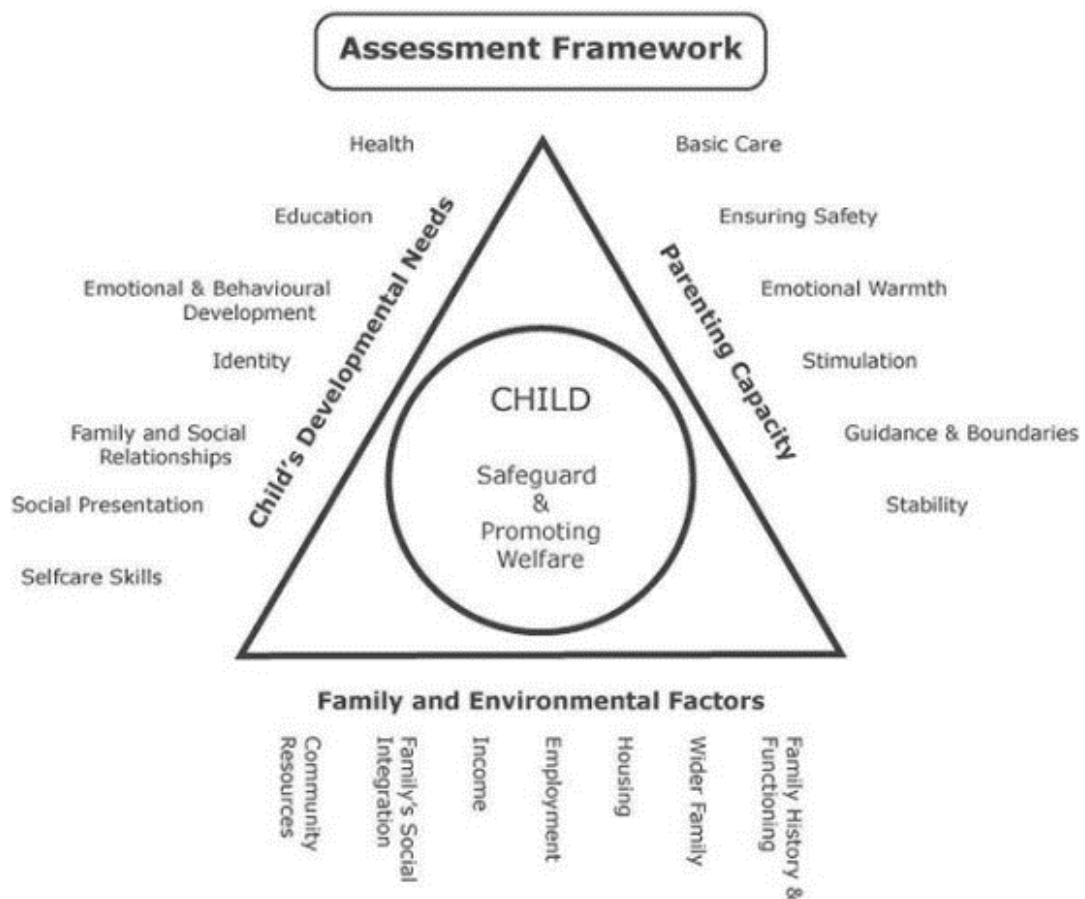


# Early Help Assessment (EHA) Guidance

## Introduction

The Early Help Assessment (EHA) is a simple, easy to use assessment, that aids discussion with families and allows for a more detailed review of the family's strengths and challenges in the following areas:

- Development of Baby/Child/Young Person
- Parenting Capacity
- Family and Environmental Factors



The Early Help Assessment (EHA) is a shared tool and can be used by all agencies/practitioners in Merton so that they understand and respond to the needs of children/young people and their families. The Early Help Assessment has been created to include the multiagency and encourages contribution from all practitioners working with the family.

Practitioners should consider each of the assessment areas from a whole perspective, starting with the strengths and then concentrating on the presenting issues/concerns. Wherever possible, practitioners should base comments on evidence, not just opinions, and indicate what the evidence is. It is important to distinguish between fact, opinion and observation when recording the information. The assessment must be completed with the child and their family to ensure their views are captured and they are at the centre of the assessment

## Key principles

- ▶ Make sure the family gives consent and it is completed alongside them.
- ▶ Identify and detail the needs of all family members.
- ▶ Focus on all the family members' strengths.
- ▶ Empower the family to consider their own wider support network.
- ▶ Capture the voice of all family members, including the child/ren.
- ▶ Be realistic about what can and cannot be positively changed.
- ▶ Be honest and transparent.
- ▶ Use language that the family can understand.
- ▶ Make sure it is completed in a timely manner.
- ▶ All practitioners who are supporting the family when the assessment is undertaken should contribute (if the family has given consent for information sharing).

## Whole Family Approach

In Merton, we adopt a 'Think Family' approach to supporting children and families. 'Think Family' recognises the importance of taking a whole family approach rather than thinking of an individual (child or adult) in isolation. Without this approach, we often miss the bigger picture around that individual's life and opportunities for support.

It is important that the whole family is included within the Early Help Assessment and can contribute fully, sharing their views and wishes. The Early Help Assessment form contains prompts to ensure that the family's voice is captured and evident throughout. There are also evidence-based tools and resources available that can be used to obtain the voice of the child/young person.

## Lead Practitioner

The practitioner who completes the Early Help Assessment will be the Lead Practitioner and the first point of contact for the family until the first Team Around the Family (TAF) meeting. At that meeting, there will be a discussion with the family and the multiagency to confirm who

will be the Lead Practitioner for the family moving forward.

For further information on the role of the Lead Practitioner: ([Effective Support for Families in Merton \(mertonscp.org.uk\)](https://www.merton.gov.uk/early-help-assessment))

## Team Around the Family (TAF)

A Team Around the Family (TAF) network should be convened to gather and share information across the range of practitioners working with the family and aid the Early Help Assessment (EHA). The TAF Network should work alongside the family to develop and implement a family plan with clearly defined goals. These should be reviewed regularly (every 6-8 weeks) and progress against them recorded.

For the TAF template and further guidance on the Team Around the Family process: [Effective Support for Families in Merton \(mertonscp.org.uk\)](http://mertonscp.org.uk)

For further guidance on creating whole family plans: [Effective Support for Families in Merton \(mertonscp.org.uk\)](http://mertonscp.org.uk)

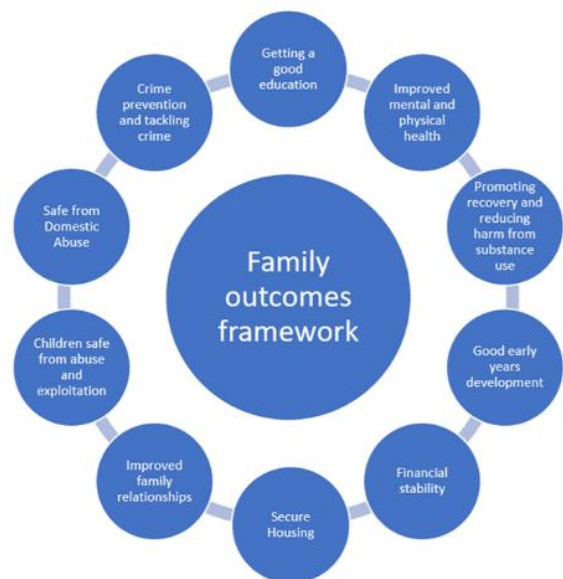
## Supporting Families Programme and Outcome Framework

The Supporting Families programme requires an integrated, whole family approach when working with families.

There is no single template as each family will need a different approach depending on their circumstances. However, the following 4 principles capture what is meant by 'working with a family as part of Supporting Families'. These principles must apply to all families being supported as part of the Supporting Families programme.

- There will have been an assessment that takes into account the needs and voices of the whole family.
- There is an action plan that takes account of all (relevant) family members.
- There is a Lead Practitioner for the family that is recognised by the family and other professionals working with the family.
- The objectives in the family action plan are aligned with the national Supporting Families Outcomes Framework.

The national Supporting Families Outcome Framework has 10 main outcomes with descriptors under each for identifying families with these needs (Appendix A).

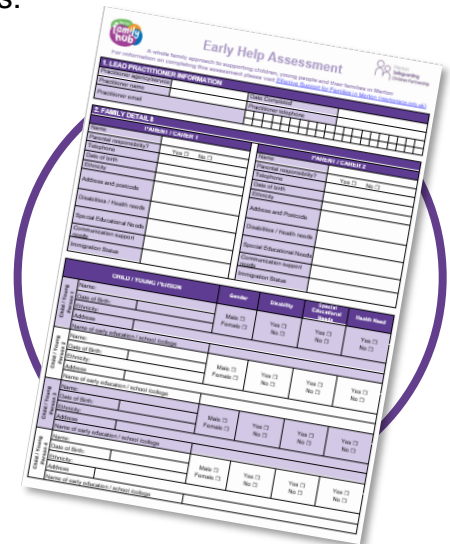


When completing an Early Help Assessment, it is important to consider and identify families' needs in line with this framework.

## How to complete the Early Help Assessment form

The Early Help Assessment form is divided into various sections:

- 1) Lead Practitioner Information
- 2) Family Details
- 3) Family Needs
- 4) Information Sharing
- 5) Personal Data
- 6) Team Around the Family
- 7) Family Information
- 8) Analysis
- 9) Family Plan
- 10) Parent / Carer Views
- 11) Child / Young Person views
- 12) Consent

The image shows a sample of the 'Early Help Assessment' form. The form is divided into several sections: 'LEAD PRACTITIONER INFORMATION', 'FAMILY DETAILS' (with sub-sections for 'PARENT / CARER 1' and 'PARENT / CARER 2'), and 'CHILD / YOUNG PERSON'. Each section contains various fields for text entry and checkboxes. The form is titled 'Early Help Assessment' and includes the 'Child Hub' logo. A purple circle highlights the 'FAMILY DETAILS' section.

### 1) Lead Practitioner Information

The practitioner completing the assessment will be the Lead Practitioner for the family up until the initial TAF meeting. The practitioner should add their details in this section, including service, contact details and the date of when the assessment took place.

### 2) Family Details

Record the details of each parent/carer and each unborn baby, child and/or young person aged 0-19 who is part of the family. Where known, please include the following:

- ▶ Date of Birth
- ▶ Ethnicity
- ▶ Immigration status
- ▶ Disability/health needs
- ▶ Special educational needs
- ▶ Name of early education/school/college

#### Separated Parents

In some families, one of the parents may not be living with the family. In this case, you should encourage the primary carer to provide details to enable you to contact the separated parent, so that you can ask him/her to be involved with the Early Help Assessment. Ensure you are fully aware of the family's circumstances before you do this however, as there may be particular risks to consider before contacting the family.

### 3) Family Needs

This section looks at Merton's priority outcomes which are aligned with the Supporting Families Outcome Framework. The current presenting needs of the child/ren and family should be ticked. Then following this, the presenting needs still relevant to the family should be ticked at every TAF review so that progress and outcomes can be measured for the family.

Appendix A provides more information on The Supporting Families Outcome Framework to support identifying families' needs.

### 4) Information Sharing

The practitioner completing the assessment will need to gain consent from the family for the assessment to be completed and for information sharing.

### 5) Personal Data

Following the discussion with the family about consent and information sharing, the family will need to tick the agencies/practitioners they are happy to be contacted and have information shared with.

### 6) Team Around the Family

Details of practitioners working with the family should be recorded here. It's important to detail the practitioner's name, role, organisation, contact details, family member they are working with, whether the family has provided consent to share information and whether they have contributed to the Early Help Assessment.

Gathering information from agencies involved with the family triangulates information, enhancing the assessment and providing a more holistic picture and collaborative approach to meeting the needs of the family.

## 7) Family Information

Identifying the strengths and worries of the family enables the development of a plan to identify what needs to change and who can support the family in making those changes.

To support gathering family information, each area of the assessment triangle:

- **Development of Baby/Child/Young person**
- **Parenting Capacity**
- **Family and Environmental Factors**

has been divided into 4 sub-sections:

### **What is currently working well?**

- Child and family strengths
- Safety factors

### **What are we worried about?**

- What is happening now?
- Areas where needs are not being met
- Presenting risks and concerns
- Worries that are impacting the child's health and wellbeing

### **How would you like this area of your life to look?**

- How would the family like this area of their life to look?
- What changes would they like to see?

### **What needs to happen to get you there?**

- Identify with the family what changes need to take place to reduce the concerns
- What services/support would the family need to achieve these positive changes?

While completing the sections, please consider the assessment triangle and the Supporting Families Outcome Framework. The EHA template contains prompts under each heading to support and guide discussion.

Appendix A provides more information on The Supporting Families Outcome Framework to support identifying families' needs. We understand that you may not be able to complete all sections of the form in full. However you are encouraged to complete all sections as fully as possible, based on your professional knowledge of the family, information gathered from other practitioners and what the child and the family share with you.

If concerns around neglect are identified, refer to [Merton's Neglect Toolkit](#) to support identification and next steps.

If safeguarding concerns are identified, refer to [Merton's Effective Support Model](#) to determine the level of need and next steps. If a referral to the Children and Families Hub is required, a discussion should be held with the parent and child (if appropriate), so they understand the need for this referral.

## 8) Analysis

### Worry statement

This is a summary of the 'What are you worried about?' section. The reasons you are worried about the child or young person should be clearly stated in simple language. Include what you are worried could happen if nothing changes, and the impact of this on the child/young person.

### Wellbeing statement

Building on what has been identified in the 'What is currently working well?' section, include what you would like to see so you are no longer worried about the family. What may the family be doing differently or what will the child/young person be experiencing?

### Wellbeing score 1-10

Scaling enables you to identify your level of concern and also opens up discussions by highlighting the best and worst-case scenarios and what needs to change to improve outcomes.

10 is there are no worries/concerns

1 is you/the family/TAF network are extremely worried

## 9) Family Plan

A Team Around the Family meeting would now be convened to gather/share further information and develop the family plan. There should be a clear link between the assessment information gathered, the family's goals, and the action plan. The plan should be written in a language that is understood and ownership of the plan must be given to the child, young person and their family.

Actions need to be **S**pecific, **M**easurable, **A**chievable, **R**ealistic, and **T**imely (SMART).

For further information on completing a Family Plan: [Effective Support for Families in Merton \(mertonscp.org.uk\)](http://mertonscp.org.uk)

## 10) Parent / Carer Views

It is essential that the views of the parent/carer are captured throughout the assessment.

Assessments can only be effective when they are conducted with families in a true sense of partnership. This involves hearing and incorporating the views of family members within the assessment and any plans for the child or young person. It involves maintaining respectful, open and honest relationships with parents, carers, children and young people. It involves good information sharing and communication with all family members keeping them aware of timescales and next steps within the assessment process.

There are also 4 questions that need to be completed by the parent/carer which are around the Lead Practitioner, the assessment process and the family plan. These questions must be completed by the parent/carers.

## 11) Child / Young Person views

It is also essential that the voice of the child is captured throughout the assessment, even if the child is aged under 5 or non-verbal.

There are a number of evidence-based tools and resources that can be used to help you capture the voice of the child e.g. The Three Houses.

## 12) Consent

This is where the parent/carer and child/young person sign to consent and agree to the information within the assessment and the family plan which has been created.

## Further Support

For further information, support and guidance on the Early Help Assessment process, please contact the **Early Help Support Coordinators** by emailing [FSD@merton.gov.uk](mailto:FSD@merton.gov.uk)

If a child/young person or family's needs cannot be met within existing accessible resources or their needs escalate, please make a referral to the [Children and Families Hub](#)

## Appendices

Appendix A - The Supporting Families Outcome Framework



## Appendix A

### The Supporting Families Outcome Framework

The national Supporting Families Outcome Framework has 10 main outcomes with descriptors under each for identifying families with these needs.

Headline Outcome	Family Need
<b>Getting a good education</b>	Average of less than 90% attendance (inclusion of authorised absence is optional) for 2 consecutive terms
	Average of less than 50% attendance unauthorised and authorised for 2 consecutive terms
	Not able to participate and engage with education – motivation, emotional regulation and behaviour difficulties, risk of, or subject to, exclusions, concerns around suitability of Elective Home Education, child is off-roll and not receiving an education otherwise, risk of NEET
	Child's special educational needs not being met
<b>Good early years development</b>	Expectant or new parent/carers who require additional or specialist support (e.g., young parents, parents who have been in care, parents with learning needs)
	Child's (0-5 yrs) physical health needs not met (e.g., immunisations not up to date, concerning accidental injuries, dental hygiene)
	Child's (0-5 yrs) developmental needs not being met (e.g., communication skills/speech and language, problem-solving, school readiness, personal, social and emotional development)
<b>Improved mental and physical health</b>	Baby/child needs support with their mental health
	Adult needs support with their mental health
	Child and/or parent/carer require support with learning disabilities, neurodiverse conditions and/or physical health needs that affect the family (e.g., long-standing health conditions requiring management, physical disabilities requiring adaptations)
<b>Crime prevention and tackling crime</b>	Adult (18+) involved in crime and/or ASB (at least one offence/arrest/named as a suspect/ASB incident) in the last 12 months
	Young person (u18) at risk of crime – including gangs, serious violence and weapons carrying, or involved in harmful risk-taking behaviour
	Young person (u18) involved in crime and/or ASB (at least one offence/arrest/named as a suspect/ASB incident) in the last 12 months

<b>Promoting recovery and reducing harm from substance misuse</b>	An adult has a drug and/or alcohol problem
	A child or young person has a drug and/or alcohol problem
<b>Improve family relationships</b>	Parent / carers require parenting support
	Harmful levels of parental conflict i.e., when it is frequent, intense or poorly resolved
	Child / young person violent or abusive in the home (to parents/carers or siblings)
	Unsupported young carer or caring circumstances changed requiring additional support
<b>Children safe from abuse and exploitation</b>	Emotional, physical, sexual abuse or neglect, historic or current, within the household
	Child going missing from home
	Child identified as at risk of, or experiencing, sexual exploitation
	Child identified as at risk of, or experiencing, criminal, or pre-criminal, exploitation (e.g., county lines, radicalisation)
	Child experiencing harm outside of the family (e.g., peer to peer abuse, bullying, online harassment, sexual harassment/offences)
	Child identified as at risk of, or being affected by, radicalisation
<b>Safe from domestic abuse</b>	Family affected by domestic abuse or inter-personal violence and abuse - historic, recent, current or at risk (victim)
	Adult in the family is a perpetrator of domestic abuse
	Child currently or historically affected by domestic abuse
<b>Secure housing</b>	Families who are in local authority temporary accommodation and are at risk of losing this
	Families not in suitable, sustainable housing and/or threatened with eviction /at risk of homelessness
	Young people aged 16/17 at risk of, or who have been, excluded from the family home
<b>Financial stability</b>	Adult in the family is workless
	Family require support with their finances and / or have unmanageable debt (e.g., rent arrears)
	Young person is NEET