

OVERVIEW: NICE guidance on social and emotional wellbeing - early years

Purpose

This paper provides an overview of the development of the guidance on effective approaches for promoting the social and emotional wellbeing of vulnerable children under 5 years.

The paper:

- States the objectives and key questions as detailed in the scope for the guidance
- Positions the guidance within the new policy context
- Sets out the conceptual framework (logic model) that guides the development of this guidance
- Provides an overview of the evidence to be considered by PHAC comprising a series of reviews addressing the key questions.

NICE received the initial referral for this topic as two pieces of intervention guidance on home based interventions and early education and childcare in early 2010. The guidance has subsequently been managed as a single integrated piece of guidance covering the three intervention areas.

In addition to working with the SchARR collaborating centre, NICE established a group of researchers that are leading experts in this field, to provide advice on the evidence and its interpretation with respect to the guidance (see appendix 1). NICE has also liaised with the DH PREview project (work supporting the Healthy Child Programme) and with the Review team (including the Social Research Unit, Dartington) supporting the Graham Allen MP independent review on early interventions.

With the change of government, NICE was asked to pause on the development of this guidance to take account of the new policy context. The joint DH/DfE statement *Supporting Families in the Foundation Years* (July 2011)¹ provided an important policy reference for the NICE guidance, and the Minister gave approval for the development of the guidance.

¹ DfE, DH. 2011. Supporting Families in the Foundation Years

1. Scope of the guidance

The guidance aims to define what approaches are effective in promoting the social and emotional wellbeing of vulnerable children under 5 years, with respect to home-based interventions and early education and childcare.

The guidance addresses the following key questions:

- What are the most effective and cost effective early interventions (home visiting, early education and childcare) for promoting the social and emotional wellbeing of vulnerable children under 5 years?
- How can those vulnerable children and families who could benefit from early interventions be identified? What factors increase the risks of children developing social and emotional difficulties and behavioural problems?
- What characteristics of an intervention are critical to achieving positive outcomes for vulnerable children under 5?

The guidance is based on the principle of *'progressive (or proportionate) universalism'* whereby: 'the scale and intensity of provision of universal services is proportionate to the level of disadvantage' (The Marmot review 2010).

This means ensuring that universal services (maternity, child health, social care, education, family welfare) reach and achieve equity of outcomes among vulnerable children, as well as providing enhanced and more intensive support where this is necessary to secure outcomes.

This guidance focuses on vulnerable children who are most at risk of experiencing social and emotional difficulties and behavioural problems that can result in poor health, educational and other outcomes in childhood and later life. The review of evidence therefore focuses primarily on targeted interventions that are directed towards vulnerable children.

However the boundaries between universal and targeted interventions are not clear cut, for example some targeted interventions are concerned with enabling equity of access to universal services for vulnerable children and enabling equity of outcomes.

2. Policy context

The policy context for early years is set by a series of recent policy statements and independent reviews². The scientific rationale for a focus on early intervention, based on the life course approach, is documented in detail.

A number of themes are consistent across documents:

- Stronger explicit focus on promoting the social and emotional wellbeing of children as a central feature of an integrated early years system.
- Appropriate indicators and mechanisms for early identification of those children and families who are at risk or already experiencing problems.
- The importance of provision of a full range of early intervention services that is well coordinated and integrated to respond to local needs.
- Development and delivery of evidence-based early interventions.

Within this broad policy framework, (summarised below) the NICE guidance focuses specifically on promoting social and emotional wellbeing of vulnerable children under 5 years through home based interventions, early education and childcare. This is within the local context of the *Healthy Child Programme* and related early years services.

Supporting Families in Foundation Years (2011)¹ is the most recent policy statement. It is a joint policy statement issued by DfE and DH. It 'describes the Government's vision for the system of services for mothers and fathers during pregnancy and for very young children, to the age of five'.

² DH 2010 Healthy lives, healthy people
Allen MP. G 2011 Early Intervention: the next steps. An independent report to Her Majesty's Government
Allen MP. G 2011. Early Intervention: smart investment, massive savings-the second independent review to Her Majesty's Government
Field MP. F 2010 The Foundation Years: preventing poor children becoming poor adults. The report of the Independent Review on Poverty and Life Chances. HM Government;
Tickell C 2010 . The Early Years: Foundations for Life, Health and Learning. An independent review on the Early Years Foundation Stage
Munro E 2011 The Munro review of child protection : final report-a child centred system
HM Government 2011. Opening doors, breaking barriers: a strategy for social mobility
HM Government 2011. A new approach to child poverty: tackling the causes of disadvantage and transforming families' lives

It responds to the various recent reviews specifically concerned with children and families:

- The Foundation Years: Preventing poor children becoming poor adults. (Field MP F 2010)
- Early intervention: the next steps (Allen MP G 2011)
- Early intervention: Smart investment, Massive Savings (Allen MP G 2011)
- The Munro Review of Child Protection: Final Report (Munro E 2011)
- The Early Years: Foundations for Life, Health and Learning (Tickell C 2010)

It defines the primary aim of the foundation years as:

promoting a child's physical, emotional, cognitive and social development so that all children have a fair chance to succeed at school and in later life.

The document sets out next steps and proposals designed to ensure a more coherent and stronger system of services during the foundation period. These reflect the themes highlighted above.

Key developments are:

Ensuring that the Healthy Child Programme is fully and consistently implemented to meet families' needs through increasing the health visitor workforce

Introducing a reformed and slimmer Early Years Foundation Stage from September 2012 . EYFS will focus on the three prime areas: personal, social and emotional development; communication and language; and physical development.

Extending free early education to the most disadvantaged two year olds addressing the social and economic differences between families

Revising the Code of Practice for early education (guidance on delivery of free entitlement) to increase flexibility and reduce bureaucracy

Increasing the take-up of parenting and relationship programmes (including by funding expert providers to provide relationship support) as well as family learning

Helping professionals to use all interactions with families as opportunities to identify any additional needs of both parents and other key family members and offer further help

Pre-schools and childminders to give parents a short written summary of their child's progress around the age of two, and to link with the Healthy Child Programme health and development review at two to two-and-a-half into a single integrated review; to help identify any additional physical, social, emotional or communication needs and ensure the appropriate support (including those with special education needs)

Doubling the number of families benefiting from the Family Nurse Partnership

Retaining a national network of Sure Start Children's Centres, with new core purpose for children's centres as:

to improve outcomes for young children and their families with a particular focus on the most disadvantaged, so that children are equipped for life and ready for school, no matter what their background or family circumstances

The designation of a 'named social worker' for each children's centre (alongside the existing named health visitor)

Maximising opportunities for integrating health and children's services through the role of Health and Wellbeing Boards with new joint health and wellbeing strategies providing a strategic framework for commissioning local services, including children's services, in the context of Outcomes Frameworks

The development of an outcome measure for the Healthy Child Programme at age two to two and half

Tracking improvements in school readiness through the EYFSP, the definition of the indicator is expected to be agreed in the autumn. We are also looking to develop a further outcome measure linked to the Healthy Child Programme review at age two to two-and-a-half.

Consideration by Ofsted of options for future inspection arrangements that fit with the new purpose of children's centres

Introduction of payment by results for children's centres from 2013/14 following trialling in 30 local authorities

(Appendix 2 sets out a summary of key points covered by the different reviews and policy statements)

3. Logic model for promoting social and emotional wellbeing among vulnerable children (under 5s)

The life course perspective shows the importance of early childhood experiences in influencing future health and life chances. As outlined above this perspective underpins policy thinking. Specifically the life course approach provides a clear rationale for promotion of social and emotion wellbeing in early years to increase the likelihood of positive outcomes.

All aspects of child development are influenced by the interaction of genetic predisposition, individual experience and environment. These act as sources of protection and resilience (such as loving parents, and strong social networks) or vulnerability and risks (such as poverty and family violence). The cumulative burden of multiple risk factors is associated with greater developmental vulnerability; while the cumulative buffer of multiple protective factors is associated with greater developmental resilience. Evidence indicates that it is the number of risk factors in a child's life that is a better predictor of outcomes than the specific nature of those factors (eg Werner 2000³).

Social and emotional wellbeing provides personal assets (such as self esteem and interpersonal skills) that help protect against risks relating to social disadvantage and family disruption. Such assets provide building blocks for healthy behaviours and help prevent behavioural problems and substance misuse. Emotional and social competencies and emerging cognitive abilities are highly inter- connected. Social and emotional competencies increase a child's ability to learn and contributes to educational attainment; (while cognitive development is also important to social and emotional wellbeing).

Evidence shows that poor social and emotional health predicts a range of negative outcomes in adolescence and adulthood. Childhood behavioural problems have been shown to be predictors for mental health problems, involvement in crime and violence, substance misuse and unsafe sex (for example Farrington et al 2006⁴)

³ Werner E 2000, Protective factors and resilience. In Handbook of Early Childhood Intervention eds Shonkoff JP & Meisels SJ New York. Cambridge University Press

⁴ Farrington et al 2006 Criminal Careers up to age 50 and life success up to age 48. Findings from the Cambridge Study of Delinquent Development. Home Office Research Study 299.

The child's relationship with their mother (or father or other primary care giver) has a major impact on social and emotional development. The mother's ability to provide a nurturing relationship is dependent on their own emotional, social and intellectual competencies and on their circumstances (family environment, social networks, employment status).

Interventions can be categorised according to their primary focus (Shonkoff & Philips 2000⁵). Interventions are designed to affect children directly (through the provision of structured experiences) and indirectly (through their impact on the care giving environment). Child-focused interventions involve specifically prescribed therapies or developmentally guided educational opportunities or both. Caregiver-focused interventions include varying combinations of information, instruction, emotional support and assistance in securing needed resources and related services.

Interventions vary in the extent to which social and emotional development is a core element.

All early interventions have the underpinning objective of influencing the balance between risks and protection to increase the likelihood of positive outcomes.

The determination of the most appropriate nature and level of intervention involves a family-based assessment of what child and family outcomes are desired and realistic. This will recognise the specific needs and resources of the child and family; and take account of the cultural context. Agreement of the 'individualised strategy' must be based on sensitivity to the values and beliefs about parenting practices and expectations and aspirations families have about their children.

The success of the intervention is determined by the soundness of the family based process and judgement on the most appropriate type and mix of interventions; its acceptability to the family and the quality of implementation (Shonkoff & Philips 2000).

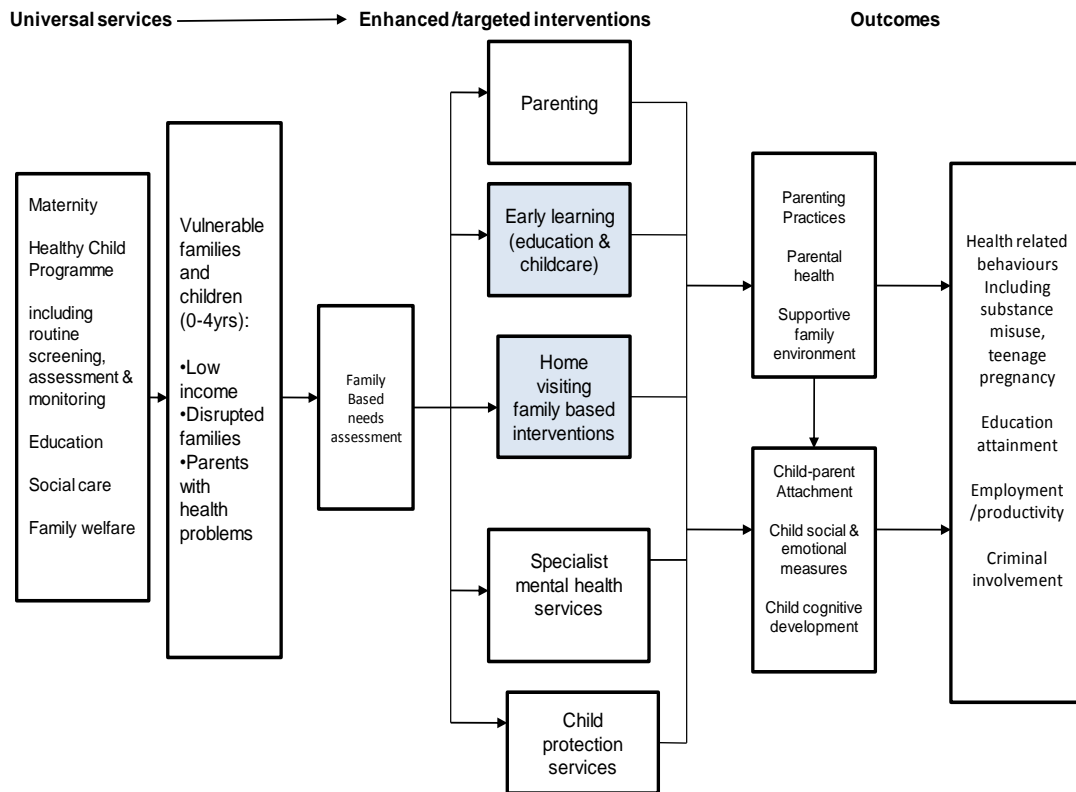
The diagram below provides a simple model that 'operationalises' these theories that underpin early interventions within the policy and delivery settings.

⁵ National Research Council and Institute of Medicine 2000 From Neurons to Neighbourhoods ed Shonkoff JP, Phillips DA. Washington DC. National Academy Press

It shows the conceptual links between the needs of vulnerable children and families, intervention options and improved outcomes.

Universal assessment and monitoring identifies those children and families at risk of poor social, emotional and cognitive development (or those already showing early signs of delay and difficulties). Then, based on assessment of needs and capacities of the child and family, a range of 'enhanced /targeted' interventions are offered and provided to address the causes of developmental problems and delay (such as lack of child-parent attachment). They also aim to help develop the conditions (protective factors) that can build resilience and improve outcomes for the child and family.

Logic model : Interventions for promoting the social and emotional wellbeing of vulnerable children under 5



4. NICE review of the evidence

The series of reviews are designed to address the key questions set out in section 2. The programme of review work is summarised below.

The nature and quality of the evidence

The literature in this area is complex and presents distinct methodological challenges and has presented difficulties in reviewing the evidence.

- There is heterogeneity of interventions concerned with early intervention. Papers often do not provide great detail on the interventions and their various components. Interventions often have different specific objectives aimed at particular population groups. These are not always well defined and components can overlap (eg early education /childcare programmes may have a home visiting element). Promotion of social and emotional wellbeing is often only one aim of an intervention/s.
- The literature is multidisciplinary and different terminologies are used and locating all relevant studies is challenging.
- A range of indicators and scales are used to measure outcomes relating to social and emotional wellbeing (and other aspects of child development). Positive impact on some indicators and not others are difficult to interpret. Also often only significant positive outcomes are fully reported leading to potential bias.
- Often papers do not report on issues of fidelity, while such implementation issues influence impact.

Systematic review of review level evidence on effectiveness of interventions

20 existing reviews concerned with early interventions were identified (covering over 400 primary studies). The remit of these reviews was broader than the specific focus on promoting social and emotional wellbeing of vulnerable children through home visiting, childcare and early education. Therefore the process of review involved identifying only those primary studies (included in the reviews) that met these specific inclusion criteria (table 4.2 in review).

The 20 reviews comprised seven on home based interventions with post-partum women, seven on home based interventions with children and families extending beyond the post partum period. Four reviews were concerned with educational and day care for children mainly three years and older. In addition two reviews examined long term outcomes of early interventions into adolescence.

The majority of the studies were US based, other areas covered including Canada, Europe, Australia and New Zealand. The studies covered a diversity of complex interventions ie many had a combination of home visiting and centre based elements, and much detail was lacking. From this review level evidence it was therefore difficult to discern what characteristics of interventions determined positive outcomes relating to social and emotional wellbeing. Nevertheless certain patterns relating to effectiveness of interventions are highlighted.

The findings of the review are presented in Evidence Statements 1-4.

Systematic review of UK evidence of interventions designed to promote the social and emotional wellbeing of vulnerable children under 5 yrs

This review focused on recent UK evidence of interventions designed to promote the social and emotional wellbeing of vulnerable children under. The aim was to ensure the evaluation findings of major recent evaluation studies were considered in the development of guidance.

This review covered evidence on

- Effectiveness of early years interventions (7 studies, including evaluation findings of the national evaluation of Sure Start), and
- Factors influencing the effectiveness of implementation and delivery of early interventions (19 studies, primarily qualitative and process evaluations).

Although the studies on effectiveness of UK early interventions were primarily of good quality, overall this is a comparatively small evidence base and needs to be considered alongside international work. The studies varied in scale, and there were certain limitations in study quality. (Evidence statements on effectiveness 1-3)

5 evidence statements on evaluation of implementation and delivery of early interventions identify factors relating to initial and ongoing engagement with vulnerable families, the nature of the relationship between staff and parents in home visiting, professional roles and practices and organisational and management issues.

Review of recent primary studies of evaluations concerned with promoting the social and emotional wellbeing of children under 5 years UK and elsewhere (Anita Schrader-McMillian, Jacqueline Barnes and Jane Barlow). Expert paper/commentary on ScHARR UK studies review,

This paper extends the ScHARR review of UK studies, (providing more detail as well as including additional studies). It summarises the key evidence from primary evaluations from the UK, US and elsewhere. The paper particularly sets out those intervention characteristics that appear to be critical to achieving positive outcomes.

The studies and evidence cover the following categories of intervention:

Home visiting programmes delivered by nurses or other health professionals:

- Family Nurse Partnership (long term)
- Health visitors
- Home visiting for parents of very preterm infants (long term)

Home visiting delivered video interaction guidance for mothers at very high risk:

- Home visiting with VIG (short term)

Home visiting schemes delivered primarily by paraprofessional lay workers

- Home Start, Starting Well (Scotland), Peer Mentoring.

Expert paper: Programmes to promote the social and emotional wellbeing of vulnerable children under 5: messages from application of the Evidence2Success Standards of Evidence

Social Research Unit –Dartington – as part of the Allen review of early interventions

This paper summarises the evidence on effective interventions for promoting the social and emotional wellbeing of vulnerable children under 5 that informed the Graham Allen Review: Early Intervention: the next steps.

This evidence was provided by the US-based Evidence2Success project. The expert paper sets out the method for review of the effectiveness of early interventions, and

the findings of the review of those interventions identified as concerned with promoting the social and emotional wellbeing children under 5 (including school readiness).

25 interventions were identified to be reviewed and of these 11 have been approved. 13 have not been approved. (The review of one programme is pending). The analysis updates the analysis considered by the Allen Review. (The approved programmes therefore extends the interventions that were identified in Table B:1 p122 of the Allen Review).

It is important to recognise are important differences in the methods used in the US project, and NICE review methods. In particular the NICE reviews have included evaluation studies using a broader range of study designs. Also the inclusion criteria were different: NICE including only interventions addressing vulnerable children, the Allen review was concerned with both universal and 'children in need'.

Review of factors relating to risks of children experiencing social and emotional difficulties

This review summarises the evidence available on the factors relating to the risks of children experiencing social and emotional difficulties.

The effectiveness of a progressive approach to early interventions assumes that it is possible to assess need and intervene accordingly. Evidence on all relevant risk factors is vital for assessing needs both at a population and individual level.

The review considers the ChiMat work on the PREview project (and related evidence) that has been commissioned by DH to support the Healthy Child Programme. This project aimed to consider maternal and child characteristics around birth and at nine months and at age 3 associated with poor outcomes at age 5, to develop predictive modelling tools for child health and to develop resources for practitioners.

This review highlights the potential for use of the model based on this evidence in predicting the likely pattern of social and emotional difficulties at a population level.

However the model does not provide the basis for predicting individual outcomes and practitioner knowledge remains critical to needs assessment.

The guidance will need to set out a definition of vulnerable children under 5. The following definition, adapted from *Supporting Families in the Foundation Years* (2011) is suggested.

The term 'vulnerable' is used to describe children who are at risk of, or who are already experiencing, social and emotional problems. Vulnerability is often linked to disadvantage and poverty. Vulnerable children include those:

- living with teenage parents
- living with a lone parent
- from some minority ethnic groups
- without adequate housing
- who are disabled
- with special educational needs
- who are looked-after
- who are exposed to parental drug and alcohol problems, domestic violence or parental mental health problems.

Economic analysis of costs and benefits of early interventions designed to promote social and emotional development of vulnerable children under 5yrs

Economic briefing paper (Madeleine Stevens, LSE)

A short briefing paper has been prepared to provide an overview of the relevant literature on evaluation of the economic impact of early childhood interventions-concerned with promoting social and emotional wellbeing of vulnerable children. This is intended to complement the ScHARR economic reports. The briefing highlights issues relating to the quality of economic evidence. It also considers the economic approaches that are adopted in this area, and discusses findings of selected analyses, and the transferability of US studies to the UK context.

ScHARR economic reports

The economic analysis comprised two stages.

Part 1 involved an econometric analysis to examine the relationship between variables relating to early child development and outcomes in adulthood to provide the basis for predicting the effects of early interventions outcomes at age 5 and long term outcomes at age 38. Two economic models were developed using two UK longitudinal datasets- Millennium Cohort Study (MCS) and the 1970 British Cohort Study (BCS). Childhood variables covered cognitive skills and aspects of behavioural development (eg emotional symptoms, conduct problems and prosocial behaviours), parental behaviours and social economic characteristics. The BCS provided the data into adulthood (outcomes up to 38 yrs). The long term outcomes covered five variables: educational attainment, receipt of benefits, health problems, teenage pregnancy and economic activity.

Part 2 involved:

- a review of studies of the cost effectiveness of early interventions, and
- modelling the costs and benefits of the effects of early interventions based on a public sector perspective.

The early intervention long term effects, costs and financial benefits were modelled for a number of different scenarios –according to selected types of interventions using evidence from UK and US trials. Incremental public sector benefits per child are estimated for each scenario (covering educational attainment, welfare benefits, economic activity, criminal involvement and teenage pregnancy). QALYs are also calculated for key scenarios. The results are illustrative rather than conclusive given the various assumptions and uncertainties underpinning the modelling.

Dr Amanda Killoran December 2011

Appendix 1 Expert research group

Madeleine Stevens, Research Fellow, LSE

Jane Barlow, Professor, Warwick University

Jacqueline Barnes, Professor, Birkbeck, University of London

Eva Lloyd, Reader, University of East London

Edward Melhuish, Professor, Birkbeck, University of London

Sarah Stewart Brown Professor, Warwick University

Katherine Weare, Professor, Southampton University

Craig Baxter, Health Intelligence Specialist, Child and Maternal Health Observatory

Margaret Griffiths, Lead, PREview Project, DH

Appendix 2: Commentary on reviews and policy documents concerned with children and families

The public health white paper states that ‘Giving every child in every community the best start in life’ is a key priority (*Healthy Lives, Healthy People* 2010). Early intervention and prevention policies will be based on the approach of ‘proportionate universalism’-the development of strong public health and early education with an increased focus on disadvantaged families.

Health and wellbeing boards and Joint Strategic Needs Assessment will be the mechanisms for enabling the commissioning and integration of the different components of the policy for early intervention and prevention. Key components are:

- Increased numbers of health visitors, working with children’s centres and GPs, leading the delivery of the Healthy Child programme at neighbourhood level, alongside the Family Nurse Partnership (FNP) programme.
- Strengthened preventive aspects of maternity services
- Continuation of offer to all families 15 hours a week of free nursery care for preschool children
- Parenting programmes
- Family support based on children’s centres

The Independent Review on *Poverty and Life Chances* prepared by Frank Field (HM Government 2010) calls for increased emphasis on the ‘Foundations Years’ as the basis for ‘preventing poor children becoming poor adults’. It reports evidence showing that *‘the successes individuals achieve in adult life can be predicted by the level of cognitive and non-cognitive skills they already possess on their start at school* (eg Feinstein 2003). Analysis identifies the key drivers of life chances throughout childhood. While strict causality is difficult to determine, the review states that there is some consensus that factors in the home environment, positive parenting, the home learning environment and parents’ level of education are the most important drivers of life chances. Recommendations include a set of indicators of Life Chances that would measure the level of cognitive, physical and emotional development at 3 and 5 years. The indicators would be used to assess the effectiveness of policies, particularly for the most disadvantaged.

The Allen review (*Early Intervention: The Next Steps 2011*) is concerned with increasing the priority of early intervention and establishing a systematic approach to developing and implementing evidence based early intervention programmes. The focus is social and emotional in early years (particularly 0-3 years); but also sustaining social and emotional development through programmes covering ages up to 18 years.

The review sets out the scientific and economic rationale for investment in early intervention. Establishing among children aged 0-3 the 'social and emotional bedrock' is critical to future positive outcomes in terms of mental and physical health, educational attainment and employment opportunities; and helping to prevent criminal behaviour, drug and alcohol misuse and teenage pregnancy. Evidence is also presented on good return on investments.

The review defines a 'new approach' for promoting evidence based early intervention programmes. This includes a review of the existing evidence of the effectiveness and cost effectiveness of early interventions programmes. This approach comprises

- Three age periods:
 - 0-5 readiness for primary school (the foundation stage)
 - 5-11 readiness for secondary school
 - 11-18 readiness for life
- Universal programmes serving all children; and targeted programmes
- An evaluation methodology for assessment the effectiveness of programmes, and
- A list of individual early intervention programmes judged to be effective according to the evaluation criteria.

With respect to interventions targeting vulnerable children under 5s the review points out that there are comparatively fewer evaluation studies.

The review also makes recommendations for supporting local innovation of early intervention programmes. 15 Early Intervention Places are designated to spearhead developments. Also the establishment an Early Intervention Foundation is proposed to evaluate early interventions and promote their development, and develop capacity to attract private and public investment.

The second Allen report (Early Intervention: Smart Investment, Massive Savings July 2011) focuses on financing early interventions- through a shift in existing public sector/ government department budgets towards early intervention, and also attracting external funding through the creation of new funding models. The report also reiterates the Tickell review and Munro review recommendations highlighted below.) Recommendations are made regarding the role and functions the Early Intervention Foundation to be funded through the creation of a £20 million endowment.

The Tickell review is a review of the Early Years Foundation Stage (EYFS) (2011) -the statutory framework that was introduced in 2008 to ensure consistent and high quality environments for all children in preschool settings. The review makes a series of recommendations for improving the EYFS that are directly relevant to promoting the social and emotional wellbeing of vulnerable children. These include:

- Defining personal, social and emotional development, communication and language and physical development as prime areas of learning in the EYFS.
- A requirement for practitioners, including childminders, to provide on request to parents and carers, (between the ages of 24 – 36 months), a summary of their child’s development in the prime areas. This should support the Healthy Child Programme health and development review by health visitors, as well as transition to nursery provision at age 3. This should support better, earlier, identification of those children who are most vulnerable to the effects of deprivation and dysfunction. The states however that the full benefits are dependent on the Healthy Child Programme 2 year health and development review becoming 100% universal. Government is also urged to work with experts and services to test the feasibility of a single integrated review at age 2 to 2½.
- Greater clarity regarding welfare and protection requirements.

The Munro review of children protection (final report 2011) sets out proposals for reform that ‘are intended to create the conditions that enable professionals to make the best judgements about the help to give to children, young people and families’. The overall emphasis is enabling practitioners to exercise their professional expertise in making judgements out what actions are required to respond to children and families.

The review makes clear that the provision of '*early help*' plays a critical part in child protection....supporting the state requirement to take action to prevent the abuse and neglect of children and young people as well as deal with its incidence'. The review reiterates and reinforces the case for early intervention preventative services as set out in the related reviews. However it also considers how preventative services could be more effectively coordinated and integrated strategically and at a family level.

In particular it comments on the Common Assessment Framework-both policy and the 'form'- that was designed to encourage integrated professional working and sharing of information. It notes that there is conflicting evidence on whether the form is contributing to improved practice. It recommends that local areas should have the flexibility to revise the form to suit local needs. It recommends that local authorities and statutory partners should set out how sufficient provision of local 'early help' will be secured to meet the profile of local need, including mechanisms for identification of early help that is needed by a particular child and family and provision of an 'early help offer'-where their needs do not meet the criteria for receiving children's social care services.