

Early Years Collaborative Summary Report

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Project title Play@home

Aim of project (1-2 sentences)

By January 2016 100% of first time parents in Angus Locality A will have received Play@home and be partaking in at least 6 activities by the time their child is 8 months old.

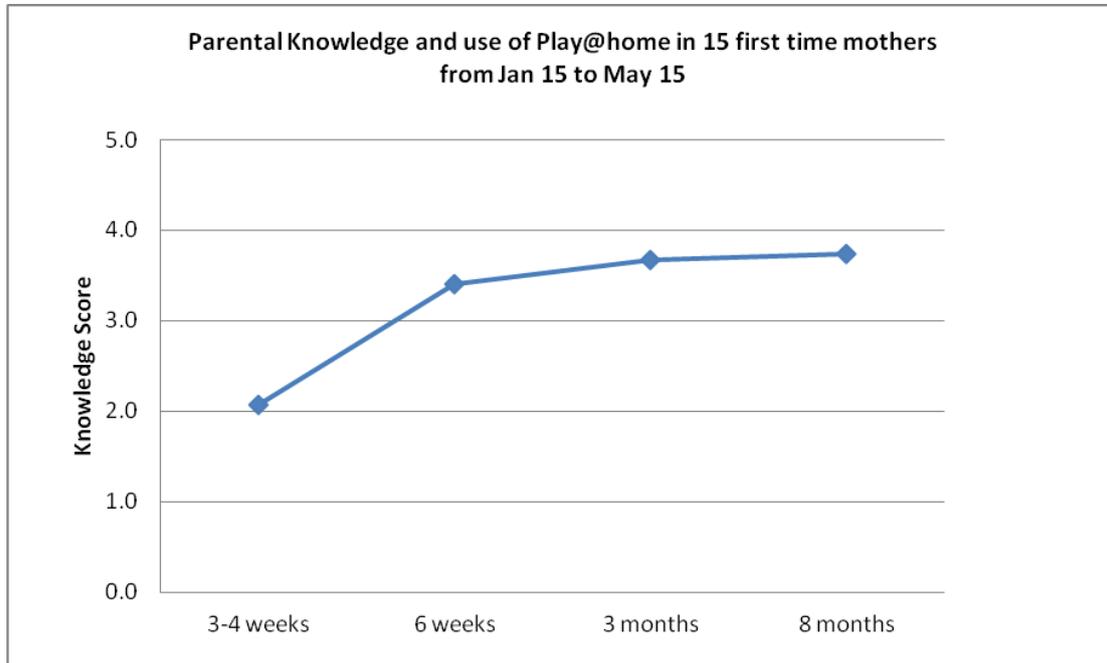
Planned changes tested (2-3 sentences)

- The project was initially tested on 4 first time mothers. Following on from this a decision was made to upscale the project to all first times mothers within Locality A.
- The Health Visitor will introduce Play@home at a time when the parents are ready to engage. Engagement from the Health Visitor means really signing up to promote this resource with a real focus on the child's development.
- A tool will be used to introduce Play@home generating discussion about the importance of play to promote a child's development.
- The Health Visitor will invite parents to select activities from Play@home to carry out with their child and feed back. The Health Visitor will score use of Play@home depending on the number of activities undertaken at key points in the first year of the child's life.

Predictions (2-3 sentences)

If Play@home is introduced at a time when parents are ready to engage and the Health Visitor actively engages with parents and promotes this resource then Play@home will be used by parents. In turn the child will benefit.

Results– present your results with a graph



Summary of results (3-4 sentences)

The results clearly show that through using the PDSA methodology to introduce Play@home parental use and knowledge of this resource increases and is maintained as the child gets older.

We are well on our way to reaching our aim in that 100% of first time mothers have received Play@home and have reported that they are partaking in at least 6 activities by the time their child is 8 months old.

Case Study

Play@home was introduced to a vulnerable first time Mum (declined Family Nurse Partnership). She lives with her partner who is not the father of the baby.

In her pregnancy Social Work (SW) carried out an assessment and a Prebirth Risk Allocation Meeting was held (PRAM).

Vulnerabilities included being a teenage mum, housing issues, early childhood experiences and a history of depression.

It was the decision of the PRAM that SW would not intervene following the birth but the Health Visitor would report back if there were any concerns or if additional support was needed.

This child is now almost a year and has made excellent developmental progress and there is a very positive attachment between the child and parents.

I found Play@home an excellent resource to engage the mum and step dad and highlight the importance of play and activity. By going through the various sections we were able to look at the activities and Mum decided which ones she would like to do.

At each point on the HV Home Visiting Pathway we looked at the Play@home book and talked about activities that the child could engage with. (This is something that I would not have done before). As a result of this my knowledge of the resource has increased.

Mum enjoyed feeding back which activities she was doing and how the child was progressing with her development. It was a great opportunity to boost her self esteem and confidence.

Also I found that using Play@home is an excellent tool to build up a therapeutic relationship. The Mum has a history of not attending appointments. I found this not the case. She would always text me if she had to change appointments and was always in for planned visits. Also if she had any concerns she would text me.

Mum's comments at 8 months;

"I am using play@home. My baby really enjoys her deep bathing. She loves going outside to the park, crawling activities and really loves her books. She is babbling lots and now can pick things up with her finger and thumb"

Learning (4 – 5 sentences)

Comparison of questions, predictions and analysis of data

- This test of change has been running in Locality A for a year now and the results have shown that this approach to introducing Play@home works. The team have been motivated and willing to engage and this has been fundamental to its success.
- We have learnt a lot especially around setting aims and objectives which are measurable and collection of data.

Impact on the system (3-4 sentences)

Discuss the project significance on the local system and any findings that may be generalisable to other systems

- HV confidence has increased using Play@home and the resource has been used to help parents with specific concerns, e.g. a child who was not sitting at 8 months. Activities were discussed to help and the parent agreed to partake in these daily. After a period of 6 weeks progress was reviewed and the child was sitting.
- Also there has been joint working between Health Visitors and Just play colleagues to promote Play@home to vulnerable groups of parents.

Conclusions (3 – 5 sentences)

Summarise the outcome of the project. Is this project sustainable? What are the requirements for sustainability?

- The project is sustainable in Locality A however we have a new Health Visitor who will require to be introduced to the project.
- Also the Project Team will need to ensure motivation is maintained and need to share the data /evidence showing the positive impact of this project.

Reflections / discussions (5 – 7 sentences)

Discuss the factors that promoted success of the project and what were the barriers to success. What did you learn from doing this project? What are your reflections on the role of the team?

The success of the project was promoted by the motivation of the Health Visitor team to engage. Also parents engaged well.

Health Visitor confidence and knowledge of the resource also increased. Reported comments from one HV;

- Increased my knowledge of the content of the book
- Increased confidence in delivering the resource
- Increased engagement with parents to discuss the resource and gaining feedback of activities undertaken.
- Enjoy using the resource especially using it as a tool to promote attachment and development.

The main barrier to success was the pressure that staff members were under to deliver the project considering staff shortages and a time of major transition for the Health Visiting Service.

It was a challenge to keep motivated as the lead and keeping driving the project forward, especially before the sessions at the Improvement Academy at Ninewells Hospital.

These sessions at the Improvement Academy have been excellent and have helped clarify the PDSA process. Especially as they were held monthly and helped keep the project on track. Now that they are over it would be helpful if the projects teams in Angus could continue to meet and feed back to ensure the support is maintained.

Collaborative Participant

Signature

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