Multi-Agency Early Help Assessment Tool (EHAT)

Guidance Notes

Aware
Advise
Assess
Action
And so what?
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How to use this guidance document

This document will provide information and guidance to support you in using the EHAT document. Throughout the EHAT document you will see the ‘I’ symbol indicating that you will find information to support you in completing the section in the EHAT guidance document.

There are a number of documents and templates that have been created to support you in completing an EHAT. Where you see the template symbol, there will be a document relating to that section

Gaining consent:
The Early Help Assessment and multi-agency working process is voluntary support for a family. It is important that you gain consent at the start of the process from the family this includes the child/young person and the parents/carers.

By providing consent they are allowing services that are involved to access the completed assessment and information gathered. If there is any service that they do not wish to share the assessment with, this must be clearly stated.

It should be made clear to families the benefits of consenting to sharing information to engage other services and appropriate support to be provided.

Where services are directly involved with older children/young people, professionals must consider the capacity of the child in order to make their own decisions where appropriate.

Refusing Consent:
Where families refuse consent you should consider the reasoning behind this. You should consider if the concerns for the child indicate that a referral should be made to Sutton MASH for possible statutory interventions.

If a referral to MASH is being made parents should be informed, unless doing so would place the child at likelihood of significant risk of harm.

You may still share information without consent if:
https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice

Before you start an Early Help Assessment contact EHAT@sutton.gov.uk to find out if an Early Help Assessment has already been logged by another professional
Introduction

What is Early Help?

Early help means providing support as soon as a problem emerges, at any point in a child’s life, from the early years through to the teenage years. Early help can also prevent further problems arising.

Intervening early prevents difficulties arising and early help plays a significant role in preventing escalation of concern from conception and throughout life.

Sutton’s Vision

Children and Young People in Sutton live with resilient families, are happy, safe and healthy and grow up with the skills, knowledge and attributes to be confident and independent; ready for adult life.

Sutton’s Early Help Objective

All services work together to provide a seamless offer to children and their families, preventing the escalation of need and ensuring targeted, timely interventions that are supported by effective multi agency practices of ‘Awareness’, ‘Advice’, ‘Assessment’, ‘Action’ and lastly, ‘And so what?’

Awareness is providing relevant and accessible information at key points in a child or young person’s life and is a key strategy to promote positive attitudes towards health, self, the community and others. Those working with children, young people and their families should have services, resources and information readily accessible to enable them to understand needs and provide timely, sensitive interventions that prevent issues arising.

Advising means having an informed discussion with families around the options available to them and next steps to support them with any issues they may face. It also means providing advice and guidance to agencies where it may be needed.

Assessment is an ongoing formative process that allows frequent adjustments to provision and creates tailored packages to support. In Sutton this will take the form of a new single assessment for access to all early help services. This assessment will take into account the whole family and should be timely, appropriate and proportional.

Action is the means by which early needs and vulnerabilities are addressed. The delivery of services should be planned in accordance with need, local priorities and through pooling the resources of local agencies to target resources where they are most needed. This investment in early intervention should lead to a reduction in the number of issues presenting by preventing them from escalating at an early stage.

And so what? After taking action, officers should consider the outcomes from any interventions and consider any future support required.
What is an Early Help Assessment?

The early help assessment is a tool to help the early identification of children and young people’s emerging needs and strengths and promote coordinated, timely service provision. The assessment is a family based assessment meaning that each child’s needs and strengths can be captured in one place, taking into account the whole family and its unique context.

Effective early help assessments ensure everyone works together, and provides a forum for the whole family and the key professionals involved with them to form an assessment of the current situation of the child or young person. This reduces the needs for families to repeat their stories, and ensures that the right people are in place to quickly provide appropriate support and services.

The assessment should always be undertaken in a sensitive and supportive manner, it may seem a scary process for families so you may need to speak to them a couple of times about the process.

When to complete an Early Help Assessment

- If you are worried about a behaviour, incident or information
- Require more information to help you plan next steps to address an issue
- The child, young person of family needs cannot be met by a single agency
- If a parent expresses concerns

Undertaking an Early Help Assessment will help you to:

- Identify needs and explore any concerns
- Address emerging multiple needs
- Promote early help services where additional needs are identified
- Create packages of tailored support
- Co-ordinate support and involvement through a named Lead Professional
- Share information effectively and appropriately
- Reduce the number of times a family needs to tell its story

Before undertaking a new early help assessment it is important to find out if one has already been completed or started and if there is a Lead Professional, or if Social Care are involved.

To do this contact EHAT@sutton.gov.uk or call 0208 770 4128
The EHAT Pathway

If at any point you are concerned about the safety or welfare of the child or young person seek immediate advice by contacting the MASH on 0208 770 6001

- Concern about a child, young person or family requiring more than a standard response
  - Discuss with child young person and family, gain consent
  - Undertake Early Help Assessment using the EHAT
    - Identified needs can be met by my agency
      - Send EHAT to Early Help Co-ordinator
        - Deliver support and services in line with action plan
          - Review (EHAT-R Form)
    - Identified needs require another/multiple agencies
      - Send EHAT to Early Help Co-ordinator Hold a Team Around the Family meeting (TAF)
        - Create action plan, deliver coordinated support and services
          - Review (EHAT-R Form)
  - SAFEGUARDING CONCERN – Contact the MASH
    - 6-12 weeks

Closure (EHAT-C Form)
Before you start the assessment

Think about thresholds. Review Sutton's LSCB Threshold document and keep a copy to hand.

Find out if an EHAT already exists for the child or family by contacting EHAT@sutton.gov.uk or calling 0208 770 4128

Talk to the child, young person and family so that they understand the purpose and process of the assessment
Get signed consent to proceed (see page 3)
If you haven't got consent STOP

Plan the practicals:
- Where will the assessment take place?
- What time will it take place?
- Who in the family will be invited? How will you ensure everyone is involved?
- Are there any communication or additional needs you need to consider?
- What help and support might you need to complete the assessment?
- Who else outside the family might you need to talk to?

Feel prepared:
- Ensure you have age appropriate materials or tools to support you
- Remember not to use jargon or agency specific acronyms
- Talk to the Early Help Co-ordinator for future guidance where necessary
- Are the family clear about why you are completing the assessment with them
Completing the Early Help Assessment

About the person completing the form:

Please provide all details of the person completing the form with the family. By filing in these details does not mean that you will be assigned as lead professional as this can be decided once a Team Around the Family meeting has been convened. These details allow the Early Help Co-ordinator to contact yourself if necessary.

Before undertaking an Early Help Assessment always contact EHAT@EHAT already exists. If you have urgent safeguarding concerns, first di Hub (MASH) Team on 0208 770 6001.

For support with completing this assessment please refer to about how to complete each section. The Guidance Notes c:

Why this form is being completed:

Please choose a primary reason for undertaking the assessment using the drop-down list. If you are completing a paper copy of the EHAT please refer to Appendix A for a list of items within the drop-down and write your answer in. If you select “other” please ensure you list the reason.
Section A - Focus of Early Help Assessment:
This section will enable you to collect basic information about the child you are completing the assessment for. Please try and record information in all of the boxes.

**Address:** This should be the child’s main home however it may include more than one address if the child regularly stays elsewhere or is temporarily staying at an address.

**Religion:** Please discuss with the child/parents how they would describe their religious beliefs.

**Ethnicity:** Please discuss with the child/parents how they would describe their ethnicity and choose from the relevant drop down box. If you are completing a paper copy of the EHAT please refer to Appendix A for a list of items within the drop-down and write your answer in.

Section B: Family Household Members:
This section will enable you to collect basic information about other household members who will form part of the assessment. It is important to also fill out other significant people who are not living in the household. If you do not have all the information at the start of the assessment, it can be completed at a later date.

**Relationship to the child:** i.e. Mother, brother, Maternal Grandmother etc.

**Parental responsibility:** An explanation of parental responsibility can be found: [https://www.gov.uk/parental-rights-responsibilities/what-is-parental-responsibility](https://www.gov.uk/parental-rights-responsibilities/what-is-parental-responsibility)
Section C: Known Issues within the family:

In this section you choose the current known issues relating to the parent and the child who you are completing the assessment for. You may indicate multiple issues. Click over the square to check the box.

<table>
<thead>
<tr>
<th>Issues</th>
<th>Parent</th>
<th>Child</th>
<th>Issues</th>
<th>Parent</th>
<th>Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anti-social Behaviour</td>
<td>□</td>
<td>□</td>
<td>Physical Health</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Behaviour</td>
<td>□</td>
<td>□</td>
<td>Poor School Attendance</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Benefits / low income</td>
<td>□</td>
<td>□</td>
<td>Refugee / Asylum Seeker/ No Recourse to Public Funds</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Crime</td>
<td>□</td>
<td>□</td>
<td>School Exclusion</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Domestic Violence and Abuse</td>
<td>□</td>
<td>□</td>
<td>Self-Harm / Suicide</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Emerging or Undiagnosed Developmental Difficulties or Delay</td>
<td>□</td>
<td>□</td>
<td>Social Isolation</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Inadequate housing</td>
<td>□</td>
<td>□</td>
<td>Special Educational Needs and Disabilities (please complete section D)</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Mental Health</td>
<td>□</td>
<td>□</td>
<td>Substance Misuse</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Not in Education, Employment or Training</td>
<td>□</td>
<td>□</td>
<td>Unresolved Loss / Grief</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Parenting Issues</td>
<td>□</td>
<td>□</td>
<td>Young carer</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other reason (please supply in other relevant information)</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

Please provide any other information relevant to the issues within the family:

Give details of communication needs:

Give details of legal status/immigration status regarding any of the people to be included in this assessment

Information relevant to the issues within the family:
Use this space to comment on the issues you have identified that are affecting about the child or family situation in section C.

Examples: If you have checked Poor School attendance as an issue your comment could be ‘current school attendance 64%’. If you have checked Benefits/low income as an issues your comment could be ‘the family are on a low income and are unsure if they are eligible to claim benefits’.

Communication needs: i.e. English as additional language/disability, please list any additional support requirements such as interpreter.

Legal status/immigration status: Further information can be found at [https://www.gov.uk/guidance/immigration-rules](https://www.gov.uk/guidance/immigration-rules)
Section D: VPP - Vulnerable Pupil Panel.

This section is only to be completed by a school if you wish the child/young person to be discussed at the vulnerable pupil panel (VPP). If you do not wish the child/young person to be discussed at vulnerable pupil panel you can skip to section E.

Section D – VPP - Only complete this section if you wish the child/young person to be discussed at the vulnerable pupil panel (VPP). If you do not wish the child/young person to be discussed at vulnerable pupil panel please move to section E.

<table>
<thead>
<tr>
<th>School:</th>
<th>Date of Admission:</th>
<th>Attendance last year:</th>
<th>Year Group:</th>
<th>Attendance this term:</th>
</tr>
</thead>
</table>

Request for: (please select all that are applicable)

- Additional Support / Advice: ☐
- CARE ☐
- Respite ☐
- Outreach ☐
- Other ☐

How do you feel the request would have an impact?

What is the desired outcome?

Statutory guidance from the Department for Education states that before a head teacher makes the decision to exclude a child one of the factors they should take into account is early intervention to address underlying causes of disruptive behaviour. In Sutton all schools are now required to complete a Multi-Agency Early Help Assessment (EHAT) for a pupil who demonstrates persistent disruptive behaviour to establish whether appropriate provision is in place to support any SEN or disability that a pupil may have. The EHAT is a holistic assessment and takes into account the wider issues affecting the child or family, allowing appropriate support and interventions to be provided prior to referrals into statutory services or consideration of exclusion. This process needs to have been completed fully in order for a case to be considered at Vulnerable Pupil Panel.

All sections of the EHAT form must be completed in order for the case to be considered at VPP. You must ensure you gain consent from the family and express their views within the assessment – For further information on Child, Young Person and Family View please refer to Section H.

Section E: Special Education Needs and Disabilities of the Child:

If you are unsure about these details please contact Access Point on 0208 770 4690 who will be able to locate any unknown details. Further information can be found at https://www.sutton.gov.uk/info/200247/supporting_disabled_children_and_their_families/1396/disabled_childrens_services/2

Section E – Special Educational Needs and Disabilities of the Child:

<table>
<thead>
<tr>
<th>Does the child have an Education, Health and Care Plan or Statement?</th>
<th>☐ Yes</th>
<th>☐ No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If Yes, what is the primary need?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there an Education, Health and Care Plan in process?</td>
<td>☐ Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td>Is the child/young person registered with iCount?</td>
<td>☐ Yes</td>
<td>☐ No</td>
</tr>
</tbody>
</table>
### Section F: Background Information:

**About the Child** - This is time for you to have a conversation with the family about the child and also use tools with the child to gain their views. You should ensure you discuss the child or young person’s current health this includes growth, development, physical and mental wellbeing.

#### Physical Development
- Any concerns regarding their physical development (mobility, physically or sexual maturity/delayed development)
- Developmental milestones
- Physical Presentation
- Fine or Gross motor skills
- Co-ordination
- Feeding, toileting or sleeping
- Vision/Hearing (Has this been tested or are there any concerns)

#### Personal, Social and Emotional Development
- Emotional and social responses to others (children, adults, friends, family)
- Ability to express, manage or show emotions/communication
- Relationships with peers, family members, teachers etc.
- Feelings and relationships
- Self-harm
- Phobias or psychological difficulties
- Empathy or disconnection
- Behaviour and emotional wellbeing

#### Speech and Language Development
- Ability to communicate effectively and appropriately
- Ability to make needs known
- Does the child or young person require support with their communication
- If communication difficulties are identified, what is the impact

#### Identity and Social Presentation
- Self care skills
- Self-esteem and confidence
- Self-regulation, ability to control impulses and behaviours
- Any negatives factors influencing social relationships
- What is the child's identity, culture of belief system
- How is the child's identity being influenced
- Sense of identity

#### General Health: (Parental/young person’s perception of health)
- Dental hygiene (any indications of caries/brushing)
- Skin (Observation of cleanliness, any concerns regarding skin conditions)
- Personal hygiene routine
- Hands/Feet (any concerns, general cleanliness)
- Health conditions which affect daily life (nutrition, allergies, dental, vision, hearing, speech, language and communication, sleep, exercise, enuresis, bowels)
- Medication
- Sexual Health (Young people)
- Access to appropriate health services or non-attendance
- Emerging health needs that require attention or assessment
- Are any of these issues having a negative affect on the child/young person and what is the effect
About the Family: Any events or factors which have impacted on the child, parent or family life
This involves both current and historic events which impacts on the child or young person

- Parental history – life experience of parent as a child as well as any other factors such as substance misuse, mental health, domestic abuse, physical illness, bereavement
- Family relationships – what is the family composition, who is the child close to that can provide support, are there family members who are a negative influence or risk?
- Any history with Early Help/Statutory Services

What else is affecting the family: Information relating to the living conditions, housing, employment status, finance, legal status and use of community resources and networks

- Living conditions – Home environment, composition of the household, neighbourhood
- Housing – Current housing, does this meet the family’s needs?
- Family routine/lifestyle
- Employment - impact of pattern of work
- Finance – impact of benefits, income meet child’s needs, ways income is used, budgeting, financial difficulties, debt/credit repayments
- Legal status
- Use of community resources
- Networks – Family and friend networks and support available

Parenting: Any information in relation to basic care, ensuring safety, emotional warmth, stimulation, guidance and boundaries, stability. Are the child’s needs met and are they protected from harm or danger.

- Basic care – food, warmth, shelter, clothing, personal hygiene
- Ensuring safety – is the child kept safe given age appropriate autonomy, home environment safety, in the community safety
- Emotional warmth – feelings, appropriate physical contact, secure stable and affectionate relationship
- Stimulation – accessibility to age appropriate toys, activities in relation to stages of development, school attendance, homework
- Is there routine and predictable life patterns
- Guidance and boundaries – consistent and appropriate boundaries for age and stage of development
- Stability – does the family have a pattern of moving around
Section G: Professional relationships/Agencies involved:
The assessment is a dialogue with the family and also other professionals involved with the family to bring together all of the information and ascertain how best to meet those needs. Use this space to build a picture of the other people who have been working with the family, what they did and what difference the work has made.

Person worked with: This is the person who the agency primarily worked with

Work undertaken: Describe the way the agency worked with the family or what they did to support the family

Outcome: Outline the outcome of the work undertaken

Involvement: Please tick if the agency is currently involved, previously involved or identify if a referral has been sent to an agency for future support.

Section H: Child, Young Person and Family View:
In this section, you can ensure that your discussion takes into account how the child, young person and parent/carer feel about the current situation.

Child and Young Person
What is going well – Please refer to the documents for practical tools and conversation prompts to support your discussion

What is not going well – What would you change, what do you want to happen?

EHAT Discussions with Children Toolkit

Parent or Carer
What is going well – Help the parent consider what is going well, it is very easy to get caught in the negatives, using the information gathered during the assessment can support this.

What is not going well – Be minded that parents may not be open to this in view of concern regarding possible consequences, you may wish to note some of the issues that have been raised during the assessment or ask questions such as what ‘would you like to change?’
**Section I: Analysis of the current situation overall:**
This is the place for you to make an overall analysis of the family situation based on all the information you have gathered, and the views and feedback from the child, young person and family. Here you will identify in partnership with the family what needs to change to improve the situation.

**What is working well?**
Positive factors in the child/young persons life that are supporting their health and development and keeping them safe

**What is not working well?**
Any issues that have been identified that are or are likely to impact negatively on the child's health, development or safety

**What is unknown?**
Is there any information missing, or that it would be helpful to find out

**What needs to change?**
Highlight the key issues that need to be changed that will enable the child to reach their full potential and keep them safe

**Section J – Planning for Change:**

**Team around the Family (TAF) / Team around the Child (TAC)**

The Team around the Family meeting will include the services which are invited to work together to support the family. A TAF meeting should be set up 10 working days after the assessment has been completed. During this meeting a support plan will be created and a lead professional will be agreed amongst the professionals involved.

If you are unsure about which services you should invite to the TAF meeting, or have any further questions about the process, please contact the Early Help Co-ordinator on EHAT@sutton.gov.uk or 0208 770 4128

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Invite to first TAF, TAF Agenda, TAF Report, TAF Minutes and Action Plan, TAF Outcome Letter,
**Action Plan:**

As part of the TAF meeting you will prepare an action plan, to take steps to resolve issues and improve outcomes. The actions can be for anyone at the meeting including the child, young person, family and the professionals involved. The actions should be specific and achievable. The action plan should be reviewed at each meeting.

<table>
<thead>
<tr>
<th>Desired Outcome</th>
<th>Action</th>
<th>Who is going to do it?</th>
<th>By When?</th>
<th>How will we know things have improved?</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is it that we would want to see – be specific in order that the outcome can be measurable – try to avoid terminology such as 'improvement in'</td>
<td>List actions to be taken – including referrals, pieces of work, agreements with child and family members</td>
<td>This includes professionals, family members and the child/young person themselves</td>
<td>Try to add a start and finish date, try to avoid 'ongoing'</td>
<td>Outline what success would look like</td>
</tr>
<tr>
<td>Example: S needs to stop playing on his DS in bed as this means he is waking up late for school</td>
<td>Remove DS from bedroom at bedtime</td>
<td>S's parents</td>
<td>From the 30th August</td>
<td>S is on time for school everyday</td>
</tr>
<tr>
<td>S to be provided with an alarm clock to wake in the mornings</td>
<td>S's parents</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section K – Information sharing agreement:**

**Gaining consent:**

It is vital that the parents/young people provide consent for an Early Help assessment to take place. A young person may give consent if deemed competent. Please refer to the following guidance [https://www.nspcc.org.uk/preventing-abuse/child-protection-system/legal-definition-child-rights-law/gillick-competency-fraser-guidelines/](https://www.nspcc.org.uk/preventing-abuse/child-protection-system/legal-definition-child-rights-law/gillick-competency-fraser-guidelines/)

By providing consent they are allowing services that are involved to access the completed assessment and information gathered. If there is any service that they do not wish to share the assessment with, this must be clearly stated.

**Signatures and storage of EHAT**

A copy of the completed Early Help Assessment form needs to be emailed to the Early Help Coordinator using our secure email addresses [EHAT@sutton.gov.uk](mailto:EHAT@sutton.gov.uk) or [EHAT@sutton.gcsx.gov.uk](mailto:EHAT@sutton.gcsx.gov.uk). The original copy will be kept by you in the child’s file.

For electronic copies please either scan the back page with the parent’s signature or post a photo copy to the Early Help Assessment Coordinator to be held on file.

The parent/carer and child/young person must have a copy of the original Early Help Assessment.
Undertaking an Early Help Assessment review (EHAT-R)

Following the initial EHAT and subsequent TAF meetings, a review should be conducted within 6-12 weeks. The EHAT-R form is available for you to use when conducting a review of an EHAT. The review should consider any relevant changes of circumstances, family and professional engagement, improvements in the known issues or areas where the intended outcomes are still unmet. You should complete all the basic information on page one so that the review can be linked to the original EHAT.

NEW known Issues within the family:
In this section please choose from the dropdown list of any new issues within the family since the initial assessment. You may indicate multiple issues, please expand in boxes below to reference this to the parent of child.

NEW Professional relationships/Agencies involved:
Please detail here any new professionals who have become involved with the family since the initial EHAT was completed.

Since you last met what does the child/young person think has changed:
In this section, you can ensure that your discussion takes into account whether the child or young person feels that things have changed since the last assessment. Consider if the actions in place are supportive or if they should be reviewed.

Since you last met what does the parent/carer think has changed:
In this section, you can gather the views of the parent, and ascertain if things have changed since the last assessment. Consider if the actions in place are still appropriate or if they need to be reviewed.

Section H: Analysis of the current situation overall:
This is the place for you to make an overall analysis of the family situation based on all the information you have gathered, and the views and feedback from the child, young person and family. Here you will identify in partnership with the family what needs to change to improve the situation.

Planning for Change:
The Team around the Family meeting will include services which are invited to work together to support the family, this may be the same professionals from earlier TAF meetings and may also include new professionals. A TAF meeting should be set up 10 working days after the review assessment has been completed. During this meeting a new support plan will be created and a lead professional will be agreed.

Action Plan:
As part of the TAF meeting you will need to update your action plan. This needs to consider the steps to resolve any issues and to improve outcomes. The actions can be for anyone at the meeting including the child, young person, family and the professionals involved. These actions should be specific and achievable.

If you are unsure about which services you should invite to the TAF meeting, or have any further questions about the process, please contact the Early Help Co-ordinator on EHAT@sutton.gov.uk or 0208 770 4128
Undertaking an Early Help Assessment Closure & Outcomes Tool (EHAT-C)

Once the decision is made to close an EHAT or the family’s needs are now met, an Early Help Assessment Closure and Outcomes Tool (EHAT-C) should be completed. The purpose of the closure form is to formally close interventions and also provides evidence as to the outcomes of the work undertaken. The EHAT-C should be completed, even in situations where the family did not engage.

Reason for EHAT Closure:
Select the reason for the EHAT Closure. Where other is selected please list the reason.

Outcomes from the EHAT:
List all known issues from the drop down list and choose an outcome underneath for each individual issue. If there are more than 5 issues, choose the most relevant ones.

Professional relationships / Agencies Involved:
Some services may have long waiting lists and they may not be able to take on referrals immediately e.g. parenting courses, counselling. Where significant progress has been made and you are able to close the EHAT pending referrals. It is important that referrals are still captured and known agency involvement should be listed, should issues arise in the future and where appropriate to act as a point of reference for the family.
Professionals Comments on EHAT Outcomes (where appropriate)
Where the EHAT is ended with a positive change you can use this box to reflect and summaries on the work achieved. It may be useful to provide some positive feedback to the family/parents to recognise the significant changes they have made.

You can also use this space to provide feedback on areas that may not have been improved due to issues out of your control.

Example: Parents are renting a property through the council, because their children argue sharing a bedroom they wanted help to move to a larger property. This was explored, but due to her 2 children being of the same sex they are able to share a bedroom until they are 18 years of age and the family are not eligible for a larger property at this time.

Parents and /or Young Persons comment on Early Help Support (where appropriate)
The family or young person may wish to reflect on the EHAT process and add their view and opinions. This box is optional and they do not have to comment if they do not wish to do so.

Closing an EHAT
A copy of the completed EHAT-C needs to be emailed to the Early Help Co-ordinator using our secure email addresses EHAT@sutton.gov.uk or EHAT@sutton.gcsx.gov.uk. The original copy will be kept by you in the child’s file.
Other useful information

The Sutton LSCB website has a useful professional information section where you can download and print guidance and documents you can access these by following the link http://www.suttonlscb.org.uk/practitioners_files.php

Lead Professional

A lead professional can be any professional who is a part of the team around the family. This professional can be from any service/agency. It is important that the family are involved in the discussion of who is best placed to coordinate the support and services being offered to the family. Being Lead professional involves:

- Developing a positive and productive relationship with the family
- Acting as a single point of contact for the child and their family
- Organising regular TAF meetings
- Using the Early Help Assessment to set actions and monitor outcomes
- Co-ordinating the delivery of effective early intervention support
- Working in partnership with other professionals
- Reviewing and monitoring the support plan during the TAF meetings

It is important to note that the lead professional is responsible for the action linked with their agency; they are not responsible for carrying out actions for another agencies.

Regular Meetings

As the lead professional you will need to arrange regular review meetings approximately every 6-12 weeks. During these meetings you will need to gain updates from all professionals involved, the family and the child.

As a group you will need to consider if changes need to be made to the action plan or if additional services need to be invited. If the outcomes have been met then can the assessment can close.

Where there is evidence that the support being provided is not achieving the desired outcomes within a reasonable timescale, you will need to consider one of the following:

- Amend the plan and set a review date
- Engage additional services
- Step up
- Contact the Early Help Co-ordinator

If you are the not the lead professional and are concerned about how the Early Help Plan is being managed, that outcomes are not being met or the risk of the child/family has increased, share your concerns with the lead professional to convene an immediate TAF or escalate this to MASH.

Stepping up to MASH

Sometimes the process of completing and EHAT or TAF highlights new concerns or risks that require statutory intervention. If at any point you are concerned about the safety or welfare of the child or young person seek immediate advice by contacting the MASH on 0208 770 6001.
Appendices

a) Drop-down lists

Page 1: Primary Reason for Assessment:

- Anti-social Behaviour
- Behaviour
- Benefits/ low income
- Crime
- Domestic Violence and Abuse
- Emerging or Undiagnosed Developmental Difficulties or Delay
- Inadequate Housing
- Mental Health
- Not in Education, Employment or Training
- Parenting Issues
- Physical Health
- Poor School Attendance
- Refugee/Asylum Seeker/No Recourse to Public Funds
- School Exclusion
- Self Harm/Suicide
- Social Isolation
- Special Education Needs or Disabilities
- Substance Misuse
- Unresolved Loss/Grief
- Young Carer
- Other Reason

Page 1 and 2: Ethnicity:

- Asian or Asian British – Bangladeshi
- Asian or Asian British - Indian
- Asian or Asian British - Pakistani
- Asian or Asian British – Other
- Black or Black British - African
- Black or Black British – Caribbean
- Black or Black British – Other
- Chinese
- Irish Traveller
- Mixed – White and Asian
- Mixed – White and Black African
- Mixed – White and Black Caribbean
- White – British
- White – Irish
- White – Other
- Other
b) LSCB Threshold Documents

The Levels of Need:

The Continuum identifies four levels

Level 1
No identified additional needs. Response services are universal services.

Level 2 Low risk to vulnerable
Child's needs are not clear, not known or not being met. This is often the threshold for beginning an Early Help Assessment. Response services are universal support services and/or targeted services.

Level 3 Complex
Complex needs likely to require longer term intervention from statutory and/or specialist services. High level additional unmet needs—this will usually require a targeted integrated response, which will usually include a specialist or statutory service. This is also the threshold for a child in need which will require Children's Social Care intervention.

Level 4 Acute
Acute needs, requiring statutory intensive support. This in particular includes the threshold for child protection which will require Children's Social Care intervention.

Detailed guidance for each of the four levels along with descriptors to help professionals understand what sort of issues and challenges are likely to be found at each level, can be found in the Sutton LSCB threshold document and should be used in conjunction with the London Child Protection Procedures and their associated threshold guidance: LCPP Thresholds.
c) Assessment Triangle for older Children
**Multi Agency TAF Reporting Template**

**Date of TAF Meeting:**

<table>
<thead>
<tr>
<th>Summary of Work undertaken/current situation:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>What has been achieved:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Next steps/ongoing goals:</th>
</tr>
</thead>
</table>

**Date report completed:**

<table>
<thead>
<tr>
<th>Name of Worker:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Agency:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Role:</th>
</tr>
</thead>
</table>
Dear,

**Invitation for agencies to attend a Team around the family meeting (TAF)**

I would like to invite you for a TAF meeting *(Date & Time)* held for *(name)*.

The purpose of this meeting is:

- To share common assessment information so it can be analysed and understood
- Identify how support can be offered to the child and family to meet needs assessed through the use of a EHAT (Early Help assessment tool).
- Jointly agree possible solutions and appropriate actions, including actions for the family and child to undertake where appropriate.
- Record these actions and timescales on a action plan
- Provide copies of the plan to all TAF members (including the family of the child/young person as appropriate)
- Arrange as necessary, additional requests for involvement/referrals, supported by EHAT, as a pathway to other targeted and specialist services
- Decide if a Lead Professional is needed to co-ordinate the actions of agencies and to liaise with the family. If a Lead Professional is needed consideration must be given to the views of the child/young person and or family as to who this is.
- Consent must be given by the family for the TAF

It is imperative that best efforts are made to attend this meeting, please could you confirm your attendance via telephone or email. If you are unable to attend please inform me if someone else is able to attend in your absence, if this is not possible please send through a report prior to the meeting.

If you have any questions about the EHAT or TAF process then please contact Charlotte Perry on 0208 770 4128 (Early Help Co-ordinator).

I look forward to seeing you at the meeting.

*(Name)*

Lead Professional
Dear,

**Action Plan from the Team around the Family Meeting**

Please find an action plan following the Team around a Family meeting, held for (name).

This action plan has been distributed to all professionals involved, and a copy of the action plan has also been sent to the family/young person. It will be clear on the plan the actions for each professional.

Please contact me if you need to update or want to discuss any of the action points.

The next Team around the Family Review will be on (Date & Time).

If you have any questions about the EHAT or TAF process then please contact Charlotte Perry on 0208 770 4128 (Early Help Co-ordinator).

I look forward to seeing you at the meeting.

Yours sincerely

(Name)

Lead Professional
g) TAF Meeting Agenda

**Team around the Family Template Agenda**

**Date:**

**Time:**

**Venue:**

1. Welcome and Sign In
2. Apologies given
3. Family provide a update on current situation
4. Updates from other professionals
5. Update of action plan points
6. Review, Remove or Add points to action plan
7. Set new date for review or close TAF
8. Closure of meeting
h) TAF Minutes and Action Plan

<table>
<thead>
<tr>
<th>TAF Minutes and Action Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Childs name:</strong></td>
</tr>
<tr>
<td>Attendees</td>
</tr>
<tr>
<td></td>
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<td></td>
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<tr>
<td>Lead Professional:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>Desired Outcome (measureable and agreed with child, young person, family)</td>
</tr>
<tr>
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</tbody>
</table>
Child or young person’s comment on the review and actions identified:

Parent or carer’s comment on the review and actions identified:

Can the EHAT case be closed? Yes ☐ No ☐

*Where ‘yes’ answered above please provide an outcome below and complete an EHAT closure and outcomes form (EHAT-C).*

**Outcomes**

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>The family’s situation has improved and the desired outcomes in the action plan have been achieved</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>Consent has been withdrawn by young person or parent</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>The young person or parent failed to engage with services once the EHAT was completed</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>Agency are no longer the lead professional or no longer working with the family due to them leaving the service.</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>The family have moved out of the London Borough of Sutton</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>The child / young person have been “stepped up” to Children’s Services.</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>No appropriate services available to meet the child / young person or family’s needs</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>Other reason (please list):</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>
Tools for capturing the Voice of the Child

Communication worksheets

Understanding children’s wishes and feelings is an integral part of completing the Early Help Assessment. Without hearing the children/young person’s voice the support is meaningless and therefore their situation cannot be improved.

The tools below can be used to gain an understanding of a child, listening to what they have to say and be used as a part of the action plan to highlight where and how support needs to be implemented. You do not need to use all of these tools, you can pick and choose what to use to suit the child and or young person’s needs.

The Three Houses:

Children are able to use these houses by drawing or writing or a combination of both to illustrate the things that you are worried about, the things that are going well in your life, and the things that you would like to happen in the future.

You can develop your own way of using the three houses to suit your style and also to suit the child/young person.

Wishes:

The child/young person is able to draw or write what they would like to change if they had a magic wand.

Feelings:

Cartoon faces of different feelings can be used for children to illustrate how they feel in certain situations/on that day. Emotion cards can be found online, please print emotions which you think are relevant.

Good day/bad day:

This tool can be used for the child/young person to show what happens on a good day, bad day and how they can make their bad day better.
Three Houses

House of Worries

House of Dreams

House of Good Things
My Wish
### Feelings

<table>
<thead>
<tr>
<th>Happy</th>
<th>Sad</th>
<th>Angry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scared</td>
<td>Shy</td>
<td>Confident</td>
</tr>
<tr>
<td>Surprised</td>
<td>Ashamed</td>
<td>Disgusted</td>
</tr>
<tr>
<td>Exhausted</td>
<td>Confused</td>
<td>Bored</td>
</tr>
</tbody>
</table>

---

*Note: Diagram depicts various facial expressions corresponding to different feelings.*
Good day/Bad day

Good day...

Bad day...

What can make a bad day into a good day...
j) Cue cards for conversation

Home
Finance (e.g. income, benefits, debt)
Housing (e.g. type, stability, relationship with neighbours, conditions, fit for purpose?)
Play and leisure opportunities
Animals

Health
Physical (e.g. current health/medical issues, regular health checks, immunisations, allergies, dentists, opticians, nits)
Diet and nutrition (e.g. balanced diet, food intolerance)
Sexual health
Substance/alcohol misuse
Smoking
Exercise and physical activity
Developmental milestones
Speech and Language development

Emotional health/feelings
Anxiety/stress
Self esteem
Self care (e.g. appearance, self harming, sleeping patterns, relationship with food, risky behaviours)
Mental health (e.g. depression, eating disorders)
Coping strategies/resilience
Bereavement and loss (including relationship breakdown/change)

Behaviour/development
Citizenship (e.g. role in community as a community champion, active group member, religion)
Anti-social behaviour
Response to authority
Coping strategies
Online activity
Sanctions (e.g exclusion permanent or temporary)
Developmental milestones

Learning/work
Aspirations
Work – current and previous
Work patterns (e.g. shift work)
Volunteering
Opportunities and barriers to working/studying
Training
Learning style and its impact
Developmental milestones
Attainment at school
Targets at school/college
Gifted and talented
Identity/me
Cultural
Sexuality
Language spoken/understood
Transitions (e.g. from child to young person, school move)
Hobbies and interests
Role/position in family (e.g. eldest child, stepparent, carer)
Level of independence
Impact of significant life events (e.g. domestic violence, bereavement and loss, illness)

Family
Who is in my family?
Relationships within family
Family identity
Caring responsibilities
Parenting style/approach/boundary setting/routines
Significant events/changes for family (e.g. experience of domestic violence, prison)
Culture

Relationships/community
Key support mechanisms/friendships
Problematic relationships
Sexual/intimate relationships
Community connections
Harassment/bullying/victimisation (e.g. racial, sexuality, religious)
Communications/interpersonal skills
### K) Additional Family Members Sheet for EHAT

#### Section B – Additional Family Household Members:

<table>
<thead>
<tr>
<th>Name</th>
<th>Fifth Member</th>
<th>Sixth Member</th>
<th>Seventh Member</th>
<th>Eight Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship to Child</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Parental Responsibility</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>Date of Birth</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Gender</td>
<td>☐ Female ☐ Male</td>
<td>☐ Female ☐ Male</td>
<td>☐ Female ☐ Male</td>
<td>☐ Female ☐ Male</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>Choose an item.</td>
<td>Choose an item.</td>
<td>Choose an item.</td>
<td>Choose an item.</td>
</tr>
<tr>
<td>Disability</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Religion</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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</tr>
</tbody>
</table>