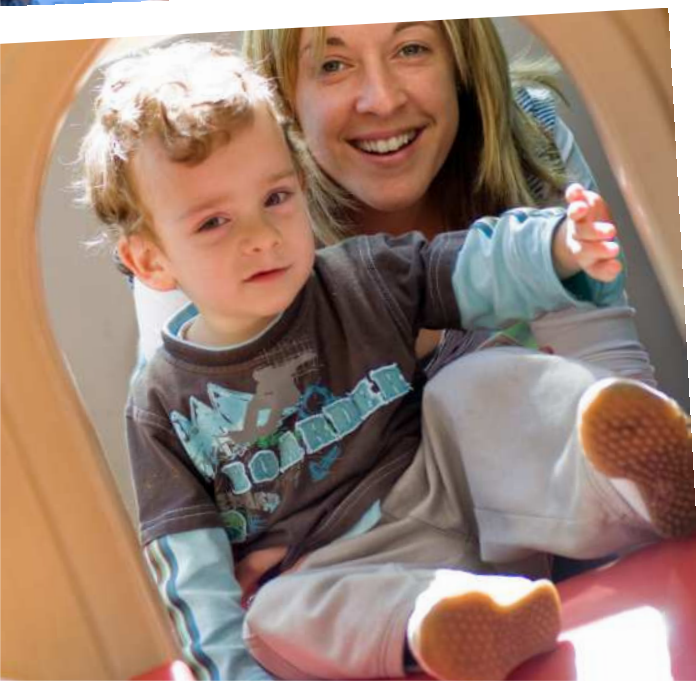# Early childhood intervention reform project

Executive summary

Revised literature review
December 2010

EXECUTIVE SUMMARY

Contents

EXECUTIVE SUMMARY

1. INTRODUCTION / BACKGROUND

This literature review was commissioned by the Office for Children and Portfolio Coordination, Department of Education and Early Childhood Development (DEECD), as part of its Early Childhood Intervention Services (ECIS) Reform Project (Stage 2): *Developing Options and Next Steps*. This Project aims to significantly enhance the efficiency, effectiveness and sustainability of Victoria's ECIS system and improve outcomes for children with a disability or developmental delay and their families.

Early childhood intervention services (ECIS) support children with a disability or developmental delay from birth to school entry and their families. ECIS provide special education, therapy, counselling, service planning and coordination, assistance and support to access services such as kindergarten and child care. The services funded through DEECD are provided by government Specialist Children's Services teams and non-government Early Childhood Intervention agencies. In addition to the services provided by ECIS teams and agencies, the state and federal governments fund a range of complementary programs to support young children with developmental disabilities and their families. These include initiatives to support families (*My Time* parent groups, Flexible Support Packages), services to support inclusion (Preschool Field Officers, Inclusion Support Facilitators), and funding to support particular disability groups (*Helping Children with Autism* packages). These additional services and supports, together with the ECIS teams and agencies, make up the totality of early childhood intervention provision for young children with disabilities.

The focus of the literature review is research on contemporary Australian and international evidence-based service delivery models for children with a disability, developmental delay or additional needs aged 0-8 years.

Outline

The remainder of the paper is divided into four main sections:

- The next section, Section 2, presents the general social and policy context that needs to be taken into account when considering the future development of early childhood intervention services.
- Section 3 focuses on children with disabilities and their families, their developmental needs, their experiences of professional services, and how they can best be supported.
- Section 4 looks at early childhood intervention services, beginning with a discussion of definitions and rationales. Next, the outcomes sought by early childhood intervention services are examined, and some service models described. This is followed by a discussion of what evidence-based / practice-based intervention strategies are known to be effective in achieving these outcomes, and the workforce competencies and skills needed to deliver these strategies.
- Section 5 discusses ways of reconceptualising early childhood intervention services in Victoria so that they can better support the additional needs of children with disabilities or developmental delay and their families within a universal, inclusive system of early childhood services.
- In the final section, Section 6, the implications of the findings of the review are explored.

EXECUTIVE SUMMARY

2. THE SOCIAL AND POLICY CONTEXT

The conditions under which families are raising young children have changed dramatically over the past 50 years, and the traditional services are struggling to meet their needs. The early childhood and family support system needs to be reconfigured to meet the needs of contemporary families more effectively. All developed nations have recognised the need to address the changed circumstances in which families are raising young children and to reconfigure early childhood and family support services. In Australia, federal and state governments have responded to this challenge with a range of initiatives and polices. These share a number of common features: integrating early childhood services, finding more effective ways of reaching vulnerable children and families, ensuring that all children arrive at school ready to learn, shifting services to a promotion / prevention focus, reducing child protection rates, monitoring children's development and well-being more effectively, improving the quality of early childhood services, and increasing the use of evidence-based practices.

Changing views of disability

Over the past 20 to 30 years, there has been a paradigm shift in the way that we define and conceptualise disability, from a deficit model of disability to a social model. The *'deficit' model* views disability as a feature of the person, directly caused by disease, trauma or other health condition, which requires treatment or intervention, to 'correct' the problem with the individual. The *social model* of disability sees disability as a socially-created problem due to the attitudes and other features of the society that do not accommodate the individual with a disability. This recognises that environments can constrain the functioning and participation of children with disabilities as much as their impairments do. Our growing knowledge of child development also reveals the importance of children's social and physical environments for their ongoing learning and development.

These developments in thinking suggest that society should be providing appropriate levels of support to enhance the lives of people with disabilities, rather than requiring them to develop certain skills and behaviours in order to participate inclusively in relationships and community settings.

Children with disabilities and their families

Children with disabilities and developmental delays have rights and share needs in common with all children and families, but have additional needs that require attention if they are to become participating members of society. The nature and quality of their key relationships are critical for children's development, and the key features of these relationships – particularly attunement / engagement and responsiveness – are especially important for early childhood development and the establishment of secure attachment. The implication of this evidence is that supporting parents and caregivers in developing positive and responsive relationships with children with developmental disabilities from as early an age as possible should be a major focus of early childhood intervention services. All those involved in working with young children with disabilities – parents, caregivers, early childhood interventionists – should seek to establish relationships with these children that reflect the key qualities of effective relationships. It is the combined effect of such relationships that will ensure the effectiveness of interventions.

Just as children with developmental disabilities can be regarded as having the same basic needs as children without disabilities, so their families should be understood as having the same core needs as families of children who do not have disabilities, being more like these families than different from them. It is clear from this evidence that families of children with developmental disabilities are faced

EXECUTIVE SUMMARY

with many challenges that place them at risk of poor outcomes for themselves and their children. However, many such families are able to meet these challenges and even transcend them, drawing on their own personal resources, the support of family and friends, and the help of specialist services.

While families of children with disabilities have the same general needs as families of other children, but also have additional support needs. These needs include

- emotional support from family, friends, and professionals
- information about their children's disability and about relevant services
- strength-building and empowerment strategies to help parents develop the capacity to meet the children's needs
- practical support to help families meet the additional demands and resources associated with having a child with a disability
- timely diagnosis, assessment, monitoring and feedback.

In addition, this overview has indicated some of the ways in which early childhood interventions services can respond to these needs. These include:

- key worker model of support to simplify access to services
- ready access to early childhood and early childhood intervention services
- helping families establish sustainable family routines.

However, it is also apparent that families' experiences of services are not always ideal - while professional assistance can be very helpful to families, it can also create problems for them when it is delivered in ways that make parents feel disempowered, when services do not consider the demands they are making on families, and when services are hard to access or poorly coordinated.

3. EARLY CHILDHOOD INTERVENTION SERVICES

The field of early childhood intervention continues to evolve, reflecting developments within its own practices as well as related developments in other fields. One of the most important aspects of this evolution concerns the shift in how we conceptualise the fundamental aims of ECIS.

Definition and rationale

Early childhood intervention services have usually been defined in terms of services to children with disabilities and their families. However, it has been argued that there is little evidence that a service-based approach to early intervention is effective, and that it may even have negative effects. An alternative definition focuses on the environments in which children spend their time, and sees the role of early childhood intervention as seeking to ensure that the parents or others who provide such environments are able to provide young children who have developmental disabilities with experiences and opportunities that promote their acquisition and use of competencies that enable them to participate meaningfully in these environments.

What are the main environments for young children? Initially, children's main learning environment is the family, with early childhood programs and community settings playing an increasingly important role as they grow older. The key point to notice about this list is that it does not include specialist

EXECUTIVE SUMMARY

services such as those provided by ECIS professionals. Children spend the majority of time with their families in everyday routines and activities. While ECIS providers can play an important role in supporting children with disabilities and their families, they have a limited role to play in the everyday lives of these children. With existing caseloads and levels of funding, ECIS providers have limited direct time with children with disabilities and their parents and therefore are not one of the main providers of early learning environments. The bulk of the child's learning occurs *between* home visits or other sessions with professionals, not *during* them.

The rationale for early childhood intervention service provision can be summarised thus:

- If children are shaped by their environments, then we need to ensure that these environments – and all the experiences and relationships that make up those environments – are as fully supportive as they can be of children's learning and development.
- If children develop through relationships with their parents and caregivers, then we need to ensure that those relationships are optimal
- If children's learning is cumulative and depends upon having repeated opportunities to practice skills, then we should ensure that they have as many such opportunities as possible
- If ECIS cannot provide the environments, experiences and learning opportunities that children need, then its job is to work with and through those that can provide them – families, community settings, and the early childhood programs

This same logic leads to the recognition that the learning environments that children experience outside the home are just as important for their development as their home environments. Therefore, the learning environments provided by early childhood programs are properly regarded as being a major setting for early childhood intervention, not just as a desirable addition, and the task of ECIS is the same as in the home: to work with and through the early childhood staff to ensure that the early childhood environment provides them with the opportunities and experiences that will enable them to develop the functional skills to participate meaningfully in the same social and learning activities as the other children.

The role of ECIS providers

In the light of this reconceptualisation of the aims of ECIS, what exactly is the role that ECIS providers should play in working with families and with mainstream early childhood services? In partnership with parents, early childhood and other professionals, the role of ECIS providers is:

- To promote positive attachment between children and their parents / caregivers through attuned and responsive caregiving
- To identify children's functional / developmental capacities and needs
- To analyse the child's home and ECEC environments and identify what adaptations are needed to ensure the child's full participation / engagement in activities
- To analyse the child's home and ECEC environments and identify what learning opportunities exist or can be created to maximise the child's practice of key skills
- To support parents and ECEC staff in implementing adaptations and maximising learning opportunities for the child
- To monitor the impact of these strategies on the child's developmental and functional skills and child's participation / engagement in activities
- To strengthen the capacity of mainstream services to meet the needs of all children through fully universal inclusive programs

EXECUTIVE SUMMARY

Does this mean that early childhood interventionists never work directly with children? If we accept that the main role of ECI service providers is to ensure that the child's home and early childhood learning environments are optimal for the child, then we have to be able to explain how direct therapy with a child achieves this. If it does – and there are surely some circumstances in which this will be the case – then direct therapy will continue to play a role. What is needed is a blend of direct and consultative services according to need. Direct, individualised work with children services will be needed when an ECIS specialist needs to establish a relationship with a child in order to facilitate particular performance goals; or to gauge how to adapt an activity to provide a 'just-right challenge' to a particular child; or to obtain evaluation data about the child's performance that can be used to make decisions about revising his or her program. In other words, direct work with a child is usually a means to an end, a way of getting to know the child in order to be able to help parents and early childhood practitioners provide appropriate experiences and learning opportunities.

With this framework in mind, the review examines what outcomes ECIS should be seeking.

Outcomes in early childhood intervention services

Just as the needs of children with developmental disabilities are essentially the same as those of all other children, so are the outcomes we want for them. Outcome statements for all children are now central to current policy developments in Australia and in the States and Territories. These efforts to identify what outcomes we are seeking for children are based on a growing awareness of the values and importance of using an outcomes-based approach to service delivery. For early childhood intervention services to be effective, it is essential that there is agreement about what they are trying to achieve, what the desired outcomes are.

Efforts have been made to clarify what outcomes early childhood intervention services should be seeking, both in Australia and overseas. In Victoria, the need for outcome statements for children with disabilities and developmental delays has been addressed by *Better Opportunities, Better Outcomes* (DEECD, 2010). This framework supports the learning, development and inclusion of all children and young people with a disability or developmental delay and their families through a more holistic, life-cycle approach to the diverse and changing needs of children and young people with a disability or developmental delay and to the needs of their families.

Underpinning this document is a guiding vision and set of aspirations:

All Victorian children and young people with a disability or developmental delay:

o actively participate, enjoy and learn, along with their peers, in care and education settings and prepare for an active adulthood
o belong to supportive and inclusive communities
o are cared for effectively by families and carers who choose, and benefit from, the services and supports they need.

The framework also includes a statement of outcomes that now guide the work of ECIS in Victoria. There are six outcomes in all, three relating to children, two to their families, and one for communities:

- Children and young people with a disability or developmental delay develop the skills and capabilities to achieve meaningful civic, social and economic participation
- Children and young people with a disability or developmental delay enjoy optimal health, wellbeing and quality of life
- Children and young people with a disability or developmental delay are engaged in, and benefit from, educational opportunities, achieving improved knowledge and skills

EXECUTIVE SUMMARY

- Empowered families and carers access quality services that support the workforce and community participation choices of families
- Families and carers are well supported and are confident in their abilities to support their children's learning and development and capacity to live independently
- Inclusive communities benefit from the contribution that children and young people with a disability or developmental delay make and will make into the future

The other key outcomes document is the *Victorian Early Years Learning and Development Framework: 0-8 Years* (DEECD, 2009a). This identifies five Early Years Learning and Development Outcomes for all children. These are meant to apply to all children, including those with developmental disabilities and delays. The challenge for the ECI service sector is to embed the outcomes for children with developmental disabilities and delays within this wider set of outcomes for all children.

Service frameworks

Just as effective ECIS programs are clear about their outcomes, so they also need to have a clearly articulated service framework. This should include a clear organisational structure, carefully outlining its components and interrelationships, as well as presenting a set of principles that together readily translate into a functioning and coherent system of early intervention practices. Advances in knowledge have made possible the development of a number of early childhood intervention models and frameworks that explicitly focus on features and elements of practices that are likely to produce optimal positive benefits. A number of such service models are described, and their strengths and weaknesses analysed using an outcomes-based framework. Even the most comprehensive of these models do not describe how the actual services should be provided, nor do they claim to do so. Although they offer both a framework and specific guidelines, these constitute guidelines only and must be translated into systems-based practices by community-based services.

Nevertheless, these frameworks, individually and collectively, provide a strong basis for the development of a comprehensive evidence-based model of service delivery for the ECIS sector, both at a state and federal level. The development of such a service framework could contribute greatly to the promotion of uniformly high-quality ECI service delivery across Victoria.

Evidence-based / practice-based intervention strategies

There is a growing recognition of the importance of using intervention strategies that are based both on evidence and on program logic models. Properly understood, evidence-based practice is the integration of best research evidence with clinical expertise or practice wisdom (practice-based evidence), and client or family values, preferences and circumstances. Ways of deciding on a course of action that balances these three elements have been developed. Before selecting a strategy, the first step is to work with the family to determine what outcome or outcomes are being sought.

Effective intervention strategies

Effective strategies have two aspects: what is delivered and how it is delivered. For services to be fully effective, both aspects have to be involved: *how* programs are delivered is as important as *what* is delivered.

In the general early childhood field, certain key interpersonal and structural features of service delivery have been identified. These process and structural properties of effective services apply to early childhood intervention services. In addition, there are a range of effective strategies and practices that have been developed that are specific to early childhood intervention services. Many of these apply to

EXECUTIVE SUMMARY

children with a range of disabilities, while some are specific to particular disabilities. A disability-specific analysis of evidence-based strategies is beyond the scope of this literature review, so only the following general strategies are listed below. These are all based on a caregiver-mediated approach to early childhood intervention.

- *Interactions with children.* Children's behaviour only changes through the direct experiences provided by their social and physical environments. In terms of the social experiences, the strategies that are known to be effective in promoting children's learning and development include response-contingent child learning, participatory child learning opportunities, interest-based child learning, parent responsiveness to child behaviour , everyday natural learning opportunities, and use of natural learning environments.

- *Interactions with parents.* A central aim of early childhood intervention services is to promote the ability of families to provide their children with experiences and environments that will promote the children's learning and development. The strategies that are known to be effective in doing this include relationships between parents and professionals, use of family-centred practices, use of capacity-building help-giving practices, and the provision of high quality technical support.

- *Interactions with other professionals.* Effective ECIS delivery also involves working with other professionals who are key providers of early learning environments for children, particularly staff in early childhood programs. The key skills involved in doing so effectively include building positive relationships and partnerships with other specialist and mainstream agencies, sharing knowledge and skills with other professionals, and transdisciplinary teamwork.

EXECUTIVE SUMMARY

Workforce competencies and skills

One of the key features of effective early childhood intervention services is that they are staffed by people who are trained and supported to provide high quality, responsive services. Those who work in early childhood intervention services come from a variety of disciplines, and have all been trained in their discipline-specific knowledge and skills. The extent to which their initial training equips them to work with young children with developmental disabilities and their families varies, although it is clear that no specialist discipline trains practitioners in all the skills they need to work effectively in early childhood intervention services.

Evolving ideas about evidence-based practice and practice-based evidence are outlined, and a range of effective interventions and practices identified. Key skills for working with children and parents – including the core features of effective help-giving (technical skills, relational skills and participatory and strength-building skills) – are summarised. Finally, ways of training practitioners in these skills are considered.

In addition to direct training, practitioners need ongoing professional support to consolidate and further develop their skills and values.

The next section analyses the ECIS system itself and explore a number of challenges that it faces.

4. EARLY CHILDHOOD INTERVENTION SERVICE SYSTEMS

Current early childhood intervention service systems

The existing ECIS services in Australia have both strengths and weaknesses. Some of the weaknesses reflect the haphazard way in which the services were developed, and the way that ideas and practices have changed faster than the service system. The current early childhood intervention system also has many strengths, and in seeking to reform ECIS in Victoria, it is critical that these qualities and characteristics are not jeopardised in any way but are seen as strengths that the system needs to preserve and build on.

Challenges for early childhood intervention service systems

A number of challenges facing early childhood service systems are discussed. These include how to identify children early, how they should gain access to ECIS, how to manage waiting lists, which children should ECIS serve, how to determine eligibility, how to assess children, how to ensure program fidelity, how to ensure the use of evidence-based practice and practice-based evidence, what intensity of service is needed, what level of funding is needed, how funds should be allocated, how to reduce the fragmentation of services, and how ECIS providers can be held accountable. Another challenge is how to bridge the gaps between professional and lay knowledge and understanding, and build community awareness and acceptance of disability. The answers to these questions are clear in some cases, but in others there is not enough evidence to indicate a definite course of action.

Reconceptualising ECEC and ECIS: Towards a unified system

In addition to the specific issues addressed, the general question of how the ECIS system might be reconceptualised and reconfigured is explored. To be able to support young children and their families more effectively, early childhood and family services need to be reconfigured as an integrated universal

EXECUTIVE SUMMARY

service system, backed by a tiered system of specialist support services. Integration would take two forms – 'horizontal' integration with a range of child and family services, and 'vertical' (or tiered) integration of universal, secondary and tertiary services. For specialist services such as ECIS, this would mean an expanded role, including consultancy support to universal services as well as direct work with families.

Transforming early childhood intervention services and practices in Victoria cannot be undertaken unless there is a commensurate transformation of mainstream services and practices. The universal systems approach with its focus on desirable outcomes for all children and their families to be met through connected, joined up or integrated services and practices seems to be the best way forward. In summary, there are several key aspects of the transformation recommendations

- A universal systems approach requires a new overarching structural authority or body to ensure improved capacity for interagency governance to support integration or connectedness between a wide range of services or supports (including schools) for children and families in every community or region.

- A universal systems approach requires a highly competent workforce who can work trans-professionally and in genuine partnerships with families and communities. To achieve this type of workforce will require a radical workforce reform agenda.

- A universal systems approach to early childhood intervention and early education, care and wellbeing requires that those who work with children and families are confident and competent in evidence based best practices. To achieve the desirable outcomes through this type of pedagogy will require serious attention to sector wide pedagogical renewal

- A universal systems approach to early childhood intervention is based on a recognition of the additional needs of children with a disability and developmental delays and their families.

- A universal systems approach to early childhood intervention would also involve embedding secondary or tiered early intervention support systems into mainstream practices, expanding the role of ECIS and practitioners. While some models of how this might be done have been developed, there are no well-developed examples of what such models would look like in practice.

5. CONCLUSIONS AND IMPLICATIONS

As this review has shown, the impetus for change in ECIS comes from three main sources. First, there is the nature and impact of social change over the past few decades, and the profound changes in the conditions under which families are raising young children. Services have not changed sufficiently to keep up with these changes and are struggling to meet the needs of all eligible children and their families. Second, there have been a number of recent state and federal government initiatives in the early childhood field, based on the recognition of the importance of the early years and the need to improve the quality and availability of services during this period. Third, there has been the evolution of ideas and practices within the ECIS field itself, leading to a major reconceptualisation of the rationale and purpose of ECI and the development of new strategies for achieving these aims.

This reconceptualisation of ECI aims and practices has been paralleled by a paradigm shift in the way that we define and conceptualise disability that has occurred over the past 20 to 30 years. This has involved a shift from a deficit model of disability to a social model that recognises the way that

EXECUTIVE SUMMARY

environments can facilitate or hinder the development of functional capacities and the participation of people with disabilities in community activities.

A review of definitions of ECI and the research evidence regarding the conditions children need to develop well led to the recognition of the importance of working with the child's main learning environments – of working with and through the main caregivers rather than achieving change through direct therapy with the child. This amounts to a major shift in what we might call the 'default' position for ECI practice. The previous 'default' position was that the job of ECI practitioners was to change the child directly through therapy and teaching, with inclusion in mainstream environments as a desirable additional option. The new 'default' position is that the job of ECI practitioners is to promote change in the children's main learning environments, with direct therapy and teaching used strategically on a case-by-case basis. From this perspective, the inclusion of children with disabilities in mainstream early childhood programs is not an add-on to ECIS, but a major form of intervention in its own right. Thus, mainstream early childhood programs are not simply desirable settings for normalising or widening children's social experiences, but are major settings for learning and intervention. This reconceptualises inclusion as a form of intervention, and mainstream early childhood programs and settings as essential learning environments for young children with developmental disabilities.

A review of the evidence regarding the benefits of inclusion and the conditions necessary for those to be achieved suggested that much depended upon ensuring that the early childhood programs are fully inclusive and of high quality. A fully inclusive program is one that responds to the individual needs of *all* children, including those with additional health, behavioural, language and learning needs. To achieve this, early childhood programs need to be based upon principles of universal design for learning and use practices such as recognition and response, which is not generally the case at present. What this implies is that realising the goal of inclusion as intervention cannot be achieved unilaterally by ECIS and integration support professionals but requires a matching shift by early childhood programs and professionals.

Limitations of the review

Some limitations of this review should be noted. One is that, while it sheds much light on the aims and practices of ECIS, the review does not provide definitive answers as what form of service system is best able to provide such services. A second limitation is that it has not explored all the research on individual disabilities. A third limitation is that the review has not looked at discipline-specific research. A fourth limitation is that much of the research that the review has drawn on comes from overseas.

EXECUTIVE SUMMARY

Implications and considerations

The findings from this review have a number of implications worth noting:

- ***Reforming ECIS and the implications for early childhood services.*** One of the most significant points to emerge from this review is that the reforms needed do not involve ECIS and allied services only, but have implications for mainstream early childhood and other services. The ECIS system cannot be reformed on its own, but must change in parallel with other services.

- ***Addressing service fragmentation***. Some rationalisation of services and service systems seems called for. There are a number of ways in which the fragmentation of services might be addressed.

- ***Developing an ECI service delivery framework***. Although ECI service guidelines currently exist, these do not amount to a comprehensive framework encompassing all aspects of service delivery and addressing all aspects of child and family needs. The development of such a service framework could contribute greatly to the promotion of uniformly high-quality ECI service delivery across Victoria.

- ***Adoption of evidence-informed practices***. A gap between evidence and practice is a common feature of all human service sectors, and ECIS is no exception. This would suggest that there is a need for clear guidance regarding preferred practices, provision of resources and training to support the adoption of these practices, and accountability mechanisms to ensure that practices are being implemented.

- ***Adoption of outcomes-based approaches***. The review has indicated that an outcomes-based approach to planning, delivering and evaluating services is an essential feature of best practice. Currently, most ECIS do not use this approach, although some use elements (such as parental evaluations of service received). More services would adopt outcomes-based practices if provided with guidance on how to do so, and resources tailored to ECI services.

- ***Exploring tiered intervention models***. One of the strong indications to emerge from this review concerns the desirability of developing a strong universal service platform backed by a tiered set of secondary and tertiary intervention services. For young children with developmental disabilities, ECIS and allied services would form part of the tiered services, providing support to the universal services and a graded series of services of varying intensity to children with varying degrees of developmental and learning problems.

- ***Strengthening professional competencies***. If the ECI and allied service system is to be restructured, then it is important that ECIS professionals should be part of a dedicated professional group large enough to provide collegiate support and ongoing professional development.

EXECUTIVE SUMMARY

Managing the process of change

- *A staged process of change* is indicated. There is a considerable gap between some of the proposals and directions discussed in this review and the current funding and service arrangements for ECIS and allied services. While some changes may be possible immediately, others will take time.

- *Providing supports and resources during the period of change* will greatly increase the likelihood of the process going smoothly and the new arrangements and approaches being adopted by the ECI and early childhood sectors. Supports and resources may take a number of forms, including additional funding, pilot studies, training, and professional resources.

- *Developing a comprehensive communication strategy* regarding the reasons for change and the change process itself. It would be valuable to explore how best to frame public messages regarding early childhood intervention so as to ensure the general acceptance of the reconceptualised role of ECI and any corresponding changes in the service system.

- *Monitoring and evaluating the impact of changes* is also critical. Because human services such as ECIS are complex systems, the outcomes of any changes introduced cannot be predicted beforehand. Therefore, it is important to monitor and evaluate the effect of changes in order to be able to correct for any unintended outcomes.

- Finally, *preserving and building on the strengths of the ECI sector* is essential. There is always a danger in making changes to a system as complex as ECIS of 'throwing the baby out with the bathwater', i.e. losing the expertise at the heart of the ECI process. In designing a new system and a planning a process of change, care must be taken to ensure that the collective professional expertise is not diluted, but is strengthened.