DESCRIPTION OF THE PRACTICE

1. Title of the practice

Early Detection and Intervention for Children

2. Organisation responsible for the practice

Regional Government of Navarra, Spain

3. Contact person(s)

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4. Summary of the practice

Earlier identification of children at risk and the provision of more integrated support will be enabled through the creation of local networks of professionals from education, health and social services. They will coordinate in the identification of children at risk and jointly create family plans.

The project will begin in 2019 and will focus on children who show risk factors and are part of the early child care service of Pamplona and Comarca.

Children in the Early Child Care Service:

The project will aim to provide optimal and coordinated responses to children who are being supported in the early child care service. Currently, these children and their families receive therapy sessions at an outpatient centre.

The project intends to create personalised family preservation plans that encompass the whole dimension of a family's needs. They will be created together with the health, social and education professionals. It seeks to overcome fragmented responses carried out by different professionals through a shared work frame.

Other actions to promote integrated support:

An intervention manual will outline social risk indicators for children to facilitate early detection. It will be shared with all professionals involved in the project (including those from education, health and social services) to promote shared understanding of when children are at risk.

Professionals involved in the project from education, health and social services will be connected through a local network to manage and report on the cases from an overall view.

Furthermore, the individual professionals involved in each case will form work teams to draft the family preservation plans.

Finally, all professionals involved in supporting families through the project will be trained in how to develop the competences of the family, including fundamental parenting skills and monitoring of child development.

5. National/regional/local context of the practice

The project will start in one area before being implemented throughout Navarra.

6. Staff involved

The professionals involved in this project come from the following services:

- The early child care services of the Government of Navarra (leaders of the project)

- Public health services, including:
    - Children's mental health centres
    - Adult mental health centres
    - Paediatric service
    - Neonatology service
    - Hospital staff

- Child protection services, including:
    - Basic social services
    - Child and adolescent care teams
    - Specialised family intervention programme
    - Section for the assessment of deprivation

- Education department including:
    - Nursery school professionals

All these professionals are employed by the Government of Navarra or local organisations.

7. Target group

Children at psycho-social risk aged between zero and three years old and their families.

More specifically, the project is aimed at all children treated in the early child care service of Pamplona.

8. Aims of the practice

General objectives:

Set in motion an effective strategy of early detection and intervention for children at risk in Navarra.

Specific objectives:

- Children at psycho-social risk which may affect their development have guaranteed access to the early child care service and nursery schools

- Improve the competences of parents, support the development of the children and promote inclusive community settings. For example, through:
    - development of attachment processes
    - promoting listening skills
    - availability and sensitivity of parents to children
    - ability to interpret and respond appropriately to the signals of children

- Increase the participation of children at risk to the nursery school during their early years

- Significantly increase the number of families participating in support programs

- Ensure that interventions happen as early as possible (including the prenatal and perinatal periods)

- Improve the impact of early interventions to prevent more severe situations from occurring

- Foster the co-responsibility of all systems, departments, and administrations involved in the care of vulnerable children

- Guarantee the protection and rights of all children in Navarra

- Train professionals in the detection and intervention of situations of risk and vulnerability for children (parental skills and positive parenting models)

- In 2018 the child and adolescent care team was set up, marking an opportunity for shared work

9. Issues for social services

Service Integration/ Cooperation across services	x	Service Planning	x	Contracting	
Technology		Skills development (of the workforce)	x	Quality of services	x
Others: _____					

ANALYSIS OF THE PRACTICE

10. Status

Pilot project (ongoing)	x	Project (ongoing)		Implemented practice (restricted areas)	
Pilot project (terminated)		Project (terminated)		Widely spread practice/rolled out	

11. Scope of the practice

Describe the setting of the practice, considering the following criteria:
- *Micro level practice:* practice that involves individuals at local level
- *Meso level practice:* practice that involves organisations or communities
- *Macro level practice:* practice that involves large population groups

Meso level:

The interventions for families involve the health, social and educational professionals from the local community.

12. Leadership and management of the practice

Description of the leadership of the practice, considering the following criteria:

- *Collaborative management*: shared between large partnerships, often of central, regional and local representation
- *Organisational management*: by one organisation
- *Professional management*: managed by a single person
- *Shared management*: shared with no defined leadership

The supervision of the project is conducted by the Department of Social Rights of the Government of Navarra.

13. Engaging stakeholders in the practice

Description of the engagement of stakeholders, considering the following criteria:

- *Individual practice*: individuals have sought practice change
- *Network approach*: one or more organisations develop a network
- *Collaborative approach*: large collaboration with relevant stakeholders

Network approach: the project involves the development of networks of professionals from social, health and education services.

14. Involvement of service users and their families

Description of the involvement of service users, considering the following criteria:

- *Team involvement: service users and carers were part of the practice team*
- *Consultative: a consultative body of users was set up for an on-going dialogue and feedback*
- *Involvement in care: person-centred approaches to care/support*

The project aims to support families where a risk has been identified.

This involves improving the competences of the family, and their sense of control over their situation. The families are also actively involved in the creation of the preservation plans, and can make their own decisions on what aspects to prioritise.

Having the parents actively involved in the development of their care plans is seen as vital for giving them ownership and motivation to implement the care plan.

15. Costs and resources needed for implementation

Description of how the practice is financed, considering the following criteria:

- *Within existing resources:* staff time and other resources are provided 'in-house'
- *Staffing costs:* costs for staff investment
- *Joint/Pooled budgets:* two or more agencies pool budgets to fund services
- *Funded project:* external investment

Two professionals work full-time on this project. These professionals will develop:

• The procedures and indicators for early detection and care
• The network and its coordination
• Identification of the relevant professionals for each family
• Prepare the continuous training and support for professionals
• The direction of the therapeutic intervention if it is necessary, application of strategies and effective programs with the child and with the family.

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16. Evaluation approaches

Description of the evaluation method of the practice, considering the following criteria:

- *Multi-method:* use of both a qualitative and a quantitative approach
- *Single method:* qualitative or quantitative approach
- *Audit:* looks at data sources such as existing medical records, and/or other routinely collected service data.
- *Informal:* refers to in-house service evaluation using locally designed tools and/or collecting opportunistic feedback
- *No evaluation*
- *An evaluation is planned*

The first evaluation of the project will be carried out in September 2019. The evaluation of the project will be carried out on the basis of indicators related to casework with the families, and the running of the network of professionals.

Evaluation indicators:
The following indicators will be recorded:
- Percentage of increase/decrease in the number of systematic referrals carried out by education professionals to the early intervention programmes for promoting of parental competences
- Recording of the number of children and families assisted according to this model, taking as a reference the average of children and families assisted in the last two years.
- Percentage of systematic referrals carried out by health professionals to the early intervention programmes, taking as a reference the average of the last two years.
- Percentages of increase/decrease of the number of professionals involved in the detection of children at risk, and participation in training on the use of instruments designed for this purpose.
- Degree of increase/decrease with respect to the number of detections of risk situations and early intervention

17. **Measurable** effects of the practice and what it has achieved for…

Service users	
Formal care givers	
Informal carers	
Organisations	
Other	

18. **Anticipated or 'aspirational'** effects of the practice and what it has achieved for…

This category can include outcomes which are not documented, quantified or properly evaluated. They can include such elements as improved knowledge, quality, workforce, etc.

Service users	Children: Promotion of their wellbeing and development

	Families: Improvement in parental skills (attachment with children, availability and responses to their children, development of different parenting models, and participation in the community) Creation of support networks Improvement in living conditions (economic, housing, etc.) and family wellbeing (mental health, parental relationship)
Formal care givers	
Informal carers	
Organisations	Foster the co-responsibility of all services involved in the care of vulnerable children, and improve the coordination between them (with specific training to support this).
Other	

19. How the practice has changed the way the service is provided (lessons learned)

20. Sustainability of the practice

Description of whether the practice is sustainable, considering the following criteria:

- *Potential for sustainability:* practice was newly started or is on-going/not yet mainstreamed. How could the practice be sustained (in terms of resources)?
- *Organic sustainability:* service users have been empowered to take the practice forward
- *Established:* the project has been operational for several years

The practice will be piloted in Pamplona and is then expected to be implemented across the region.

21. Transferability of the practice

Description of whether the practice has been transferred, considering the following criteria:

- *Transferred:* transfer to other regions, countries, service user groups, etc.
- *Potential for transferability:* there is interest from the outside; elements of the practice have been taken up and used elsewhere; material for transferability (for ex. training material) has been developed

The methodology of the project could be transferred to social services elsewhere looking to develop preventative work for young children.