Born to Move:
Can health visitors encourage active movement from birth to positively influence development of infants and children?
A universal multi-agency approach.
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Purpose of Document

This case study focuses on an improvement in service quality, innovation or a new way of working, specifically along one or more of the strands of the health visiting service vision and family offer:

Community
Universal
Universal Plus and
Universal Partnership Plus.

Case Study Overview

The Active Learner project has been developed in response to increasing concern about children in society achieving developmental milestones much later than previously, and the subsequent impact that this is having on children’s developmental readiness for formal learning in school. These trends can be linked to gradual lifestyle changes in the last 10 years, where the importance of physical activity in infants has been forgotten or misunderstood, as parents struggle to balance increasingly busy lifestyles and worries about safety.

Our objective was to provide valuable evidence-based information to all parents/carers for every family at the Universal new birth contact about the importance of the parents’ role in providing early sensory and movement experiences from birth, which are critical for early brain development.

The first part of the project involved health visitors promoting ‘awake tummy time’ in an innovative way in preparation for crawling. This is recognised in the Millennium Cohort Study (undertaken by the Medical Research Council Centre of Epidemiology for Child Health at University College London) as the most significant indicator of readiness for formal learning at school entry that children should achieve.

High-level Benefits

Our measurable outcome at the Universal 10–12 month developmental assessment was an increase in crawling rates from the national average of 30% to a vast improvement of 94% of babies crawling.

It was noted at these assessments that babies had also developed improved non-verbal communication skills and fine motor skills such as a pincer grip needed for self-feeding and later for holding a pencil in school.

In the pilot study, at a local primary school, four children out of 10 had not developed this skill by school entry so we had evidence that a change in approach was needed through proactive health education.

For maximum effectiveness, workshops were delivered by a health visitor champion to all early years staff in Children’s Centres to improve knowledge and awareness of stages of child development, and to ensure that consistent advice is given to families about the importance of making time for babies to play.

Achievements
The change was led by the health visiting teams as we are the only professionals to have Universal contact with every family, through the new birth contact. Workshops were delivered to health visiting teams and Children’s Centre teams based on the neuroscientific evidence behind this project to ensure maximum effectiveness through a consistent message to families.

The project relates to the Universal service, but also where higher levels of care are needed, as it helps to establish a parent/child bond, so safeguarding children from non-accidental injuries. Parents are seen at existing contacts.

The outcomes of the project are SMART (Specific, Measurable, Achievable, Realistic and Timely). It puts children at the heart of what we do, by using existing staff and developing a high-quality multi-agency service that is good value, striving to improve outcomes at a critical time in early childhood.

Benefits

At every Universal contact between the family and the health visiting team, the professionals were able to provide demonstrations and evidence-based information about the importance of daily awake tummy time from birth, and how positively this affects motor and cognitive development.

Early years practitioners and Children’s Centre teams, including staff from day nurseries, home start volunteers, child minders and speech and language therapists, were offered similar workshops, tailored to their existing knowledge and roles. This allowed for families to receive consistent messages from every professional that worked with them.

Short-term benefits included increasing physical activity from birth to establish core strength and support early brain development. Also there was increased parental interaction and interest in their children and how they can support their development. Children are less likely to be physically abused if parents are emotionally involved with the baby, so this project supports our safeguarding policy for vulnerable children through Universal Plus pathways.

Awake tummy time encourages development of fine motor skills in the hands, which links in the brain with the development of fine motor skills at the front of the mouth and with the development of speech and language. This aspect is also supported by development of the vestibular (balance) system through active play. Increased parental interaction increases children’s knowledge of language and widens vocabulary, which is vital for communication skills.

Long-term outcomes will see an increase in the number of children developmentally ready for formal learning, having increased life skills such as communication, increased confidence and a positive attitude to physical activity, which also supports future mental health and happiness.

Increased vocabulary at the age of five is an indication of future success at GCSE and beyond, so improving children’s life chances of academic success and achieving their true potential.

Challenges
Within children and family services it was important to provide Active Learner workshops to enable existing staff in health visiting teams to educate parents/carers at existing Universal contacts.

We also provided Active Learner workshops to all Children's Centre staff to ensure a consistent evidence-based approach for maximum effectiveness. The training had to be tailored to the existing knowledge and roles of the staff taking part.

The participants consisted of staff with a wide range of experience and knowledge levels and in order to maintain engagement the project lead used a variety of teaching methods.

As an example, one young crèche worker reported that she worked in the baby room because babies were "easy and just sat there." At the end of the workshop she said, "I wish I had known this before, I realized that what I do is actually really important."

The project required funding for training materials and DVDs for distribution to staff to support their interaction with parents. Literature was purchased with multi-agency funding and leaflets were written and printed for distribution at each new birth contact to enable parents/carers to obtain further reference and information.

These booklets contain simple diagrams and pictures to demonstrate 'awake tummy time;' 'eyes need to move too;' 'chatter matters;' as well as information on why the activities are important in developing body confidence, in developing eyes capable of tracking words across a page and in developing the pincer grip needed for self-feeding and later to hold a pencil.

Local studies revealed that 40% of primary school entrants had not developed this skill and other communication skills; currently, 70% of a local primary intake have speech and language delay. Research indicates that this is not an isolated occurrence confined to this area.

**Learning, Sharing and Sustainability**

The Active Learner project has achieved our aim of reaching every new family across an area with 1,500 new births a year, with a consistent message given by health visiting teams at every Universal contact. This keeps costs to a minimum when supported by Children's Centre staff and other early years workers. Parents have been very receptive.

A total of more than 600 staff have now attended workshops to date and interest is ongoing across Kent. It has demonstrated that multi-agency working has had a cohesive effect. Costs for interventions with families are reduced when consistent messages are maintained across the early years workforce.

We have been able to measure our impact on crawling by the 12-month Universal contact, noting an improvement, sustained over two years, from 30% to 94%. This mirrored the improvement in the pilot study.

Once introduced, where a local champion is identified, the project is self-sustaining. Costs include training and supporting materials.
The plan for 2013 and 2014 is to roll out the multi-agency approach to each of the 12 districts across the county.

Evaluations of the workshops, completed by members of the health visiting teams, showed an increase in knowledge of the importance of tummy time and increased confidence to educate parents and carers through demonstration and information.

The health visiting team were provided with booklets and further literature to enable them to educate parents and carers with evidence-based information. The evaluations showed an increase in provision from 22% to 100%.

All attendees found the workshop ‘very relevant’ to their practice when asked to choose between ‘very relevant’, ‘somewhat relevant’ and ‘not relevant’.
Don’t be in a hurry for your child to walk, the more time your baby spends learning and moving on the floor in their first year, the better for their overall development.