

EHA Guidance

This guidance has been completed to provide support to external professionals when completing Early Help Assessments.

Family Situation (page 3)

Include family make up - Explain If any key family members have not been involved, explain why (e.g. mothers/fathers).

Include any extended family that may help care for the CYP such as grandparents.

Please include information if the CYP are under an SGO or similar.

Example:

Mum, Johnny and Rosie live next door to MGM. MGM regularly looks after Johnny and Rosie whilst mum is at work, this has happened since both children were babies and they are both comfortable in her care. She drops off and collects from school and Johnny, Rosie and mum regularly spend time with MGM socially.

Services supporting me and my family (page 3)

Identify reasons why professionals involved have not contributed to this assessment:

Example:

I have sent emails/made telephone calls to [Professional] on these dates but have not received a response as yet.

Assessment information (page 5)

Ensure that ticked reasons for assessment, are discussed within the assessment.

Things to think about:

1. What are the worries or needs?

Think about what has happened or is happening that has led to you starting an EHA? Review the RH@RT (Right Help @ Right Time) document to support identifying specific needs.

What are we worried about? Specifically, break it down.

What needs do individuals in the family have? Consider all family members as there may be 'complicating factors' that are making the presenting issue more difficult to overcome, or that may need to be addressed to enable sustained change.

Think about things such as school, attendance, behaviour, physical and mental health, finances, housing, family dynamics, domestic abuse, substance misuse.

Childs Voice:

Please use a separate heading for each child.

What is the child's voice? Consider their behaviour as well as verbal comments made by the child.

If the child is non-verbal or hasn't engaged with you during assessment period – identify their needs in relation to referral reasons or needs/worries identified by professionals and family who know

them best.

Consider using tools to gather the child's voice – examples of these can be found on the local offer website.

If the Child's voice section is left empty please provide an explanation as to why – for example: "Paul did not want to engage with the EHA process and was very angry and defensive when anyone tried to speak to him about it. His body language and refusal to speak shows us how he is feeling towards the process."

Example:

Child's or young person's view:

Johnny:

"*I don't like waking up in the morning*" Johnny reports he doesn't like Mike from his class. Johnny has said several times that he is the "*man of the house*" and feels like he has to look after his mum and sister.

Rosie:

Rosie has been wetting the bed at night. When a 3 houses was completed with Rosie she said she was worried about her mum because she said she "*seems sad*".

Rosie has said she knows the family doesn't have much money so she doesn't like to ask her mum to go on trips with school.

Family's view:

Mum says that "Johnny shouts and swears at up each morning when I go in and open his curtains". Mum explains that Johnny is always late for school and "kicks off" each morning. Some days it is too much for her to manage so she just leaves him in bed and goes to work. Johnny sees himself as the man of the house and the protector of mum and Rosie, mum worries about this as she feels it puts lots of pressure on him.

Mum said she would like Rosie to not wet the bed anymore, the additional washing mum is having to do is having an impact on the family's finances. Mum has had to buy extra bedding as well as due to the cold weather she can't always get it dry on the same day.

Mum has concerns about her finances and has had to use foodbanks to support the family to eat, mum is in receipt of benefits but she has not had a benefit check for some time. Mum also works part time in a local shop.

The children do not see their father and have not done since Rosie was 3 months old, mum has no contact with him and does not know where he lives.

Mum has shared that there were difficulties in the relationship and dad would often drink which could lead to him being aggressive towards her. Mum said that the children didn't witness this and it would happen when they were in bed/at school.

Professional's view:

Johnny:

FSW: I am worried about Johnny's bed-time routine. He doesn't seem to be getting much sleep at night which is affecting him in the morning. He often stays up late playing video games, and when mum tries to tell him to go to sleep his behaviour escalates. Mum has told me she is scared of him

when he gets angry. I have noted Johnny doesn't seem to interact with anyone when walking through the school together.

Johnny's levels of aggression escalate when he is challenged or asked to do something.

Rosie:

FSW has noted Rosie wets the bed at night. Rosie appears to have knowledge of the difficulties mum is experiencing which could be causing her anxiety and therefore the bed wetting.

Educational Setting's view:

Johnny:

Johnny's attendance is low - 52% because he is often late in the morning, sometimes he doesn't attend at all.

We can see Johnny struggles during tutor group. Johnny and one other boy in his tutor group are often sent to the head-master for being persistently disruptive.

Rosie:

School reports Rosie has no problems with toileting at school. Rosie's attendance at school is good – 95.6% however she does have quite a few lates which could affect her attendance percentage as the academic year goes on.

2. Who is affected and how?

Consider child/young person, parents/carers, siblings, extended family

List the individuals who are affected and how they are affected, what is happening to them all?

What does the impact look like for each member of the family? Is it different for each person?

Example:

Child's or young person's view:

Johnny said *"I don't see why everyone is making a big deal out of everything, I'm fine"*

Rosie (Johnny's sister) sees his behaviour and the attention that he gets and has started to copy this; she has told teachers that she feels left out and she thinks that her mum and gran do not like her as they spend so much time with Johnny.

Family's view:

MGM feels that she misses out on time with her grandchildren as mum doesn't feel confident that she is able to manage Johnny's behaviours without being there to support her.

MGM would like to be able to give mum a break and look after both children so that she can do something for herself.

Johnny's and Mum's relationship is becoming strained due to the behaviour which is causing stressful situations at home which has resulted in Mum being signed off sick. Mum is in receipt of Universal Credit as she works less than 16 hours a week.

Mum has said that she has some concerns about the people Johnny is spending time with in the community as she has heard rumours they are involved in criminal behaviour.

Mum is worried that she doesn't get to spend much time with Rosie as she is always trying to manage Johnny and his behaviour, mum is worried this is affecting their relationship.

Professional's view:

TAMHS: Johnny is very angry, this is clear from his body language during the sessions. When I mention his dad Johnny shuts down, crosses his arms and refuses to talk about him.

Educational Setting's view:

Johnny struggles to settle back in lessons after a TAMHS session and he will often spend the rest of the day in the Hub as he becomes aggressive, disruptive and hard to manage.

This behaviour can affect the whole class and their learning.

Rosie is often very tearful when mum tells us Johnny's behaviour has been particularly difficult at home.

3. Are there things happening at school, home or in the community, making this even harder to manage?

Are there any issues at school, home or the community? Specifically what are they?

Are the worries different in different places?

Are there risks outside of the home?

Think about community conflict, bullying, housing conditions, family dynamics.

Are there any issues in the community such as anti social behaviour.

Are there other factors contributing or a causal factor E.g., financial difficulties causing parental conflict.

Examples:

Child's or young person's view:

Johnny says he hates the neighbours, this is because he knows they complain about the noise he makes.

Johnny said that they go to the foodbank to get food regularly and he knows that mum skips meals to make sure him and Rosie are eating.

Rosie says *"I wish Johnny would stop shouting, I don't want to move house, I like it where I live, my bedroom is pink"*

Family's view:

Mum is having difficulties with the neighbours, they complain about the noise Johnny makes when he is having a meltdown and they have complained to the housing association and children's services. Mum is worried they will lose their home if Johnny's behaviour doesn't improve and mum is unable to afford to rent privately.

Mum has said to school that there are some repairs that need to be done in the home, she has tried to contact her housing officer but no one has got back to her.

Mum and MGM have some concerns about the people Johnny is spending time with outside of school, they are old boys and they know they have been causing trouble in the local area. They are both concerned Johnny will start to join in with this behaviour.

Mum struggles to maintain romantic relationships as they are often unable to manage with Johnny and Rosie's needs.

Mum said she felt ashamed of herself for getting into this situation. She said she didn't know how to ask for help but that she feels better now that she has spoken to school about their difficulties. Mum said that running the washing machine is expensive too so the children tend to wear the same uniform for a couple of days before changing.

Professional's view:

FSW: Johnny has told the FSW said that he doesn't like to come to school sometimes because he knows he smells, some people comment on that at school which makes him angry and then he lashes out.

We discussed personal hygiene – regular washes etc. Johnny disclosed that mum cant afford to put the hot water on as its too expensive so they are unable to have more than one shower/bath a week.

Educational Setting's view:

Johnny doesn't seem to have any understanding about the impact his behaviour is having on his family and the wider community such as neighbours.

4. Are there any other factors to consider?

Consider health – does any member of the family suffer from any physical or mental health conditions?

Is there any relevant historic information, for example children's services involvement, how was mum's pregnancies, children's births, domestic abuse, parent's childhood experiences – how were they parented?

Do the family follow any religious or cultural traditions/beliefs.

Example

Child's or young person's view:

Rosie and Johnny had nothing to add to this section.

Family's view:

Both pregnancies were very straight forward, there were no complications and mum had natural births with no interventions.

Mum is very cautious about working with children's services, as a child she had involvement from various social workers due to her dad's (MGF) alcohol use as a child but to her it seemed to make things worse, she spent periods of time in foster care as it was thought mum (MGM) was unable to protect her and her sister.

MGM has said that she feels a lot of anger towards Children's Services because of the way they dealt with the situation when her children were younger, she thinks this could have been why mum was reluctant to seek support when she needed it.

There was also social care involvement when Rosie was born due to Domestic Abuse from dad, mum felt that she was being forced into ending the relationship with dad and that once she had done that they dropped the family and provided no support.

Mum has told professionals that she suffers with low mood but is working with Lift and her GP. She has been placed on a low dose of anti depressants to see if that helps.

The family do not follow any specific religious practices but would identify as Christian.

Professional's view:

FSW: We have referred Rosie to the school nurse so mum can have some advice on bedwetting and potentially get some support with plastic bed sheets etc.

Educational Setting's view:

Mum has been very open and honest with us about her past experiences with childrens services, this has given us a better understanding of why mum felt she couldn't come to us when the family first started experiencing difficulties.

5. What are the strengths and positives and how do these help?

Consider wider family – is anyone able to support the family?

Do parents/children have friends who they can spend time with – socially and for support.

How are things going at school? Do they go to any after school clubs or do they have hobbies independent of school?

Are there any personal skills and qualities that the young person has?

What do we like about the child? Sometimes we focus on what is not going well and what we don't like it is important to identify what we do like. Everyone should do this, including the child/young person themselves.

Child's or young person's view:

Rosie says "I like spending time with Granny and I really like it when she picks me up from school"

Johnny has a few friends that he spends time with outside of school, he says he doesn't know why everyone has a problem with them, they are good mates and look after him.

Family's view:

Mum said she receives a lot of support from her mum and her sister. Her mum is able to help with practical support more than her sister, but she knows her sister is on the end of the phone if she needs her.

Gran says she is always happy to help mum out and will look after Rosie and Johnny so she can have a break.

Mum likes the fact that Rosie is very thoughtful and gentle, she will always give mum a hug and kiss whenever she leaves her and says I love you.

Mum likes that Johnny is always willing to help when she needs it, such as carrying heavy shopping or helping put up furniture such as a new wardrobe they recently got.

Professional's view:

PSCO – Johnny has not come to Police notice as yet, however we do know the names of some of the people he is spending time with and would have concerns if he began to spend more time with them or if his name started being mentioned to the police.

TAMHS: Johnny has attended all of his TAMHS sessions even if he doesn't want to talk. He often draws pictures during the sessions with me and says I can keep them to put up on the wall.

Educational Setting's view:

Rosie attends dance and drama clubs after school, which she really enjoys. When she goes into year 4 she would like to start netball. We are able to help mum with the fees for these clubs.

Johnny used to play for the school football team however he left abruptly about 3 months ago, he was very good at football and an asset to the team. If he would like to rejoin there is space for him.

6. What support is already in place and how has this helped?

All support in place from all professionals included in the assessment and any waiting lists/referrals completed.

What support has been put in place? Financial, educational, mental health – ELSA, TAMHS etc

Has this support worked, or has there been no benefit? If it hasn't worked, why?

Are you able to identify any other support that the family might benefit from? Support from external agencies?

Example:

Child's or young person's view:

Johnny said he likes the TAMHS worker Lizzy and feels that she listens to him.

Rosie enjoys going to the nurture room at school and doing activities with the staff in there.

Family's view:

Mum said she has found the support from secondary school very helpful, they have been able to get her support with her finances and the food bank.

Mum is glad she has someone to talk to now and finds that staff at the primary school always check in to find out how she is doing.

Professional's view:

TAMHS: Johnny has engaged with TAMHS and this support will remain in place.

FSW: Referrals have been completed for mum to the DWP worker to ensure she is in receipt of the correct benefits.

Johnny is able to stay after school or come in before school to use the showers in the changing rooms, school are able to provide a towel and some toiletries.

Work is being done with mum around managing Johnny's behaviour and implementing

boundaries and routines.

I have supported mum to make contact with her housing officer and an assessor is due to come out next week to see which repairs need to be completed. If mum needs to pay for these repairs the housing association have agreed she can set up a payment plan.

Educational Setting's view:

Mum has engaged well with both schools and has become more open with the information she shares.

Johnny has access to the Hub and a trusted adult – Mr Smith who he can find in the Hub. He has a red card so if he feels that things are getting too much he can show this and leave the classroom. Johnny has used this a few times and it does seem to have helped deescalate his behaviour.

Rosie's school has noticed that she is becoming more emotionally resilient and that the nurture sessions are really helping her. There is a noticeable difference after the holidays when she has not had any support for a couple of weeks.

7. Are there any other good things happening we may have missed?

Think about things that have happened for the family that may not fit into any other area? Are they going on holiday? Do they have a pet?

Are the parents working? Do they enjoy their job/financially secure?

You will have ticked boxes to capture the worries at the top, can you now consider all the boxes not ticked? In theory these may be strengths/positives. Can we acknowledge areas that are not a concern, or even are a strength as this will eliminate 'unknowns'?

Example:

Child's or young person's view:

Family's view:

The family are considering saving up for a family holiday with MGM next summer. It is something they can look forward to and plan. MGM has said she will help with the cost of this. It has been a number of years since the family went on holiday.

Professional's view:

Educational Setting's view:

8. Analysis of the current situation: what could happen if things do not change?

Child's or young person's view:

Johnny said that he knows his anger is an issue and that if it doesn't change then they could end up losing their home. Johnny doesn't want to change his friends as he doesn't see why everyone doesn't like them. Johnny would like to be less angry and is happy to continue to work with TAMHS on this.

Rosie is worried that if things continue like this mum will get even more sad and that they might

have to move house. Rosie doesn't want to do this as she likes where she lives.

Family's view:

Mum is worried that if she doesn't get her finances under control she will need to move in with her mother and the children, which she feels isn't fair on her mum.

She is worried that Johnny's friends are a bad influence and this will lead to him leaving school, especially as his attendance isn't great at the moment. She knows that Johnny can get angry and this concerns her as she worries about the trouble he can get into when he is out in the community.

Mum would like to continue with the support she is receiving from school and other agencies and would also like to look into whether it would be possible for her to work full time – if this would benefit her financially.

Professional's view:

TAMHS – We are worried that if the issues in the family do not get resolved, this will have longer term implications on the children and their outcomes.

FSW – We are concerned that if the situation the family are currently in worsens the family will fall into crisis, which could lead to statutory intervention. Mum can currently keep the children safe with the support of her mother, however unless she starts to implement boundaries and routines there is the risk that Johnny will become more defiant. This will have an impact on Rosie as she will see the conflict in the home, she already reports that she finds this distressing.

The family need to continue to engage with the support available to them to make small steps towards a more positive environment for everyone.

Educational Setting's view:

We are concerned that if things don't improve for Johnny it will result in permanent exclusion, due to Johnny's vulnerabilities we would be concerned that permanent exclusion could end up pushing him into the path of people who may take advantage of him. At times we are unable to manage Johnny's aggression and this can impact up to 30 other children at a time, Johnny needs to learn to control his anger and manage it in a more positive way. We have provided resources for Johnny including a safe space where he can go if he needs to.