Infant Measures Think Tank
Ways Forward October 2009

- The group decided that they would propose that a Parent/Child Interaction Measure was carried out as a minimum for early infants and a measure for the child and the parent as additional, where they were considered relevant and meaningful.
- Pilot for one year and see how members find this model

• Parent/Child Interaction Measure

• The 4 main measures which have been discussed and decided as most appropriate for this pilot are:
- **CARE Index** (video taping)
- **KIPS (Keys to Interactive Parenting Scale)** (video taping)
- **Emotional Availability Scale** (parent completed measure)
- **P.O. Svanberg's rating scale** (still in development)

• The measures are to be completed at **Time 1** (point of first contact) and **Time 2** which was decided within the group to be **4 months** later – or case closure if this is sooner
• Video clips are to be between 5 and 15 minutes in length, depending on the age of the child

• Measures based on the child:

- **ASQ-SE (Ages & Stages Questionnaires: Social-Emotional)** (parent completed measure)
- **Bayley Scales of Infant Development (BSID)** (practitioner rated scales)

• **Caveat** – measure should be done with the practitioner along with the parent routinely
• If more in-depth detail is required, then Bayley Scales as an additional measure

• Measures based on the mother/parent:

• Criteria for measure: mild and extreme end catchment (capturing depression/anxiety and also psychosis, sensitive to change, used in adult mental health. It was recognised that it would be hard to find a measure sensitive at both ends (severe-extreme)

Extreme end measures:
- **Edinburgh Postnatal Depression Scale (EPDS)** (mother rated measure)
- **Brief Psychiatric Rating Scale (BPRS)** (practitioner rated measure)

Mild end measures of general adult mental health:
- **Kessler-10** (parent completed measure)
- **Everyday Feeling Questionnaire (EFQ)** (parent completed measure)
  (EFQ brought forward after the think tank was held)

- **N.B.** We are not expecting members to use all of these measures, or even one from every section, but if services are routinely collecting any of these, then we can look into the possibility of having a look at the data with a view of presenting it back to the service.