



INTESYS

TOGETHER / Supporting
vulnerable children
through integrated early
childhood services



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POLICY RECOMMENDATIONS for strengthening integration in early childhood systems

ITALY

Introduction

The challenges summarized by the following recommendations cannot be addressed with traditional, regulatory or prescriptive practices. **The recommendations proposed** below are based on the results of the INTESYS project and show how these results are replicable and beneficial for children and for those who care for them. The following recommendations are addressed to stakeholders with a political role (public institutions that design

and regulate services for children), with professional responsibilities (educational, social, cultural and health professionals), with existential links with children (parents or other adults acting in the life space of the child and in the community), with an economic and entrepreneurial mission (public / private bodies involved and / or interested in a future where children will build by growing well).

Proposals

1. To identify in the **regulatory production** (at national, regional, local level) spaces to enhance and encourage the integration of practices in services for early childhood. The objective is to adopt, in any regional and local territory, measures amending and / or qualifying the value of the integration of responsibilities on processes and results, also in application of national provisions.
2. To introduce, verify and - if necessary - review the **governance models** and the **operating and organizational rules** of integrated services for early childhood on a regional scale, with the specific objective of favoring, among service providers :
 - responses that are integrated (educational, social, educational and health socio-health) and uniform and not dispersed in the territory;
 - skills that are integrated (professional and community) for the holistic development of children;
 - conditions that increase the access of all girls and boys and the active participation of parents in the service network.These regulations must contain indicators to verify if and to what extent the essential levels of care (social and educational) are really guaranteed at local level. The overall analysis of the essential levels of care on a local scale will be useful in order to define on a regional scale the **“essential levels of citizenship for 0 to 6 years”**.
3. To **implement organizations** that are **reflective, flexible and responsible** not only for the quality of service processes but also and above all **for the results and outcomes achieved for the benefit of children**. In particular, this involves leverage the integrated participation of all centers of professional (educational, social, cultural and health) and non-professional (parental and community) responsibilities involved.
4. The positive feedbacks obtained during the INTESYS project in **verifying the changes and comparing the improvements in the various territories** in a comparative manner **should be consolidated** with a **systematic use of the tools** (for example Sisclass) and measurement methods and shared with all those interested at the local level. (Annex 1- Sisclass).
5. To **standardize the monitoring of integrated practices at local and regional level**. To this end, it is necessary to **systematically use observable factors and indicators** concerning the processes that make them possible, the results achieved and (above all) the outcomes achieved (for children and parents). To make the results of integrated practices comparable, uniform measuring instruments should be used. For example, the "checklist on the fragility of the child and the family" (Annex 2).
6. To introduce conditionality in the health practices for early childhood for the effectiveness of the “essential levels of assistance” (Lea) so that their use is not subordinated to the difficult access of disadvantaged children. To this end, conditionality must be

characterized in terms of initiative medicine for children and the family (active care of and for child development) and systematic measurement of 0-6 aged children's GI parameters. Priority attention should be given to those living in conditions of clinical and socio-environmental risk.

7. To use **observable factors in an integrated and shared manner** so to allow professionals and parents to read together and in an integrated way the factors of positive growth of children (not only related to the functioning of the service). Observable factors pay particular attention to the improvements achieved, to the well-being targets of the child to be obtained by integrating skills, competences, responsibilities (without limiting themselves to the critical issues).
 8. To **promote the transfer of skills** achieved during the project, **enhancing administrative solutions able to facilitate the transition “from teaching to learning”**, i.e. with professional and non-professional testimonies and with insights on the conditions for extending performances
 9. To **rethink integrated practices, starting from the needs analysis and design phase**, when capabilities, resources, potentials and responsibilities should be identified in an integrated way and **clear models of governing integrated services should be defined**. Integrated services are necessary to face problems in a positive and constructive way (Annex 3 Map of subjects and of current and potential resources). In short, it is necessary to overcome the sectorization of practices that, while trying to be integrated, become the opposite of what they should be, i.e. "organized" but not integrated.
 10. To **promote continuing training and supervision to rethink early childhood professions**, using the degrees of freedom that science and conscience make available. The future of integration that works must be able to count on **professionals able to project themselves beyond the school disciplines** that have enabled them to operate in the services.
 11. To **introduce specific modules dedicated to the integration of services for early childhood, in the territorial curricula responding to the National Training Plan** as per ministerial decree n. 797/2016 as well as modules aimed at promoting the integrated system from birth to six years knowledge at a regional level and using the results obtained within the INTESYS Project, in the context of projects supported by the Educational Poverty Fund and the indications emerged in the framework of the Transatlantic Forum in Inclusive Early Years Initiative.
 12. **To raise awareness about integrated services aimed at the inclusion of children in the “pilot 0 to 6 years old schools” (“scuole polo”)** affected by the Regional Decree No:6092 of 30/03/2018 and the Regional Inter-institutional Working Group on Inclusion (GLIR) (338/2018) as per D.M. 338 of 24/04/2018.
 13. **To include the issue of service integration in area 0-6 years in the curricula of basic university education** for students wishing to undertake occupations in early childhood.
 14. **To Introduce and request specific provisions concerning integrated services (social, cultural, health, etc.) in the design of the plans for the functioning of the Poles of Early Childhood** (poli per l'infanzia), as indicated in the decree dgl. 65/2017, concerning the establishment of the integrated education system from birth to six years- In this way the experimental and innovative character of the Poles of Early Childhood will be enhanced by transforming them into cultural diffusers for more effective services for all girls and boys, also through their integration.
 15. **To encourage the creation and the qualification of the territorial pedagogical commissions** (coordinamenti pedagogici territoriali), foreseen by the 2017 national decree Dlg. 65/ as an opportunity and space to promote the transfer and systematization of innovative practices related to integrated services to ensure greater access, better usability and enhanced effectiveness of services for early childhood.
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