



# Early Help Assessment Guidance

Information for Practitioners

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# Purpose

This guidance is for all practitioners who are involved in providing Early Help to Children, Young People and Families in County Durham.

1. This guidance will support you, as a practitioner, to understand how and what you need to include in the Early Help Assessment (EHA) and Child and Family Plan to ensure that it is clear to all involved in the process what the worries are for the family but equally what is working well and provide clear goals and next steps to help the family achieve them.
2. There are tools which you can use to help in obtaining the voice of children and these will also be covered later in this guidance.

## Relationship practice

3. It is important that you recognise that in order to carry out a fair and balanced assessment in whatever setting this relies heavily on the relationship you have with the children, young people and family.
4. You should carry out your work using an open, honest and respectful approach. Evidence and research tell us that when we work in partnership with families, identifying the strengths and celebrating their successes as well as ensuring that the family and their children are at the heart of our assessments, decision making and planning this creates a sense of hope for families, and this is where change can happen.
5. When a family is being supported by a team of professionals, in this case in a 'Team Around the Family' (TAF) arrangement, it is important for the family to identify who they feel most comfortable with and therefore who should be their key contact person or Lead Worker. This may not be the TAF member delivering the most support to the family, but it is important the family feel able to communicate openly with an individual throughout the work. Over time, in agreement with the family, the Lead Worker may change.
6. Keeping in touch! Children, young people, parents and carers have told us that sometimes it is difficult, particularly for children, to build a relationship with their workers when they might not see them often. You should agree with the child and family how they would like to be contacted and how often between face-to-face visits, this could be by text, email, quick telephone call or even WhatsApp. Face to face contact is important to build a positive relationship therefore other agreed contact should not replace this but be in addition to.
7. It is vital that children and young people know and understand why they have a worker or a number of workers supporting them and their family. Throughout your work and to further support in building that trusted relationship with the child/young person, you should ask yourself, does the child/young person understand what the Early Help Assessment and Child and Family Plan are? There are age-appropriate tools which can help and the use of 'Words and Pictures' are a fantastic means in which to simply explain important things for younger children or those who may have learning difficulties.

# Principles of a good assessment

## Child focused

8. Is the child/young person's voice, lived experience and the impact of what is happening to them front and centre of the assessment?
9. Have you or parents/carers had a conversation with the child about why you are involved so that you can speak to them directly about the worries and what is working well particularly in relation to the worries?
10. Have you asked the child/young person what they want to happen and who they think may be good people to help?
11. Does the child's/young person's voice carry over to the Worry Statements and Wellbeing Goals and has the child/young person been involved in developing their Child and Family Plan.

## Questioning approach

12. Have you been careful about what you think you 'know' and asked lots of curious questions to understand the behavioural detail, the impact on the child/young person/ family and checked out what has happened from lots of different people's perspectives so that everyone feels heard and involved?

## Evidenced based

13. Have you checked out what parents/carers, children and young people are telling you through observation and from the perspectives of the people who know the child/young person best so that your understanding and decisions are based on evidence rather than assumptions, opinion or a single story?

## Balancing risk

14. Have you asked enough questions around what is working well in relation to the things that they are worried about, as well as asking questions about those times when the family have managed well during difficult times? Have you written the assessment in a way that shows the impact of the worries on the child/young person and is it really clear about existing safety?

## Valuing children and families as experts in their own lives

15. Are you asking questions about the child/young person's lived experience to the people who know them best (i.e., their network of family and friends, as well as professionals)?

16. Do you ask children/young people, parents/carers and their network of important people for their version of events, what they want to happen and what ideas they have to make things better?
17. Have you checked out what these people think life will look like when things are better?

## Honouring families

18. Do you appreciate how difficult it can be for families to be open about the things that they are most ashamed of or stressed by?
19. Do you appreciate the positive intentions behind actions, even where these actions may not turn out to be helpful?
20. Do you thank families for trusting you enough to speak with them about the things that hurt them the most?
21. Do you notice and appreciate the efforts that families make to try to improve things, no matter how small?
22. Do you make sure that you write about children/young people and their families in a way that reflects the conversations that you have had with them so that families know what to expect in the assessment?

## Language

23. Is the assessment understandable to the child/young person, parents/carers and the network using language that makes sense to them rather than professional jargon?
24. Is the assessment written in a way that would make families want to work with services, instead of them feeling 'got at' or judged?
25. If this assessment was about a child that you had a personal connection with, how would they want it to be written?
26. Do you check out with children and families what language they use and then use this, where appropriate, in your written reports and assessments?
27. Using 'Worry Statements' and 'Wellbeing Goals' is common language within the Signs of Safety/Wellbeing approach and words which all practitioners can use which can be easily understood. The revised Early Help Assessment no longer asks for these but does ask you 'What are we worried about?' and 'What is working well?' However, the exception maybe when working with individuals who have mental health/emotional wellbeing difficulties as using the words 'worries/anxieties' can actually make them feel more worried or anxious. You will consider each family you work with on a case-by-case basis.

## Valuing the family's culture and uniqueness

28. Are you curious about what life is like for this family and the particular circumstances they are living in, considering their culture, identity, family traditions and beliefs and how this makes life better or harder for them?

# Completing the Early Help Assessment (EHA)

(For technical support relating to how to submit and EHA and Child and Family Plan on Liquid Logic please see Supporting Documents on the Durham Safeguarding Childrens Partnership Website).

## Consent from parent and child/young person

### 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".

When completing an EHA with the family, explain what it is you are doing and why so that it's not intimidating for them.

There are some [useful supporting materials](#) including videos to help you explain. Explain that this is about recognising they're struggling and may need some extra support before things get worse.

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 and try again! Building relationships is key and those relationships need to build on a foundation of 'families being the experts in their own lives', we also need to honour where they have struggled as this can allow us to have those firm but kind conversations at times.

As the Early Help Assessment is on-line, you, as the practitioner, will be asked to confirm that you have obtained consent from parents/carers and/or young person themself.

[There is no requirement for a signature.](#)

Young People who are deemed to be [Gillick Competent](#) are able to ask for and consent to early help.



#### Top Tips

Remember; A young person can ask for an Early Help Assessment themselves



## Personal details

Throughout the on-line form there will be optional fields for you to complete if you have the information and the family/individuals have agreed for you to record this. Examples such as religion, ethnicity, disability are useful to have as it enables you to consider your approach in communicating and engaging individuals and being able to respect, avoid causing offence and ensure accessibility for all. However, it is appreciated that not all family members will feel comfortable or want to share personal details about themselves and this needs to be respected. Rather than asking direct questions about ethnicity, culture, disability etc. you should simply ask

*'Is there anything else you think I need to know, or you would like to share to help me to help you and your family?'*

There will be 'optional' fields within the EHA where you can record this.

## Members of the family

An EHA is a 'whole' family assessment which means you should involve all of the children and adults in the household, and all family members and significant others that may live outside of the family home who have an impact on the child/young person.

*Always consider estranged mams and dads/carers* or where they may not live in the family home but play or have played a significant part in the child/young person's life and especially if they have parental responsibility. Also consider the role grandparents and other extended family members play and if their contribution to the assessment is of value.

## Who is important to the family?

If a family requires support from more than one agency, consider holding a TAF (Team Around the family). This is a multi-agency approach, where a meeting is held with services, family members and people who are important to the child/family.

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.

A Team Around the Family (TAF) and Family Support Network Leaflet are available for you to talk through with family members to help explain what they are.



### Top Tips

Think – In your own family it isn't always immediate family members who help or support you with your children

## Services involved with the family

Include statutory services such as Nurseries, Family Health Visitors, School, Colleges, Midwives, Police and GPs etc.

Remember to include any service which the child/young person attend, they may have a good relationship/bond with leaders or carers in those organisations such as after school clubs, swimming clubs, guides, scouts, dancing schools, football clubs, church groups etc.



### Top Tips

Remember to look at/use the Eco Map to help you think through with the child who is important to them

## County Durham Family Outcome Framework headline themes

Select all that apply to the family living in the household even if it is just an individual family member including Mam, Dad, sibling.

## Main worries (Early Help Theme)

We know that individual family member worries and professional worries can often differ, but we need to ensure that all are captured and not minimised or catastrophised and that equal weight is given to all. All will be captured in 'what you are worried about', for the purposes of this section we are asking for one 'best fit' main worry. Be pragmatic, as you are completing the assessment, based on the information you have, select the one 'best fit' Early Help Theme e.g., it is unlikely that both parents might agree to Domestic Abuse (DA) being a worry especially if one is the perpetrator of DA but if this is the 'best fit' main worry then select this. Be careful to select the correct one as there is huge difference for example between a child/young person with mental/health and emotional wellbeing worries and that of their mam or dad which may be impacting on them.

## Main body of the assessment

Start with the 'What you are worried about?' and then move on to 'what is working well? (in relation to the worries). This will help you and the family be less 'problem saturated' it also helps families see and believe that even during difficult times there are positives and strengths they can draw on.

Remember that an EHA is a holistic assessment that considers the needs of all the children/family members alongside:

- Home Environment
- Health
- Education
- Parenting etc.



### Top Tips

If parents or professionals struggle with "what's working well" give them an example of a time when you have seen them cope well or manage a situation better



## Example:

### 1. What are we worried about?

- Mrs Smith, the Attendance Officer at school is worried that Bobby is often late for school, this happens at least 3 times per week, it means that he misses out on his phonics lessons, and he is falling behind.
- Mum says she often finds it hard to get out of bed most mornings because her tablets for her anxiety make her sleepy; it is also hard getting all the four children up and sorted in time.
- You can summarise the worries in a 'Worry Statement' however we know not all practitioners are confident with this so bullet points, as above, will suffice:
- Mrs Smith from school is worried that the tablets mum takes makes her really tired and it's hard for her to get up and get all of the children ready so that often they are late for school. This is hard for Bobby as it means he misses phonics and is falling behind; Mrs Smith worries that if nothing changes Bobby might not be able to make up all he has missed and feel different to his friends.

### 2. What is working well?

- Mum and the children talk about having lots of people around them who they love spending time with. Bobby says his favourite person in the world is Uncle Brandon as he helps him with his cars in his garage.
- Mum has told Mrs Smith that there have been times when she has been able to call on her next-door neighbour and she has managed to get the kids to school on time.

## Scaling questions

We have removed the need to have a scaling question for each worry. In the revised Child and Family Plan we are asking practitioners and family members involved in the Team Around the Family to simply scale 0 – 10, where 10 is you are not worried at all and 0 is where you are very worried, where would you scale and why? This will support you and the family in having a meaningful conversation as to why you have scaled what you have and the evidence you have to support this. It is usual that individual TAF members may, at times, scale differently as each member of the TAF may observe something different in their job roles.

**Why we scale:** it is important to get everyone to scale and give rationale as to what is working well for that family to get them up to that scale and then what would they need to see to move them further up the scale (this might just be one scaling point). The scale creates a 'sense' of hope for families, and it shows the progress towards that end goal, if the scales show things are moving down then this may mean you need to make a different decision about the support this family may need. Best practice would be to



#### Top Tips

##### Remember

Think - 10 would be what you and others would see if life was better for the child/young person

try and use Worry Statements, Wellbeing Goals and Scaling Questions, however we understand not all practitioners are fully confident with this. See example statements.

## What has been tried already to support the family and what difference has it made?

The revised Early Help Assessment now includes a free text box section for practitioners to advise on what support has already been tried and tested with the family and most importantly any impact or difference this has made. It is important that this is understood to facilitate appropriate decision making as if there has been lots of support exhausted with very little impact or if the family have received no support to date, this gives a very different perspective of how engrained some family needs may be. This information also allows us, as a partnership, to avoid duplication of intervention and utilise our collective resource, avoiding drift and delay for families.

## Voice of the child/young person, parent/carer, direct work and understanding their lived experience (including non-verbal children)

Ideally you want to be able to speak with the child/young person alone, where age appropriate, as they may feel able to talk more openly and honestly. There may be times that children/young people do not want to be spoken to alone as may be too anxious to do so. In these cases, consider another trusted adult e.g., teacher or a friend who can support them as it is good to speak with children away from their parent/carers as they may worry about upsetting them or they may be part of the worry.

Make sure you capture the child's voice, make observations and/or use other forms of communication especially for a non-verbal child. Children can be invited to a Team Around the Family (TAF) meeting, they can write their views, or you can use [Signs of Safety/ Wellbeing tools](#) e.g., 3 Houses, Wizards and Fairies and any other children's tools you have.

Encourage other TAF members to use the tools with the children/young people who they are connected with to ensure that all of the children's voices are captured and shared.



### Top Tips

#### Remember

Look at the child's worries, what does life look like for this child on a day-to-day basis?

Ask – have you captured their worries and concerns

My 3 houses/Wizards and Fairies capture the views of the children in a similar way with a focus on the 'house of good things' 'house of worries' and 'house of dreams'.

Remember to be focused in your questions when working with children, also remember to seek consent and remind children that you may need to share with their parents or carers.

Ecomap: this is a tool that can be used to understand and talk through with children who are the important people (including pets) to them and why? This will help both parents, you and TAF members identify who are important to them and who they could include in the family network and plan.

## Child and Family Plan

Make sure your action plan is Specific, Measurable, Achievable, Realistic and Timely (SMART), add dates and specific actions to enable the family to achieve their Wellbeing Goals/outcomes e.g., if school attendance needs to improve, break this down into actions that will help to improve this, with timescales. Ensure that the people who are most important to the family and the children have a role within this.

The Child and Family Plan is owned by the family and should, in the main, shift responsibility to the family and its network to do most of the work rather than being top heavy with 'services doing the doing'!

Ensure that the actions reflect the purpose of the Early Help Assessment (EHA) and are agreed by all.

By submitting an EHA and Child and Family Plan you are telling us that there is multi-agency support for the family, co-ordinated by you as the 'lead', working on an agreed, outcome focussed Child and Family Plan that is reviewed regularly to measure progress.

Tell us the date you will be reviewing the Child and Family Plan; best practice would be every four to six weeks. Where Schools are the 'lead', they are to agree with TAF members who will take the 'lead' during school holiday periods to ensure work and support continues for the family.

If you are submitting an EHA to 'request your EHA to be reviewed by the Early Help Triage Team' you are still requested to outline in the Child and Family Plan what you/ your organisation are doing to support the family.



### Top Tips

#### Remember

Link your worries to your goals - this needs to be the focus of your work and the family's work

# Review of the Child and Family Plan

We ask that you submit Child and Family Plan Reviews. You DO NOT need to write minutes of TAF meetings. The Child and Family Plan and the progress made against each action along with asking the important people the same scaling question each time is all that you need. There may be additional actions needed if other worries emerge. Add these to the Child and Family Plan as you go BUT do not lose sight of the original/main worries. The review of the Child and Family Process means that you can save a copy on your own service case management system or somewhere that is secure and agreed by your service/organisation. The 'word' template means that you are able to amend and update the Child and Family Plan at each review and simply submit it through to the Childrens Services Portal as an attachment with any other important information you may choose to share with agreement from the family.

If there are significant changes and you feel that the Early Help Assessment needs to be updated, then contact the Early Help Triage Team at [earlyhelp@durham.gov.uk](mailto:earlyhelp@durham.gov.uk) or telephone 03000 267 979 (Option 1, Option 2, Option 4).

If changes are not significant to warrant an update to the EHA these can be reflected in the Child and Family Plan Review.

It is important for you to tell us the date of when the Child and Family Plan has been complete, ideally with outcomes achieved by adding the 'TAF Closure Date' at the end of your Child and Family Plan Review and submitting through the Childrens Services Portal. This will allow us to update the child's record that there is no longer an 'active' EHA, Child and Family Plan in place. It can also be used to help identify families eligible to be counted towards the Stronger Families Programme (National Supporting Families Programme). Sometimes an EHA or Child and Family Plan needs to end for other reasons e.g., consent withdrawn, moved out of area, stepped-up. If you have difficulty keeping a family engaged and you are worried they may withdraw consent speak to your Early Help Advisor who may be able to help. If you are unsure who your named Early Help Advisor is, please email: [EarlyHelpAdvisorSupport@durham.gov.uk](mailto:EarlyHelpAdvisorSupport@durham.gov.uk)



## Top Tips

### Remember

Review often to see the progress towards the goals, do this by using the same scaling question each time

## Who has completed the assessment

Wherever possible, the person who best knows the family should complete the Early Help Assessment (EHA), this maybe someone that the parents/carers, child or young person has approached to ask for help or someone that they later nominate as have a positive working relationship with them. The 'lead' worker/professional can be transferred at a later date if required.