



What is the Early Help Assessment?

The Early Help Assessment (EHA) is designed to assist practitioners in a range of settings to assess the needs of families, children and young people.

It replaces the Universal Help Assessment (UHA), formerly the Common Assessment Framework (CAF).

The EHA can be used by schools, health, housing or prevention and early help services across Southampton.

It can also be used to coordinate more complex early help provision including intensive family support such as Families Matter.

The underlying principles of the Early Help Assessment are:

- To allow the practitioner to assess the needs of the whole family and to support the development of an **Early Help Plan**.
- To facilitate the assessment of all family members and allow family members to identify their level of need and measure progress themselves. This approach models the outcome star and strengthening family's approach, which is also used by services in Southampton.
- To enable an holistic assessment of the whole family's needs, which should not focus on the policy or statutory obligations of a single service.
- It is a transferable document and can be shared between agencies, where family consent has been given.

When should it be used?

The assessment is usually completed for families with a level of need described as level 2, *Universal Plus* or level 3, *Universal Partnership Plus*, (see Southampton's LSCB Continuum of Need).

The assessment should not be used for families where there is a significant risk of harm to a child (section 47) (Safeguarding and Specialist) or for a Child in Need (including SEND) that requires a section 17 assessment. In these circumstances a single assessment would usually be completed by a social worker.

There is no requirement to complete an EHA if an alternative assessment process is underway and/or where an alternative, but current assessment is of sufficient quality to devise an **Early Help Plan** for the family or individual.

An EHA is not an alternative to an Education, Health and Care Plan (EHCP), but can be used to support the identification of need for the family of the children who have an EHCP.

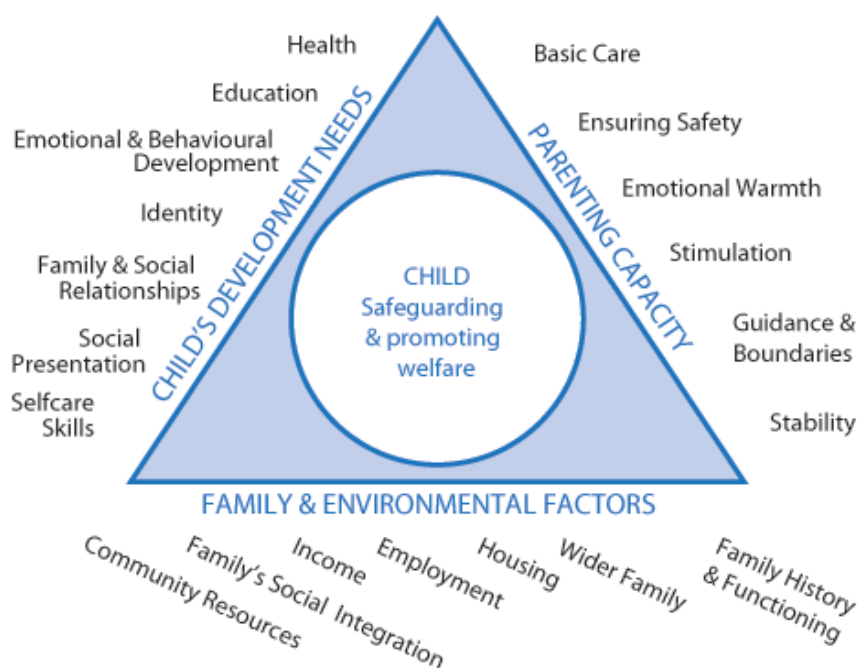
How to complete the EHA (work with family to discuss needs and wants)

- The family should agree to the assessment process and sign a permission to share form, which will allow practitioners to discuss and share information with other agencies where necessary. Your agency may have a consent form of its own, however, the Early Help Assessment itself includes provision both for consent and seeking family member's views, which can be signed on completion of the assessment.
- If permission to share is refused, the assessment can be completed if the intent is to support the family as a single agency plan. However, this assessment cannot be shared with other agencies without the permission of the family.
- If the family have been assessed recently, the practitioner can request to see the previous assessment (with the family's agreement). This may negate the need for a full re-assessment; new assessments should be avoided if a recent assessment is available, moving on to completion of the **Early Help Plan**.
- The practitioner should consult with all involved agencies and newly introduced services to share information and obtain a full picture of the family's situation and needs. This will assist the practitioner in developing an Early Help Plan with the family.
- The assessment should consider the needs and aspirations of each family member, as well as the family unit as a whole, focusing on strengths as well as needs. However, this is a consent-based process and the assessment should only focus on areas that the family are prepared to discuss or are prepared to disclose to other agencies.
- The assessment should include details of any special needs relating to the family (disability, language and communication, location etc....)

- The EHA includes prompts which align with the Families Matter (Troubled Families) criteria. These are common issues which are apparent in many of the families that seek help from Early Help services and the person completing an EHA is encouraged to explore these issues with the family. However, there is space allocated within the EHA to address any further issues that are of concern to the family and are equally important to them.
- Ensure that you use plain, simple English that can be understood by family members and involved agencies alike. Avoid acronyms and technical terminology. Assessments should be made available in accessible formats if required.

The Common Assessment Framework

- The underlying principles of the Early Help Assessment continue to be those featured in the Common Assessment Framework, albeit placing more emphasis on the whole family and the familial context in which children and their siblings live. The Common Assessment Framework is described below.



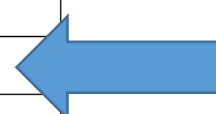
The distance travelled approach

- The distance travelled approach is a scoring methodology for issues out of ten and replicates other assessments frameworks such as ‘signs of safety’, ‘strengthening families’ and ‘the outcome star’. The EHA is intended to compliment these processes if used in your organisation.
- The assessment includes a ‘scoring’ box scaled 1 (the worst scenario) to 10 (the best scenario). Each identified set of issues requires that these are identified in the assessment or the plan. The practitioner should discuss each issue with the family/individual to agree what this score would be at the point of assessment. This will then allow the family and practitioner to review progress during the course of the intervention (see the example below).

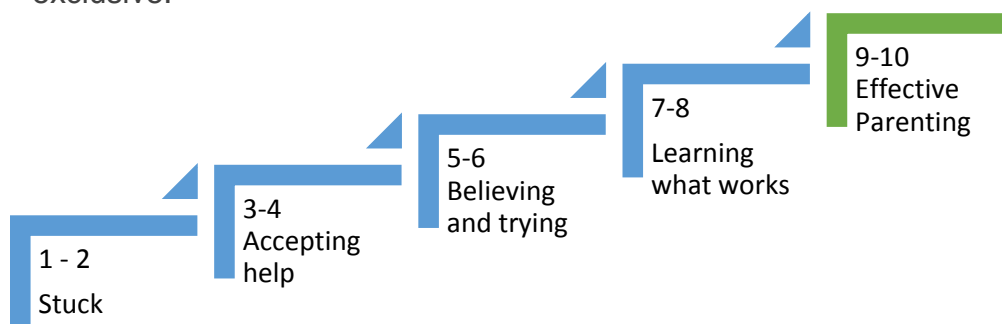
5. Family Assessment

The assessment may require input from more than one worker. The assessment information should focus on improving outcomes for the family. Focus on the strengths of the family as well as their needs in each section.

<p>Family background and relationships – please give a brief outline of family structure, dynamics, wider friends/family/community support and other networks. Please attach a genogram (family tree) if possible.</p> <p>Mum (Joanna) lives at home with both Jason and Bruce. Joanna is seperated from Jason and Bruce's father who now lives in Eastleigh, but has regular contact with both, usually at weekends.</p>	
<p>Please highlight the priority issues that the family want to work on as part of their family's plan</p> <p>The family want there to be less conflict in the home and fewer arguments with neighbours</p> <p>Please highlight the areas that the family and/or you would like to work on:</p> <p>School Attendance (Jason), return to work (Joanna) and getting along with the neighbours (Bruce)</p>	<p>On a scale of 1-10, where 10 is the best they can be, how are things at the moment?</p> <p>Score out of 10</p>
<p>Housing and finances (debt, risk of eviction, basic needs met).</p> <p>Any other issues (condition of housing, overcrowding etc....)</p>	
1. Joanna has acrued debts from pay day loans and has been issued with a court summons	3
2. Joanna has rent arrears that risks her losing her home if unpaid	2
3. Complaints from her neighbours about her children's behaviour risk the families eviction from their home	1
<p>Unemployment and progress to work (current employment, previous employment, interests</p>	



- Try to remember that 10 out of 10 is the best a situation can possibly be as measured by the family and not by professionals. It is not expected that a family achieve 10, but rather progress at a pace and a level that is achievable for them.
- As a guide the illustration below describes the steps a family may take on their journey towards positive improvement. For example in this illustration 9 or 10 describes 'effective parenting'. It could equally describe other issues, such as finances, housing or health, dependent on the need you are working with the family on at the time. It is important therefore that you encourage the family to describe what 9 or 10 might be for them, which becomes the measure of success the family can work towards as part of their **Early Help Plan**. The scale below is an example used with the Outcome Star, but not exclusive.



- It is important that the Early Help Plan, once completed, sets Specific, Measurable, Achievable, Realistic and Time bounded targets (SMART) for the family.

The Early Help Plan

- The **Early Help Plan** should be guided by an assessment, which does not have to be an **Early Help Assessment**. Regardless, whatever type of assessment is used to inform the plan, the practitioner should always agree with the family/individuals what the goals are that should be set in the plan. Progress against the plan can be reviewed from time to time and new goals identified as required and agreed with the family.
- Care should be taken to not impose goals and actions on a family that are unachievable or unwelcome. All objectives and actions should be set in agreement with the family and be SMART.

- The **Early Help Plan** encourages practitioners to consider the families perspective by answering ‘*What we want to change and for whom?*’ (Goals) and stating ‘*What will be different*’.
- To ensure the plan is manageable try not to set more than 6 to 8 goals and write these in no more than 6-8 words to ensure they are easily understood and free of professional jargon.



Date	What do we want to change and for whom?	What will be different?	Actions to be taken	Timescale	By Whom?	Progress and Comments Since Last Review	Date completed	
The plan should contain no more than 6 to 8 objectives						Progress Score (0-10)		
1	4/1/2017	Jason will feel able to go to school	Jason will feel more confident in himself, less anxious and worried and will catch up with his learning	Catherine will work with Jason 1:1 on his self esteem and anxiety	6 to 8 Weeks	Catherine with Jason	6 (previously 4)	4/3/2017
2	4/1/2017	The family sit down together for a meal	The family will have an opportunity to meet together and discuss problems	Everyone agrees to try to do this at least once each week	6 to 8 weeks	The Family	5 (previously 2)	4/3/2017
3	4/1/2017	Bruce will be respectful to his neighbour	The family's neighbours will feel safe and secure and less harassed. Both households will be able to get along and live next door to each other	Bruce to always be polite and respectful when he sees or speaks to his neighbours	Ongoing	Bruce	8 (previously 2)	4/3/2017
4	4/1/2017	Joanna would like to return to work	Joanna's self esteem and confidence will improve, the family will have more money and be able to take part in enjoyable activities together	Joanna to meet with the TF Employment Advisor and agree a progress to work plan	Weekly for next 12 weeks	Joanna with John (TFEA)	5 (previously 1)	4/3/2017
5	Click here to enter	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter

Family Consent

- Early Help Services fall within Levels 2 and 3 of the Continuum of Need (below safeguarding thresholds) and require consent from the family to access or share information with other services.
- A family must request or agree to support, and this must be evidenced by the family signing a consent/permission to share form, or within the assessment.
- Some agencies may have alternative arrangements for obtaining consent. Please ensure that any consent meets the requirements for any exchange of data. The signed consent should be stored with the family's records.

Storage and data protection issues

- All assessment documents should be stored according to data protection guidance and the policy of the agency/s involved.



- Any assessment or other document exchanged digitally should use a secure network (i.e. GCSX, Any Coms) or be sent by post taking care to ensure that documents are secure and addressed correctly when sent.
- All documents associated with the completion of the EHA and/or plan should be disposed using confidential waste or shredding.

Who to contact/where to go for more information

- For more information regarding Early Help Assessment, the Early Help Plan or Early Help services, please refer to the Local Children's Safeguarding Board website www.lscb.gov.uk.
- Working examples and templates will be developed over time and uploaded to the LSCB website.