

GUIDEBOOK

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Nobody Slips Through the Net

Review: [Foundations for Life](#), July 2016

Nobody Slips Through the Net (or Keiner Fällt Durchs Netz, KfdN) is a German home-visiting programme delivered by trained family midwives to parents identified as having multiple risks.

Visits start postpartum and end at the child's first birthday. The frequency of visits varies according to the needs of the family.

Evidence
rating: **2+**

Cost rating: **2**

EIF Programme Assessment

Nobody Slips Through the Net has **preliminary evidence** of improving a child outcome, but we cannot be confident that the programme caused the improvement.

Evidence
rating: **2+**

What does the evidence rating mean?

Level 2 indicates that the programme has evidence of improving a child outcome from a study involving at least 20 participants, representing 60% of the sample, using validated instruments.

This programme does not receive a rating of 3 as its best evidence is not from a rigorously conducted RCT or QED evaluation.

What does the plus mean?

The plus rating indicates that a programme's best available evidence is based on an evaluation that is more rigorous than a level 2 standard but does not meet the criteria for level 3.

Cost rating

A rating of 2 indicates that a programme has a medium-low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of £100–£499.

Cost rating: **2**

Child outcomes

According to the best available evidence for this programme's impact, it can achieve the following positive outcomes for children:

Supporting children's mental health and wellbeing

Improved social development - based on **study 1**

Decreased social development and communication - based on **study 1**

Preventing crime, violence and antisocial behaviour

Reduced difficult child behaviour - based on **study 1**

Increased compliance and regulative competence - based on **study 1**

This programme also has evidence of supporting positive outcomes for couples, parents or families that may be relevant to a commissioning decision. Please see the 'About the evidence' section for more detail.

Key programme characteristics

Who is it for?

The best available evidence for this programme relates to the following age-groups:

- Infants
-

How is it delivered?

The best available evidence for this programme relates to implementation through these delivery models:

- Home visiting
-

Where is it delivered?

The best available evidence for this programme relates to its implementation in these settings:

- Home
-

How is it targeted?

The best available evidence for this programme relates to its implementation as:

- Targeted selective
-

Where has it been implemented?

Germany

UK provision

This programme has not been implemented in the UK.

UK evaluation

This programme's best evidence does not include evaluation conducted in the UK.

About the programme

What happens during delivery?

How is it delivered?

- KfdN is delivered by a family midwife or paediatric family nurse to individual families for an average of 19 sessions of approximately one to two hours' duration.

What happens during the intervention?

- During the visits, the mother and infant's health needs are addressed and mothers receive advice and support on how to respond appropriately to their child's needs. In particular, mothers are coached in how to understand and respond appropriately to their infant's cues, including crying behaviours.

What are the implementation requirements?

Who can deliver it?

- KfdN is delivered by a family midwife or paediatric family nurse with QCF-2 level qualifications.

What are the training requirements?

- The practitioner has 160 hours of programme training. Booster training of practitioners is not required.

How are the practitioners supervised?

- Two QCF-6 qualified supervisors (one host-agency supervisor and one programme developer supervisor) are recommended to support delivery. There are no booster training recommendations for practitioners.

What are the systems for maintaining fidelity?

- Training manual

Is there a licensing requirement?

There is no licence required to run this programme.

How does it work? (Theory of Change)

How does it work?

- Parents experiencing multiple hardships and/or an insecure attachment relationship in their own childhood are less likely to respond sensitively and appropriately to their child's behaviour.
- Parents receive information about their children's development, including support for understanding infant crying and strategies for implementing effective sleep routines, to increase their ability to provide a sensitive and nurturing home for their child.
- In the short term, parents respond more sensitively to their children.
- In the longer term, children will develop positive expectations of themselves and others, demonstrate improved self-regulatory capabilities.

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About the evidence

Nobody Slips Through the Net has evidence from one QED conducted in Germany.

Study 1

Citation: Sidor et al (2013) | **Design:** QED

Country: Germany

Sample: 302 mother-child dyads, 225 from the original study and 186 from the original study

Child outcomes:

Improved social development

Decreased social development and communication

Reduced difficult child behaviour

Increased compliance and regulative competence

Other outcomes:

Reduced dysfunctional parent-child interaction

Reduced use of negative behavioural strategies

Sidor, A., Kunz, E., Eickhorst, A., & Cierpka, M. (2013). Effects of the early prevention program "Keiner Fällt Durchs Netz" ("Nobody Slips Through the Net") on child, mother, and their relationship: A controlled study. *Infant Mental Health Journal*, 34, 11-24.

Sidor, A., Fischer, C., & Cierpka, M. (2015). The effects of the early prevention program "Nobody Slips Through the Net": A longitudinal controlled study in an at-risk sample. *Mental Health & Prevention*, 3, 103-116.

Available at <http://onlinelibrary.wiley.com/doi/10.1002/imhj.21362/full>
<http://www.sciencedirect.com/science/article/pii/S2212657015000240>

Other studies

The following studies were identified for this programme but did not count towards the programme's overall evidence rating. A programme receives the same rating as its most robust study or studies.

Sidor, A., Fischer, C., & Cierpka, M. (2013) Early Regulatory Problems in Infancy and Psychopathological Symptoms at 24 Months: A Longitudinal Study in a High-risk Sample. *Journal of Child and Adolescent Behaviour*, 1: 116.

Guidebook

The EIF Guidebook provides information about early intervention programmes that have at least preliminary evidence of achieving positive outcomes for children. It provides information based on EIF's assessment of the strength of evidence for a programme's effectiveness, and on detail about programmes shared with us by those who design, run and deliver them.

The Guidebook serves an important starting point for commissioners to find out more about effective early interventions, and for programme providers to find out more about what good evidence of impact looks like and how it can be captured. As just one of our key resources for commissioners and practitioners, the Guidebook is an essential part of EIF's work to support the development of and investment in effective early intervention programmes.

Our assessment of the evidence for a programme's effectiveness can inform and support certain parts of a commissioning decision, but it is not a substitute for professional judgment. Evidence about what has worked in the past offers no guarantee that an approach will work in all circumstances. Crucially, the Guidebook is not a market comparison website: ratings and other information should not be interpreted as a specific recommendation, kite mark or endorsement for any programme.

[How to read the Guidebook](#)

[EIF evidence standards](#)

[About the EIF Guidebook](#)

EIF

The Early Intervention Foundation (EIF) is an independent charity and a member of the What Works network. We support the use of effective early intervention for children, young people and their families: identifying signals of risk, and responding with effective interventions to improve outcomes, reduce hardship and save the public money in the long term.

We work by generating evidence and knowledge of what works in our field, putting this information in the hands of commissioners, practitioners and policymakers, and supporting the adoption of the evidence in local areas and relevant sectors.

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