



Early Help Assessment Practice Standards

These Practice Standards were devised with representatives from education, health and internal council staff to support professionals when completing EHA's.

- You would ordinarily complete an Early Help Assessment (EHA) if –
 - *The family request it*
 - *There is more than 1 agency involved*
 - *The family are experiencing 1 or more problems*

NB - Where there is only 1 agency but the family are experiencing multiple problems, completing an EHA allows you to involve other agencies in the process that may then be able to offer the family some support, so it is still worth doing one.

- An EHA helps to delve deeper into the problems behind the symptoms that are being presented.
- An EHA is your mechanism to evidence the intensive work you may already be doing with the family to prevent them from needing more specialist services - if the case needs to be escalated you may be asked to do an EHA before it can be progressed.
- If you are receiving a case from statutory social care where they are requesting you continue the work under an EHA, ask them to complete the partial EHA paperwork, and where possible convene a review meeting to formally do this. This is a better handover for the family who don't have to be re-assessed and less work for you because you only need to convert the plan into the review paperwork thereafter.
- An EHA is not a referral document, it is as tool to assess the family at an early stage to prevent the problems from worsening and enable the family to solve their problems for themselves. It is therefore important to start it at the earliest opportunity, before the situation deteriorates.
- Write your EHA so that an *alien* who doesn't know the family could at any point in time understand what is going on for the family.

See below for further guidance;

Before starting an EHA contact the Early Help Coordinators (email earlyhelpassessments@northtyneside.gcsx.govp.uk or 0191 6438178) to check whether there is already one in place, which may in turn save you from having to complete one.

North Tyneside Early Help Assessment

Agreement of Service Form

Remember this Form needs to be filled in as part of the assessment, as it gives you permission to contact other agencies

Parent/Carer (with parental responsibility)

Signature:

Sell agreement!

Very few families will refuse consent if it's sold to them in a positive way e.g. "we want your consent so that we can involve other agencies who may be able to help you resolve some of the problems you are experiencing".

- I have been given and understood the leaflet on Information Sharing and in signing this form I am agreeing to receiving the service and that my personal information and that of the children I have parental responsibility for, can be shared with other agencies as required, to ensure I receive the best service and support.
- I agree to North Tyneside Council sharing my household data with other Government bodies *(please cross out if you do not agree to this data sharing)*

Signed.....Name.....Date.....

Signed.....Name.....Date.....

Signed.....Name.....Date.....

Signed.....Name.....Date.....

Please ensure all adults in the household have signed this agreement of service form

When completing an EHA with the family, explain what it is you are doing and why, show them the EHA paperwork, consent leaflet etc. and talk them through it so that it's not intimidating for them. Explain that this is nothing to do with social care; this is about recognising they're struggling and may need some extra support before things deteriorate further. It may take more than one attempt for the family to agree/consent so please don't give up, families can be distrusting of services based on previous negative experiences they may have had. The family may need 'winning round'. If at first you don't succeed, try, try again!

This is your family's assessment and should be completed with the **whole** family to include their views, *including all the children in the household*. The Team Around the Family (TAF) is more likely to be effective if they understand the purpose and play an active role from the beginning.

Family Name

Surname

Ideally see the family home. This could be any member of the TAF e.g. school haven't seen the family home but the health visitor has. You could be missing

Family Address	19 Home address
Telephone no	Telephone numbers
Post Code	NE27 0BY

Children/young people involved (A dependent child is defined as an individual aged under 18)									
Name	DOB	M/F	Relationship	Religion	Ethnicity	1 st Lang	Disability	School/Nursery	EHCP
Child 1	12.07.2006	M	son	Catholic	W/B	Eng	Y/N	Secondary school	Yes
Child 2	12.12.2010	F	daughter				Y/N		NO
Child 3	01.12.2015	M	son						
							Y/N		

An EHA is a whole family assessment which means you should involve all the children and adults in the household, and it may extend to relatives outside of the household if they are a mechanism of support to the family.

Who is important to this family?

(All those individuals aged 18 or over, living in or outside of the family home)

Name	DOB	M/F	Relationship	Religion	Ethnicity	1 st Lang	Disability	NI Number	Address
Adult 1	22.08.1956	M	Father	Catholic	W/B	Eng	Y/N	JT891018G	As above
Adult 2	28.12.1976	F	Mother	Buddhist	W/I	Irish	Y/N	JJ121212C	As above
							Y/N		
							Y/N		
							Y/N		
Details of any disability in the family			father has motor neuron child 1 has ADHD		Do any of the children have a caring responsibility? Y/N				
Who has parental responsibility?			Both parents		<p>If Yes, then please ask the following questions:</p> <ol style="list-style-type: none"> Has a Young Carers Needs Assessment been done? Is there someone in your family with a disability or illness? yes (if yes) Can you tell me more about this/give me some more information e.g. mental health problems, drug and alcohol, terminal illness etc. How do you manage on a day to day basis? Carer coordinator support <p>What type of things do you do for your (mum, dad, sister, brother, grandmother). How do you help them? Help cooking and cleaning</p> <p>Please ensure this is reflected in the action plan</p>				

What family, friends or people in the community could be involved in a 'Family Network' of approx. 3-5 who could offer the family emotional and/or practical support?

Name	DOB or age	M/F	Relationship	Religion	Ethnicity	1 st Lang	Disability	Address
Neighbour 1	Age 32	M	Family friend	catholic	Indian	Punjabi	Y/N	18 home address

Paternal Granny	Age 83	F	<p>You or another member of the Team Around the Family (TAF) should see/speak to all family members and consult with all agencies involved e.g. if you are involved with the younger child in the family, you would still involve the school/health professionals for the older child.</p>					
Maternal aunt	Age 20	F						
							Y/N	
							Y/N	

Services involved with the family (please complete as fully as possible)

	<u>Name and role</u>	<u>Address and contact details</u>	<u>Contributed to the Assessment</u>
GP	Dr Tom	Willbottle Surgery	Yes
Nursery/School(s)	Head of Year	Secondary school	Yes
Nursery/School(s)	Class teacher	Primary school	
Nursery/School(s)	Nursery worker	Nursery setting	Yes
Midwife	N/A		Yes/No
Health Visitor	N/A		
Public Health School Nurse			Yes/No
CAMHS			Yes/No
Care coordinator	Jimmy John	adult social care	
consultant	Mr doc	Hospital	

Presenting Issues:

1.	Debt and finances.
2.	Child's challenging behaviour at home.
3.	Child's behaviour at school – Education Behaviour.
4.	<p>Write the EHA with the family, ideally in the family home. The EHA can be hand written and it can be done during a TAF meeting if easier.</p> <p>Ensure there is a clear purpose/goal(s) for the EHA.</p> <p>In line with SOS, use simple language/terminology throughout that the family can understand.</p>
5.	
6.	

*Start in the middle column with what's working well, before moving to the worries

What are we worried about?	What's working well?	What needs to happen?
<p>There is lots of rubbish in the front garden which is stopping the children being able to play out.</p> <p>Attendance for all children is below 89%.</p> <p>Family is at risk of eviction as Adults are not paying rent on time.</p> <div data-bbox="58 549 853 1098" data-label="Diagram"> </div>	<p>An appointment has been arranged at the customer service centre for financial advice.</p> <p>Father's care coordinator has started a care assessment and looking at what support can be implemented to reduce the caring role and ensure their's day to day needs can be met.</p> <div data-bbox="835 671 1561 991" data-label="Text"> <p>Remember that an EHA is a holistic assessment that considers the needs of all the children/family members <i>alongside</i>;</p> <ul style="list-style-type: none"> • The home environment • Health • Education • Parenting etc. </div>	<p>Children are able to play outside in a safe environment.</p> <p>Adults paying rent and all bills on-time.</p> <p>Children are not burdened by a caring role.</p> <p>Children need to be in school every day so they are able to get a good education and make friends.</p>
<p>Danger Statement/s – We are worried about the children's appearance, they are not always in school and professionals don't know where they are or if they are safe.</p>		<p>Safety Goal/s – Children are in school every day learning and enjoying lessons, making the most of their education. Adult 1 is well cared for and has care support in place. Bills are being paid and a budget plan is place.</p>

How have you included the voice of all the children?

Make sure you capture the child's voice, or observations for a non-verbal child. Children can be invited to a TAF meeting, they can write their views on the form or you can use Signs of Safety (SOS) e.g. 3 Houses and any other children's tools you have; include these in the paperwork when submitting it to the EHC team. Encourage other members of the TAF to use the tools with the children they are connected with to ensure the meeting captures all of the children's voices.

Scaling

On a scale of 0 – 10, where 10 means we are not worried at all about this situation and 0 means we are very worried, I currently rate the situation at.... **8**

Because... **I think most things are ok, I just want dad to get help that he needs. I know school is important but some days I just want to be with my dad, I will try to get my attendance better.**

Name of person scaling- Child 1

On a scale of 0 – 10, where 10 means we are not worried at all about this situation and 0 means we are very worried, I currently rate the situation at...**5**

Because.... **I am worried about how much school the children are missing and this is impacting on their education, attainment and friendship groups.**

Name of person scaling- Head of year – secondary school

On a scale of 0 – 10, where 10 means we are not worried at all about this situation and 0 means we are very worried, I currently rate the situation at...**3**

Because **I feel so bad that my family have to look after me all the time, I can see them finding it hard and the kids are so worried about me they don't like going to school. I am worried they won't get a good education but not sure how we can make this better**

Name of person scaling- Adult 1

On a scale of 0 – 10, where 10 means we are not worried at all about this situation and 0 means we are very worried, I currently rate the situation at.....

Because.....

Name of person scaling-

When scaling 0-10 remember that 0 is what you're worried about and 10 is what you would need to see to be less worried. Your number may reflect how many signs of safety there are. Spell out what the bottom line is.

the situation

NB please remember this should be completed individually with everyone involved with the family.

Remember this needs to link to the 3 columns.

Action Plan & Review for: Surname family (Enter Family Name/EHM Number) **Date: 09/08/2018**

(Include the *specific* actions required to meet the needs identified in the 3 columns, including details of actions relating to individual family members and who will carry them out)

Action Plan			
Why are we doing this?	What needs to happen?	Who will do this?	When will this happen by?
Supporting the family to avoid eviction and reduce debts.	Jimmy John to meet Adult 1 & Adult 2 to attend Customer service Centre for a benefits check on Monday. Jimmy John to meet with Adult 2 on Tuesday to make a budget plan.	Jimmy John, Adult 1 and Adult 2	Monday and Tuesday next week, then review with Adult 1 and Adult 2 to agree next steps
Increase all children's attendance – initially to 90% - All children	From Monday all children to be in school every day unless they have a doctor's note. Starting tonight Adult 1, 2 and all children to get school uniform and bags ready for the next day.	Adult 1 and Adult 2, All children	Starting Monday – by next TAF all children's attendance to be at least 90% Monday HOY to agree action
Increase all children's attendance – initially to 90% - Child 1	HOY to meet with Child 1 at 9am on Monday to make an attendance action plan. Adult 1& 2 to show Child 1 how to use alarm clock. Starting today Child 1 to set the alarm clock to wake self-up every day at 7.30.	<p>Make sure you action plan is SMART, add dates and specific actions to enable the family to achieve the objective e.g. if school attendance needs to improve, break this down into actions that will help to improve this, with timescales.</p> <p>Ensure that the actions reflect the purpose of the EHA and are agreed by all.</p>	
<p>Make sure you capture the child's voice, or observations for a non-verbal child. Children can be invited to a TAF meeting, they can write their views on the form or you can Signs of Safety (SOS) e.g. 3 Houses and any other children's tools you have, feel free to include these in the paperwork when submitting it to the EHC team.</p> <p>Encourage other members of the TAF to use the tools with the children they are connected with to ensure the meeting captures all of the children's voices.</p>			

Next TAF Review date: 20 September 2018, 9am at secondary school _____

Who has completed this form?

Author Name & Role: _Head of Year_
Author Address: _Secondary School_
Author Telephone No: _0191 2862121_
Author Email Address: _headofyear@secondarys_
Date form completed: __09/08/2018__

Wherever possible, the person who best knows the family should complete the EHA, this maybe someone that the parent has approached to ask for help or someone that the parent later nominates. The lead can be transferred at a later date if required.

Once you have completed this form, if you have secure email, please send to:

earlyhelpassessments@northtyneside.gov.uk

Alternatively, please send a copy via post or courier to:

Early Help Assessment Team, North Tyneside Council, Quadrant East, Silverlink North, Cobalt Business Park, North Tyneside, NE27 0BY.

Courier code: D1

Don't forget to send a copy of the EHA, any review/exit paperwork to the Early Help Coordinators (EHC) via earlyhelpassessments@northtyneside.gov.uk otherwise someone else may end up doing a secondary EHA on the family because they didn't realise one was already in place

Author please complete –

If you would like and advice, guidance or help troubleshooting with completing this EHA, help identifying what services may be available or help with the Early Help Process please call the Early Help Team on 0191 6438178

(Please remember to continue to follow the EHA process. This is not a referral form)

Fill in all the boxes including the author, date and signatures.

Ensure parents get a copy of the EHA by at least the next TAF meeting.

An EHA could take up to 6 weeks to complete and the first TAF should happen within 6 weeks, with reviews every 6-8 weeks thereafter. There may be exceptions to this so just ensure the EHC team is aware to expect a delay and the reason for this.

EHA / TAF 6 weekly review and plan for:

Date: 20/09/2018

Review number: 1

Date of original EHA: 09/08/2018

Summarise the minutes of the TAF meeting directly on to the EHA Review template, which can be hand written and done during the meeting if easier.

The family should attend the TAF so ensure they are invited

Name of the family	Date of Birth
Child 1	12.07.2006
Child 2	12.12.2010
Child 3	01.12.2015

Tell the EHC team when changes happen e.g. closure, change of lead worker etc.

Name of the lead worker	Head of Year – secondary school
Contact email and phone number	

Members of the TAF (insert lines as required)			
Name	Agency	Contact details	How have they contributed to this review?
Jimmy John	ASC		Attended TAF
HOY	Secondary school		Attended TAF
Adult 1	parent		Attended TAF
Adult 2	Parent		Attended TAF
Child 1	Young person		Attended TAF

Family/ child / young person thoughts and views? (attach 3 houses or other if appropriate)

See attached 3 houses for all children. Adult 1 and 2 attended TAF and said they feel better now the budget plan is in place and finances are more settled.

What's changed since last time?

What are we worried about?	What's working well?	What needs to happen?
<p>The garden is still a mess, children are not getting enough time or opportunities to play out or socialise with their friends.</p>	<p>Adult 1 has started receiving care at home which is helping Adult 2 to have more time to keep house clean and ensure the children have clean clothes.</p> <p>All children's attendance has improved</p>	<p>Explore ways to enable the children to get out and play with friends or groups/activities that they want to take part in.</p>
<p>The EHA doesn't have to be a stagnant document, it is an on-going, living assessment that can change and be added to (but ensure a copy of your review is sent to the EHC team for logging).</p> <p>Use the review document to record any changes, new worries, what has worked well and anything that needs to be changed</p>		
<p>Review of/amendments to Danger Statement/s –</p>	<p><i>Please record in detail, not bullet points. Use additional sheets if required. Remember to reflect the voice of the <u>child/ren</u>, use additional children's tools if required, which can then be attached e.g. 3 Houses.</i></p>	<p>Review of/amendments to Safety Goal/s –</p>

On a scale of 0 – 10, where 10 means we are not worried at all about this situation and 0 means we are very worried, I currently rate the situation at.... **9**

Because... **my dad is much happier now he has help at home and my mam is way less stressed. I am in school more which means head of year is off my back a bit.**

Name of person scaling- Child 1

On a scale of 0 – 10, where 10 means we are not worried at all about this situation and 0 means we are very worried, I currently rate the situation at. ...**7**

Because.... **It is great child 1 has got attendance up but he still has a way to go.**

Name of person scaling- Head of year – secondary school

On a scale of 0 – 10, where 10 means we are not worried at all about this situation and 0 means we are very worried, I currently rate the situation at...**5**

Because **I like the new carers and I can see they are helping, the kids are attending better but we still need help to sort the garden.**

NB - please remember this should be completed individually with everyone involved with the family.

Updated Action Plan & Review

Date: 20/09/2018

Action Plan & Review for: Surname (Enter Family Name/EHM Number)

(Include the *specific* actions required to meet the needs identified in the 3 columns, including details of actions relating to individual family members and who will carry them out)

Ensure actions continue to be SMART and relate to the issues identified.

Action Plan			
Why are we doing this?	What needs to happen?	Who will do this?	When will this happen by?
Enable the children to access groups and activities that they enjoy.	Jimmy John to meet with all children to find out what groups or activities they would like to take part in. then help them to find where they could access groups in the community. Jimmy John to chase up Young carers referral	Jimmy John and all children	Jimmy John to meet with all children by Friday next week. Children to attend first group or activity by next TAF. Jimmy John to speak to young carers by Monday.
<div style="border: 1px solid black; padding: 10px; background-color: #e0f2f7;"> Don't forget to send a copy of the EHA, any review/exit paperwork to the Early Help Coordinators (EHC) via earlyhelpassessment@northtyneside.gov.uk otherwise someone else may end up doing a secondary EHA on the family because they didn't realise one was already in place </div>			

I have contributed to, and agreed the content of this plan:

Child/young person's signature *Child signs here*

Date: 20/09/18

Parent's/Carer's signature *parents sign here*

Date: 20/09/18

Lead Worker's signature *lead worker signs here*

Date: 20/09/18

Next review Date: 01/11/2018

EHA / TAF Closure Summary for:

Date of closure: 01/11/2018
Date TAF started: 09/08/2018
Date of last review: 20/09/2018

Name of the child	Date of Birth
Child 1 Surname	12.07.2006
Child2 Surname	12.12.2010
Child 3 Surname	01.12.2015

Name of the lead worker	Head of year
Contact email and phone number	Secondary school and phone number

Meeting attendance				
Name	Agency	Contact details	Invited?	Attended?
Jimmy John	ASC	Details here	yes	yes
HOY	Secondary school	Details here	yes	yes
Adult 1	parent	Details here	yes	yes
Adult 2	Parent	Details here	yes	yes
Child 1	Young person	Details here	yes	yes
Dr Tom	GP		yes	no

When you reach a stage where there are no actions nor any further work to be done, close the EHA by completing an EXIT form and sending this to the EHC team to log.

Closure Summary - please summarise work done, progress made:
Summary of what work has been undertaken with the family that has led to improvement in outcomes.

EHA / TAF closed due to all needs being met.	Y/N						
		ASB/Crime:	Yes / No / n/a	Education:	Yes / No / n/a	Child in Need:	Yes / No / n/a
		Worklessness / Financial Exclusion:	Yes / No / n/a	Domestic Abuse	Yes / No / n/a	Health:	Yes / No / n/a
EHA / TAF closed due to most needs being met and a single agency will continue support.	Y/N						
EHA / TAF closed due to transition to Social care.	Y/N						
EHA / TAF closed for another reason (please specify).	Y/N						

How effective has the EHA / TAF been in improving life for this family?

Parent / Carer Views

Child / Young Person's Views	Don't forget to send a copy of the EHA, any review/exit paperwork to the Early Help Coordinators (EHC) via earlyhelpassessment@northtyneside.gov.uk otherwise someone else may end up doing a secondary EHA on the family because they didn't realise one was already in place

I have contributed to, and agreed the content of this plan:

Child / young person's signature	<i>child signs here</i>	Date: 01/11/18
Parent's / Carer's signature	<i>parents sign here</i>	Date: 01/11/18
Lead Worker's signature	<i>lead worker signs here</i>	Date: 01/11/18