



Multi Agency Plan (MAP)

Halton's Early Help Assessment

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Introduction

The Multi-Agency Plan (MAP) is a standardised approach to assessing the needs of a family at the earliest opportunity. MAP has now replaced CAF and is designed to be a family friendly, outcomes focused early help assessment tool. The original principles of the CAF remain; to co-ordinate support around early help in order to prevent needs from escalating. No single agency or organisation alone can achieve these outcomes alone; a multi-agency approach is required to ensure that children, young people and their families receive services that are well co-ordinated, integrated, responsive and timely.

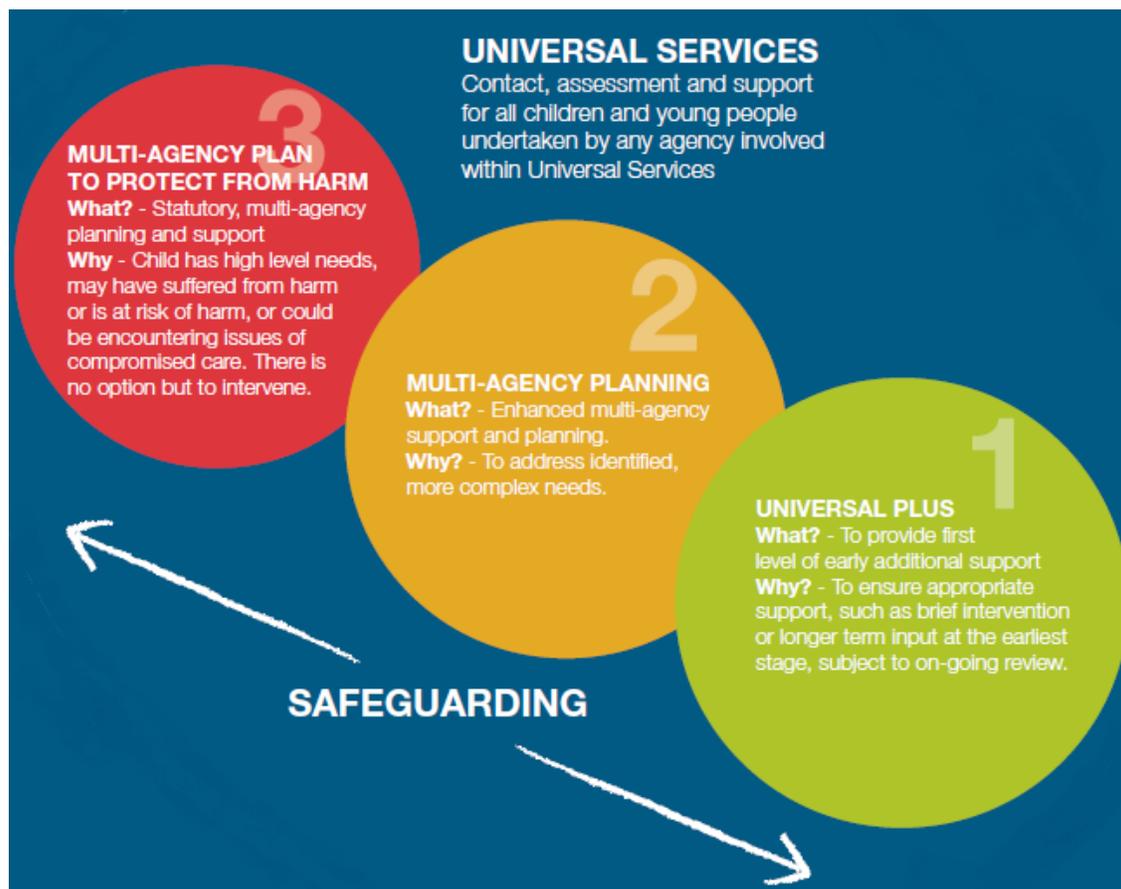
MAP is simple to use and is geared towards identifying the needs of a family at the time of assessment. MAP can and should be used by practitioners working in a wide range of agencies under the early help model in Halton. As with CAF the focus of MAP will be one of shared responsibility between all agencies working at level 2 with the shared goal of improving outcomes for children young people and families in Halton.

The strategic direction and monitoring for MAP in Halton sits with the children and families senior management division and is also part of the Children's Trust Board who have representation from LA, health and voluntary agencies. There is an Everyone Early Intervention Strategy in Halton and all agencies have agreed to a number of early help principles and practices in order to support families as soon as additional needs are identified, in order to prevent needs escalating.

All professionals working with children, young people and their families play a valuable role in ensuring Level 2 MAPs are offered when required and reviewed on a regular basis. Each MAP will have a named MAP navigator. However, as with CAF the responsibility lies with the whole MAP group to ensure that records are up to date and actions are being progressed.

Multi-agency managers have a responsibility to be aware of their team's MAP involvement and should facilitate appropriate support including supervision, training and quality assurance.

Halton's Level of Need Framework



1. **Universal Services** = Needs can be met by universal provision.
2. **Universal Plus** = Addition service required to meet the need, consider pre-MAP.
3. **Multi-Agency Planning** = MAP with a coordinated package of multiagency support
4. **Multi-Agency Plan to Protect from Harm** = Follow safeguarding processes.

The key principles of the Halton Level of Need Framework have not changed and include:

- Safeguarding runs throughout all levels
- Provide early help and support at the first possible opportunity
- The focus is on every child in Halton reaching their full potential
- Builds on existing good multi-agency working
- Supports work of all agencies and is equally applicable to all agencies
- Is flexible and fluid, allows free movement between levels as additional needs increase or reduce

- Is clear and understandable

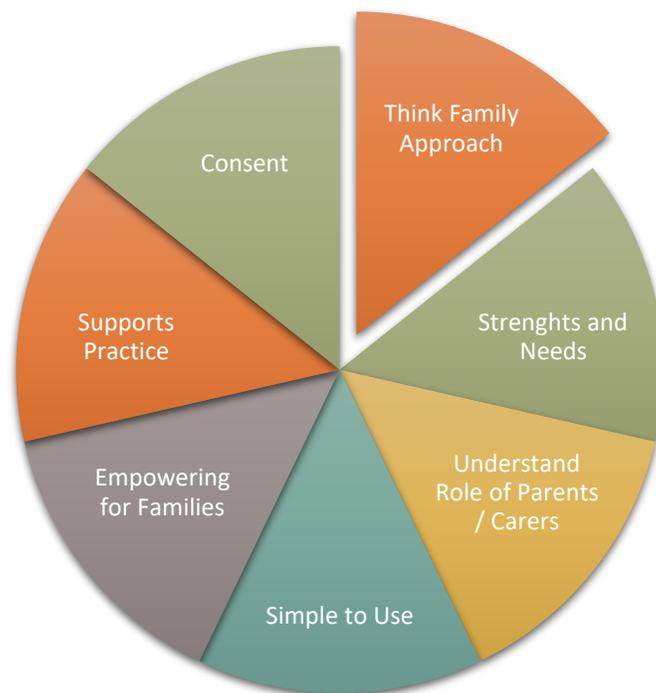
In Halton a MAP should be undertaken when it is agreed that a family's needs sit at level 2, multi-agency planning. At this level, a professional has decided that the family have a range of needs, whereby a coordinated multi-agency package of support would help. If another holistic multi-agency plan is in place, then a MAP may not need to be completed. The level of need can change, if a MAP group believe that the level of need has escalated, safeguarding procedures need to be followed and a referral made to iCART

Context to MAP

MAP offers a standardised approach to assessing family's needs and considers how these can best be met. MAP is an assessment tool that helps practitioners of all agencies undertake a holistic assessment of need, using a common format. This process allows the professionals involved in the MAP to identify an appropriate response, which can include:

- Single Agency Response
- Request for support from another Agency
- Multi-Agency Response

The principles underlying the approach to MAP are:



How can a MAP help?

MAP can help identify unmet needs for a family. It provides a structure for recording information and is a tool to demonstrate that your concern is based on evidence, not assumption. You don't have to be an expert to complete a MAP. The key is to record information available to you, keeping in mind that the MAP is a snap shot of family life as it presents now, not a historical chronology.

When would a MAP be considered?

- When you are concerned about how well an unborn baby, child or young person is progressing. Your concerns could be in relation to their health, welfare, behaviour, progress in learning or any other aspect of their physical or emotional well-being.
- When the needs are unclear, or more complex than your service can address.
- When it would help identify need, and identify services to help meet that need.

When would a MAP not be required?

- When children and families are progressing well, or have needs that are being met.
- Where you have identified needs and your service can meet them.
- When there is an alternative Level 2, holistic plan in place.
- When there are safeguarding concerns or the case is open to social care.

Examples of situation when a MAP would help?

- Where a routine post-natal visit causes the practitioner to be concerned about the living circumstances of a new born baby. Parents themselves may require additional support with issues such as finance and / or parenting support.
- Where there are concerns that a child/young person is significantly behind developmentally or a child/Young Person is not progressing in learning as expected.
- Where a practitioner believes a child may have additional needs and wants to understand better what they are and what the appropriate response is. For example, where a school or early years setting perceives a child is being affected by elements such as domestic abuse or health which are not necessarily related to Special Educational Needs and or Disability (SEND).
- Where a young person is displaying aggressive behaviour, e.g. carrying a knife, or in relation to bullying, truancy, withdrawal or other behavioural and emotional issues.
- Where a child/young person is exhibiting problematic or anti-social behaviour and where the underlying cause may be hidden (e.g. substance abuse/misuse).
- Where a child/young person appears to have additional needs, but is unlikely to be eligible for support under existing threshold criteria for specialist services.

Steps Involved

Step 1: Preparation - Discussion with the family around the issues raised so far and what you can do to support. Discuss with others e.g. Line Manager and other Agencies already involved. Whether to do the Assessment is a decision you should make jointly with the family. After you have gained consent, the initial MAP meeting should be arranged, where the MAP assessment should be discussed and a date agreed for all professionals to contribute their information towards the assessment. The MAP should be completed within 4 weeks, in order to prevent drift and further escalation of needs.

Step 2: Completion - talk to and / or observe the Child, Parents/Carers and Siblings. If there has been a previous holistic plan, utilise this information, with the family's permission. At the end of the discussion you should have a better understanding of the family's strengths, needs/worries and what can be done to help. At the initial meeting the MAP group and the family, including the child/young person can agree on identified actions.

Step 3: Service Delivery - you deliver on your actions. You request support from other Agencies, using the MAP to demonstrate evidence of need. Progress is monitored using the Delivery Planning and Review Process and Documentation. The review cycle should then be implemented up until time of closure.

Step 1:

If the child is old enough to understand and competent to make their own decision, they should be the one to decide whether they would like to be supported via a MAP. Always encourage them to discuss things with their parents, however, and also ensure that parents and carers' are considered. Check if the family are already being supported via a holistic plan and request support via the relevant locality team if

needed. If you decide a MAP would be useful, seek agreement from the family and consent to proceed. After you have gained consent, you should arrange the Initial MAP meeting within 2 weeks. At this meeting the completing of a MAP should be discussed with all professionals involved and agreed what information each professional will input onto the MAP. A date for completion should also be agreed at this meeting, no later than 4 weeks in order to prevent drift and further escalation of needs.

The Navigator role for the MAP will also be discussed and agreed at this meeting

Step 2:

The MAP assessment discussion has six parts:

1. Explain the purpose of the assessment, why you are recording information and what will happen to it. Ensure the family understand that the MAP is a resource to help them access services. There is no stigma attached. Check they consent to what is proposed. If the child is old enough to understand what you are proposing, they should give consent themselves. Do not assume that children with a disability or learning disabilities are not capable of understanding. Ensure that you capture the family's view throughout the discussion using appropriate techniques.
2. Check basic family details are correct.
3. For each section, concentrate on the presenting issues with consideration for the whole child and family and not just your own agency focus. You should also focus on areas of strength in the family, not just needs. The conversations should not be threatening and supplementary methods of gathering information can be considered e.g. assessment tools which, are available at <https://children.haltonsafeguarding.co.uk/common-assessment-framework/>. Scaling judgement to be agreed between the family and professional however, what is important here is the direction of travel rather than the actual score.
4. Record, with the child or parent, your overall conclusions and the evidence behind them. Agree what you say with the child or parent and record any major differences of opinion. Identify solutions and actions. Try to focus on what the child and family can do for themselves. If they identify additional support, where can this be sourced or highlight that this will be a task as part of the plan.
5. Agree who will do what and when you will review progress. Record the child/young person's or parent/carer's consent to share the assessment information with other agencies and any limitations on that consent. Give a copy of the assessment to the child or family and explain that they can show it to other services if they wish to, so they don't have to keep repeating their stories from the beginning.

Step 3:

A MAP is closed due to one of the following reasons:

- The needs of child / young person have been met.
- The child / young person has made the transition into adult services.
- Discontinued – child / young person / family – disengaged from services / MAP no longer required.
- Episode superseded by alternative holistic assessment process.
- The child /young person has moved out of area.
- The child / young person has died.

MAP Documentation

In Halton, we use an electronic MAP which, sits within the Eclipse database. Practitioners need to access Eclipse training via contacting Eclipse.helpdesk@halton.gov.uk. The team will organise training, advice and support with accessing and using the system. There will also be MAP clinics held throughout the year to offer ongoing support.

Halton MAP Documents include:

1. **MAP - Multi-Agency Plan** – all sections to be completed, although some sections will be more detailed according to need. Ensure that the child's/children's view and Parent/Carer's view is explicit throughout. Documents may be uploaded as evidence of this, for example: Wishes and Feelings from a child. To be completed one month after it has been consented to. Scaling judgement to be agreed between family and professional however, what is important here is the direction of travel rather than the actual score.
2. **Review and Delivery Plan** – To be completed after the initial MAP assessment. Needs to detail key issues/progress since last Review, key actions agreed and the views of the family. If the Child is not present at the meeting, their view needs to be sought, via an appropriate Professional and added to the Review before submitting. Indicate if there is a change in Navigator and whether or not the MAP is closed at the meeting. **NB:** there needs to be Multi-Agency agreement for the MAP to close. Additionally, agree the current level of need from the Halton Level of Need Framework with all attendees and include this within the Review.

Actions to be SMART and have clear outcomes. Requires updating at each subsequent Multi-Agency review MAP meeting i.e. actions closed, updated and new actions added. Ensure the date is completed and subsequent dates of reviews also added.

3. **MAP Closure Form** – this needs to be completed when there is Multi-Agency agreement for the MAP to close. The level of need needs to be stated and views from Professionals regarding the MAP.

The Navigator

The Navigator is the person responsible for co-ordinating the actions identified in the assessment process and for being a single point of contact for Children/Families with identified needs.

The Navigator is responsible for delegating these tasks to other Agencies and sharing the responsibility within the MAP meeting.



Halton's Locality Teams can offer time limited support to the Navigator on MAP processes, which can be varied according to knowledge, skills and experience. Examples of support which can be offered includes, identifying an appropriate

Navigator, guidance with completing paperwork, support with completing the assessment, guidance on who to invite to Multi-Agency meetings, support with chairing meetings and exploring options when multi-agency MAP groups feel that the MAP is not achieving intended outcomes to bring about positive change for a family.

Any professional from a multi-agency MAP group can attend the weekly Working Together meeting to discuss any barriers being faced in achieving the desired MAP outcomes as follows:-

- Runcorn – Every Wednesday 09:30 at Glendale Family Centre
- Widnes – Every Friday 09:30 at CGL
- If professionals want to discuss a case, a summary of needs should be sent to the relevant Locality Team's inbox:

Runcornlocalityteam@halton.gov.uk

Widneslocalityteam@halton.gov.uk

Multi-Agencies Roles and Responsibilities



NB: when you undertake the Navigator role you are NOT responsible or accountable for the actions of other Practitioners or Services. If a Navigator encounters problems or barriers with other Services, then the HBC Escalation

Policy should be referred to and implemented as appropriate.

Agreeing who will be the Navigator

The practitioner who originally identifies the unmet needs and initiates the MAP takes on the role of Navigator initially. For most families with additional needs requiring support from a range of services, their Navigator will be drawn from the range of practitioners currently delivering their support. They could be based in the public, private, voluntary or statutory sector. The wishes and feelings of the family need to be considered also when agreeing the Navigator role.

Changing the Navigator

Although it is preferable that there is continuity in the person undertaking a Navigator role with a family, there may be occasions whereby a change in Navigator is required such as:

- Where the allocated Navigator is changing or leaving employment.
- Where the employing agency of the current Navigator is ceasing involvement with the family. This could be because needs have been identified as complex and a statutory agency has become involved, or because needs have become less complex and their involvement is no longer necessary. It could also be because a family disengages from the service currently providing the Navigator role.
- Where the identified needs change significantly and it would make sense for a professional from another agency to take on the role (for example, where initial needs were health related but these are resolved and the major need is then identified as education).

Procedure for Changing the Navigator

It is the joint responsibility of the new and old Navigator, to ensure the family is kept fully informed of the changes, including the reason for the change and ensure they are given written contact details of the new Navigator.

Any changes to the allocated MAP Navigator should be agreed by the family and professionals involved with the MAP plan. It is best practice to plan changes in the Navigator as soon as possible, to enable a smooth transition. Ideally, planned changes should be agreed and implemented at a multi-agency MAP review meeting.

This will give everyone involved with the MAP the opportunity to contribute to the decision, around who is the best person to take on the Navigator role.

If there is a disagreement regarding who should take on the role, this should be resolved through open discussion and consensus, with professionals focussing on the needs of the child or young person. If no resolution can be found, then the practitioner should speak with their Line Manager and the relevant Locality Team can be contacted in order to present the case at a Working Together Meeting. The HBC Escalation Policy should be implemented whenever appropriate, including when no resolution can be found.

Once agreement has been reached about who should take over as Navigator, the following actions should be taken:

- The new Navigator should ensure that the child or young person and their parents and carers have their contact details.
- The new Navigator should also ensure that all other practitioners involved in the MAP process are advised of the changes and have their contact details. This is particularly important regarding those practitioners who were not present when the new arrangements were discussed.
- MAP Administration should be notified of the change by the old Navigator as soon as the new Navigator is agreed, to enable the database to be updated please email E-MAP@halton.gov.uk
- Include the details of this change on the MAP review documentation.

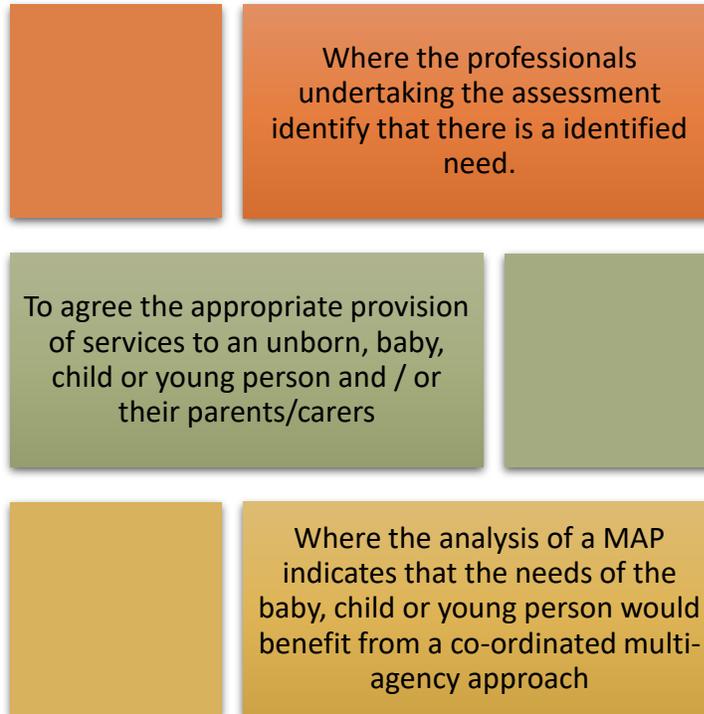
Dealing with Practitioners Reluctant to Engage in an Agreed Plan / Disputes

In the first instance, it may be possible to resolve any differences by holding a meeting between all those involved. Additionally any professional from the multi-agency MAP group can contact the relevant early intervention Locality Team in order to request to present the case at the Working Together Meeting. At this meeting, multi-agency views are presented in order to try to resolve barriers to achieving outcomes via the MAP process.

If the above do not enable a solution to be found, the HBC Escalation Policy should be referred to and implemented appropriately.

MAP Meeting Guidance

A Multi-Agency meeting should be arranged in the following circumstances:



Arranging the Initial Multi-Agency Meeting

The meeting should be arranged by the practitioner who has identified that there are unmet needs within the family. The meeting should be held within 4 weeks of when a MAP assessment was agreed on and include the Child/Young Person, their parents/carers, the assessor, the Navigator (if identified) and representatives from all agencies which are providing services to the family, or which may be able to support the family.

Consideration should be given to the timing of the meeting to facilitate the attendance of family members. The venue of the meeting should be familiar to the family, easily accessible and able to provide comfortable, family friendly surroundings.

Attendance at Multi Agency Meetings

The following people should be invited to attend the meeting:

- All practitioners who have contact with the child or young person. Where the family request that particular practitioners or agencies are not invited to attend, this should be respected. There should be communication between the Navigator and those agencies to ensure they remain involved in the MAP process and provision of services.
- Parents, carers & children of a sufficient age should be invited to attend the meeting. If a child chooses not to attend the meeting, a suitable professional should be appointed to gather their view.

Chairing the Meeting

Any professional from the multi-agency MAP group can chair the meeting. It is NOT the sole responsibility of the Navigator to chair meetings. The Navigator should request that other professionals chair.

There is a standard Agenda, which will assist in the chairing of the meeting. The role of the chair is to



NB: Taking notes and updating documentation should be undertaken by all members of the MAP group. Roles should be agreed prior to the meeting.

Review meetings

The purpose of review meetings is to review the MAP delivery plan to ensure that support services are in place and are meeting the needs of the baby, child or young person. The first review meeting should be held within three months of the initial multi-agency meeting, and future review meetings agreed at intervals as appropriate (usually 8 -12 weeks however this can be varied according to need and the rationale for timescales can be evidenced within the review documentation).

The following issues should be discussed at review meetings:

- Progress against actions agreed on the MAP action plan.
- Resolution of any issues delaying progress against action plan.
- Whether services are meeting the needs of the baby/ child/ young person.
- Whether services need to continue.
- Whether additional needs have been identified.
- Whether additional or alternative services need to be provided.
- Whether there are any unmet needs – all gaps in provision should be logged on the review form.
- The wishes and feelings of the child and parents/carers. NB: if the child chooses not to attend the meeting their 'voice' must be gathered out of the meeting and recorded within the review.
- Progress and additional SMART actions should be recorded on the delivery plan and a review document should also be completed at each meeting.
- To review and agree where needs presently sit on the Halton level of need framework?

Cross Boundary Issues

Cross boundary issues may relate to the boundaries between services within Halton or geographical boundaries between Local Authorities. In some circumstances children and young people may move between Boroughs during periods when a MAP is active, or be resident in one area whilst accessing services in another.

Issues that arise between services within Halton should be minimised as the common processes are adopted by all agencies and services and therefore a consistent approach is encouraged. If disagreements arise in relation to the Navigator role, discussion with appropriate line managers should take place and the Escalation Policy should be implemented if necessary.

In circumstances where the issues arise across geographical boundaries these may be more noticeable as the implementation of the MAP varies from Authority to Authority. If this situation occurs, open and positive communication between practitioners and managers will often clarify differences in language. Clear identification of roles and responsibilities at multi agency meetings and following the MAP processes will minimise issues arising.

Should a family you are Navigator for move out of the borough, please contact the new LA, in order to ensure that the MAP / relevant support, transfers with the family. Similarly, other Local Authorities may contact Halton via iCART, in order to ensure that a MAP started in another area continues in Halton. MAPs on different formats need to be accepted in such instances.

Transition into Adult Services

Individuals with additional needs may continue to require services beyond the age at which they are entitled to them, as part of children's services (subject to appropriate assessment). There are provisions in place for some young people reaching the threshold between child and adult services, namely:

- an assessment of the needs of young people with learning difficulties and disabilities up to the age of 25, to help them make an effective transition to adult services (including MAPs)
- young people in and leaving care continue to get help from Children's Social Care – via their personal adviser – until they reach 21, or for as long as they remain in higher education

The planning process that follows a MAP can ensure that there is a clear plan for addressing any issues identified. Identified professionals from the MAP group can play a key role in helping a young person make a smooth transition, in particular by:

- ensuring the young person understands the support he or she is entitled to as a young adult and what this means, practically, in the context of local service arrangements;
- include adults services in review meetings prior to transfer
- accompanying the young person to introductory meetings with adult services
- sharing MAP information with adult services where appropriate and with consent

It will also be helpful for MAP groups to be familiar with how to work with relevant adult services, including awareness of:

- the circumstances in which a young person is likely to receive services from adult teams
- the type and level of services available locally / policy & practice guidelines

Auditing and Quality Assurance

The MAP will be part of Halton's children and families quality assurance framework. There will be four multi-agency safeguarding audits per year. Alongside this there will be two thematic audits on MAP assessments. Divisional Manager, Principal Managers and Senior Early Help Workers from Team around the Family will also undertake internal audits and quality assurance monitoring on a monthly basis. The number of MAP's in the authority will be monitored through monthly reporting.