

## Early Help Assessment (EHA) Guidance for Professionals

As part of Herefordshire's Early Help Strategy, the Common Assessment Framework (CAF) has been replaced by the Early Help Assessment (EHA). The EHA has been designed to make it quicker and easier for families with emerging needs to be identified and access the appropriate level of support.

It's intended that the EHA will be simpler to complete than the CAF. The form itself is an electronic Microsoft Word document, which means that apart from the written consent section, the form will need to be completed via computer, laptop or tablet. Each input area in the assessment either allows you to add text information directly or choose an option from a drop-down box. Text boxes will expand so you can include as much information as you require.

### **The Early Help Assessment is divided into two parts:**

**Part 1** contains the family information, EHA Consent and a short assessment for cases where **emerging needs** have been identified, this may also include requests for Children Centre Services.

**Part 2** contains a more in-depth assessment for those families who have more complex needs requiring a multi-agency approach.

## Consent

We need to make sure that family members are clear what will be done with their information. Please make sure that they are comfortable with what is said about them in this form.

Where we need to share personal information to deliver services to individuals and families, please make sure that their consent (where given and necessary) is recorded in the consent section on page 1.

A copy of the Early Help Assessment should be given to the Young Person/Family, with a copy retained for your own records.

A copy of the EHA Word document, including a scanned copy of the consent on page 1 must also be sent to the Early Help Team via secure email or Anycomms (Early Help).

Secure email to Early Help Co-ordinator via:

[Earlyhelp@herefordshire.gcsx.gov.uk](mailto:Earlyhelp@herefordshire.gcsx.gov.uk)

Schools should send documents securely via **Anycomms** (destination: **Early Help**).

Please be aware due to data protection laws we can only accept signed documents which include consent. **EHA forms where consent has not been completed will be returned to professionals and not registered with the Local Authority system.**

In-line with Herefordshire Safeguarding Children Board's aspiration that children, young people and families receive the right support at the right time, this EHA document asks professionals to consider the Levels of Need guidance during each stage of the assessment. This helps professionals and families to think about where families may need most support, what services are available locally and how to gain access to support at each stage.

The most recent Levels of Need guidance can be found at: [Levels of Need guidance](#)

Link <https://herefordshiresafeguardingboards.org.uk/herefordshire-safeguarding-children-board/for-professionals/key-child-protection-documents/>

## Families First

To find out more about the Families First Programme in Herefordshire please visit

[Families First](#)

Link: [https://www.herefordshire.gov.uk/info/200207/family\\_support/614/being\\_a\\_parent/5](https://www.herefordshire.gov.uk/info/200207/family_support/614/being_a_parent/5)

## Role of the keyperson

The key person is the professional responsible for completing the EHA form. They will liaise with the Early Help co-ordinators to ensure the information is registered and monitored on a regular basis.

EHA Part 1 - The key person is the person that completes the form. The Early Help co-ordinator may need to contact this person to clarify or gain more information. In some instances the key person identified on part 1 may be asked to complete the full Early Help Assessment.

EHA Part 2 - The key person will be the person appointed to co-ordinate the support for the child or person. This can be through regular meetings (TAF) or through the Family Network Meetings. The key person will complete a closure form when Early Help support has finished or when the family disengages.

## Completing the Early Help Assessment

### Early Help Assessment Part 1

As detailed above, Part 1 of the EHA contains the consent for the whole assessment, so must be completed in all cases. Part 1 will also allow you to complete a short assessment where emerging needs may be more readily identifiable.

#### Family Details, Main Address and Family Members

- Include family surname, or surnames.
- Include family's main address where members of the family live the majority of their time. Other address can be included later in the assessment in Part 2.
- Enter the names, dates of birth, Gender, early years/education setting, relationship and ethnic origin of all families members (adults and children) included in the consent.

#### Information Sharing & Consent

- Consent must be obtained for the EHA to be completed. This sections allows the family to provide consent and understand the wider EHA process, including TAF and FNM Meetings (boxes must be cross/ticked).
- Here, the Young Person/Parent/Guardian can also provide details of any person or agency/setting who they do not wish to share any information with.

#### Summary of Presenting Needs

- In line with Herefordshire's Families First Programme, this section helps to identify areas of need which may fall under the support criteria of the scheme.
- Please tick all boxes that apply.
- See the information on Families First for more details on the programme.

#### Other assessments

- Please provide information on any other assessments or reports which may be relevant to the EHA. For example, if a child on the EHA has an Education and Health Care Plan, you could include some brief information about it here (date started, child involved etc.)

**Presenting Needs**

- Include information on why the assessment is being completed and what needs to change. You should try to link this to any boxes you have ticked in the Summary of Presenting Needs.

**Details of Person Completing the Form**

- All contact details of the person who has completed Part 1 of the EHA should be included here, including a date for when the assessment was completed.

**Outcome of Part 1**

- At the end of Part 1 of the assessment, you will need to think about what happens next. It may be that a small piece of work can be done to improve things for the family or there may be no actions at all. In these cases, you may decide to conclude at Part 1 of the assessment.
- Conversely, it could be that you think a more in-depth discussion with the family is required and so need to complete Part 2 of the assessment and draw up a multi-agency actions plan.
- This section requires you to select an option from the drop-down box. Some options require a brief explanation. For example, if the EHA Part 1 is concluding as needs can be met via a Single Agency Response, please provide brief details.

As with its predecessor the CAF, the Local Authority is the designated information holder of the Early Help Assessment, so all EHAs (Part 1/Part 2) should be sent to the Early Help Co-ordinator Team (see contact details above).

**Early Help Assessment Part 2**

Following the completion of Part 1 of the EHA, you may discover that the family's overall picture is more complicated and requires a more in-depth assessment. In these cases you should move to Part 2 of the EHA so that further discussion can be had with the family about their unmet needs. In most cases Part 2 will require a multi-agency action plan to support any unmet needs.

**Details/Information of other significant persons not listed above (in Family Details)**

- Here you can include extra information about other significant adults or children involved with the family.
- You can also include any important addresses not listed in Part 1. For example, a child may have contact or stay with a family member not living in main address.

**If Child Sexual Exploitation (CSE) is a concern, has the CSE Screening Tool been completed?**

- If the CSE Screening Tool has been completed on a family member, please indicate yes or no in the drop-down box. You may wish to include more information on this later in the assessment.

The CSE Screening Tool can be found via link: [CSE Screening Tool](#)

Link: <http://westmidlands.procedures.org.uk/local-content/4cjN/child-sexual-exploitation-risk-assessment>

**If issues around neglect have been identified, has a Graded Care Profile been completed with the family?**

- If a Graded Care Profile has been completed with the family, please indicate yes or no in the drop-down box. You may wish to include more information on this later in the assessment.

**If a disability has been identified within the family, please provide details below:**

- If a family member has a disability, please indicate yes or no in the drop-down box. You may wish to include more information on this later in the assessment.

**Other Professionals supporting the family?**

- Outside of your setting/agency, there may be other Professionals who are supporting the family, so please provide information in this text box.

- Other service registrations? For example, for families with children under 5, have they been registered with the local Children's Centre?

**Is an Interpreter required to complete the full Assessment?**

- Please indicate if the family (or family member) requires an interpreter to complete the assessment. Select yes or no from the drop-down box.

- If an interpreter is required, please provide details.

## Assessment Tool Aide Memoire

### Child Development

#### Health

- Growth and development for child milestones.
- Physical and mental wellbeing of whole family.
- Disabilities and impairments.
- Impact of genetic factors.
- Impairment Needs.
- Appropriate health care - Doctor.
- Appropriate health care - Dentist.
- Appropriate health care - Optician.
- Adequate and nutritious diet.
- Hospital or A&E admissions.
- Exercise.
- Immunisations.
- Substance Misuse.
- Was birth planned/unplanned?
- Details of birth – natural/caesarean/premature.
- Childhood illnesses.
- Attending health-related appointments.

#### Education

- Opportunities for Play and Social Interaction.
- Opportunity to acquire new skills.
- Resources available and experience of success and achievement.
- Parent involved in educational activities, progress and achievements.
- Families with children under 5 have been registered with Children's Centre.
- Special Education Needs?
- Other family member's success and achievements.
- Attendance at nursery/school/college.
- Child behaviour and concerns at school.
- Exclusions.
- Is child/Young Person in education? – If so what type? i.e. mainstream/PRU/NEET.
- Level of achievement at school.
- Parent's relationship with school; attending parent evenings/events.
- Child's view of school; topic/subject struggles and successes.
- Does child have good relationships in school? – Peers/teachers/staff.
- Education history/amount of schools attending.
- Any issues in regard to bullying?
- Attendance at after school clubs/school activities/events.
- Is there an Individual Education Plan (IEP), Personal Education plan (PEP) or Education Health Care Plan (EHCP)?

- Stimulation at home/toys/ homework support.
- College/work experience.
- How child gets to/from school/distance.
- Presentation/has correct equipment.
- Any additional support need – i.e. unaccompanied asylum seekers.
- Any exclusions/expulsions.
- Lunch arrangements.
- School refuser.

### **Emotion & Behaviour**

- Concerns of feelings and actions by family members.
- Attachments to parents/siblings/friends/pets.
- Temperament.
- Adaption to Change.
- Response to stress and self-control.
- Behaviour at home/school; is it different?
- Chronology; patterns of behaviour.
- Ability to show emotions.
- Ability to make and keep friends.
- Do parents have any concerns/positive views on child's behaviour?
- Any mental health issues/involvement with CAMHS?
- Sexually inappropriate behaviour.
- Emotional maturity; i.e. too mature/immature for age.
- Emotional intelligence/resilience.
- Exposure to domestic abuse.
- How do parents manage behaviour/discipline/praise?
- How does child/Young Person respond to guidance/rules/boundaries?
- Does child play/have opportunities to play in different environments?
- Interests/hobbies.
- Any self-harming/suicidal tendencies?
- Any issues with food? i.e. anorexia

### **Identity**

- Perception of self-value, abilities, image and self-esteem.
- Positive sense of individuality.
- Feelings of belonging and acceptance of peer group, community, etc.
- Cultural issues; is child/family living within their own cultural background.
- Access to other cultures.
- Views of parents/child on culture; are parents/child/Young Person racist?
- Religious beliefs; attending church/mosque etc.
- Peer relationship; bullying issues.
- Who does child identify with? Family, siblings, etc.
- Values.
- Child's life story, role/place in family.
- Gender issues/sexuality.

- Any environmental issues which impact on identity? i.e. Gang culture.
- Language.
- Interest in music, sports, etc.
- Any role models?
- Any ambitions/goals?

### **Relationships**

- Development of empathy, placing one's self in someone else's shoes.
- Age appropriate friendships.
- Stable and affectionate relationships between family members.
- Pecking order in family and the value of the child in the family.
- Contact arrangements for separated parents/family.
- Contact with extended family.
- Peer relationships.
- Attachments in family.
- Sibling relationships.
- Step-Family relationships.
- Activities as a family.
- Ability to form and keep relationships.
- Sense of value.
- Family values.
- Relationships with neighbours/wider community.
- Who does child go to with problems? – Safe haven/person.

### **Presentation**

- Understanding of the way in which appearance, behaviour and impairment are perceived by the outside world.
- Dressed appropriately in all types of weather.
- Clean.
- Young person/child cares about own appearance.
- How child presents themselves; body language, eye contact, etc.
- Behaves appropriately in social situations.
- Awareness of social contact.
- Level of hygiene.
- Confidence.
- Ability to express self in different setting, school, home, socially
- Is the child happy?
- Ability to communicate.

### **Abilities & skills**

- What are child/parent good at?
- What do the children like to do?



## Family & Environment

### Social Interaction

- Local neighbourhood and community impact.
- Degree of family integration or isolation.
- Peer groups, Friendships, Social Networks.
- All facilities available within the neighbourhood.
- All services available within the neighbourhood.
- Primary Healthcare.
- Day care.
- Schools.
- Places of worship.
- Transport.
- Shops.
- Leisure Facilities.
- Effect of services on disabled family members.

### Income

- Is there sufficient income to meet the family needs?
- Is the family in receipt of benefits?
- Level of Debt.
- Claiming Free School Meals.
- Identify the way in which resources available are being used.
- Financial poverty.
- Are there financial difficulties?
- Are the family able to budget/ savings?
- Child Pocket money.
- Universal Credit.

### Employment

- Who is working in the household?
- Pattern of work/ changes.
- What impact does this have on the family?
- How does work effect the relationships at home?
- How is work/absence of work viewed by family members?
- Child/young person's view on work and impact.
- Have family members worked in the past?

## Housing

- House moves – Why?
- Bedrooms.
- Does the accommodation have the basic amenities and facilities? - water, heating, sanitation, cooking facilities, sleeping arrangements, cleanliness, hygiene and safety.
- Is there a need for disabled access?
- Safety in the home.
- Child friendly Home.
- Pets.
- Privacy and overcrowding.
- Interior and exterior condition.
- Tenancy Arrangements; Housing Association, private rental, etc.
- Rent Arrears.
- Eviction.
- Enforcement Action.
- Universal Tax Credits.
- Housing/ASB prosecutions.

## Family History and Functioning

- Family Relationships.
- Significant Change/ Life Events.
- Sibling Relationships.
- Absent Parent.
- Wider Family.
- Frequent house moves.
- Offending history of family members.
- Current or historic Police involvement; adults and/or children.
- Armed Forces or Service families.
- Parent's own childhood/schools/parenting and impacts on children/family.
- Who disciplines and how?
- Support networks.
- Neighbours.
- Previous involvement with Children's Services?
- Drug/alcohol issues.
- Domestic abuse issues.
- Mental health issues.
- Sexual abuse issues.
- Any young carers in family?
- Who is important to the child?
- Risks posed by wider family.
- Protective factors.
- Identification of non-biological family & distant family members.

## Parenting

### Parenting

- Response to child and behaviour.
- Child's needs and welfare.
- Family are able to provide safety and Care?
- Difficulties in responding to a child need and welfare.
- Effect the child is having on Parent.
- Understanding of a child's needs and development.
- Comprehension of parenting tasks and relevance to child's developmental needs.
- Impact of difficulties and ability to carry out tasks (distinguishing realisation from aspiration).
- Impact of past experiences on their current parenting capacity.
- Their ability to use support and accept help.
- Their capacity for adaption and change in their parenting response.
- Family relationships – past and present.
- Parent's experiences of being parented.
- Parent's ability to identify/acknowledge risks.
- Parent's life history. i.e. have parents being in LA care.

### Basic care

- Providing physical needs; food, drink, warmth, shelter, clean and appropriate clothing and personal hygiene.
- Ensuring Safety.
- Protection in the home and supporting appropriate relationships with unsafe adults/ children.
- Hazards away from the home.
- Emotional warmth.
- Emotional needs and a sense of feeling valued within the home.
- Stimulation.
- Promoting child's intellectual development via encouragement and cognitive stimulation.
- Promoting social opportunities.
- Promoting educational opportunities, success at school and achievements.
- Responding to child's questions and development via interaction and communication.
- Joining in child's play.
- Meeting medical needs and attending appointments.
- Appropriate supervision.
- Daily Routine.
- Preparations for unborn baby.

**Safety**

- Safety measures in home; stair gates, fireguards, etc.
- Appropriate level of supervision.
- Locking away dangerous objects; medication, drugs, etc.
- Acknowledging and understanding risks.
- Taking safety measures with animals.
- Sexual awareness; access to adult materials.
- Internet/TV/mobile phone supervision.
- How do parents manage mental health and/or self-harm issues?

**Warmth & Love**

- Attachment.
- Response to child; negative/positive/indifferent.
- High criticism/low warmth.
- Pleased/proud of child's achievements?
- Wants Child/Young Person to do well and achieve.
- Have aspirations/hopes for Child/Young Person.
- Expectations of Child are age appropriate.
- Response to Child/Young Person is consistent/stable.
- Is parent available to Child/Young Person?
- Parents perception of Child/Young Person.
- Who does Child/Young Person go to when they are hurt/upset?

**Stimulation**

- Age appropriate toys.
- Parent plays with child.
- Takes interest in child's educational development.
- Knows when Child/Young Person needs support.
- Promotes Child/Young Person's development.
- Knows what Child/Young Person likes/doesn't like to do.
- Parents encourage social activities/clubs/hobbies.
- Parents ensure homework is completed.
- Parents attend Children's Centre or other support setting.
- Computer/internet usage.

**Guidance & Boundaries**

- Enabling a child to regulate their own emotions and behaviour via demonstrating appropriate behaviour, control of emotions and interactions with others.
- Development of social problem solving, anger management; consideration of others and effective discipline.
- Forms of discipline used within family.
- Use of physical chastisement?
- How parents were disciplined as a child.
- Level of expectation of Child/Young Person is age appropriate.
- Consistency between main care givers.
- Supportive/encouraging.
- Flexible approach to guidance/boundaries as Child/Young Person grows up.
- Household/bedtime routines.
- Are all children in the household following the same rules?
- Praise/rewards.
- Is there a clear structure for child?

**Stability & Security**

- Who have been the main care givers?
- Amount of partners.
- Length of relationships.
- Amount of house/school moves.
- Extended family relationships.
- Relationships with neighbours/family friends.
- Relationships with separated family members and step-family.
- Emotional availability of parents.

**Strengths & Worries****Strengths**

- What are the main strengths in the family?
- Parental strengths.
- Family strengths and resilience.
- Local resources.
- How will you know things have improved?
- How will the family know when things have improved?

**Worries & Concerns**

- What are the main worries that the family have?
- Professional concerns.

**Protection**

- Reporting incidents of risk/abuse/domestic abuse to police.
- Taking appropriate action to end violent relationships.
- Not using physical chastisement as form of discipline.
- Keeping risky adults away from child/home.
- Not subjecting child to any form of abuse.
- Schools received or receiving Encompass reports via Police.

**Co-operation**

- Accepting concerns from agencies.
- Being willing to change/work with settings/services.

**Motivation**

- Parents/Carer's motivation.
- Capacity to meaningfully engage.
- Accepting change.

**Family Plans for Future**

- Training and employment plans.
- Future house or location moves.
- Parent/child goals and aspirations.
- What does positive change look like to the family?

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**Family Voice**

- In this section, children and adults in the family should be given the opportunity to include any comments or feelings they have about any part of the Early Help Assessment and the information it includes. This could relate to why the assessment was started or what they want to change to improve things.

**Agreed Actions for Support**

- This section details the actions agreed by the family and professional(s) at the conclusion of the assessment.
- As the EHA is used to identify criteria and outcomes for Families First, if appropriate please provide an indicator and outcome code for each action. If you need support with this, please refer to the [Families First Guidance Document](#) or contact an Early Help Co-ordinator for support.
- Provide a desired outcome and detail any actions which will be completed.

- List who is responsible for each action. This could be a professional, setting or a family member.
- Provide a 'By When' date so actions can be reviewed at the appropriate time.

**Agreed review date**

- Input a date when you aim to review the case with the family either at a Team Around the Family Meeting or a Family Network Meeting.

**Key Person**

- The Key Person is the main point of contact for the family involved in the EHA. The Key Person is responsible for ensuring the EHA is reviewed and closed when appropriate.
- The Key Person's details should be entered in this section so they can be logged centrally.

**Final Signatures**

- Parents/Carers/Young Persons should be encouraged to sign the end of the EHA to ensure they are happy with the information and actions included.