

The Early Help Assessment for Families

Guidance
for practitioners
working with children,
young people and
families

Overview

The Early Help Assessment for children and young people is one of the elements of integrated frontline service delivery. It replaced the Common Assessment Framework (CAF) in April 2016.

The Early Help Assessment is a shared assessment for use across all children's services in the East Riding. It aims to help the early identification of children and young people's emerging needs and promote co-ordinated service provision to meet them. There is an expectation that partners work together to assess, plan and support families to prevent problems escalating to the point where statutory intervention becomes necessary. The assessment is a family based assessment; this means that each child's needs / strengths can be captured within one assessment.

The Early Help Assessment for Families is a way of gathering information about children / young people and families in one place and using that information to help decide what type of support is needed. People from different organisations will talk to each other, share information and work together with the family's consent. This means that you will have to explain the reasons for the assessment, and the processes you will be using to talk to other practitioners involved. At the end of the assessment process you will also have to ask for the family's consent to share the actual document with those who are involved.

The key to a robust assessment is to work together with the individuals in the family: adults, children, and young people and with all of the other professionals involved with the family. Each of you will hold different pieces of information which will contribute to the whole assessment. You will not be able to complete an effective assessment without the input of the family members and the other professionals involved because you will only hold some of the information yourself.

This means that families won't have to keep repeating themselves and the right support can be identified quickly. An assessment can only be completed with the agreement of the family and / or young person. It should always be undertaken in a sensitive and supportive manner in close communication with the family. It may take some time for the family to understand exactly what an Early Help Assessment is and they may therefore initially be resistant. It is a way for you and other professionals to understand what a family needs and how best that can be provided.

Completing an assessment is not a form filling exercise. It is part of the Team Around the Family approach which enables the identification of strengths, areas for change and how best needs can be met.

It is a dialogue with the family and with other professionals who work with the family in order to bring together all the information about the family's, and the individual's needs in order to ascertain how best to meet those needs. The form is simply a way of recording this. You will already be communicating with the family to understand their needs in the course of your work. The Early Help Assessment is designed to be completed together with all agencies working with all the children, the adults in the family and in order to build a complete picture of the family's strengths and needs and to pull together a multi-agency plan.

Record the information using the Early Help Assessment form. You can download a blank Early Help Assessment for Families form from the East Riding of Yorkshire Council A-Z. You can complete your assessment in hard copy by printing it off, or you can complete it electronically.

Other agencies working with the family will have been involved with you in compiling the Early Help Assessment. The completed assessment can then be sent to them to remind them what support is needed. Then all involved can meet together with the child / young person and the family to talk about what happens next. This will be at a time and place that is convenient to all. At this meeting the Lead Professional will be agreed. This may be the person who co-ordinated the assessment or it may be someone else. Ideally it should be the person that the family feel can best co-ordinate the plan with them. The Lead Professional will help things run smoothly and talk to other practitioners.

The Early Help & Safeguarding Hub (EHaSH) (tel. 01482 395500 or secure mail irt@eastriding.gcsx.gov.uk) can provide advice about carrying out the assessment and the planning and reviewing process. Before you begin an Early Help Assessment **ring EHaSH**. They can check if the family you are enquiring about is already receiving support elsewhere or if someone else has already completed an assessment and how to get hold of that person. Even if you think you know everyone who is working with the family check it out, it may save work being duplicated. EHaSH will record that you are commencing an assessment. This information can be used to indicate to other professionals that there is an assessment in place. EHaSH also provide information and regular training on these processes.

Consent

You can initially obtain verbal consent to start the assessment. Then, once the assessment has been completed, obtain written consent – the signature at the bottom of the form - from the parent / carer if child under 12 or the child / young person if over the age of 12 and competent.

When explaining consent be clear that giving consent means information in the assessment will be shared with other practitioners who are already involved with the family or who may be able to help in the future. You will also be sharing the completed assessment with EHaSH.

Basic information

You must provide basic information about the family details including the name that the family is known by, the names of all of the children in the family and the address.

The date that the assessment commenced and the reason for the assessment, planning and reviewing process must also be given. Here you can give details of any support already provided and any changes to circumstances.

You will need to indicate that you have informed EHaSH that you have started an Early Help Assessment, so that this can be recorded against the child's name on the Children's Case Management (CCM) database. The family have the opportunity to sign their consent to this at the end of the Early Help Assessment document.

Family details

It is really helpful to obtain as much information as possible about all children of the household, children who are part of the family but not members of the household, members of the extended family, and network of friends and support who are important to the household members.

The children

Along with basic details of every child in the family you must also indicate whether each child or young person has contributed to the assessment. Every child should have the opportunity to do so, including very young children. There are a variety of ways in which you can ascertain the wishes and feelings of even very young children. Your local Children's Centre may be able to advise with this.

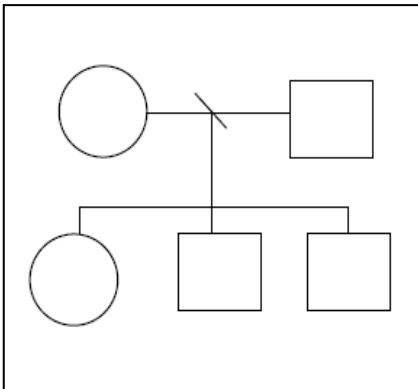
Adult household members

You will need to include details of every adult member of the household and also whether each of them has contributed to the assessment. If they have not contributed you will need to consider, record and explain the reasons for this as not contributing may be significant.

Extended family and connected people

There may be other family members (grandparents, separated parents etc.) or friends who are important to the family or to members of the family. They may also have a contribution to make to the assessment and you will need to indicate whether this has happened.

Family tree



A family tree / genogram can be extremely useful for understanding a family and how the family dynamics work. It can also be a very helpful tool in which to involve a child, young person, adult or the whole family. You can learn a lot while engaged in this exercise. There are a variety of websites which offer free genogram tools, or a hand drawing can be included / attached to the assessment.

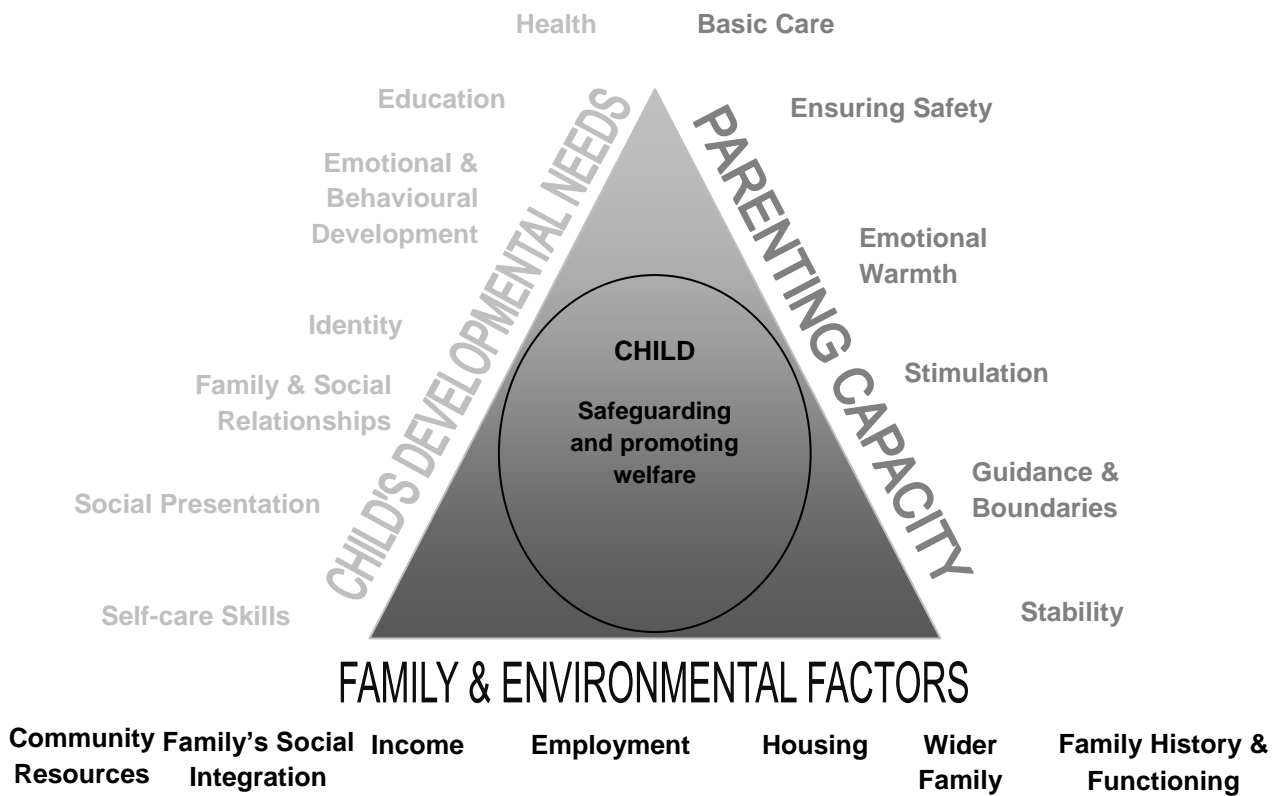
Professional involvement

Every professional who is involved with the family must be listed and an indication given of whether they have contributed to the assessment. Ideally every professional will have information to input. To some extent their input will be guided by how much the family members want them to share, but the more information there is, the more likely you are to gain an understanding of the needs of the family and the kind of intervention which might be needed. There may be children of a variety of ages each with different organisations who are able to provide information e.g. Children's Centres, Primary School, Secondary School. It is more helpful to work together than for each organisation to complete a different assessment.

Also consider organisations such as Housing Services which may be able to assist with a picture of the family's housing needs and environment.

The assessment framework

The triangle



The triangle at the start of the assessment document reflects the underlying structure of the Framework for the Assessment of Children in Need and their Families (DOH 2000). It is a useful guide to use when considering all aspects of a child and family's needs and strengths. The Early Help Assessment for Families is based on this framework.

Pages 7 – 12 provide examples of points you may want to consider under each section of the assessment framework along with some possible opening questions.

CHILD'S DEVELOPMENTAL NEEDS

Health
<ul style="list-style-type: none"> • Growth and development.
<ul style="list-style-type: none"> • Physical and emotional wellbeing.
<ul style="list-style-type: none"> • Additional needs, including sensory impairment.
<ul style="list-style-type: none"> • Appropriate health care when ill.
<ul style="list-style-type: none"> • Immunisations and developmental checks.
<ul style="list-style-type: none"> • Dental and optical care.
<ul style="list-style-type: none"> • An adequate and nutritious diet.
<ul style="list-style-type: none"> • Age appropriate access to advice and information re sexual health.
<ul style="list-style-type: none"> • Age appropriate access to advice and information re alcohol / substance misuse.
Education
<ul style="list-style-type: none"> • Attendance and punctuality at school / setting.
<ul style="list-style-type: none"> • A child's cognitive development from birth.
<ul style="list-style-type: none"> • Play and interaction with other children.
<ul style="list-style-type: none"> • Access to books & toys / home learning environment.
<ul style="list-style-type: none"> • Acquiring a range of skills and interests.
<ul style="list-style-type: none"> • Experiencing success and achievement.
<ul style="list-style-type: none"> • Educational activities, progress and achievements.
<ul style="list-style-type: none"> • Taking account of the child's starting point.
<ul style="list-style-type: none"> • Any special educational needs?
Emotional and Behavioural Development
<ul style="list-style-type: none"> • Relationship with parents / carers.
<ul style="list-style-type: none"> • Relationship with wider networks.
<ul style="list-style-type: none"> • Temperament.
<ul style="list-style-type: none"> • Response to stress.
<ul style="list-style-type: none"> • Response to change.
<ul style="list-style-type: none"> • Degree of age appropriate self-control.

Identity
<ul style="list-style-type: none"> • Child's view of self and abilities.
<ul style="list-style-type: none"> • Self-image and self esteem.
<ul style="list-style-type: none"> • Sense of individuality including race, culture, religion, gender, disability, sexuality.
<ul style="list-style-type: none"> • Feelings of acceptance and belonging.
Family and Social Relationships
<ul style="list-style-type: none"> • Empathy, able to put themselves in someone else's shoes.
<ul style="list-style-type: none"> • Stable relationships with family members.
<ul style="list-style-type: none"> • Age appropriate positive relationships with others i.e. peers.
<ul style="list-style-type: none"> • Age appropriate positive relationships with significant others.
<ul style="list-style-type: none"> • Any worries / concerns about behaviour?
Social Presentation
<ul style="list-style-type: none"> • Appropriateness of dress for age.
<ul style="list-style-type: none"> • Cleanliness and personal hygiene.
<ul style="list-style-type: none"> • Awareness of presentation in different settings.
<ul style="list-style-type: none"> • Appropriate behaviour in different settings.

Possible opening questions:

- How does the child / young person present? e.g. are they clean and appropriately dressed?
- Is the child / young person registered with a doctor and dentist? Where are they registered?
- Are their immunisations up to date?
- How is their general health? Are they prescribed any medication?
- Does the child have a disability / additional support needs? If so, what is the nature of the disability / additional support needs and what support is provided?
- How does the child / young person feel about themselves? e.g. are they happy and confident?
- How does the child / young person behave in social situations? Is their behaviour age-appropriate?
- How are they progressing at school / in the setting? Is there any evidence of underachievement?

PARENTING CAPACITY

Parents Health
<ul style="list-style-type: none"> • Any physical health issues impacting on parenting.
<ul style="list-style-type: none"> • Any emotional health issues impacting on parenting.
<ul style="list-style-type: none"> • Any substance misuse and / or alcohol use impacting on parenting.
Basic Care
<ul style="list-style-type: none"> • Provides for the child's physical needs, provision of food, drink, warmth, shelter etc.
<ul style="list-style-type: none"> • Appropriate medical and dental care.
<ul style="list-style-type: none"> • Takes care of own basic care.
Ensuring Safety
<ul style="list-style-type: none"> • Ensure the child is adequately protected from harm or danger.
<ul style="list-style-type: none"> • Protection from contact with unsafe adults / other children.
<ul style="list-style-type: none"> • Protection from self-harm.
<ul style="list-style-type: none"> • Recognition of hazards and danger both in the home and elsewhere.
Emotional Warmth
<ul style="list-style-type: none"> • Child's emotional needs are met.
<ul style="list-style-type: none"> • Giving the child a sense of being specially valued.
<ul style="list-style-type: none"> • Giving the child a positive sense of own racial, religious and cultural identity.
<ul style="list-style-type: none"> • Secure, stable and affectionate relationships with significant adults.
<ul style="list-style-type: none"> • Appropriate physical contact, comfort and demonstrates warm regard.
<ul style="list-style-type: none"> • Praise and encouragement.
Stimulation
<ul style="list-style-type: none"> • Encouragement of intellectual development.
<ul style="list-style-type: none"> • Promoting social opportunities.
<ul style="list-style-type: none"> • Promotes interaction, communication and talking.
<ul style="list-style-type: none"> • Appropriate response to child's questions.
<ul style="list-style-type: none"> • Joins in play.
<ul style="list-style-type: none"> • Enables school attendance.

Guidance and Boundaries
<ul style="list-style-type: none"> • Demonstrating and modelling appropriate behaviour.
<ul style="list-style-type: none"> • Demonstrating control of emotions and interactions with others.
<ul style="list-style-type: none"> • Setting boundaries and effective discipline.
<ul style="list-style-type: none"> • Promoting social behaviour.
<ul style="list-style-type: none"> • Promotes problem solving.
<ul style="list-style-type: none"> • Ability to manage anger appropriately.
Stability
<ul style="list-style-type: none"> • Stable family environment.
<ul style="list-style-type: none"> • Consistency of emotional warmth.
<ul style="list-style-type: none"> • Parents / carers response to change.
<ul style="list-style-type: none"> • Parents / carers response to stress.
<ul style="list-style-type: none"> • Ensuring contact maintained with important family members.
<ul style="list-style-type: none"> • Resilience.

Possible opening questions:

- Who is the main carer?
- To what extent are the child's / young person's basic needs being met? e.g. does the child / young person have access to food, water, clothes, somewhere to live and emotional support?
- How does the child / young person get on with their parents / carers?
- Is anyone in the family using drugs / alcohol? How does this impact on the child / young person?

FAMILY AND ENVIRONMENTAL FACTORS

Family History and Functioning
<ul style="list-style-type: none"> • Family history including history of childhood experiences.
<ul style="list-style-type: none"> • Family functioning.
<ul style="list-style-type: none"> • Significant events and their meaning including family illness / bereavement.
<ul style="list-style-type: none"> • Absent parents / carers and the relationship between separated parents / carers.
Wider Family
<ul style="list-style-type: none"> • Related and non-related persons.
<ul style="list-style-type: none"> • Absent wider family, what is their role and importance to the child and parents / carers.
Housing
<ul style="list-style-type: none"> • Basic amenities and facilities, cooking and washing facilities.
<ul style="list-style-type: none"> • Accessibility.
<ul style="list-style-type: none"> • Sleeping arrangements.
<ul style="list-style-type: none"> • Cleanliness, hygiene.
<ul style="list-style-type: none"> • Safety.
Education / Employment (including volunteering) / Training
<ul style="list-style-type: none"> • Who is working, working patterns.
<ul style="list-style-type: none"> • How is work viewed by family members?
<ul style="list-style-type: none"> • How does work affect relationship with child / young person?
Income
<ul style="list-style-type: none"> • Is family in receipt of benefit entitlements?
<ul style="list-style-type: none"> • Is there sufficient income to meet family needs?
<ul style="list-style-type: none"> • Are there financial difficulties.
Families Social Integration
<ul style="list-style-type: none"> • Degree of family integration or isolation in community.
<ul style="list-style-type: none"> • Rural isolation.
<ul style="list-style-type: none"> • Friendships and social networks.
<ul style="list-style-type: none"> • Access to own transport.

Community Resources
<ul style="list-style-type: none"> • Access to local / community services.
<ul style="list-style-type: none"> • Transport, shops, leisure and places of worship.
<ul style="list-style-type: none"> • Primary health care provision.

Possible opening questions:

- What is the involvement of the extended family? How often does the child / young person see members of the extended family and do they offer a support network?
- Is there adequate and appropriate housing for the family?
- Are parents / carers in education, employment or training?
- Are there any financial concerns – e.g. unmanaged debt?

The scaling at the bottom of each section gives you the opportunity to rate your view on the level of strengths and needs in addition to recording them in writing and to compare your view with the parent / carer or child. There is no numerical value attached to this nor is it a scientific measure of anything. It is merely a pictorial tool to use should you wish to demonstrate differences of opinion or indeed movement at some stage in the future.

Analysis

This is the section where you make your professional judgement and analyse the information collated in the assessment resulting in a clear understanding of the children and families situation. What does the information you have gathered mean for each child?

What would be expected of each child’s development and what does the information actually tell you about each child’s development? Therefore what does each child need?

What kind of care would you expect a parent of a similar child to give? Therefore what do these parents need in order to be able to give that?

What impact do the family and environmental factors have on each child’s development and on the capacity of these parents?



Worries / risks should be clearly recorded and the impact (or possible impact) of these on the child and their family. Family strengths should be recognised and built upon. Differences of opinion with the family's views need to be explored, reflected on and taken into account.

Being clear about how the child, family and practitioners will know when things are better (the desired outcome achieved) will help ensure that progress, or the lack of progress, can be identified and drift avoided.

The analysis of the child and family situation is complex and discussions with your line manager and team may help you to reflect on what is or might be happening. Ensuring your assessment is evidence based and considers learning from serious case reviews will help you analyse the information and form a professional view. It may also be helpful to refer to the ERSCB Threshold Guidance for Early Help, Targeted and Specialist or Statutory Support document located on the East Riding Safeguarding Children's Board website www.erscb.org.uk

This will support you in your decision making about the levels of support and interventions required.

Conclusion

You have analysed the information you have gathered for each child, for the parents and for the family as a whole, so you now need to conclude what the strengths are in the family that you can build on, what needs to change and how this will happen.

Having gathered your information, analysed it and reached your conclusion it is important that you share this information with the family – although you will have been discussing the assessment with them all along. There will be areas where the parents, child or young person will agree with your findings but there may also be areas with which they will not agree with you or may not agree with each other. It is helpful to be able to record these areas of disagreement so that it is clear that everyone's views are heard.

Signed consent

This section tells the family with whom the information they have given could be shared if they give consent. It explains that the assessment will be kept centrally by EHaSH so that the family do not have to keep telling their story to separate agencies working with them (if they don't want to) but that it will be treated as confidential so will only be shared if they agree. It also tells the family that their information can be shared with other partner agencies so that everyone can work together to provide support.

EHaSH may use the assessment to check on the quality of assessments or to use in training professionals. This would not require requesting consent again from the family as all names and everything that identified the family would be removed.

Finally it is important for you to have told the family right from the outset that the work with them will not be shared without their consent unless anyone – child or adult – is at risk of harm i.e. a safeguarding case. Even then, good practice would say that you share your concerns with them unless it would put someone at risk to do so (EHaSH can give you advice on this if you are uncertain.)

Please log your completed Early Help Assessment with EHaSH

(tel. 01482 395500 or secure mail irt@eastriding.gcsx.gov.uk)



Appendix 1

Flow Chart for the Early Help Assessment for Families

Have you identified a child / young person with unmet additional need? Consider the needs of other children / young people in the family.



If so, contact the Early Help and Safeguarding Hub to see if an Early Help Assessment for Families has previously been completed for this child / young person.



If an Early Help Assessment for Families has not previously been completed, inform the Early Help and Safeguarding Hub you want to start one.



Complete an Early Help Assessment for Families (preferably within 7 working days)



Contact the agency you want to refer to, to see if the referral will be appropriate.



Send a copy to:
- The agency / agencies you want to refer to.
- The Early Help and Safeguarding Hub.
- The family.



If more than one agency has been identified is a Team Around the Family meeting required?



If you do not receive feedback from the agency you referred to within 10 days contact the agency. If no response, discuss with your line manager.