookstart-corner

Communication and Language

• Universally Speaking - ages and stages of children's communication development for children aged birth to 5 (ican.org.uk)

https://ican.org.uk/media/3224/tct univspeak 0-5 update.pdf

 The charity ICAN has produced materials for parents and practitioners including a chart of milestones for speech and language and several DVDs for parents:

www.ican.org.uk

• Glossary sheets explaining various communication impairments aimed at professionals along with resources for parents are available from the charity Afasic:

www.afasic.org.uk

 The Communication Trust provides a wide range of resources for parents and professionals on language and communication: (From April 2021 the resources developed by The Communication Trust (TCT) are being hosted on the I CAN website)

https://ican.org.uk/i-cans-talking-point/professionals/tct-resources/

• The National Literacy Trust provides materials for parents and professionals on its 'Words for Life' website:

http://www.literacytrust.org.uk/

Health, Nutrition and Wellbeing

- Start4Life parent information service materials and pages for professionals are available at: https://www.nhs.uk/start4life
- HENRY is an intervention tool to protect children from the physical and emotional consequences of obesity:

https://www.henry.org.uk/evidence-base

- Physical activity guidelines: UK Chief Medical Officers' report
 https://www.gov.uk/government/publications/physical-activity-guidelines-uk-chief-medical-officers-report
- NHS 'Live Well' home for dental health in under fives: https://www.nhs.uk/Livewell/dentalhealth/Pages/Careofkidsteeth.aspx
- Healthy Start information https://www.healthystart.nhs.uk/
- Institute of Health Visiting https://ihv.org.uk/
- Social and Emotional Aspects of Development SEAD: https://www.foundationyears.org.uk/wp-content/uploads/2011/10/SEAD_Guidance_For_Practioners.pdf
- NICE guidelines about children's social and emotional development in the early years to support commissioners:

https://www.nice.org.uk/guidance/ph40

Potty and Toilet training

- NHS potty training home page: http://www.nhs.uk/conditions/pregnancy-and-baby/pages/potty-training-tips.aspx
- Education and Resources for Improving Childhood Continence (ERIC) supports children with continence problems:

http://www.eric.org.uk/

Safety and Accident Prevention

- The Royal Society for the Prevention of Accidents (ROSPA) information on child safety: https://www.rospa.com/home-safety/advice/accidents-to-children
- NICE guidance on preventing unintentional injuries in the home: https://www.nice.org.uk/guidance/ph30
- ROSPA website on the law and guidance around child car seats: http://www.childcarseats.org.uk/
- British Red Cross home page for baby and child first aid, including a free first aid app: http://www.redcross.org.uk/What-we-do/First-aid/Baby-and-Child-First-Aid

Parenting

- Website for the Incredible Years parenting programme: http://incredibleyears.com/
- Website for the Mellow Parenting programme: http://www.mellowparenting.org/

Couples and relationships

• The Family Partnership Model approach provides training for practitioners which may assist in sensitive exploration of couple relationships:

http://www.cpcs.org.uk/index.php?page=about-family-partnership-model

• Services and resources to support relationships, including relationship breakdown, divorce and separation can be found at:

OnePlusOne: http://www.oneplusone.org.uk

• Relate: www.relate.org.uk

• The Freedom Programme is a programme designed for women and men experiencing domestic violence:

http://www.freedomprogramme.co.uk/

 Refuge – for women and children against domestic violence https://www.nationaldahelpline.org.uk/

Appendix

Appendix A (pages 16 & 17): BMBC Integrated Review Action Plan

Appendix B (pages 18 & 19): BMBC 2 Year Progress Check (September 2021)



Integrated Review Action Plan

Child's name:	Date of birth:	Early Years Sett	ing Name:	
Who is involved in this action plan?		Date of Inte	egrated Review Me	eeting and action plan agreed:
State reason for an Integrated Review Meeting	:	Location o	f Integrated Revie	w Meeting:
Actions to be taken by professionals, if applicable (including signposting and referrals to other agencies to support the child and family):		g Who will take the action forwards?	When will it be done?	When will the outcome of the action be reviewed?

<u>Contributors</u> :					
Parent/Carer Name:	Health Visi	tor Name:			
Devent/Cover Signature.	Heelth We	tor Clamatura			
Parent/Carer Signature:	nealth visi	tor Signature	•		
Key person Name:	Other Profe	essionals Sig	natures and Name	e of Service:	
		J			
Key Person Signature:					



Purpose: It is a statutory requirement that when a child is aged between two and three that practitioners must review their progress and provide parents and/or carers with a short-written summary of their child's development in the prime areas in the EYFS.

Full name: Date of birth: Date of assessment:

Age in months at assessment: House no. and postcode: Home languages:

Setting name and telephone number: Other settings attended:

Date of entry to setting: Two Year Entitlement: Yes/No

Attendance (patterns of attendance, no. of contracted hours)

Name and role of any other professionals working with the child:

The Child as a Learner	What I can do now:		
Give an overview of the child as a learner and their interests – refer to the 3 characteristics of effective learning: Playing and Exploring Active Learning Creating & Thinking Critically	What I might do next with support :		
Communication and	What I can do now:		
Language Development Significant Comments relating to:			
Speaking- range of words used, putting 2 or 3 words together in short sentences Asking simple questions Understanding simple instructions Understanding of simple words Listening and attention – showing an interest in	What I might do next with support :		
stories, rhymes, showing an interest in what other children are playing			
(include achievements in home language) Personal Social and	What I can do now:		
Emotional Development Significant Comments relating to: Expressing emotions Confidence Sense of independence Sense of self Having preferences and making simple choices/decisions Making relationships with adults Forming friendships Learning to use the toilet/potty training	What I might do next with support :		
Physical Development	What I can do now:		
Significant Comments relating to: Gross motor skills Fine motor skills Core strength and co-ordination	What I might do next with support :		

Child's voice (I like, I am interested in) Note what the child enjoys. Note their current fascinations and emerging interests:

Ideas for how you can supp	ort my learning and
development at home? At	home my family can help
me by:	

Parent/ Carer's voice

What have they noticed about their child's progress, interests or needs? Are there any concerns?

Useful sources of information for parents and carers:

https://hungrylittleminds.campaign.gov.uk/

https://www.bbc.co.uk/tiny-happy-people

Look, Say, Sing, Play NSPCC resources for parents

https://www.eric.org.uk/ (toileting advice)

Assessment Information - Highlight if you feel the child is at the expected level or requires more support

ion	Speaking	expected level of development for age	additional support required
Communication and Language	Listening & Attention	expected level of development for age	additional support required
	Understanding	expected level of development for age	additional support required
Social & evelopment	Emotions	expected level of development for age	additional support required
Personal, Social & Emotional Developm	Sense of Self	expected level of development for age	additional support required
	Relationships	expected level of development for age	additional support required
Physical development	Gross Motor Skills	expected level of development for age	additional support required
	Fine Motor Skills	expected level of development for age	additional support required

Is there additional support required for toilet training?

Yes/No

Request by setting for contact from a health professional (<u>setting to highlight either yes or no</u>) (This is not necessarily a request for an Integrated Review)

Yes/No

Setting leader's signature below indicates confirmation that the setting has shared this 2-year progress check information with parents/ carers.

Setting Leader's Signature & Date:

Key Person's Signature & Date:

Setting must share these statements with parents/carers and highlight either has agreed/not agreed and date this section

- Parent/carer have agreed/not agreed to the information from this report being shared with Public Health 0-19 Services.
- Parent/carer have agreed/not agreed to share this data with Family Centres so that they can plan future services and provisions that may benefit children of Barnsley in the future.

 Date:

For full details of your data privacy rights and how BMBC will look after and protect your privacy please go to: https://www.barnsley.gov.uk/services/information-and-privacy/your-privacy/