

Evaluation of a Primary Care Early Years pilot in Penderi Cluster

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Winner of the NHS Wales awards 2019



The problem

In 2012/3, 18% of children in Swansea did not attain the desired minimum level of school readiness at entry into school.

Example in local primary school:

- 40%+ reception children limited means of speech
- 20% dependent on dummies
- 25-30% not toilet trained
- 48% present with challenging behaviour

Evaluation of pilot

Swansea University and Public Health Wales undertook a two-stage evaluation comprising of a cost savings study using a novel cost savings toolkit developed by Wavehill Ltd., and cost analysis of the routine data.

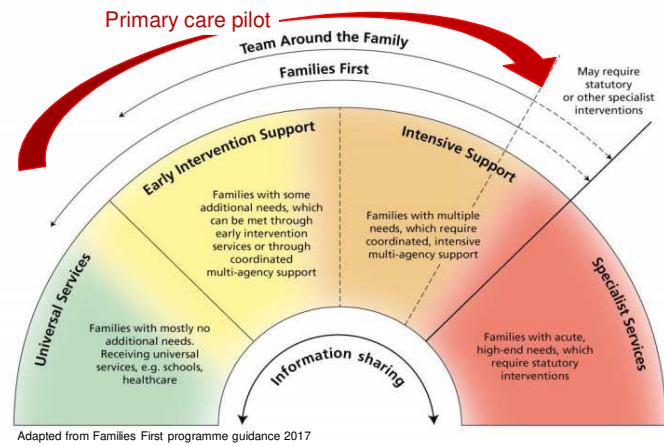
The pilot population was children (and their families) living in non-Flying Start areas of the Penderi Cluster, referred by GPs or Health Visitors between November 2016 and March 2018.

A random selection of cases were analysed using the toolkit. Wellbeing indicators measured at the start and end were analysed for parents/carers and children. The cost analysis incorporated data on potential service referrals from GPs, health service unit costs and routine data collection on GP visits.

A solution: Primary care child and family wellbeing service

- Addresses Adverse Childhood Experience prevention and the UCL Institute of Equity recommendations (children's health and development, parenting and parents lives)
- Designed to complement existing services and address gaps in service provision
- Provided early intervention support, targeted at non-Flying Start areas
- Early Years Primary Care worker engaged in up to 12 sessions of support *with the whole family in the home setting*

AIM: 'To improve children's development outcomes by reducing the gap in readiness for school'



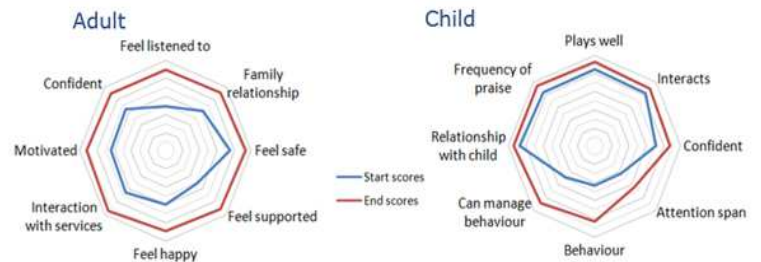
Evaluation results

Of 156 referrals to the scheme, 105 were appropriate and suitable for follow up. Of the 11 cases selected for analysis;

- All wellbeing indicators improved for adults and children (adults z score = 8.775, p-value < 0.001 and children z score = 5.806, p-value < 0.001).
- Parents/carers all reported an increase in happiness and an improvement in the family relationships, and felt better supported at the end of the intervention. They reported a significant improvement in their child's behaviour including an improvement in their child's attention span.

Wellbeing wheel scores at start and end of intervention.

(Highest scores are at the outside of the wheels)



Potential cost savings

- Savings identified by the toolkit ranged from £0 to £49,423 per case (average per case £8,375).
- Savings from service referrals such as Child and Adolescent Mental Health Services (CAMHS) and unnecessary GP visits was estimated at £332 per case.
- Overall potential cost savings of both service referrals and upstream health and social care costs was £914,193. Subtracting the cost of the pilot (£51,038) gives;

overall estimated potential cost saving of £863,155

Conclusion

- Findings suggest the pilot was highly cost-effective compared to usual primary care patient pathways and suggests there are significant health benefits.
- This novel method of evaluation may prove useful for evaluation of other similar early intervention/prevention schemes.
- It shows it is possible to address the gap in early years service provision and demonstrates the potential to be introduced more widely throughout Wales to bring about a healthier future for children and their families.

Important next steps

- Rollout to other cluster networks, evaluating service provision as scheme is extended.
- Aim to demonstrate further improvements in child and family health and wellbeing and school readiness linked to adverse childhood experiences in these areas.