

## **When should I use the Early Help Assessment Form (EHAF)?**

When you have concerns that a child or young person is vulnerable then an EHAF can be used to gather together information to help you form a judgement about whether further action is required

When you know that a child or young person is vulnerable the EHAF is the tool you should use for recording those concerns and for planning what action you will take to support them

The EHAF is also the tool to use if you wish to refer a child to Early Help Services such as Children's Centres or Targeted Support through the **Early Help Unit**.

## **Do I need to get consent from the child, young person or family to complete an EHAF?**

It is good practice to involve the child, young person and family, as much as, you can in coming to an assessment of what help is needed and their views should be clear in your recording on the form.

You need to get consent in order to share the form with other agencies and so when you come to log the EHAF or to make a referral to the Early Help Unit you will need to get consent.

For children under the age of 12 the consent of someone with parental responsibility is required. For young people aged 16 or older they may consent unless you think there may be a learning disability or mental health problem which prevents them fully understanding what they are consenting to. In those circumstances you should seek advice from the Early Help Unit. For those aged 13-15 they may consent if you can answer yes to all of the relevant questions in section 7 of the Early Help Assessment form. If the answer to any of these questions is "no" then parental consent would be required.

When trying to obtain consent it is best to outline your concerns in a non judgemental manner and to ask open questions such as "what do you think needs to change?" or "what help would you need to make things better?". Allow time for the family, child and young person to talk through any concerns they have about the EHAF process or referral to another agency. If the family ask for specific restrictions on information sharing then record this on the form.

## **Can I use the EHAF in conjunction with other assessments?**

The EHAF is designed to provide a starting point to the holistic assessment of a child's needs but there will often be cases where additional assessment will enhance the picture. It is therefore encouraged for other tools to be used as an adjunct to the EHAF. Over time the Children's Trust will look to provide validated tools that practitioners can chose to use alongside the EHAF.

## **What do I do if I am completing an EHAF on more than one child or young person in a family?**

Each child or young person will have their own individual story and needs so it is important that this is fully acknowledged through the completion of a form for **each** child or young person. However, much of the detail may remain the same across the “Family and Environment” and “Parents and Carers” sections so it is suggested that forms are completed electronically and edited to reflect the individual child or young person.

## **Guidance on completing the sections of the EHAF**

### **Section 1: Practitioner and Contact Information**

You should try and fill in this section with as much detail as you can but if there are gaps this should not be used to delay the required help.

Gender and ethnicity should be based on the child’s, young person’s or family’s statement rather than practitioner observation.

The parent carer information in this section should be the primary carer or carers. You may fill in details for more than one family member, for example when mother and father are equally involved. Where they have separate addresses or parental responsibility differs you may wish to use the additional information sheet at the end of the EHAF to separate the records.

### **Section 2: Family and Environment**

It would be useful to say at the beginning of this section where the information has come from, for example from the child or family themselves, records held by your agency or from direct observation during a home visit. A number of areas are suggested to guide your assessment, although these are not exclusive:

***Who are the family members?*** – record who the members of the household are, what is the nature and strength of their relationships and what is the impact of this on the child who is the subject of the EHAF?

***Where do they live?*** – say a little about the neighbourhood where they live. Does this make the family isolated or does it offer good opportunities? What local resources are available to them? Is there a high level of deprivation or anti-social behaviour? What is the impact of this on the child who is the subject of the EHAF?

***What do they do (employment/interests)?*** - Are parents or carers in work and if so what do they do? Have current employment circumstances led to financial issues for the family? Do the family have significant hobbies or interests? What is the impact of this on the child who is the subject of the EHAF?

***What support networks do they have?*** – Describe the support available from the wider family and local community. Are there particular strong friendships or religious or cultural networks? What is the impact of this on the child who is the subject of the EHAF?

*What professional support do they currently receive? If the family is already in touch with voluntary or professional agencies then say which agencies and why.*

*Is there a history of significant events? Significant events could be historic or current. For example there could have been family breakdown or bereavement. There could be a situation with a medical condition, disability or involvement with drugs, alcohol or the justice system. What has been the impact on the child who is the subject of the EHAF?*

## **Section 3: Family and Environment**

There are three questions in this section and you are asked to provide supporting evidence for each one. Again it would be useful to say in your conclusions where the information has come from.

***Are the parent(s) able to provide basic care ensuring safety and protection? – If your assessment is that the answer to this question is “no” you should consider whether this case may meet the threshold for involvement by Children’s Social Care. In these circumstances you should contact the **Multi-Agency Safeguarding Hub (MASH)**.***

***Are the parent(s) able to provide emotional warmth and stability? - You are asked here to form an initial opinion on the quality of the relationship between the child and their primary carers. You should ask yourself questions such as whether there are consistent displays of emotional warmth, is an interest shown in the child and their development (for example through play or other engagement), is there a tendency to be over anxious or over protective?***

***Are the parent(s) able to provide guidance and boundaries? – This questions asks you to form an opinion of the carer’s ability to create a system for ensuring appropriate social behaviour. You should comment on the appropriateness and consistency of rules and sanctions. You should also comment on whether carers are working together on a shared value base and understanding or whether there is conflict. You should record any views expressed by the parents or the child.***

## **Section 4 – The Child / Young Person**

This section gives an opportunity to write a short pen picture of the young person. It is important that you balance any perceived deficits with the strengths that the child or young person has. You should make reference to their personality and general presentation. You may also want to comment on any specific differences between the family and the child, for example a difference in ethnicity, religion or beliefs.

This section also gives you an opportunity to summarise your concerns, and the concerns of the family and the child themselves, about their current circumstances.

## **Section 5 – What Needs to Change?**

This section gives you, the family and the child an opportunity to say what it is that they would like to change. It recognises that this may be different for the different parties. It can be helpful here to ask the family to verbalise a vision of what things would look like if they were better. This can also help you think together about what the first steps might be towards that for inclusion in the planning section.

## **Section 6 - Planning for Change**

It is important that that families, children and young people own and participate in their plan with support from professionals. Plans should be realistic, time limited (normally planning should focus on the next 3 months and in some cases may want to be significantly shorter) and focused on a specific outcome. A plan may only represent the first step towards achieving a longer term goal.

Planning may include pulling together a group of professionals and supported of the family to form a “team around the child” to help deliver the plan.

## **Outcomes**

When you have completed delivery of the plan the “outcomes” section offers the opportunity for you and the family to review whether it has made a difference. It is quite acceptable at this stage to produce a revised EHAF and to start a new plan if the objectives are not yet achieved.

## **Logging an EHAF**

When you have completed an EHAF and have the consent to share it you should let the Early Help Unit have a copy. The Unit will then be able to provide you with ongoing advice and support to help deliver the plan. When you have completed the plan and “outcomes” section you should also send this to the Early Help Unit.

## **Using the EHAF to make a Referral**

When using the EHAF to refer to a service through the Early Help Unit, it is essential to complete the additional information section and attach any relevant supporting evidence to avoid a delay in the referral being processed. Examples of supporting evidence required include: recent attendance certificates where the referral is to Targeted Support for attendance; evidence of consent from the young person/parent/carer or in the case of attendance evidence that they have been made aware of the referral.