Key aims of the Early Help Assessment

- Approach based on a Common Assessment
- Assessment to support early intervention
- Improve joint working and communication
- Support the sharing of information
- Rationalise assessments
- Support better referrals, where appropriate

Principles of an Early Help Assessment

- A process supported by a standard form
- Holistic and family centred
- Focuses on needs and strengths
- Simple and practical
- Empowering and a joint process
- Cannot guarantee service provision
When to undertake an Early Help Assessment

You should undertake an early help assessment when it will improve outcomes for a child and/or prevent escalation of concerns.

Designed for when:
- There are concerns about progress
- Needs are unclear
- The support of more than one agency is needed

Need not be done when:
- Progress is good
- Needs are identified and being met
- Needs are clear and can be met by family/assessing agency

Follow LSCB procedures where appropriate
Liverpool Safeguarding Children Board

Promoting Children’s Wellbeing in Liverpool - Levels of need as a continuum

Level 1

Universal services

These are children who make good overall progress through appropriate universal services.

No additional unmet needs or there is/has been a single need identified that can be/has been met by a universal service.

Level 2

Additional Needs

- Multi Agency Early Help:
  Children whose needs cannot be met through universal services and who require additional support. It includes children whose current needs are unclear. Team around the Family will identify lead professional to co-ordinate support. Early Help Assessment Tool (EHAT) needed.

Level 3

Complex Needs - MultiAgency Early Help:

- Increasing level of unmet needs. Depths of needs are more complex and co-ordinated support is required to prevent concerns escalating. It includes children whose needs are not being met. Team around the Family will identify lead professional and support can prevent escalation of concerns. Children/Families. Early Help Assessment Tool (EHAT) needed.

Level 4

Acute/Specialist, Including Safeguarding:

These are children who have experienced significant harm or are at risk of significant harm (Section 47) and includes children where there are significant welfare concerns (Section 17). A Single Assessment co-ordinated by a social worker is required to determine the level of support/intervention.

Effective Information Sharing

Contact Careline immediately for concerns that a child has suffered or is likely to suffer significant harm (Level 4) or where you are not certain.

The windscreen model is used for illustration only and does not necessarily reflect the proportions of families within Liverpool that come under the levels of needs described.

Consent is always needed when offering single or multi-agency support to families and parental engagement is fundamental. This enables effective sharing of information and appropriate support being put in place regardless of the level of need. However, consent is not needed when there are significant welfare concerns or likely risk/harm for a child.
The content of the Early Help Assessment

Pre EHAT
For designated services only

Process for undertaking a common assessment

EHAT – Standardised forms (including Review)

Parents and carers

Groups & elements

Family and environment

Development of child

All underpinned by the Common Core of Skills and Knowledge for the children’s workforce

STEP UP – Is the term used when an Early Help Assessment identifies significant risk of harm that requires Statutory (Social Care) interventions.

STEP DOWN – Is the term used when Statutory Services have completed their support, but it is necessary for further support which can be managed through multi-agency support (EHAT) to prevent a re-escalation of concern.
The EHAT Process

The EHAT processes can be broken down into three steps. These define what a practitioner needs to consider before, during and after the gathering of information with the child and family. The process is designed to provide a framework that engages partners in supporting families through a consensual arrangement.

- **Step 1: Preparation.** This involves recognising potential needs and then discussing the situation with the child/ren and family. Practitioners are encouraged to discuss with their managers, colleagues, or others – those already involved with the family. It is important to find out whether an EHAT (was CAF) already exists. After reviewing the existing information a practitioner decides whether to undertake early help assessment with the agreement of the child or family, as appropriate.

- **Step 2: Discussion.** This involves completing the assessment with the family, making use of information already gathered form the child, family or other practitioners, and completing a consent statement. At the end of the discussion the practitioner should understand the families’ needs better, and what can be done to help.

- **Step 3: Delivery.** This involves agreeing actions for services or the family, and considering what may be needed from other services. **Note:** the EHAT does not guarantee a service from another organisation without consulting that organisation. It is important that practitioners have a good knowledge of local services and how they operate.

Make use of Liverpool Early Help Directory to find out about local services: [fsd.liverpool.gov.uk](http://fsd.liverpool.gov.uk)

Decisions may be made through meetings with other practitioners and the family. A practitioner should be appointed as lead professional (usually with parent agreement). Managers should ensure that there is good systemised communication between services. Good communication will ensure agreed services are delivered, ongoing support is provided, and actions are regularly reviewed (ideally within a three month period).

If a review concludes that needs have been met (other than the need for of universal services), the current process will come to an end. If there are still un met needs, there will be further discussion, possibly undertaking further reviews, to identify further needs and discuss how they should be met.

If a review concludes that needs have escalated and meet the need for statutory services, an EHAT can be ‘stepped up’ for consideration of Social Care service support – the EHAT will provide a wealth of information to inform social care of those needs and what has been done to prevent concerns escalating.

Managers must ensure that practitioners understand local processes, including how to monitor and review the delivery of services.
**STEP 1**
**Preparation**
Practitioner Identifies child/children have additional needs or are affected by parenting.

**STEP 2**
**Discussion**
Gather and analyse information on strengths and needs, using the **EHAT**

**STEP 3**
**Delivery**
Determine and deliver interventions to meet these needs. Appoint a lead professional

Provide ongoing support; review delivery

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Close EHAT

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Risk of Harm

Needs not met

Step up
EHAT Process – basic overview

Concern Identified
Obtain consent to proceed with EHAT from child/family

Check Liverpool CAF log
0151 233 5772 or EHAT.team@liverpool.gcsx.gov.uk

Give Children’s – name, aliases, dates of birth, gender, address and practitioner details

Agree on Lead Professional with child/family (and any other services involved)

Undertake Early Help Assessment

If child/ren are subject to an open EHAT (or CAF) you will be given contact details of Lead Professional, if not undertake EHAT

Agree Action Plan
Set Review Date (within 3 months)

Record assessment and outcomes on EHAT

Store Copy Locally
Give copy to child/family (and all professionals providing support). Ensure consent to share information

Update Log with EHAT status
Open or closed.

Review within three months of the EHAT and then regularly (ideally three monthly thereafter).

Use the Planning and Review document to record progress and further agreed actions.

Update EHAT Coordinator

Send copy to the EHAT Coordinator
EHAT.team@liverpool.GCSX.gov.uk
Liverpool has now introduced a family EHAT. This allows for all children’s needs to be considered within a family. However, there may be ‘open’ CAFs for some children, where this was undertaken on the individual child.

Open CAFs will either ‘close’ naturally when all needs are met and there are no further concerns. Where it is important to assess the needs of siblings in the family – and there is an open CAF, this will support the information gathering for the EHAT, but will remain open whilst the EHAT is open.

This arrangement will remain under review so that reporting remains clear and consistent as the EHAT becomes strongly embedded.
Examples of when to initiate an Early Help Assessment

The situations that might lead to an early help assessment vary tremendously, and are very individual to each family. Where a practitioner has observed a significant change or worrying feature in a child’s appearance, demeanour or behaviour; where a practitioner knows of a significant event in the child’s life or where there are worries about the parents or carers or home; or where the child, parent or another practitioner has requested an assessment.

An Early Help Assessment could be needed if there are parental circumstances (e.g. parental substance abuse/misuse, domestic violence, or parental physical or mental health issues) that might impact on the child. For example, early help assessment may be appropriate when significant changes have been observed in children who are, have been or are at risk of (being):

- missing developmental milestones or, e.g., making slower progress than expected at school, regularly missing medical appointments and immunisations etc;
- Presenting challenging or aggressive behaviours (e.g. abusing/misusing substances or committing offences);
- experiencing physical or mental ill health or disability (either their own or their parents’);
- exposed to substance abuse/misuse, violence or crime within the family;
- undertaking caring responsibilities;
- bereaved or experiencing family breakdown;
- bullied or are bullies themselves;
- disadvantaged for reasons such as race, gender, sexuality, religious belief or disability;
- homeless (or being threatened with eviction), and those living in temporary accommodation;
- becoming a teenage mother/father or the child of teenage parents;
- not being ready to make the transition to post-16 services;
- Truanting persistently.
- where a routine post-natal visit causes the practitioner to be concerned about the living circumstances of a newborn;
- where a practitioner believes a child may have additional needs and wants to understand better what they are and what the appropriate response is, for example, where a school or early years setting perceives a child is being affected by elements such as domestic situations or health which are not necessarily related to SEN;
- where a practitioner is considering a referral to another service (e.g. to local authority Children’s Services, Child and Adolescent Mental Health services or a youth service); (note that if the child is at risk of harm or it is self-evident that specialist assessment is necessary, an immediate referral should be made);
- to provide more holistic information to augment decision-making at School Action or School Action Plus in cases where needs are not such as to require a statutory SEN assessment;
- as the basis for integrated case-working within multi-agency teams or targeted support in universal services, e.g. within extended schools or children’s centres and other early years settings;
• to support lead professionals by enabling them to build up and maintain an overview of needs and strengths; or where it is likely that several agencies are or need to be involved in supporting the child;

• where a child is displaying aggressive behaviour, e.g. in relation to bullying, truancy, withdrawal or other behavioural and emotional issues;

• where a child is exhibiting problematic or anti-social behaviour and where the underlying cause may be hidden (e.g. substance abuse/misuse);

• Where a child appears to have additional needs, but is unlikely to be eligible for support under existing threshold criteria for specialist services e.g. local authority Children’s Services or a statement of SEN.

The list above is not exhaustive. Also, the presence of one or more of these elements does not in itself mean that the child has additional needs – each case should be considered on its own merits, by skilled practitioners operating in line with local policy and practice.

All children who are or are considered to be at risk of significant harm should be referred directly to Careline or the police in accordance with the local LSCB procedures.

An early help assessment should not be completed if the child and/or their parent/carer do not give consent. In these circumstances and assuming there are no concerns for the child’s safety or welfare, case working systems should simply record the fact that an early help assessment has been refused and the record should indicate which agencies will continue their involvement with the family.

**Always refer to the LSCB Responding to Need Guidance and Levels of Need Framework:**

[www.liverpoolscb.org](http://www.liverpoolscb.org)
What Makes a Well Completed Assessment?

**Quantity of information**

Sets the scene well - comments made on all 3 domains.
Clearly sets out strengths and/or needs
Sufficient detail to inform all practitioners involved.
No gaps in information
Information recorded is fit for purpose.
Well –ordered
Issues weighted appropriately
Sources of information are clear and attributed and explained
Jargon/sector specific acronyms avoided
Well presented: bullet points if needed, check spellings, names and dates are correct
Frequency/duration is qualified (e.g. how often is ‘often’ or ‘sometimes’

**Approach**

Whole family engaged; this helps trust
Purpose made clear
Evidence – informed by fact
Non-judgemental
A one-off: a snapshot in time
Owned by the author (="data controller")
Observations linked to analysis
Child involved throughout (not just at end)
Comments made specific e.g. who said what
Focus is on impact on the child, not others

**Action Planning**

Clear plan of action with dates and who is responsible for what
Action plan tailored to next stage of the process
Actions prioritised
Timings included, where actions are to be taken within a reasonable time- include dates for actions to be completed, length of treatment etc, and project end date.

**Review**

The review dates should be set at the time of the Early Help Assessment and agreed with the parent/carer and agencies involved. These should ideally take place within a 3 month period
All actions and outcomes should be recorded and the EHAT Co-ordinator advised.
ADULTS FAMILY ASSESSMENT AND EHAT PATHWAY

IF YOU THINK A CHILD IS AT RISK OF HARM, FOLLOW LSCB PROCEDURES

ADULT ASSESSMENT

CHILDREN’S POTENTIAL NEEDS IDENTIFIED

PARENT/CARER IDENTIFIED AS REQUIRING A PACKAGE OF SUPPORT FROM ADULT SERVICES

ADULT SERVICES CONSULT WITH PARENT AND ADVISES EHAT WILL BE BENEFICIAL

GET CONSENT AND AGREEMENT TO SHARE INFORMATION

PRE-EHAT/YOUNG CARERS ASSESSMENT TO BE UNDERTAKEN

EARLY HELP COORDINATOR TO CONTACT RELEVANT SERVICE TO UNDERTAKE EARLY HELP ASSESSMENT

COMPLETE EHAT

CHILDREN’S NEEDS IDENTIFIED FOR EHAT ASSESSMENT

REQUEST FOR SERVICE(S) FROM AGENCIES

EHAT WILL BE INITIATED

Share outcomes of Adult Assessment and contribute to Team Around the Family (TAF) Meeting. Adult/Children’s Services and Lead Professionals continue to share information at all times to monitor progress and measure impact of interventions.
Liverpool’s Early Help Assessment is supported by a ‘suite of tools’. These will replace the previous CAF documentation, some of which are still in circulation and stored on practitioners desktops or saved as electronic files in folders.

Practitioners should always refer to the information held on Liverpool City Council’s/LSCB’s Website, as this will always be the most up to date information/documentation available.

Documents available:

- Guidance for Practitioners
- Pre-EHAT (for designated services only)
- EHAT
- Planning and Review
- Quality Assurance – prompts for practitioners
- Quality Assurance – prompts for supervisors
- Quality Assurance – LA Tool for ensuring quality assessments
- Information for Parents
- Questions and Answers
- EHAT Champions

EHAT Champions are representatives from partner services/agencies, who have volunteered to act as a point of contact to discuss matters of concern in relation to EHATs. These should be your first point of contact after your immediate line manager, when there is uncertainty on whether to initiate an EHAT, or where there is slow or little progress when supporting a family.

Find all of this information at:


Report concerns about risk of harm to careline – 233 3700

To find out if there is an open CAF/EHAT – Tel: 233 5772
Email: EHAT.team@liverpool.gcsx.gov.uk